



Health Care District
OF PALM BEACH COUNTY
WE CARE FOR ALL

**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
MEETING AGENDA
October 22, 2025 at 12:30PM
4801 S. Congress Ave
Lake Worth Beach, FL 33461**

Remote Participation Link:

<https://zoom.us/j/5507895592?pwd=REZ4TWtYUXowQWNpWTBaVXRszlIdDQT09>

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

1. Call to Order – Joseph Gibbons, Chair

- A. Roll Call
- B. Affirmation of Mission: To provide compassionate, comprehensive health services to all Palm Beach County residents, through collaboration and partnership, in a culturally sensitive environment.

2. Agenda Approval

- A. Additions/Deletions/Substitutions
- B. MOTION TO APPROVE Agenda

3. Awards, Introductions and Presentations

4. Disclosure of Voting Conflict

5. Public Comment



Health Care District
OF PALM BEACH COUNTY
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6. Meeting Minutes

A. **MOTION TO APPROVE:**

Board Meeting Minutes of September 24, 2025 [Pages 1-5]

7. Consent Agenda

MOTION TO APPROVE: Consent Agenda Items

A. ADMINISTRATION

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

October 2025 Internet Posting of District Public Meeting

<https://www.hcdpbc.org/resources/public-meetings>

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

Attendance Tracking [Page 6]

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

HRSA Digest (Dr. Joshua Adametz) [Pages 7-12]

B. FINANCE

7B-1 **MOTION TO APPROVE:**

District Clinic Holdings, Inc. August 2025 Financial Report

(Jessica Cafarelli) [Pages 13-32]

8. Regular Agenda

A. ADMINISTRATION

8A-1 **RECEIVE AND FILE:**

Risk Management Dashboard Third Quarter 2025 (Alyssa Tarter)

[Pages 33-37]

B. EXECUTIVE

8B-1 **RECEIVE AND FILE:**

Executive Director Informational Update (Dr. Joshua Adametz)

[Pages 38-39]



Health Care District
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8. Regular Agenda (Continued)

C. CREDENTIALING

8C-1 MOTION TO APPROVE:

Licensed Independent Practitioner Credentialing and Privileging
(Dr. Ana Ferwerda) [Pages 40-43]

D. QUALITY

8D-1 MOTION TO APPROVE:

Quality Report (Dr. Ana Ferwerda) [Pages 44-70]

E. OPERATIONS

8E-1 MOTION TO APPROVE:

Operations Report (Angela Santos) [Pages 71-73]

8E-2 MOTION TO APPROVE:

Patient Relations Report (Alexa Goodwin) [Pages 74-76]

**9. Dr. Joshua Adamez, AVP & Executive Director of Community Health Center
Comments**

10. Board Member Comments

11. Establishment of Upcoming Meetings

November 19, 2025 at 12:30PM (Atlantis Community Health Center)

December 17, 2025 at 12:30PM (Atlantis Community Health Center)

12. Motion to Adjourn



Health Care District
OF PALM BEACH COUNTY
WE CARE FOR ALL

Community Health Centers Board of Directors
Meeting Minutes
September 24, 2025 at 12:30PM
4801 S. Congress Avenue – Lake Worth, FL 33461

1. Call to Order – Joseph Gibbons called the meeting to order.

A. Roll Call –

Community Health Center Board Members present: Michael Smith, Joseph Gibbons, William Johnson, Marni Rogalsky, Albert Borroto (virtual), Alcolya St. Juste (virtual). Julia Bullard, Nicholas Campbell and Boris Seymore were absent.

Staff present (in person/virtual): Darcy Davis, President & CEO; Jessica Cafarelli, VP & Chief Financial Officer; Bernabe Icaza, SVP & General Counsel; Dr. Belma Andric, EVP & Chief Medical Officer; Regina All, SVP & Chief Nursing Officer; Dr. Joshua Adametz, AVP & Executive Director Community Health Center, Dr. Ana Ferwerda; Angela Santos; and Steven Sadiku.

B. Affirmation of Mission: To provide compassionate, comprehensive health services to all Palm Beach County residents, through collaboration and partnership, in a culturally sensitive environment.

2. Agenda Approval

A. Additions/Deletions/Substitutions

B. Motion to Approve Agenda

CONCLUSION/ACTION: William Johnson made a motion to approve the agenda. The motion was duly seconded by Michael Smith. There being no opposition, the motion passed unanimously.

3. Awards, Introductions and Presentations

4. Disclosure of Voting Conflict

5. Public Comment



Health Care District
OF PALM BEACH COUNTY
WE CARE FOR ALL

6. Election of Officers

The Bylaws require the Officers of the Board to be elected each year during the annual meeting in September. The Clinic Bylaws provide that the officer may serve two consecutive one-year terms. Last year all sitting Officers were elected to their first term. Since all existing Officers are completing their first one-year term all current officers remain eligible for a second term. As a result, Mr. Joseph Gibbons requested a nomination for the existing slate of officers to continue for a second term.

Chair: Joseph Gibbons
Vice Chair: William Johnson
Secretary: Julia Bullard
Treasurer: Michael Smith

CONCLUSION/ACTION: Mr. Joseph Gibbons called for any additional nominations. No additional nominations were made. William Johnson made a motion to approve the existing slate of officers to continue for a second term. Michael Smith duly seconded the motion. There being no opposition, the motion passed unanimously.

7. Meeting Minutes

Staff Recommends a MOTION TO APPROVE:

Community Health Center Board Meeting Minutes of August 27, 2025

CONCLUSION/ACTION: William Johnson made a motion to approve the Community Health Center Board Meeting Minutes of August 27, 2025. The motion was duly seconded by Michael Smith. There being no opposition, the motion passed unanimously.

8. Consent Agenda – Motion to Approve Consent Agenda Items

CONCLUSION/ACTION: William Johnson made a motion to approve the Consent Agenda. The motion was duly seconded by Michael Smith. There being no opposition, the motion passed unanimously.



Health Care District

OF PALM BEACH COUNTY
WE CARE FOR ALL

HEALTH CARE DISTRICT

A. ADMINISTRATION

8A-1 RECEIVE AND FILE:

September Internet Posting of Public Meeting

8A-2 RECEIVE AND FILE:

Community Health Center Board of Directors Attendance

8A-3 RECEIVE AND FILE:

HRSA Digest

B. FINANCE

8B-1 MOTION TO APPROVE:

District Clinic Holdings, Inc. Financial Report for July 2025

8B-2 MOTION TO APPROVE:

Community Health Centers FY26 Budget

9. Regular Agenda

A. ADMINISTRATION

9A-1 RECEIVE AND FILE:

2025 Annual Board Evaluations

The CHC Board conducted an Annual Evaluation of Dr. Adametz, the Executive Director of Community Health Centers, to fulfill the Board Responsibility under the HRSA Health Center Program Requirement. The evaluation assessed Dr. Adametz's performance in nine domains using a 5-point rating scale ranging from Unsatisfactory to Outstanding.

The Executive Director received consistent high ratings across all domains, with most areas scoring at a 4.8 out of 5, which falls in the Exceeds Expectations range. The overall evaluation results reflect effective leadership and a high level of confidence from the Board. Comments included recognition of Dr. Adametz's calm and steady leadership, transparency, and commitment to advancing the mission of the Health Care District. Board members also highlighted his efforts in strategic planning, board education, and engagement, with appreciation for his collaborative approach.



Health Care District
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CONCLUSION/ACTION: William Johnson made a motion to approve the 2025 Annual Board Evaluations. The motion was duly seconded by Michael Smith. There being no opposition, the motion passed unanimously.

B. EXECUTIVE:

9B-1 **RECEIVE AND FILE:**

Executive Director Update

Dr. Adametz provided the Board with a Sliding Fee Scale and Pharmacy Update. Last month, the Board approved the new slide fee scale for Pharmacy and Medical services.

CONCLUSION/ACTION: RECEIVED AND FILED

C. CREDENTIALING

9C-1 **MOTION TO APPROVE:**

Licensed Independent Practitioner Credentialing and Privileging

Dr. Ana Ferwerda presented the Licensed Independent Practitioner Credentialing and Privileging Report.

CONCLUSION/ACTION: Michael Smith made a motion to approve the Licensed Independent Practitioner Credentialing and Privileging; the motion was duly seconded by William Johnson. There being no opposition, the motion passed unanimously.

D. QUALITY

9D-1 **MOTION TO APPROVE:**

Quality Report

Dr. Ana Ferwerda updated the Board on the Quality Report and Improvements, the Quality Council Meeting minutes and the UDS report YTD.

CONCLUSION/ACTION: William Johnson made a motion to approve the Quality Report, the motion was duly seconded by Michael Smith. There being no opposition, the motion passed unanimously.



Health Care District
OF PALM BEACH COUNTY
WE CARE FOR ALL

E. OPERATIONS

9E-1 **MOTION TO APPROVE:**

Operations Report

Angela Santos presented the Operations Report for August 2025.

CONCLUSION/ACTION: William Johnson made a motion to approve the Operations Report; the motion was duly seconded by Michael Smith. There being no opposition, the motion passed unanimously.

10. Dr. Joshua Adametz, AVP & Executive Director Community Health Center Comments

11. Board Member Comments

12. Establishment of Upcoming Community Health Center Board of Directors Meetings

October 22, 2025 (Atlantis)
12:30 p.m. Board of Directors

November 19, 2025 (Atlantis)
12:30 p.m. Board of Directors

December 17, 2025 (Atlantis)
12:30 p.m. Board of Directors

13. Motion to Adjourn

There being no further business, the meeting was adjourned.

Julia Bullard, Secretary

Date



Community Health Center Board of Directors Attendance Tracking 2025

	01/22/25	02/26/25	03/26/25	04/23/25	05/28/25	06/25/25	07/23/25	08/27/25	09/24/25	10/22/25	11/19/25	12/17/25
Mike Smith	X	X	X	X	X (ZOOM)	X	E	X	X			
Melissa Tascone	X (ZOOM)	E	E	E	X	Absent	E	-	-	-	-	-
Julia Bullard	X	X (ZOOM)	X	X	Absent	X (ZOOM)	E	X (ZOOM)	Absent			
Joseph Gibbons	X	X	E	X	X	X	X	X	X			
Alcolya St. Juste	E	X (ZOOM)	X (ZOOM)	E	E	X (ZOOM)	E	Absent	X (Zoom)			
William (Bill) Johnson	X	X	X	X	X	X	X (ZOOM)	X	X			
Boris Seymore	E	X (ZOOM)	X (ZOOM)	X (ZOOM)	Absent	Absent	X (ZOOM)	Absent	Absent			
Crystal Gonzalez	E	-	-	-	-	-	-	-	-	-	-	-
Albert Borotto	X (ZOOM)	E	X (ZOOM)	X (ZOOM)	X (ZOOM)	X (ZOOM)	X (ZOOM)	X	X (Zoom)			
Nicholas Campbell	-	X	X	E	X (ZOOM)	Absent	X (ZOOM)	X (ZOOM)	Absent			
Marni Rogalsky	-	-	-	-	-	-	-	X	X			
Quorum Established	Q	Q	Q	Q	Q	Q	Q	Q	Q			

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

**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

1. Description: HRSA Primary Health Care Digest

2. Summary:

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

3. Substantive Analysis:

The October HRSA Digest highlights the following:

- **BPHC Program Updates Recap**
 - HRSA released the Agency’s priorities highlighting the health and safety of children, guidance on sex-based definitions, unlawful diversity, equity, and inclusion initiatives, and parental rights and authority in children’s education. HRSA will prioritize support of programs that align with HRSA’s Strategic Priority Areas.
 - The transition to GrantSolutions has been delayed.
 - The new HHS grant policy changes that adopt 2 CFR 200 and 300 go into effect October 1, 2025.
 - 340B Drug Pricing Executive Order FAQ has been released.
- **Updated Health Center Performance Improvement Toolkit**
 - The toolkit to conduct self-assessments to achieve performance improvement goals has been updated
- **New Process for Delinquent Audits**
 - A new Delinquent Audit Process for awardees who fail to submit Single Audit Reports starts October 1, 2025. HRSA will apply a 120-day condition to all HRSA awards for awardees who are delinquent on two or more Single Audit Reports.
- **Updated Single Audit Threshold**
 - The single audit threshold has been adjusted from \$750,000 to \$1 million. Site visit teams are using the updated Site Visit Protocol question in the Financial Management and Accounting Systems section.
- **Updates for ASPR COVID-19 Therapeutics Distribution Program**
 - Health centers may continue to order Paxlovid procured by the HHS Administration for Strategic Preparedness and Response (ASPR) through 2028 or until the supply is depleted.



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

4. Fiscal Analysis & Economic Impact Statement:

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

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:


 CA6A21FF2E90481
 Jessica Cafarelli
 VP & Chief Financial Officer

5. Recommendation:

Staff recommends the Committee Receive and File the HRSA Primary Health Care Digest.

Approved for Legal sufficiency:

Signed by:


 0CF6F7DB67B0481
 Bernabe Icaza
 SVP & General Counsel

Signed by:


 2B4234FD87944B7
 Joshua Adametz, DMD, MPH, MA
 AVP & Executive Director of
 Community Health Centers



BPHC Program Updates Recap, Updated Performance Improvement Toolkit

From HRSA Primary Health Care Digest <hrsa@public.govdelivery.com>

Date Tue 9/30/2025 5:54 PM

To Krysten Kinsey <kkinsey@hcdpbc.org>

Caution: This email came from an EXTERNAL SOURCE. Do not click on links or open attachments unless you are sure you recognize the sender and you know the contents are safe.



Primary Health Care Digest

September 30, 2025



BPHC Program Updates Recap

See the [slides from the Thursday, September 25, BPHC Program Updates \(PDF\)](#). Here are other highlights from the webcast:

- HRSA released an update to the [Agency's priorities](#).
- HRSA has delayed implementation of GrantSolutions to ensure a smooth and effective transition for all users. Please continue to familiarize yourself with the GrantSolutions platform and visit [HRSA's GrantSolutions webpage](#), where you can find information and resources about the future transition.
- Review the new [HHS Grants Policy](#) to understand the changes that go into effect beginning tomorrow, October 1, 2025.
 - See [HRSA's Grant FAQs webpage](#) for more information about the adoption of 2 CFR 200 and 300.
- See our new [FAQs about the 340B Drug Pricing Program Executive Order](#).
- Continue to use the Health Center Program Support as your primary point of contact with BPHC via the [BPHC Contact Form](#) or by calling (877) 464-4772.

The next BPHC Program Updates webcast is tentatively scheduled for 2:00-3:00 p.m. ET on Thursday, October 30.

What's New

Updated Health Center Performance Improvement Toolkit Available

We recently updated the [Health Center Performance Improvement Toolkit](#). Use the toolkit to conduct self-assessments to understand the focus areas and potential activities needed to achieve your performance

improvement goals — it includes a guide and a tool for doing so. These resources aim to foster innovation, enhance patient care, and improve health outcomes for the underserved populations you serve.

[View the toolkit](#), which contains the [Guide to Self-Assessment](#) (PDF), [Self-Assessment Tools](#) (PDF), and [Quick Reference to the Framework](#) (PDF).

New Process for Delinquent Audits begins October 1

HRSA is committed to ensuring transparency, accountability, and compliance across all federally funded programs. To strengthen oversight and promote timely reporting, HRSA has implemented a new **Delinquent Audit Process** in response to awardees who fail to submit Single Audit Reports.

Beginning tomorrow, **October 1, 2025**, HRSA will apply a **120-day condition** to *all* HRSA awards for awardees who are **delinquent on two or more Single Audit Reports**. The 120-day condition will be applied 15 days following notification of delinquency. This process applies to HRSA awardees who have **failed** to submit required Single Audit Reports in a timely manner.

Timeline & Enforcement:

- **Effective Date:** Beginning October 1, 2025, impacted awardees will receive notifications
- **120-day Condition:** Will be applied 15 days following notification of delinquency
- **Scope:** Applies to **all** HRSA awards held by the delinquent entity

HRSA encourages all awardees to review their audit submission history in the [Federal Audit Clearinghouse](#) and take proactive steps to meet reporting requirements.

For questions or assistance, please contact the HRSA Grants Management Specialist listed on your most recent Notice of Award or email SARfollowup@hrsa.gov.

Updated Single Audit Threshold

We are adjusting the single audit threshold from \$750,000 to \$1 million in alignment with [HHS's Interim Final Rule \(IFR\)](#), which took effect October 1, 2024. As a result, we updated [Chapter 15: Financial Management and Accounting Systems](#) in the Health Center Program Compliance Manual (Compliance Manual) and the Financial Management and Accounting Systems section of the Site Visit Protocol (SVP) to reflect the new threshold.

The IFR provides HHS's phased plan for adopting [2 Code of Federal Regulations \(CFR\) part 200](#), including the \$1 million audit threshold at 2 CFR 200.301. Site visit teams are already using the adjusted SVP question in the Financial Management and Accounting Systems section during their reviews.

Updates for ASPR COVID-19 Therapeutics Distribution Program

Health centers can still order Paxlovid procured by the HHS Administration for Strategic Preparedness and Response (ASPR) through 2028 or until the supply is depleted.

To order no-cost Paxlovid for your health center, email aspr.ord@hhs.gov. In your email, please indicate if your health center used the Health Partners Ordering Portal (HPOP) in the past or if you're new to the program and would like to place an order. If you have questions about placing an order, the status of your order, or how to report your inventory, email ASPR.ORD@hhs.gov, Muntaha.Mahmud@hhs.gov, or your ASPR Regional Team.

ASPR is transferring all existing sites from the HPOP into the new [ORD platform](#). Health centers must report on usage/wastage of ASPR-distributed products in the [ORD platform](#) (using the "site user" access type) until ALL of the treatment courses you received from ASPR are accounted for as either used or wasted.

As a reminder, health centers cannot charge patients for any product ordered at no cost from the U.S. Government (USG) and must dispense USG-procured COVID-19 testing supplies and therapeutics regardless of the recipient’s coverage status or ability to pay.

Deadline Reminders

SAC Applications for May 1 Starts

Fiscal year (FY) 2026 SAC applications for May 1, 2026 ([HRSA-26-005](#)) period of performance start dates are due in Grants.gov by 11:59 p.m. ET on Friday, October 10.

Please find details for each of the announced service areas on the [Service Area Announcement Table](#). Find application deadlines and technical assistance (TA) materials on the [SAC TA webpage](#).

Start Date (in 2026)	NOFO #	EHBs Application Open Date	Grants.gov (Due by 11:59 p.m. ET)	EHBs (Due by 5:00 p.m. ET)
March 1	HRSA-26-002	July 24	Closed	October 29
April 1	HRSA-26-004	July 30	Closed	October 29
May 1	HRSA-26-005	August 11	October 10	November 10
June 1	HRSA-26-006	September 10	November 10	December 10

BPR for January 1 and February 1 Starts

FY 2026 [Budget Period Progress Reports \(BPR\)](#) for Health Center Program award recipients with a February 1, 2026 (5-H80-26-002) budget period start date are due in HRSA’s EHBs by 5 p.m. ET on Friday, October 17.

