



C. L. Brumback

**Primary Care Clinics**

Health Care District Palm Beach County

## **BOARD OF DIRECTORS**

**October 28, 2020**

**12:45 P.M.**

*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 28, 2020**  
Zoom Webinar Meeting

Remote Participation Login: <https://tinyurl.com/yda3vnks>

or

DIAL +1 (646) 558 8656 ; Meeting ID: 550 789 5592; Access number: 946503

**1. Call to Order – Mike Smith, 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. **Patient Satisfaction Survey:**  
David Speciale
- B. **COVID-19 Update:**  
Dr. Belma Andric

**4. Disclosure of Voting Conflict**

**5. Public Comment\***

**6. Meeting Minutes**

- A. **Staff recommends a MOTION TO APPROVE:**  
Board Meeting Minutes of September 30, 2020. [Pages 1-10]

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

All matters listed under this item are considered routine and action will be taken by one motion. There will be no separate discussion of these items unless a Commissioner or person so requests, in which the item will be removed from the general order of business and considered on its normal sequence on the Agenda.

7. **Consent Agenda (cont.)**

A. **ADMINISTRATION**

- 7A-1 **RECEIVE AND FILE:**  
October 2020 Internet Posting of District Public Meeting.  
<https://www.hcdpbc.org/resources/public-meetings>
- 7A-2 **RECEIVE AND FILE:**  
Attendance tracking. [Page 11]
- 7A-3 **RECEIVE AND FILE:**  
Board Member Departure  
(Thomas Cleare) [Pages 12-13]

B. **FINANCE**

- 7B-1 **RECEIVE AND FILE:**  
C. L. Brumback Primary Care Clinics Financial Report July 2020.  
(Joel Snook) [Pages 14-32]

8. **Regular Agenda**

A. **ADMINISTRATION**

- 8A-1 **Staff recommends a MOTION TO APPROVE:**  
Expanding the Finance Committee.  
(Thomas Cleare) [Pages 33-34]
- 8A-2 **Staff recommends a MOTION TO APPROVE:**  
Health Care District recommendation for permanent replacement of Executive  
Director.  
(Darcy Davis) [Pages 35-37]

B. **EXECUTIVE**

- 8B-1 **RECEIVE AND FILE:**  
Executive Director Informational Update.  
(Dr. Belma Andric) [Pages 38-39]

**8. Regular Agenda (cont.)**

**C. Credentialing**

**8C-1 Staff Recommends a MOTION TO APPROVE:**

Licensed Independent Practitioner Credentialing and Privileging –  
Valena Grbic, MD.

(Dr. Belma Andric) [Pages 40-41]

**D. OPERATIONS**

**8D-1 Staff Recommends a MOTION TO APPROVE:**

Operations Report.

(Dr. Hyla Fritsch) [Pages 42-60]

**E. QUALITY**

**8E-1 Staff Recommends a MOTION TO APPROVE:**

Quality Report.

(Dr. Ana Ferwerda) [Pages 61-79]

**9. VP and Executive Director of Clinic Services Comments**

**10. Board Member Comments**

**11. Establishment of Upcoming Meetings**

**November 30, 2020 (TBD)**

12:45pm Board of Directors

**December 16, 2020 (TBD)**

12:45pm Board of Directors

**12. Motion to Adjourn**

\*District Clinic Holdings, Inc. welcomes public comment during its regular monthly meetings. This month, public comment should be emailed to [jdominiq@hcdpbc.org](mailto:jdominiq@hcdpbc.org) or submitted via phone (561) 804-5780 prior to Noon on The Scheduled Meeting Date. All comments received during this time frame will be read aloud and included in the official meeting record.

Any person(s) not adhering to the Board's guidelines or who make comments which could be perceived as slanderous or disruptive may be barred from making future comments before the Board.

The logo features a stylized white cross with horizontal lines, set within a dark blue circle. The background consists of several diagonal blue stripes of varying shades, creating a sunburst effect.

