



C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County

BOARD OF DIRECTORS

October 25, 2023

12:30 P.M.

Meeting Location

1515 N. Flagler Drive, Suite 101

West Palm Beach, FL 33401

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



**BOARD OF DIRECTORS MEETING
AGENDA
October 25, 2023
1515 N. Flagler Drive, Suite 101
West Palm Beach, FL 33401**

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

Telephone Dial-in Access: (646) 558-8656 / Meeting ID: 550 789 5592 / Password: 946503

1. Call to Order – Melissa Tascone, Chair

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

2. Agenda Approval

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

3. Awards, Introductions and Presentations

- A. American Medical Association/American Heart Association Awards 2023
(Sheree Wolliston, AHA)

4. Disclosure of Voting Conflict

5. Public Comment

6. Meeting Minutes

- A. **Staff Recommends a MOTION TO APPROVE:**
Board Meeting Minutes of September 26, 2023 [Pages 1-8]

7. Consent Agenda – Motion to Approve Consent Agenda Items

A. ADMINISTRATION

- 7A-1 **RECEIVE AND FILE:**
October 2023 Internet Posting of District Public Meeting
<https://www.hcdpbc.org/resources/public-meetings>

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- 7A-2 **RECEIVE AND FILE:**
Attendance Tracking [Page 9]
- 7A-3 **RECEIVE AND FILE:**
HRSA Digest
(Jesenia Montalvo) [Pages 10-16]
- 7A-4 **RECEIVE AND FILE:**
FY23 School Based Service Expansion Grant
(Jesenia Montalvo) [Pages 17-18]
- 7A-5 **Staff Recommends a MOTION TO APPROVE:**
Approval Selection of Permanent Executive Director
(Darcy Davis) [Pages 19-21]

B. FINANCE

- 7B-1 **Staff Recommends a MOTION TO APPROVE:**
District Clinic Holdings, Inc. Financial Report August 2023
(Jessica Cafarelli) [Pages 22-38]

8. Regular Agenda

A. ADMINISTRATION

- 8A-1 **Staff Recommends a MOTION TO APPROVE:**
Bylaws Amendment
(Bernabe Icaza) [Pages 39-66]

B. EXECUTIVE

- 8B-1 **RECEIVE AND FILE:**
Executive Director Informational Update
(Candice Abbott) [Pages 67-68]

C. CREDENTIALING

- 8C-1 **Staff Recommends a MOTION TO APPROVE:**
Licensed Independent Practitioner Credentialing and Privileging
(Dr. Charmaine Chibar) [Pages 69-71]
- 8C-2 **Staff Recommends a MOTION TO APPROVE:**
General Surgery Delineation of Privileges
(Dr. Charmaine Chibar) [Pages 72-75]

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D. QUALITY

- 8D-1 **Staff Recommends a MOTION TO APPROVE:**
Quality Report
(Dr. Charmaine Chibar) [Pages 76-110]

E. OPERATIONS

- 8E-1 **Staff Recommends a MOTION TO APPROVE:**
Operations Report- September 2023
(Angela Santos) [Pages 111-116]
- 8E-2 **Staff Recommends a MOTION TO APPROVE:**
Patient Relations - September 2023
(Alexa Goodwin) [Pages 117-119]

9. Candice Abbott, Executive Director of FQHC Services Comments

10. Board Member Comments

11. Establishment of Upcoming Meetings

November 28, 2023 (HCD Board Room)

12:30 p.m. Board of Directors

December 13, 2023 (HCD Board Room)

12:30 p.m. Board of Directors

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

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

District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
09/26/2023

Present: Melissa Tascone - Chair; Mike Smith- Vice-Chair; Joseph Gibbons- Secretary; William Johnson - Treasurer; Robert Glass; Alcolya St.Juste;

Absent: Boris Seymore; Julia Bullard; Tammy Jackson-Moore

Excused: N/A

Staff: Darcy Davis (ZOOM); Dr. Belma Andric; Bernabe Icaza; Candice Abbott; Jessica Cafarelli; Regina All (ZOOM); Dr. Charmaine Chibar; Lisa Hogans; Alexa Goodwin; Marisol Miranda; Robin Kish; Macson Florvil; Heather Bokor (ZOOM); Maria Chamberlin; Andrea Steele (ZOOM); Jesenia Montalvo; Dr. Joshua Adametz; Annmarie Hankins; Jessica Ramirez (ZOOM); Cindy Dupont (ZOOM); Gina Kenyon

Minutes Transcribed By: Gina Kenyon

The meeting is scheduled for 12:30pm.

Meeting Began at 12:40pm.

AGENDA ITEM	DISCUSSION	ACTION
1. Call to Order	Ms. Tascone called the meeting to order.	The meeting was called to order at 12:40 p.m.
1A. Roll Call	Roll call was taken.	
1B. Affirmation of Mission	Ms. Tascone read the affirmation of mission.	

2. Agenda Approval 2A. Additions/Deletions/ Substitutions 2B. Motion to Approve Agenda Items	None.	VOTE TAKEN: Mr. Joe Gibbons made a motion to approve the agenda. Mr. Bill Johnson duly seconded the motion. A vote was called and the motion passed unanimously.
3. Awards, Introductions & Presentations	<u>Presentations:</u> Ms. Jessica Cafarelli and Ms. Candice Abbott presented the FY24 Budget to the Board.	No action necessary.
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.
6. Meeting Minutes A. Staff Recommends a MOTION TO APPROVE: Board meeting minutes of August 23, 2023	There were no changes or comments to the minutes dated August 23, 2023.	VOTE TAKEN: As presented, Mr. Bill Johnson made a motion to approve the Board meeting minutes from August 23, 2023. Mr. Joe Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.

7. Committee Reports	There are no Committee Reports at this time.	
8. Consent Agenda – Motion to Approve Consent Agenda Items		VOTE TAKEN: Ms. Alcolya St. Juste motioned to approve the Consent Agenda. Mr. Joe Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.
A. ADMINISTRATION		
8A-1. Receive & File: August 2023 Internet Posting of District Public Meeting	The meeting notice was posted.	Received & Filed. No further action is necessary.
8A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Received & Filed. No further action is necessary.
8A-3. Receive & File: HRSA Digest	Per the request of the clinic Board, the latest HRSA Digest was provided.	Received & Filed. No further action is necessary.
8A-4. Motion To Approve: Budget FY24	This agenda item recommends the Board approve the FY24 Budget.	Motion approved unanimously.
7A-5. Motion To Approve: Board Member Reappointment	This agenda item presents the Board with a recommendation to reappoint, Melissa Tascone to a second term.	Motion approved unanimously.
B. FINANCE		

8B-1. Motion To Approve: DCH, Inc. Financial Report July 2023	July 2023 Financials were provided in the Board packet.	Motion approved unanimously.
9. REGULAR AGENDA		
A. ADMINISTRATION:		
9A-1. Staff Recommends a MOTION TO APPROVE: Billing & Collections Policies.	<p>Annmarie Hankins presented the CL Brumback's Primary Care Clinics Billing and Collection Policies for review & approval.</p> <p>Per Chapter 19 of the HRSA Compliance Manual, the health center Board must review the following at least once every three years, and, as needed, approve updates to policies in the following areas: Sliding Fee Discount Program, Quality Improvement/Assurance, and Billing and Collections. Policies related to billing and collections that require Board approval include those that address the waiving or reducing of amounts owed by patients due to inability to pay, and if applicable those that limit or deny services due to refusal to pay. Please see the following attached Billing and Collection policies for your review and re-approval:</p> <ul style="list-style-type: none"> a. Accounts Receivable – 502-13 b. Advance Beneficiary Notice – 517-16 c. Auditing and Monitoring – 505-16 d. Care Transitions – RCQ-001a e. Charge Capture & Reconciliation – 514-16 f. Claims Submission – 515-16 g. Coding Documentation – 508-16 h. Collections – 509-16 i. Medical Necessity – 507-16 j. Medical Record Documentation – 513-16 k. Patient Payment – 511-15 l. Petty Cash – 519-17 m. Sliding Fee Discount Program – 501-13 n. Training – 510-16 o. Waiver of Fees – 522-19 <p>Mr. Robert Glass asked if there was a nominal fee? Mr. Hankins responded that there is a fee for service and if the patient can't pay at the time of visit, they are billed. Ms. Abbott reminded the board that we do not do collections. We send three bills and if nothing is paid, the balance is written off.</p>	VOTE TAKEN: Mr. Joe Gibbons motioned to approve the Annual Update to Legislative Mandates Policy and Procedure. Ms. Melissa Tascone duly seconded the motion. A vote was called, and the motion passed unanimously.

9A-2. Staff Recommends a MOTION TO APPROVE: Bylaws Amendment Approved 08.23.23 Bylaws Amendment Alternative Proposal (No.2) Discussed 08.23.23	<p>This agenda item recommends the Board approve the Bylaws Amendment 08.23.23 or Bylaws Amendment Alternative Proposal (No.2) Discussed 08.23.23. A motion was made for Option No.2, it was seconded by Mr. Johnson, the Board had discussion, a roll call vote was taken:</p> <p>William Johnson YES Joseph Gibbons YES Mike Smith YES Melissa Tascone YES Alycolya St. Juste NO Robert Glass NO</p> <p>The motion passed.</p> <p>A new motion for Option 1 (Bylaws Amendment Approved 08.23.23) was made by Ms. Alcolya St. Juste and was seconded by Mr. Robert Glass, the Board had discussion, a roll call vote was taken:</p> <p>William Johnson NO Joseph Gibbons NO Mike Smith NO Melissa Tascone NO Alycolya St. Juste YES Robert Glass YES</p> <p>This motion did not pass.</p>	VOTE TAKEN: Mr. Mike Smith motioned to approve the Bylaws Amendment Alternative Proposal (No.2). Mr. Bill Johnson duly seconded the motion. A vote was called, and the motion passed.
9A-3. Staff Recommends a MOTION TO APPROVE: Nomination of New Clinic Board Member	The Nominating Membership Committee met today prior to this Board meeting and is recommending the appointment of Mr. Albert Polk to the Clinic Board. Ms. Candice Abbott presented to the Board Mr. Albert Polk's qualifications and what he can contribute by becoming a member of the Board of Directors.	VOTE TAKEN: Mr. Bill Johnson motioned to approve the appointment of Mr. Albert Polk to the Board. Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.
B. EXECUTIVE		
9B-1 RECEIVE AND FILE: Executive Director Informational Update	<p>Ms. Candice Abbott gave an update on the following:</p> <ul style="list-style-type: none"> • Grants • Additions to the Team • NACHC Conference <p>Mr. Bill Johnson shared his experience at the NACHC Conference that he attended with some of the HCD Team.</p>	Received & Filed. No further action is necessary.

C.CREDENTIALING		
9C-1 Staff Recommends a MOTION TO APPROVE: Licensed Independent Practitioner Credentialing and Privileging.	<p>The agenda item represents the licensed independent practitioners recommended for credentialing and privileging by the Vice President, Chief Medical Officer.</p> <p>Dr. Chibar reviewed and 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:</p> <ul style="list-style-type: none"> ➤ 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) <p>LIP(s):</p> <p>Nylsa Calderon, LMHC joined the Lantana Clinic in 2015 as a Licensed Mental Health Counselor. She attended the Palm Beach Atlantic University. Ms. Calderon has been in practice for ten years and is fluent Spanish.</p> <p>Kisha Marzouca, MD joined the West Palm Beach Clinic in 2021 specializing in Pediatrics. She attended the SUNY Health Science Center at Brooklyn and also completed her residency at SUNY Health Science Center at Brooklyn. Dr. Marzouca has been in practice for nineteen years.</p>	VOTE TAKEN: Mr. Robert Glass motioned to approve Licensed Independent Practitioner Credentialing and Privileging Mr. Joe Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.
D.QUALITY		
9D-1. Staff Recommends a MOTION TO APPROVE: Quality Reports.	<p>This agenda item presents the updated Quality Improvement & Quality Updates:</p> <ul style="list-style-type: none"> • Quality Council Meeting Minutes – September 2023 • UDS Report – YTD • Provider Productivity – August 2023 <p>Dr. Chibar presented the above topics and reviewed the UDS Report Dashboard.</p>	VOTE TAKEN: Ms. Alcolya St. Juste made a motion to approve the Quality Reports as presented. Mr. Robert Glass duly seconded the motion. A vote was called, and the motion passed unanimously.
E. OPERATIONS		

<p>9E-1. Staff Recommends a MOTION TO APPROVE: Operations Reports August 2023</p>	<p>In August, the Health Centers had a total of 9,408 unique patients. This is a 12% increase from previous month. Our unique new patients totaled was 2,402 which remains consistently at 25% of overall unique patients. In provider visits the Health Centers had a total of 13,473 visits. This was an increase of 12% from the month prior and 17% higher than August 2022. 40% of patients were from adults Primary Care, 22% from Dental which was a 3% decrease and 14% from Pediatrics which is a 3% increase over previous month. In August the Lantana Health Center had the highest volume with 2,147 visits followed by the Mangonia Health Center with 2,079 visits.</p> <p>Our payer mix for August remains consistent with previous month with 54% uninsured. 41% of patients were Managed Care and 4% Medicaid.</p> <p>Health Centers continue to have 60% female. 49% of patients reported as White and 43% Black or African American. 39% of patients reported as Hispanic. Our largest age group continue to be those between the ages of 30-39 years old with 16% of patients.</p> <p>In August our Homeless population averaged 32.8% with a total of 3,158 homeless patients between all Health Centers.</p> <p>Agricultural Worker averaged 4.7% between all Health Centers. The majority continue to come from the Belle Glade with 30% of their patients reporting as agricultural worker.</p> <p>The No Show rate average for all Health Center has remained consistent. For August the no show rate was 15.3%. Of those only 3% were from Telehealth. The no show rate for established patients decreased from 18% to 16% but increased slightly for new patients from 8.54% to 9.09%. The Women's Health Department consistently has a higher percent of new patient no shows ranging from 21%-29%. The dental departments also consistently have the lower percent of established patient no shows ranging from 6% to 13%.</p> <p>Year to date the Health Centers walk-in average is 19% in medical and 14% in dental totaling 18,111 walk in patients. In</p>	<p>VOTE TAKEN: Mr. Joe Gibbons made a motion to approve the Operations Reports- August 2023 as presented. Ms. Alcolya St. Juste duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
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	August this was slightly higher at 20% for medical and 16% for dental. The West Palm Beach Health Center had the highest number of walk-ins for medical. For dental the Delray Health Center had the highest number of walk-ins.	
10. SVP and Chief Operating Officer Comments	No Comments.	No action necessary.
11. Board Member Comments	Mr. Joe Gibbons said this was a good meeting.	No action necessary.
12. Establishment of Upcoming Meetings	<p><u>October 25, 2023 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>November 28, 2023 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>December 13, 2023 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p>	No action necessary.
13. Motion to Adjourn	Ms. Tascone motioned to adjourn the public meeting at 2:18 pm.	VOTE TAKEN: Mr. Robert Glass made a motion to adjourn. Mr. Joe Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.

Minutes Reviewed by: _____
Signature
Date

C. L. Brumback Primary Care Clinics

Board of Directors

Attendance Tracking

	01/25/23	02/22/23	03/29/23	04/27/23	05/24/23	06/28/23	07/26/23	08/23/23	09/26/23	10/25/23	11/28/23	12/13/23
Mike Smith	X	X	X	X	X	X	N/A	X	X			
Melissa Tascone	X	X	X	X	X	X	N/A	X	X			
Julia Bullard	X	X	X	E	X	X	N/A	A	E			
Joseph Gibbons	X	X	X	X	X	X	N/A	X	X			
John Casey Mullen	X	---	---	---	---	---	---	---	---	---	---	---
James Elder	A	---	---	---	---	---	---	---	---	---	---	---
Irene Figueroa	A	---	---	---	---	---	---	---	---	---	---	---
Tammy Jackson-Moore	E	A	E	E	E	A	N/A	E	E			
Robert Glass	X (ZOOM)	X	X	X	A	X	N/A	X	X			
William Johnson	X	X	X	X	X	X	N/A	X	X			
Boris Seymore	----	X	A	A	X	A	N/A	A	A			
Alcolya St. Juste	----	A	X	X	X	X (ZOOM)	N/A	X	X			
Albert Polk	----	----	----	----	----	----	----	----	----			

X= Present

C= Cancel

E= Excused

A= Absent

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

1. Description: HRSA Digest

2. Summary:

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

3. Substantive Analysis:

The October HRSA Digest highlighted Health Center Participation in CDC's Bridge Access Program, Health Center Preparedness and Response Forum, SAC Applications for April and May 1 Starts, and 2023 UDS Webinar Series.

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2B9491 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

6. Recommendation:

Staff recommends the Board Receive and File the HRSA Digest.


Approved for Legal sufficiency:

DocuSigned by:

0CF6F7DB670643B Bernabe Icaza
SVP & General Counsel

DocuSigned by:

D31F5A902D3B449 Jesenia Montalvo
Manager, Regulatory & Accreditation

DocuSigned by:

F637D209DB4C222 Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

Send Us Questions, Participate in CDC's Bridge Access Program, Health Center Preparedness Forum

HRSA sent this bulletin at 10/03/2023 10:28 AM EDT

Subscribe to updates from HRSA

Email Address
name@example.com
[Subscribe](#)

e.g.



Primary Health Care Digest

Share Bulletin



October 3, 2023

[SHARE](#)

Got Questions?

We're dedicating our upcoming Today with Macrae: Health Center Program Updates webcast to answering your questions. Submit yours by Tuesday, October 10, via the [BPHC Contact Form](#) (General/Other HRSA > Other Topics). We'll do our best to answer as many questions as possible. Join us:

Tuesday, October 17
2:00-3:00 p.m. ET
[Join the day of the session](#)
Join by phone: 833-568-8864
Webinar ID: 161 225 0183



Resources to Support Health Center Participation in CDC's Bridge Access Program

CDC's [Bridge Access Program](#) temporarily provides updated COVID-19 vaccines at no cost for adults without health insurance and adults whose insurance does not cover all COVID-19 vaccination costs. This program will end by December 31, 2024.

States participating in CDC's Bridge Access Program are expected to direct 25% of each of their COVID-19 vaccine allocations to health centers within their jurisdictions.



What can health centers do?

1. Inform your state [immunization program manager](#) that you wish to participate in the CDC Bridge Access Program.
2. Use CDC's [communications toolkit for partners](#) (PDF) to expand access to no-cost COVID-19 vaccines for eligible adults – it includes resources in English and Spanish. Also, check out their [FAQs](#) (PDF) and [email CDC](#) with questions.
3. Consider using your HRSA Bridge funding to host community outreach events. Send questions about HRSA's Bridge funding through the [BPHC Contact Form](#) (COVID-19 > COVID-19 Funding > Bridge Access Program).

Thursday! Come to our joint webinar on the program with CDC:

Thursday, October 5
4:00-5:00 p.m. ET
[Join the day of the session](#)
Join by phone: 833-568-8864
Webinar ID: 160 959 1980

NEXT WEEK: Health Center Preparedness and Response Forum

A dozen HRSA-funded National Training and Technical Assistance Partners (NTTAPs) are collaborating on this four-session forum focused on preparing for and responding to various emergencies. This series is primarily for health centers serving priority populations, such as agricultural workers, individuals experiencing homelessness, public housing residents, and other vulnerable groups, including older adults and Asian American, Pacific Islander, and Native Hawaiian patients.

The first session will focus on infectious and vector-borne diseases.

Thursday, October 12
1:00-2:00 p.m. ET
[Registration page](#)



Did You Miss It?

Here are some of our most popular items from September:

- Take a [brief survey on health center training and technical assistance \(TA\) needs](#) from the National Association of Community Health Centers.
- See the recording and slides from our **September 14 Today with Macrae webcast** on our [Engaging with BPHC webpage](#).
- Access **resources on HRSA's Bridge funding**: [TA webpage](#) and [FAQs](#).

Missed an issue? Catch up in our [online archive](#).



Jump To: [Workforce](#) | [Additional Resources](#) | [Training Calendar](#)

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

What's New

Deadline Reminder: Service Area Competition Applications for April 1 and May 1 Starts

Fiscal year (FY) 2024 Service Area Competition (SAC) applications for April 1 starts (HRSA-24-069) are due in HRSA's Electronic Handbooks (EHBs) on Wednesday, October 18, by 5:00 p.m. ET.

FY 2024 SAC applications for service areas with a May 1 period of performance start date (HRSA-24-070) are due in:

- [Grants.gov](#): Monday, October 16, by 11:59 p.m. ET.
- EHBs: Wednesday, November 15, by 5:00 p.m. ET.

TA materials are available on the [SAC TA webpage](#).

HRSA Health Center COVID-19 Response Team Receives the Secretary's Award for Meritorious Service



Above: Members of HRSA's Health Center COVID-19 Response Team pose with HHS Secretary Xavier Becerra and HRSA Administrator Carole Johnson (at center). The team received the Secretary's Award for Meritorious Service for their work, especially on the HRSA Health Center COVID-19 Vaccine Program. This is the second highest honor award granted by the Department.

TODAY: 2023 Uniform Data System Reporting Webinar Series

Our TA webinar series will help you submit accurate, timely, and complete 2023 Uniform Data System (UDS) reports. See [our training flyer](#) (PDF) for details and registration for all sessions.



October sessions explain UDS reporting requirements, across all clinical tables, related to three areas of clinical quality measures:

TODAY: UDS Clinical Tables Part 1: Screening and Preventive Care Measures

1:00-2:30 p.m. ET
[Registration page](#)

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

Wednesday, October 11
1:00-2:30 p.m. ET
[Registration page](#)

UDS Clinical Tables Part 3: Chronic Disease Management

Thursday, October 26
1:00-2:30 p.m. ET
[Registration page](#)

Recording and Data Brief Available: 2022 UDS Trends Webinar

Thank you to those who joined our webinar last month. The recording and slides are available on the [UDS Data webpage](#). Also available is the [2022 UDS Trends Data Brief](#) (PDF), a companion product to the webinar that summarizes key 2022 data trends.

GeoCare Navigator Coming in Early 2024

HRSA is launching an enhanced Health Center Program GeoCare Navigator in early 2024 on [data.hrsa.gov](#). We will sunset the UDS Mapper at the end of March 2024. There will be no gap in access to a mapping tool.

You can use the UDS Mapper through March 2024 to generate service area maps for funding applications, change in scope requests, and other applications. You can access user guides and recorded webinars on the [UDS Mapper Tutorials and Resources webpage](#) until we sunset the tool.

Policy Tip: Scope of Project



Training Calendar



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

Through October 10

School Based Service Expansion Post-Award Q&A

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

UDS Clinical Tables Part 1: Screening and Preventive Care Measures

Tuesday, October 3
1:00-2:30 p.m. ET
[Registration page](#)

Leadership Training for Clinical Staff – Leading a Diverse Staff

Hosted by ACU's STAR² Center
Thursday, October 5
2:00-3:15 p.m. ET
[Registration page](#)

HRSA-CDC Bridge Access Program

Thursday, October 5
4:00-5:00 p.m. ET
[Join the day of the session](#)
Join by phone: 833-568-8864
Webinar ID: 160 959 1980

Getting Back on Track: How to Reach Pediatric Patients for Preventive Needs Using Population Health Tools and Mobile Van Service to Aid in This Effort

Hosted by RJHA
Friday, October 6
Noon-1:15 p.m. ET
[Registration page](#)

COVID-19 Response Program Office Hours

Tuesday, October 10
1:00-2:00 p.m. ET
[Join the day of the session](#)

Effective Recruitment Strategies for Nurse Practitioner and Physician Associate Postgraduate Training Programs

Hosted by Community Health Center, Inc. (CHC)
Tuesday, October 10
2:30-3:30 p.m. ET
[Registration page](#)
****CE available****

Upcoming

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

Wednesday, October 11
1:00-2:30 p.m. ET
[Registration page](#)

Health Center Preparedness and Response Forum: Infectious and Vector-borne Diseases

Hosted by multiple NTTAPs
Thursday, October 12
1:00-2:00 p.m. ET
[Registration page](#)

Preventing Gender-Based and Intimate Partner Violence

Thursday, October 12
2:00-3:00 p.m. ET

Homepage

We include everything you need to know about scope of project on our [Scope of Project webpage](#):



- Check out our [Welcome to Health Center Scope of Project 101 video](#) (also available in [Spanish](#)) to learn the five areas that make up scope of project.
- Explore how to [maintain an accurate scope of project](#) and [correctly document](#) it in the proper forms.
- Dive into the list of informational resources included in the [Scope of Project Resources page](#).

If you have a question that these resources don't answer, submit it via the [BPHC Contact Form](#).

Preventing Gender-Based and Intimate Partner Violence

View and download HRSA's newly released [Implementation Framework for Preventing and Responding to IPV](#). Learn about HRSA and HHS programs that address gender-based and intimate partner violence (IPV) at HRSA's Domestic Violence Awareness Month webinar.

Thursday, October 12
2:00-3:00 p.m. ET
[Registration page](#)

Vaccination Coverage and Hesitancy Among Pregnant Women

CDC's [most recent Morbidity and Mortality Weekly Report](#) concludes: *Efforts to improve vaccination coverage among pregnant women, such as provider recommendations for vaccination and informative conversations with patients to address vaccine hesitancy, could reduce adverse maternal and infant illness and death from vaccine-preventable diseases.*

Workforce**Empowering Comprehensive Care: Recruiting & Retaining the Integrated Care Team Webinar Series**

Health centers are vital in offering holistic care to patients, including and beyond medical treatment, to encompass a diverse range of services. This two-part webinar series, hosted by the Association of Clinicians for the Underserved's (ACU) STAR² Center, will feature presenters from two NTTAPs: the National Center for Medical-Legal Partnerships (NCMLP) and the National Network for Oral Health Access (NNOHA). The series will provide a unique opportunity for health center professionals to explore innovative ways of building and maintaining transdisciplinary health care teams.

Tuesday, October 24,
and Tuesday, October 31
3:00-4:00 p.m. ET
[Registration page](#)

NTTAP Learning Collaboratives

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

- **The Role of Identifying the Social Drivers of Health in Advancing Health Equity**
Renaye James Healthcare Advisors (RJHA) will cover how to assess disparities in health outcomes and barriers experienced within different communities. Trainings will focus on evidence-based health-risk assessment tools and how to use a team-based approach to incorporate these tools into patient care. [Register by Wednesday, October 11.](#)
- **Language Access**
Join the National Center for Farmworker Health to focus on reducing health disparities and the gaps in language access to improve clinical quality delivery for the migratory and seasonal agricultural worker population. You'll gain effective strategies to provide culturally responsive care and reduce barriers to care. Speakers will use the National CLAS Standards to assess the cultural appropriateness of staff and health center language access services. [Registration page.](#)

State Health Workforce Toolkit

The National Governors Association's (NGA) new [web-based toolkit](#) provides actionable resources to states working to address health care workforce issues. HRSA's National Organizations of State and Local Officials cooperative agreement provided support for this NGA toolkit.

Additional Resources

The Joint Commission's 2023 Ambulatory Accreditation Essentials

[Registration page](#)**Today with Macrae: Health Center Program Updates**

Tuesday, October 17
2:00-3:00 p.m. ET
[Join the day of the session](#)
Join by phone: 833-568-8864
Webinar ID: 161 225 0183

HITEQ Highlights: Using your Health Center Data to Manage the Business of Value-Based Care

Hosted by the Health Information Technology, Evaluation, and Quality (HITEQ) Center
Tuesday, October 17
2:00-3:30 p.m. ET
[Registration page](#)

Promoting Resilient Workforces: Workplace Strategies to Address Impacts of Trauma and Domestic Violence

Hosted by Health Partners on IPV + Exploitation
Wednesday, October 18
2:00-3:00 p.m. ET
[Registration page](#)

Increasing Access to Comprehensive Care: The Crucial Role of the Community Health Worker

Hosted by CHC
Wednesday, October 18
2:00-3:00 p.m. ET
[Registration page](#)
****CE available****

Acting on Climate Change for a Healthier Future: The Role of Health Centers

Hosted by the National Nurse-Led Care Consortium and the National Center for Health in Public Housing
Wednesday, October 18,
and Wednesday, October 25
2:00-3:00 p.m. ET
[Registration page](#)

At the Intersection of HIV and HCV: Part 1: Prevention Frameworks and Strategies

Hosted by the Corporation for Supportive Housing
Wednesday, October 18
2:00-3:30 p.m. ET
[Registration page](#)

Expanding Access to Oral Health Care for Veterans

Hosted by NNOHA
Thursday, October 19
1:00-2:00 p.m. ET
[Registration page](#)
****1.0 CDE is available****

Improving Diabetes with Population Health Tools

Hosted by RJHA
Friday, October 20
1:00-2:15 p.m. ET
[Registration page](#)

Empowering Comprehensive Care: Recruiting & Retaining the Integrated Care Team Webinar Series

Hosted by the ACU's STAR² Center and featuring NCMLP and NNOHA
Tuesday, October 24,
and Tuesday, October 31
3:00-4:00 p.m. ET
[Registration page](#)

Enhancing Access to

and 2023 Environment of Care

The Joint Commission's *2023 Ambulatory Accreditation Essentials* and the *2023 EC/LSC for Ambulatory Care Conference* on-demand programs are available to all HRSA partners online and offer Continuing Education credit:

- The 2023 Ambulatory Care Accreditation Essentials (ANCC: 13.5; ACHE: 13.5)
- The 2023 EC/LSC for Ambulatory Care Conference (ACHE: 12.5)

Enroll by [visiting this website](#) and entering subscribe key "HRSA" within the registration form.

In case you missed it:

[Visit the Primary Health Care Digest archive.](#)

Do you forward the Digest to others?

Encourage them to [subscribe](#).

Comprehensive Care: A Hands-On Guide to Implementing Standing Orders

Hosted by CHC

Thursday, October 26

Noon-1:00 p.m. ET

[Registration page](#)

****CE available****

UDS Clinical Tables Part 3: Chronic Disease Management

Thursday, October 26

1:00-2:30 p.m. ET

[Registration page](#)

Reporting UDS Financial and Operational Tables

Tuesday, November 7

1:00-2:30 p.m. ET

[Registration page](#)

Webinars are hosted by HRSA unless otherwise noted.



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**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

1. Description: FY23 School Based Service Expansion Grant

2. Summary:

SBSE (School-Based Service Expansion) Grant opportunity provides up to \$350,000 annually for a 2-year performance period for new school-based service sites. HRSA notified we did not receive the funding.

3. Substantive Analysis:

The School-Based Service Expansion application for grant opportunity did not score high enough to receive funding. An objective review committee (ORC), made up of individuals qualified by training and experience, evaluated applications based on:

- The review criteria in the funding opportunity, and
- The guidelines in the HRSA Scoring Rubric.

This is a pre-award decision. We cannot appeal it under 45 CFR Part 16.

The application will remain in an active status for up to one year to be considered for future funding. We applied as it ties in nicely with our new 25-year collaborative agreement with Children's Partnership Schools (CPS), FAU and the School Board to provide healthcare services at Lake Worth High School and JFK Middle school, with a start date of August 2023.

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E00481 Jessica Cafarelli
 Interim VP & Chief Financial Officer

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

5. Reviewed/Approved by Committee:

N/A	N/A
_____	_____
Committee Name	Date

6. Recommendation:

Staff recommends the Board Receive and File the Status Update of the FY23 SBSE Grant Application.


Approved for Legal sufficiency:

DocuSigned by:


0CF6F7DB670643B Bernabe Icaza
SVP & General Counsel

DocuSigned by:


D31F5A902D3B449 Jesenia Montalvo
Mgr. of Regulatory & Accreditation

DocuSigned by:


F637D209DB524E7 Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

1. Description: Approval Selection of Permanent Executive Director

2. Summary:

On August 23rd, 2023, the selection of Candice Abbott as the interim Executive Director was approved by the District Clinic Holdings, Inc. d/b/a C.L. Brumback Primary Clinics (“Clinics”) Board of Directors (“Board”).

3. Substantive Analysis:

The Health Care District of Palm Beach County (“HCD”) and the Clinics entered into a co-applicant arrangement in 2012 in order to transition the responsibility for operating the four existing Federally Qualified Health Centers (“FQHC”) from the State of Florida Department of Health to the HCD. In order to maintain the FQHC status and to receive grant funding from the Health Resources and Services Administration (“HRSA”), certain authorities were delegated to the Board as requirements of the HRSA rules and regulations. Several of the key components of these responsibilities include:

- Establishment of general policies for operating the FQHC’s
- Approval for the selection and dismissal of the Executive Director
- Evaluation of the clinic activities including productivity, patient satisfaction, achievement of project objectives and services utilization patterns
- Assuring that the clinics are operated in compliance with applicable federal, state and local laws and regulations
- Maintaining infrastructure agreements and contracts regarding sites, services and outreach
- Strive for top quartile of Uniform Data System quality awards

Also, there is an agreement between the HCD and the Clinics, which further outlines the role of each party in operating the clinics. The HCD has a robust infrastructure that provides necessary operational support and employs the Clinics’ personnel. Additionally, both parties have agreed to jointly review and approve a budget and financial plan each year.

In order to maintain continuity and stability in these unprecedented times, as well as maintain transparency into any proposed changes to the delivery of care at the FQHC’s, we believe that it would be in the best interest of the Clinics to allow Candice Abbott to stay in this role permanently.