New this year: Include an update on progress toward meeting the objectives for each supplement you received in the last 3 years (since FY 2023).

Unsure if you need to submit a BPR? Refer to line 26, “Project Period Start Date - End Date” on your most recent H80 Notice of Award. Health Center Program award recipients with a period of performance end date on or after September 30, 2026, will be required to complete an FY 2026 BPR.

Find application deadlines and TA materials on the [BPR TA webpage](#).

Upcoming Events

2025 UDS Reporting Webinars

We kicked off our annual UDS reporting technical assistance (TA) series. This series will run through January 2026 and will help health centers submit accurate, timely, and complete 2025 UDS reports, which are due February 15, 2026. Health center staff who prepare UDS report submissions are encouraged to register and attend this series. *October sessions include:*

The Foundation of the UDS: Counting Visits

We’ll review what qualifies as a countable visit in the UDS and explore the key components of the visit

definition and demonstrate how visits provide the framework for patient activity reported through the UDS report. This training is for health centers.

Wednesday, October 1
2:00-3:30 p.m. ET
[Register for the session](#)

UDS Clinical Tables Part 1: Screening and Preventive Care Measures

We'll review the reporting requirements for screening and preventive care measures across the UDS clinical tables, including colorectal cancer, breast cancer, cervical cancer, tobacco, depression, adult body mass index (BMI), and HIV screenings. This session is ideal for clinical staff, quality improvement professionals, and data/reporting personnel responsible for UDS reporting.

Tuesday, October 14
2:00-3:30 p.m. ET
[Register for the session](#)

UDS Clinical Tables Part 2: Maternal Care and Children's Health

We'll focus on the reporting requirements for clinical quality measures related directly to maternal care and children's health across the UDS clinical tables, including early entry into prenatal care, deliveries and birth weight, childhood immunizations, dental sealants, and weight assessment and counseling for children and adolescents. The webinar will discuss reporting strategies and opportunities for quality improvement. This session is ideal for clinical staff, quality improvement professionals, and data/reporting personnel responsible for UDS reporting.

Tuesday, October 21
2:00-3:30 p.m. ET
[Register for the webinar](#)

[View the training flyer](#) to see webinar topics, dates, times, and registration links. Visit the [UDS TA webpage](#) for additional resources.

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5600 Fishers Lane | Rockville, MD 20857



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

1. Description: District Clinic Holdings, Inc. Financial Report August 2025

2. Summary:

The August 2025 financial statements for the District Clinic Holdings, Inc. are presented for Board review.

3. Substantive Analysis:

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

4. Fiscal Analysis & Economic Impact Statement:

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

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:


CA6A21FF2F08481
 Jessica Cafarelli
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

 N/A
 Committee Name

 N/A
 Date Approved



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

6. Recommendation:

Staff recommends the Board approve the August 2025 District Clinic Holdings, Inc. financial statements.

Approved for Legal sufficiency:

Signed by:

0CF6F7DB670643 Bernabe Icaza
SVP & General Counsel

Signed by:

CA6A21FF2E0948 Jessica Cafarelli
VP & Chief Financial Officer

Signed by:

3E42B45E764E7 Joshua Adametz, DMD, MPH, MA
AVP & Executive Director of Community Health Centers



MEMO

To: Finance Committee
From: Jessica Cafarelli
VP, Chief Financial Officer
Date: October 22, 2025

Subject: Management Discussion and Analysis as of August 2025 Community Health Centers Financial Statements.

The August financial statements represent the financial performance through the eleventh month of the 2025 fiscal year for the Community Health Centers. On the Comparative Statement of Net Position, total assets increased \$2.0M. Cash increased \$2.3M as a result of receiving \$1.0M in HRSA payments and other normal business operations.

On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$1.3M) or (9.8%) primarily due to unanticipated increases in charity care, bad debt classification, and LIP shortfall. Gross patient revenue YTD was favorable to budget by \$4.1M. Total YTD revenues were unfavorable to budget by (\$3.0M) or (13.3%). YTD grant revenue is unfavorable to budget by (\$1.9M) due to delays in grant implementation for HRSA Ending HIV and HRSA CARES Capital Improvement grants for \$758k, as well as several grants that were budgeted and not awarded that account for approximately \$1.5M of the unfavorable variance. Staff does not anticipate additional grants being awarded and recognized this fiscal year. To offset this variance, staff identified opportunities to reduce expenses to remain within budget. Operational expenses before depreciation were favorable to budget by \$8.5M due to timing differences in expenses and staffing. Positive variances YTD in salaries, wages, and benefits were \$7.0M. YTD net margin was a loss of (\$23.7M) compared to the budgeted loss of (\$31.5M) resulting in a favorable variance of \$7.8M or (24.7%). YTD, the District has transferred in \$21.3M to subsidize clinic operations.

Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$691k). The Medical clinics YTD gross patient revenue was favorable to budget by \$1.2M. The Medical clinics total YTD revenue was unfavorable to budget by (\$2.6M) due primarily to a decrease in grant revenue and unanticipated LIP shortfall. Grant revenue recognition had a negative impact on overall revenue of (\$2.1M). Total operating expenses of \$23.1M were favorable to budget of \$28.9M by \$5.8M or 20.1%. The positive variance is mostly due to salaries, wages, and benefits of \$4.4M, and medical supplies of \$595k. Timing differences in expenses and staffing are driving these favorable YTD variances. YTD net margin was a loss of (\$16.9M) compared to the budgeted loss of (\$21.6M) resulting in a favorable variance of \$4.7M or (21.6%).

Net patient revenue YTD for the Dental clinics was unfavorable to budget by (\$656k). The Dental clinics total YTD gross patient revenue was unfavorable to budget by (\$439k), with a 1.7% reduction in dental visits compared to budget impacting this unfavorable result. Total YTD operating expenses of \$5.3M were favorable to budget by



\$434k, with timing differences in staffing primarily accounting for this favorable variance. Total YTD net margin was favorable to budget by \$206k or (6.4%).

Net patient revenue YTD for the Behavioral Health clinics was favorable to budget by \$80k. The Behavioral Health clinics total YTD gross patient revenue was favorable to budget by \$3.3M. Total YTD operating expenses of \$3.8M were favorable to budget by \$2.2M, with timing differences in staffing primarily accounting for this favorable variance. Total YTD net margin was favorable to budget by \$2.9M or (43.7%).

District Clinic Holdings, Inc.
Comparative Statement of Net Position

	<u>August 31, 2025</u>	<u>July 31, 2025</u>	<u>Increase (Decrease)</u>
Assets			
Cash and Cash Equivalents	\$ 6,982,214	\$ 4,666,964	\$ 2,315,250
Accounts Receivable, net	1,743,096	1,996,160	(253,065)
Due From Other Governments	922,912	980,670	(57,758)
Other Current Assets	367,327	358,162	9,164
Net Investment in Capital Assets	5,287,072	5,243,674	43,398
Right Of Use Assets	8,209,606	8,314,115	(104,509)
Total Assets	<u>\$ 23,512,226</u>	<u>\$ 21,559,745</u>	<u>\$ 1,952,482</u>
Liabilities			
Accounts Payable	365,385	412,850	(47,465)
Deferred Revenue-	3,336	4,169	(833)
Accrued Interest	39,115	38,581	535
Other Current Liabilities	2,755,758	3,392,803	(637,045)
Lease Liability	7,629,050	7,710,349	(81,299)
Non-Current Liabilities	1,334,664	1,251,960	82,704
Total Liabilities	<u>12,127,308</u>	<u>12,810,712</u>	<u>(683,403)</u>
Deferred Inflows of Resources			
Deferred Inflows	<u>\$ 66,853</u>	<u>\$ 66,853</u>	<u>\$ 0</u>
Net Position			
Net Investment in Capital Assets	5,287,072	5,243,674	43,398
Unrestricted	6,030,993	3,438,507	2,592,487
Total Net Position	<u>11,318,065</u>	<u>8,682,180</u>	<u>2,635,885</u>
Total Liabilities, Deferred Inflows of Resources and Net Position	<u>\$ 23,512,226</u>	<u>\$ 21,559,745</u>	<u>\$ 1,952,482</u>

Note: Amounts may not foot due to rounding.

Primary Care Clinics Statement of Revenues and Expenses
For The Eleventh Month Ended August 31, 2025

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 3,307,786	\$ 2,862,983	\$ 444,803	15.5%	\$ 3,705,563	\$ (397,777)	(10.7%)	Gross Patient Revenue	\$ 35,322,387	\$ 31,261,488	\$ 4,060,899	13.0%	\$ 33,121,394	\$ 2,200,994	6.6%
910,825	948,920	(38,095)	(4.0%)	1,206,688	(295,862)	(24.5%)	Contractual Allowance	11,532,499	10,383,029	1,149,470	11.1%	10,480,971	1,051,528	10.0%
1,196,315	995,021	201,294	20.2%	1,215,302	(18,987)	(1.6%)	Charity Care	12,191,937	10,862,208	1,329,729	12.2%	11,955,346	236,591	2.0%
604,803	380,657	224,146	58.9%	515,822	88,981	17.3%	Bad Debt	5,886,607	4,156,416	1,730,191	41.6%	4,589,442	1,297,165	28.3%
2,711,943	2,324,598	387,345	16.7%	2,937,811	(225,868)	(7.7%)	Total Contractuals and Bad Debt	29,611,043	25,401,653	4,209,390	16.6%	27,025,759	2,585,284	9.6%
807,587	649,691	157,895	24.3%	770,867	36,720	4.8%	Other Patient Revenue	5,973,661	7,091,089	(1,117,428)	(15.8%)	6,163,072	(189,411)	(3.1%)
1,403,430	1,188,076	215,354	18.1%	1,538,620	(135,190)	(8.8%)	Net Patient Service Revenue	11,685,006	12,950,924	(1,265,919)	(9.8%)	12,258,707	(573,701)	(4.7%)
42.43%	41.50%			41.52%			Collection %	33.08%	41.43%		37.01%			
734,793	861,416	(126,623)	(14.7%)	661,745	73,048	11.0%	Grants	7,541,783	9,413,131	(1,871,348)	(19.9%)	7,653,601	(111,818)	(1.5%)
-	-	-	-	-	-	-	Interest Earnings	-	-	-	-	1,943	(1,943)	-
57,701	6,735	50,966	756.7%	3,123	54,578	1,747.6%	Other Revenue	231,824	74,041	157,783	213.1%	80,612	151,213	187.6%
\$ 2,195,924	\$ 2,056,227	\$ 139,697	6.8%	\$ 2,203,487	\$ (7,563)	(0.3%)	Total Revenues	\$ 19,458,613	\$ 22,438,096	\$ (2,979,483)	(13.3%)	\$ 19,994,863	\$ (536,250)	(2.7%)
Direct Operating Expenses:														
1,973,697	2,417,255	443,558	18.3%	1,974,992	1,295	0.1%	Salaries and Wages	20,805,186	26,131,843	5,326,657	20.4%	20,346,890	(458,296)	(2.3%)
378,597	647,738	269,141	41.6%	525,478	146,881	28.0%	Benefits	5,429,090	7,075,882	1,646,793	23.3%	5,491,400	62,311	1.1%
16,893	40,384	23,491	58.2%	73,259	56,366	76.9%	Purchased Services	321,842	444,225	122,383	27.5%	1,263,085	941,243	74.5%
59,859	128,048	68,189	53.3%	69,578	9,720	14.0%	Medical Supplies	810,415	1,408,524	598,110	42.5%	992,646	182,231	18.4%
41,618	40,922	(696)	(1.7%)	9,617	(32,001)	(332.8%)	Other Supplies	302,799	450,137	147,338	32.7%	276,862	(25,936)	(9.4%)
35,568	77,899	42,331	54.3%	104,037	68,469	65.8%	Medical Services	588,821	856,889	268,068	31.3%	978,399	389,578	39.8%
72,533	63,362	(9,171)	(14.5%)	82,270	9,736	11.8%	Drugs	736,799	696,982	(39,817)	(5.7%)	601,875	(134,924)	(22.4%)
53,683	62,324	8,641	13.9%	44,710	(8,973)	(20.1%)	Repairs and Maintenance	580,338	685,564	105,226	15.3%	492,606	(87,732)	(17.8%)
(5,233)	130,991	136,224	104.0%	8,719	13,952	160.0%	Lease and Rental	1,276,851	1,440,900	164,049	11.4%	860,090	(416,762)	(48.5%)
12,829	15,476	2,647	17.1%	9,131	(3,698)	(40.5%)	Utilities	126,650	170,236	43,586	25.6%	94,532	(32,118)	(34.0%)
67,783	105,523	37,741	35.8%	65,206	(2,577)	(4.0%)	Other Expense	852,489	1,160,756	308,267	26.6%	992,047	139,558	14.1%
34,344	15,649	(18,694)	(119.5%)	16,976	(17,367)	(102.3%)	Interest Expense	389,370	172,142	(217,228)	(126.2%)	197,003	(192,367)	(97.6%)
4,500	6,599	2,098	31.8%	6,635	2,135	32.2%	Insurance	67,303	72,586	5,283	7.3%	61,173	(6,130)	(10.0%)
2,746,671	3,752,170	1,005,499	26.8%	2,990,609	243,938	8.2%	Total Operating Expenses	32,287,952	40,766,667	8,478,715	20.8%	32,648,606	360,655	1.1%
\$ (550,748)	\$ (1,695,943)	\$ 1,145,195	(67.5%)	\$ (787,122)	\$ 236,375	(30.0%)	Net Performance before Depreciation & Overhead Allocations	\$ (12,829,339)	\$ (18,328,571)	\$ 5,499,232	(30.0%)	\$ (12,653,743)	\$ (175,596)	1.4%
175,894	116,870	(59,024)	(50.5%)	90,885	(85,010)	(93.5%)	Depreciation	1,669,976	1,285,567	(384,409)	(29.9%)	980,577	(689,399)	(70.3%)
Overhead Allocations:														
7,252	13,995	6,743	48.2%	11,647	4,395	37.7%	OH Risk Management	98,052	153,945	55,893	36.3%	119,621	21,569	18.0%
78,462	89,828	11,366	12.7%	109,286	30,824	28.2%	OH Revenue Cycle	786,845	988,108	201,263	20.4%	920,602	133,757	14.5%
2,145	3,723	1,578	42.4%	4,286	2,141	50.0%	OH Internal Audit	24,774	40,953	16,179	39.5%	30,410	5,636	18.5%
32,114	23,419	(8,695)	(37.1%)	40,396	8,282	20.5%	Home Office Facilities	266,225	257,609	(8,616)	(3.3%)	288,291	22,066	7.7%
13,807	15,137	1,330	8.8%	12,208	(1,599)	(13.1%)	OH Administration	167,745	166,507	(1,238)	(0.7%)	153,538	(14,207)	(9.3%)
100,498	130,323	29,825	22.9%	90,882	(9,616)	(10.6%)	OH Human Resources	1,176,757	1,433,553	256,796	17.9%	934,234	(242,523)	(26.0%)
334	42,791	42,457	99.2%	30,283	29,949	98.9%	Legal	310,079	470,701	160,622	34.1%	302,313	(7,766)	(2.6%)
4,107	5,154	1,047	20.3%	3,737	(370)	(9.9%)	Records	44,680	56,694	12,014	21.2%	39,984	(4,696)	(11.7%)
16,129	17,343	1,214	7.0%	-	(16,129)	-	OH Compliance	166,328	190,773	24,445	12.8%	106,985	(59,343)	(55.5%)
99,890	71,621	(28,269)	(39.5%)	53,251	(46,639)	(87.6%)	IT Operations	556,739	787,831	231,092	29.3%	546,922	(9,817)	(1.8%)
15,128	24,864	9,736	39.2%	11,414	(3,714)	(32.5%)	IT Security	171,958	273,504	101,546	37.1%	154,378	(17,580)	(11.4%)
43,891	47,680	3,789	7.9%	36,333	(7,558)	(20.8%)	OH Finance	477,329	524,480	47,151	9.0%	416,276	(61,053)	(14.7%)
16,050	20,807	4,757	22.9%	18,208	2,158	11.9%	Corporate Communications	163,546	228,877	65,331	28.5%	161,058	(2,488)	(1.5%)
24,443	28,311	3,868	13.7%	17,448	(6,995)	(40.1%)	OH Information Technology	213,449	311,421	97,972	31.5%	230,111	16,662	7.2%
148,738	242,117	93,379	38.6%	313,445	164,707	52.5%	IT Applications	1,823,621	2,663,287	839,666	31.5%	1,973,577	149,956	7.6%

Primary Care Clinics Statement of Revenues and Expenses
For The Eleventh Month Ended August 31, 2025

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
31,759	51,288	19,529	38.1%	57,946	26,187	45.2%	IT Service Center	417,167	564,168	147,001	26.1%	432,269	15,102	3.5%	
-	-	-	-	17,045	17,045	-	OH Performance Excellence	-	-	-	-	182,652	182,652	-	
19,670	22,239	2,569	11.6%	3,718	(15,952)	(429.0%)	Corporate Quality	266,855	244,629	(22,226)	(9.1%)	165,364	(101,491)	(61.4%)	
66,276	57,690	(8,586)	(14.9%)	53,949	(12,327)	(22.8%)	OH Security Services	614,173	634,590	20,417	3.2%	457,880	(156,293)	(34.1%)	
19,652	23,428	3,776	16.1%	18,271	(1,381)	(7.6%)	OH Supply Chain	195,860	257,708	61,848	24.0%	194,732	(1,128)	(0.6%)	
8,849	13,459	4,610	34.3%	11,905	3,056	25.7%	HIM Department	120,496	148,049	27,553	18.6%	137,037	16,541	12.1%	
19,311	29,159	9,848	33.8%	20,488	1,177	5.7%	OH Coding	242,968	320,749	77,781	24.2%	242,730	(238)	(0.1%)	
3,372	2,626	(746)	(28.4%)	3,583	211	5.9%	OH Reimbursement	15,474	28,886	13,412	46.4%	26,050	10,576	40.6%	
-	12,405	12,405	-	8,289	8,289	-	OH Clinical Labor Pool	105,612	136,455	30,843	22.6%	92,424	(13,188)	(14.3%)	
37,307	41,818	4,511	10.8%	19,532	(17,775)	(91.0%)	Clinical Services Admin	362,371	459,998	97,627	21.2%	269,281	(93,090)	(34.6%)	
-	14,415	14,415	-	7,673	7,673	-	Support Services Allocation	172,334	158,565	(13,769)	(8.7%)	105,781	(66,553)	(62.9%)	
3,911	5,025	1,114	22.2%	3,745	(166)	(4.4%)	OH Mail Room	40,869	55,275	14,406	26.1%	45,072	4,203	9.3%	
1,671	5,774	4,103	71.1%	-	(1,671)	-	OH Patient Experience	15,157	63,514	48,357	76.1%	-	(15,157)	-	
-	3,852	3,852	-	-	-	-	OH External Affairs	46,232	42,372	(3,860)	(9.1%)	-	(46,232)	-	
10,658	18,643	7,985	42.8%	-	(10,658)	-	OH Strategic Initiatives and Projects	133,460	205,073	71,613	34.9%	-	(133,460)	-	
825,424	1,078,934	253,510	23.5%	978,968	153,544	15.7%	Total Overhead Allocations-	9,197,155	11,868,274	2,671,119	22.5%	8,729,571	(467,584)	(5.4%)	
3,747,990	4,947,974	1,199,984	24.3%	4,060,462	312,472	7.7%	Total Expenses	43,155,083	53,920,508	10,765,425	20.0%	42,358,754	(796,329)	(1.9%)	
\$ (1,552,066)	\$ (2,891,747)	\$ 1,339,681	(46.3%)	\$ (1,856,975)	\$ 304,909	(16.4%)	Net Margin	\$ (23,696,470)	\$ (31,482,411)	\$ 7,785,942	(24.7%)	\$ (22,363,891)	\$ (1,332,579)	6.0%	
114,784	31,140	83,644	268.6%	12,144	102,640	845.2%	Capital Contributions.	382,059	342,540	39,519	11.5%	1,072,347	(690,288)	(64.4%)	
-	\$ 3,583,333	\$ (3,583,333)	-	-	-	-	Transfer In/(Out)	\$ 21,333,950	\$ 39,416,659	\$ (18,082,709)	(45.9%)	\$ 19,344,650	\$ (1,989,300)	(10.3%)	