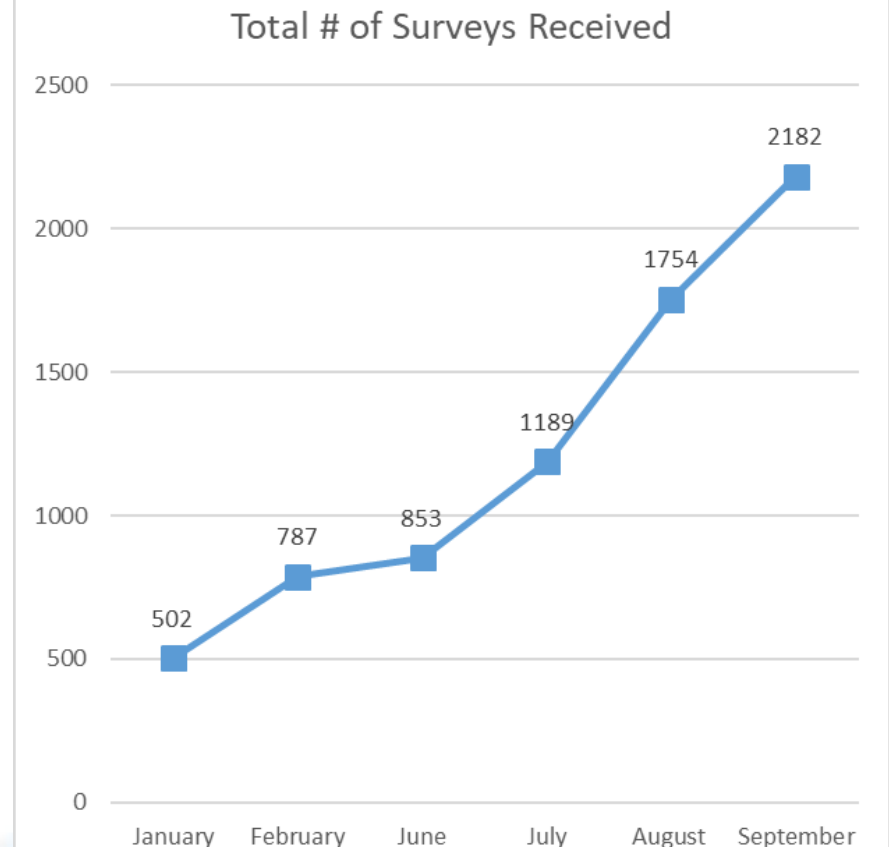
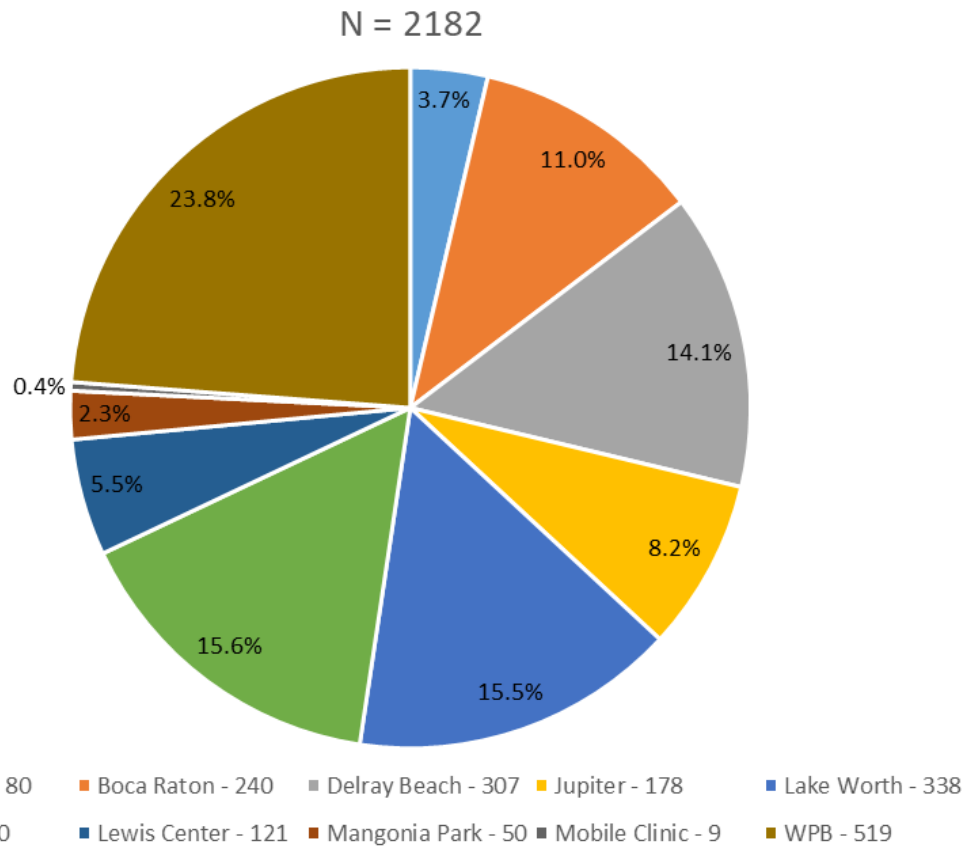
# Health Care District of Palm Beach County