4. Fiscal Analysis & Economic Impact Statement:

CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

Jessica Cafarelli

CA6A21FF2E098363 Jessica Cafarelli

Interim 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 appointment of Ms. Abbott as the permanent Executive Director of the Clinics (HRSA Project Director).

Approved for Legal sufficiency:

DocuSigned by:

Bernabe Icaza

0CF6F7DB67064B Bernabe Icaza

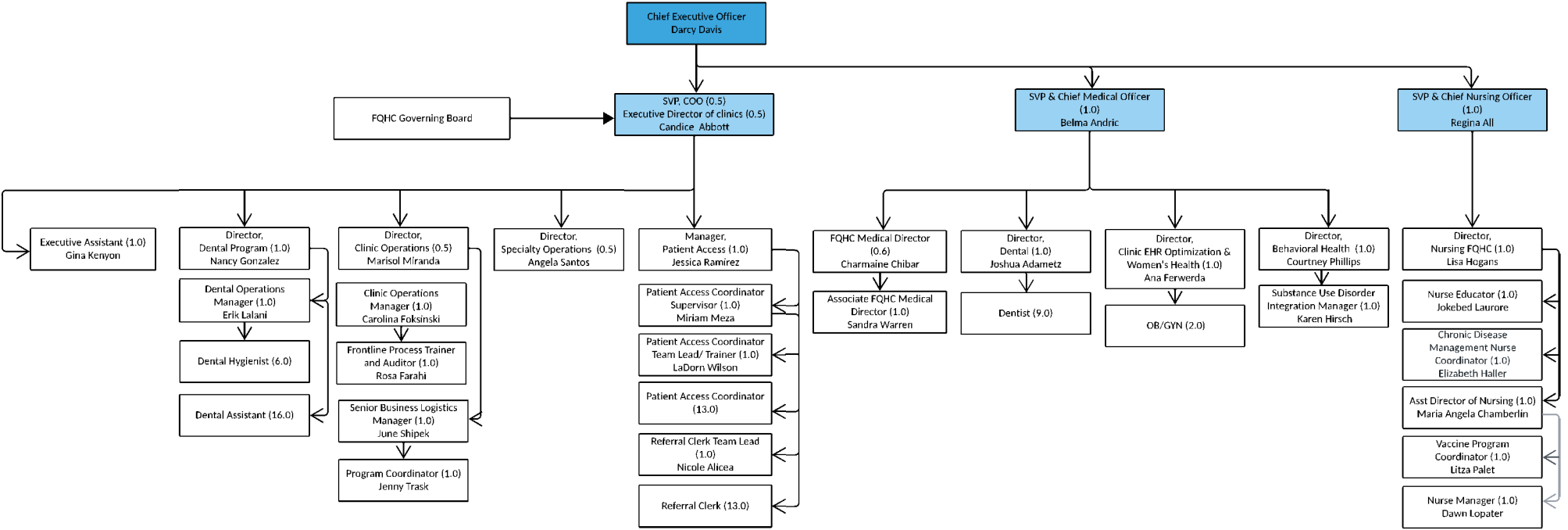
SVP & General Counsel

DocuSigned by:

Darcy Davis

77A3B53589A147D Darcy J. Davis

Chief Executive Officer



C. L. Brumback
Primary Care Clinics
Organizational Chart
(September 2023)

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

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

2. Summary:

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

3. Substantive Analysis:

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

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E93481 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

6. Recommendation:

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


Approved for Legal sufficiency:

DocuSigned by:

0CF6F7DB6706434... Bernabe Icaza
SVP & General Counsel

DocuSigned by:

CA6A21FF2E09481... Jessica Cafarelli
Interim VP & Chief Financial Officer

DocuSigned by:

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



MEMO

To: Finance Committee

From: Jessica Cafarelli
Interim VP, Chief Financial Officer

Date: October 25, 2023

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

The August financial statements represent the financial performance through the eleventh month of the 2023 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, cash increased \$662k as a result of normal operations and subsidy funding. Due from Other Governments increased \$710k as a result of grant recognition.

On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$64k) or (0.7%) primarily due to a decrease in Medicaid Wraparound funding. Gross patient revenue YTD was favorable to budget by \$5.3M due to increased patient visits. Total YTD revenues were favorable to budget by \$1.4M. This was mostly due to a favorable variance in PRF and other revenue recognized offsetting the unfavorable variance in net patient revenue. Operational expenses before depreciation were favorable to budget by \$4.5M due mostly to positive variances in salaries, wages, and benefits of \$3.1M, purchased services of \$327k, medical supplies of \$255k, other supplies of \$253k, medical services of \$105k, repairs and maintenance \$180k, and lease and rental of \$489k. Total YTD net margin was a loss of (\$16.4M) compared to the budgeted loss of (\$24.4M) resulting in a favorable variance of \$8.0M or (32.8%).

Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$3.0M). The Medical clinics YTD gross patient revenue was favorable to budget by \$2.8M, related to an increase in patient volumes. The Medical clinics total YTD revenue was unfavorable to budget by (\$1.8M). Total operating expenses of \$24.3M were favorable to the budget of \$28.7M by \$4.4M or 15.2%. The positive variance is mostly due to salaries, wages, and benefits of \$3.2M, purchased services of \$285k, medical supplies \$278k, other supplies of \$190k, repairs and maintenance \$231k, and lease and rental of \$441k. Past staffing challenges as well as expense timing are driving these favorable YTD variances. Total YTD net margin was favorable to budget by \$4.3M or (19.7%).

Net patient revenue YTD for the Dental clinics was favorable to budget by \$2.5M or 98.6%. The Dental clinics total YTD gross patient revenue was favorable to budget by \$1.5M. Increased patient visits are favorably impacting net patient revenue results. Total YTD operating expenses of \$4.9M were favorable to budget by \$143k. Total YTD net margin was favorable by \$680k versus budgeted loss of (\$2.6M) for a favorable variance of \$3.3M or (126.0%).

District Clinic Holdings, Inc.
Comparative Statement of Net Position

	August 31, 2023	July 31, 2023	Increase (Decrease)
Assets			
Cash and Cash Equivalents	\$ 13,821,067	\$ 13,159,304	\$ 661,762
Accounts Receivable, net	3,162,945	2,901,765	261,180
Due From Other Governments	1,378,001	667,807	710,194
Other Current Assets	290,077	319,674	(29,597)
Net Investment in Capital Assets	2,690,308	2,719,854	(29,546)
Right Of Use Assets	3,239,214	3,239,214	0
Total Assets	\$ 24,581,611	\$ 23,007,618	\$ 1,573,992
Liabilities			
Accounts Payable	421,829	259,110	162,720
Deferred Revenue-	12,672	13,672	(1,000)
Accrued Interest	43,109	43,109	0
Other Current Liabilities	1,796,991	1,549,271	247,720
Lease Liability	3,475,476	3,475,476	0
Non-Current Liabilities	1,147,933	1,153,039	(5,106)
Total Liabilities	6,898,010	6,493,676	404,334
Deferred Inflows of Resources			
Deferred Inflows	\$ 33,656	\$ 33,656	\$ 0
Net Position			
Net Investment in Capital Assets	2,690,308	2,719,854	(29,546)
Unrestricted	14,959,637	13,760,432	1,199,205
Total Net Position	17,649,945	16,480,286	1,169,658
Total Liabilities, Deferred Inflows of Resources and Net Position	\$ 24,581,611	\$ 23,007,618	\$ 1,573,992

Note: Amounts may not foot due to rounding.

Current Month								Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 2,841,225	\$ 2,138,648	\$ 702,577	32.9%	\$ 2,162,194	\$ 679,032	31.4%	Gross Patient Revenue	\$ 28,749,523	\$ 23,426,009	\$ 5,323,514	22.7%	\$ 23,762,963	\$ 4,986,561	21.0%
806,290	556,588	249,702	44.9%	361,966	444,324	122.8%	Contractual Allowance	9,420,446	6,097,642	3,322,804	54.5%	5,155,004	4,265,442	82.7%
822,983	912,197	(89,214)	(9.8%)	1,089,727	(266,743)	(24.5%)	Charity Care	10,894,804	10,004,102	890,702	8.9%	10,178,431	716,374	7.0%
710,907	302,988	407,919	134.6%	421,793	289,113	68.5%	Bad Debt	3,514,378	3,311,964	202,414	6.1%	3,977,635	(463,257)	(11.6%)
2,340,179	1,771,773	568,406	32.1%	1,873,486	466,693	24.9%	Total Contractuals and Bad Debt	23,829,628	19,413,708	4,415,920	22.7%	19,311,070	4,518,558	23.4%
365,321	473,850	(108,529)	(22.9%)	187,531	177,789	94.8%	Other Patient Revenue	4,197,472	5,168,580	(971,108)	(18.8%)	4,304,237	(106,765)	(2.5%)
866,367	840,725	25,642	3.0%	476,239	390,128	81.9%	Net Patient Revenue	9,117,367	9,180,881	(63,514)	(0.7%)	8,756,130	361,237	4.1%
30.49%	39.31%			22.03%			Collection %	31.71%	39.19%			36.85%		
765,354	689,465	75,889	11.0%	1,118,835	(353,481)	(31.6%)	Grants	9,769,155	9,518,570	250,585	2.6%	13,579,429	(3,810,274)	(28.1%)
818	-	818	-	-	818	-	Interest Earnings	818	-	818	-	-	818	-
-	-	-	-	8,124	(8,124)	-	Other Financial Assistance	738,416	381,143	357,273	93.7%	884,008	(145,592)	(16.5%)
7,104	2,460	4,644	188.8%	1,050	6,054	576.6%	Other Revenue	918,761	27,060	891,701	3,295.3%	3,717	915,044	24,617.8%
\$ 1,639,642	\$ 1,532,650	\$ 106,992	7.0%	\$ 1,604,248	\$ 35,394	2.2%	Total Revenues	\$ 20,544,516	\$ 19,107,654	\$ 1,436,862	7.5%	\$ 23,223,285	\$ (2,678,768)	(11.5%)
							Direct Operating Expenses:							
1,797,791	1,856,685	58,894	3.2%	1,593,485	(204,306)	(12.8%)	Salaries and Wages	18,476,681	21,160,635	2,683,954	12.7%	16,107,633	(2,369,048)	(14.7%)
467,410	484,176	16,766	3.5%	413,872	(53,538)	(12.9%)	Benefits	4,934,633	5,325,931	391,298	7.3%	4,511,369	(423,264)	(9.4%)
36,797	63,786	26,989	42.3%	63,619	26,823	42.2%	Purchased Services	374,675	701,648	326,973	46.6%	621,931	247,256	39.8%
91,719	103,083	11,363	11.0%	63,158	(28,562)	(45.2%)	Medical Supplies	879,335	1,133,912	254,577	22.5%	655,571	(223,764)	(34.1%)
166,181	59,966	(106,215)	(177.1%)	38,524	(127,657)	(331.4%)	Other Supplies	406,625	659,629	253,004	38.4%	362,156	(44,468)	(12.3%)
71,557	75,160	3,603	4.8%	44,392	(27,165)	(61.2%)	Medical Services	721,490	826,757	105,267	12.7%	524,469	(197,020)	(37.6%)
45,452	48,958	3,506	7.2%	40,157	(5,295)	(13.2%)	Drugs	473,740	538,539	64,800	12.0%	495,270	21,530	4.3%
46,419	53,684	7,265	13.5%	35,421	(10,999)	(31.1%)	Repairs and Maintenance	410,365	590,523	180,158	30.5%	390,523	(19,842)	(5.1%)
177,859	165,334	(12,526)	(7.6%)	94,991	(82,868)	(87.2%)	Lease and Rental	1,330,061	1,818,670	488,609	26.9%	1,141,991	(188,070)	(16.5%)
7,501	11,522	4,021	34.9%	8,644	1,143	13.2%	Utilities	81,714	126,737	45,023	35.5%	81,869	155	0.2%
154,792	75,576	(79,216)	(104.8%)	25,707	(129,085)	(502.1%)	Other Expense	1,093,209	831,335	(261,873)	(31.5%)	492,407	(600,802)	(122.0%)
4,947	4,083	(865)	(21.2%)	5,819	872	15.0%	Insurance	58,906	44,907	(13,999)	(31.2%)	51,460	(7,446)	(14.5%)
3,068,426	3,002,011	(66,414)	(2.2%)	2,427,788	(640,637)	(26.4%)	Total Operating Expenses	29,241,432	33,759,224	4,517,792	13.4%	25,436,648	(3,804,784)	(15.0%)
							Net Performance before Depreciation & Overhead Allocations	\$ (8,696,916)	\$ (14,651,570)	\$ 5,954,654	(40.6%)	\$ (2,213,363)	\$ (6,483,552)	292.9%
29,546	33,250	3,704	11.1%	25,462	(4,085)	(16.0%)	Depreciation	292,737	365,749	73,012	20.0%	341,461	48,724	14.3%
							Overhead Allocations:							
10,520	10,722	202	1.9%	-	(10,520)	-	Risk Management	106,007	117,944	11,937	10.1%	67,426	(38,581)	(57.2%)
81,579	109,939	28,360	25.8%	142,758	61,179	42.9%	Rev Cycle	887,138	1,209,324	322,186	26.6%	1,747,601	860,463	49.2%
3,234	6,555	3,321	50.7%	2,089	(1,145)	(54.8%)	Internal Audit	25,193	72,107	46,914	65.1%	18,296	(6,897)	(37.7%)
29,123	32,746	3,623	11.1%	29,778	655	2.2%	Home Office Facilities	343,980	360,208	16,228	4.5%	311,233	(32,747)	(10.5%)
22,417	41,476	19,059	46.0%	48,402	25,985	53.7%	Administration	497,720	456,241	(41,479)	(9.1%)	476,821	(20,899)	(4.4%)
69,168	99,947	30,779	30.8%	56,162	(13,006)	(23.2%)	Human Resources	752,760	1,099,420	346,660	31.5%	574,477	(178,283)	(31.0%)
27,627	27,766	139	0.5%	24,340	(3,287)	(13.5%)	Legal	190,226	305,423	115,197	37.7%	193,329	3,103	1.6%
3,720	4,171	451	10.8%	3,764	44	1.2%	Records	37,962	45,881	7,919	17.3%	34,496	(3,466)	(10.0%)
7,570	11,059	3,489	31.5%	6,907	(663)	(9.6%)	Compliance	76,599	121,649	45,050	37.0%	66,475	(10,124)	(15.2%)
-	-	-	-	5,536	5,536	-	Clinical Labor Pool Alloc	-	-	-	-	88,925	88,925	-
38,226	46,251	8,025	17.4%	82,538	44,312	53.7%	IT Operations	421,703	508,765	87,062	17.1%	873,038	451,335	51.7%
15,806	16,858	1,052	6.2%	12,275	(3,531)	(28.8%)	IT Security	196,195	185,439	(10,756)	(5.8%)	129,113	(67,082)	(52.0%)
30,667	33,245	2,578	7.8%	28,700	(1,967)	(6.9%)	Finance	309,174	365,699	56,525	15.5%	340,681	31,507	9.2%
12,976	16,960	3,984	23.5%	6,069	(6,907)	(113.8%)	Corporate Communications	123,794	186,561	62,767	33.6%	65,592	(58,202)	(88.7%)
-	4,750	4,750	-	12,482	12,482	-	Information Technology	60,595	52,249	(8,346)	(16.0%)	110,717	50,122	45.3%

Current Month						
Actual	Budget	Variance	%	Prior Year	Variance	%
168,812	237,695	68,883	29.0%	48,469	(120,343)	(248.3%)
-	-	-	-	218,882	218,882	-
32,857	41,476	8,619	20.8%	-	(32,857)	-
-	6,503	6,503	-	10,844	10,844	-
3,928	8,052	4,124	51.2%	7,907	3,979	50.3%
36,958	57,288	20,330	35.5%	51,683	14,725	28.5%
5,825	5,383	(442)	(8.2%)	-	(5,825)	-
-	10,156	10,156	-	-	-	-
21,133	21,541	408	1.9%	-	(21,133)	-
2,066	4,143	2,077	50.1%	-	(2,066)	-
624,212	854,683	230,471	27.0%	799,588	175,376	21.9%
3,722,184	3,889,944	167,761	4.3%	3,252,837	(469,346)	(14.4%)
\$ (2,082,541)	\$ (2,357,294)	\$ 274,753	(11.7%)	\$ (1,648,589)	\$ (433,952)	26.3%
-	153,690	153,690	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-

Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%
1,950,672	2,614,643	663,971	25.4%	514,676	(1,435,996)	(279.0%)
-	-	-	-	2,032,783	2,032,783	-
388,878	456,238	67,360	14.8%	-	(388,878)	-
77,609	71,536	(6,073)	(8.5%)	126,400	48,791	38.6%
86,999	88,568	1,569	1.8%	83,954	(3,045)	(3.6%)
450,172	630,165	179,993	28.6%	581,560	131,388	22.6%
70,603	59,217	(11,386)	(19.2%)	-	(70,603)	-
121,464	111,721	(9,743)	(8.7%)	-	(121,464)	-
210,859	236,948	26,089	11.0%	-	(210,859)	-
24,492	45,568	21,076	46.3%	-	(24,492)	-
7,410,794	9,401,515	1,990,721	21.2%	8,437,592	1,026,798	12.2%
36,944,962	43,526,487	6,581,525	15.1%	34,215,701	(2,729,262)	(8.0%)
\$ (16,400,446)	\$ (24,418,833)	\$ 8,018,387	(32.8%)	\$ (10,992,416)	\$ (5,408,030)	49.2%
-	1,690,587	1,690,587	100.0%	15,628	15,628	100.0%
132,840	-	132,840	-	-	132,840	-
\$ 14,099,698	\$ 19,875,000	\$ (5,775,302)	(29.1%)	\$ 7,924,615	\$ (6,175,083)	(77.9%)

Primary Care Clinics Statement of Revenues and Expenses by Month

	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Year to Date
Gross Patient Revenue	\$ 2,421,964	\$ 2,173,673	\$ 2,534,826	\$ 2,394,233	\$ 2,436,124	\$ 2,859,432	\$ 2,815,106	\$ 2,801,109	\$ 2,918,227	\$ 2,553,603	\$ 2,841,225	\$ 28,749,523
Contractual Allowance	942,552	616,457	797,366	764,288	728,571	1,015,151	998,014	670,258	1,344,583	736,918	806,290	9,420,446
Charity Care	1,080,772	818,987	996,143	1,145,797	998,209	1,031,223	979,676	933,548	1,027,081	1,060,385	822,983	10,894,804
Bad Debt	49,730	353,288	285,914	95,985	279,913	332,230	527,608	628,944	(62,168)	312,029	710,907	3,514,378
Total Contractuals and Bad Debt	2,073,054	1,788,732	2,079,423	2,006,069	2,006,694	2,378,604	2,505,297	2,232,750	2,309,496	2,109,331	2,340,179	23,829,628
Other Patient Revenue	474,943	474,943	87,703	345,863	345,863	345,863	224,901	205,785	205,785	1,120,503	365,321	4,197,472
Net Patient Revenue	823,853	859,885	543,106	734,027	775,294	826,691	534,711	774,144	814,516	1,564,774	866,367	9,117,367
Collection %	34.02%	39.56%	21.43%	30.66%	31.82%	28.91%	18.99%	27.64%	27.91%	61.28%	30.49%	31.71%
Non-Operating Revenues												
Grants	831,658	951,673	1,163,225	937,662	1,277,476	1,004,344	730,315	650,205	733,140	724,102	765,354	9,769,155
Interest Earnings	-	-	-	-	-	-	-	-	-	-	818	818
Other Financial Assistance	12,477	51,355	674,585	-	-	-	-	-	-	-	-	738,416
Other Revenue	624	29,490	1,042	1,648	18,706	193,647	101,773	51,117	358,355	155,255	7,104	918,761
Total Other Revenues	\$ 844,758	\$ 1,032,517	\$ 1,838,851	\$ 939,311	\$ 1,296,183	\$ 1,197,991	\$ 832,088	\$ 701,322	\$ 1,091,495	\$ 879,358	\$ 773,276	\$ 11,427,150
Total Non-Operating Revenues	\$ 1,668,611	\$ 1,892,402	\$ 2,381,957	\$ 1,673,338	\$ 2,071,476	\$ 2,024,682	\$ 1,366,799	\$ 1,475,466	\$ 1,906,011	\$ 2,444,132	\$ 1,639,642	\$ 20,544,516
Direct Operating Expenses:												
Salaries and Wages	1,713,850	1,402,443	1,788,664	1,498,332	1,674,786	1,997,115	1,543,212	1,709,521	1,629,444	1,721,522	1,797,791	18,476,681
Benefits	427,827	405,732	406,022	459,199	430,679	495,969	415,751	473,236	467,424	485,386	467,410	4,934,633
Purchased Services	13,764	60,480	10,119	24,018	29,210	11,762	40,767	39,476	69,048	39,233	36,797	374,675
Medical Supplies	35,872	230,443	141,439	60,778	25,067	29,192	30,198	90,290	101,849	42,487	91,719	879,335
Other Supplies	12,383	6,147	10,233	39,697	20,076	8,453	19,539	60,902	38,796	24,217	166,181	406,625
Medical Services	55,581	60,482	61,270	56,783	59,594	57,974	65,942	67,793	80,827	83,687	71,557	721,490
Drugs	37,475	49,341	45,922	45,378	44,505	37,090	43,958	39,990	45,397	39,232	45,452	473,740
Repairs and Maintenance	10,726	11,441	47,732	37,415	40,271	30,847	36,409	53,140	55,077	40,887	46,419	410,365
Lease and Rental	107,496	87,434	114,395	115,290	117,771	96,132	162,213	104,899	124,493	122,080	177,859	1,330,061
Utilities	8,438	8,881	8,149	9,620	3,675	5,106	7,585	7,587	7,462	7,709	7,501	81,714
Other Expense	115,489	74,228	262,113	(53,654)	65,834	23,262	24,383	263,662	51,877	111,223	154,792	1,093,209
Insurance	6,154	4,622	4,622	4,622	4,622	4,622	4,622	4,622	8,759	6,691	4,947	58,906
Total Operating Expenses	2,545,056	2,401,675	2,900,679	2,297,479	2,516,089	2,797,523	2,394,579	2,915,118	2,680,453	2,724,354	3,068,426	29,241,432
Net Performance before Depreciation & Overhead Allocations	\$ (876,445)	\$ (509,273)	\$ (518,722)	\$ (624,141)	\$ (444,613)	\$ (772,841)	\$ (1,027,780)	\$ (1,439,653)	\$ (774,442)	\$ (280,223)	\$ (1,428,783)	\$ (8,696,916)
Depreciation	25,462	25,462	26,045	25,656	26,428	26,619	26,619	26,909	26,989	27,002	29,546	292,737
Overhead Allocations:												
Risk Management	11,692	7,282	9,397	9,332	9,963	8,896	9,668	9,501	9,779	9,977	10,520	106,007
Rev Cycle	63,371	103,816	86,659	73,183	62,585	90,867	75,286	92,509	74,884	82,399	81,579	887,138
Internal Audit	2,627	1,796	1,779	1,955	1,585	1,641	2,516	2,818	2,739	2,503	3,234	25,193
Home Office Facilities	30,821	31,492	32,824	20,328	24,166	35,671	34,187	36,362	34,251	34,755	29,123	343,980
Administration	46,107	48,941	49,005	49,055	34,089	42,379	39,583	45,523	51,018	69,603	22,417	497,720
Human Resources	76,105	96,165	80,652	41,032	63,880	76,821	55,879	65,960	69,724	57,374	69,168	752,760
Legal	3,344	12,867	12,360	14,912	35,905	18,361	21,522	15,153	16,039	12,136	27,627	190,226
Records	4,206	2,926	3,073	3,403	3,291	3,419	3,266	3,189	4,261	3,208	3,720	37,962

Primary Care Clinics Statement of Revenues and Expenses by Month

	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Year to Date
Compliance	6,347	6,648	6,675	6,995	7,114	6,714	7,962	7,546	6,834	6,194	7,570	76,599
IT Operations	35,658	44,142	42,594	37,089	32,670	40,660	34,452	41,326	39,156	35,730	38,226	421,703
IT Security	9,905	21,768	16,176	14,289	25,121	14,449	14,135	38,992	12,103	13,451	15,806	196,195
Finance	24,232	19,591	27,494	20,102	25,315	27,713	28,566	41,493	33,431	30,570	30,667	309,174
Corporate Communications	10,421	9,413	10,833	11,419	12,679	15,613	10,308	8,955	10,993	10,184	12,976	123,794
Information Technology	10,834	10,976	13,078	12,123	3,404	10,180	-	-	-	-	-	60,595
IT Applications	81,636	278,939	162,379	216,444	192,470	176,106	87,647	116,519	250,681	219,039	168,812	1,950,672
IT Service Center	25,999	28,022	25,841	25,533	26,762	39,926	52,726	32,303	36,224	62,685	32,857	388,878
Performance Excellence	6,591	12,194	12,071	14,647	15,321	16,785	-	-	-	-	-	77,609
Corporate Quality	8,434	7,268	7,766	7,118	7,006	9,852	9,489	9,566	10,909	5,663	3,928	86,999
Security Services	39,124	39,146	42,649	38,519	36,544	39,645	35,851	35,916	44,003	61,817	36,958	450,172
Supply Chain	6,253	5,354	6,385	6,747	4,243	6,959	5,574	6,231	11,356	5,676	5,825	70,603
HIM Department	8,351	19,826	19,536	12,608	20,538	10,117	10,316	9,955	10,217	-	-	121,464
Coding	21,345	13,076	24,947	17,566	21,638	20,338	19,289	18,037	16,745	16,745	21,133	210,859
Reimbursement	2,482	1,671	4,032	1,238	1,989	2,109	2,020	2,081	2,206	2,598	2,066	24,492
Total Overhead Allocations	535,885	823,319	698,205	655,637	668,278	715,221	560,242	639,935	747,553	742,307	624,212	7,410,794
Total Expenses	3,106,403	3,250,455	3,624,929	2,978,772	3,210,795	3,539,363	2,981,440	3,581,963	3,454,995	3,493,664	3,722,184	36,944,962
Net Margin	\$ (1,437,791)	\$ (1,358,053)	\$ (1,242,972)	\$ (1,305,434)	\$ (1,139,319)	\$ (1,514,681)	\$ (1,614,641)	\$ (2,106,497)	\$ (1,548,984)	\$ (1,049,532)	\$ (2,082,541)	\$ (16,400,446)
Capital	36,782	-	53,251	(90,033)	-	-	-	-	-	-	-	-
Capital Contributions.	-	-	-	-	-	-	10,923	14,609	107,308	-	-	132,840
General Fund Support/Transfer In	-	-	\$4,128,850	-	-	\$3,713,730	-	-	\$6,257,118	-	-	\$14,099,698

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Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 1,699,716	\$ 1,315,565	\$ 384,151	29.2%	\$ 1,269,177	\$ 430,539	33.9%	\$ 17,082,050	\$ 14,262,132	\$ 2,819,918	19.8%	\$ 14,136,611	\$ 2,945,439	20.8%
797,573	339,178	458,395	135.1%	(21,933)	819,506	(3,736.4%)	7,522,616	3,677,081	3,845,535	104.6%	2,150,650	5,371,966	249.8%
539,465	519,395	20,070	3.9%	585,299	(45,834)	(7.8%)	6,478,323	5,630,796	847,527	15.1%	5,512,979	965,343	17.5%
428,578	209,806	218,772	104.3%	(54,454)	483,031	(887.0%)	2,230,896	2,274,513	(43,617)	(1.9%)	2,431,163	(200,267)	(8.2%)
1,765,615	1,068,379	697,236	65.3%	508,912	1,256,703	246.9%	16,231,834	11,582,390	4,649,444	40.1%	10,094,792	6,137,042	60.8%
224,263	366,014	(141,751)	(38.7%)	125,473	98,790	78.7%	2,803,127	3,967,974	(1,164,847)	(29.4%)	3,049,611	(246,484)	(8.1%)
158,364	613,200	(454,836)	(74.2%)	885,738	(727,374)	(82.1%)	3,653,343	6,647,716	(2,994,373)	(45.0%)	7,091,430	(3,438,087)	(48.5%)
9.32%	46.61%			69.79%			21.39%	46.61%			50.16%		
659,144	578,072	81,072	14.0%	956,535	(297,391)	(31.1%)	8,200,573	8,074,361	126,212	1.6%	11,677,777	(3,477,204)	(29.8%)
818	-	818	-	-	818	-	818	-	818	-	-	818	-
-	-	-	-	8,124	(8,124)	-	649,065	381,143	267,922	70.3%	769,547	(120,481)	(15.7%)
5,904	2,460	3,444	140.0%	1,050	4,854	462.3%	797,835	27,060	770,775	2,848.4%	3,517	794,317	22,585.1%
\$ 824,229	\$ 1,193,732	\$ (369,503)	(31.0%)	\$ 1,851,447	\$ (1,027,218)	(55.5%)	\$ 13,301,633	\$ 15,130,280	\$ (1,828,647)	(12.1%)	\$ 19,542,271	\$ (6,240,638)	(31.9%)
1,497,804	1,570,136	72,332	4.6%	1,355,334	(142,470)	(10.5%)	15,182,063	17,882,598	2,700,536	15.1%	13,551,548	(1,630,515)	(12.0%)
384,063	411,085	27,021	6.6%	349,276	(34,787)	(10.0%)	4,059,568	4,521,931	462,362	10.2%	3,782,055	(277,513)	(7.3%)
34,834	57,496	22,662	39.4%	63,090	28,255	44.8%	347,383	632,458	285,075	45.1%	603,777	256,394	42.5%
59,345	83,646	24,301	29.1%	40,611	(18,734)	(46.1%)	641,812	920,101	278,288	30.2%	460,003	(181,809)	(39.5%)
165,055	50,957	(114,098)	(223.9%)	29,263	(135,792)	(464.0%)	370,872	560,528	189,657	33.8%	312,648	(58,223)	(18.6%)
71,557	59,500	(12,057)	(20.3%)	44,392	(27,165)	(61.2%)	721,490	654,497	(66,992)	(10.2%)	524,469	(197,020)	(37.6%)
45,448	48,958	3,511	7.2%	40,157	(5,291)	(13.2%)	472,697	538,539	65,843	12.2%	495,270	22,573	4.6%
43,729	51,615	7,886	15.3%	33,987	(9,742)	(28.7%)	336,665	567,767	231,103	40.7%	368,769	32,105	8.7%
144,608	137,465	(7,142)	(5.2%)	72,551	(72,056)	(99.3%)	1,070,732	1,512,119	441,387	29.2%	889,496	(181,236)	(20.4%)
6,315	9,018	2,703	30.0%	6,987	671	9.6%	65,991	99,200	33,209	33.5%	63,697	(2,294)	(3.6%)
144,791	70,438	(74,353)	(105.6%)	24,326	(120,464)	(495.2%)	1,005,887	774,814	(231,073)	(29.8%)	469,534	(536,354)	(114.2%)
4,902	3,993	(909)	(22.8%)	5,729	827	14.4%	58,137	43,917	(14,219)	(32.4%)	50,485	(7,652)	(15.2%)
2,602,451	2,554,307	(48,144)	(1.9%)	2,065,703	(536,748)	(26.0%)	24,333,296	28,708,471	4,375,175	15.2%	21,571,752	(2,761,544)	(12.8%)
\$ 1,778,222	\$ (1,360,575)	\$ (417,647)	30.7%	\$ (214,256)	\$ (1,563,965)	730.0%	\$ (11,031,663)	\$ (13,578,191)	\$ 2,546,528	(18.8%)	\$ (2,029,481)	\$ (9,002,182)	443.6%
22,411	27,500	5,089	18.5%	18,017	(4,394)	(24.4%)	231,420	302,499	71,078	23.5%	259,160	27,740	10.7%
8,881	9,052	171	1.9%	-	(8,881)	-	89,491	99,568	10,077	10.1%	57,954	(31,537)	(54.4%)
67,445	90,891	23,446	25.8%	121,617	54,172	44.5%	733,437	999,803	266,366	26.6%	1,488,795	755,358	50.7%
2,730	5,534	2,804	50.7%	1,796	(934)	(52.0%)	21,267	60,873	39,606	65.1%	15,726	(5,541)	(35.2%)
25,468	28,637	3,169	11.1%	26,929	1,461	5.4%	300,812	315,003	14,191	4.5%	281,456	(19,356)	(6.9%)
18,924	35,014	16,090	46.0%	41,603	22,679	54.5%	420,173	385,156	(35,017)	(9.1%)	409,840	(10,333)	(2.5%)
59,072	85,359	26,287	30.8%	48,081	(10,991)	(22.9%)	642,887	938,948	296,061	31.5%	491,815	(151,072)	(30.7%)
23,323	23,440	117	0.5%	20,921	(2,402)	(11.5%)	160,588	257,837	97,249	37.7%	166,172	5,584	3.4%
3,140	3,521	381	10.8%	3,236	96	3.0%	32,046	38,733	6,687	17.3%	29,650	(2,396)	(8.1%)
6,391	9,336	2,945	31.5%	5,937	(454)	(7.6%)	64,664	102,696	38,032	37.0%	57,137	(7,527)	(13.2%)
-	-	-	-	4,759	4,759	-	-	-	-	-	76,433	76,433	-
32,270	39,045	6,775	17.4%	70,943	38,673	54.5%	355,998	429,498	73,500	17.1%	750,399	394,401	52.6%
13,343	14,232	889	6.2%	10,551	(2,792)	(26.5%)	165,627	156,547	(9,080)	(5.8%)	110,976	(54,651)	(49.2%)
25,889	28,066	2,177	7.8%	24,668	(1,221)	(4.9%)	261,003	308,722	47,719	15.5%	292,824	31,821	10.9%
10,954	14,318	3,364	23.5%	5,216	(5,738)	(110.0%)	104,505	157,494	52,989	33.6%	56,378	(48,127)	(85.4%)
-	4,010	4,010	-	10,728	10,728	-	51,154	44,108	(7,046)	(16.0%)	95,164	44,010	46.2%