	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Year to Date
Gross Patient Revenue	\$ 3,463,909	\$ 2,991,655	\$ 3,037,040	\$ 2,812,330	\$ 2,524,048	\$ 3,822,944	\$ 3,684,741	\$ 3,318,653	\$ 3,138,982	\$ 3,220,301	\$ 3,307,786	\$ 35,322,387
Contractual Allowance	1,230,872	846,040	755,447	894,111	891,075	920,787	1,626,691	1,275,048	1,214,829	966,775	910,825	11,532,499
Charity Care	1,196,335	1,035,483	1,098,512	924,346	865,301	1,309,874	1,246,642	1,110,164	1,080,597	1,128,369	1,196,315	12,191,937
Bad Debt	704,322	429,668	565,031	488,188	523,591	471,481	629,771	439,594	497,254	532,904	604,803	5,886,607
Total Contractuals and Bad Debt	3,131,528	2,311,191	2,418,989	2,306,645	2,279,967	2,702,142	3,503,103	2,824,806	2,792,680	2,628,048	2,711,943	29,611,043
Other Patient Revenue	561,333	561,333	561,333	645,491	585,578	582,372	530,338	570,165	200,515	367,617	807,587	5,973,661
Net Patient Service Revenue	893,713	1,241,797	1,179,383	1,151,175	829,659	1,703,174	711,976	1,064,012	546,818	959,870	1,403,430	11,685,006
Collection %	25.80%	41.51%	38.83%	40.93%	32.87%	44.55%	19.32%	32.06%	17.42%	29.81%	42.43%	33.08%
Non-Operating Revenues												
Grants	514,544	740,790	372,651	603,899	633,632	696,247	755,771	799,624	686,200	1,003,633	734,793	7,541,783
Other Revenue	25,544	5,756	33,568	1,088	52,092	34,374	1,480	1,321	908	17,991	57,701	231,824
Total Other Revenues	\$ 540,088	\$ 746,545	\$ 406,220	\$ 604,987	\$ 685,724	\$ 730,621	\$ 757,252	\$ 800,945	\$ 687,107	\$ 1,021,624	\$ 792,494	\$ 7,773,607
Total Non-Operating Revenues	\$ 1,433,801	\$ 1,988,342	\$ 1,585,603	\$ 1,756,162	\$ 1,515,383	\$ 2,433,795	\$ 1,469,227	\$ 1,864,957	\$ 1,233,925	\$ 1,981,494	\$ 2,195,924	\$ 19,458,613
Direct Operating Expenses:												
Salaries and Wages	1,777,415	1,748,215	1,759,915	1,908,502	1,761,205	1,996,481	1,897,695	2,323,248	1,830,212	1,828,600	1,973,697	20,805,186
Benefits	432,027	639,602	585,302	292,556	485,230	490,607	488,708	663,105	487,675	485,681	378,597	5,429,090
Purchased Services	12,929	22,360	30,717	46,042	39,569	48,496	41,537	18,370	27,382	17,547	16,893	321,842
Medical Supplies	68,475	49,343	80,343	55,613	72,325	92,799	77,773	57,451	108,494	87,941	59,859	810,415
Other Supplies	6,167	19,844	22,170	21,433	19,138	57,625	28,898	19,889	39,754	26,264	41,618	302,799
Medical Services	103,925	95,313	64,076	90,149	69,030	26,073	34,091	37,522	6,186	26,886	35,568	588,821
Drugs	61,289	67,731	60,760	55,185	65,626	77,434	98,839	67,669	56,459	53,273	72,533	736,799
Repairs and Maintenance	52,025	41,102	33,724	61,279	44,679	38,410	93,964	15,541	87,739	58,193	53,683	580,338
Lease and Rental	180,498	143,397	61,812	172,355	50,818	146,865	122,214	99,247	66,619	238,260	(5,233)	1,276,851
Utilities	3,195	11,841	13,205	12,995	12,645	14,046	10,564	10,350	12,293	12,688	12,829	126,650
Other Expense	44,142	98,523	53,236	80,439	85,523	106,960	67,614	90,287	80,542	77,439	67,783	852,489
Interest Expense	16,511	55,677	35,698	35,432	35,740	34,896	34,051	34,357	34,084	38,581	34,344	389,370
Principal Expenditure	1,606	50,497	-	-	(576)	-	(51,527)	-	-	-	-	-
Insurance	6,635	6,635	6,635	6,635	6,635	6,635	6,635	5,927	5,927	4,500	4,500	67,303
Total Operating Expenses	2,766,839	3,050,082	2,807,592	2,838,615	2,747,587	3,137,328	2,951,056	3,442,962	2,843,368	2,955,852	2,746,671	32,287,952
Net Performance before Depreciation & Overhead Allocations	\$ (1,333,038)	\$ (1,061,740)	\$ (1,221,990)	\$ (1,082,453)	\$ (1,232,204)	\$ (703,532)	\$ (1,481,828)	\$ (1,578,005)	\$ (1,609,443)	\$ (974,358)	\$ (550,748)	\$ (12,829,339)
Depreciation	87,165	166,932	126,926	115,083	114,805	161,872	163,335	163,230	164,933	229,800	175,894	1,669,976
<i>Overhead Allocations:</i>												
OH Risk Management	12,674	10,468	10,570	10,369	10,084	8,910	7,687	4,873	7,547	7,618	7,252	98,052
OH Revenue Cycle	76,173	58,628	87,253	47,507	97,622	77,137	71,533	54,732	60,912	76,886	78,462	786,845
OH Internal Audit	3,844	3,009	2,478	2,016	1,900	2,061	2,017	1,209	2,017	2,078	2,145	24,774
Home Office Facilities	28,469	21,511	16,029	22,161	37,737	23,388	22,650	20,528	8,819	32,819	32,114	266,225
OH Administration	19,054	16,540	14,636	6,306	15,732	17,030	26,166	8,739	16,024	13,711	13,807	167,745
OH Human Resources	122,937	105,519	102,453	103,551	122,808	109,119	109,810	99,341	84,661	116,060	100,498	1,176,757
Legal	55,244	32,069	26,771	27,544	25,895	28,635	27,958	23,915	32,078	29,636	334	310,079
Records	4,254	3,444	4,660	4,784	3,988	4,236	4,126	2,846	4,053	4,182	4,107	44,680

Primary Care Clinics Statement of Revenues and Expenses by Month

	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Year to Date
OH Compliance	14,592	15,279	14,663	14,870	13,967	15,055	16,145	12,098	16,730	16,800	16,129	166,328
IT Operations	22,627	43,480	52,077	53,115	49,156	44,499	49,253	41,006	100,519	1,117	99,890	556,739
IT Security	17,676	28,314	3,226	12,874	18,694	16,302	16,146	12,286	15,620	15,692	15,128	171,958
OH Finance	48,235	38,992	47,994	42,960	40,847	49,635	44,966	30,131	47,194	42,484	43,891	477,329
Corporate Communications	16,284	14,653	14,656	14,302	13,614	15,438	17,361	9,548	17,186	14,454	16,050	163,546
OH Information Technology	24,675	20,492	20,150	20,119	18,936	20,927	21,396	8,393	18,017	15,901	24,443	213,449
IT Applications	264,361	84,357	194,313	253,644	178,935	149,146	63,217	238,357	144,970	103,583	148,738	1,823,621
IT Service Center	56,523	38,529	44,993	34,566	35,479	44,753	29,316	33,947	31,796	35,506	31,759	417,167
Corporate Quality	22,066	19,497	21,756	21,542	21,718	23,073	27,545	19,285	35,724	34,979	19,670	266,855
OH Security Services	61,071	62,445	55,853	50,226	66,682	54,508	32,188	38,535	73,295	53,094	66,276	614,173
OH Supply Chain	22,217	24,128	22,354	10,315	7,180	20,441	19,230	12,174	17,536	20,633	19,652	195,860
HIM Department	12,735	11,992	12,324	11,979	12,747	13,590	12,034	5,610	9,187	9,449	8,849	120,496
OH Coding	24,741	23,865	24,168	22,450	21,656	23,763	23,006	14,188	23,301	22,519	19,311	242,968
OH Reimbursement	953	185	530	459	463	501	2,587	1,432	2,461	2,531	3,372	15,474
OH Clinical Labor Pool	13,086	12,292	13,260	11,682	10,264	13,287	10,195	9,856	11,177	513	-	105,612
Clinical Services Admin	29,065	29,316	32,018	31,377	29,556	36,112	35,562	21,509	42,467	38,082	37,307	362,371
Support Services Allocation	24,854	16,298	21,158	21,336	20,491	23,029	21,059	24,109	-	-	-	172,334
OH Mail Room	3,566	3,087	3,269	3,651	4,187	4,114	4,001	3,061	4,047	3,975	3,911	40,869
OH Patient Experience	-	-	1,817	1,670	1,673	1,817	1,769	1,154	1,769	1,817	1,671	15,157
OH External Affairs	4,618	7,899	4,927	5,375	3,742	6,058	5,547	3,712	4,354	-	-	46,232
OH Strategic Initiatives and Projects	-	-	39,695	15,770	16,345	12,061	10,565	6,595	10,861	10,910	10,658	133,460
Total Overhead Allocations	1,006,594	746,288	910,051	878,520	902,098	858,625	735,035	763,169	844,322	727,029	825,424	9,197,155
Total Expenses	3,860,598	3,963,302	3,844,570	3,832,218	3,764,490	4,157,825	3,849,426	4,369,361	3,852,623	3,912,681	3,747,990	43,155,083
Net Margin	\$ (2,426,797)	\$ (1,974,960)	\$ (2,258,967)	\$ (2,076,056)	\$ (2,249,107)	\$ (1,724,029)	\$ (2,380,199)	\$ (2,504,404)	\$ (2,618,699)	\$ (1,931,187)	\$ (1,552,066)	\$ (23,696,470)
Capital Contributions.	-	-	-	9,221	28,085	94,980	6,326	102,205	-	26,459	114,784	382,059
General Fund Support/Transfer In	-	-	\$7,331,296	-	-	\$6,323,178	-	-	\$7,679,475	-	-	\$21,333,950

Primary Care Clinics - Medical Statement of Revenues and Expenses by Location (YTD)
For The Eleventh Month Ended August 31, 2025

	Clinic Administration	Belle Glade Medical Clinic	Delray Medical Clinic	Lantana Medical Clinic	Mangonia Park Medical Clinic	West Palm Beach Medical Clinic	Jupiter Medical Clinic	Lake Worth Medical Clinic	Lewis Center Medical Clinic	West Boca Medical Clinic	St Ann Place Medical Clinic	Mobile Warrior	Mobile Van Scout	Mobile Van Hero	Atlantis Medical Clinic	Port Medical Clinic	Total
Gross Patient Revenue	\$ (2,587)	\$ 2,094,077	\$ 2,112,239	\$ 1,663,743	\$ 2,617,246	\$ 3,807,770	\$ 1,209,691	\$ 1,108,810	\$ 210,516	\$ 702,763	\$ 56,106	\$ 255,873	-	\$ 301,169	\$ 3,744,983	\$ 2,373	\$ 19,884,772
Contractual Allowance	(2,669)	761,023	635,414	425,820	1,208,404	1,050,431	370,985	328,794	105,858	297,957	15,803	42,251	416	157,379	757,618	(9,421)	6,155,062
Charity Care	207	601,300	644,288	637,452	487,306	1,316,150	497,110	436,909	44,299	277,141	10,969	121,403	-	65,851	1,500,523	(498)	6,640,408
Bad Debt	(841)	302,727	350,694	722,073	827,926	578,592	118,203	297,653	22,874	27,361	11,610	34,812	40	30,000	(308,499)	8,301	3,023,527
Total Contractual Allowances and Bad Debt	(3,302)	1,665,050	1,630,396	1,785,346	2,523,635	2,954,173	986,299	1,063,356	173,031	602,459	38,382	198,465	456	253,230	1,949,642	(1,618)	15,818,998
Other Patient Revenue	-	405,220	346,358	336,883	182,163	867,282	186,159	148,421	58,159	221,614	11,302	30,875	-	26,385	1,129,140	-	3,949,961
Net Patient Revenue	716	834,247	828,202	215,280	275,774	1,720,879	409,550	193,875	95,645	321,918	29,026	88,282	(456)	74,324	2,924,481	3,992	8,015,735
Collection %	(27.67%)	39.84%	39.21%	12.94%	10.54%	45.19%	33.86%	17.48%	45.43%	45.81%	51.73%	34.50%	-	24.68%	78.09%	168.19%	40.31%
Grants	1,217,731	579,305	490,987	274,046	417,652	631,256	252,808	192,121	18,677	138,632	21,880	77,893	-	115,511	986,364	-	5,414,862
Other Revenue	224,515	5,667	-	-	-	-	-	-	-	-	-	-	-	-	-	-	230,183
Total Other Revenues	1,442,247	584,973	490,987	274,046	417,652	631,256	252,808	192,121	18,677	138,632	21,880	77,893	-	115,511	986,364	-	5,645,045
Total Revenues	\$ 1,442,962	\$ 1,419,220	\$ 1,319,188	\$ 489,326	\$ 693,426	\$ 2,352,135	\$ 662,358	\$ 385,995	\$ 114,322	\$ 460,550	\$ 50,905	\$ 166,175	\$ (456)	\$ 189,835	\$ 3,910,845	\$ 3,992	\$ 13,660,779
<i>Direct Operational Expenses:</i>																	
Salaries and Wages	3,198,183	1,627,851	1,308,099	641,428	654,932	1,814,383	725,293	477,992	35,927	448,100	29,049	218,374	-	318,536	2,826,750	-	14,324,899
Benefits	906,985	442,134	410,918	180,629	219,050	420,131	165,675	153,146	-	92,665	2,631	70,488	-	86,669	719,198	-	3,870,321
Purchased Services	143,501	25,984	26,372	11,109	6,793	13,756	11,821	21,090	3,285	21,150	-	500	411	500	8,381	-	294,651
Medical Supplies	43	43,094	83,097	22,184	70,173	107,738	24,977	30,854	6,226	27,449	3,178	2,334	984	174	49,041	-	471,545
Other Supplies	5,110	12,254	12,413	2,443	12,928	6,987	4,483	3,342	1,474	5,351	230	5,641	1,520	6,129	111,117	-	191,420
Medical Services	-	76,435	101,974	27,848	41,592	84,623	59,667	108,205	5,608	20,505	2,554	-	-	-	59,811	-	588,821
Drugs	-	59,397	117,242	198,762	136,047	179,843	2,153	5,229	300	10,396	8	76	-	206	27,141	-	736,799
Repairs and Maintenance	433,532	9,467	7,332	2,328	14,208	4,833	3,393	4,350	2,120	3,153	1,323	9,777	7,068	7,669	27,991	-	538,544
Lease and Rental	-	85,153	109,098	74,207	75,147	138,687	220	90,125	200	71,931	120	125	50	115	332,560	-	977,738
Utilities	-	21,287	16,484	975	7,356	2,145	10,786	6,818	1,628	6,562	1,375	-	-	-	26,373	-	101,789
Other Expense	84,572	68,500	63,822	47,951	76,924	89,416	24,798	29,734	15,309	17,981	6,267	4,195	70	13,672	93,473	-	636,686
Interest Expense	5,585	-	65,066	-	29,585	-	7,251	12,580	-	32,141	-	-	-	-	184,360	-	336,568
Insurance	-	3,631	3,924	5,254	612	7,747	1,729	2,773	130	1,355	-	11,481	11,481	11,481	4,311	-	65,909
Total Operating Expenses	4,777,511	2,475,187	2,325,842	1,215,118	1,345,346	2,870,288	1,042,246	946,238	72,208	758,740	46,736	322,991	21,584	445,151	4,470,506	-	23,135,690
Net Performance before Depreciation & Overhead Allocations	(3,334,549)	(1,055,967)	(1,006,654)	(725,792)	(651,920)	(518,153)	(379,887)	(560,242)	42,114	(298,189)	4,170	(156,816)	(22,039)	(255,316)	(559,661)	3,992	(9,474,911)
Depreciation	4,775	88,097	35,748	5,721	22,357	20,984	1,940	1,693	917	9,080	917	917	11,458	917	199,796	-	405,316
<i>Overhead Allocations:</i>																	
OH Risk Management	66,039	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	66,039
OH Revenue Cycle	393,423	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	393,423
OH Internal Audit	16,685	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	16,685
Home Office Facilities	215,163	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	215,163
OH Administration	112,979	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	112,979
OH Human Resources	766,578	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	766,578
Legal	208,844	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	208,844
Records	30,092	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	30,092
OH Compliance	112,025	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	112,025
IT Operations	374,975	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	374,975
IT Security	115,818	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	115,818
OH Finance	321,490	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	321,490
Corporate Communications	110,152	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	110,152
OH Information Technology	143,763	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	143,763
IT Applications	1,196,708	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,196,708
IT Service Center	280,970	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	280,970
Corporate Quality	179,733	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	179,733
OH Security Services	434,173	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	434,173
OH Supply Chain	131,917	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	131,917
HIM Department	81,154	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	81,154
OH Coding	163,646	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	163,646
OH Reimbursement	10,422	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	10,422
OH Clinical Labor Pool	71,133	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	71,133
Clinical Services Admin	244,064	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	244,064
Support Services Allocation	116,070	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	116,070
OH Mail Room	27,527	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	27,527
OH Patient Experience	10,209	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	10,209
OH External Affairs	31,136	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	31,136
OH Strategic Initiatives and Projects	89,887	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	89,887
Total Overhead Allocations	6,056,775	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6,056,775
Total Expenses	10,921,547	2,563,283	2,512,282	1,220,839	1,438,605	2,891,272	1,143,683	1,078,608	73,124	847,828	47,652	323,908	33,042	446,067	5,053,016	-	30,594,759
Net Margin	\$ (9,478,585)	\$ (1,144,063)	\$ (1,193,094)	\$ (731,513)	\$ (745,179)	\$ (539,137)	\$ (481,325)	\$ (692,613)	\$ 41,197	\$ (387,278)	\$ 3,253	\$ (157,733)	\$ (33,498)	\$ (256,232)	\$ (1,142,172)	\$ 3,992	\$ (16,933,980)
Capital Contributions	191,198	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	191,198
Transfer In/(Out)	\$ 14,371,009	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 14,371,009