*Dedicated to the health of our community*

**C. L. Brumback Primary Care Clinics  
Patient Satisfaction Survey Results  
January 1, 2020 – October 9, 2020**



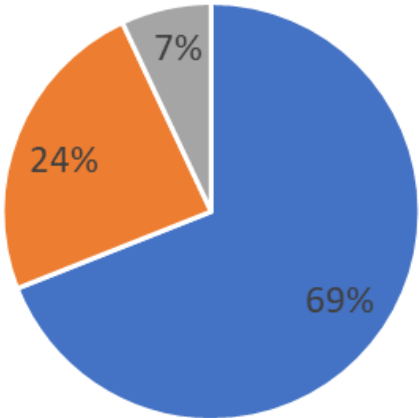
# Patient Satisfaction Survey – Rate of Return for 2020





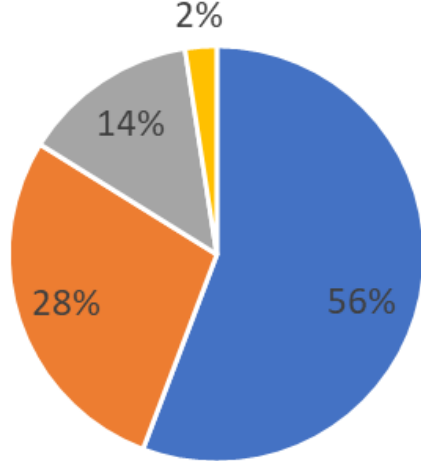
# Sample Size & Patient Language for Population Surveyed VS Population Served

POPULATION SURVEYED (2,182)



■ English ■ Spanish ■ Creole

POPULATION SERVED (30,517)