Current Month						
Actual	Budget	Variance	%	Prior Year	Variance	%
142,510	200,661	58,151	29.0%	41,661	(100,849)	(242.1%)
-	-	-	-	188,135	188,135	-
27,738	35,014	7,276	20.8%	-	(27,738)	-
-	5,490	5,490	-	9,321	9,321	-
3,316	6,797	3,481	51.2%	6,797	3,481	51.2%
30,505	47,286	16,781	35.5%	43,992	13,487	30.7%
4,917	4,545	(372)	(8.2%)	-	(4,917)	-
-	8,574	8,574	-	-	-	-
17,840	18,185	345	1.9%	-	(17,840)	-
1,744	3,497	1,753	50.1%	-	(1,744)	-
526,400	720,501	194,101	26.9%	686,890	160,490	23.4%
3,151,262	3,302,308	151,046	4.6%	2,770,611	(380,651)	(13.7%)
\$ (2,327,033)	\$ (2,108,576)	\$ (218,457)	10.4%	\$ (919,164)	\$ (1,407,869)	153.2%
-	116,559	116,559	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-

Primary Care Medical Statement of Revenues and Expenses
For The Eleventh Month Ended August 31, 2023

Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%
1,646,749	2,207,270	560,521	25.4%	442,377	(1,204,372)	(272.3%)
-	-	-	-	1,747,229	1,747,229	-
328,288	385,154	56,866	14.8%	-	(328,288)	-
65,517	60,391	(5,126)	(8.5%)	108,644	43,127	39.7%
73,445	74,769	1,324	1.8%	72,160	(1,285)	(1.8%)
371,574	520,143	148,569	28.6%	495,020	123,446	24.9%
59,604	49,991	(9,613)	(19.2%)	-	(59,604)	-
102,540	94,315	(8,225)	(8.7%)	-	(102,540)	-
178,006	200,031	22,025	11.0%	-	(178,006)	-
20,675	38,469	17,794	46.3%	-	(20,675)	-
6,250,050	7,925,516	1,675,466	21.1%	7,246,148	996,098	13.7%
30,814,767	36,936,486	6,121,719	16.6%	29,077,061	(1,737,706)	(6.0%)
\$ (17,513,134)	\$ (21,806,206)	\$ 4,293,072	(19.7%)	\$ (9,534,790)	\$ (7,978,344)	83.7%
-	1,282,152	1,282,152	100.0%	15,628	15,628	100.0%
37,419	-	37,419	-	-	37,419	-
\$ 13,375,018	\$ 17,700,000	\$ (4,324,982)	(24.4%)	\$ 7,319,275	\$ (6,055,742)	(82.7%)

	Dental Clinic Administration	Belle Glade Dental Clinic	Delray Dental Clinic	Lantana Dental Clinic	West Palm Beach Dental Clinic	Port Dental Clinic	Total
Gross Patient Revenue	-	\$ 1,595,732	\$ 2,170,338	\$ 2,876,184	\$ 3,971,704	\$ 40,614	\$ 10,654,572
Contractual Allowances	-	351,581	274,918	376,525	787,768	489	1,791,281
Charity Care	-	451,275	983,650	1,065,953	1,689,201	40,170	4,230,249
Bad Debt	-	148,590	198,090	257,807	393,576	(19,409)	978,654
Total Contractual Allowances and Bad Debt	-	951,445	1,456,659	1,700,285	2,870,545	21,250	7,000,184
Other Patient Revenue	-	245,670	277,000	361,635	492,413	236	1,376,953
Net Patient Revenue	-	889,956	990,679	1,537,534	1,593,571	19,600	5,031,341
Collection %	-	55.77%	45.65%	53.46%	40.12%	48.26%	47.22%
Grant Funds	183,311	161,172	331,337	340,119	552,642	-	1,568,582
Other Financial Assistance	20,165	6,474	11,703	27,647	23,361	-	89,351
Other Revenue	120,876	-	-	(9)	60	-	120,927
Total Other Revenues	324,352	167,646	343,040	367,757	576,063	-	1,778,859
Total Revenues	\$ 324,352	\$ 1,057,603	\$ 1,333,719	\$ 1,905,291	\$ 2,169,635	\$ 19,600	\$ 6,810,200
<i>Direct Operational Expenses:</i>							
Salaries and Wages	360,303	332,840	716,615	768,993	1,115,867	-	3,294,618
Benefits	105,655	107,742	185,978	213,479	262,211	-	875,065
Purchased Services	-	9,479	8,407	1,551	7,854	-	27,291
Medical Supplies	-	33,737	56,428	46,882	100,477	-	237,523
Other Supplies	-	5,082	17,065	4,541	9,064	-	35,753
Drugs	-	237	268	325	213	-	1,043
Repairs and Maintenance	-	8,911	19,899	8,509	36,382	-	73,701
Lease and Rental	-	31,211	66,599	59,912	101,608	-	259,329
Utilities	-	8,599	978	2,868	3,277	-	15,722
Other Expense	5,133	8,217	17,918	16,825	39,429	-	87,322
Insurance	-	769	-	-	-	-	769
Total Operating Expenses	471,091	546,823	1,090,155	1,123,685	1,676,381	-	4,908,136
Net Performance before Depreciation & Overhead Allocations	(146,739)	510,780	243,564	781,606	493,253	19,600	1,902,064
Depreciation	-	19,398	7,984	6,054	27,880	-	61,316
<i>Overhead Allocations:</i>							
Risk Management	16,516	-	-	-	-	-	16,516
Revenue Cycle	153,701	-	-	-	-	-	153,701
Internal Audit	3,926	-	-	-	-	-	3,926
Home Office Facilities	43,168	-	-	-	-	-	43,168
Administration	77,547	-	-	-	-	-	77,547
Human Resources	109,873	-	-	-	-	-	109,873
Legal	29,638	-	-	-	-	-	29,638
Records	5,916	-	-	-	-	-	5,916
Compliance	11,935	-	-	-	-	-	11,935
IT Operations	65,705	-	-	-	-	-	65,705
IT Security	30,568	-	-	-	-	-	30,568
Finance	48,171	-	-	-	-	-	48,171
Corporate Communications	19,289	-	-	-	-	-	19,289
Information Technology	9,441	-	-	-	-	-	9,441
IT Applications	303,923	-	-	-	-	-	303,923
IT Service Center	60,590	-	-	-	-	-	60,590
Performance Excellence	12,092	-	-	-	-	-	12,092
Corporate Quality	13,554	-	-	-	-	-	13,554
Security Services	78,598	-	-	-	-	-	78,598
Supply Chain	10,999	-	-	-	-	-	10,999
HIM Department	18,924	-	-	-	-	-	18,924
Coding	32,853	-	-	-	-	-	32,853
Reimbursement	3,817	-	-	-	-	-	3,817
Total Overhead Allocations	1,160,744	-	-	-	-	-	1,160,744
Total Expenses	1,631,835	566,221	1,098,140	1,129,739	1,704,261	-	6,130,196
Net Margin	\$ (1,307,483)	\$ 491,381	\$ 235,580	\$ 775,552	\$ 465,374	\$ 19,600	\$ 680,004
Capital	-	-	-	-	-	-	-
Transfer In/(Out)	\$ 724,681	33	-	-	-	-	\$ 724,681

Current Month						
Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 1,020,305	\$ 823,083	\$ 197,222	24.0%	\$ 792,545	\$ 227,759	28.7%
(1,116)	217,410	(218,526)	(100.5%)	186,662	(187,778)	(100.6%)
259,149	392,802	(133,653)	(34.0%)	453,705	(194,556)	(42.9%)
230,274	93,182	137,092	147.1%	125,075	105,199	84.1%
488,307	703,394	(215,087)	(30.6%)	765,442	(277,135)	(36.2%)
138,709	107,836	30,873	28.6%	59,683	79,026	132.4%
670,707	227,525	443,182	194.8%	86,787	583,920	672.8%
65.74%	27.64%			10.95%		
106,210	111,393	(5,183)	(4.7%)	162,300	(56,090)	(34.6%)
-	-	-	-	-	-	-
1,200	-	1,200	-	-	1,200	-
\$ 778,117	\$ 338,918	\$ 439,199	129.6%	\$ 249,087	\$ 529,030	212.4%

299,987	286,549	(13,438)	(4.7%)	238,151	(61,836)	(26.0%)
83,347	73,091	(10,256)	(14.0%)	64,596	(18,751)	(29.0%)
1,963	6,290	4,327	68.8%	530	(1,433)	(270.4%)
32,375	19,437	(12,937)	(66.6%)	22,547	(9,828)	(43.6%)
1,126	9,009	7,883	87.5%	9,260	8,135	87.9%
-	15,660	15,660	-	-	-	-
5	-	(5)	-	-	(5)	-
2,690	2,069	(622)	(30.1%)	1,434	(1,257)	(87.7%)
33,252	27,868	(5,383)	(19.3%)	22,440	(10,812)	(48.2%)
1,186	2,503	1,318	52.7%	1,657	471	28.4%
10,001	5,138	(4,863)	(94.6%)	1,381	(8,620)	(624.2%)
45	90	45	50.0%	90	45	50.0%
465,975	447,705	(18,270)	(4.1%)	362,085	(103,890)	(28.7%)

\$ 312,143	\$ (108,787)	\$ 420,930	(386.9%)	\$ (112,998)	\$ 425,141	(376.2%)
7,135	5,750	(1,385)	(24.1%)	7,444	309	4.2%
1,639	1,671	32	1.9%	-	(1,639)	-
14,134	19,047	4,913	25.8%	21,141	7,007	33.1%
504	1,021	517	50.6%	293	(211)	(72.0%)
3,655	4,110	455	11.1%	2,849	(806)	(28.3%)
3,493	6,462	2,969	45.9%	6,799	3,306	48.6%
10,096	14,588	4,492	30.8%	8,081	(2,015)	(24.9%)
4,304	4,326	22	0.5%	3,419	(885)	(25.9%)
580	650	70	10.8%	529	(51)	(9.6%)
1,179	1,723	544	31.6%	970	(209)	(21.5%)
-	-	-	-	778	778	-
5,956	7,206	1,250	17.3%	11,594	5,638	48.6%
2,463	2,627	164	6.2%	1,724	(739)	(42.9%)
4,778	5,180	402	7.8%	4,032	(746)	(18.5%)
2,022	2,642	620	23.5%	853	(1,169)	(137.0%)
-	740	740	-	1,753	1,753	-
26,302	37,034	10,732	29.0%	6,809	(19,493)	(286.3%)

Gross Patient Revenue						
Contractual Allowance						
Charity Care						
Bad Debt						
Total Contractuals and Bad Debt						
Other Patient Revenue						
Net Patient Revenue						
Collection %						
Grants						
Other Financial Assistance						
Other Revenue						
Total Revenues						

Direct Operating Expenses:

Salaries and Wages						
Benefits						
Purchased Services						
Medical Supplies						
Other Supplies						
Medical Services						
Drugs						
Repairs and Maintenance						
Lease and Rental						
Utilities						
Other Expense						
Insurance						
Total Operating Expenses						

Net Performance before Depreciation & Overhead Allocations

Depreciation						
Overhead Allocations:						
Risk Management						
Rev Cycle						
Internal Audit						
Home Office Facilities						
Administration						
Human Resources						
Legal						
Records						
Compliance						
Clinical Labor Pool Alloc						
IT Operations						
IT Security						
Finance						
Corporate Communications						
Information Technology						
IT Applications						

Primary Care Dental Statement of Revenues and Expenses
For The Eleventh Month Ended August 31, 2023

Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 10,654,572	\$ 9,163,877	\$ 1,490,695	16.3%	\$ 9,380,050	\$ 1,274,521	13.6%
1,791,281	2,420,561	(629,280)	(26.0%)	2,773,029	(981,748)	(35.4%)
4,230,249	4,373,306	(143,057)	(3.3%)	4,581,249	(351,000)	(7.7%)
978,654	1,037,451	(58,797)	(5.7%)	1,152,776	(174,122)	(15.1%)
7,000,184	7,831,318	(831,134)	(10.6%)	8,507,054	(1,506,870)	(17.7%)
1,376,953	1,200,606	176,347	14.7%	1,242,752	134,201	10.8%
5,031,341	2,533,165	2,498,176	98.6%	2,115,749	2,915,592	137.8%
47.22%	27.64%			22.56%		
1,568,582	1,444,209	124,373	8.6%	1,901,652	(333,070)	(17.5%)
89,351	-	89,351	-	114,462	(25,111)	(21.9%)
120,927	-	120,927	-	200	120,727	60,363.5%
\$ 6,810,200	\$ 3,977,374	\$ 2,832,826	71.2%	\$ 4,132,063	\$ 2,678,137	64.8%

3,294,618	3,278,036	(16,581)	(0.5%)	2,556,085	(738,533)	(28.9%)
875,065	804,001	(71,064)	(8.8%)	729,314	(145,751)	(20.0%)
27,291	69,190	41,898	60.6%	18,154	(9,138)	(50.3%)
237,523	213,812	(23,711)	(11.1%)	195,568	(41,955)	(21.5%)
35,753	99,100	63,347	63.9%	49,508	13,755	27.8%
-	172,259	172,259	-	-	-	-
1,043	-	(1,043)	-	-	(1,043)	-
73,701	22,756	(50,944)	(223.9%)	21,753	(51,947)	(238.8%)
259,329	306,550	47,221	15.4%	252,495	(6,835)	(2.7%)
15,722	27,537	11,814	42.9%	18,172	2,449	13.5%
87,322	56,521	(30,800)	(54.5%)	22,873	(64,448)	(281.8%)
769	990	221	22.3%	975	205	21.0%
4,908,136	5,050,753	142,617	2.8%	3,864,896	(1,043,240)	(27.0%)

\$ 1,902,064	\$ (1,073,379)	\$ 2,975,443	(277.2%)	\$ 267,167	\$ 1,634,898	611.9%
61,316	63,250	1,934	3.1%	82,300	20,984	25.5%
16,516	18,376	1,860	10.1%	9,472	(7,044)	(74.4%)
153,701	209,522	55,821	26.6%	258,807	105,106	40.6%
3,926	11,235	7,309	65.1%	2,570	(1,356)	(52.8%)
43,168	45,205	2,037	4.5%	29,777	(13,391)	(45.0%)
77,547	71,084	(6,463)	(9.1%)	66,981	(10,566)	(15.8%)
109,873	160,472	50,599	31.5%	82,662	(27,211)	(32.9%)
29,638	47,586	17,948	37.7%	27,158	(2,480)	(9.1%)
5,916	7,148	1,232	17.2%	4,846	(1,070)	(22.1%)
11,935	18,953	7,018	37.0%	9,338	(2,597)	(27.8%)
-	-	-	-	12,492	12,492	-
65,705	79,268	13,563	17.1%	122,640	56,935	46.4%
30,568	28,892	(1,676)	(5.8%)	18,137	(12,431)	(68.5%)
48,171	56,977	8,806	15.5%	47,857	(314)	(0.7%)
19,289	29,067	9,778	33.6%	9,214	(10,075)	(109.3%)
9,441	8,141	(1,300)	(16.0%)	15,553	6,112	39.3%
303,923	407,372	103,449	25.4%	72,299	(231,624)	(320.4%)

Current Month						
Actual	Budget	Variance	%	Prior Year	Variance	%
-	-	-	-	30,747	30,747	-
5,119	6,462	1,343	20.8%	-	(5,119)	-
-	1,013	1,013	-	1,523	1,523	-
612	1,254	642	51.2%	1,111	499	44.9%
6,453	10,002	3,549	35.5%	7,691	1,238	16.1%
908	839	(69)	(8.2%)	-	(908)	-
-	1,582	1,582	-	-	-	-
3,293	3,356	63	1.9%	-	(3,293)	-
322	645	323	50.1%	-	(322)	-
97,812	134,182	36,370	27.1%	112,698	14,886	13.2%
570,921	587,636	16,715	2.8%	482,227	(88,695)	(18.4%)
\$ 207,196	\$ (248,718)	\$ 455,914	(183.3%)	\$ (233,140)	\$ 440,336	(188.9%)
-	37,130	37,130	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-

IT EPIC
IT Service Center
Performance Excellence
Corporate Quality
Security Services
Supply Chain
HIM Department
Coding
Reimbursement
Total Overhead Allocations-

Total Expenses

Net Margin

Capital
Capital Contributions.

Transfer In/(Out)

Primary Care Dental Statement of Revenues and Expenses
For The Eleventh Month Ended August 31, 2023

Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%
-	-	-	-	285,554	285,554	-
60,590	71,084	10,494	14.8%	-	(60,590)	-
12,092	11,146	(946)	(8.5%)	17,756	5,664	31.9%
13,554	13,799	245	1.8%	11,793	(1,761)	(14.9%)
78,598	110,022	31,424	28.6%	86,540	7,942	9.2%
10,999	9,226	(1,773)	(19.2%)	-	(10,999)	-
18,924	17,407	(1,517)	(8.7%)	-	(18,924)	-
32,853	36,918	4,065	11.0%	-	(32,853)	-
3,817	7,100	3,283	46.2%	-	(3,817)	-
1,160,744	1,475,999	315,255	21.4%	1,191,444	30,700	2.6%
6,130,196	6,590,001	459,806	7.0%	5,138,640	(991,556)	(19.3%)
\$ 680,004	\$ (2,612,627)	\$ 3,292,632	(126.0%)	\$ (1,006,578)	\$ 1,686,582	(167.6%)
-	408,435	408,435	100.0%	-	-	-
95,421	-	95,421	-	-	95,421	-
\$ 724,681	\$ 2,175,000	\$ (1,450,319)	(66.7%)	\$ 605,340	\$ (119,341)	(19.7%)

Primary Care Clinics - Behavioral Health Statement of Revenues and Expenses by Location (YTD)
For The Eleventh Month Ended August 31, 2023

	Belle Glade Behavioral Health	St Ann Place Behavioral Health	Delray Behavioral Health	Lantana Behavioral Health	Mangonia Park Behavioral Health	West Palm Beach Behavioral Health	Jupiter Behavioral Health	Lake Worth Behavioral Health	Lewis Center Behavioral Health	West Boca Behavioral Health	Total
Gross Patient Revenue	\$141	\$336	\$15,273	-	\$987,799	\$1,513	-	-	\$7,839	-	\$1,012,901
Contractual Allowances	1,575	(72)	(7,914)	(33)	(22,485)	617	-	-	134,862	-	106,549
Charity Care	607	70	5,550	33	174,576	398	19	-	4,979	-	186,233
Bad Debt	715	(4)	993	150	238,195	1,403	64	39	63,253	20	304,828
Total Contractual Allowances and Bad Debt	2,897	(7)	(1,371)	150	390,287	2,419	83	39	203,094	20	597,610
Other Patient Revenue	-	-	-	-	17,110	-	-	-	282	-	17,392
Net Patient Revenue	(2,756)	343	16,644	(150)	614,623	(905)	(83)	(39)	(194,973)	(20)	432,684
Collection %	(1,957.29%)	102.04%	108.98%	-	62.22%	(59.81%)	-	-	(2,487.32%)	-	42.72%
Ad Valorem Taxes	-	-	-	-	-	-	-	-	-	-	-
Intergovernmental Revenue	-	-	-	-	-	-	-	-	-	-	-
Grant Funds	-	-	-	-	-	-	-	-	-	-	-
Interest Earnings	-	-	-	-	-	-	-	-	-	-	-
Unrealized Gain/(Loss) On Investments	-	-	-	-	-	-	-	-	-	-	-
Other Financial Assistance	-	-	-	-	-	-	-	-	-	-	-
Other Revenue	-	-	-	-	-	-	-	-	-	-	-
Total Other Revenues	-	-	-	-	-	-	-	-	-	-	-
Total Revenues	\$ (2,756)	\$ 343	\$ 16,644	\$ (150)	\$ 614,623	\$ (905)	\$ (83)	\$ (39)	\$ (194,973)	\$ (20)	\$ 432,684
<i>Direct Operational Expenses:</i>											
Total Operating Expenses	-	-	-	-	-	-	-	-	-	-	-
Net Performance before Depreciation & Overhead Allocations	(2,756)	343	16,644	(150)	614,623	(905)	(83)	(39)	(194,973)	(20)	432,684
Depreciation	-	-	-	-	-	-	-	-	-	-	-
<i>Overhead Allocations:</i>											
Total Overhead Allocations	-	-	-	-	-	-	-	-	-	-	-
Total Expenses	-	-	-	-	-	-	-	-	-	-	-
Net Margin	\$ (2,756)	\$ 343	\$ 16,644	\$ (150)	\$ 614,623	\$ (905)	\$ (83)	\$ (39)	\$ (194,973)	\$ (20)	\$ 432,684
Capital	-	-	-	-	-	-	-	-	-	-	-
General Fund Support/Transfer In	-	-	-	-	-	-	-	-	-	-	-

Current Month						
Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 121,204	-	\$ 121,204	-	\$ 100,472	\$ 20,733	20.6%
9,833	-	9,833	-	197,238	(187,405)	(95.0%)
24,370	-	24,370	-	50,723	(26,353)	(52.0%)
52,055	-	52,055	-	351,172	(299,117)	(85.2%)
86,258	-	86,258	-	599,133	(512,875)	(85.6%)
2,349	-	2,349	-	2,375	(26)	(1.1%)
37,295	-	37,295	-	(496,286)	533,582	(107.5%)
30.77%	-			(493.96%)		
\$ 37,295	-	\$ 37,295	-	\$ (496,286)	\$ 533,582	(107.5%)
-	-	-	-	-	-	-
\$ 37,295	-	\$ 37,295	-	\$ (496,286)	\$ 533,582	(107.5%)
-	-	-	-	-	-	-
\$ 37,295	-	\$ 37,295	-	\$ (496,286)	\$ 533,582	(107.5%)

Gross Patient Revenue

Contractual Allowance
Charity Care
Bad Debt
Total Contractuals and Bad Debt
Other Patient Revenue
Net Patient Revenue
Collection %

Total Revenues

Direct Operating Expenses:
Total Operating Expenses

Net Performance before Depreciation & Overhead Allocations

Total Expenses

Net Margin

Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 1,012,901	-	\$ 1,012,901	-	\$ 246,301	\$ 766,600	311.2%
106,549	-	106,549	-	231,326	(124,776)	(53.9%)
186,233	-	186,233	-	84,202	102,030	121.2%
304,828	-	304,828	-	393,695	(88,868)	(22.6%)
597,610	-	597,610	-	709,224	(111,614)	(15.7%)
17,392	-	17,392	-	11,874	5,518	46.5%
432,684	-	432,684	-	(451,049)	883,732	(195.9%)
42.72%	-			(183.13%)		
\$ 432,684	-	\$ 432,684	-	\$ (451,049)	\$ 883,732	(195.9%)
-	-	-	-	-	-	-
\$ 432,684	-	\$ 432,684	-	\$ (451,049)	\$ 883,732	(195.9%)
-	-	-	-	-	-	-
\$ 432,684	-	\$ 432,684	-	\$ (451,049)	\$ 883,732	(195.9%)



District Clinic Holdings, Inc.

	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
Clinic Visits - Adults and Pediatrics																
West Palm Beach	1,446	1,067	1,204	1,395	1,333	1,713	1,438	1,547	1,599	1,423	1,758		15,923	16,511	(3.6%)	14,498
Delray	729	582	753	689	668	862	887	858	562	785	793		8,168	6,465	26.3%	6,465
Lantana	1,894	1,502	1,484	1,628	1,696	1,924	1,772	2,092	1,872	1,717	2,056		19,637	18,434	6.5%	18,434
Belle Glade & Women's Health Care	796	693	764	837	798	873	734	805	766	731	873		8,670	7,881	10.0%	7,881
Lewis Center	5	19	27	5	63	29	14	25	12	24	38		261	3,355	(92.2%)	3,355
Lake Worth & Women's Health Care	1,342	948	1,049	1,039	1,057	1,235	1,136	1,225	1,201	1,018	1,293		12,543	12,427	0.9%	11,353
Jupiter & Women's Health Care	469	406	493	429	381	546	461	558	510	500	556		5,309	5,583	(4.9%)	5,583
West Boca & Women's Health Care	321	293	332	334	284	310	345	293	282	326	356		3,476	3,850	(9.7%)	3,850
St Ann Place	-	-	-	-	-	17	20	11	6	12	8		74	513	(85.6%)	458
Clb Mob 1 Warrior	-	-	-	-	-	-	-	-	-	-	17		17	198	(91.4%)	3,239
Clb Mob 2 Scout	-	-	-	-	-	-	-	-	-	-	-		-	-	#DIV/0!	2,745
Clb Mob 3 Hero	40	37	39	58	63	49	50	41	57	63	37		534	550	(2.9%)	5,056
Portable Medical	-	-	-	-	-	-	-	-	-	-	27		27	27	0.0%	-
Mangonia Park	897	815	890	811	743	932	769	914	914	947	1,083		9,715	4,331	124.3%	4,331
Total Clinic Visits	7,939	6,362	7,035	7,225	7,086	8,490	7,626	8,369	7,781	7,546	8,895	-	84,354	80,125	5.3%	87,248
Dental Visits																
West Palm Beach Dental	1,101	824	977	1,209	1,059	1,298	1,272	1,211	1,261	1,133	950		12,295	9,202	33.6%	9,202
Delray Dental	536	420	540	521	743	796	710	751	437	519	582		6,555	4,766	37.5%	4,766
Lantana Dental	769	529	653	753	780	935	899	1,001	1,068	838	856		9,081	9,098	(0.2%)	9,098
Belle Glade Dental	369	270	344	282	299	519	514	496	531	481	564		4,669	4,267	9.4%	4,267
Portable Dental	10	17	8	12	7	-	-	34	-	-	11		99	99	0.0%	-
Total Dental Visits	2,785	2,060	2,522	2,777	2,888	3,548	3,395	3,493	3,297	2,971	2,963	-	32,699	27,432	19.2%	27,333
Total Medical and Dental Visits	10,724	8,422	9,557	10,002	9,974	12,038	11,021	11,862	11,078	10,517	11,858	-	117,053	107,557	8.8%	114,581
Mental Health Counselors (non-billable)																
West Palm Beach BH	169	112	177	45	35	90	78	54	76	69	74		979	1,764	(44.5%)	1,764
Delray BH	157	127	140	141	135	164	146	172	106	207	218		1,713	1,556	10.1%	1,556
Lantana BH	80	131	192	158	138	160	129	101	117	141	145		1,492	1,673	(10.8%)	1,673
Belle Glade BH	148	58	16	-	13	-	-	-	-	-	-		235	1,077	(78.2%)	1,077
Mangonia Park BH	852	776	869	899	771	1,019	891	1,087	1,046	887	998		10,095	5,957	69.5%	5,957
Lewis Center BH	-	-	-	-	37	1	-	-	-	-	-		38	110	(65.5%)	7,266
Lake Worth BH	174	137	172	227	232	184	137	169	167	141	138		1,878	1,981	(5.2%)	1,981
Jupiter BH	-	-	37	44	58	-	-	-	-	-	-		139	-	#DIV/0!	-
St Ann Place BH	-	-	-	-	-	98	108	85	120	88	94		593	-	#DIV/0!	-
West Boca BH	-	-	-	-	20	48	34	32	73	26	33		266	-	#DIV/0!	4
Mobile Van	-	-	-	-	-	-	-	-	-	-	-		-	-	#DIV/0!	-
Total Mental Health Screenings	1,580	1,341	1,603	1,514	1,439	1,764	1,523	1,700	1,705	1,559	1,700	-	17,428	14,118	23.4%	21,278
GRAND TOTAL	12,304	9,763	11,160	11,516	11,413	13,802	12,544	13,562	12,783	12,076	13,558	-	134,481	121,675		135,859

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

1. Description: Bylaws Amendment

2. Summary:

This agenda item presents proposed amendments to the Bylaws of District Clinic Holdings, Inc.

3. Substantive Analysis:

At the September 26, 2023 Board meeting, the Board approved the Bylaws changes presented below. The Clinic Bylaws currently require that the Board review and approve any Bylaw changes at two meetings, as outlined in Section 14, Amendments.

Staff recommends amending Section 12, Meeting. The proposed changes are as follows:

- Adding Section 12.6 to state, Board members may participate in meetings of the Board by means of telephone, video teleconferences, or similar communications equipment provided all Board members participating in the meeting can hear each other. Participation pursuant to the foregoing shall constitute presence in person at the meetings and shall be counted towards the quorum.

Staff also recommends amending Section 14, Amendments. The proposed changes are as follows:

- Revising to remove language requiring the Bylaws to be submitted at a regularly scheduled meeting and voted on at the succeeding regularly scheduled meeting, and removing the requirement that the Bylaws Amendments are subject to approval from the Regional Office of the Department of Health and Human Services.

Attached for your review are the updated Bylaws showing the proposed changes.

CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

Jessica Cafarelli

Jessica Cafarelli
Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

N/A

Date

6. Recommendation:

Staff recommends the Board approve the proposed amendments to the District Clinic Holdings, Inc. Bylaws and forward to the Health Care District Board for approval.

Approved for Legal sufficiency:

DocuSigned by:

Bernabe Icaza

Bernabe Icaza
SVP & General Counsel

DocuSigned by:

Candice Abbott

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



Amended

Bylaws of

District Clinic Holdings, Inc.

Amended: 2013, 2014, 2016, 2018, 2019, 2020, 2023

**Amended
Bylaws
of
District Clinic Holdings, Inc.**

Section 1	Statutory Authority
Section 2	Name
Section 3	Purpose
Section 4	Officers
Section 5	Objectives
Section 6	Powers
Section 7	Board Member Responsibilities
Section 8	Member Composition
Section 9	Term of Office
Section 10	Officers
Section 11	Committees
Section 12	Meetings
Section 13	Authority
Section 14	Amendments

DISTRICT CLINIC HOLDINGS, INC.

AMENDED BY-LAWS

Section 1 – Statutory Authority

- 1.1 Statutory Authority. These Bylaws have been adopted as the Bylaws of the District Clinic Holdings, Inc. (“Clinics”) governing board of said Clinics pursuant to authority conferred upon that same governing board by Section 330 of the Public Health Service Act.
- 1.2 Health Care District of Palm Beach County. The term “District,” as used in these Bylaws, means the Health Care District of Palm Beach County and all affiliated entities.

Section 2 – Name

- 2.1 District Clinic Holdings, Inc. will be known as the “C.L. Brumback Primary Care Clinics” which shall be the common business name of the clinics.
- 2.2 Board Name. This authority shall be known as the C.L. Brumback Primary Care Clinics Board of Directors. (hereinafter referred to as the “Board”)

Section 3 – Purpose

- 3.1 Purpose. The purpose of the Board is to ensure that persons have access to high quality comprehensive health services, and that such health services are provided without regard to any persons race, color, national origin, ancestry, religion, sex, marital status, sexual orientation, age, physical handicap, medical condition, medical history, genetics, evidence of insurability, or claims history in compliance with all applicable State, Federal and local laws and regulations.

Section 4 – Offices

- 4.1 Offices. The Board shall have and continuously maintain its principal office at the Heath Care District of Palm Beach County administrative office located at 1515 N Flagler, Suite 101, West Palm Beach, FL 33401.

Section 5 – Objectives

- 5.1 The objectives of the Board are as follows:
 - a. Improvement of the general health status of the community through the promotion of preventive health services and early identification and treatment of the disease.
 - b. Identification and referral of individuals in need of health and social services.
 - c. Participation in the development of the Federal grant application.
 - d. Monitoring services provided by the clinics to ensure that community needs are being met

within the constraints of the agency.

- e. Ensure that professional standards are maintained.
- f. Interpret the health needs of the community to clinic administrative staff and interpret the services provided by the clinics, to the community.

Section 6 – Powers

- 6.1 General Powers. The Board is vested with authority and responsibility to provide for the comprehensive planning and delivery of adequate health care services, including, but not limited to, clinical services for the citizens of Palm Beach County, particularly medically needy citizens. For those purposes, the Board shall have and may utilize all enumerated general powers as set forth in the Health Care Act, including but not limited to:
- a. To approve and recommend the budget of the clinic operations annually. Monthly financial reports will be provided to the Governing Board at the regularly scheduled meetings. An annual financial audit and financial report by an independent auditor will be submitted to the Governing Board.
 - b. To be responsible for approving the selection and dismissal of the Executive Director within the guidelines of the Health Care District of Palm Beach County Personnel Policies and Procedures.
 - c. To provide input from the community, regarding appropriate matters, including, but not limited to, the health care needs of the community served.
 - d. To continually provide information about the accessibility of services to the community and the clinic's responsiveness to those needs.
 - e. To provide guidance regarding services and their priorities; and to establish how these priorities should be ranked as they pertain to program development.
 - f. To provide a viable link with the community, engaging in community education, public relation activities and other activities which promote community identification and understanding of the clinics and services provided.
 - g. To provide a nucleus in the community which reaches out to local agencies, governmental entities, and foundations, etc., to support the clinics financially and otherwise.
 - h. Establish and approve general policies for the clinics. The Board acknowledges that the District is the public entity co-applicant and is permitted to retain the responsibility of establishing fiscal and personnel policies. When the public entity's board does not meet health center composition requirements, a separate health center governing board may be established. The health center board must meet all the membership requirements and perform all the responsibilities expected of governing boards except that the public entity may retain

the responsibility of establishing fiscal and personnel policies. The health center board can be a formally incorporated entity and it and the public entity board are co-applicants for the health center program. When there are two boards, each board's responsibilities must be specified in writing so that the responsibilities for carrying out the governance functions are clearly understood.