Primary Care Medical Statement of Revenues and Expenses
For The Eleventh Month Ended August 31, 2025

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 1,761,454	\$ 1,711,854	\$ 49,599	2.9%	\$ 2,395,749	\$ (634,296)	(26.5%)	\$ 19,884,772	\$ 18,675,378	\$ 1,209,394	6.5%	\$ 20,580,504	\$ (695,732)	(3.4%)	
							Gross Patient Revenue							
414,006	523,916	(109,910)	(21.0%)	802,273	(388,267)	(48.4%)	Contractual Allowance	6,155,062	5,733,385	421,677	7.4%	6,222,613	(67,551)	(1.1%)
660,878	598,290	62,587	10.5%	740,003	(79,125)	(10.7%)	Charity Care	6,640,408	6,527,767	112,642	1.7%	6,985,178	(344,769)	(4.9%)
258,070	234,693	23,377	10.0%	335,506	(77,436)	(23.1%)	Bad Debt	3,023,527	2,560,336	463,191	18.1%	2,660,606	362,922	13.6%
1,332,953	1,356,899	(23,946)	(1.8%)	1,877,782	(544,828)	(29.0%)	Total Contractuals and Bad Debt	15,818,998	14,821,488	997,510	6.7%	15,868,396	(49,399)	(0.3%)
557,172	444,808	112,364	25.3%	520,726	36,446	7.0%	Other Patient Revenue	3,949,961	4,852,450	(902,489)	(18.6%)	4,171,694	(221,733)	(5.3%)
985,672	799,763	185,909	23.2%	1,038,693	(53,021)	(5.1%)	Net Patient Service Revenue	8,015,735	8,706,339	(690,604)	(7.9%)	8,883,802	(868,067)	(9.8%)
55.96%	46.72%			43.36%			Collection %	40.31%	46.62%		43.17%			
531,329	683,351	(152,022)	(22.2%)	555,977	(24,648)	(4.4%)	Grants	5,414,862	7,465,512	(2,050,650)	(27.5%)	6,396,277	(981,415)	(15.3%)
-	-	-	-	-	-	-	Interest Earnings	-	-	-	-	1,943	(1,943)	-
57,671	6,568	51,103	778.1%	2,873	54,798	1,907.3%	Other Revenue	230,183	72,204	157,979	218.8%	78,693	151,490	192.5%
\$ 1,574,671	\$ 1,489,682	\$ 84,990	5.7%	\$ 1,597,542	\$ (22,871)	(1.4%)	Total Revenues	\$ 13,660,779	\$ 16,244,056	\$ (2,583,276)	(15.9%)	\$ 15,360,715	\$ (1,699,935)	(11.1%)
							Direct Operating Expenses:							
1,336,475	1,664,478	328,004	19.7%	1,559,641	223,167	14.3%	Salaries and Wages	14,324,899	17,947,216	3,622,318	20.2%	16,608,327	2,283,428	13.7%
263,572	425,463	161,891	38.1%	419,692	156,120	37.2%	Benefits	3,870,321	4,643,572	773,251	16.7%	4,485,853	615,532	13.7%
14,873	33,382	18,509	55.4%	70,843	55,971	79.0%	Purchased Services	294,651	367,202	72,551	19.8%	1,223,887	929,236	75.9%
37,736	96,946	59,210	61.1%	47,808	10,072	21.1%	Medical Supplies	471,545	1,066,402	594,857	55.8%	698,379	226,834	32.5%
6,072	25,259	19,186	76.0%	8,941	2,868	32.1%	Other Supplies	191,420	277,845	86,425	31.1%	226,513	35,093	15.5%
35,568	77,899	42,331	54.3%	104,037	68,469	65.8%	Medical Services	588,821	856,889	268,068	31.3%	978,399	389,578	39.8%
72,533	58,471	(14,062)	(24.0%)	82,270	9,736	11.8%	Drugs	736,799	643,181	(93,618)	(14.6%)	601,875	(134,924)	(22.4%)
51,596	58,374	6,778	11.6%	42,564	(9,032)	(21.2%)	Repairs and Maintenance	538,544	642,114	103,570	16.1%	453,921	(84,623)	(18.6%)
(19,226)	108,402	127,628	117.7%	11,827	31,053	262.6%	Lease and Rental	977,738	1,192,422	214,684	18.0%	645,563	(332,175)	(51.5%)
10,488	13,204	2,716	20.6%	7,493	(2,996)	(40.0%)	Utilities	101,789	145,244	43,455	29.9%	74,473	(27,316)	(36.7%)
55,471	85,959	30,488	35.5%	44,922	(10,548)	(23.5%)	Other Expense	636,686	945,545	308,859	32.7%	843,078	206,392	24.5%
29,688	13,310	(16,378)	(123.1%)	14,520	(15,168)	(104.5%)	Interest Expense	336,568	146,413	(190,155)	(129.9%)	169,183	(167,385)	(98.9%)
4,466	6,424	1,958	30.5%	6,459	1,993	30.9%	Insurance	65,909	70,661	4,752	6.7%	60,150	(5,759)	(9.6%)
1,899,312	2,667,571	768,258	28.8%	2,421,018	521,706	21.5%	Total Operating Expenses	23,135,690	28,944,708	5,809,017	20.1%	27,069,601	3,933,911	14.5%
							Net Performance before Depreciation & Overhead Allocations							
\$ (324,641)	\$ (1,177,889)	\$ 853,248	(72.4%)	\$ (823,476)	\$ 498,835	(60.6%)		\$ (9,474,911)	\$ (12,700,652)	\$ 3,225,741	(25.4%)	\$ (11,708,886)	\$ 2,233,975	(19.1%)
145,498	98,507	(46,992)	(47.7%)	77,391	(68,107)	(88.0%)	Depreciation	1,402,294	1,083,574	(318,720)	(29.4%)	846,685	(555,609)	(65.6%)
							Overhead Allocations:							
4,884	9,426	4,542	48.2%	9,718	4,834	49.7%	OH Risk Management	66,039	103,686	37,647	36.3%	99,810	33,771	33.8%
39,231	44,914	5,683	12.7%	81,226	41,995	51.7%	OH Revenue Cycle	393,423	494,054	100,631	20.4%	684,231	290,808	42.5%
1,445	2,507	1,062	42.4%	3,576	2,131	59.6%	OH Internal Audit	16,685	27,577	10,892	39.5%	25,375	8,690	34.2%
25,954	18,927	(7,027)	(37.1%)	31,556	5,602	17.8%	Home Office Facilities	215,163	208,197	(6,966)	(3.3%)	225,206	10,043	4.5%
9,299	10,195	896	8.8%	10,186	887	8.7%	OH Administration	112,979	112,145	(834)	(0.7%)	128,110	15,131	11.8%
65,468	84,897	19,429	22.9%	74,747	9,279	12.4%	OH Human Resources	766,578	933,867	167,289	17.9%	768,372	1,794	0.2%
225	28,821	28,596	99.2%	25,268	25,043	99.1%	Legal	208,844	317,031	108,187	34.1%	252,247	43,403	17.2%
2,766	3,471	705	20.3%	3,118	352	11.3%	Records	30,092	38,181	8,089	21.2%	33,362	3,270	9.8%
10,863	11,681	818	7.0%	-	(10,863)	-	OH Compliance	112,025	128,491	16,466	12.8%	89,268	(22,757)	(25.5%)
67,278	48,238	(19,040)	(39.5%)	44,432	(22,846)	(51.4%)	IT Operations	374,975	530,618	155,643	29.3%	456,345	81,370	17.8%
10,189	16,746	6,557	39.2%	9,524	(665)	(7.0%)	IT Security	115,818	184,206	68,388	37.1%	128,811	12,993	10.1%
29,562	32,113	2,551	7.9%	30,316	754	2.5%	OH Finance	321,490	353,243	31,753	9.0%	347,337	25,847	7.4%
10,810	14,014	3,204	22.9%	15,193	4,383	28.8%	Corporate Communications	110,152	154,154	44,002	28.5%	134,385	24,233	18.0%
16,463	19,068	2,605	13.7%	14,558	(1,905)	(13.1%)	OH Information Technology	143,763	209,748	65,985	31.5%	192,003	48,240	25.1%
116,214	160,202	43,988	27.5%	261,535	145,321	55.6%	IT Applications	1,196,708	1,762,222	565,514	32.1%	1,646,732	450,024	27.3%

Primary Care Medical Statement of Revenues and Expenses
For The Eleventh Month Ended August 31, 2025

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
21,390	34,544	13,154	38.1%	48,350	26,960	55.8%	IT Service Center	280,970	379,984	99,014	26.1%	360,681	79,711	22.1%
-	-	-	-	14,222	14,222	-	OH Performance Excellence	-	-	-	-	152,403	152,403	-
13,248	14,978	1,730	11.6%	3,102	(10,146)	(327.1%)	Corporate Quality	179,733	164,758	(14,975)	(9.1%)	137,978	(41,755)	(30.3%)
46,852	40,782	(6,070)	(14.9%)	35,966	(10,886)	(30.3%)	OH Security Services	434,173	448,602	14,429	3.2%	305,253	(128,920)	(42.2%)
13,236	15,779	2,543	16.1%	15,245	2,009	13.2%	OH Supply Chain	131,917	173,569	41,652	24.0%	162,483	30,566	18.8%
5,960	9,065	3,105	34.3%	9,933	3,973	40.0%	HIM Department	81,154	99,715	18,561	18.6%	114,342	33,188	29.0%
13,006	19,639	6,633	33.8%	17,095	4,089	23.9%	OH Coding	163,646	216,029	52,383	24.2%	202,531	38,885	19.2%
2,271	1,769	(502)	(28.4%)	2,990	719	24.0%	OH Reimbursement	10,422	19,459	9,037	46.4%	21,735	11,313	52.0%
-	8,355	8,355	-	6,916	6,916	-	OH Clinical Labor Pool	71,133	91,905	20,772	22.6%	77,118	5,985	7.8%
25,127	28,165	3,038	10.8%	16,297	(8,830)	(54.2%)	Clinical Services Admin	244,064	309,815	65,751	21.2%	224,685	(19,379)	(8.6%)
-	9,709	9,709	-	6,402	6,402	-	Support Services Allocation	116,070	106,799	(9,271)	(8.7%)	88,263	(27,807)	(31.5%)
2,634	3,385	751	22.2%	3,125	491	15.7%	OH Mail Room	27,527	37,235	9,708	26.1%	37,607	10,080	26.8%
1,125	3,889	2,764	71.1%	-	(1,125)	-	OH Patient Experience	10,209	42,779	32,570	76.1%	-	(10,209)	-
-	2,595	2,595	-	-	-	-	OH External Affairs	31,136	28,545	(2,591)	(9.1%)	-	(31,136)	-
7,178	12,556	5,378	42.8%	-	(7,178)	-	OH Strategic Initiatives and Projects	89,887	138,116	48,229	34.9%	-	(89,887)	-
562,678	710,430	147,752	20.8%	794,596	231,918	29.2%	Total Overhead Allocations-	6,056,775	7,814,730	1,757,955	22.5%	7,096,674	1,039,899	14.7%
2,607,489	3,476,507	869,019	25.0%	3,293,005	685,517	20.8%	Total Expenses	30,594,759	37,843,012	7,248,253	19.2%	35,012,960	4,418,201	12.6%
\$ (1,032,817)	\$ (1,986,826)	\$ 954,009	(48.0%)	\$ (1,695,463)	\$ 662,646	(39.1%)	Net Margin	\$ (16,933,980)	\$ (21,598,956)	\$ 4,664,976	(21.6%)	\$ (19,652,245)	\$ 2,718,266	(13.8%)
114,784	10,478	104,306	995.5%	-	114,784	-	Capital Contributions,	191,198	115,258	75,940	65.9%	706,370	(515,172)	(72.9%)
-	\$ 2,333,333	\$ (2,333,333)	-	-	-	-	Transfer In/(Out)	\$ 14,371,009	\$ 25,666,663	\$ (11,295,654)	(44.0%)	\$ 15,781,126	\$ 1,410,117	8.9%

Primary Care Clinics - Dental Services and Expenses by Location (YTD)
For The Eleventh Month Ended August 31, 2025

	Dental Clinic Administration	Belle Glade Dental Clinic	Delray Dental Clinic	Lantana Dental Clinic	West Palm Beach Dental Clinic	Atlantis Dental Clinic	Port Dental Clinic	Total
Gross Patient Revenue	-	\$ 1,719,164	\$ 2,791,508	\$ 880,367	\$ 3,529,996	\$ 1,590,939	\$ 28,243	\$ 10,540,216
Contractual Allowance	-	777,371	743,661	396,319	1,211,619	308,278	25	3,437,273
Charity Care	-	532,660	1,291,808	377,868	1,611,186	587,516	28,243	4,429,280
Bad Debt	-	261,855	529,575	251,075	392,899	45,771	557	1,481,732
Total Contractual Allowances and Bad Debt	-	1,571,885	2,565,044	1,025,262	3,215,703	941,564	28,825	9,348,284
Other Patient Revenue	-	366,730	408,153	114,468	623,801	348,539	143	1,861,834
Net Patient Revenue	-	514,008	634,617	(30,427)	938,093	997,914	(438)	3,053,766
Collection %	-	29.90%	22.73%	(3.46%)	26.57%	62.72%	(1.55%)	28.97%
Grants	26,681	157,174	298,144	97,428	449,958	207,876	-	1,237,262
Other Revenue	1,642	-	-	-	-	-	-	1,642
Total Other Revenues	28,323	157,174	298,144	97,428	449,958	207,876	-	1,238,904
Total Revenues	\$ 28,323	\$ 671,183	\$ 932,762	\$ 67,001	\$ 1,388,051	\$ 1,205,790	\$ (438)	\$ 4,292,670
<i>Direct Operational Expenses:</i>								
Salaries and Wages	83,661	429,269	792,480	242,460	1,237,469	569,749	-	3,355,088
Benefits	22,238	125,132	180,973	80,622	315,698	160,412	-	885,074
Purchased Services	-	9,535	11,545	3,500	1,126	1,485	-	27,191
Medical Supplies	-	58,147	82,885	25,141	137,255	35,442	-	338,869
Other Supplies	-	16,576	34,106	583	33,012	27,102	-	111,379
Repairs and Maintenance	-	4,760	5,875	5,866	14,990	10,303	-	41,794
Lease and Rental	-	34,994	63,155	29,394	119,651	50,365	-	297,559
Utilities	-	8,776	8,485	975	2,145	4,480	-	24,861
Other Expense	9,897	19,023	33,065	44,012	60,457	21,541	-	187,994
Interest Expense	-	-	25,821	-	-	26,980	-	52,802
Insurance	-	1,394	-	-	-	-	-	1,394
Total Operating Expenses	115,795	707,606	1,238,390	432,552	1,921,803	907,859	-	5,324,005
Net Performance before Depreciation & Overhead Allocations	(87,472)	(36,423)	(305,629)	(365,552)	(533,752)	297,931	(438)	(1,031,335)
Depreciation	-	12,679	30,053	5,243	31,767	72,131	-	151,872
<i>Overhead Allocations:</i>								
OH Risk Management	16,476	-	-	-	-	-	-	16,476
OH Revenue Cycle	314,738	-	-	-	-	-	-	314,738
OH Internal Audit	4,162	-	-	-	-	-	-	4,162
Home Office Facilities	25,531	-	-	-	-	-	-	25,531
OH Administration	28,187	-	-	-	-	-	-	28,187
OH Human Resources	206,608	-	-	-	-	-	-	206,608
Legal	52,104	-	-	-	-	-	-	52,104
Records	7,508	-	-	-	-	-	-	7,508
OH Compliance	27,949	-	-	-	-	-	-	27,949
IT Operations	93,551	-	-	-	-	-	-	93,551
IT Security	28,894	-	-	-	-	-	-	28,894
OH Finance	80,208	-	-	-	-	-	-	80,208
Corporate Communications	27,481	-	-	-	-	-	-	27,481
OH Information Technology	35,865	-	-	-	-	-	-	35,865
IT Applications	334,917	-	-	-	-	-	-	334,917
IT Service Center	70,098	-	-	-	-	-	-	70,098
Corporate Quality	44,841	-	-	-	-	-	-	44,841
OH Security Services	60,000	-	-	-	-	-	-	60,000
OH Supply Chain	32,910	-	-	-	-	-	-	32,910
HIM Department	20,249	-	-	-	-	-	-	20,249
OH Coding	40,826	-	-	-	-	-	-	40,826
OH Reimbursement	2,601	-	-	-	-	-	-	2,601
OH Clinical Labor Pool	17,746	-	-	-	-	-	-	17,746
Clinical Services Admin	60,890	-	-	-	-	-	-	60,890
Support Services Allocation	28,958	-	-	-	-	-	-	28,958
OH Mail Room	6,867	-	-	-	-	-	-	6,867
OH Patient Experience	2,546	-	-	-	-	-	-	2,546
OH External Affairs	7,769	-	-	-	-	-	-	7,769
OH Strategic Initiatives and Projects	22,425	-	-	-	-	-	-	22,425
Total Overhead Allocations	1,702,905	-	-	-	-	-	-	1,702,905
Total Expenses	1,818,700	720,285	1,328,244	437,795	1,953,570	1,035,998	-	7,294,592
Net Margin	\$ (1,790,377)	\$ (48,102)	\$ (395,482)	\$ (370,794)	\$ (565,519)	\$ 169,791	\$ (438)	\$ (3,001,922)
Capital Contributions	190,862	-	-	-	-	-	-	190,862
Transfer In/(Out)	\$ 3,520,056	-	25	-	-	-	-	\$ 3,520,056

Primary Care Dental Statement of Revenues and Expenses
For The Eleventh Month Ended August 31, 2025