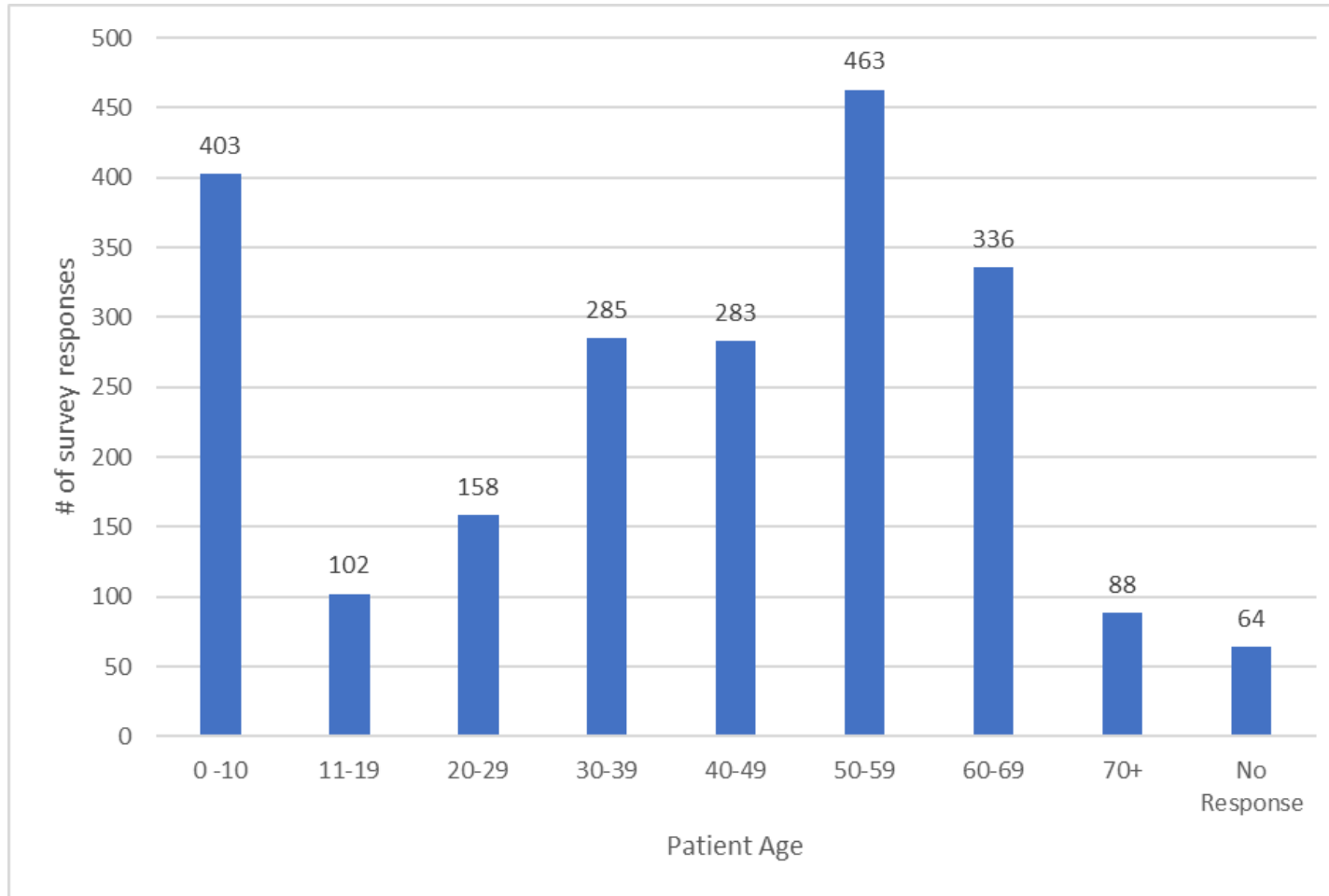


■ English ■ Spanish ■ Creole ■ Other Language

The patients that completed a Patient Satisfaction Survey represents 7% of the total population served between January 1, 2020 and October 7, 2020