- . The Board shall work collaboratively with the District to specify each board's responsibilities, in writing so that the responsibilities of carrying out the governance functions are clearly understood by both boards.
- i. To be responsible for evaluating health care activities including services utilization patterns, productivity of the clinics, patient satisfaction, achievement of project objectives, and development of a process for hearing and resolving patient grievances.
- j. To assure that the clinics are operated in compliance with applicable federal, state and local laws, rules and regulations.
- k. To adopt health care policies, including scope and availability of services, location and hours of services.
- l. To assure compliance with the approved Quality Improvement/Quality Assurance Plan.
- m. To establish and review policies regarding the conduct of the federally funded project.
- n. Responsible for evaluating the clinics projects and achievements at least annually, and using the knowledge gained to revise its mission, goals, objectives, plans, and budgets as may be appropriate and necessary.
- o. Responsible for the annual performance evaluation of the Executive Director.
- p. To recruit, appoint, re-appoint, credential and discipline the Licensed Independent Practitioners of the Clinics and to approve policies to be adopted by the Clinics. The term Licensed Independent Practitioner shall mean any individual, as permitted by law and regulation, and also by the Clinics, to provide care and services without direction or supervision within the scope of the individual's license and consistent with the privileges granted by the organization. The foregoing shall be in accordance with applicable state, federal and local laws, rules and regulations, and in accordance with the standards of any applicable accrediting body. The Board may, in its discretion, delegate duties related to the performance of recruitment, appointment, credentialing and discipline of medical staff to the appropriate Medical Director/Dental Director except that recommendations regarding appointment, credentialing and discipline shall be presented to the Board by the Medical Director for consideration and final vote.

Section 7 – Board Member Responsibilities

7.1 *Key function and responsibilities.*

- a. Attends and participates in all Board meetings.
- b. Each board member should be prepared for the meetings (i.e., read reports and minutes provided prior to the meetings and be familiar with the agenda), ask questions (as appropriate).
- c. Express his/her opinion and be respectful of the opinion of other members.
- d. Act in the best interests of the clinics at all times.
- e. Ensure confidentiality of clinics' information.
- f. Conflicts of Interest. Board members shall not enter into contracts or other arrangements or transactions that would be, or would give the appearance of, a conflict of interest. Further:
 1. Board members are subject to the provisions of Florida law pertaining to public officials avoiding conflicts of interest including, but not limited to, Ch. 112, Florida Statutes, the Code of Ethics for Public Officers and Employees, as well as any and all other applicable standards established by the applicable regulatory and accreditation agencies
 2. No Board member, administrator, employee or representative of the Clinics, nor any other person, organization or agency shall, directly or indirectly, be paid or receive any commission, bonus, kickback, rebate or gratuity or engage in any fee-splitting arrangement in any form whatsoever for the referral of any patient to the District or Clinics.

Section 8 – Membership Composition

- 8.1 Orientation. As new members are elected or appointed to the Board they shall receive an orientation regarding C. L. Brumback Primary Care Clinics Board to include, but not be limited to, their authority and responsibility under the 330 grant requirements, legal status, and relation to the Health Care District of Palm Beach County and a review of these By-Laws.
- 8.2 The Board shall consist of 9-13 members.
- 8.3 A majority of the Board members will be users of the in scope clinic's services within the past twenty-four months. A patient is an individual who has generated at least one health center visit. These members will be representatives of the individuals receiving services at any of the clinics.
- 8.4 The user Board members as appropriately defined in the Bylaws are consistent with applicable law, regulations and policy.
- 8.5 User Board members are defined as individuals who are (or, for planning grantees, will be) served by the clinics and who utilize the clinics as their principal source of primary care and who have used the clinic's services within the last two years.

- 8.6 Board members must live in one of the clinic's service areas.
- 8.7 No more than half of the remaining members of the Board may be individuals who derive more than 10% of their annual income from the healthcare industry. Healthcare industry is defined as "hospitals and other healthcare institutions, nurses, doctors, dentists, and other licensed healthcare professionals whose primary responsibility is providing primary preventive and therapeutic healthcare services".
- 8.8 The remaining members of the board must be representatives of the community where the project's catchment area is located and shall be selected for their expertise in community affairs, local government, finance, and banking, legal affairs, trade unions and other commercial and industrial concerns or social service agencies within the community.
- 8.9 No member of the Board shall be an employee of the clinics, or spouse, child, parent, brother or sister by blood, adoption or marriage of such an employee. The Executive Director may be a non-voting, ex-officio member of the Board.
- 8.10 No Board member, employee, consultant or those providing services and or goods to the Clinics may pursue any personal activity that will involve a conflict-of-interest or use their official position to make secret or private profits and will treat all matters of the clinics as confidential. Board members will not use or give the appearance of using their position for the purpose of financial gain. "Financial gain" includes financial interest, gifts, gratuities, favors, nepotism and bribery. Political favors will also be considered improper. Board members must identify any conflict-of-interest they may have regarding a particular matter and abstain from discussing or voting in the matter.
- 8.11 No Board members should act or speak, or otherwise indicate that they are authorized to act or speak, on behalf of the entire Board without express Board approval/consent.
- 8.12 Recommendation for Board membership shall be from the community being served.
- 8.13 One Board position shall be filled by the District Chair, or his/her designee, by appointing a member of the District's Governing Board in accordance with that body's applicable bylaws.
- 8.14 One Board member shall serve on the Finance and Audit Committee of the District's Governing Board and one Board member shall serve on the Quality, Patient Safety, and Compliance Committee of the District's Governing Board.

Section 9 – Term of Membership

- 9.1 Board membership will be for a period of four (4) years starting on the date membership is approved and terminating four (4) years from the date of approval. No Board member shall serve more than two (2) consecutive terms. If at any time there is a question concerning the length of the term of office for any Board member, the Governing Board will decide through any appropriate means the term of the questioned incumbent.
- 9.2 Selection of New Board Member(s) for open Member positions. The selection of new Board members to fill any vacancy then existing may or to replace any member whose Term is ended, will be as follows:

- a. Vacancies on the Board due to the termination, resignation or death of a Member prior to the expiration of his/her Term may be filled within sixty (60) days of the vacancy by a majority vote of the Members at the next regular meeting, or at a special meeting called for that purpose, from those eligible persons recommended by the Nominating/Membership Committee.
 - b. Members eligible to serve for a second 4-year term may apply for reappointment according to the procedures instituted by the Nominating Committee and approved by the Board. When a vacancy is anticipated to occur at the completion of any Member's 4-year term, the Nominating Committee shall submit names of eligible persons to the Board for consideration at least one month prior to the annual meeting of the Board, and the Board shall select those persons to fill the anticipated vacancy by a majority vote at the annual meeting. In selecting its new members, the Board will use the criteria set out in Section 8.
- 9.3 Membership on the board may be terminated by resignation of a member or by resolution of the Board after any member has three (3) unexcused absences. For purposes of these Bylaws, an unexcused absence occurs when a Board member fails to attend a regularly scheduled meeting and fails to give advance notice of such absence to the Executive Director who will notify the Chair. After two (2) unexcused absences, the secretary shall send the member a reminder. On the third unexcused absence, the Board shall take action to terminate membership and the individual shall be so advised. The migrant/seasonal farm worker who is absent due to job obligation will be granted and excused absence without restrictions.
- 9.4 Any Board member may be removed from the Board with or without cause by a two-thirds vote of the remaining board members present and voting at any regular or special meeting called for such purpose.

Board member can be removed for cause including, but not limited to:

- a. Repeated failure to attend Board meetings, or for conduct detrimental to the interests of the clinics.
- b. Conduct inconsistent with the clinics purpose.
- c. Refusing to render reasonable assistance in carrying out the clinics purpose.
- d. Refusing to act in a manner consistent with the clinic's mission and priorities.
- e. Individual is suspended or debarred from participation in federal programs.
- f. Whenever it is determined that the best interest of the clinics could be served by such removal.

Allegations made in support of the proposal to remove a board member shall be presented in writing, by mail, to the Board member in question at least five (5) calendar days in advance of the meeting. The allegation(s) shall be noted on the agenda of the meeting. The Board member in question shall be entitled to appear before the Board and be heard at such meeting. Removal of the Board member shall create a vacancy and a new Board member shall be elected in accordance with Section 8 of this

Article.

9.5 Each member will be entitled to one (1) vote.

- a. Membership shall be designated as Consumer, Health Care Provider, Community Representative, or Migrant/Seasonal Farm worker.
- b. Voting Conflict. No member shall cast a vote on any matter that could result in direct or indirect financial benefit to such member or otherwise give the appearance of or create a conflict of interest as defined in Ch. 112, Florida Statutes. Nothing in the foregoing shall prevent Board Members from voting upon matters of Board Compensation as set forth in Section 10.5.

Section 10 – Officers

- 10.1 Corporation officers shall be elected by the Members at the Annual Meeting in May of each year for a one (1) year term of office. Any officer may be elected to serve consecutive terms in the same office, but may not serve more than two consecutive one-year terms in the same office. If there is a declared state of emergency declared at the local, state, or federal level that impacts the Clinics, the election of officers may be postponed unless the circumstances make it impossible to meet, if so, then it shall be postponed.
- 10.2 Removal of Officers. Any officer of the Board may be removed from office, with or without cause, by a majority vote of the Board of Directors at any meeting of the Board where a quorum exists.
- 10.3 Vacancies. Any time there is a vacant officer position, the Board may elect a replacement officer at its next regular meeting to serve out the remainder of the term of office, and any person so elected shall not have the remaining term count for purposes of calculating the ‘two consecutive one-year terms’ referenced in Section 10.1.

10.4 The officers and their duties for this organization shall be:

10.4.1 Chairperson

- a. To preside over all meetings and to appoint all committee and councils.
- b. The Chairperson or such representative selected by the Board shall be authorized to act for the Board, and assume on its behalf the obligations imposed by the terms and conditions of any award and Public Health Service regulations. Such execution shall constitute the acceptance by the Board of the terms and conditions of the Grant and obligate it to perform its function under the approved project in accordance with the terms thereof.
- c. The Chairperson shall be the Board’s sole and primary liaison for external affairs including serving as Board’s representative to the media.
- d. Appoint a Board member to attend District governing Board meeting in conjunction with the Executive Director, solely in advisory capacity to enhance oversight and communication between each organization

10.4.2 Vice Chairperson

- a. The Vice-Chairperson shall succeed to the office of the Chairperson if the office becomes vacant or if otherwise the chairperson is otherwise unable to perform his/her duties.
- b. To assume the duties as assigned by the Chairperson in his/her absence.
- c. Perform such duties as assigned by the Chairperson or Board of Directors.

10.4.3 Secretary

- a. The secretary shall be responsible for ensuring recording and maintaining of the minutes of all meetings of the governing Board, and shall perform such duties as may be assigned by the Chairperson of the Board. The Secretary or designee shall distribute copies of minutes of all Board and/or committee meetings to all members of the Board.
- b. To monitor the minutes of all meeting of the Board and Executive Committee.
- c. To assure that his/her designees notifies members of all Board meetings and conferences.
- d. To advise staff members regarding correspondence.
- e. To monitor, review and approve the preparation of the agendas.

10.4.4 Treasurer

- a. To review monthly and/or periodic financial reports prior to presentation to the Board during scheduled meetings.

10.5 Compensation

Members shall serve without compensation except the Board may authorize and establish policies governing the reimbursement of certain reasonable expenses, such as mileage, incurred to attend meetings.

Section 11 – Committees

- 11.1 There shall be an Executive/By-Law Committee comprised of the officers of the Board. This committee shall meet as provided in these Bylaws and as otherwise deemed necessary by the Chairperson. The Chairperson shall serve as the Committee chair and the Executive Director will serve as a non-voting, *ex officio*, member of the Executive Committee. The Executive Committee shall:

- a. Act as advisor to the Chairperson;

- b. Exercise the powers of the Board between regular Board meetings, except that the Executive Committee may not take final action to amend these bylaws, remove a board member from office, hire or remove the Executive Director, or sell or acquire assets;
 - c. Report to the Board at its next regular meeting on any official actions it has taken;
 - d. Annually review and recommend to the Board any necessary change to the bylaws; and
 - e. Annually review the performance of the Executive Director for report to the Board.
 - f. ~~Serve as the ad hoc Personnel Committee as needed.~~
- 11.2 Vacancies of the Executive committee occur when there is a vacant officer position. The vacancy is filled with the election of a member to serve out the officer's remaining term (See Section 10).
- 11.3 The Standing Committees shall be the Finance Committee, Quality Council and Planning Committee.
- 11.4 The Membership/Nominating Committee shall be an ad hoc committee, activated and populated at the direction of the Chairperson to recruit and nominate individuals to fill vacancies of the Governing Board. The Membership/Nominating Committee shall, if requested, review, edit, and submit proposed revisions to policies and procedures for the recruitment, screening and orientation of potential new Board members and present to the Board information on eligible persons to fill vacancies. This committee shall, if requested, assist in development of a board orientation program. The Executive Director, or his/her designee, will serve as a no voting, ex-officio member of this committee.
- 11.5 The Planning Committee shall oversee the clinic's goals and objectives, and develop a strategic planning workshop for the Board to be held at least every three (3) years. The Executive Director, or his/her designee, will serve as a non-voting, ex-officio member of this committee.
- 11.6 The Quality Council shall review and make recommendations for clinical services, monitor progress of Health Care Plan objectives, review Clinical Outcome measures audits, monitor and review Quality Assurance and Continuous Quality Improvement, Principles of Practice, credentialing, community needs survey data, patient satisfaction survey, and recommend new clinical programs. The Quality Council will meet on a monthly basis. If there is a declared state of emergency declared at the local, state, or federal level that impacts the Clinics, the Quality Council meetings may be postponed unless the circumstances make it impossible to meet, if so, then it shall be postponed. The Executive Director, or his/her designee, will serve as a non-voting, ex-officio member of this committee.
- 11.7 The Standing Committees will meet as set forth in these Bylaws and will provide a report of its meeting(s) during the next Board meeting following the Committee meeting, and make any recommendations for Board action, which will then become part of the Board documents.
- 11.8 Proxy: An absent member shall not be allowed to vote by proxy.
- 11.9 Members of the Planning Committee and Quality Council may also include non-board members with specific areas of expertise that support the mission of that committee.
- 11.10 The Finance Committee shall review the budget, expenditures, and all other financial reports related to the operations of the C. L. Brumback Primary Care Clinics. The Finance Committee will report to

the full Board of Directors. The Finance Committee will meet on a quarterly basis, and may include clinic staff employees. The Executive Director, or his/her designee, will serve as a non-voting, ex-officio member of this committee.

Section 12 – Meeting

- 12.1 Regular meetings shall be held monthly. Time and place shall be determined by Board.
- 12.2 Special meetings may be called by the Chairperson whenever Board business cannot be held until the next regular meeting.
- 12.3 Meetings shall conform to the requirements of Ch. 286, Florida Statutes (“Government in the Sunshine Act”), including the taking and maintenance of meeting minutes, and such minutes shall be retained by District in accordance with the requirements of the State of Florida’s Record Retention Schedules GS1-SL (State and Local Government Agencies), GS4 (Public Health Care Facilities and Providers), and/or any other applicable Schedule(s)), regarding Minutes of Official Meetings.
- 12.4 The Annual Meeting shall coincide with the Regular meeting held during the Month of May and shall hold the election of officers.
- 12.5 Quorum shall consist of a majority of the members of the Governing Board as then constituted, for the regular scheduled meetings and the special called meetings. Once a quorum is established for any meeting it remains for the duration of the meeting unless one or more members permanently absents him/herself from the ~~premises of the~~ meeting and the sum of the remaining members falls below the number needed for a quorum.
- 12.6 Board members should make every reasonable effort to attend Board meetings in person and the needs of the District are best served when all Board members are physically present at Board meetings. However, if a Board member is unable to be physically present at a Board meeting, a Board member may attend a meeting of the Board by teleconferencing or other technological means. Attendance video conferencing provided that such meeting complies with the requirements of the Government in the Sunshine Act. For attendance and voting by Board members pursuant to the foregoing shall constitute in person presence at the meetings and shall be counted towards the quorum. . . Any electronic or technological means utilized to permit the Board members to participate or vote in a Board meeting:
 - ~~a. There must be properly amplified or a quorum physically present in order for a board member to participate and vote by telephonic or video conferencing~~
 - ~~b. The member voting by these means must be physically located outside the borders of Palm Beach County, unable to attend due to an illness, or unable to attend due to an unforeseen circumstance beyond their control.~~

~~Any telephone or video conferencing utilized for voting during a board meeting must be amplified for all to hear and or displayed so that all those attending the meeting can hear or see the Board member’s comments and or vote and so. This also ensures that the all other board members attending remotely can hear and or see all the other board members’ comments and or votes and the~~

comments of other participants in the meeting. -

~~12.7 — If an Executive Order, Florida Statute, or Attorney General opinion permits the ability to meet remotely due to a public emergency, the Committee or Board will adjust their meetings accordingly.~~

Section 13 – Authority

The parliament authority of the Governing Board shall be used based on ROBERTS RULE OF ORDER (current edition), unless contrary procedure is established by the Articles of Incorporation, these Bylaws, standing rule, or by resolution of the Board of Directors.

Section 14 – Amendments

These By-Laws may be amended or repealed by a vote from the majority of the total membership of the Governing Board. ~~Proposed changes to the By Laws must be submitted to the Board at a regularly scheduled meeting and voted on at the succeeding regularly scheduled meeting.~~ Changes in the By-Laws are subject to approval by the ~~Governing Board, Health Care District of Palm Beach County, and the Regional Office of the Department of Health and Human Services.~~

Section 15 – Dissolution of the Corporation

In the event of the liquidation, dissolution or winding up of the corporation whether voluntary, or involuntary, or operation of law, the Board of Directors of the Corporation shall dispose of the assets of the Corporation in conformance with Federal and State of Florida law, as modified by the regulations promulgated by designated oversight agency or department, and in accordance with the Corporation's Articles of Incorporation.

CERTIFICATE

This certifies that the foregoing constitutes the Bylaws of District Clinics Holdings, Inc., amended and adopted by the Members of the Corporation at a meeting held on the 26th day of September, ~~2023~~December, 2024.

BY: _____

Joseph Gibbons, Julia Bullard
Secretary

**Approved as to form and
Legal Sufficiency**

BY: _____

Bernabe Icaza
General Counsel

HISTORY OF DISTRICT CLINIC HOLDINGS, INC. BYLAWS

The initial Bylaws of the District Clinic Holdings, Inc. Board were first adopted on the 24th day of January, 2013. Amendments made subject to Section 14 of the District Clinic Holdings, Inc. Bylaws are listed below:

Change Number	Date of Adoption	Section(s) Amended
1	March 28, 2013	<p>Title Pages amended to read:</p> <p>Section 11.3 relating to the Finance Committee deleted and</p> <p>Section 11.9 amended to remove reference to Finance Committee.</p>
2	May 23, 2013	<p>Section 2.1 amended to remove the following: “Thus, as used in these bylaws, the terms “Board” shall mean the C.L. Brumback Health Clinic Board of Directors.”</p> <p>Section 6.1m amended to remove ability to establish and revise policies.</p> <p>Section 6.1q amended to remove the following: “Within its discretion to file article of dissolution and dissolve the corporation.</p> <p>Section 8.10 “The Board shall ensure that the provision is made applicable to all employees, consultants and those providing goods and or services to the Center.” deleted.</p>

Section 11.1 removed requirement to make recommendations to full Board.

Section 11.7 removed “The Personnel Committee shall review staffing needs and recommends changes in staffing levels when deemed desirable. While the Board’s personnel policies shall be consistent with those of the Health Care District the Board must tailor its personnel policies to the clinical operations of the corporation.” To dissolve the Personnel Committee.

Section 11.8 removed “The Finance Committee shall review the budget, expenditures, and financial policies and make recommendations to the Board in regard to certain concerns. While the Board’s financial policies shall be consistent with those the Health Care District the Board must tailor its financial policies to the clinical operation of the corporation.” To dissolve Finance Committee.

3

August 1, 2013

Section 2.1 amended to include: “hereinafter referred to as the “Board”)

Section 6.1m amended to include establishment of policies.

4

August 9, 2013

Section 6.1q added power to:
“Facilitate the annual Chief
Executive Officer performance
evaluation process.”

Section 8.10 amended to
include: “...employee,
consultant or those providing
services and or goods to the
Clinic...”

Section 2.1 established for
clarification regarding
common business name

Section 2.2 replaced Health
Clinic Board with Primary
Care Clinics Board of
Directors

Section 6.1.b replaced Project
with Executive

Section 6.1.h removed “To
adopt and be responsible for
operating and personnel
policies and procedures,
including selection and
dismissal procedures, salary
and benefits scales and
employee grievance
procedures within the
guidelines of the Health Care
District of Palm Beach County
Personnel Policies and
Procedures” and amended to
include ability to establish and
approve general policies for
the clinics as stated in PIN
1998-12, Part II Section 330,
Governance Requirements.

Section 6.1.m amended to
include ability to establish

policies

Section 6.1.q amended to establish responsibility for the Executive Director's annual performance evaluation

Section 8.1 amended to include the common business name, CL Brumback Primary Clinics

Section 8.9 amended to replace previously referenced project director with Executive Director

Section 8.11 amended to include "...otherwise indicate that they are authorized to act or speak..."

Section 8.13 added

Section 9 amended to read:
Term of Membership

Section 9.1 amended to clarify membership length of terms

Section 9.2 added for establishment of selecting New Board Members.

Section 9.2.a added to establish requirements for filling vacancies on the Board due to termination, resignation, or death of a Member.

Section 9.2.b added to establish procedure for member reappointment instituted by the Nominating Committee

Section 9.3 amended to define an unexcused absence

Section 9.4 amended to read: “Board member can be removed for cause including, but not limited to:”

Section 9.4.a “...causes include the” deleted

Section 9.5 regarding Board vacancies was deleted, became section 9.2.a

Section 10.1 amended to become Section 10.4

Section 10.1 included to establish election of officers by Members

Section 10.2 added in order to establish process for removal of officers.

Section 10.3 added to establish election of a replacement officer on a vacant position.

Section 10.4.d. deleted: “The Chairperson, or his/her designee, shall represent the board before the news.”

Section 10.4.d reads: “The Chairperson shall be the Board’s sole and primary liaison for external affairs including serving as Board’s representative to the media.”

Section 10.4.e added to read:

“Appoint a Board member to attend District governing Board meeting in conjunction with the Executive Director, solely in advisory capacity to enhance oversight and communication between each organization.”

Section 10.4.e amended to include ability to review and approve agendas.

Section 10.5 added: “the Board may authorize and establish policies governing the reimbursement of certain...”

Section 11.1 replaced clinic’s director with Executive Director. Added “The Executive Director, or his/her designee, will serve as a non-voting, ex-officio member of this committee.

Section 11.2 included for establishment of a Personnel Committee

Section 11.3 removed “The Executive Committee of the Board shall consist of the Officers of the Board”

Section 11.4 added requirement to develop policies and procedures for recruitment, screening and orientation of potential new Board members and present information to the Board on eligible persons to fill vacancies.

Section 11.5 added: “The Executive Director, or his/her designee, will serve as a non-voting, ex-officio member of this committee.”

Section 11.6 amended to read that the Clinical Committee is to be also known as the Quality Committee.

Section 11.7 amended to include requirement for committees report to include any recommendations for Board action

Section 11.9 deleted
Committee members

Section 11.10 added to read: The Finance Committee shall review the budget, expenditures, and all other financial reports related to the operations of the C.L. Brumback Priamary Care Clinics. The Finance Committee will report to the full Board of Directors. The Finance Committee will meet on a monthly basis, and may include clinic staff employees. The Finance Committee will meet on a monthly basis. The Executive Director, or his/her designee, will serve as a non-voting, ex-officio member of this committee. Section 13 added: “unless contrary procedure is established by the Articles of Incorporation, these Bylaws, standing rule, or by resolution of the Board of Directors.

5

February 18, 2014

Section 15 added for requirement for disposing of assets in the event of dissolution of the Corporation

Section 11 renumbered for efficiency.

Section 8.2 amended to increase the number of Board members to 10-13.

Section 10.3 added: to serve out the remainder of the term of office, and any person so elected shall not have the remaining term count for purposes of calculating the ‘two consecutive one-year terms’ referenced in 10.1.

Section 11.3 amended to establish process for filling vacancy of an officer position.

Section 12.3 added: “Meetings shall conform to the requirements of Ch. 286, Florida Statutes (“Government in the Sunshine Act”), including the taking and maintenance of meeting minutes, and such minutes shall be retained by District in accordance with the requirements of the State of Florida’s Record Retention Schedules GS1-SL (State and Local Government Agencies), GS4 (Public Health Care Facilities and Providers), and/or any other applicable Schedule(s)), regarding Minutes of Official Meetings”.

Section 12.4 added to read:
“Effective in 2014, the Annual Meeting shall coincide with the Regular meeting held during the month of May and the election of officers to hold office commencing in the next fiscal year shall be held. In order to transition to this new schedule, the election of officers held in November 2013 for terms to continue through December 31, 2014, shall remain unchanged. The election to be held in May 2014 shall be for the officers whose terms shall commence on January 1, 2015, and each election that follows shall select the officers whose terms shall commence on the following January 1”.

Section 12.5 previously section 12.3 added “unless one or more members permanently absents him/herself from the premises of the meeting and the sum of the remaining members falls below the number need for a quorum”.

Section 12.6 previously section 12.4 amended to include condition to comply with Government in the Sunshine Act requirement.

Section 6.1.o Remove provision, it is duplicative of audit language in Section 6.1.a

Added Section 6.1.q

Added Section. 7.1.f to establish Board member responsibilities regarding Conflicts of Interest

Section 9.5.b added.

Section 10.4.1 removed subsection b (Chairperson shall have the same right to vote on matters as any other Board member)

Replaced Section 11.1 with the following: There shall be an Executive/Bylaw Committee comprised of the officers of the Board. This committee shall meet as provided in these Bylaws and as otherwise deemed necessary by the Chairperson. The Chairperson shall serve as the Committee chair, and the Executive Director will serve as a non-voting, *ex officio* member of the Executive Committee. The Executive Committee shall:

- a. Act as advisor to the Chairperson;
- b. Exercise the powers of the Board between regular Board meetings, except that the Executive Committee may not take final action to amend these bylaws, remove a board member from office, hire or remove the Executive Director, or sell or acquire assets;
- c. Report to the Board at its next regular meeting on any official actions it has taken;
- d. Annually review and recommend to the Board any

		necessary change to the bylaws; and Annually review the performance of the Executive Director for report to the Board
7	May 26, 2015	Amended Section 6.1.q to include Licensed Independent Practitioner and term of same. Addition of Dental Director.
8	March 28, 2018	Amended Section 4.1 to update administrative address. Addressed grammatical errors throughout.
9	December 11, 2019	Amended Section 8.7 to define healthcare.
10	January 29, 2020	Amended Section 6.1h to remove invalid HRSA PIN, 6.1i to updated QI/QA Plan, 8.3 to define patient and 8.9 to include adoption. Added robust language to section 9.4 regarding Board member termination.
11		May 27, 2020 Amended Section 10.1 to permit postponement of officer elections in the event of a declared state of emergency Added Section 12.7 to permit remote meetings during public emergencies.
12	September 30, 2020	Amended Section 11.6 to permit postponement of the Quality Council meetings in the event of a declared state of emergency
13	January 27, 2021	Amended Section 12.6 adding Language related to telephone

14

December 14, 2021

Videoconferencing

Participation

Amended Section 9 updating Membership term to 4 years from date of appointment; removed language related to filing unexpired terms; and Section 11 updating Finance Committee meetings to Quarterly.

15

September 26, 2023

Amended Section 12.1 to allow for monthly meetings to be held by teleconferencing or other technological means, except for in person quarterly meetings.

Amended Section 12.6 to allow Board members to participate in meetings by technological means.

Amended Section 14 requiring Bylaws amendment by majority of the Board members and approval by Governing Board.

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 25, 2023

1. Description: Executive Director Informational Update

2. Summary:

- Delray Location Kicked Off SUD October 3, 2023
- Delray Ribbon Cutting
- BOD ED Evaluation 2023 & BOD Self Evaluation 2023
- HRSA Audit January 23-25

3. Substantive Analysis:

Delray Beach Location

The FAU psychiatry residents began seeing SUD patients 10/3/23 and we celebrated the opening of the health center with a ribbon cutting on 10/10/23

Board of Directors Executive Director 2023 Evaluation & Board of Directors Self-Evaluation

The links to surveys were sent to the board members on 10/17/23.

HRSA OnSite Visit


Our Family Health Center's OnSite Visit is scheduled January 23-25th of 2023. The Chairman of the Board, Melissa Tascone, must be available for the entrance and exit of the survey. Please be advised it's important we continue to have a quorum through the holidays. Our next board meetings are: November 28th, December 13th (just a couple of weeks after the November meeting) and January 24th. HRSA surveyors will attend a portion of the January 24, 2024 board meeting.

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 25, 2023

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:
DocuSigned by:

CA6A21FF2E09481... Jessica Cafarelli
Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

N/A

Date Approved

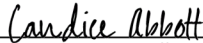
6. Recommendation:

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

Approved for Legal sufficiency:

DocuSigned by:

0CF6F7DB670B431... Bernabe Icaza
SVP & General Counsel

DocuSigned by:

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

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

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
Tussey	Claudia	MD	Family Medicine	Initial Credentialing
Regan	Patrick	DO	Surgery	Initial Credentialing
Hart	Shakiyla	LCSW	Licensed Clinical Social Worker	Initial Credentialing
Koopman	Rebecca	PA	Physician Assistant	Recredentialing
Rexach	Claudia	LMHC	Licensed Mental Health Counselor	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.

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

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

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 is fluent in French and Spanish.

Patrick Regan, DO joined the Belle Glade Clinic in 2023 specializing in Surgery. He attended the Philadelphia College of Osteopathic Medicine and also completed his residency at the Cleveland Clinic Education Foundation. Dr. Regan is certified in Surgery by the American Board of Surgery. He has been in practice for eighteen years.

Shakiyla Hart, LCSW joined the West Palm Beach Clinic in 2023 as a Licensed Clinical Social Worker. She attended the Florida Atlantic University and has been in practice for eight years.

Sherloun Normil-Smith, MD joined the Lantana Clinic in 2015 specializing in Pediatrics. She attended the University of Medicine and Dentistry New Jersey and also completed her residency at University of Hawaii. Dr. Normil-Smith has been in practice for seventeen years and is fluent in Creole, French and Spanish.

Claudia Rexach, LMHC joined the Lantana Clinic in 2019 as a Licensed Mental Health Counselor. She attended the Interamericana University. She has been in practice for eight years and is fluent in Spanish.

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E0881C Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

6. Recommendation:

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


Staff recommends the Board approve the Initial Credentialing and privileging of Patrick Regan, DO, Surgery.


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


Staff recommends the Board approve the Recredentialing and privileging of Rebecca Koopman, PA, Physician Assistant.

Staff recommends the Board approve the Recredentialing and privileging of Claudia Rexach, LMHC, Licensed Mental Health Counselor.

Approved for Legal sufficiency:

DocuSigned by:

0CF6F7DB6706434
Bernabe Icaza
SVP & General Counsel

DocuSigned by:

B6F5640C1C50F4
Charmaine Chibar
FQHC Medical Director

DocuSigned by:

F637D209DB5242
Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

1. Description: General Surgery Delineation of Privileges

2. Summary:

The agenda item represents the General Surgery Delineation of Privileges recommended for Surgeons by the FQHC Medical Director and Chief Medical Officer.

3. Substantive Analysis:

The Delineation of Privileges presented meets 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)

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

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E044C Jessica Cafarelli
 Interim VP & Chief Financial Officer

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

5. Reviewed/Approved by Committee:

N/A	N/A
_____ Committee Name	_____ Date


6. Recommendation:

Staff recommends the Board approve the General Surgery Delineation of Privileges.


Approved for Legal sufficiency:

DocuSigned by:


0CF6F7DB6706B Bernabe Icaza
SVP & General Counsel

DocuSigned by:


B6F5640C1C84F01 Charmaine Chibar
FQHC Medical Director

DocuSigned by:


F637D209DB5242 Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services



Application for Clinical Privileges MD, DO
Specialty: General Surgery

DELINEATION OF PRIVILEGES

☐ Initial Appointment ☐ Reappointment

Practitioner Name:	
Specialty:	

Clinic Privileges Eligibility Criteria:

1. Current active licensure to practice as a physician in the State of Florida
2. Completed additional education/training as follows: Successful completion of ACGME or AOA accredited residency program in General Surgery and Board Certified or Board Eligible by the American Board of Surgery.