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 992,156	\$ 1,005,030	\$ (12,873)	(1.3%)	\$ 1,030,507	\$ (38,350)	(3.7%)	Gross Patient Revenue	\$ 10,540,216	\$ 10,979,027	\$ (438,811)	(4.0%)	\$ 10,520,603	\$ 19,613	0.2%
289,172	371,547	(82,375)	(22.2%)	287,747	1,425	0.5%	Contractual Allowance	3,437,273	4,061,610	(624,338)	(15.4%)	3,476,378	(39,105)	(1.1%)
403,968	377,183	26,785	7.1%	416,800	(12,832)	(3.1%)	Charity Care	4,429,280	4,119,419	309,861	7.5%	4,496,881	(67,602)	(1.5%)
174,702	119,900	54,802	45.7%	103,255	71,447	69.2%	Bad Debt	1,481,732	1,309,372	172,360	13.2%	1,391,322	90,409	6.5%
867,842	868,630	(788)	(0.1%)	807,802	60,040	7.4%	Total Contractuals and Bad Debt	9,348,284	9,490,401	(142,118)	(1.5%)	9,364,581	(16,298)	(0.2%)
238,680	203,262	35,418	17.4%	246,085	(7,405)	(3.0%)	Other Patient Revenue	1,861,834	2,220,803	(358,969)	(16.2%)	1,959,394	(97,561)	(5.0%)
362,994	339,662	23,332	6.9%	468,790	(105,795)	(22.6%)	Net Patient Service Revenue	3,053,766	3,709,429	(655,662)	(17.7%)	3,115,416	(61,650)	(2.0%)
36.59%	33.80%			45.49%			Collection %	28.97%	33.79%		29.61%			
97,666	128,066	(30,400)	(23.7%)	105,768	(8,102)	(7.7%)	Grants	1,237,262	1,397,619	(160,356)	(11.5%)	1,257,324	(20,062)	(1.6%)
30	167	(137)	(82.0%)	250	(220)	(88.0%)	Other Revenue	1,642	1,837	(195)	(10.6%)	1,919	(277)	(14.4%)
\$ 460,690	\$ 467,895	\$ (7,204)	(1.5%)	\$ 574,808	\$ (114,117)	(19.9%)	Total Revenues	\$ 4,292,670	\$ 5,108,884	\$ (816,214)	(16.0%)	\$ 4,374,659	\$ (81,988)	(1.9%)
Direct Operating Expenses:							Direct Operating Expenses:							
329,893	337,790	7,897	2.3%	328,303	(1,591)	(0.5%)	Salaries and Wages	3,355,088	3,648,282	293,194	8.0%	3,570,745	215,657	6.0%
65,605	98,622	33,017	33.5%	91,086	25,480	28.0%	Benefits	885,074	1,077,951	192,877	17.9%	978,462	93,388	9.5%
2,020	6,940	4,920	70.9%	2,416	396	16.4%	Purchased Services	27,191	76,343	49,152	64.4%	39,197	12,007	30.6%
22,123	28,499	6,376	22.4%	21,770	(353)	(1.6%)	Medical Supplies	338,869	313,489	(25,380)	(8.1%)	294,267	(44,602)	(15.2%)
35,545	8,827	(26,718)	(302.7%)	676	(34,869)	(5,158.1%)	Other Supplies	111,379	97,097	(14,282)	(14.7%)	50,349	(61,030)	(121.2%)
-	137	137	-	-	-	-	Drugs	-	1,507	1,507	-	-	-	-
2,087	3,950	1,863	47.2%	2,146	59	2.7%	Repairs and Maintenance	41,794	43,450	1,656	3.8%	38,685	(3,109)	(8.0%)
13,216	22,589	9,373	41.5%	(3,108)	(16,324)	525.2%	Lease and Rental	297,559	248,478	(49,081)	(19.8%)	214,527	(83,032)	(38.7%)
2,341	2,272	(69)	(3.0%)	1,639	(702)	(42.8%)	Utilities	24,861	24,992	131	0.5%	20,059	(4,802)	(23.9%)
11,650	18,028	6,378	35.4%	18,520	6,870	37.1%	Other Expense	187,994	198,304	10,310	5.2%	147,205	(40,789)	(27.7%)
4,655	2,339	(2,316)	(99.0%)	2,456	(2,199)	(89.5%)	Interest Expense	52,802	25,729	(27,073)	(105.2%)	27,820	(24,982)	(89.8%)
35	175	140	80.0%	176	142	80.7%	Insurance	1,394	1,925	531	27.6%	1,023	(371)	(36.3%)
489,171	530,168	40,997	7.7%	466,079	(23,092)	(5.0%)	Total Operating Expenses	5,324,005	5,757,548	433,542	7.5%	5,382,339	58,333	1.1%
\$ (28,480)	\$ (62,273)	\$ 33,792	(54.3%)	\$ 108,729	\$ (137,209)	(126.2%)	Net Performance before Depreciation & Overhead Allocations	\$ (1,031,335)	\$ (648,664)	\$ (382,671)	59.0%	\$ (1,007,680)	\$ (23,655)	2.3%
30,396	18,363	(12,033)	(65.5%)	13,494	(16,902)	(125.3%)	Depreciation	267,682	201,993	(65,689)	(32.5%)	133,892	(133,790)	(99.9%)
Overhead Allocations:							Overhead Allocations:							
1,219	2,352	1,133	48.2%	1,929	710	36.8%	OH Risk Management	16,476	25,872	9,396	36.3%	19,811	3,335	16.8%
31,385	35,931	4,546	12.7%	28,060	(3,325)	(11.8%)	OH Revenue Cycle	314,738	395,241	80,503	20.4%	236,371	(78,367)	(33.2%)
360	626	266	42.5%	710	350	49.3%	OH Internal Audit	4,162	6,886	2,724	39.6%	5,035	873	17.3%
3,080	2,246	(834)	(37.1%)	8,840	5,760	65.2%	Home Office Facilities	25,531	24,706	(825)	(3.3%)	63,085	37,554	59.5%
2,320	2,544	224	8.8%	2,022	(298)	(14.7%)	OH Administration	28,187	27,984	(203)	(0.7%)	25,428	(2,759)	(10.9%)
17,645	22,881	5,236	22.9%	16,135	(1,510)	(9.4%)	OH Human Resources	206,608	251,691	45,083	17.9%	165,861	(40,747)	(24.6%)
56	7,190	7,134	99.2%	5,015	4,959	98.9%	Legal	52,104	79,090	26,986	34.1%	50,065	(2,039)	(4.1%)
690	866	176	20.3%	619	(71)	(11.5%)	Records	7,508	9,526	2,018	21.2%	6,622	(886)	(13.4%)
2,710	2,914	204	7.0%	-	(2,710)	-	OH Compliance	27,949	32,054	4,105	12.8%	17,717	(10,232)	(57.8%)
16,785	12,035	(4,750)	(39.5%)	8,819	(7,966)	(90.3%)	IT Operations	93,551	132,385	38,834	29.3%	90,576	(2,975)	(3.3%)
2,542	4,178	1,636	39.2%	1,890	(652)	(34.5%)	IT Security	28,894	45,958	17,064	37.1%	25,567	(3,327)	(13.0%)
7,375	8,012	637	8.0%	6,017	(1,358)	(22.6%)	OH Finance	80,208	88,132	7,924	9.0%	68,940	(11,268)	(16.3%)
2,697	3,496	799	22.9%	3,015	318	10.5%	Corporate Communications	27,481	38,456	10,975	28.5%	26,673	(808)	(3.0%)
4,107	4,757	650	13.7%	2,890	(1,217)	(42.1%)	OH Information Technology	35,865	52,327	16,462	31.5%	38,109	2,244	5.9%
32,524	57,582	25,058	43.5%	51,910	19,386	37.3%	IT Applications	334,917	633,402	298,485	47.1%	326,845	(8,072)	(2.5%)
5,337	8,618	3,281	38.1%	9,596	4,259	44.4%	IT Service Center	70,098	94,798	24,700	26.1%	71,588	1,490	2.1%
-	-	-	-	2,823	2,823	-	OH Performance Excellence	-	-	-	-	30,249	30,249	-

Primary Care Dental Statement of Revenues and Expenses
For The Eleventh Month Ended August 31, 2025

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
3,305	3,737	432	11.6%	616	(2,689)	(436.5%)	44,841	41,107	(3,734)	(9.1%)	27,385	(17,456)	(63.7%)
6,475	5,636	(839)	(14.9%)	17,983	11,508	64.0%	60,000	61,996	1,996	3.2%	152,626	92,626	60.7%
3,302	3,937	635	16.1%	3,026	(276)	(9.1%)	32,910	43,307	10,397	24.0%	32,249	(661)	(2.0%)
1,487	2,262	775	34.3%	1,972	485	24.6%	20,249	24,882	4,633	18.6%	22,695	2,446	10.8%
3,245	4,900	1,655	33.8%	3,393	148	4.4%	40,826	53,900	13,074	24.3%	40,199	(627)	(1.6%)
567	441	(126)	(28.6%)	593	26	4.4%	2,601	4,851	2,250	46.4%	4,315	1,714	39.7%
-	2,084	2,084	-	1,373	1,373	-	17,746	22,924	5,178	22.6%	15,306	(2,440)	(15.9%)
6,269	7,027	758	10.8%	3,235	(3,034)	(93.8%)	60,890	77,297	16,407	21.2%	44,596	(16,294)	(36.5%)
-	2,422	2,422	-	1,271	1,271	-	28,958	26,642	(2,316)	(8.7%)	17,518	(11,440)	(65.3%)
657	844	187	22.2%	620	(37)	(6.0%)	6,867	9,284	2,417	26.0%	7,465	598	8.0%
281	970	689	71.0%	-	(281)	-	2,546	10,670	8,124	76.1%	-	(2,546)	-
-	647	647	-	-	-	-	7,769	7,117	(652)	(9.2%)	-	(7,769)	-
1,791	3,133	1,342	42.8%	-	(1,791)	-	22,425	34,463	12,038	34.9%	-	(22,425)	-
158,211	214,268	56,057	26.2%	184,372	26,161	14.2%	1,702,905	2,356,948	654,043	27.7%	1,632,897	(70,008)	(4.3%)
677,778	762,799	85,021	11.1%	663,945	(13,833)	(2.1%)	7,294,592	8,316,489	1,021,896	12.3%	7,149,127	(145,465)	(2.0%)
\$ (217,087)	\$ (294,904)	\$ 77,817	(26.4%)	\$ (89,137)	\$ (127,950)	143.5%	\$ (3,001,922)	\$ (3,207,604)	\$ 205,682	(6.4%)	\$ (2,774,468)	\$ (227,454)	8.2%
-	20,662	(20,662)	-	12,144	(12,144)	-	190,862	227,282	(36,420)	(16.0%)	365,977	(175,116)	(47.8%)
-	\$ 500,000	\$ (500,000)	-	-	-	-	\$ 3,520,056	\$ 5,500,000	\$ (1,979,944)	(36.0%)	\$ 3,603,316	\$ 83,260	2.3%

Primary Care Behavioral Health Statement of Revenues and Expenses
For The Eleventh Month Ended August 31, 2025

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 554,176	\$ 146,099	\$ 408,078	279.3%	\$ 279,307	\$ 274,869	98.4%	Gross Patient Revenue	\$ 4,897,399	\$ 1,607,084	\$ 3,290,316	204.7%	\$ 2,020,287	\$ 2,877,112	142.4%
207,647	53,458	154,190	288.4%	116,668	90,980	78.0%	Contractual Allowance	1,940,164	588,033	1,352,131	229.9%	781,980	1,158,184	148.1%
131,469	19,548	111,922	572.5%	58,499	72,970	124.7%	Charity Care	1,122,249	215,023	907,227	421.9%	473,286	648,963	137.1%
172,031	26,064	145,967	560.0%	77,060	94,971	123.2%	Bad Debt	1,381,348	286,708	1,094,640	381.8%	537,514	843,834	157.0%
511,148	99,069	412,078	416.0%	252,227	258,921	102.7%	Total Contractuals and Bad Debt	4,443,762	1,089,764	3,353,998	307.8%	1,792,781	2,650,981	147.9%
11,735	1,622	10,114	623.6%	4,057	7,679	189.3%	Other Patient Revenue	161,867	17,837	144,031	807.5%	31,984	129,883	406.1%
54,764	48,651	6,113	12.6%	31,137	23,627	75.9%	Net Patient Service Revenue	615,505	535,156	80,348	15.0%	259,490	356,015	137.2%
9.88%	33.30%			11.15%			Collection %	12.57%	33.30%		12.84%			
105,798	50,000	55,798	111.6%	-	105,798	-	Grants	889,658	550,000	339,658	61.8%	-	889,658	-
\$ 160,562	\$ 98,651	\$ 61,911	62.8%	\$ 31,137	\$ 129,425	415.7%	Total Revenues	\$ 1,505,163	\$ 1,085,156	\$ 420,006	38.7%	\$ 259,490	\$ 1,245,673	480.0%
Direct Operating Expenses:														
307,330	414,987	107,658	25.9%	87,048	(220,281)	(253.1%)	Salaries and Wages	3,125,199	4,536,345	1,411,145	31.1%	167,818	(2,957,381)	(1,762.3%)
49,419	123,652	74,233	60.0%	14,700	(34,719)	(236.2%)	Benefits	673,694	1,354,359	680,665	50.3%	27,086	(646,609)	(2,387.2%)
-	62	62	-	-	-	-	Purchased Services	-	680	680	-	-	-	-
-	2,603	2,603	-	-	-	-	Medical Supplies	-	28,633	28,633	-	-	-	-
-	6,836	6,836	-	-	-	-	Other Supplies	-	75,194	75,194	-	-	-	-
-	4,754	4,754	-	-	-	-	Drugs	-	52,294	52,294	-	-	-	-
777	-	(777)	-	-	(777)	-	Lease and Rental	1,554	-	(1,554)	-	-	(1,554)	-
662	1,537	875	56.9%	1,763	1,101	62.5%	Other Expense	27,809	16,907	(10,902)	(64.5%)	1,763	(26,046)	(1,477.4%)
358,188	554,432	196,243	35.4%	103,512	(254,677)	(246.0%)	Total Operating Expenses	3,828,256	6,064,412	2,236,155	36.9%	196,667	(3,631,589)	(1,846.6%)
\$ (197,626)	\$ (455,781)	\$ 258,155	(56.6%)	\$ (72,375)	\$ (125,251)	173.1%	Net Performance before Depreciation & Overhead Allocations	\$ (2,323,093)	\$ (4,979,255)	\$ 2,656,162	(53.3%)	\$ 62,823	\$ (2,385,916)	(3,797.8%)
Overhead Allocations:														
1,149	2,217	1,068	48.2%	-	(1,149)	-	OH Risk Management	15,537	24,387	8,850	36.3%	-	(15,537)	-
7,846	8,983	1,137	12.7%	-	(7,846)	-	OH Revenue Cycle	78,684	98,813	20,129	20.4%	-	(78,684)	-
340	590	250	42.4%	-	(340)	-	OH Internal Audit	3,927	6,490	2,563	39.5%	-	(3,927)	-
3,080	2,246	(834)	(37.1%)	-	(3,080)	-	Home Office Facilities	25,531	24,706	(825)	(3.3%)	-	(25,531)	-
2,188	2,398	210	8.8%	-	(2,188)	-	OH Administration	26,579	26,378	(201)	(0.8%)	-	(26,579)	-
17,385	22,545	5,160	22.9%	-	(17,385)	-	OH Human Resources	203,571	247,995	44,424	17.9%	-	(203,571)	-
53	6,780	6,727	99.2%	-	(53)	-	Legal	49,131	74,580	25,449	34.1%	-	(49,131)	-
651	817	166	20.3%	-	(651)	-	Records	7,080	8,987	1,907	21.2%	-	(7,080)	-
2,556	2,748	192	7.0%	-	(2,556)	-	OH Compliance	26,354	30,228	3,874	12.8%	-	(26,354)	-
15,827	11,348	(4,479)	(39.5%)	-	(15,827)	-	IT Operations	88,213	124,828	36,615	29.3%	-	(88,213)	-
2,397	3,940	1,543	39.2%	-	(2,397)	-	IT Security	27,246	43,340	16,094	37.1%	-	(27,246)	-
6,954	7,555	601	8.0%	-	(6,954)	-	OH Finance	75,631	83,105	7,474	9.0%	-	(75,631)	-
2,543	3,297	754	22.9%	-	(2,543)	-	Corporate Communications	25,913	36,267	10,354	28.5%	-	(25,913)	-
3,873	4,486	613	13.7%	-	(3,873)	-	OH Information Technology	33,821	49,346	15,525	31.5%	-	(33,821)	-
-	24,333	24,333	-	-	-	-	IT Applications	291,996	267,663	(24,333)	(9.1%)	-	(291,996)	-
5,032	8,126	3,094	38.1%	-	(5,032)	-	IT Service Center	66,099	89,386	23,287	26.1%	-	(66,099)	-
3,117	3,524	407	11.5%	-	(3,117)	-	Corporate Quality	42,281	38,764	(3,517)	(9.1%)	-	(42,281)	-
12,949	11,272	(1,677)	(14.9%)	-	(12,949)	-	OH Security Services	120,000	123,992	3,992	3.2%	-	(120,000)	-
3,114	3,712	598	16.1%	-	(3,114)	-	OH Supply Chain	31,033	40,832	9,799	24.0%	-	(31,033)	-
1,402	2,132	730	34.2%	-	(1,402)	-	HIM Department	19,093	23,452	4,359	18.6%	-	(19,093)	-
3,060	4,620	1,560	33.8%	-	(3,060)	-	OH Coding	38,496	50,820	12,324	24.3%	-	(38,496)	-
534	416	(118)	(28.4%)	-	(534)	-	OH Reimbursement	2,451	4,576	2,125	46.4%	-	(2,451)	-
-	1,966	1,966	-	-	-	-	OH Clinical Labor Pool	16,733	21,626	4,893	22.6%	-	(16,733)	-
5,911	6,626	715	10.8%	-	(5,911)	-	Clinical Services Admin	57,417	72,886	15,469	21.2%	-	(57,417)	-

Primary Care Behavioral Health Statement of Revenues and Expenses
 For The Eleventh Month Ended August 31, 2025

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
-	2,284	2,284	-	-	-	-	27,306	25,124	(2,182)	(8.7%)	-	(27,306)	-
620	796	176	22.1%	-	(620)	-	6,475	8,756	2,281	26.1%	-	(6,475)	-
265	915	650	71.0%	-	(265)	-	2,402	10,065	7,663	76.1%	-	(2,402)	-
-	610	610	-	-	-	-	7,327	6,710	(617)	(9.2%)	-	(7,327)	-
1,689	2,954	1,265	42.8%	-	(1,689)	-	21,148	32,494	11,346	34.9%	-	(21,148)	-
104,535	154,236	49,701	32.2%	-	(104,535)	-	1,437,475	1,696,596	259,121	15.3%	-	(1,437,475)	-
462,723	708,668	245,944	34.7%	103,512	(359,212)	(347.0%)	5,265,731	7,761,008	2,495,276	32.2%	196,667	(5,069,064)	(2,577.5%)
\$ (302,161)	\$ (610,017)	\$ 307,856	(50.5%)	\$ (72,375)	\$ (229,786)	317.5%	\$ (3,760,568)	\$ (6,675,851)	\$ 2,915,283	(43.7%)	\$ 62,823	\$ (3,823,391)	(6,086.0%)
-	\$ 750,000	\$ (750,000)	-	-	-	-	\$ 3,442,884	\$ 8,249,996	\$ (4,807,112)	(58.3%)	\$ (39,793)	\$ (3,482,677)	8,752.0%



District Clinic Holdings, Inc.