# Patient Age Distribution

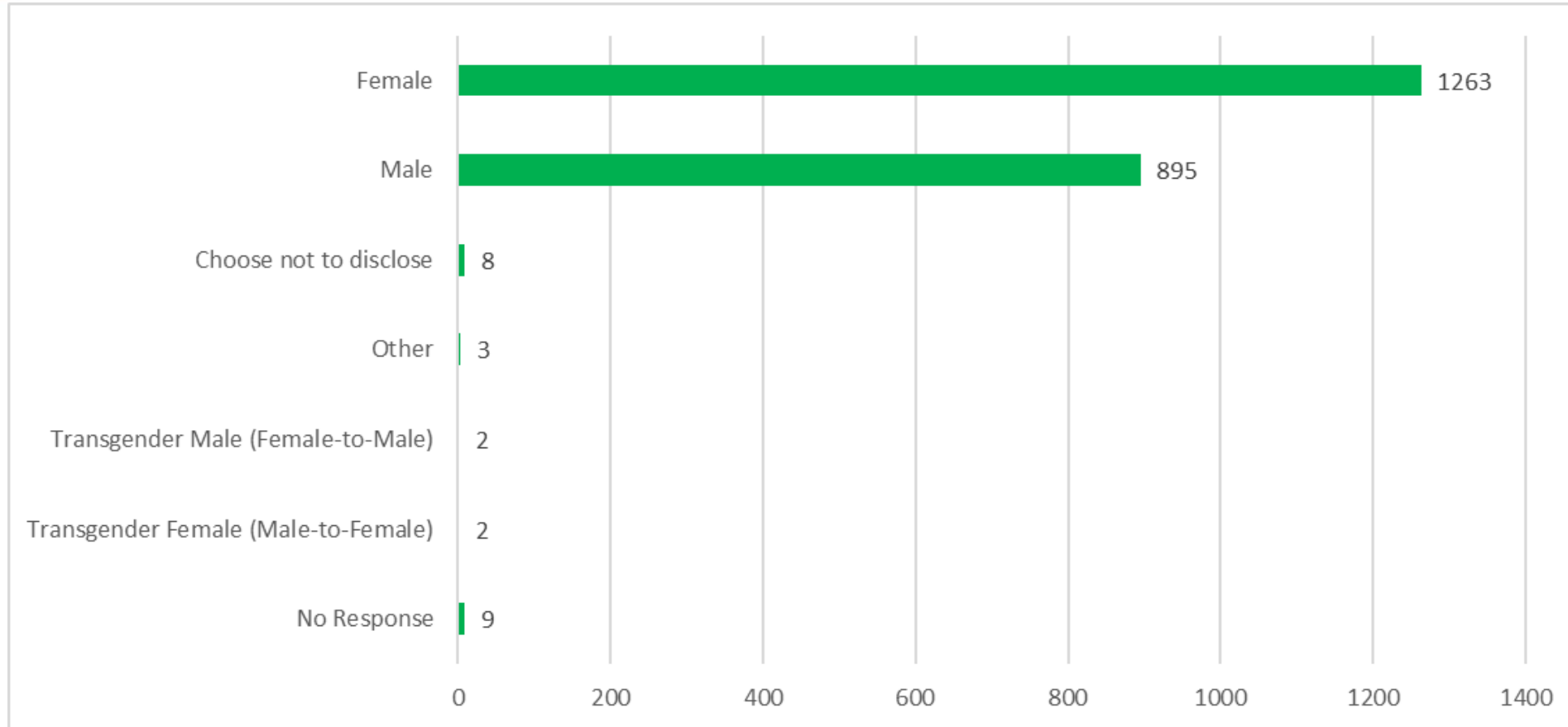


- The highest rate of return was from patients between the ages of 50 and 59 representing 21% of total surveys received.
- The second highest rate of return was from caregivers of patients aged 0 to 10 years old representing 18% of total surveys received.
- The lowest rate of return was from patients 70 years of age and older representing 4% of total surveys received.