General Privileges - Core I Privileges

General Surgery Core I Privileges includes the evaluation and management of patients and the performance of medical procedures to correct or treat various medical conditions, illnesses, and injuries. Privileges in Core I include those procedures and cognitive skills involving medical problems that normally are taught in residency programs. Physicians requesting privileges in this Core I will have documented experience, demonstrated ability, and current competence in General Surgery.

- Take, evaluate, and record medical histories
- Perform physical exams to evaluate medical problems
- Collect specimens for pathologic exams
- Provide pre- and post-operative care
- Local anesthesia
- Laceration repair
- Abscess drainage
- Differential diagnosis
- Analyze and interpret data, formulate problem list, and establish plans for clinical problems
- Order appropriate lab, x-rays and other diagnostic tests
- Order appropriate medications
- Order consultation for other specialty services
- Order nutritional consult
- Order social services consult
- Patient education and instruction

Requested by: _____
 (Applicant Signature)

Approved by: _____
 (Medical Director Signature)



Application for Clinical Privileges MD, DO
Specialty: General Surgery

Core II Privileges

Privileges in this Core may be granted to physicians who have acquired added experience and/or training, and who have special skills and knowledge in the specific areas. A representative but, of necessity, not complete list of General Surgery Core II Privileges is stated below. It is assumed that other procedures and problems of similar complexity and risk will fall within the identified General Surgery Core II Privileges.

Requested Approved

_____	_____	X-Ray interpretation
_____	_____	Lipoma excision
_____	_____	Joint aspiration
_____	_____	Skin tag removal
_____	_____	Local anesthesia
_____	_____	Lesion destruction/removal
_____	_____	Tendon and bursa injection
_____	_____	Trigger Point injection
_____	_____	Wound Care /Debridement
_____	_____	Biopsy (Excisional/Incisional, Punch, Shave))

Applicant Attestation:

I attest by signature that I have requested privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise at the C.L. Brumback Primary Care Clinics to the extent services are available to be performed. I further agree to provide documentary evidence of clinical experience and performance of the past two (2) years if requested.

 Applicant Printed Name

 Specialty

 Applicant Signature

 Date

Medical Director:

The C.L. Brumback Primary Care Clinics' Medical Director accepts the above applicant's attestation and asserts that he/she meets the minimum criteria for the privileges requested.

 Medical Director

 Medical Director Signature

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

1. Description: Quality Report

2. Summary:

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

- Quality Council Meeting Minutes – October 2023
- UDS Report – YTD
- Provider Productivity – September 2023

3. Substantive Analysis:

PATIENT SAFETY & ADVERSE EVENTS

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

PATIENT SATISFACTION AND GRIEVANCES

Patient relations to be presented as separate agenda item.

QUALITY ASSURANCE & IMPROVEMENT

Breast Cancer Screening Initiative: In an effort to provide Breast Cancer Screening to our uninsured patients we teamed up with the Breast and Cervical Cancer Early Detection Program from the Florida Department of Health and we are utilizing the Florida Mobile Mammography Service to complete the screening mammograms at no cost to patients who qualify to use this program. We had 2 screening events in September: at our Lantana clinic on 9/8 and our West Palm Beach clinic on 9/16.

We saw 19 patients at each event and successfully completed a total of 38 screening mammograms.

UTILIZATION OF HEALTH CENTER SERVICES

Individual monthly provider productivity stratified by clinic.

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

Jessica Cafarelli

CA6A21FF2E094883
Jessica Cafarelli
Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

N/A

Date

6. Recommendation:

Staff recommends the Board approve the updated Quality Report.

Approved for Legal sufficiency:

DocuSigned by:

Bernabe Icaza

0CF6F7DB67064B
Bernabe Icaza
SVP & General Counsel

DocuSigned by:

Charmaine Chibar

B6F5640C1C564F61
Charmaine Chibar
FQHC Medical Director

DocuSigned by:

Candice Abbott

F637D209DB5242C
Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services



Quality Council Meeting Minutes

Date: October 11, 2023

Time: 2:30PM – 5:00PM

Attendees: Steven Sadiku – Director of Corporate Quality; Maria Chamberlin – Assistant Director of Nursing; Shauniel Brown – Senior Risk Manager; Carolina Foksinski- Operations Process Manager; Jokebed Laurore- Nurse Educator; Nancy Gonzalez – Dental Program Director; Erik Lalani – Dental Operations Manager; Alexa Goodwin – Patient Relations Manager; Lisa Hogans – Director of Nursing; Dr. Sandra Warren – Associate Medical Director; Dr. Ana Ferwerda – Director of Clinic EHR Optimization & Women’s Health; Dr. Charmaine Chibar – FQHC Medical Director; Angela Santos – Director of Ops; Dr. Josh Adametz – Dental Director; Jessica Ramirez; Candice Abbot – SVP & Chief Operating Officer

Excused: Marisol Miranda – Director of Clinic Operations; Courtney Phillips; Ivonne Cohen – Corporate Quality Reporting Analyst;

Minutes by: Christine Ferguson – Executive Assistant

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



OPERATIONS	Productivity	Disparity between data with Dental Payer Mix.				Steven																																																																									
	Productivity September 2023	Saturdays are half days and are showing as 18% - need to make sure its reflecting the data as a half day and not a full day.				Ivonne																																																																									
	<table><tr><th>Service Line</th><th colspan="2">Target</th><th colspan="2">Seen</th><th>% of Goal</th></tr><tr><th></th><th>In Person</th><th>Tele</th><th>In Person</th><th>Tele</th><th>Total</th></tr><tr><td>Adult Care</td><td>6,573</td><td></td><td>5,051</td><td></td><td>77%</td></tr><tr><td>Pediatrics</td><td>1,970</td><td></td><td>1,709</td><td></td><td>87%</td></tr><tr><td>Primary Residents</td><td>678</td><td></td><td>642</td><td></td><td>95%</td></tr><tr><td>Women's Health</td><td>768</td><td></td><td>578</td><td></td><td>87%</td></tr><tr><td>Behavioral Health</td><td>561</td><td></td><td>493</td><td></td><td>88%</td></tr><tr><td>Behavioral Health - Psych</td><td>462</td><td></td><td>271</td><td></td><td>59%</td></tr><tr><td>Psych Residents</td><td>606</td><td></td><td>315</td><td></td><td>52%</td></tr><tr><td>Substance Use</td><td>860</td><td></td><td>739</td><td></td><td>86%</td></tr><tr><td>Dental</td><td>2,044</td><td></td><td>1,941</td><td></td><td>97%</td></tr><tr><td>Dental Hygiene</td><td>968</td><td></td><td>921</td><td></td><td>95%</td></tr></table>	Service Line	Target		Seen		% of Goal		In Person	Tele	In Person	Tele	Total	Adult Care	6,573		5,051		77%	Pediatrics	1,970		1,709		87%	Primary Residents	678		642		95%	Women's Health	768		578		87%	Behavioral Health	561		493		88%	Behavioral Health - Psych	462		271		59%	Psych Residents	606		315		52%	Substance Use	860		739		86%	Dental	2,044		1,941		97%	Dental Hygiene	968		921		95%						
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<i>(Clinic productivity report with graphs were presented.)</i>																																																																															
	Walk-ins Medical <ul style="list-style-type: none">Scheduled: 7,844Walk-Ins: 1,954 Dental: <ul style="list-style-type: none">Scheduled: 2,425Walk-Ins: 470																																																																														
	No Show Rates No Show rate was 15.3%, a 1% decrease from the previous month. Year to date no show rate is 18%, between medical and dental, of which 3% is from telehealth visits.																																																																														



	(Report with graph presented.)			
	<u>Doximity Dialer Usage -September 2023</u> Users <ul style="list-style-type: none"> 54 registered users (98.2% registration rate) <ul style="list-style-type: none"> 20 active users (8 MD/DOs, 7 NP, PA, 5 Care Team Calls <ul style="list-style-type: none"> 217 total calls <ul style="list-style-type: none"> 114 voice calls <ul style="list-style-type: none"> 106 successful calls (93%) success rate 5 calls escalated to video 103 video calls <ul style="list-style-type: none"> 82 successful calls (79.6%) success rate 1 secure text (Report with breakdown by specialty and user)			
PATIENT RELATIONS				
GRIEVANCES, COMPLAINTS & COMPLIMENTS	<u>Patient Relations Dashboard</u> For August 2023, there were a total of 10 Patient Relations Occurrences that occurred between 5 Clinics and Clinic Administration. Of the 10 occurrences, there was 5 Grievances and 5 Complaints. The top 5 categories were Physician Related, Respect Related, Care & Treatment, Discharge and Finance Related issues. The top subcategory was Physician Related All Aspects of Care with 3 occurrences. There was also a total of 27			



	<p>patient compliments received across 4 Clinics and Clinic Administration. Breakdown of each clinic presented.</p> <p><i>(Patient Relations Report & Patient Relations Dashboard with Graphs presented.)</i></p>			
SURVEY RESULTS	<p><u>Patient Satisfaction Survey – September 2023</u></p> <p>For September 2023 there were 379 Patient Satisfaction Surveys completed out of a total of 12,923 patient visits. This is a 3% return rate out of the total survey delivered for the month. West Palm Primary had the highest return rate (67/1,787). The top 5 and lowest 5 scored-questions were presented for each area.</p> <p>“Best Questions” for in person visits – September 2023:</p> <ul style="list-style-type: none"> • Care and concern of our nurses/medical assistants - 93% (increase from month) • Quality of your medical care – 93% (increase from month) • Our practice – 93% • Time taken to listen and answer your questions – 92% • Things explained in a way you could understand – 92% (increase from last month) <p>“Worst Questions” for in person visits – September 2023:</p> <ul style="list-style-type: none"> • Being informed about any delays during this visit – 15% (increase from last month) • Your ability to contact us after hours - 14% (increase from last month) • Waiting time in exam room – 14% • Your phone calls answered promptly – 12% 	<p>Telemedicine visits are pulling up for “Worst Questions” for in-person visits – September 2023. The dashboard needs to be updated.</p>	Ivonne	



	<ul style="list-style-type: none"> Waiting time in reception area – 11% <p>Of the surveys received for September, 44% of patients perceived wait time between 6 to 15 minutes, 41% of responses were from patients that this was their first visit to the practice, 75% of surveys completed were by females and most patients preferred to be seen on Monday or Tuesday mornings. 86% of responses in September were promoters (increase from the last month where promoters were 77%), 9% of responses were neutrals (decrease from the previous month where neutrals were 15%) and 6% of responses were detractors (decrease from the previous month where detractors were 8%). Top promoters, detractors, and patient comments presented by clinic and service line. Clinic trends over time to be shared with Clinic Supervisors and Coordinators. (Patient Satisfaction Survey PowerPoint presented.)</p>			
OUTBOUND CALL CAMPAIGNS	<p><u>Afterhours Report – Sept, 2023</u></p> <p>In Sept 2023, the Clinic Service Center returned 162 calls received from the Afterhours service. This was an 11% increase from the previous month. After hours calls by Type, by Clinic, and by Department presented. Of the 162 after hours calls received 34 (21%) of the calls were paged out to the Adult on-call provider and 2 calls (1%) were paged out to the on-call Pediatrician for clinical issues. The majority of after-hours calls were for appointment requests 39 (24%), followed by clinical issues. Trends over time reported. (Outbound Campaign PowerPoint presented.)</p>			



QUALITY				
QUALITY AUDITS				
MEDICAL	<p><u>Hemoglobin A1C/Point of Care Testing</u></p> <p>Shows: The diabetes measure data for September, 2023 shows that our patients are currently controlled at (2738)74 % while (895) 24% are uncontrolled (of 3708 diabetic patients total) and (75)2% of patients need data. Our HRSA goal is to have 67% of patients with controlled diabetes. Up to September, there were 3385 POC A1Cs done (91% of Diabetic Patients). The majority of controlled patients (92%) and uncontrolled patients (97%) had the A1c done at POC vs. lab.</p> <p>(Diabetes dashboard presented.)</p>			
	<p><u>Colorectal Cancer Screening September, 2023</u></p> <p>Satisfied: 3845 (41%) No met: 5494 (59%)</p> <p>(Report with graph presented.)</p>			
	<p><u>FIT Test September, 2023</u></p> <p>Among patients with the colorectal cancer screening that do not meet having the screening completed, the screening was ordered in 66% of the patients and 44% of the patient did not have and order for Fit test. The rate of</p>			



	completion persists low at 54%. Our highest return rates during the past year up to September, 2023 were at Boca Clinic (54%), Lantana Clinic (49%), and Belle Glade Clinic (48%). (Report with graph presented.)																	
	<u>Cervical Cancer Screening September, 2023</u> Satisfied: 6260 (61%) Needs Data: 4065 (39%) (Report with graph presented.)	Discrepancy in the report with cervical cancer screening when the new report was placed in Tableau.	Dr. Warren/ Ivonne															
	<u>HPV</u> Second dose in both females and males for 9-10y and 11-12y has improved, especially when compared to Meningococcal & TDAP. (Report with graph presented.)																	
	<u>Breast Cancer Screening September, 2023</u> Satisfied screenings – 2200 (56%) Unsatisfied Screenings – 1695 (44%) Not Met with order – 1322 (78%) Not Met (Patient Missed) – 373 (22%) (Report with graph presented.) Medical Quality Site Visits <table><tr><td colspan="2"><u>Quarter 2 Clinical QSV</u></td></tr><tr><td>Belle Glade</td><td>97%</td></tr><tr><td>Delray</td><td>92%</td></tr><tr><td>Jupiter</td><td>95%</td></tr><tr><td>Lake Worth</td><td>97%</td></tr><tr><td>Lantana</td><td>99%</td></tr><tr><td>Lewis Center</td><td>98%</td></tr></table>	<u>Quarter 2 Clinical QSV</u>		Belle Glade	97%	Delray	92%	Jupiter	95%	Lake Worth	97%	Lantana	99%	Lewis Center	98%			
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	Mangonia	96%				
	St.Anns	91%				
	W.Boca Raton	100%				
	West Palm Beach	96%				
	Quarter 2 Non-Clinical QSV					
	Belle Glade	98%				
	Delray	97%				
	Jupiter	97%				
	Lake Worth	98%				
	Lantana	97%				
	Lewis Center	95%				
	Mangonia	97%				
	St.Anns	96%				
	W.Boca Raton	97%				
	West Palm Beach	98%				
	DENTAL	<u>Dental Sealants</u> YTD 2023: 97% (502; n=520) September 2023: 100% (122; n= 122)				
<u>Limited Exams</u> September 2023: 368 -Same Day Extractions: 171 (46% n=368) -Antibiotics Given: Patients without a future extraction appointment type 110 (30% n=368) -Ext. not needed(non-emergent): 70 (19% n=368) -Returns (Follow-Up): Patients with a future extraction appointment type 17 (5% n=368) -Returned within 21 days for ext.: 12 (71% n=17)						



	<p><u>MDI/WHO</u></p> <p>September 2023</p> <p><u>Total Well Visit Pediatric Patients: 291</u></p> <ul style="list-style-type: none">- Excluded from MDI KPI 90 (31%; n=291)- Eligible MDI 201 (69%; n=291) <p><u>Total Pediatrician KPI Patients (Pts who do not have a dental home): 201</u></p> <ul style="list-style-type: none">- No MDI 115 (57% n=201)- MDI 86 (43% n=201) <p><u>Total of patients who had MDI visit: 86</u></p> <ul style="list-style-type: none">- Declined WHO 47 (55% n=86)- Interested in WHO 39 (45% n=86) <p><u>Total Dentist KPI Patients (Pts. Interested in WHO): 39</u></p> <ul style="list-style-type: none">- WHO not seen by Dentists 9 (21%; n=39)- WHO seen by Dentists 31 (79%; n=39)													
	<p>Dental Clinic Audit Summary</p> <table><tr><td><u>Dental Clinic Audit – September 2023</u></td><td></td></tr><tr><td>Belle Glade</td><td>99%</td></tr><tr><td>Delray</td><td>98%</td></tr><tr><td>Lantana</td><td>97%</td></tr><tr><td>West Palm Beach</td><td>97%</td></tr></table>	<u>Dental Clinic Audit – September 2023</u>		Belle Glade	99%	Delray	98%	Lantana	97%	West Palm Beach	97%			
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	PHQ9 August 2023 Total encounters with PHQ9: 8,685 13% positive rate, (n=1,183) Unique patients with positive PHQ9= 494/8% (Report with graph presented.)			
	Depression Remission August 2023 38% achieving depression remission (252 patients) We are exceeding our goal is 14% September 2023 40% achieving depression remission (272 patients) 2% increase from the previous month. We are exceeding our goal is 14% (Report with graph presented.)			
NURSING	<u>Higher Level of Care</u> Higher Level of Care August 2023 94 ER referrals/89 patients were sent to the ER in August. The breakdown of the referrals is: <ul style="list-style-type: none"> • WH- 13 (13%) • Peds- 16 (16%) 			



	<ul style="list-style-type: none"> • Adult- 60 (63%) (this combines urgent care and emergency medicine referrals) • Urgent Care/ER**- 6 (6%) • Life Trans to LMC- 2 (2%) • Adult Crisis- 3 (3%) • Peds Crisis-0 <p>** Propose to add Urgent Care/ER and Referral to Ambulatory Medicine to the AMB Referral to Ambulatory Medicine totals and not separate anylonger.</p> <p>There were 5 patients with multiple orders in August-</p> <ol style="list-style-type: none"> 1. Pediatric patient- referred for fall from car seat in clinic- not strapped in. Notes states neonatal jaundice going to ER but referral was under fall/injury of head. Sent next day back to ER for bilirubin to be tested. Not done during first visit to ER. Message sent to Nurse to follow up with parent. No visit in clinic after referral. May have private pediatrician 2. OB patient/high risk- 2 referrals dropped for same referral on same day, accidentally. F/U completed 3. Adult patient- referred for concern of acute spinal impingement. Pt was non compliant 			
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	<p>with first referral so sent again with a new referral at 1 week follow up visit. F/U completed</p> <p>4. Adult patient- referred for POC glucose >600 and hasn't taken meds in 1 week. Second referral was 8 days later during a nurse visit- hypotension, weakness, diaphoretic, 'worst HA of his life'. F/U completed</p> <p>PEDS REFERRALS- highest producer was Dr. Clarke- having 10 (%)</p> <p>The correct referral type was used for pediatric referrals this month.</p> <p>ADULT REFERRALS- highest producers this month were Dr. Castiglia in Boca with 7 (%); Lisa Fidler with 5 (%).</p> <p>The clinics with the most referrals are Belle Glade primary with 11 and Boca (as seen above by the top 2 referring providers in adult) with 12.</p>			
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Peer Review	<p><u>Dental Q2</u></p> <p>Dentist 35 charts were peer reviewed. 34 were evaluated as “within standard of care”, 1 were evaluated as “ Provider Self-identified Remediation” and 0 were evaluated as “Provider Education Required”, 0 were evaluated as “Inappropriate Care”</p> <p>Hygenist 30 charts were peer reviewed. 25 were evaluated as “within standard of care”, 5 were evaluated as “Provider Self-identified Remediation” and 0 were evaluated as “Provider Education Required”, 00 were evaluated as “Inappropriate Care”</p> <p><u>Behavrioal Health Q2</u></p> <p>Psych 10 charts were peer reviewed. 8 were evaluated as “within standard of care”, 0 were evaluated as , “ Provider Self-identified Remediation” and 2 “Provider Education Required”, 0 were evaluated as “Inappropriate Care” 0 were not categorized.</p> <p>SUD 10 charts were peer reviewed. 8 were evaluated as “within standard of care”, 0 were evaluated as , “ Provider Self-identified Remediation” and 2 “Provider Education Required”, 0 were evaluated as “Inappropriate Care” 0 were not categorized.</p>			
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QUALITY METRICS				
UDS YTD 2023				
Of the <u>16</u> UDS Measures: 9 Exceeded the HRSA Goal and 7 were short of the HRSA Goal (<i>Clinic Score/ HRSA Goal / Healthy People Goal</i>)				
Medical UDS Report	Adult Weight screening and follow-up: (_95_ % / 90%)			
	Breast Cancer Screening: (_57_ %/60%)			
	Cervical Cancer Screening: (_61_ %/65%)			
	Childhood immunization: (_43_ %/ 60%)			
	Colorectal Cancer Screening: (_42_ % / 82%)			
	Coronary Artery Disease CAD: (_84_ % / 81%)			
	Dental Sealants: (_97_ % / 75%)			
	Depression Remission: (_40_ % / 14%)			
	Diabetes: (_74_ % / 67%)			
	HIV Linkage to Care (100% / 100%)			
	HIV Screening: (_53_ % / 32%)			
	Hypertension: (_72_ % / 80%)			
	Ischemic Vascular Disease (IVD): (_77_ % / 86%)			
	Depression screening: (_94_ % / 83%)			
	Depression screening (Homeless): (_91_ % / 83%)			
	Tobacco use screening & cessation: (_95_ % / 93%)			
	Weight assessment, Children & Adolescent: (_89_ % /90%)			
Meeting Adjourned: 4:20pm				

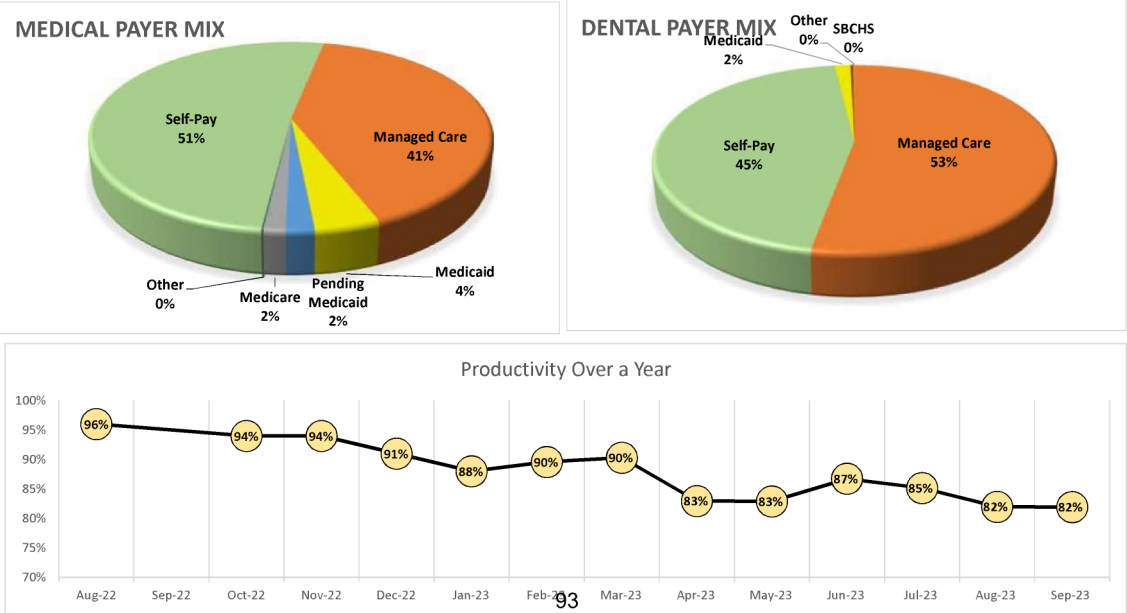
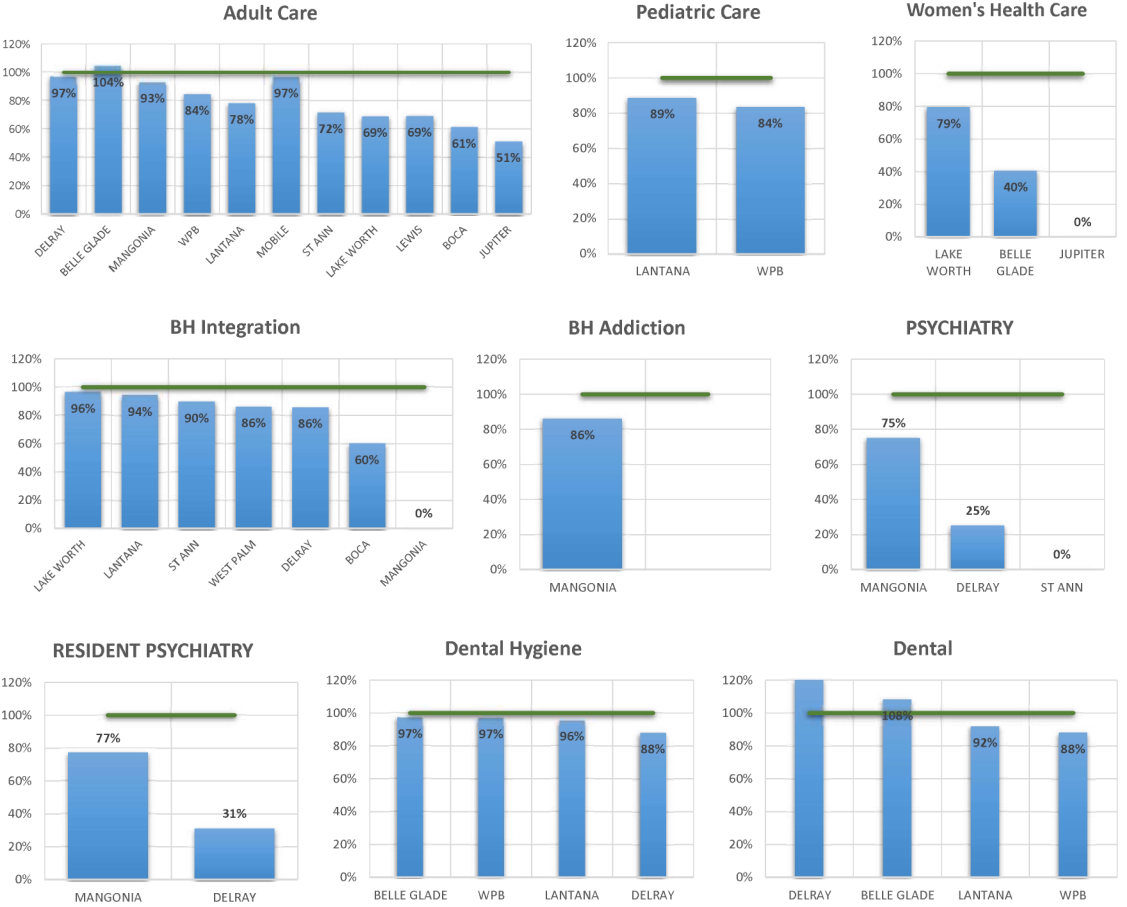
PRODUCTIVITY REPORT SEPTEMBER 2023						
ALL PROVIDERS						
AS 09/30/2023 Based on Completed Appointments						
ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	% Monthly Target Achieved		Daily Average
			Total	Total		
ALFONSO PUENTES, RAMIRO, MD	18	16.5	297	233	78%	14.1
CASTIGLIA, SARAH, MD	18	18.5	333	211	63%	11.4
DABU, DARNEL, MD	18 when no precepting	1.5	18	15	83%	10.0
DONNELL, MASON, PA	18	0.5	9	5	56%	10.0
DORCE-MEDARD, JENNIFER, MD	18	1.0	18	21	117%	21.0
FERNANDEZ SANCHEZ, MARCO, NP	20	19.5	390	395	101%	20.3
FIDLER, LISA, APRN	18	17.5	315	187	59%	10.7
FLOREZ, GLORIA MATILDE, MD	18	17.5	315	264	84%	15.1
JEAN-JACQUES, FERNIQUE, NP	18	18.0	324	254	78%	14.1
KOOPMAN, REBECCA SUE, PA	20	20.0	400	341	85%	17.1
LAM, MINH DAI, NP	18	20.0	360	372	103%	18.6
LANGLEY, TAMARA, NP	18	17.5	315	177	56%	10.1
LARA SUAREZ, MARIA, NP	18	20.0	360	189	53%	9.5
MILLIEN, ELEONORE, APRN	8	19.5	126	114	90%	5.8
NAVARRO, ELSY, NP	18	19.5	351	269	77%	13.8
NOUKELAK, GERMAINE, MD	18	20.0	360	376	104%	18.8
PEREZ, DANIEL JESUS, MD	18 when no precepting	4.0	31	29	94%	7.3
PHILISTIN, KETELY, NP	18	20.0	360	252	70%	12.6
PIERRE LOUIS, JOANN, NP	18	17.5	315	203	64%	11.6
TAHERI, NERGESS, DO	18 when no precepting	4.0	49	56	114%	14.0
TUCKER, CHELSEA, PA	18	10.5	189	136	72%	13.0
ST. VIL, CARLINE, NP	18	18.5	351	338	96%	18.3
STANEK, EWELENA, PA	18	17.0	306	219	72%	12.9
WARREN, SANDRA, MD	18	10.0	180	133	74%	13.3
WILMOT, ALTHEA, NP	18 / 6 Mobile, St Ann, Lewis	19.0	150	95	63%	5.0
ZHANG, MICHAEL, MD	18	19.5	351	167	48%	8.6
ADULT CARE TOTALS		387.0	6,573	5,051	77%	
RESIDENCY PROGRAM						
PGY-1	5	22.0	110	127	115%	5.8
PGY-2	11	27.5	303	281	93%	10.2
PGY-3	14	20.0	265	234	88%	11.7
RESIDENTS TOTAL		69.5	678	642	95%	
PEDIATRIC CARE						
CLARKE-AARON, NOELLA, MD	20	17.5	350	278	79%	15.9
DESSALINES, DUCLOS, MD	20	17.5	350	302	86%	17.3
HERNANDEZ GARCIA, JOSE, MD	20	19.5	160	160	100%	8.2
NORMILSMITH, SHERLOUNE, MD	20	17.5	350	295	84%	16.9
LAZARO RIVERA, NANCY, MD	20	19.5	390	358	92%	18.4
MARZOUCA, KISHA F., MD	20	18.5	370	316	85%	17.1
PEDIATRIC CARE TOTALS		110	1,970	1,709	87%	
WOMEN'S HEALTH CARE						
FERWERDA, ANA, MD	18 / 14 BG	10.0	168	121	72%	12.1
FINLEY, NICOLE, NP	18	19.0	342	283	83%	14.9
PROPHETE, JOYCE, MD	18 / 14 BG	15.0	258	174	67%	11.6
WOMEN'S HEALTH CARE TOTALS		44	768	578	75%	
BEHAVIORAL HEALTH INTEGRATION						
CALDERON, NYLSA, LMHC	10	11.5	115	103	90%	9.0
HIRSCH, KAREN, LCSW	6	16.0	96	86	90%	5.4
BROWN, JEREMY, LCSW	10	19.5	195	154	79%	7.9
JONES, KIARA, LCSW	10	16.5	155	150	97%	9.1
BH INTEGRATION TOTALS		63.5	561	493	88%	
BEHAVIORAL HEALTH PSYCHIATRY						
PETER, AMANDA, NP	12	18.5	222	128	58%	6.9
DEMNER, ADAM, MD	12	0.5	6	1	17%	2.0
BEATTIE, ASHLEY, MD	12	1.0	12	4	33%	4.0
BURROWS, SHARON, NP	12	18.5	222	138	62%	7.5
BEHAVIORAL HEALTH PSYCHIATRY		38.5	462	271	59%	
RESIDENT PSYCHIATRY						
BEAMAN, DAVID, MD	12	6.5	78	21	27%	3.2
DHALIWAL, AMAREEN, MD	12	6.5	78	56	72%	8.6
HOGUE, KRISTIAN, MD	12	8.0	96	29	30%	3.6
MAXWELL, CHRISTIAN, MD	12	5.0	60	50	83%	10.0
MENEFEE, STEPHEN, MD	12	7.0	84	68	81%	9.7
NGUYEN, ANH-VU, MD	12	6.0	72	24	33%	4.0
SANCHEZ, GRETEL, MD	12	7.0	84	28	33%	4.0
TORRES, MICHAEL, MD	12	4.5	54	39	72%	8.7
RESIDENTS PSYCHIATRY TOTAL		50.5	606.0	315.0	52%	
BEHAVIORAL HEALTH ADDICTION						
MILETA, SNIEZANA, LMHC	10	18.5	185	172	93%	9.3
SILVER, DAWN, PhD	10	19.5	195	151	77%	7.7
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW	10	18.5	185	145	78%	7.8
MITCHELL, ANGELA DENISE, LCSW	10	12.0	120	125	104%	10.4
REXACH, CLAUDIA, LMHC	10	17.5	175	146	83%	8.3
BH ADDICTION TOTALS		86	860	739	86%	
DENTAL						
ABREU, MARIANA, DDS	16	18.5	296	284	96%	15.4
ADAMETZ, JOSHUA, DMD	New Provider	7.5	116	100	86%	13.3
ALWEHAIB, ARWA, DDS	16	17.5	280	342	122%	19.5
BOWEN, BEVERLY, DMD	16	14.5	232	200	86%	13.8
SEMINARIO, ADA, DDS	16	17.0	248	235	95%	13.8
SOFIANOS, MICHAEL, DMD	16	18.5	296	325	110%	17.6
WILLIAMS, RICHARD, DMD	16	18.5	296	245	83%	13.2
ZANGENEH, YASMINE, DMD	16	17.5	280	243	87%	13.9
DENTAL TOTALS		129.5	2,044	1,974	97%	
DENTAL HYGIENE						
MOZER NASCIMENTO, ARIANNE MILENA	8	15.0	120	123	103%	8.2
HARDCASTLE, CORINA	8	15.5	124	112	90%	7.2
FEOLA, LEYDA	8	12.5	108	105	97%	8.4
GARCIA, IRENE S.	8	2.0	16	14	88%	7.0
KUSHIK, DENISE	8	3.0	24	28	117%	9.3
MASON, SHERRY	8	13.5	108	88	81%	6.5
DUCHARME, RHONDA	8 / 16 MDI	16.5	228	206	90%	12.5
PETERSEN, PATRICE	8 / 16 MDI	16.5	240	245	102%	14.8
DENTAL HYGIENE TOTALS		94.5	968	921	95%	
92						
GRAND TOTAL		1073.0	15,490	12,693	82%	