	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
Clinic Visits - Adults and Pediatrics																
West Palm Beach	1,551	1,218	1,329	1,460	1,293	1,290	1,358	1,341	1,267	1,419	1,347	-	14,873	17,493	(15.0%)	17,612
Delray & Women's Health Care	1,056	897	902	1,039	883	770	930	832	678	863	762	-	9,612	8,590	11.9%	9,088
Belle Glade & Women's Health Care	793	760	802	895	774	876	868	843	764	794	826	-	8,995	8,912	0.9%	9,437
Jupiter & Women's Health Care	597	500	441	538	580	511	600	549	517	537	437	-	5,807	5,845	(0.7%)	5,973
West Boca & Women's Health Care	276	235	255	251	262	260	290	305	274	259	257	-	2,924	3,671	(20.3%)	3,911
Mangonia Park	677	589	590	705	578	610	608	638	617	692	566	-	6,870	9,050	(24.1%)	7,931
Lantana (closed Feb 2025)	1,730	1,432	1,548	1,391	438	-	-	-	-	-	-	-	6,539	6,550	(0.2%)	20,434
Lake Worth & Women's Health Care (closed Feb 2025)	1,268	1,013	1,066	1,108	361	-	-	-	-	-	-	-	4,816	5,173	(6.9%)	12,810
Atlantis & Womens Health Care (opened Feb 2025)	-	-	-	3	1,153	2,433	2,839	2,464	2,625	2,941	2,965	-	17,423	21,439	(100.0%)	-
Lewis Center	40	57	76	76	62	71	88	45	61	68	53	-	697	313	122.7%	459
St Ann Place	68	54	13	56	44	53	39	33	16	20	6	-	402	142	183.1%	145
Cib Mob 1 Warrior (Mobile Van)	10	-	-	-	-	-	-	-	-	63	98	-	171	-	100.0%	80
Cib Mob 2 Scout	-	-	-	-	-	-	-	-	-	-	-	-	-	13	(100.0%)	-
Cib Mob 3 Hero	84	83	84	86	84	67	75	71	77	80	25	-	816	412	98.1%	463
Portable Medical	96	66	72	121	71	49	73	38	-	33	104	-	723	575	25.7%	789
Total Clinic Visits	8,246	6,904	7,178	7,729	6,583	6,990	7,768	7,159	6,896	7,769	7,446	-	80,668	88,178	(8.5%)	89,132
Dental Visits																
West Palm Beach Dental	1053	957	1091	1210	1,097	1,167	1,056	1,245	1,101	1,341	1,218	-	12,536	12,589	(0.4%)	12,055
Delray Dental	734	654	870	936	840	858	930	636	880	1,031	958	-	9,327	6,924	34.7%	8,236
Belle Glade Dental	515	411	454	481	431	535	550	506	505	520	489	-	5,397	5,528	(2.4%)	5,429
Lantana Dental	661	545	269	759	204	-	-	-	-	-	-	-	2,438	3,342	(27.0%)	9,787
Atlantis Dental	-	-	-	-	221	655	814	791	726	854	701	-	4,762	6,567	(27.5%)	-
Portable Dental	-	16	8	11	8	9	-	-	8	5	-	-	65	156	(58.3%)	125
Total Dental Visits	2,963	2,583	2,692	3,397	2,801	3,224	3,350	3,178	3,220	3,751	3,366	-	34,525	35,106	(1.7%)	35,632
Total Medical and Dental Visits	11,209	9,487	9,870	11,126	9,384	10,214	11,118	10,337	10,116	11,520	10,812	-	115,193	123,284	(6.6%)	124,764
Behavioral Health Visits**																
West Palm Beach BH	-	-	-	-	-	-	107	89	120	205	115	-	636	1,459	(56.4%)	2,295
Delray BH	369	343	426	482	541	569	717	599	535	560	572	-	5,713	3,233	76.7%	4,981
Lantana BH	3	1	2	10	9	-	-	-	-	-	-	-	25	-	100.0%	2,492
Atlantis BH	-	-	-	1	12	50	374	486	510	548	540	-	2,521	-	100.0%	-
Belle Glade BH	2	-	-	-	-	-	13	34	42	48	-	-	139	55	152.7%	88
Mangonia Park BH	979	922	1,029	1,028	915	972	1,118	992	1,103	1,068	1,164	-	11,290	15,376	(26.6%)	9,098
Lewis Center BH	250	246	281	248	287	293	422	343	366	431	366	-	3,533	-	100.0%	451
Lake Worth BH	4	11	8	1	-	-	-	-	-	-	-	-	24	-	100.0%	1,504
St Ann Place BH	-	-	-	-	-	-	50	38	29	36	14	-	167	985	(83.0%)	806
West Boca BH	3	1	-	1	-	-	18	-	14	62	50	-	149	-	100.0%	337
Jupiter BH	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	-
Mob 1 Warrior BH	1	-	-	-	1	-	9	10	-	20	36	-	77	-	100.0%	38
Mob 3 Hero BH	-	-	-	-	-	1	61	45	69	78	44	-	298	-	100.0%	55
Mobile Van BH	-	2	-	-	-	-	15	19	-	-	39	-	75	-	100.0%	-
Total Behavioral Health Visits	1,611	1,526	1,746	1,771	1,765	1,885	2,891	2,634	2,780	3,050	2,988	-	24,647	21,108	16.8%	22,145
GRAND TOTAL	12,820	11,013	11,616	12,897	11,149	12,099	14,009	12,971	12,896	14,570	13,800	-	139,840	144,392		146,909

**YTD Visits were adjusted to exclude non billable warm hand over(WHO) encounters.



District Clinic Holdings, Inc.

	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
Clinic Visits - Adults and Pediatrics																
West Palm Beach	1,551	1,218	1,329	1,460	1,293	1,290	1,358	1,341	1,267	1,419	1,347	-	14,873	17,493	(15.0%)	17,612
Delray & Women's Health Care	1,056	897	902	1,039	883	770	930	832	678	863	762	-	9,612	8,590	11.9%	9,088
Belle Glade & Women's Health Care	793	760	802	895	774	876	868	843	764	794	826	-	8,995	8,912	0.9%	9,437
Jupiter & Women's Health Care	597	500	441	538	580	511	600	549	517	537	437	-	5,807	5,845	(0.7%)	5,973
West Boca & Women's Health Care	276	235	255	251	262	260	290	305	274	259	257	-	2,924	3,671	(20.3%)	3,911
Mangonia Park	677	589	590	705	578	610	608	638	617	692	566	-	6,870	9,050	(24.1%)	7,931
Lantana (closed Feb 2025)	1,730	1,432	1,548	1,391	438	-	-	-	-	-	-	-	6,539	6,550	(0.2%)	20,434
Lake Worth & Women's Health Care (closed Feb 2025)	1,268	1,013	1,066	1,108	361	-	-	-	-	-	-	-	4,816	5,173	(6.9%)	12,810
Atlantis & Womens Health Care (opened Feb 2025)	-	-	-	3	1,153	2,433	2,839	2,464	2,625	2,941	2,965	-	17,423	21,439	(100.0%)	-
Lewis Center	40	57	76	76	62	71	88	45	61	68	53	-	697	313	122.7%	459
St Ann Place	68	54	13	56	44	53	39	33	16	20	6	-	402	142	183.1%	145
Cib Mob 1 Warrior (Mobile Van)	10	-	-	-	-	-	-	-	-	63	98	-	171	-	100.0%	80
Cib Mob 2 Scout	-	-	-	-	-	-	-	-	-	-	-	-	-	13	(100.0%)	-
Cib Mob 3 Hero	84	83	84	86	84	67	75	71	77	80	25	-	816	412	98.1%	463
Portable Medical	96	66	72	121	71	49	73	38	-	33	104	-	723	575	25.7%	789
Total Clinic Visits	8,246	6,904	7,178	7,729	6,583	6,990	7,768	7,159	6,896	7,769	7,446	-	80,668	88,178	(8.5%)	89,132
Dental Visits																
West Palm Beach Dental	1053	957	1091	1210	1,097	1,167	1,056	1,245	1,101	1,341	1,218	-	12,536	12,589	(0.4%)	12,055
Delray Dental	734	654	870	936	840	858	930	636	880	1,031	958	-	9,327	6,924	34.7%	8,236
Belle Glade Dental	515	411	454	481	431	535	550	506	505	520	489	-	5,397	5,528	(2.4%)	5,429
Lantana Dental	661	545	269	759	204	-	-	-	-	-	-	-	2,438	3,342	(27.0%)	9,787
Atlantis Dental	-	-	-	-	221	655	814	791	726	854	701	-	4,762	6,567	(27.5%)	-
Portable Dental	-	16	8	11	8	9	-	-	8	5	-	-	65	156	(58.3%)	125
Total Dental Visits	2,963	2,583	2,692	3,397	2,801	3,224	3,350	3,178	3,220	3,751	3,366	-	34,525	35,106	(1.7%)	35,632
Total Medical and Dental Visits	11,209	9,487	9,870	11,126	9,384	10,214	11,118	10,337	10,116	11,520	10,812	-	115,193	123,284	(6.6%)	124,764
Behavioral Health Visits**																
West Palm Beach BH	-	-	-	-	-	-	107	89	120	205	115	-	636	1,459	(56.4%)	2,295
Delray BH	369	343	426	482	541	569	717	599	535	560	572	-	5,713	3,233	76.7%	4,981
Lantana BH	3	1	2	10	9	-	-	-	-	-	-	-	25	-	100.0%	2,492
Atlantis BH	-	-	-	1	12	50	374	486	510	548	540	-	2,521	-	100.0%	-
Belle Glade BH	2	-	-	-	-	-	13	34	42	48	-	-	139	55	152.7%	88
Mangonia Park BH	979	922	1,029	1,028	915	972	1,118	992	1,103	1,068	1,164	-	11,290	15,376	(26.6%)	9,098
Lewis Center BH	250	246	281	248	287	293	422	343	366	431	366	-	3,533	-	100.0%	451
Lake Worth BH	4	11	8	1	-	-	-	-	-	-	-	-	24	-	100.0%	1,504
St Ann Place BH	-	-	-	-	-	-	50	38	29	36	14	-	167	985	(83.0%)	806
West Boca BH	3	1	-	1	-	-	18	-	14	62	50	-	149	-	100.0%	337
Jupiter BH	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	-
Mob 1 Warrior BH	1	-	-	-	1	-	9	10	-	20	36	-	77	-	100.0%	38
Mob 3 Hero BH	-	-	-	-	-	1	61	45	69	78	44	-	298	-	100.0%	55
Mobile Van BH	-	2	-	-	-	-	15	19	-	-	39	-	75	-	100.0%	-
Total Behavioral Health Visits	1,611	1,526	1,746	1,771	1,765	1,885	2,891	2,634	2,780	3,050	2,988	-	24,647	21,108	16.8%	22,145
GRAND TOTAL	12,820	11,013	11,616	12,897	11,149	12,099	14,009	12,971	12,896	14,570	13,800	-	139,840	144,392		146,909

**YTD Visits were adjusted to exclude non billable warm hand over(WHO) encounters.

**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
OCTOBER 22, 2025**

1. Description: Risk Management Dashboard – 3rd Quarter 2025

2. Summary:

This agenda item provides the risk severity dashboard report for the third quarter of 2025 for the Community Health Centers.

3. Substantive Analysis:

In Q3 2025, the Community Health Centers had a total of 123 events reported in its Safety Event Reporting System. This is a % compared to the reported events for the prior quarter. *Please refer to the details provided below and the data report attached.*

Top 5 Risk Severity Volumes/Types:

The top five categories of reported risk events by severity and volume include:

- 51 Behavior-related events, which included the following subcategories: Aggression, Baker Act and/or Suicide Threat/Attempt, Conflict with Staff, Sexual Misconduct, Attempted/Threatened Assault, Bullying or Intimidation, and other Behavioral events.
- 17 EMS/911 Referral events due to Chest Pain, Hyperglycemia, Hypertension, Respiratory Difficulty, Abdominal Pain, and Dizziness.
- 11 Safety-related events, which included the following subcategories: DCF/Abuse Registry, Non-Emergency Contacted, and other safety events.
- 8 Treatment & Therapies events, which included the following subcategories: Delay – Treatment and Refusal of Treatment.
- 5 Medical Documentation & Patient Record events, which included the following subcategories: Documentation Issues, Documentation Findings, Discrepancy of Personal Information, and other Med/Documentation Issues.

These categories represent the most frequently reported events, guiding current mitigation and prevention efforts.

Risk Severity Scores:

Of the 123 events reported, 123 were events/occurrences and 0 were near misses.

- 122 (99.2%) of the events were reported as “No Harm” events. This type is an event that occurred but resulted in no harm to an individual.
- 1 (0.8%) of the events was reported as a “Minor” event. This type is an event that occurred but had no harm to the patient, however, required monitoring.



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
OCTOBER 22, 2025**

Risk Management Mitigation Strategies:

All cases are reviewed by the CHC Risk Manager. In addition, the CHC Risk Manager, Risk Department, and CHC/HCD leadership team collectively review events and system improvement opportunities on a case-by-case basis and during the monthly CHC risk meeting. With support from the Security Department, behavioral health incidents were de-escalated appropriately, and additional measures were implemented to reduce recurrence. All EMS/911 Referral-related events were addressed and managed promptly. Appropriate actions were taken to assess, respond, and provide necessary treatment, resulting in no patient harm. When clinically indicated, EMS was activated in a timely manner, and patients were safely transferred to a higher level of care. Safety-related issues were resolved quickly, with re-education and training provided to staff to prevent recurrence, ensuring no delays in treatment or care. Risk collaborated with the interdisciplinary team to review and address treatment and therapy-related issues. Through this collaboration, opportunities for improvement were identified, corrective actions were implemented, and processes were reinforced to ensure safe, timely, and appropriate patient care. Education provided to staff to reinforce accurate and timely documentation practices, ensuring compliance, continuity of care, and reduction of risk. The Risk Department also provides ongoing education to CHC and HCD staff on a variety of topics, including medical record documentation, event reporting, and the importance of Near Miss/Good Catch reporting to support a strong culture of safety.

4. Fiscal Analysis & Economic Impact Statement:

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

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:


 CA6A21FF2E0481
 Jessica Cafarelli
 VP & Chief Financial Officer



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
OCTOBER 22, 2025**

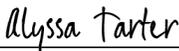
5. Recommendation:

Staff recommends the Committee Receive and File the Community Health Centers Risk Management Dashboard – 3rd Quarter 2025.

Approved for Legal sufficiency:

Signed by:

0CF6F7DB6706434
Bernabe Icaza
SVP & General Counsel

DocuSigned by:

0ABC4579D68B417
Alyssa Tarter, MSN, RN, CPHRM, CPPS
Director of Corporate Risk Management
& Community Health Centers Risk
Manager

Signed by:

2B4234E087048E7
Joshua Adametz, DMD, MPH, MA
AVP & Executive Director of
Community Health Centers

Community Health Centers Risk Management Dashboard

3rd Quarter 2025 (July – September)

Risk Severity

Event Date
7/1/2025 to 9/30/2025



# Total Events	Near Misses	Near Miss %
123	0	0.0%

Event

Total Number of Events by Business Unit



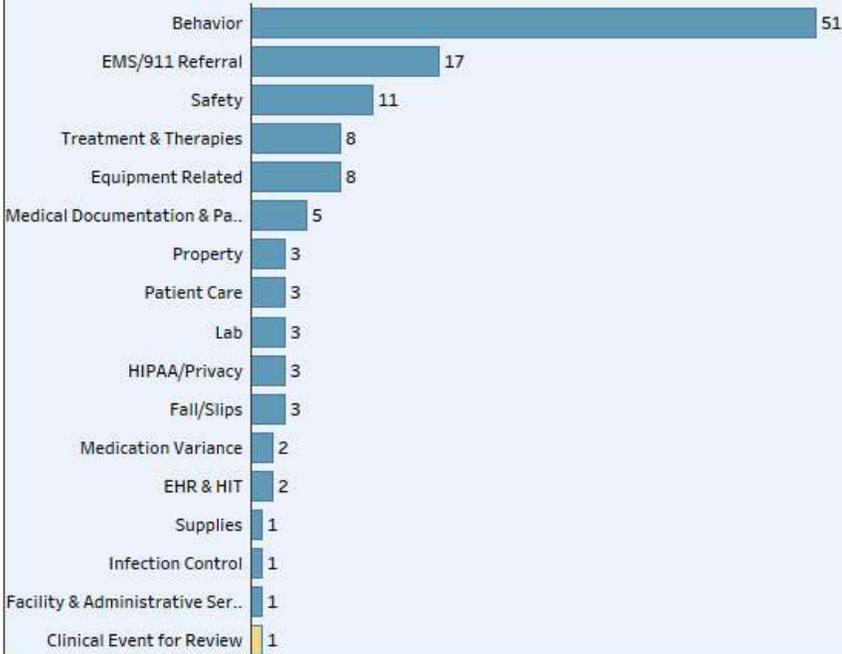
Facility
C.L. Brumback Primary Care Cl...

Department
All

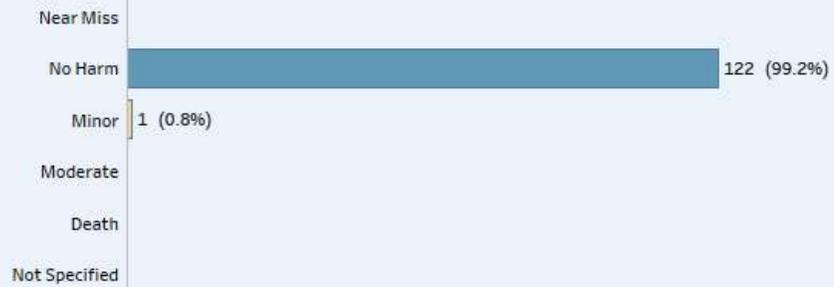
Category
All

Sub Category
All

Severity by Event Category



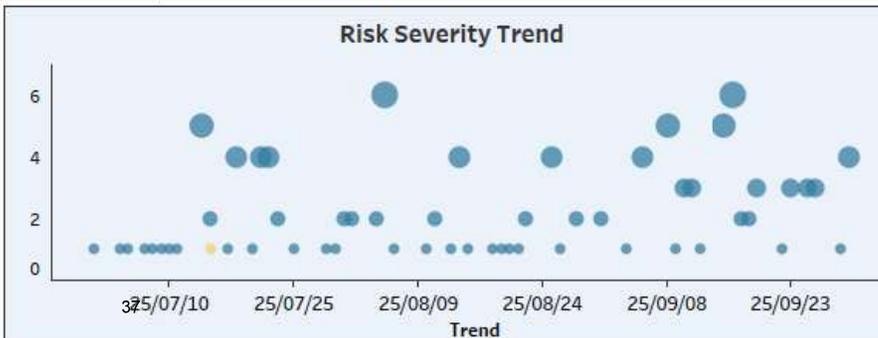
Risk Severity Totals



AEROMINOR
AERONEGLI

Near Miss - did not occur, no harm to patient
No Harm - occurred, no harm to patient
Minor - occurred, no harm to patient but required monitoring
Moderate - occurred, temporary harm, no required treatment
Major - occurred, temporary harm, required treatment
Severe - occurred, permanent patient harm
Catastrophic - permanent neurologic harm or intervention to sustain life
Death - occurred, resulted in death

Risk Severity Trend





**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

1. Description: Executive Director Informational Update

2. Summary:

- HRSA Noncompeting Continuation
- Pharmacy Update

3. Substantive Analysis:

HRSA Non-competing Continuation: Completed and submitted to HRSA. This is a progress report of the last year. Our Service Area Competition will be due next year to ensure continued access to comprehensive, culturally competent, high-quality primary health care services for communities and populations currently served by the Health Center Program.