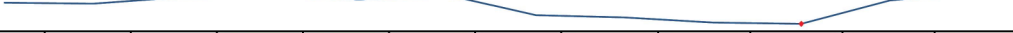



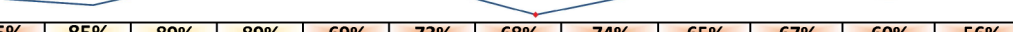

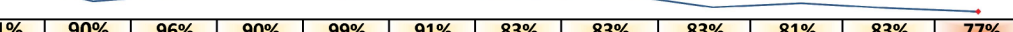

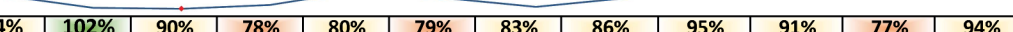



PRODUCTIVITY REPORT SEPTEMBER 2023

ALL CLINICS

AS 09/30/2023 Based on Completed Appointments



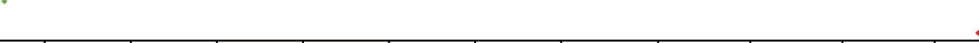
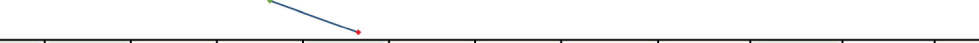




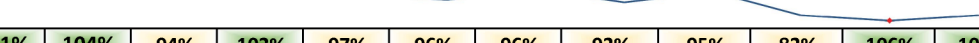
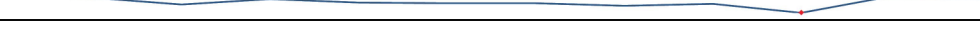
Category	Target for the Month			Total for the Month Seen			% Monthly Target Achieved
	AM	PM	Total	AM	PM	Total	
AS 09/30/2023							
ADULT CARE	3,448	3,125	6,573	3,105	1,946	5,051	77%
PEDIATRIC CARE	1,019	951	1,970	1,069	640	1,709	87%
WOMEN'S HEALTH CARE	411	357	768	390	188	578	75%
BH INTEGRATION	293	268	561	265	228	493	88%
BH ADDICTION	440	420	860	479	260	739	86%
DENTAL HEALTH	1,069	975	2,044	1,355	619	1,974	97%
DENTAL HYGIENE	496	472	968	435	486	921	95%
BH PSYCHIATRY	234	228	462	156	115	271	59%
RESIDENCY PSYCHIATRY	312	294	606	207	108	315	52%
RESIDENCY PROGRAM	375	303	678	395	247	642	95%
Grand Total	8,097	7,393	15,490	7,856	4,837	12,693	82%



ADULT CARE	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
ALFONSO PUENTES, RAMIRO, MD	82%	88%	88%	85%	102%	85%	87%	85%	89%	84%	83%	78%
	288/352	249/283	212/240	225/264	90/88	261/308	321/369	300/351	265/297	303/360	344/414	233/297
												
CASTIGLIA, SARAH, MD	45%	60%	50%	46%	47%	65%	61%			54%	49%	63%
	115/255	165/274	164/330	144/316	153/325	226/350	203/333			184/342	196/396	211/333
												
DABU, DARNEL, MD	64%	100%	92%	80%	71%	94%	83%	87%	100%	88%	100%	83%
	130/204	62/62	41/45	29/36	21/29	30/32	33/40	21/24	10/10	35/40	29/29	15/18
												
DONNELL, MASON, PA	100%	100%	100%	79%	86%	59%	57%	68%	70%	74%	67%	56%
	19/19	109/109	132/132	233/294	241/279	146/249	200/293	262/323	223/274	225/256	216/324	5/9
												
DORCE-MEDARD, JENNIFER, MD	120%				78%	94%	75%	67%	92%	74%	74%	74%
	12/10				7/9	17/18	18/24	6/9	24/26	225/306	225/306	225/306
												
FERNANDEZ SANCHEZ, MARCO, NP	91%	90%	96%	100%	94%	98%	79%	77%	72%	71%	93%	101%
	296/325	150/135	282/294	143/143	241/257	229/234	286/360	347/450	286/400	270/380	448/480	395/390
												
FIDLER, LISA, APRN				100%	100%	69%	50%	64%	74%	47%	44%	59%
				15/15	135/135	214/309	168/278	229/300	265/300	141/248	187/423	187/315
												
FLOREZ, GLORIA MATILDE, MD	86%	66%	82%	86%	87%	86%	79%	89%	110%	88%	89%	84%
	264/306	189/124	167/204	265/308	252/289	310/359	262/333	321/360	407/369	260/297	232/261	264/315
												
JEAN-JACQUES, FERNIQUE, NP	98%	95%	97%	95%	95%	90%	85%	86%	98%	117%	117%	117%
	319/325	135/150	234/242	286/302	244/257	314/349	237/234	332/323	291/248	332/316	291/248	291/248
												
KOOPMAN, REBECCA SUE, PA	108%	130%	98%	123%	103%	108%	80%	83%	88%	83%	81%	85%
	261/242	348/267	238/242	391/318	296/287	375/347	271/340	371/440	388/440	299/360	350/430	341/400
												
LAM, MINH DAI, NP	100%	97%	107%	108%	107%	104%	92%	101%	108%	102%	101%	103%
	325/326	243/250	307/288	154/143	267/250	260/250	348/317	283/233	302/233	295/241	328/324	372/360
												
LANGLEY, TAMARA, NP	75%	85%	89%	89%	69%	73%	68%	74%	65%	67%	60%	56%
	207/275	206/242	276/309	236/264	151/219	247/339	177/218	239/270	245/315	210/263	199/333	177/315
												
LARA SUAREZ, MARIA, NP	98%	68%	78%	88%	75%	75%	72%	77%	59%	65%	58%	53%
	141/144	163/240	242/189	189/166	215/287	250/332	246/286	202/218	214/300	239/308	142/243	189/360
												
NAVARRO, ELSY, NP	91%	90%	96%	90%	99%	91%	83%	83%	83%	81%	83%	77%
	275/302	219/242	240/251	204/227	263/266	304/335	270/271	305/308	210/211	270/278	194/234	269/351
												
NOUKELAK, GERMAINE, MD	87%	74%	73%	77%	92%	84%	75%	84%	107%	104%	105%	104%
	280/320	198/266	126/172	252/325	306/334	311/368	278/369	342/405	375/351	328/315	311/297	376/360
												
PEREZ, DANIEL JESUS, MD	94%	102%	90%	78%	80%	79%	83%	86%	95%	91%	77%	94%
	119/126	42/41	33/37	34/43	26/33	34/43	45/54	50/58	42/44	31/34	23/30	29/31
												
PHILISTIN, KETELY, NP	81%	85%	90%	85%	77%	84%	70%	73%	72%	76%	75%	70%
	208/256	283/333	218/243	276/325	232/302	254/302	260/309	294/338	278/323	172/188	291/387	252/360
												
PIERRE LOUIS, JOANN, NP	83%	88%	83%	83%	91%	90%	72%	75%	74%	79%	73%	64%
	246/295	187/212	236/196	272/225	200/219	271/302	214/249	276/308	259/293	213/226	250/342	203/315
												

ADULT CARE		Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
ST. VIL, CARLINE, NP		88%	79%	79%	82%	85%	82%	71%	78%	91%	75%	78%	96%
		219/249	167/212	186/234	190/233	187/219	247/302	211/248	253/270	221/204	217/240	183/234	338/351
STANEK, EWELINA, PA		90%	68%	76%	80%	72%	75%	65%	70%	70%	72%	76%	72%
		186/208	171/250	240/317	230/287	120/167	181/240	176/226	269/323	260/308	267/308	299/396	219/306
TAHERI, NERGESS, DO		94%	100%	100%	100%	97%	100%	96%	100%	100%	92%	95%	114%
		65/69	33/33	50/50	31/31	33/34	32/32	53/55	50/50	50/50	34/37	61/64	56/49
WARREN, SANDRA, MD		83%	75%	75%	72%	78%	82%	71%	70%	80%	84%	75%	74%
		50/60	129/172	148/197	100/138	147/189	190/232	140/198	133/189	166/207	196/234	168/225	133/180
WILMOT, ALTHEA, NP		82%	29%	35%	49%	56%	39%	71%	69%	79%	81%	86%	63%
		132/161	66/231	68/192	75/154	125/222	107/273	77/108	149/195	85/99	107/126	176/204	95/150
RESIDENTS		85%	92%	80%	82%	96%	83%	67%	68%	82%	82%	89%	95%
		570/673	519/563	573/718	665/811	658/687	692/833	508/759	650/951	630/773	612/746	681/761	642/678
PEDIATRIC CARE		Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
CLARKE-AARON, NOELLA, MD		104%	111%	100%	107%	101%	109%	87%	81%	82%	88%	78%	79%
		348/333	275/247	264/265	290/272	303/299	382/350	322/370	244/300	345/420	229/260	328/420	278/350
CHIBAR, CHARMAINE, MD			100%						53%	100%			
			5/5						16/30	10/10			
DESSALINES, DUCLOS, MD		112%	112%	110%	104%	110%	117%	92%	97%	104%	95%	90%	86%
		355/316	212/189	235/214	276/265	291/265	311/265	249/270	348/360	354/340	267/280	358/400	302/350
LAZARO RIVERA, NANCY, MD		129%	129%	127%	113%	109%	128%	104%	106%	105%	106%	100%	92%
		421/326	310/241	316/248	308/272	309/282	339/265	323/310	444/420	377/360	255/240	380/380	358/390
MARZOUCA, KISHA F., MD		108%	109%	106%	116%	105%	109%	91%	83%	82%	88%	79%	85%
		354/326	284/261	372/350	346/299	333/316	419/384	353/390	348/420	212/260	193/220	365/460	316/370
NORMIL-SMITH, SHERLOUNE, MD		115%	116%	118%	110%	104%	122%	98%	99%	101%	100%	88%	84%
		336/293	279/240	233/197	310/282	311/299	353/289	372/380	357/360	182/180	341/340	370/420	295/350
WOMEN'S HEALTH CARE		Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
FERWERDA, ANA, MD		70%	62%	83%	82%	67%	89%	78%	53%			62%	72%
		117/166	60/97	106/128	136/166	107/159	214/239	151/193	19/36			110/177	121/168
FINLEY, NICOLE, NP		72%	86%	80%	88%	94%	95%	76%	81%	87%	85%	78%	83%
		89/123	207/240	210/264	246/279	257/273	193/204	239/263	278/285	329/315	292/285	296/378	283/342
PROPHETE, JOYCE, MD		69%	80%	70%	70%	76%	82%	71%	72%	75%	81%	67%	67%
		194/282	218/272	233/334	224/321	180/235	240/294	244/342	285/396	249/330	223/275	229/344	174/258

BEHAVIORAL HEALTH INTEGRATION	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
CALDERON, NYLSA, LMHC	93%	87%	93%	95%	103%	100%	96%	91%	84%	88%	86%	90%
	80/86	131/150	191/206	158/166	140/136	205/206	159/165	127/140	160/190	159/180	190/220	103/115
JONES, KIARA, LCSW	101%	96%	104%	111%	112%	111%	105%	104%	100%	98%	101%	97%
	174/172	137/142	172/166	187/169	182/162	228/206	184/175	197/190	200/200	192/195	167/165	150/155
SILVER, DAWN, PhD							100%	92%	79%	95%	95%	77%
							87/87	202/220	166/210	124/130	180/190	151/195
BROWN, JEREMY, LCSW				100%	103%	94%	92%	93%	87%	97%	92%	79%
				40/40	170/165	213/226	180/195	204/220	179/205	175/180	202/220	154/195
BURROWES, SHARON, NP		100%	54%	46%	51%	58%	58%	56%	61%	69%	68%	62%
		12/12	73/136	89/192	114/223	158/271	104/180	148/264	142/234	150/216	146/216	138/222
HIRSCH, KAREN, LCSW	100%	92%	67%	92%	107%	101%	104%	102%	97%	91%	92%	90%
	12/12	48/52	44/66	44/48	58/54	98/97	109/105	86/84	116/120	87/96	94/102	86/96
MILETA, SNJEZANA, LMHC	124%	112%	179%	128%	117%	115%	139%	95%		130%	81%	93%
	174/140	181/162	226/126	246/192	211/180	253/220	195/140	95/100		104/80	114/140	172/185
MITCHELL, ANGELA DENISE, LCSW	114%	154%	120%	106%	117%	119%	96%	87%	93%	109%	75%	104%
	208/182	205/133	235/196	190/180	202/172	204/172	89/93	182/210	186/200	163/150	142/190	125/120
PETER, AMANDA, NP	100%	99%	68%	64%	50%	73%	76%	72%	70%	42%	43%	58%
	19/19	93/94	105/154	151/235	105/211	171/235	179/234	172/240	163/234	86/204	107/246	128/222
REXACH, CLAUDIA, LMHC	120%	173%	134%	139%	123%	110%	122%	104%	123%	99%	90%	83%
	196/236	232/134	222/166	223/160	199/162	232/210	237/195	207/200	221/180	158/160	208/230	146/175
DENTAL	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
ABREU, MARIANA, DDS	100%	106%	107%	71%	75%	80%	91%	98%	101%	105%	87%	96%
	28/28	189/178	226/211	233/330	205/274	303/379	285/312	313/320	355/352	377/360	195/224	284/296
ALWEHAIB, ARWA, DDS	106%	115%	107%	86%	115%	119%	114%	118%	114%	121%	126%	122%
	279/264	224/194	273/254	270/314	334/290	430/362	373/328	395/336	310/273	348/288	468/371	342/280
BOWEN, BEVERLY, DMD	94%	120%	114%	81%	81%	77%	86%	83%	96%	92%	96%	86%
	316/338	233/194	241/211	253/314	240/298	243/314	261/304	264/320	262/272	266/288	339/352	200/232
SEMINARIO, ADA, DDS	94%	101%	95%	84%	98%	104%	87%	91%	94%	95%	98%	95%
	215/228	99/98	223/235	262/314	277/282	259/250	180/208	276/304	286/304	228/240	88/90	235/248
SOFIANOS, MICHAEL, DMD	94%	123%	111%	91%	97%	88%	113%	96%	104%	101%	104%	110%
	243/258	246/200	247/274	275/251	296/306	247/282	343/304	293/304	309/296	308/304	359/344	325/296
WILLIAMS, RICHARD, DMD	100%	102%	88%	84%	84%	94%	83%	91%	85%	89%	84%	83%
	257/257	159/156	208/235	269/322	249/298	265/282	233/280	262/288	285/336	272/304	309/368	245/296

DENTAL	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
ZANGENEH, YASMINE	99%	103%	102%			91%	95%	83%	92%	91%	94%	87%
	250/252	126/122	86/84			219/240	281/296	238/288	294/320	219/240	317/336	243/280
												
ZANGENEH, YASMINE, DMD	99%	103%	102%			91%	95%	83%	92%	91%	94%	87%
	250/252	126/122	86/84			219/240	281/296	238/288	294/320	219/240	317/336	243/280
												
GARCIA, IRENE S.	92%											88%
	11/12											14/16
												
GONZALEZ, NANCY				75%	54%							
				6/8	13/24							
												
HARDCASTLE, CORINA	101%	101%	98%	96%	102%	91%	93%	95%	96%	102%		90%
	159/157	130/129	138/141	143/149	127/125	150/165	138/148	144/152	107/112	122/120		112/124
												
MASON, SHERRY	93%	94%	91%		97%	95%	90%	88%	92%	89%	83%	81%
	153/165	91/97	139/152		137/141	165/173	119/132	147/168	140/152	143/160	133/160	88/108
												
MOZER NASCIMENTO, ARIANNE	105%	102%	89%	96%	95%	106%	106%	96%	109%	98%	95%	103%
	165/173	123/121	147/165	151/157	142/149	191/181	165/156	138/144	165/152	141/144	168/176	123/120
												
FEOLA, LEYDA						92%	99%	92%	99%	91%	96%	97%
						159/173	154/156	154/168	158/160	146/160	176/184	105/108
												
DUCHARME, RHONDA				99%	98%	96%	100%	95%	99%	90%	88%	90%
				237/240	293/298	256/266	264/264	311/328	316/320	218/241	275/312	206/228
												
PETERSEN, PATRICE	121%	104%	94%	102%	97%	96%	96%	92%	95%	82%	106%	102%
	297/246	231/222	309/330	286/281	210/218	309/322	299/312	202/220	230/242	183/224	136/128	245/240
												

SATURDAY**PRODUCTIVITY REPORT SEPTEMBER 2023**

AS 09/30/2023 Based on Completed Appointments

<51%

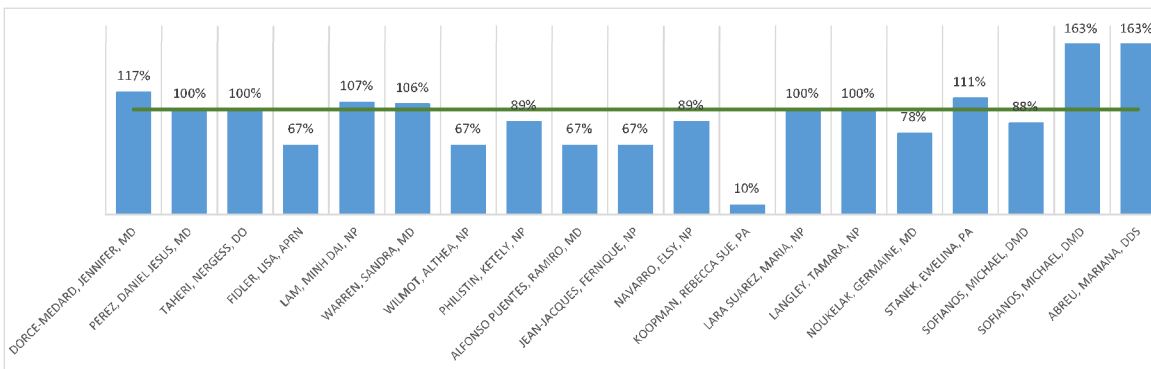
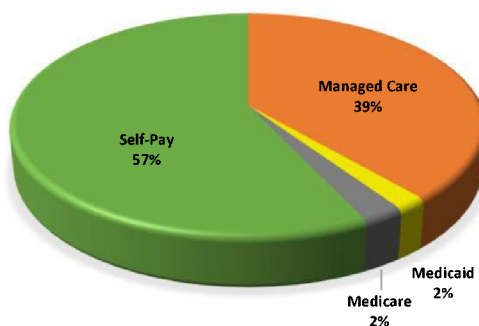
>=51% and < 80%

>= 80% and <100%

>= 100%

ADULT CARE						
Provider	Daily Target	# Saturdays Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
BELLE GLADE						
DORCE-MEDARD, JENNIFER, MD	18	2	18	21	117%	10.5
PEREZ, DANIEL JESUS, MD	18	1	9	9	100%	9.0
TAHERI, NERGESS, DO	18	1	1	1	100%	1.0
DELRAY						
FIDLER, LISA, APRN	18	1	9	6	67%	6.0
LAM, MINH DAI, NP	18	3	27	29	107%	9.7
LAKE WORTH						
WARREN, SANDRA, MD	18	2	18	19	106%	9.5
WILMOT, ALTHEA, NP	18	1	9	6	67%	6.0
PHILISTIN, KETELY, NP	18	1	9	8	89%	8.0
LANTANA						
ALFONSO PUENTES, RAMIRO, MD	18	2	18	12	67%	6.0
JEAN-JACQUES, FERNIQUE, NP	18	1	9	6	67%	6.0
NAVARRO, ELSY, NP	18	1	9	8	89%	8.0
MANGONIA PRIMARY						
KOOPMAN, REBECCA SUE, PA	20	1	10	1	10%	1.0
WEST PALM BEACH						
LARA SUAREZ, MARIA, NP	18	1	9	9	100%	9.0
LANGLEY, TAMARA, NP	18	1	9	9	100%	9.0
NOUKELAK, GERMAINE, MD	18	1	9	7	78%	7.0
STANEK, EWELINA, PA	18	1	9	10	111%	10.0
ADULT CARE TOTALS			182	161	88%	

BELLE GLADE DENTAL						
SOFIANOS, MICHAEL, DMD	16	1	8	7	88%	7.0
LANTANA DENTAL						
SOFIANOS, MICHAEL, DMD	16	1	8	13	163%	13.0
WEST PALM BEACH DENTAL						
ABREU, MARIANA, DDS	16	2	16	26	163%	13.0
DENTAL TOTALS			32	46	144%	
GRAND TOTAL						
			214	207	97%	

**MEDICAL PAYER MIX****DENTAL**

BELLE GLADE**PRODUCTIVITY REPORT SEPTEMBER 2023**

AS 09/30/2023 Based on Completed Appointments

<51%

>=51% and < 80%

>= 80% and <100%

>= 100%

ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
TAHERI, NERGESS, DO	18 when no precepting	4.0	49	56	114%	14.0
DABU, DARNEL, MD	18 when no precepting	1.5	18	15	83%	10.0
PEREZ, DANIEL JESUS, MD	18 when no precepting	4.0	31	29	94%	7.3
DORCE-MEDARD, JENNIFER, MD	18	1.0	18	21	117%	21.0
ADULT CARE TOTALS		10.5	116	121	104%	

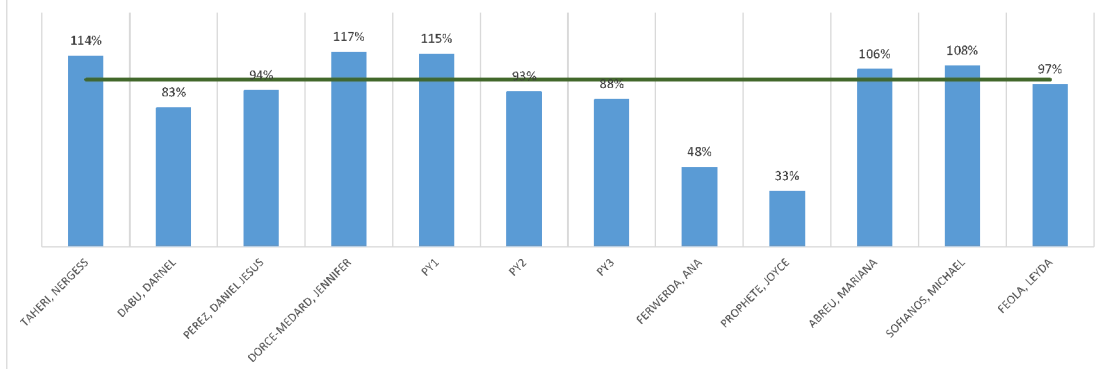
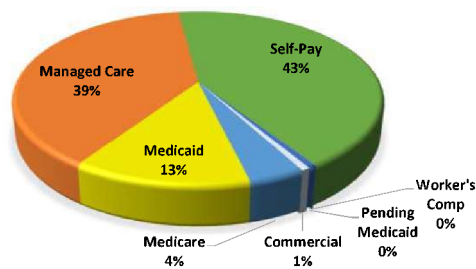
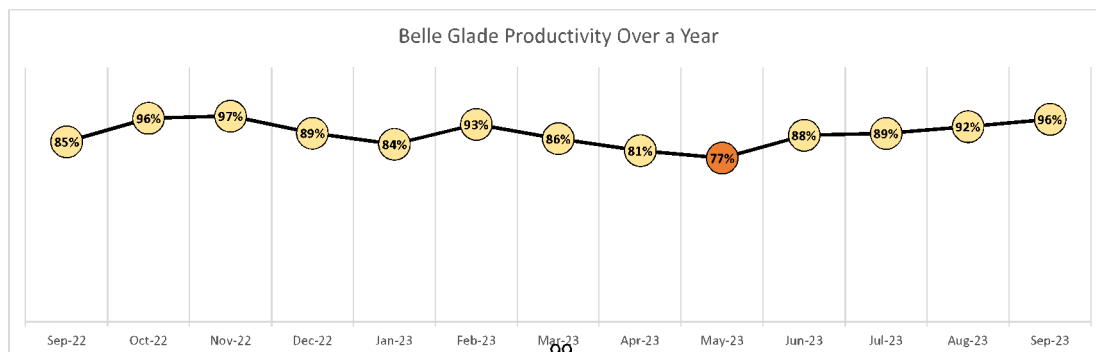
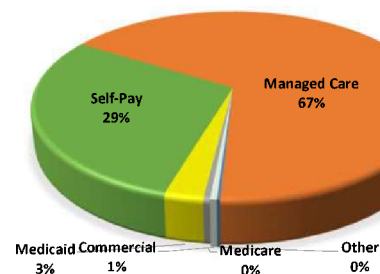
RESIDENCY PROGRAM						
PGY-1	6	22	110	127	115%	5.8
PGY-2	10	27.5	303	281	93%	10.2
PGY-3	14	20.0	265	234	88%	11.7
RESIDENTS TOTALS		69.5	678	642	95%	

WOMEN'S HEALTH CARE						
FERWERDA, ANA, MD	14	3	42	20	48%	6.7
PROPHETE, JOYCE, MD	14	3	42	14	33%	4.7
WOMEN'S HEALTH CARE TOTALS		6.0	84	34	40%	

DENTAL						
ABREU, MARIANA, DDS	16	2.0	32	34	106%	17.0
SOFIANOS, MICHAEL, DMD	16	18.0	288	312	108%	17.3
DENTAL TOTALS		20.0	320	346	108%	

DENTAL HYGIENE						
FEOLA, LEYDA	8	12.5	108	105	97%	8.4
DENTAL HYGIENE TOTALS		12.5	108	105	97%	

GRAND TOTAL		118.5	1,306	1,248	96%	
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**MEDICAL PAYER MIX****DENTAL PAYER MIX**

BOCA**PRODUCTIVITY REPORT SEPTEMBER 2023**

AS 09/30/2023 Based on Completed Appointments

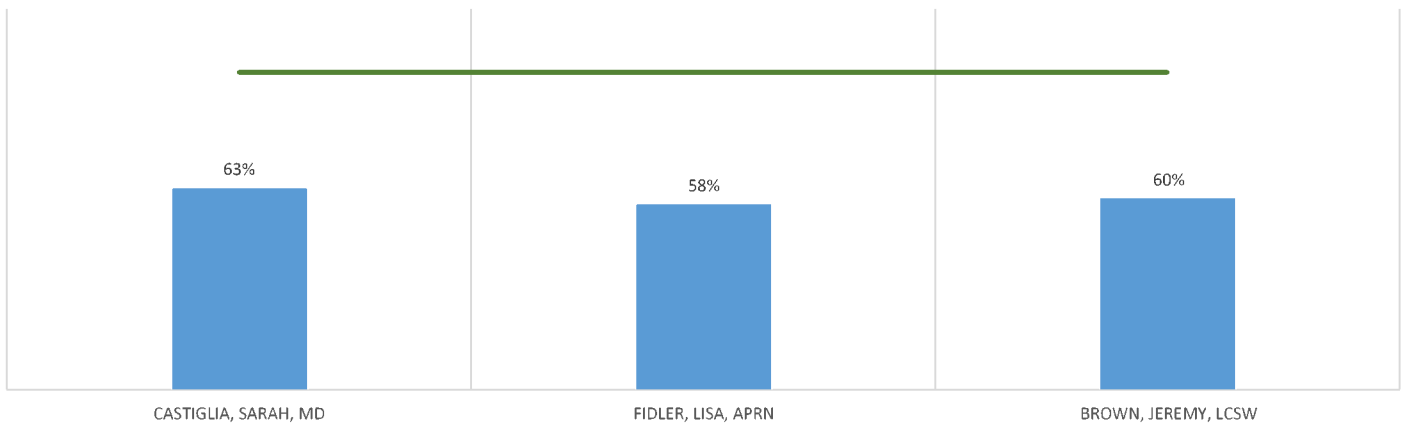
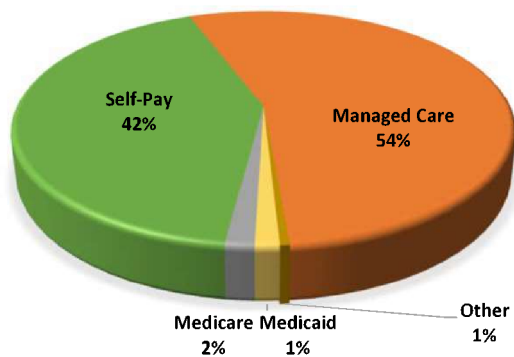
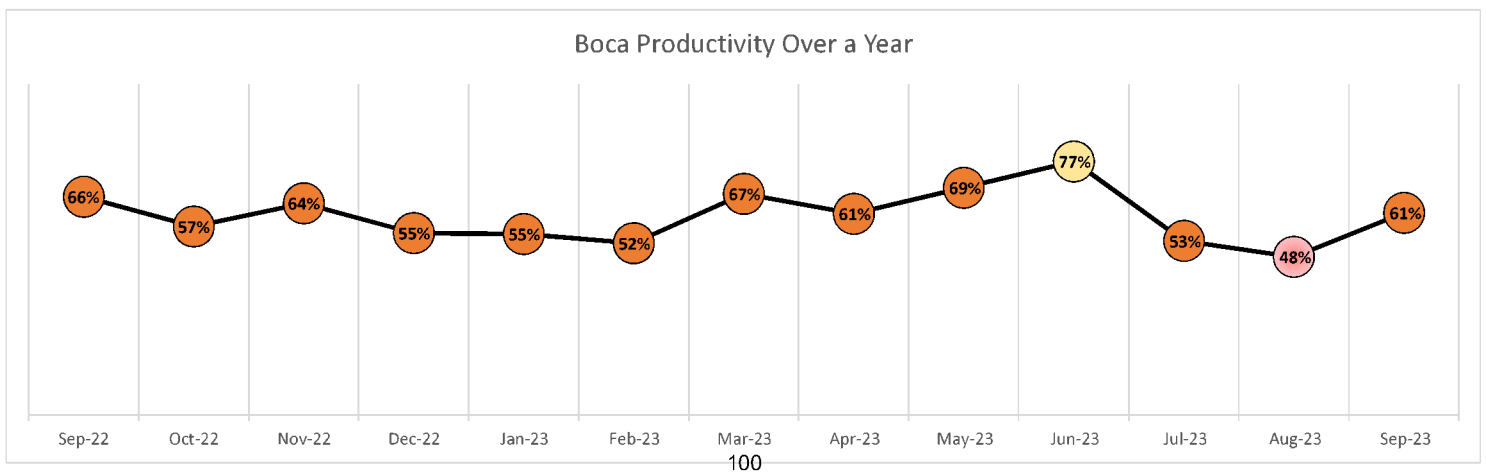
ADULT CARE

Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
CASTIGLIA, SARAH, MD	18	18.5	333	211	63%	11.4
FIDLER, LISA, APRN	18	13.0	234	136	58%	10.5
ADULT CARE TOTALS		31.5	567	347	61%	

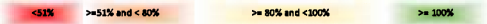
BEHAVIORAL HEALTH INTEGRATION

BROWN, JEREMY, LCSW	10	5.0	50	30	60%	6.0
BH INTEGRATION TOTALS		5.0	50	30	60%	

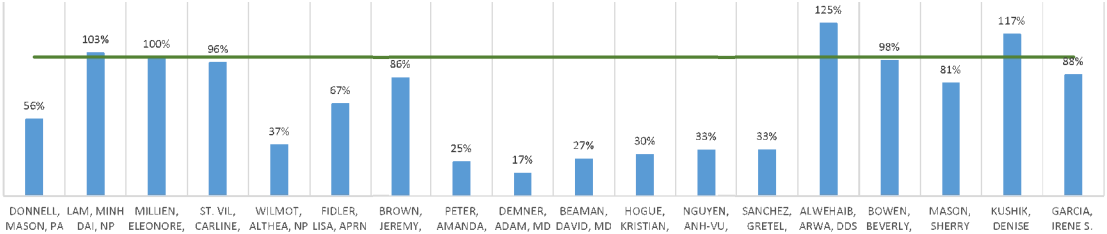
GRAND TOTAL		36.5	617	377	61%	
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**MEDICAL PAYER MIX****Boca Productivity Over a Year**

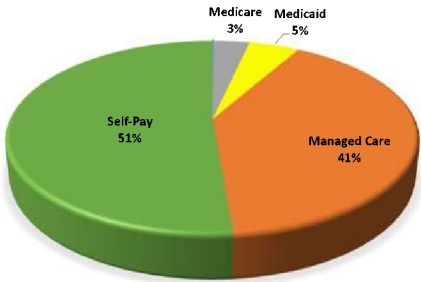
DELRAY
PRODUCTIVITY REPORT SEPTEMBER 2023
AS 09/30/2023 Based on Completed Appointments



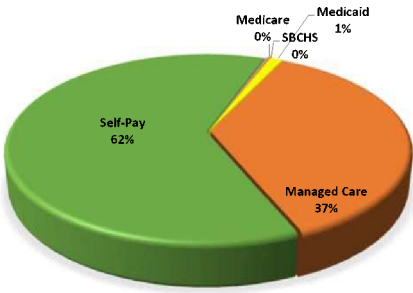
ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
DONNELL, MASON, PA	18	0.5	9	5	56%	10.0
LAM, MINH DAI, NP	18	20.0	360	372	103%	18.6
MILLIEN, ELEONORE, APRN	8	1.0	8	8	100%	8.0
ST. VIL, CARLINE, NP	18	18.5	351	338	96%	18.3
WILMOT, ALTHEA, NP	18	1.5	27	10	37%	6.7
FIDLER, LISA, APRN	18	0.5	9	6	67%	12.0
ADULT CARE TOTALS		42	764	739	97%	
BEHAVIORAL HEALTH INTEGRATION						
BROWN, JEREMY, LCSW	10	14.5	145	124	86%	8.6
BH INTEGRATION TOTALS		14.5	145	124	86%	
BEHAVIORAL HEALTH PSYCHIATRY						
PETER, AMANDA, NP	12	12.5	145	36	25%	2.9
DEMNER, ADAM, MD	12	0.5	6	1	17%	2.0
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		13.0	151	37	25%	
RESIDENT PSYCHIATRY						
BEAMAN, DAVID, MD	12	6.5	78	21	27%	3.2
HOGUE, KRISTIAN, MD	12	8.0	96	29	30%	3.6
NGUYEN, ANH-VU, MD	12	6.0	72	24	33%	4.0
SANCHEZ, GRETEL, MD	12	7.0	84	28	33%	4.0
RESIDENT PSYCHIATRY TOTAL		27.5	330	102	31%	
DENTAL						
ALWEHAIB, ARWA, DDS	16	16.5	264	329	125%	19.9
BOWEN, BEVERLY, DMD	16	3	48	47	98%	15.7
DENTAL TOTALS		19.5	312	376	121%	
DENTAL HYGIENE						
MASON, SHERRY	8	13.5	108	88	81%	6.5
KUSHIK, DENISE	8	3	24	28	117%	9.3
GARCIA, IRENE S.	8	2	16	14	88%	7.0
DENTAL HYGIENE TOTALS		18.5	148	130	88%	
GRAND TOTAL		135	1850	1508	82%	



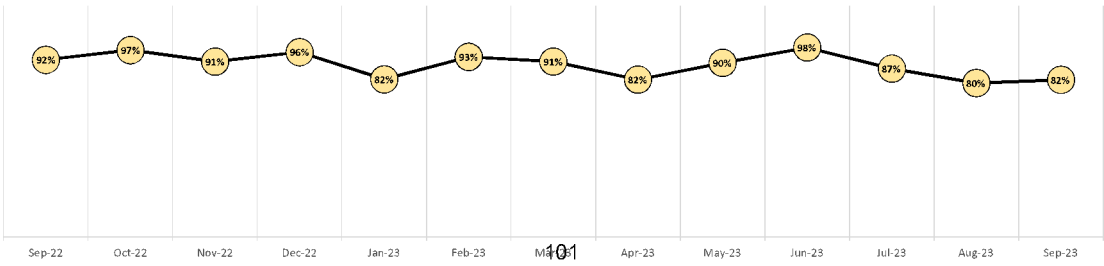
MEDICAL PAYER MIX



DENTAL PAYER MIX



Delray Productivity Over a Year

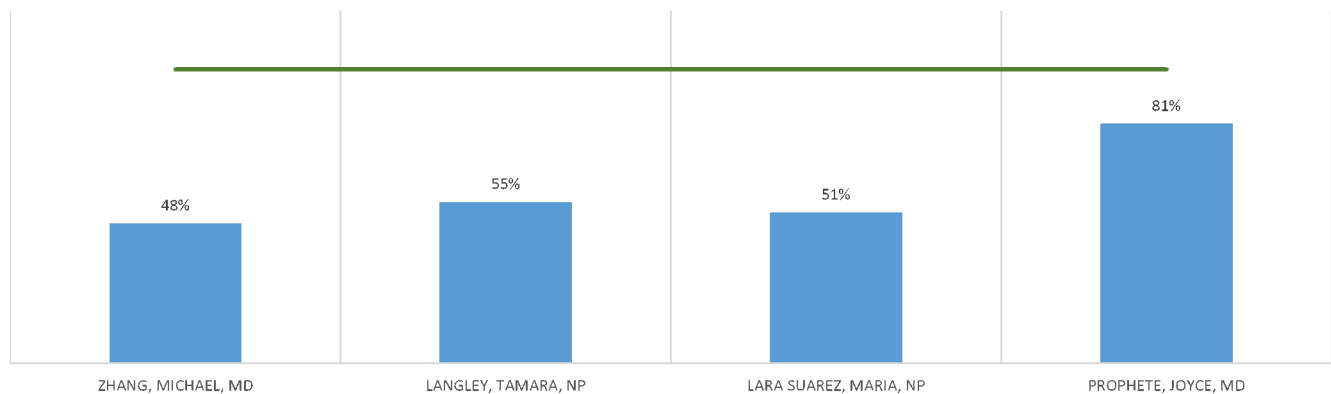
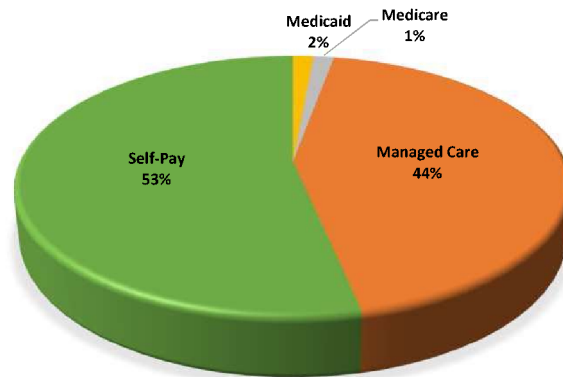
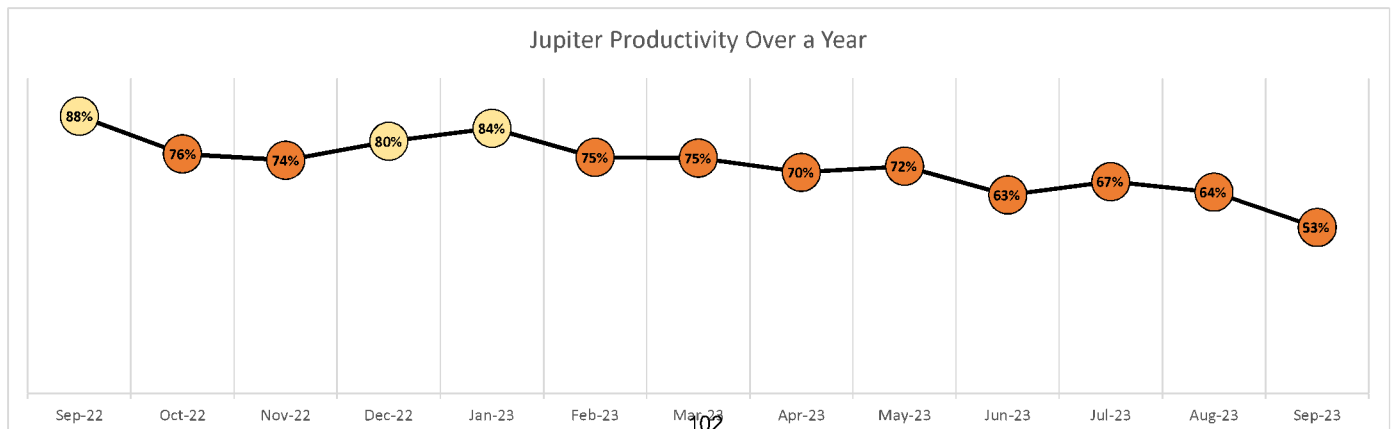


JUPITER**PRODUCTIVITY REPORT SEPTEMBER 2023**

AS 09/30/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ZHANG, MICHAEL, MD	18	19.5	351	167	48%	8.6
LANGLEY, TAMARA, NP	18	17.0	306	168	55%	9.9
LARA SUAREZ, MARIA, NP	18	19.5	351	180	51%	9.2
ADULT CARE TOTALS		56	1,008	515	51%	
WOMENS HEALTH CARE						
PROPHETE, JOYCE, MD	18	3.0	54	44	81%	14.7
WOMENS HEALTH CARE TOTALS		3	54	44		
GRAND TOTAL		59	1,062	559	53%	

**MEDICAL PAYER MIX****Jupiter Productivity Over a Year**

LAKE WORTH**PRODUCTIVITY REPORT SEPTEMBER 2023**

AS 09/30/2023 Based on Completed Appointments

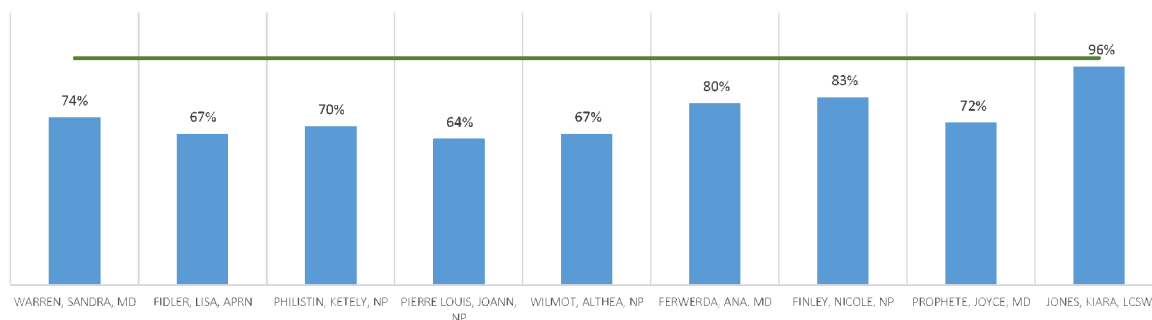
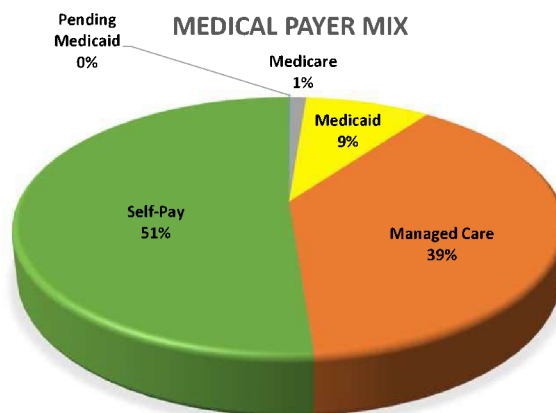
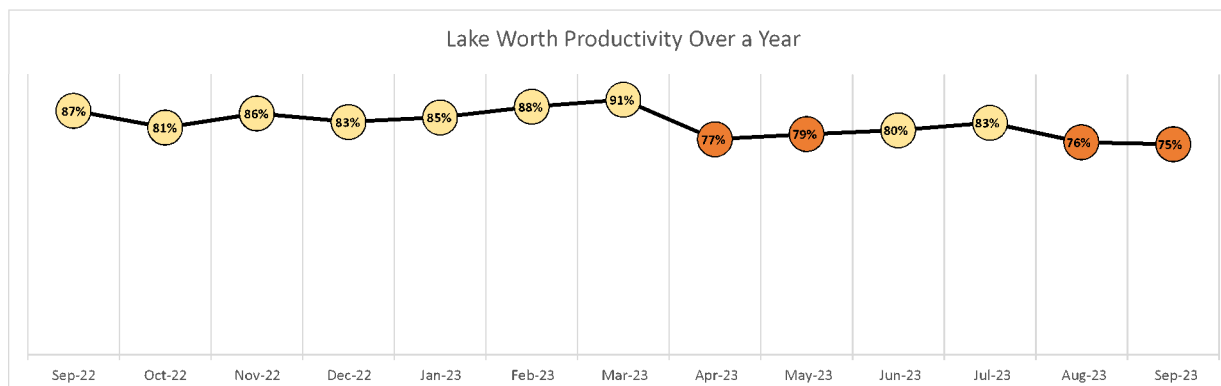
<51% >=51% and < 80% >= 80% and <100% >= 100%

ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
WARREN, SANDRA, MD	18	10.0	180	133	74%	13.3
FIDLER, LISA, APRN	18	1.0	18	12	67%	12.0
PHILISTIN, KETELY, NP	18	20.0	360	252	70%	12.6
PIERRE LOUIS, JOANN, NP	18	17.5	315	203	64%	11.6
WILMOT, ALTHEA, NP	18	0.5	9	6	67%	12.0
ADULT CARE TOTALS		49.0	882	606	69%	

WOMEN'S HEALTH CARE						
FERWERDA, ANA, MD	18	7	126	101	80%	14.4
FINLEY, NICOLE, NP	18	19	342	283	83%	14.9
PROPHETE, JOYCE, MD	18	9	162	116	72%	12.9
WOMEN'S HEALTH CARE TOTALS		35	630	500	79%	

BEHAVIORAL HEALTH INTEGRATION						
JONES, KIARA, LCSW	10	14.5	135	130	96%	9.0
BH INTEGRATION TOTALS		14.5	135	130	96%	

GRAND TOTAL	98.5	1,647	1,236	75%	
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**MEDICAL PAYER MIX****Lake Worth Productivity Over a Year**

LANTANA

PRODUCTIVITY REPORT SEPTEMBER 2023

AS 09/30/2023 Based on Completed Appointments

<51%

>=51% and < 80%

>= 80% and <100%

>= 100%

ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ALFONSO PUENTES, RAMIRO, MD	18	16.5	297	233	78%	14.1
JEAN-JACQUES, FERNIQUE, NP	18	18.0	324	254	78%	14.1
FIDLER, LISA, APRN	18	2.0	36	27	75%	13.5
NAVARRO, ELSY, NP	18	19.5	351	269	77%	13.8
ADULT CARE TOTALS		56.0	1,008	783	78%	

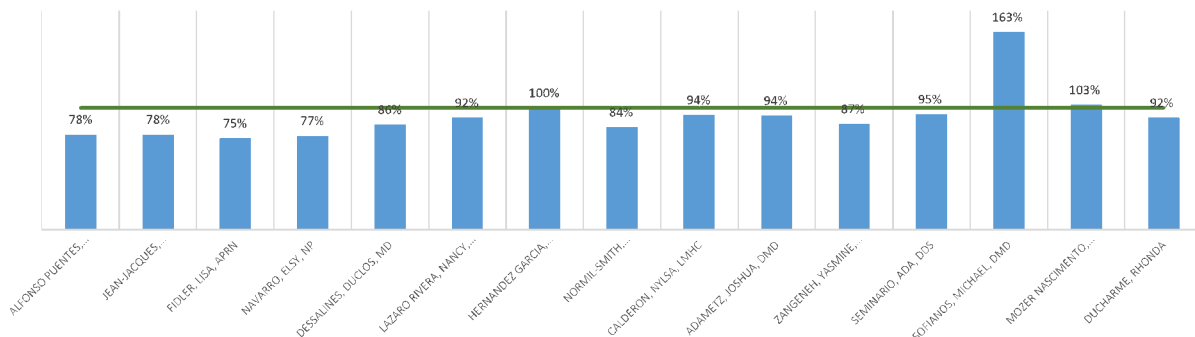
PEDIATRIC CARE						
DESSALINES, DUCLOS, MD	20	17.5	350	302	86%	17.3
LAZARO RIVERA, NANCY, MD	20	19.5	390	358	92%	18.4
HERNANDEZ GARCIA, JOSE, MD	20	16	113	113	100%	7.1
NORMIL-SMITH, SHERLOUNE, MD	20	17.5	350	295	84%	16.9
PEDIATRIC CARE TOTALS		70.5	1,203	1,068	89%	

BEHAVIORAL HEALTH INTEGRATION						
CALDERON, NYLSA, LMHC	10	8.5	85	80	94%	9.4
BH INTEGRATION TOTALS		8.5	85	80	94%	

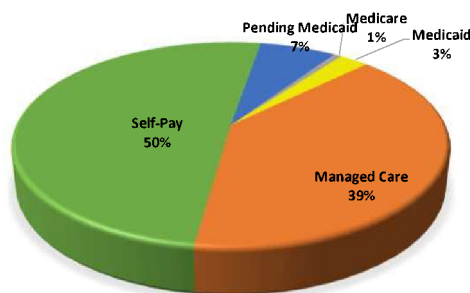
DENTAL						
ADAMETZ, JOSHUA, DMD	16	2.0	32	30	94%	15.0
ZANGENEH, YASMINE, DMD	16	17.5	280	243	87%	13.9
SEMINARIO, ADA, DDS	16	17.0	248	235	95%	13.8
SOFIANOS, MICHAEL, DMD	16	0.5	8	13	163%	26.0
DENTAL TOTALS		37	568	521	92%	

DENTAL HYGIENE						
MOZER NASCIMENTO, ARIANNE MILENA	8	15.0	120	123	103%	8.2
DUCHARME, RHONDA	8 / 16 MDI	15.5	220	202	92%	13.0
DENTAL HYGIENE TOTALS		30.5	340	325	96%	

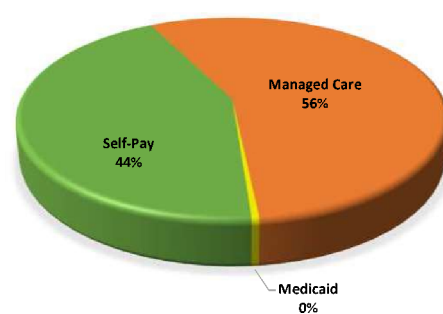
GRAND TOTAL	202.5	3,204	2,777	87%	
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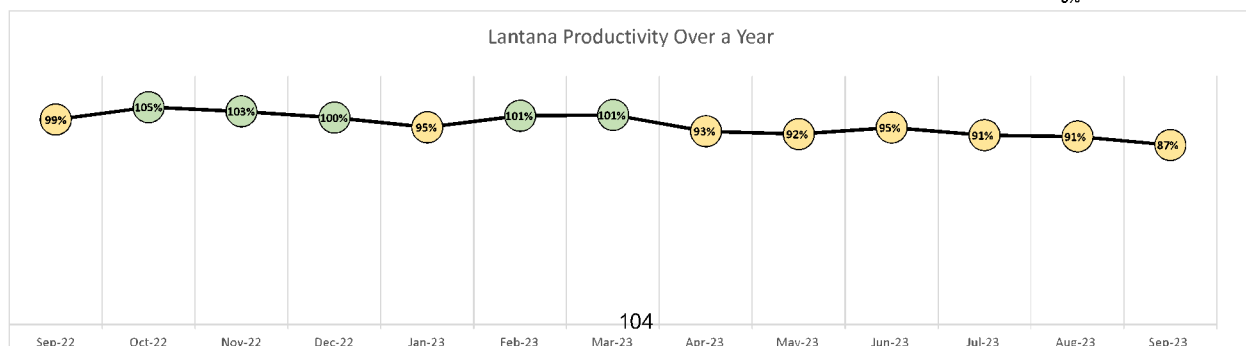
MEDICAL PAYER MIX



DENTAL PAYER MIX



Lantana Productivity Over a Year



PRODUCTIVITY REPORT SEPTEMBER 2023

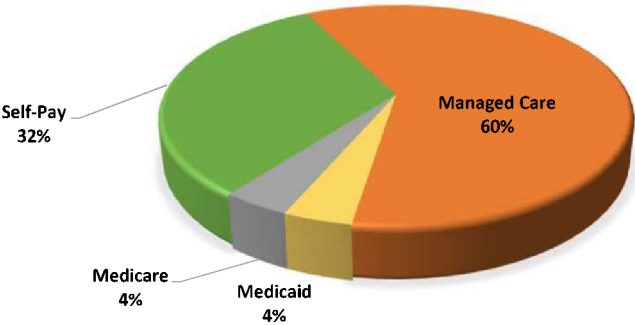
AS 09/30/2023 Based on Completed Appointments

ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
WILMOT, ALTHEA, NP	18	4.0	36	25	69%	6.3
ADULT CARE TOTALS			36	25	69%	
BEHAVIORAL HEALTH INTEGRATION						
BH INTEGRATION TOTALS		0	0	0		
BEHAVIORAL HEALTH ADDICTION						
BH ADDICTION TOTALS						

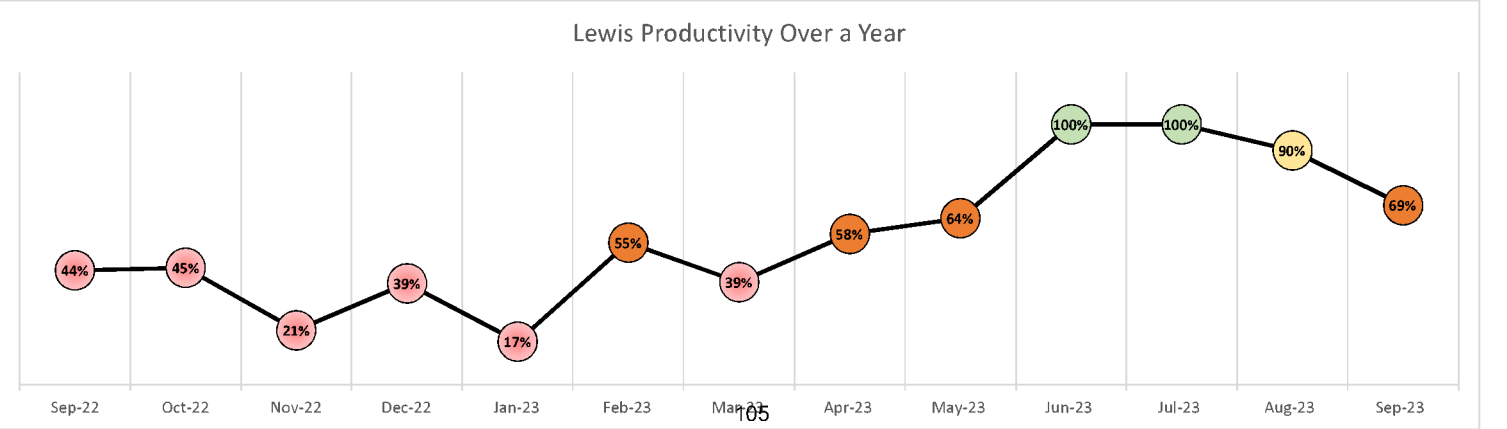
GRAND TOTAL	0	36	25	69%	
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MEDICAL PAYER MIX



Lewis Productivity Over a Year



MANGONIA**PRODUCTIVITY REPORT SEPTEMBER 2023**

AS 09/30/2023 Based on Completed Appointments

<51%

>=51% and < 80%

>= 80% and <100%

>= 100%

ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
KOOPMAN, REBECCA SUE, PA	20	20.0	400	341	85%	17.1
FERNANDEZ SANCHEZ, MARCO, NP	20	19.5	390	395	101%	20.3
ADULT CARE TOTALS		39.5	790	736	93%	

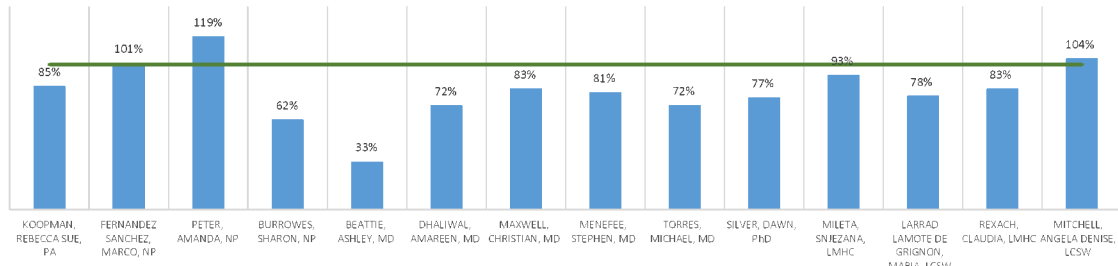
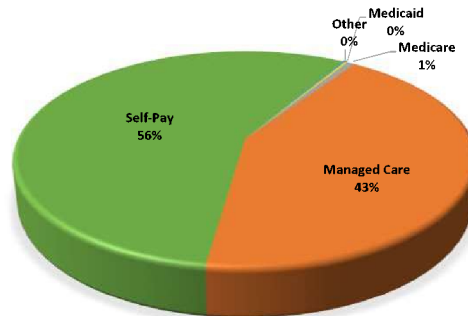
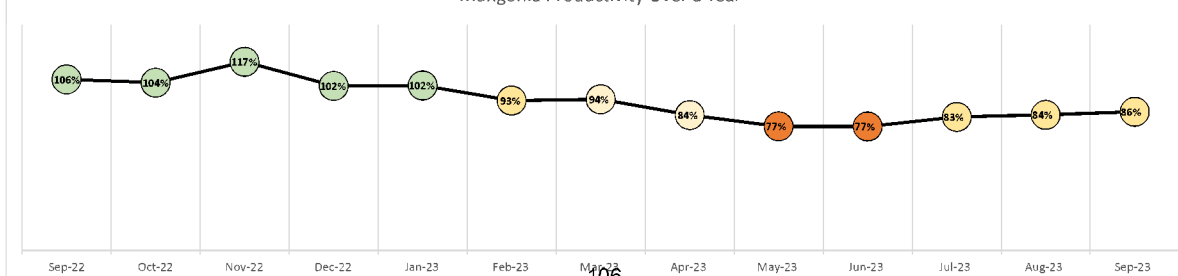
BEHAVIORAL HEALTH PSYCHIATRY						
PETER, AMANDA, NP	12	6.0	77	92	119%	15.3
BURROWES, SHARON, NP	12	18.5	222	138	62%	7.5
BEATTIE, ASHLEY, MD	12	1.0	12	4	33%	4.0
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		25.5	311	234	75%	

RESIDENT PSYCHIATRY						
DHALIWAL, AMAREEN, MD	12	6.5	78	56	72%	8.6
MAXWELL, CHRISTIAN, MD	12	5.0	60	50	83%	10.0
MENEFE, STEPHEN, MD	12	7.0	84	68	81%	9.7
TORRES, MICHAEL, MD	12	4.5	54	39	72%	8.7
RESIDENT PSYCHIATRY TOTAL		23.0	276	213	77%	

BEHAVIORAL HEALTH INTEGRATION						
BH INTEGRATION TOTALS		0.0	0	0		

BEHAVIORAL HEALTH ADDICTION						
SILVER, DAWN, PhD	10	19.5	195	151	77%	7.7
MILETA, SNJEZANA, LMHC	10	18.5	185	172	93%	9.3
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW	10	18.5	185	145	78%	7.8
REXACH, CLAUDIA, LMHC	10	17.5	175	146	83%	8.3
MITCHELL, ANGELA DENISE, LCSW	10	12.0	120	125	104%	10.4
BH ADDICTION TOTALS		86.0	860	739	86%	

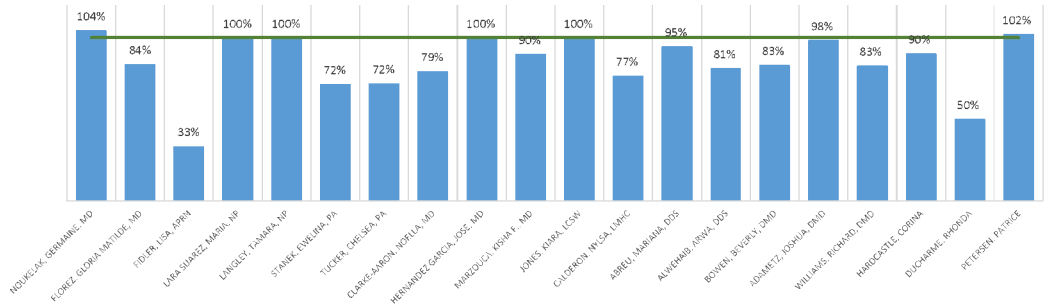
GRAND TOTAL	174.0	2,237	1,922	86%	
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**MEDICAL PAYER MIX****Mangonia Productivity Over a Year**

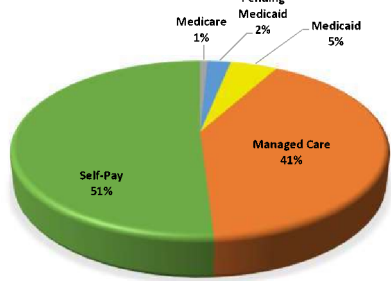
WEST PALM BEACH
PRODUCTIVITY REPORT SEPTEMBER 2023
AS 09/30/2023 Based on Completed Appointments



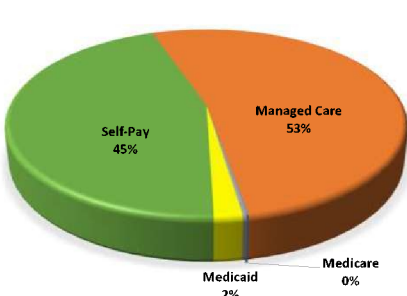
ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
NOUKELAK, GERMAINE, MD	18	20.0	360	376	104%	18.8
FLOREZ, GLORIA MATILDE, MD	18	17.5	315	264	84%	15.1
FIDLER, LISA, APRN	18	1.0	18	6	33%	6.0
LARA SUAREZ, MARIA, NP	18	0.5	9	9	100%	18.0
LANGLEY, TAMARA, NP	18	0.5	9	9	100%	18.0
STANEK, EWELINA, PA	18	17.0	306	219	72%	12.9
TUCKER, CHELSEA, PA	18	10.5	189	136	72%	13.0
ADULT CARE TOTALS		67	1,206	1,019	84%	
PEDIATRIC CARE						
CLARKE-AARON, NOELLA, MD	20	17.5	350	278	79%	15.9
HERNANDEZ GARCIA, JOSE, MD	20	3.5	47	47	100%	13.4
MARZOUCA, KISHA F., MD	20	18.5	370	316	90%	17.1
PEDIATRIC CARE TOTALS		39.5	767	641	84%	
BEHAVIORAL HEALTH INTEGRATION						
JONES, KIARA, LCSW	10	2.0	20	20	100%	10.0
CALDERON, NYLSA, LMHC	10	3.0	30	23	77%	7.7
BH INTEGRATION TOTALS		5	50	43	86%	
DENTAL						
ABREU, MARIANA, DDS	16	16.5	264	250	95%	15.2
ALWEHAIB, ARWA, DDS	16	1.0	16	13	81%	13.0
BOWEN, BEVERLY, DMD	16	11.5	184	153	83%	13.3
ADAMETZ, JOSHUA, DMD	16	4.0	65	64	98%	16.0
WILLIAMS, RICHARD, DMD	16	18.5	296	245	83%	13.2
DENTAL TOTALS		51.5	825	725	88%	
DENTAL HYGIENE						
HARDCASTLE, CORINA	8	15.5	124	112	90%	7.2
DUCHARME, RHONDA	8 / 16 MDI	1.0	8	4	50%	4.0
PETERSEN, PATRICE	8 / 16 MDI	16.5	240	245	102%	14.8
DENTAL HYGIENE TOTALS		33.0	372	361	97%	
GRAND TOTAL		196.0	3,220	2,789	87%	