Pharmacy Insurance Update: After the successful launch of the Sliding Fee Scale for Pharmacy, we are gearing to accept insurances to provide pharmacy services to a wider range of patients and increase revenue.

4. Fiscal Analysis & Economic Impact Statement:

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

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

N/A
Jessica Cafarelli
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A
Committee Name

N/A
Date Approved



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

6. Recommendation:

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

Approved for Legal sufficiency:

Signed by:

0CF6F7DB6706434
Bernabe Icaza
SVP & General Counsel

Signed by:

2B4734E887844B7
Joshua Adametz, DMD, MPH, MA
AVP & Executive Director of Community
Health Centers

**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

1. Description: Licensed Independent Practitioner Credentialing and Privileging

2. Summary:

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

3. Substantive Analysis:

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

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

Last Name	First Name	Degree	Specialty	Credentialing
Bryan	Melissa	LMHC	Licensed Mental Health Counselor	Initial Credentialing
Ouslander	Joseph	MD	Geriatric Medicine	Initial Credentialing
Rackman	Alexander	MD	Geriatric Medicine	Initial Credentialing
Lora	Dionaris	DMD	General Dentistry	Initial Credentialing
Goldberg	Rainer	LCSW	Licensed Clinical Social Worker	Initial Credentialing
Tussey	Claudia	MD	Family Medicine	Recredentialing

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

**COMMUNITY HEALTH CENTERS
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October 22, 2025**

The Health Care District Community Health Centers utilized internal Credentialing staff and the FQHC medical Director to support the credentialing and privileging process.

Melissa Bryan, LMHC joined the Belle Glade Clinic in 2025 as a Licensed Mental Health Counselor. She attended Palm Beach Atlantic University and has been in practice for nine years.

Joseph Ouslander, MD joined the Delray Beach Clinic in 2025 specializing in Geriatric Medicine. He attended Case Western Reserve University School of Medicine and also completed his Residency at Southern California Systems Clinics. Dr. Ouslander is certified in Geriatric Medicine by the American Board of Internal Medicine. He has been in practice for forty-three years.

Alexander Sasha Rackman, MD joined the Delray Beach Clinic in 2025 specializing in Geriatric Medicine. He attended Tel Aviv University and also completed his Residency at Rush University. Dr. Rackman is certified in Geriatric Medicine by The American Board of Internal Medicine. He has been in practice for eight years.

Dionaris Lora, DMD joined the West Palm Beach Clinic in 2025 specializing in General Dentistry. She attended Metropolitana University and also completed her Residency at NYU Lutheran Medical Center. Dr. Lora has been in practice for nine years.

Rainer Goldberg, LCSW joined the Mangonia Clinic in 2025 as a Licensed Clinical Social Worker. She attended Florida Atlantic University and has been in practice for ten years.

Claudia Tussey, MD joined the Delray Beach Clinic in 2023 specializing in Family Medicine. She attended the University of North Carolina at Chapel Hill School of Medicine and also completed her Residency at the University of Pennsylvania Health System. Dr. Tussey is certified in Family Medicine by the American Board of Family Medicine. She has been in practice for two years and is fluent in French and Spanish.



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

4. Fiscal Analysis & Economic Impact Statement:

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

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Jessica Cafarelli
VP & Chief Financial Officer

5. Recommendation:

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

Staff recommends the Board approve the Initial Credentialing and privileging of Joseph Ouslander, MD, Geriatric Medicine.

Staff recommends the Board approve the Initial Credentialing and privileging of Alexander Sasha Rackman, MD, Geriatric Medicine.

Staff recommends the Board approve the Initial Credentialing and privileging of Dionaris Lora, DMD, General Dentistry.

Staff recommends the Board approve the Initial Credentialing and privileging of Rainer Goldberg, LCSW, Licensed Clinical Social Worker.

Staff recommends the Board approve the Recredentialing and privileging of Claudia Tussey, MD, Family Medicine.



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

Approved for Legal sufficiency:

Signed by:
Bernabe Icaza
0CF6F7DB6706434 Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Ana Ferwerda
FF528E6E1A16467 Ana Ferwerda, MD
FQHC Medical Director

Signed by:
Joshua Adametz
2B634F06791452 Joshua Adametz, DMD, MPH, MA
AVP & Executive Director of
Community Health Centers

**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

1. Description: Quality Report

2. Summary:

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

- Quality Council Meeting Minutes – October 2025
- UDS Report – YTD

3. Substantive Analysis:

PATIENT SAFETY & ADVERSE EVENTS

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

QUALITY ASSURANCE & IMPROVEMENT

The Health Care District of Palm Beach County Community Health Centers are integrating telemedicine specialty care across our community health centers, beginning with maternal-fetal medicine (MFM). Palm Beach County currently faces a maternal mortality rate of approximately 33.2 deaths per 100,000 live births, with an infant mortality rate of 5.4 deaths per 1,000 births, placing urgency on improving access and outcomes in maternal and infant health. In Florida, the preterm birth rate hovers around 10.5 percent in Palm Beach County, slightly above the statewide average, highlighting the need for more attentive and specialized prenatal care. Our vision is that by bringing maternal-fetal medicine into the telehealth space, patients may receive expert specialty consultations and remote monitoring at their local health center eliminating many of the transportation, scheduling, and logistical barriers that often prevent regular compliance with prenatal care. Published studies of MFM telemedicine programs demonstrate that patient outcomes tend to be comparable to in person care . Deploying tele MFM will strengthen early detection and management of pregnancy complications, increase adherence to high-risk prenatal care regimens, and ultimately reduce maternal morbidity, fetal mortality, and adverse birth outcomes. This integration reflects our commitment to equity and quality ensuring that all expecting mothers in Palm Beach County, regardless of where they live, can access high quality specialty maternal care and benefit from improved health for both mother and child.



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

4. Fiscal Analysis & Economic Impact Statement:

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

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

N/A
Jessica Cafarelli
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A
Committee Name

N/A
Date Approved

6. Recommendation:

Staff recommends the Board approve the updated Quality Report.

Approved for Legal sufficiency:

Bernabe Icaza

0CF6F7DB6706434
Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Ana Ferwerda

FF528E6E1A10461A
Dr. Ana M. Ferwerda
FQHC Medical Director

Signed by:
Joshua Adametz

2B4234F0978448P
Dr. Joshua Adametz, DMD, MPH, MA
AVP & Executive Director of
FQHC Services



Quality Council Meeting Minutes

Date: October 8th, 2025

Time: 11 am-1:30 pm

Attendees: Steven Sadiku – AVP Corporate Quality & Regulatory; Dr. Sandra Warren – Associate Medical Director; Angela Santos – Director of Ops; Dr. Josh Adametz – FQHC Executive Director; Nancy Gonzalez – Dental & Special Projects Manager; Manager; Alexa Goodwin – Patient Relations Manager; Maria Chamberlin – Assistant Director of Nursing; Lisa Hogans – Director of Nursing; Dr. Ana Ferwerda – FQHC Medical Director; Dr. Courtney Phillips – VP of Behavioral Health; Melanie Deeroop-Kangoo – Quality Manager; Ivonne Cohen –Business Intelligence Developer; Dr. Valena Grbic – Medical Director, District Cares; Ingrid Barlett-Quality Manager; Joel Rosales-Director of Trauma Agency & Regulatory; Krysten Kinsey- Manager, Regulatory & Accreditation; Jessica Ramirez – Manager Patient Access Services, Shauniel Brown – Senior Risk Manager; Jose Rodriguez- Director of Pharmacy; Angela Swenson – Director, Financial Assistance District Cares; Alyssa Tarter – Director of Risk Management, Bianca Badolati – Executive Assistant,

Excused: Dr. Belma Andric – EVP & Chief Medical Officer; Regina All- SVP, Chief Clinical Officer;

Minutes by: Ingrid Barlett- Quality Manager & Melanie Deeroop-Kangoo – Quality Manager

<u>AGENDA ITEM</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
PATIENT SAFETY & ADVERSE EVENTS				
OCCURRENCES	<p><i>Per Compliance, discussion surrounding not recording meetings.</i></p> <p>Report Summary The September 2025 Risk Management Tableau dashboard was presented. Volumes were provided for the following clinic areas and types: total reported events, incidents,</p>	Update dashboards to include encounters information as well	Ingrid/Shauaniel	



Health Care District

OF PALM BEACH COUNTY

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	<p>and good catches. Trends were also presented by volume of reported entries and clinic location. The Risk Report Summary and graphical data were reviewed with the Committee for September 2025. Reports included the risk severity, volume, and category/type for incidents and near misses entered in HCD’s safety event reporting system. Risk mitigation strategies were also shared with the Committee.</p> <p>(September 2025 Risk Report Summary presented with graphs.)</p>			
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UTILIZATION

OPERATIONS	<p>Productivity</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: #cccccc;"> <th colspan="6">Productivity September 2025</th> </tr> <tr style="background-color: #cccccc;"> <th rowspan="2">Service Line</th> <th colspan="2">Target</th> <th colspan="2">Seen</th> <th rowspan="2">% of Goal</th> </tr> <tr style="background-color: #cccccc;"> <th>In Person</th> <th>Tele</th> <th>In Person</th> <th>Tele</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Total</td> </tr> <tr> <td>Adult Care</td> <td>4979</td> <td></td> <td>4470</td> <td></td> <td>90%</td> </tr> <tr> <td>Pediatrics</td> <td>1630</td> <td></td> <td>1348</td> <td></td> <td>83%</td> </tr> <tr> <td>Primary Residents</td> <td>834</td> <td></td> <td>651</td> <td></td> <td>78%</td> </tr> <tr> <td>Women’s Health</td> <td>1025</td> <td></td> <td>1091</td> <td></td> <td>106%</td> </tr> <tr> <td>Behavioral Health Integration</td> <td>1157</td> <td></td> <td>843</td> <td></td> <td>73%</td> </tr> </tbody> </table>	Productivity September 2025						Service Line	Target		Seen		% of Goal	In Person	Tele	In Person	Tele						Total	Adult Care	4979		4470		90%	Pediatrics	1630		1348		83%	Primary Residents	834		651		78%	Women’s Health	1025		1091		106%	Behavioral Health Integration	1157		843		73%			
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Behavioral Health Integration	1157		843		73%																																																			



Health Care District

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	Behavioral Health - Psych	1503		1169		78%			
	Psych Residents	N/A		N/A		N/A			
	Mental Health Professional/ Addiction	589		480		81%			
	Dental Health	2073		2156		104%			
	Dental Hygiene	874		771		88%			
	Dental MDI	352		177		50%			
	<i>(Clinic productivity report with graphs was presented.)</i>								
	<p><u>Walk-ins</u> 22% Medical 16% Dental 93% same-day walk-ins scheduled by front-line staff 7% same-day walk-ins scheduled by the CSC</p>								
	<p><u>Doximity Dialer Usage (Telemedicine) – September 2025</u> Users</p> <ul style="list-style-type: none"> 49 registered users (100% registration rate) 								



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	<ul style="list-style-type: none"> ○ 23 active users (10MD/DOs, 3 NP, PA, 10 Care Team) <p>Calls</p> <ul style="list-style-type: none"> ● 697 total calls <ul style="list-style-type: none"> ○ 135 voice calls <ul style="list-style-type: none"> ▪ 124 successful calls (91.9%) success rate ▪ 3 calls escalated to video ○ 562 video calls <ul style="list-style-type: none"> ▪ 451 successful calls (80.2%) success rate ○ 15 secure texts <p>(Report with breakdown by specialty and user)</p>			
PATIENT RELATIONS				
<p>GRIEVANCES, COMPLAINTS & COMPLIMENTS</p>	<p><u>Patient Relations Dashboard – September 2025</u></p> <p>For September 2025, there were a total of 12 Patient Relations Occurrences that occurred between 5 Centers, Mobile Hero and Center Administration. There were 5 grievances and 7 complaints. The top 5 Categories were Care & Treatment, Communication, Nursing Related, Physician Related and Respect Related issues. The top subcategory was bad attitude/rude</p>			



	<p>with 2 occurrences. There were no compliments received for September. <i>(Patient Relations Report & Patient Relations Dashboard with Graphs presented.)</i></p>			
<p>SURVEY RESULTS</p>	<p><u>Patient Satisfaction Survey – September 2025</u></p> <p>For September 2025, there were 483 Patient Satisfaction Surveys completed. Atlantis Primary had the highest return rate with 69 completed surveys followed by Delray Primary with 58 completed surveys.</p> <p>Our Net Promoter Score (NPS) was 68 (out of 444 responses) compared to the Phreesia FQHC/CHC/RHC Network at 65.</p> <p>The top 5 and lowest 5 scored-questions were presented for each area.</p> <p>“Best Questions” for in person visits – September 2025:</p> <ul style="list-style-type: none"> • Overall cleanliness of exam room and overall practice – 92% (increase of 1%) • Professionalism of Our Staff – 91% (increase of 2%) 			



Health Care District

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	<ul style="list-style-type: none"> • Time taken to listen and answer your questions – 89% (3% increase) • Thing explained in a way you could understand – 85% (new) • Overall experience at today’s visit – 85% (decrease of 1%) <p>“Worst Questions” for in person visits – September 2025:</p> <ul style="list-style-type: none"> • Your ability to contact us after hours – 12% (decrease of 8%) • Being informed about any delays during this visit – 9% (decrease of 3%) • Overall experience of today’s visit – 6% (decrease of 3%) • Time taken to listen and answer your questions – 5% (new) • Each member of my care team identified themselves and their role in my care – 4% (new) <p>Of the surveys received for September, 32% of patients perceived wait time to be between 6 to 15 minutes, 27% of responses were from</p>			
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Health Care District
 OF PALM BEACH COUNTY
 WE CARE FOR ALL

	<p>patients that this was their first visit to the practice. 83% of patients were scheduled and 17% were walk-ins.</p> <p>67% of surveys completed were by females and most patients preferred to be seen on Tuesday and Friday. 100% of patients did not experience any technical difficulties while using telemedicine.</p> <p>For Dental, 70% of patients felt educated on how to better care for your teeth and gums, 75% were satisfied with results of dental treatment, 72% felt staff explained the procedures in a clear and understandable way and 73% felt staff who provided dental care were sensitive to my concerns.</p> <p>82% of responses in September were promoters (increase of 2%), 11% of responses were neutrals (increase of 2%) and 7% of responses were detractors (decrease of 4%).</p> <p>Top promoters, detractors, and patient comments presented by center and service line.</p>			
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	<p>(Patient Satisfaction Survey PowerPoint presented.)</p>			
<p>After Hours</p>	<p><u>Afterhours Report – Sept 2025</u> <i>(Outbound Campaign PowerPoint presented.)</i></p> <p>In September 2025, the Clinic Service Center received 210 after-hours calls. This was a 9% decrease from the previous month.</p> <p>We continue to see our top 3 highest volume in AHCs for Appt requests with 33% of the volume. Followed by Provider page outs request with 25% of the volume and reschedules with 15%.</p> <p>Our Atlantis Location is our highest volume health center with 40% of the call volume. Followed by WPB with 30% and Delray with 17%</p> <p>AH Paged Outcalls – 52 after-hours calls required a provider to be paged out.</p> <p>of those calls had telephone encounters created in their Epic chart.</p>			



Health Care District
 OF PALM BEACH COUNTY
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	<p>had the "after Hours" listed as the reason for encounter</p> <p>patient telephone encounters were missed</p>			
<p>NEXT THIRD AVAILABLE</p>	<p><u>Peds Primary</u> Atlantis – 12 days out West Palm – 13 days out</p> <p><u>Adult Primary</u> Atlantis – 1 days out Belle Glade - 3 days out Boca – 1 days out Delray – 9 Jupiter - 32 West Palm – 3 days out</p> <p><u>BH</u> Atlantis – 1 days out Delray – 10 days out Lewis Center – 2 days out Mangonia – 1 days out</p> <p><u>Dental</u> Belle Glade – 46 Delray –76/3 Atlantis – 97 West Palm – 17</p>			



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	<p><u>Women's Health</u> Atlantis – 19 days out Belle Glade – 18 days out Delray – 14 days out Jupiter – 35 days out</p>			
<p>REFERRAL/ CALL CENTER</p>	<p>Referrals – There were a total of 7,643 referral orders placed. This was a 15% increase in volume from the previous month. The average turnaround time for referral processing was 3 days for routine with a goal of 5 days or less. The TAT for urgent referrals was 2 days with a goal of 2 days or less.</p> <p>The Atlantis location has the highest referral volume placed with 23% of the total referral volume, followed by Delray with 16% and WPB with 15% of the volume</p> <p>Carline, Lisa, and Ketely are our highest producers of referrals with 6% of the total volume.</p> <p>Our most common payer is now Self pay with 34% of the volume. Followed by the HCD Voucher with 18%. BCBS is our 3rd highest with 11%</p>	<p>Add ophthalmology referral trends to the dashboard.</p>	<p>Jessica Ramirez</p>	



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	<p>Our top referred to specialties this month are Radiology Orders with 18%, followed by Ophthalmology with 7% and GI with 5%</p> <p><u>Call Center –</u></p> <p>The call center received 14,467 calls. This was a 2% decrease from last month</p> <p>The abandonment rate for Sept was 9% with a goal of 10% or less.</p> <p>The service level Was 59% answered within 3 minutes with a goal of 80% or higher.</p> <p>Average hold time was 2m 28s with a goal of 3 min or less</p>			
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QUALITY

QUALITY

MEDICAL	<p>Breast Cancer Screening – September 2025</p> <p>Yearly goal 60%</p> <p>We saw 3746 unique patients due for breast cancer screening.</p> <p>Satisfied screenings – 2176 (58%)</p> <p>Unsatisfied Screenings – 1570 (42%)</p> <p>Not Met with order – 908 (25%)</p>			
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Health Care District
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 WE CARE FOR ALL

	<p>Not Met (Patient Missed) – 420 (11%). It stayed the same compared to August, 2025.</p> <p>The clinics with the highest percentage of screening were Belle Glade with 70%, Atlantis with 66%, and Boca 63%. Compared to last year Boca Clinic has decreased from 67% completed screenings.</p> <p>The clinics with the lowest percentage of patients who completed breast cancer screening were West Palm Beach (53%), Delray (56%) and Jupiter (61%).</p> <p>The larger number of patients where the screening was not addressed were Atlantis and Delray clinics. Accounting for 62% of missed patients.</p> <p>From September, 2024 to September, 2025: Compared to last year the Atlantis providers had increased the percentage of patients with completed screenings.</p>			
	<p>Cervical Cancer Screening - September 2025 Yearly goal 65% We saw 9710 unique patients with screening due. Cervical cancer screening was completed in</p>			



Health Care District
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	<p>6454 (66%) of the patients and in 3257 (34%) patients the screening was not addressed. Atlantis, Boca, Belle Glade and Jupiter Clinics achieved at or above the goal of 65%. The clinics with the lowest percentage of cervical cancer screening were West Palm Beach 60% and Delray 62%. West Palm Beach Clinic increased from 44% last year.</p> <p>From September, 2024 to September, 2025: Compared to last year the Atlantis providers had increased the percentage of patients with completed screenings. The graph on the right shows the distribution by percentage of met, not met and missing orders to address the screening by provider.</p> <p>The lowest left graph shows the number of missed patients by clinic in descending order. The larger number of patients where the screening was not addressed were Atlantis, West Palm Beach, and Delray clinics accounting for 54%. (Report with graph presented.)</p>			
	<p>Colorectal Cancer Screening – September 2025. Yearly goal 82%</p>			



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	<p>We saw 9072 unique patients due for colorectal cancer screening. 3795 (42%) of the patients had the screening satisfied in 2025, 172 (2%) had the screening satisfied in the past 12 months and 4806 (56%) of the patients did not have the screening satisfied.</p> <p>The highest percentage of screening completed was at the Boca Clinic with 65%.</p> <p>The largest number of patients that needed colorectal cancer screening were at the Delray, Atlantis and West Palm Beach for 61% of the patients. They individually achieved 47%, 42% and 44% of colorectal cancer screening completion.</p> <p>The largest number of patients with missing orders to address the screening were at Atlantis, Mangonia, Belle Glade with 53%.</p> <p>The last graph shows the met, unmet and missed patients by provider percentages.</p> <p>By type of screening test, the majority of patients are screen with Cologuard, followed by FIT test and last with colonoscopy. (Report with graph presented).</p>			
	<p>Controlled Diabetes based on A1c less than 9% - September, 2025</p>			



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	<p>Yearly goal 67%</p> <p>We saw 3894 unique patients with a diagnosis of diabetes. 2875 (74%) were controlled and 1019 (26%) uncontrolled with an A1c equal or greater than 9%.</p> <p>By clinic, Jupiter (78%), Boca (78%) and Delray (76%) are the clinics with highest number of patients with controlled diabetes. All the larger clinics achieved the goal of 67%. The larger number of patients with diabetes are in West Palm Beach and Atlantis Clinics accounting for 51% of patients.</p> <p>The graph on the right shows the distribution by percentage of met, not met and missing orders to address the screening by provider.</p> <p>(Report with graph presented).</p>			
	<p>HIV Screening – September 2025 Yearly goal 32%</p> <p>We saw 19152 unique patients with screening due. Satisfied: 13366 (70%) Not satisfied: 5786 (30%).</p>			



	<p>All the clinics reached above goal. Belle Glade and Boca have the highest percentage of HIV screening completion with 76% and 74%.</p> <p>The largest percentage of patients for which the screening was not addressed were from Atlantis and Jupiter clinics accounting for 54% of the missed patients.</p> <p>The last graph shows the met, unmet and missed patients by provider percentages.</p> <p>The last graph shows percentages of screening percentages of met, unmet and missed patients by provider.</p> <p>(Report with graph presented.)</p>			
	<p>Controlling High Blood Pressure – September 2025</p> <p>Yearly goal 80%</p> <p>We saw 6246 patients with hypertension. 4624 (74%) of patients had blood pressure controlled (below 140/90) and 1622 (26%) blood pressure uncontrolled. From all the clinics, Boca reached 86%, West Palm Beach 77%.</p>			



	<p>Delray (71%) and Jupiter (67%) have the lowest percentage of patients with blood pressure controlled.</p> <p>The last graph shows percentages of screening percentages of met, unmet and missed patients by provider.</p> <p>Provider Fernique Jean Jacques has the highest number of patients with controlled HTN at 86% followed by Dr. Germaine Noukelak at 82%</p> <p>(Report with graph presented.)</p>			
BEHAVIORAL HEALTH	<p><u>PHQ9 –September 2025</u> % of patients with PHQ9: 6,161/6,3811 =90.06% Unique patients with positive PHQ9 475/6.94%</p> <p><u>SBIRT- September 2025</u> 2,076 unique patients/26,802 = 7.74% The goal is 5%</p> <p>(Report with graph presented.)</p>			
WOMEN’S HEALTH	<p><u>Early Entry into Prenatal Care September 2025</u> Early Entry into care into the First Trimester is 46% Total population of 880 prenatal patients</p>	Follow up on auditing the charts for early entry into prenatal care.	Steven/Dr. Ferwerda/Melanie	



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	<p><u>Low Birth Weight September 2025</u> Babies born with a birth weight below normal (under 2,500 grams) 9% --<1500 grams: 1% --1500–2499 grams: 8% --> 2500 grams: 85% Total deliveries/birth weight: 177</p>			
<p>DENTAL</p>	<p><u>Dental Sealants</u> YTD 2025: 96% (443; n=462)</p>			
	<p><u>Limited Exams Walk-ins = 419</u> September: Average Daily -Atlantis 1 -Belle glade 3 -Delray 8 -West Palm Beach 11</p>			
<p>NEXT THIRD AVAILABLE</p>	<p><u>Dental</u> Belle Glade- - Hygiene appointment (adult): 76 days - Hygiene appointment (child): 3 days - Treatment appointment: 70 days Delray- - Hygiene appointment (adult): 97 days - Treatment appointment: 38 days</p>			



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	<p>Atlantis-</p> <ul style="list-style-type: none"> - Hygiene appointment (adult): 133 days - Hygiene appointment (child): 46days - Treatment appointment: 27 days <p>West Palm Beach-</p> <ul style="list-style-type: none"> - Hygiene appointment (adult): 17 days - Hygiene appointment (child): New Dentist started 10/6/25 - Treatment appointment (adult): 41 days - Treatment appointment (child): New Dentist started 10/6/25 			
<p>NURSING</p>	<p><u>Higher Level of Care</u></p> <p><u>AUGUST:</u></p> <p>102 ER referrals / 98 patients were sent to the ER in August. This is 1% of the billable provider visits in the CHCs.</p> <p>The breakdown of referrals is:</p> <ul style="list-style-type: none"> • WH – 37 (36%) (5% of the women’s health visits) • Peds – 12 (12%) (1% of the pediatric visits) • Adult – 49 (48%) (this combines urgent care and emergency medicine referrals) • Transport – 0 			



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	<ul style="list-style-type: none"> • Adult Crisis –4 (4%) • Peds Crisis – 0 <p>ADULT REFERRALS: highest producers this month were Joanne Pierre Louis, APRN Atlantis with 5 (5%), Lisa Fidler, APRN Atlantis Walk In 4 (4%) and Michael Bereisha, Resident BG with 4 (4%)</p> <p>PEDIATRIC REFERRALS: highest producer this month was Dr. Clarke in WPB with 7 referrals (58%)</p> <p>Top Diagnosis:</p> <p>ADULT</p> <ul style="list-style-type: none"> • Chest Pain, Unspecified Type 3 (6%) • Anemia, unspecified type 3 (6%) • Nausea and vomiting, unspecified vomiting type 2 (4%) <p>PEDS</p> <ul style="list-style-type: none"> • History of fever, 2 (16%) • Fever, unspecified fever cause 2 (16%) <p>The charts were reviewed for the 4 patients that received more than one referral for HLC in the month of August and all referrals were appropriate and none were escalated to the Medical Director for review.</p>			
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	<p>SEPTEMBER:</p> <p>122 ER referrals / 113 patients were sent to the ER in September. This is 1% of the billable provider visits in the CHCs.</p> <p>The breakdown of referrals is:</p> <ul style="list-style-type: none"> • WH – 45 (37%) (4% of the women’s health visits) • Peds – 21 (17%) (2% of the pediatric visits) • Adult – 55 (45%) (this combines urgent care and emergency medicine referrals) • Transport – 0 • Adult Crisis –1 (1%) • Peds Crisis – 0 <p>ADULT REFERRALS: highest producers this month were Carline St. Vil Dupuy, APRN Atlantis with 7 (13%), Althea Wilmot, APRN WPB Walk In 6 (11%)</p> <p>PEDIATRIC REFERRALS: highest producer this month was Dr. Clarke in WPB with 13 referrals (62%)</p> <p>Top Diagnosis:</p> <p>ADULT</p> <ul style="list-style-type: none"> • Hyperglycemia 4 (7%) • Uncontrolled hypertension 2 (4%) • Shortness of breath 2 (4%) <p>PEDS</p>			
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	<ul style="list-style-type: none"> Fever, unspecified fever cause 3 (14%) <p>The charts were reviewed for the 9 patients that received more than one referral for HLC in the month of September and all referrals were appropriate and none were escalated to the Medical Director for review. 1 patient had a duplicate referral and was only sent to the hospital once. 2 patients were sent 3 times.</p>			
<p>Peer Reviews</p>	<p><u>Women’s Health</u></p> <p>Q1 2024 15 charts were peer reviewed. 15 were evaluated as “within standard of care”, 0 were evaluated as “ Provider Self-identified Remediation” and 3 as “ Provider Education Required”, 0 charts were evaluated as “Inappropriate care”.</p> <p>Q2 2024 15 charts were peer reviewed. 15 were evaluated as “within standard of care”, 0 were evaluated as “ Provider Self-identified Remediation” and 4 as “ Provider Education Required”, 0 charts were evaluated as “Inappropriate care”.</p> <p>Q3 2024</p>			



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	<p>15 charts were peer reviewed. 15 were evaluated as “within standard of care”, 0 were evaluated as , 0 as “Provider Self-identified Remediation” and 3 “ Provider Education Required.”</p> <p>Q4 2024</p> <p>15 charts were peer reviewed. 15 were evaluated as “within standard of care”, 0 were evaluated as , 0 as “Provider Self-identified Remediation” and 2 “ Provider Education Required.”</p> <p><u>Behavioral Health</u></p> <p>New provider Review - 10 charts were peer reviewed. 2 were evaluated as “within standard of care”, 0 were evaluated as , “ Provider Self-identified Remediation” and 6 “Provider Education Required”, 2 were evaluated as “Inappropriate Care” 0 were not categorized</p>			
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QUALITY METRICS

UDS YTD 2025

Of the 17 UDS Measures: 10 exceeded the HRSA Goal, 7 were short of the HRSA Goal (*Clinic Score/ HRSA Goal*)

Medical UDS Report	Adult Weight screening and follow-up: (85% / 90%)			
	<i>Breast Cancer Screening: (58%/60%)</i>			
	<i>Cervical Cancer Screening: (66% /65%)</i>			
	Childhood Immunization: (56% / 60%)			
	Colorectal Cancer Screening: (42% / 82%)			



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<i>Coronary Artery Disease CAD: (87% / 81%)</i>			
Dental Sealants: (96% / 75%)			
Depression Remission: (48% / 14%)			
Diabetes: (74% / 67%)			
Diabetes (Migrant): (76% / 67%)			
HIV Screening: (70% / 32%)			
Hypertension: (74% / 80%)			
<i>Ischemic Vascular Disease (IVD): (69% / 86%)</i>			
Depression screening: (93% / 83%)			
Depression screening (Homeless): (88% / 83%)			
Tobacco use screening & cessation: (94% / 93%)			
Weight Screening & Counseling for children/teens (85% / 90%)			

Meeting Adjourned: 1:55pm

UDS PROVIDER LEVEL QUALITY MEASURES 2025

NATIONAL QUALITY LEADER METRICS

Load Date
10/6/2025

Filters

		Universe	MET	Not Met	HCD Internal Goal for HRSA	National Average	State Average
Heart Health	Coronary Artery Disease (CAD): Lipid Ther...	4,809	87%		81%		
	Hypertension	6,246	74%		80%		
	Ischemic Vascular Disease (IVD)	900	69%		86%		
	Tobacco use Screening and Cessation Inte..	16,711	94%		93%		
Diabetes	Adult Weight Screening and Follow Up	20,332	85%		90%		
	Diabetes: (HbA1c < 9%)	3,521	74%		67%		
	Diabetes: (HbA1c < 9%) Migrant	373	76%		67%		
Behavioral Health	Depression Remission	494	48%	14%			
	Patients Screened for Depression and Follow-Up	16,942	93%		83%		
	Pts Screened for Depression and F/U (Homeless)	4,044	88%		83%		
Childhood Measures	Childhood Immunization	481	56%		60%		
	Dental Sealants	462	96%		75%		
	Weight Screening and Counseling for children and adolescents	4,408	85%		90%		
HIV Preven tion..	HIV Screening	19,152	70%		32%		
Cancer Prevention	Breast Cancer Screening	3,746	58%		60%		
	Cervical Cancer Screening	9,711	66%		65%		
	Colorectal Cancer Screening	9,072	42%	70	82%		



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

1. Description: Operations Report – September 2025

2. Summary:

This agenda item is the Operations report providing the Health Center’s Productivity report from September 2025.

3. Substantive Analysis:

In September, the Health Centers had a total of 13,328 patient visits across all centers. This is a decrease of 1.7% from prior month, but a 6% increase over September of 2024. There were a total of 9,180 unique patients of which 1,238 or 9% were new to the health centers. 35% of patients were from adult medical, up 3%, 16% from Dental, down 1% and 10% from Pediatrics, down 2% from prior month. In September, the Atlantis Health Center had the highest volume of patient visits with 4,125 combined medical, behavioral health and dental visits, followed by the West Palm Beach Health Center with 2,480 combined visits and then the Delray Health Center with 2,232 combined visits.

4. Fiscal Analysis & Economic Impact Statement:

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

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

N/A
Jessica Cafarelli
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A
Committee Name

N/A
Date Approved



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
October 22, 2025**

6. Recommendation:

Staff recommends the Board approve the Operations Report for September 2025.

Approved for Legal sufficiency:

Signed by:
Bernabe Icaza

0CF6F7DB6706434B Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Angela Santos

6F31AD3F82334F5... Angela Santos
Director of Operations

Signed by:
Joshua Adametz

7E591E77A6B7... Joshua Adametz, DMD, MPH, MA
AVP & Executive Director of Community
Health Centers



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
OCTOBER 22, 2025**

1. Description: Patient Relations Dashboard Report

2. Summary:

This agenda item provides the following:

Quarterly Patient Relations Dashboard Q3 2025

3. Substantive Analysis:

For Quarter 3 2025, there were a total of 49 Patient Relations Occurrences that occurred between 8 Centers. Mobile Hero and Center Administration. This was a slight increase from the previous quarter where we had 36 Complaints and Grievances. The top category for the quarter was Nursing Related issues with 13 occurrences.

Additionally, there were a total of 13 compliments received across 4 Centers and Center Administration.

4. Fiscal Analysis & Economic Impact Statement:

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

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

N/A
Jessica Cafarelli
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A
Committee Name

N/A
Date Approved



**COMMUNITY HEALTH CENTERS
BOARD OF DIRECTORS
OCTOBER 22, 2025**

6. Recommendation:

Staff recommends the Board approve the Quarterly Patient Relations Dashboard for Q3 2025.

Approved for Legal sufficiency:

Signed by:
Bernabe Icaza

0CF6F7DB6706434
Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Alexa Goodwin

25C1B22931DA490
Alexa Goodwin
Director, Patient Experience & Creative
Services

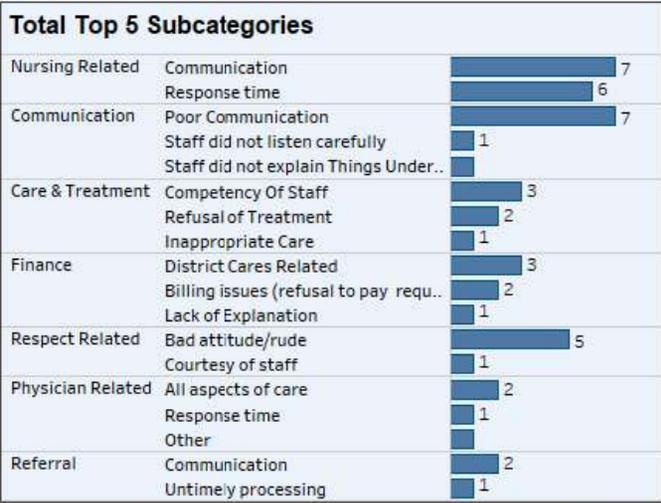
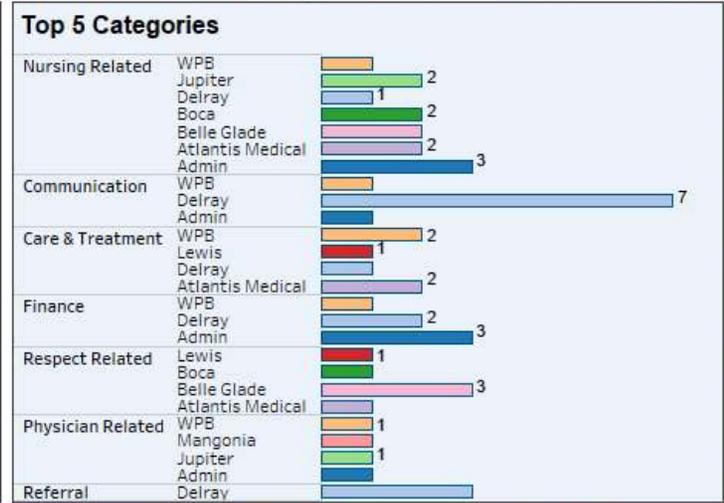
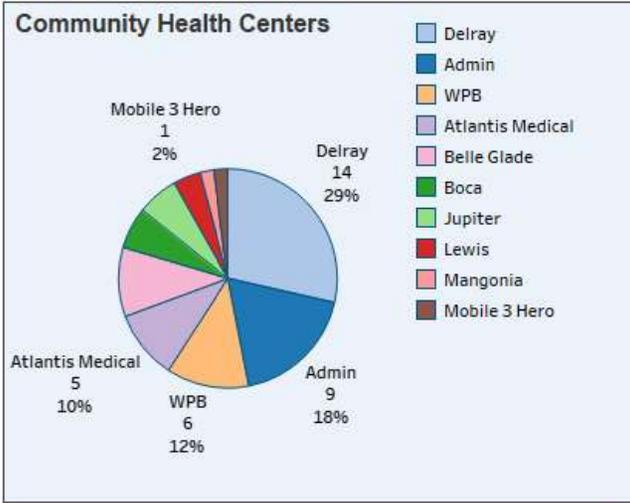
Signed by:
Joselina Adametz

7831609744E7
Joselina Adametz, DMD, MPH, MA
AVP & Executive Director of Community
Health Centers

Patient Relations (Grievances, Complaints & Compliments)
Community Health Centers - 7/1/2025 to 9/30/2025

2025 Q3

Dept Desc All Provider All **Total Complaints and Grievances 49** Late Entries: 3 Clinic All



Total Compliments 13 **Late Entries: 0** **Complaints/Grievances Prev 4 Quarters 147**