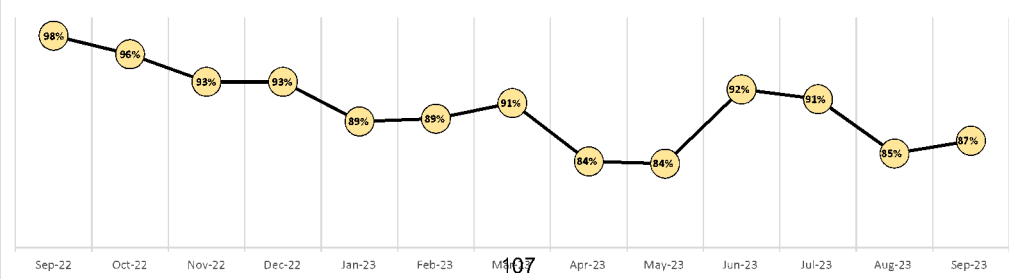
MEDICAL PAYER MIX



DENTAL PAYER MIX



West Palm Beach Productivity Over a Year

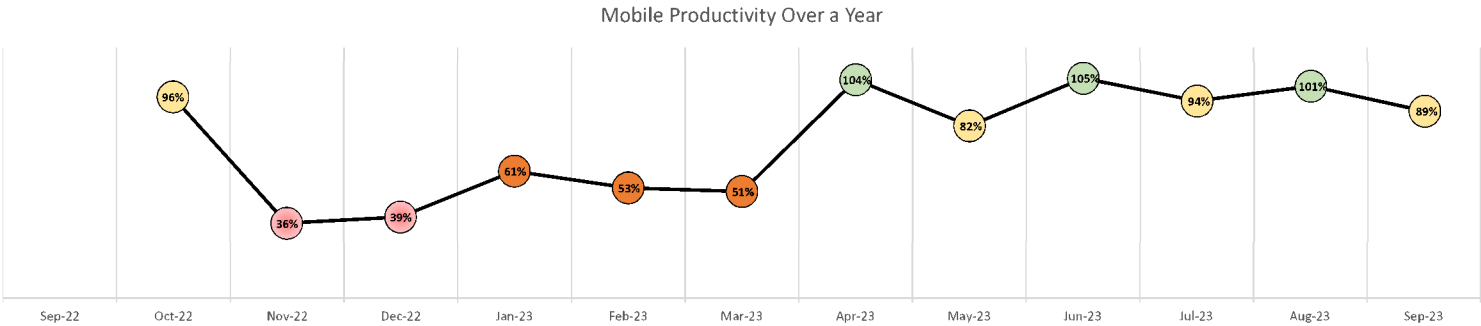
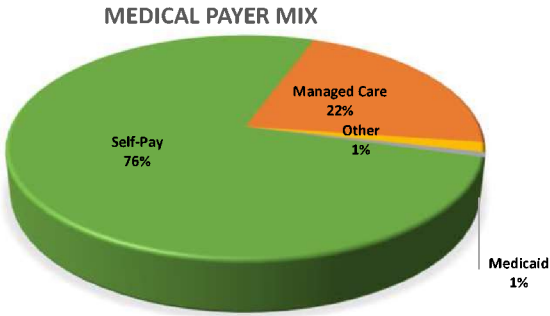
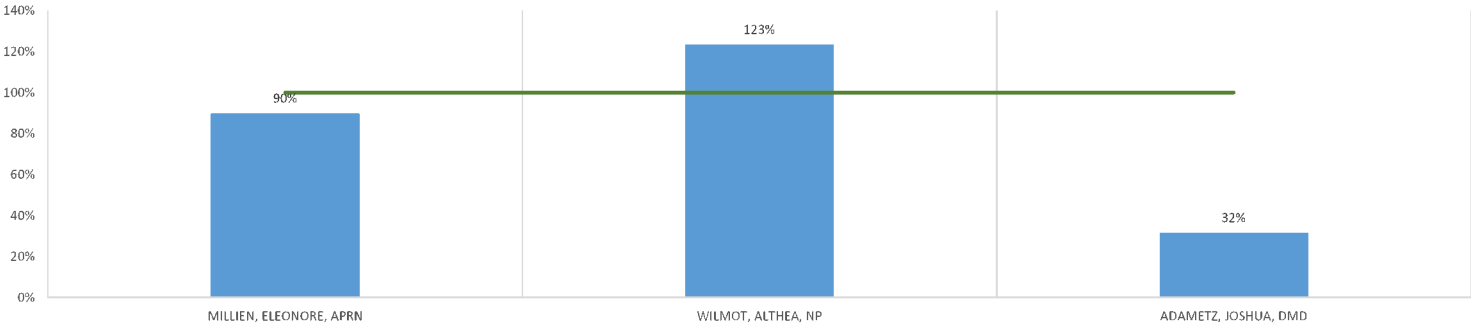


MOBILE & PORT CLIN
PRODUCTIVITY REPORT SEPTEMBER 2023
AS 09/30/2023 Based on Completed Appointments

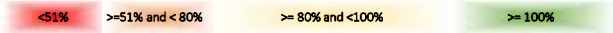
ADULT CARE										
Provider	Daily Target	Days Worked			Target for the Month			Total for the Month Seen	% Monthly Target Achieved	Daily Average
			AM	PM		AM	PM			
MILLIEN, ELEONORE, APRN	6	18.5	62	56	118	54	52	106	90%	5.7
WILMOT, ALTHEA, NP	6	5.0	15	15	30	20	17	37	123%	7.4
ADULT CARE TOTALS		24	77	71	148	74	69	143	97%	

DENTAL										
ADAMETZ, JOSHUA, DMD	6	1.5	11	8	19	6	0	6	32%	4.0
DENTAL TOTALS		1.5	11	8	19	6	0	6	32%	

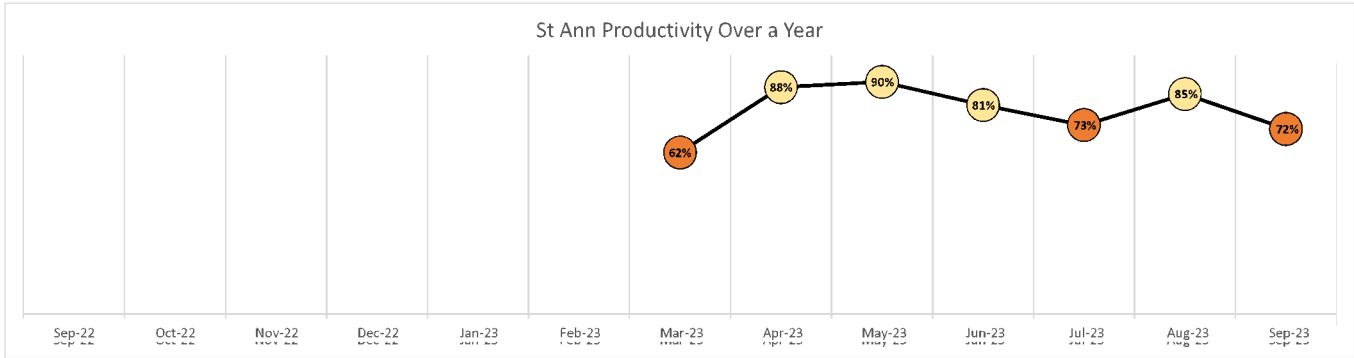
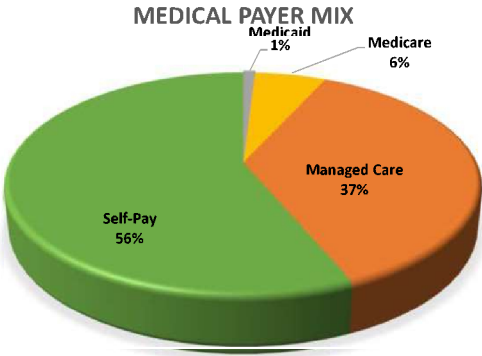
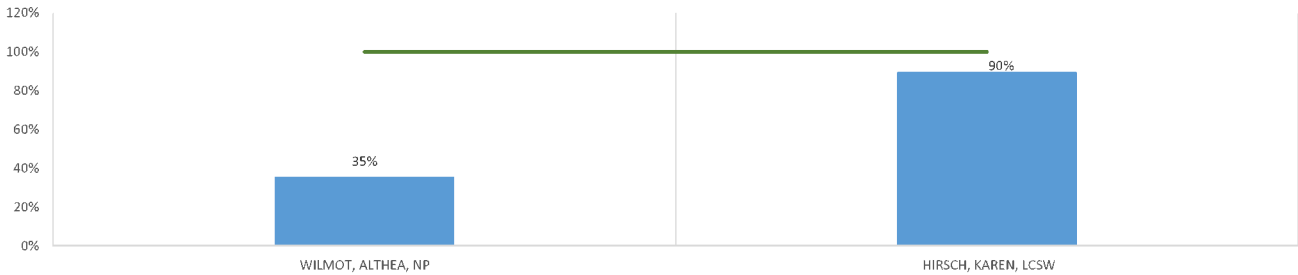
GRAND TOTAL	25	88	79	167	80	69	149	89%	
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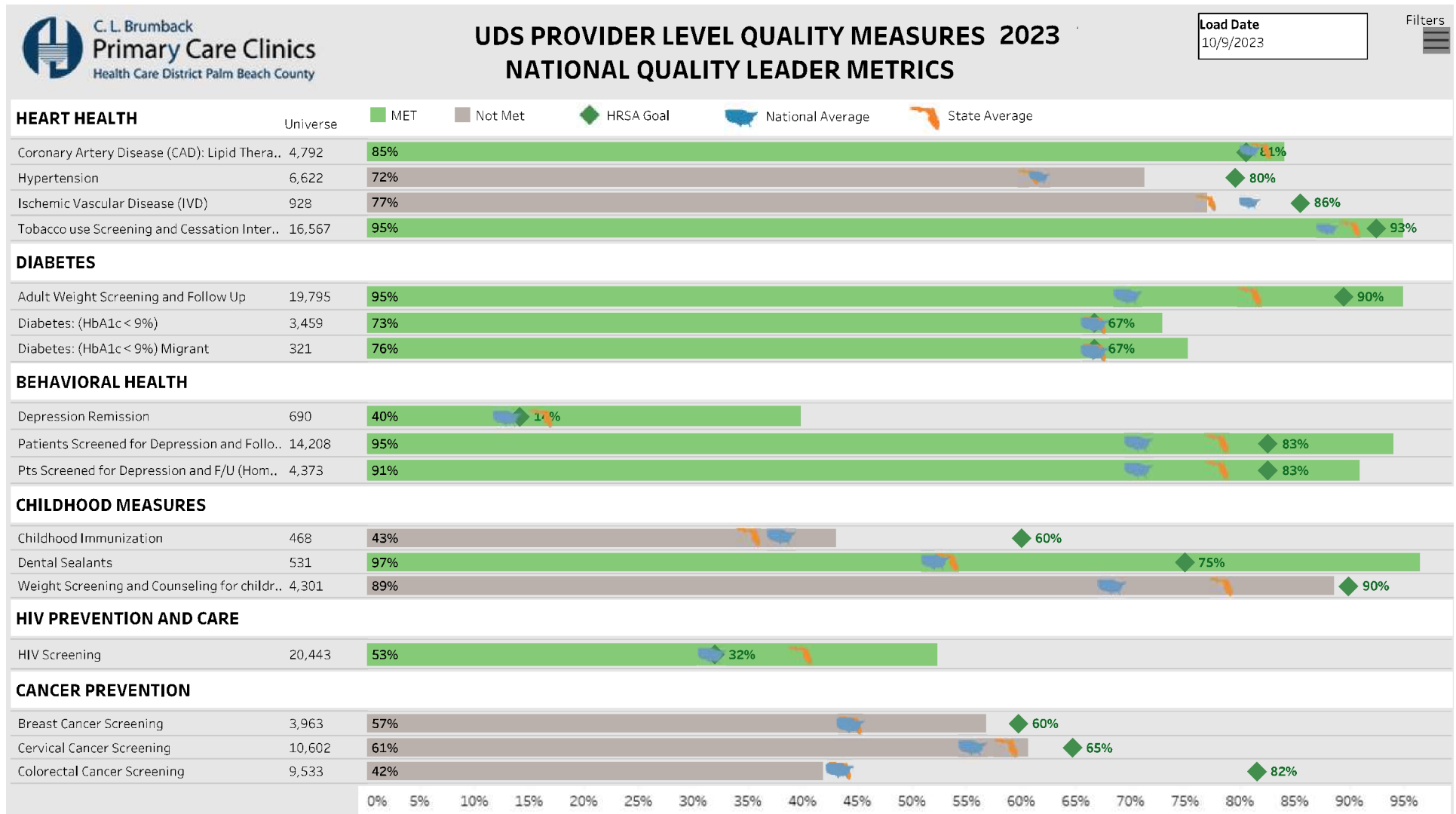


St ANN
PRODUCTIVITY REPORT SEPTEMBER 2023
AS 09/30/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
WILMOT, ALTHEA, NP	6	8.0	48	17	35%	2.1
ADULT CARE TOTALS						
		8.0	48	17	35%	
BEHAVIORAL HEALTH INTEGRATION						
HIRSCH, KAREN, LCSW	6	16.0	96	86	90%	5.4
BH INTEGRATION TOTALS						
		16.0	96	86	90%	
BEHAVIORAL HEALTH PSYCHIATRY						
BH PSYCHIATRY TOTALS						
		0.0	0	0		
GRAND TOTAL		24.0	144.0	103.0	72%	





HEALTH CARE DISTRICT BOARD

October 25, 2023

1. **Description: Operations Report – September 2023**

2. **Summary:**

This agenda item provides the following operations report for September 2023

- Health Center Productivity, Payor Mix, Demographics

3. **Substantive Analysis:**

In September, the Health Centers had a total of 8,854 unique patients. This is a 6% decrease from previous month. Our unique new patients totaled was 2,223 which remains consistently at 25% of overall unique patients. In provider visits the Health Centers had a total of 12,687 visits. This was a decrease of 6% from the month prior but 25% higher than September 2022. 40% of patients were from adults Primary Care, 23% from Dental which was a 1% decrease and 13% from Pediatrics which is a 1% decrease over previous month. In September the Lantana Health Center had the highest volume with 2,296 visits followed by the Mangonia Health Center with 2,237 visits.

Our payer mix for September remains consistent with previous month with 54% uninsured which was consistent with previous month. 41% of patients were Managed Care and 5% Medicaid which was a 1% increase.

Health Centers continue to have 60% female. 51% of patients reported as White and 42% Black or African American. 40% of patients reported as Hispanic. Our largest age group continue to be those between the ages of 30-39 years old with 17% of patients.

In September our Homeless population averaged 33.4% with a total of 3,019 homeless patients between all Health Centers. As expected the Lewis Center, St. Ann, Mangonia and Mobile Clinics had the highest percentage of homeless patients ranging from 66%-96%. Other clinics ranged from 18% in Belle Glade to 48% in Lantana. Those reported as doubling up is consistent with previous month at 49%.

Agricultural Worker averaged 4.7% between all Health Centers which is consistent with previous month. The majority continue to come from the Belle Glade with 31% of their patients reporting as agricultural worker. Other clinics ranged from 0 to 3% agricultural workers.

English is the primary spoken language across the clinics except for Lantana that has a higher percentage of Spanish and Creole speakers. The Boca Health Center had a higher percent of Portuguese speaking patients than all other clinics though Delray and Lantana both had 1%. Other language reported in September included Vietnamese, Russian, Bengali and Arabic.

HEALTH CARE DISTRICT BOARD

October 25, 2023

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:

DocuSigned by:

Jessica Cafarelli

CA6A21FF2E09481...
Jessica Cafarelli
Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

N/A

Date

6. Recommendation:

Staff recommends the Board approve the Operations report for September 2023

Approved for Legal sufficiency:

DocuSigned by:

Bernabe Icaza

0CF6F7DB670643B...
Bernabe Icaza
SVP & General Counsel

DocuSigned by:

Angela Santos

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Angela Santos
Director of Specialty Operations

DocuSigned by:

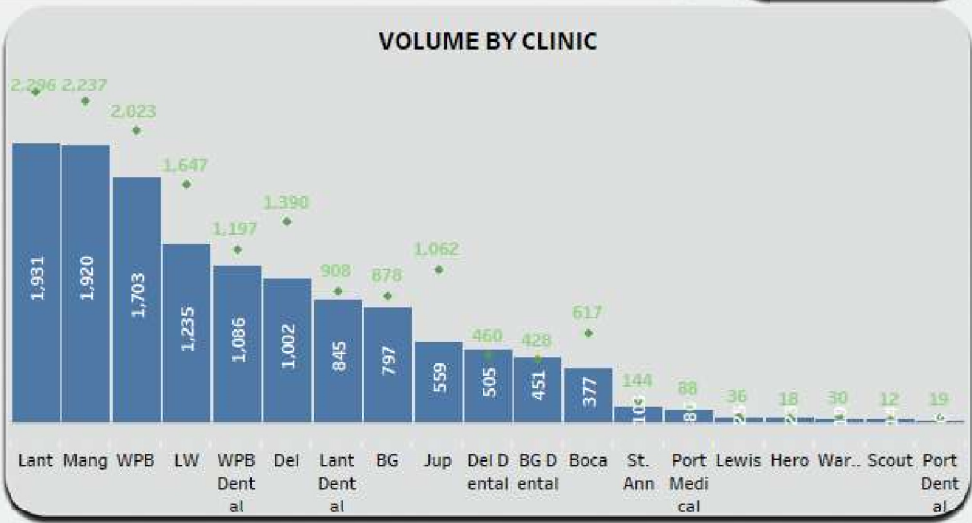
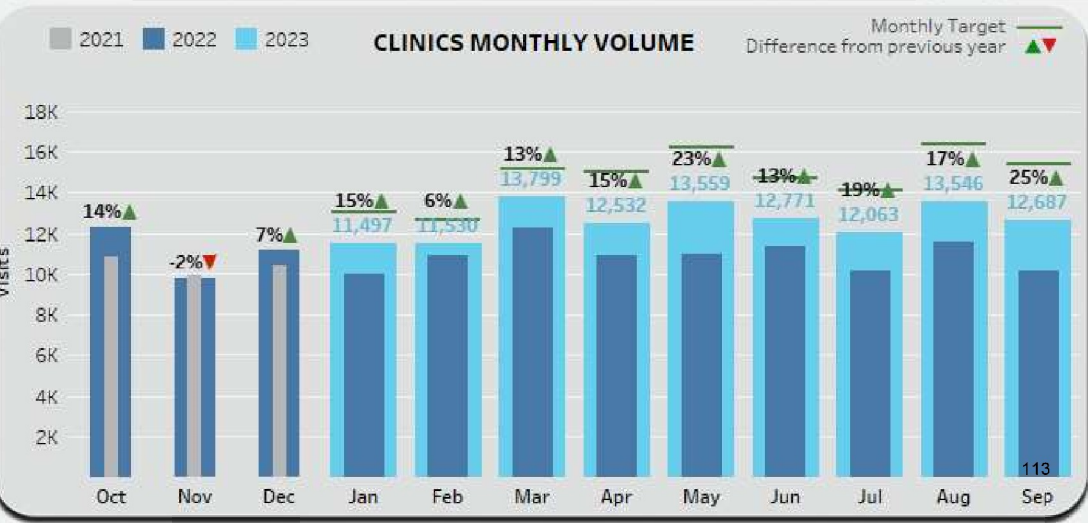
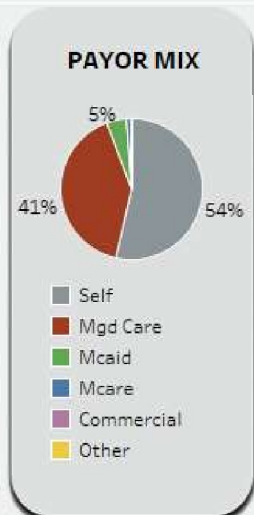
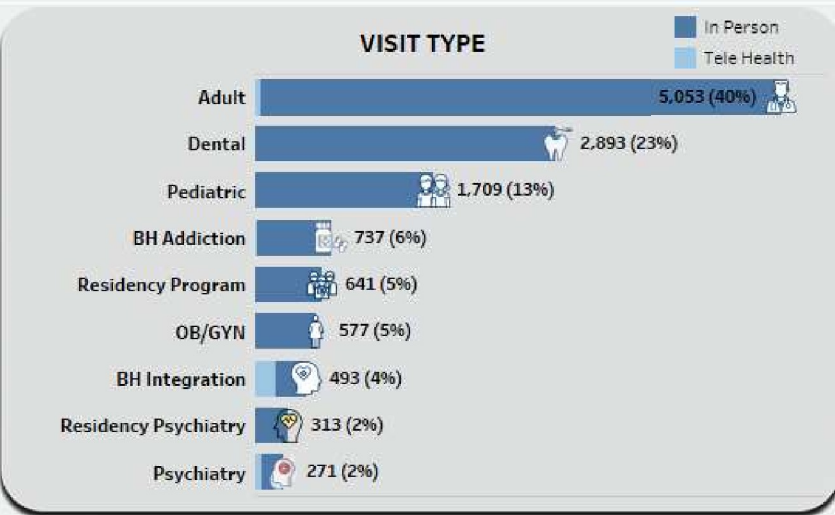
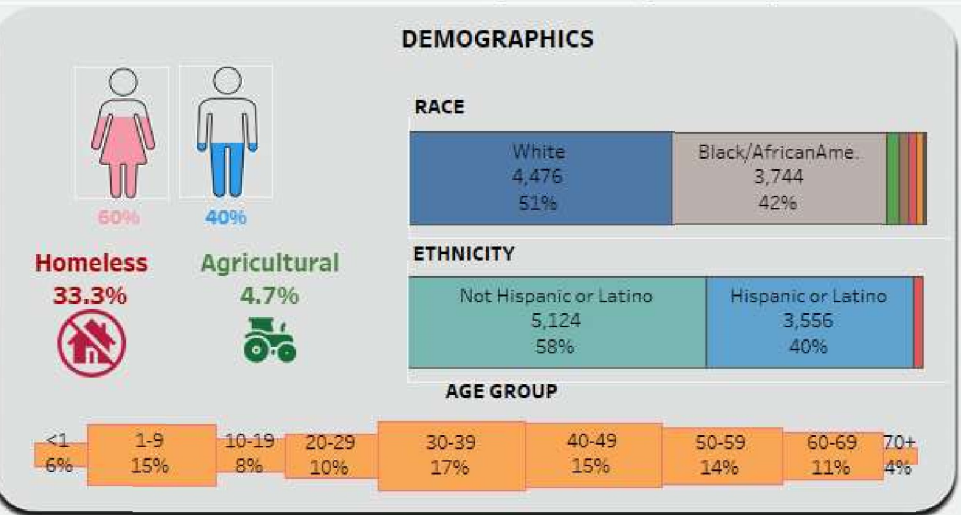
Candice Abbott

F637D209DB524C...
Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

Patient Visits
8,854

New Patients
2,223

Monthly Productivity September 2023




HOMELESS BREAKDOWN BY CLINIC
9/1/2023 - 9/30/2023

Unique Patients

3,019

33.4%

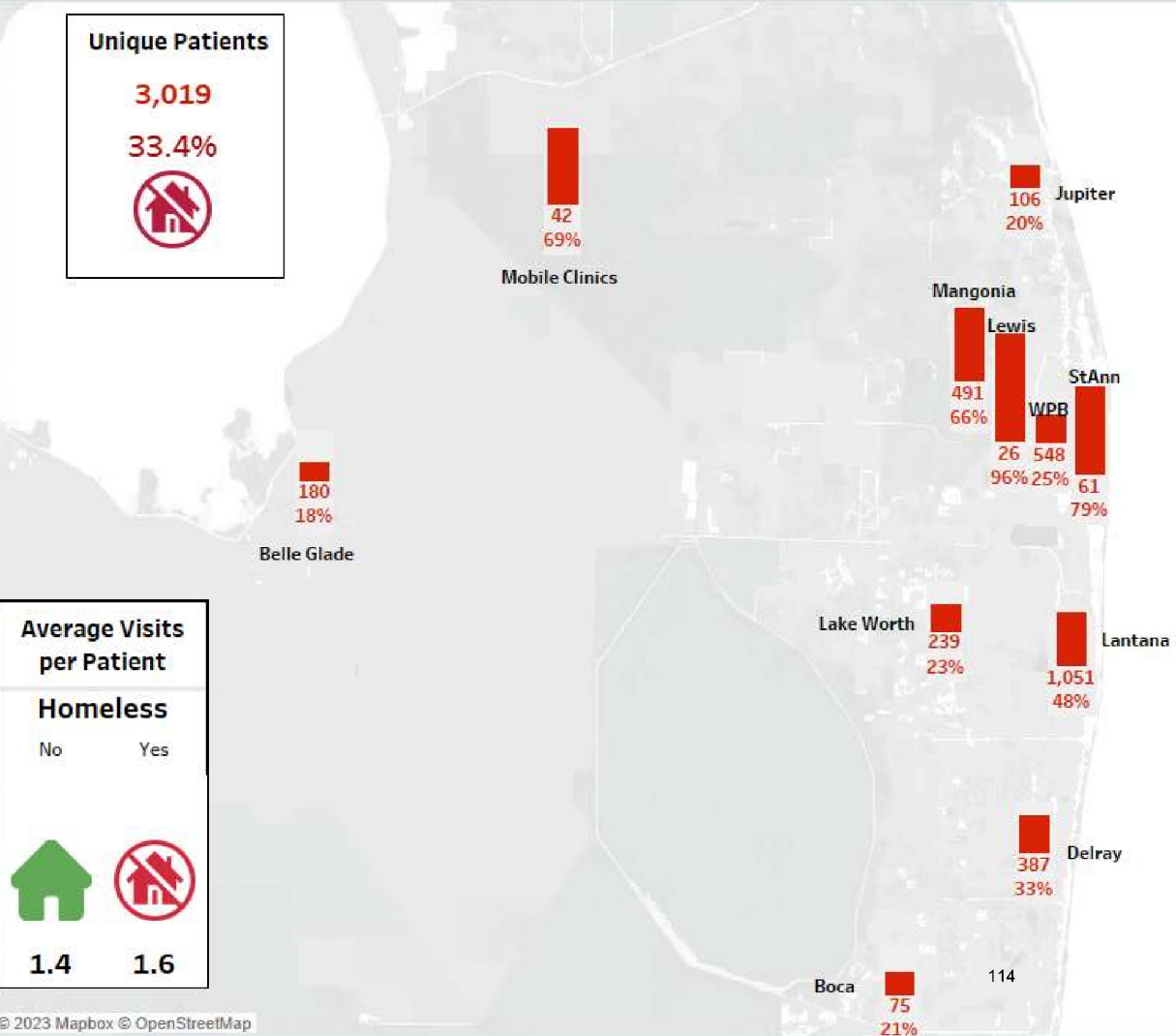


Average Visits per Patient

Homeless

No Yes

1.4 1.6



HOMELESS TYPE OVER TIME

	2023
Doubling Up	49%
Homeless Shelter	5%
Other	24%
Permanent Supportive...	10%
Street	6%
Transitional	4%
Unknown	2%
	Sep

AGRICULTURAL WORKERS BREAKDOWN BY CLINIC

9/1/2023 - 9/30/2023



419
4.7%

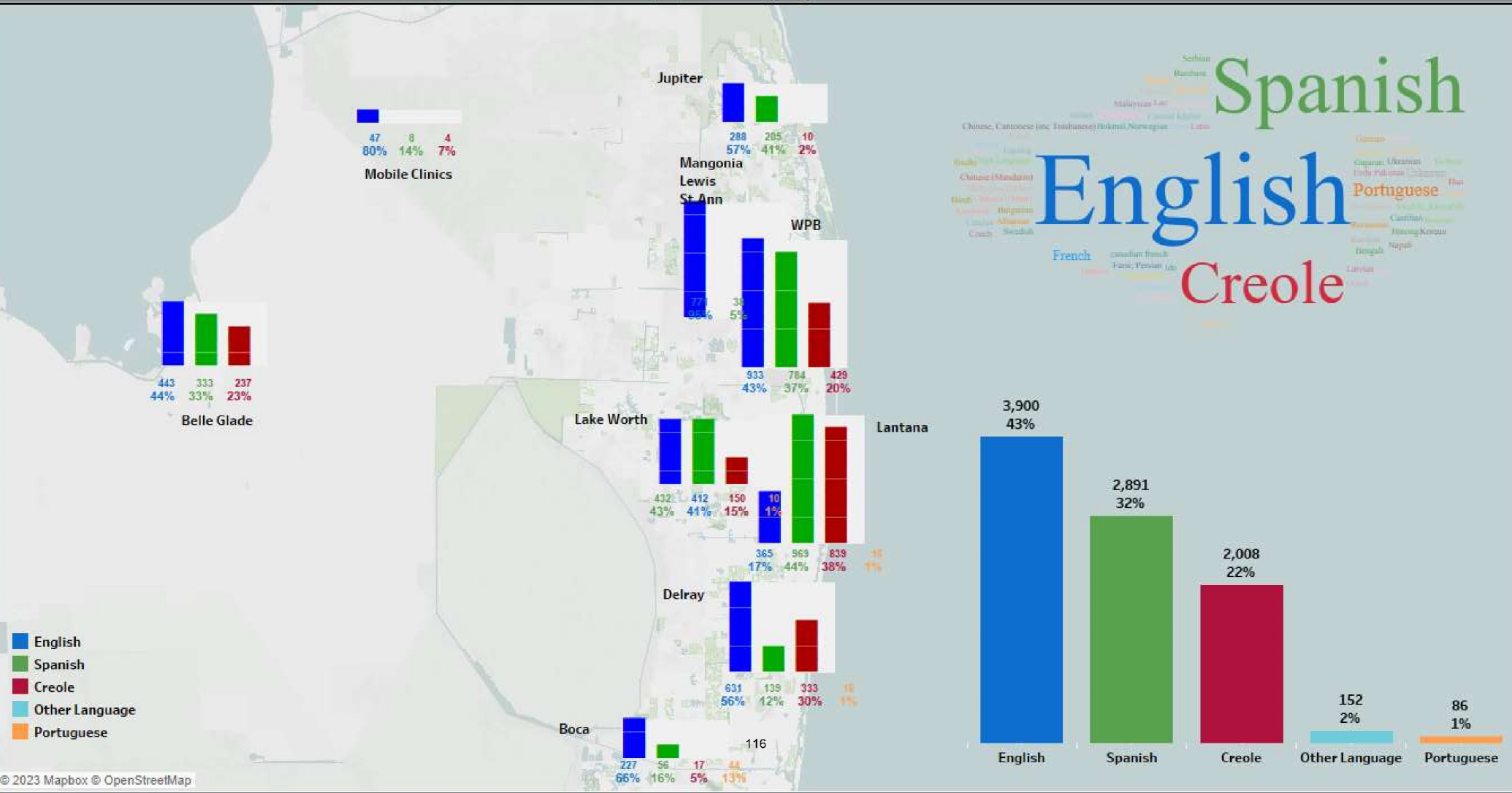
AGRICULTURAL WORKERS OVER TIME

2023

427
4.7%

Sep

LANGUAGE BREAKDOWN BY CLINIC
9/1/2023 - 9/30/2023



**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**

1. Description: Patient Relations Dashboard Report

2. Summary:

This agenda item provides the following:

Quarterly Patient Relations Dashboard Q4 2023

3. Substantive Analysis:

For Quarter 4 2023, there were a total of 33 Patient Relations Occurrences that occurred between 6 Clinics and Clinic Administration. This was a decrease from the previous quarter where we had 36 Complaints and Grievances. Of the 33 occurrences, there were 12 Grievances and 21 Complaints. The top 5 categories were Care & Treatment, Physician Related, Communication, Respect Related and Finance Related issues. The top subcategory was Physician Related All Aspects of Care with 6 occurrences.

There was also a total of 51 Compliments received across 6 Clinics and Clinic Administration. Of the 51 Compliments, 48 were patient compliments and 3 were employee-to-employee Thumbs-Up compliments.

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E034C Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
OCTOBER 25, 2023**


6. Recommendation:


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

Approved for Legal sufficiency:

DocuSigned by:

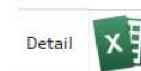
0CF6F7DB6706433 Bernabe Icaza
SVP & General Counsel

DocuSigned by:

25C1B22931DA490 Alexa Goodwin
Patient Relations Manager

DocuSigned by:

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



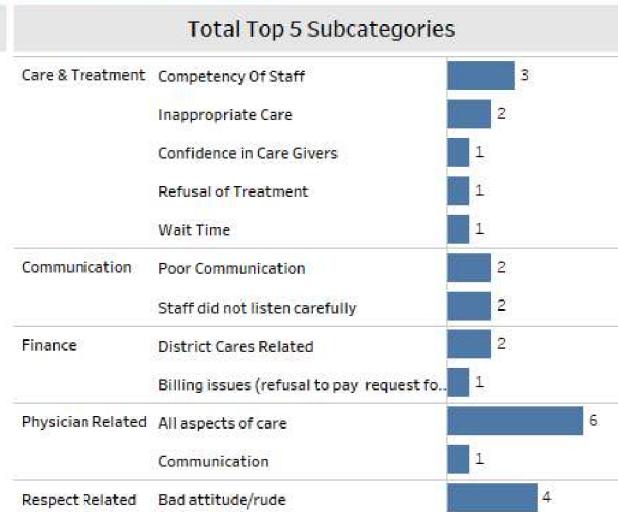
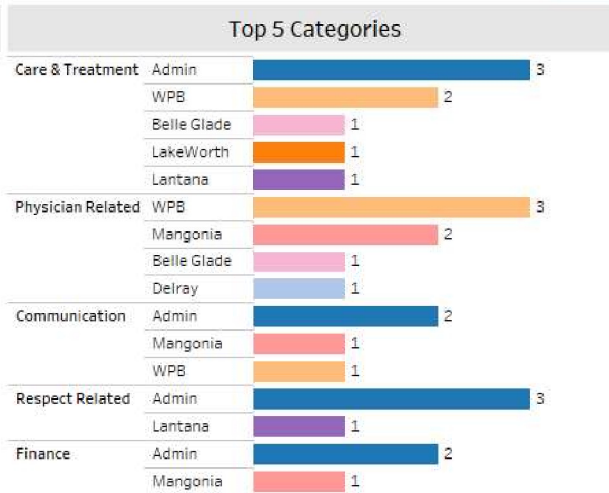
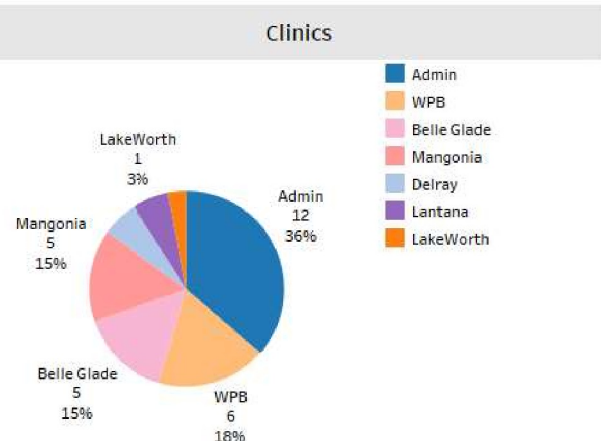
Patient Relations (Grievances, Complaints & Compliments) C.L. Brumback Primary Care Clinics

Top Categories
5

2023 Q3

7/1/23 to 9/30/23

Dept Desc All Provider All Total Complaints and Grievances 33 Late Entries: 5 Clinic All



Total Compliments 51 Late Entries: 9

Complaints/Grievances Prev 4 Quarters 161