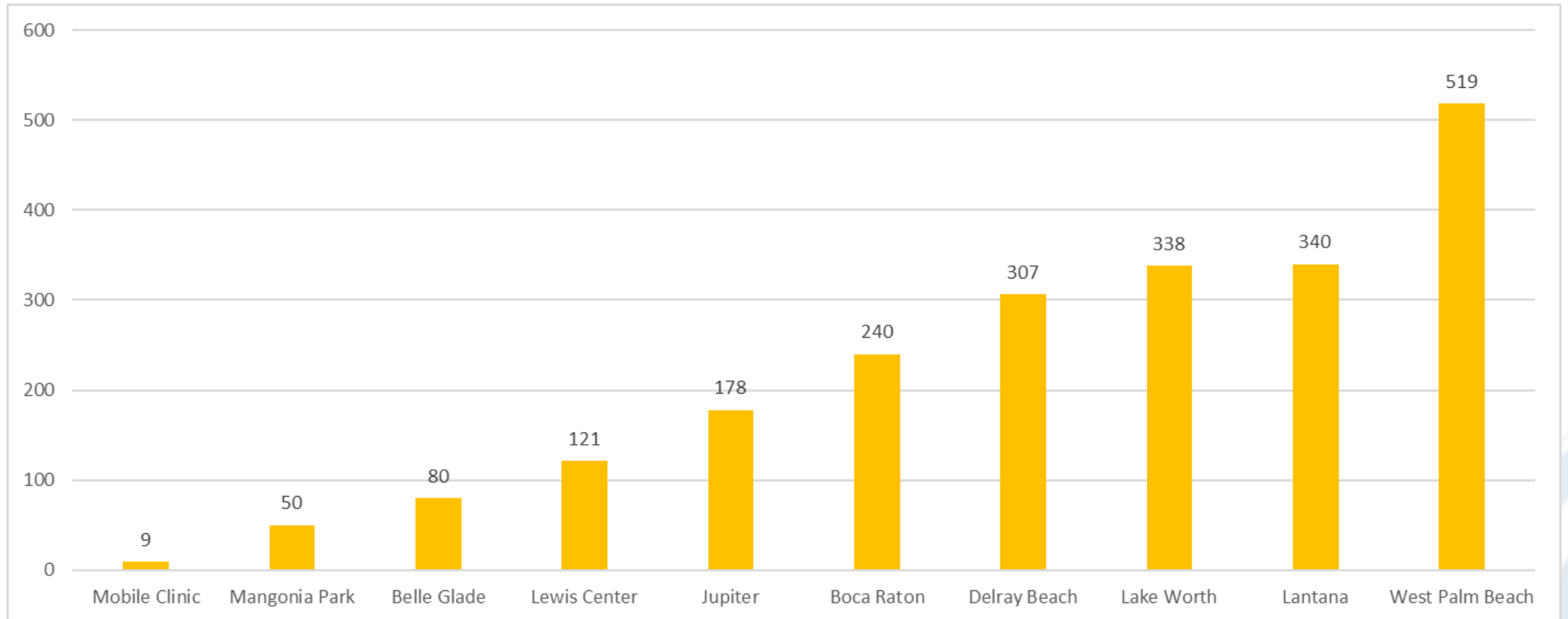
# Patient Gender Identity



- Patients that identify as female represented 58% of the total surveys received.
- Patients that identify as male represented 41% of the total surveys received.
- All other responses of gender identity represent less than 1% of total surveys received.



# Surveyed Patients By Clinic Location

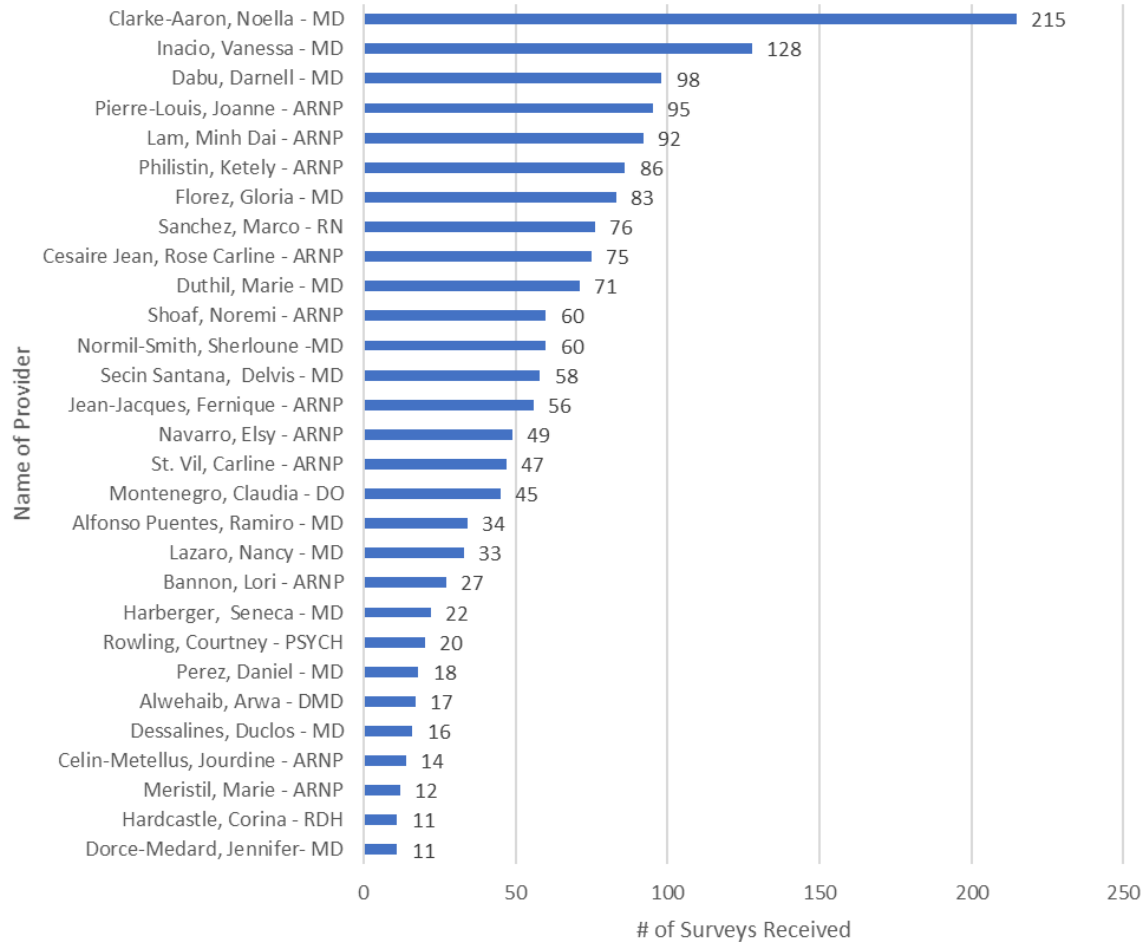


The “Warrior” Mobile Clinic has been reassigned to the FITTEAM ballpark - COVID19 testing site as of 3/2020

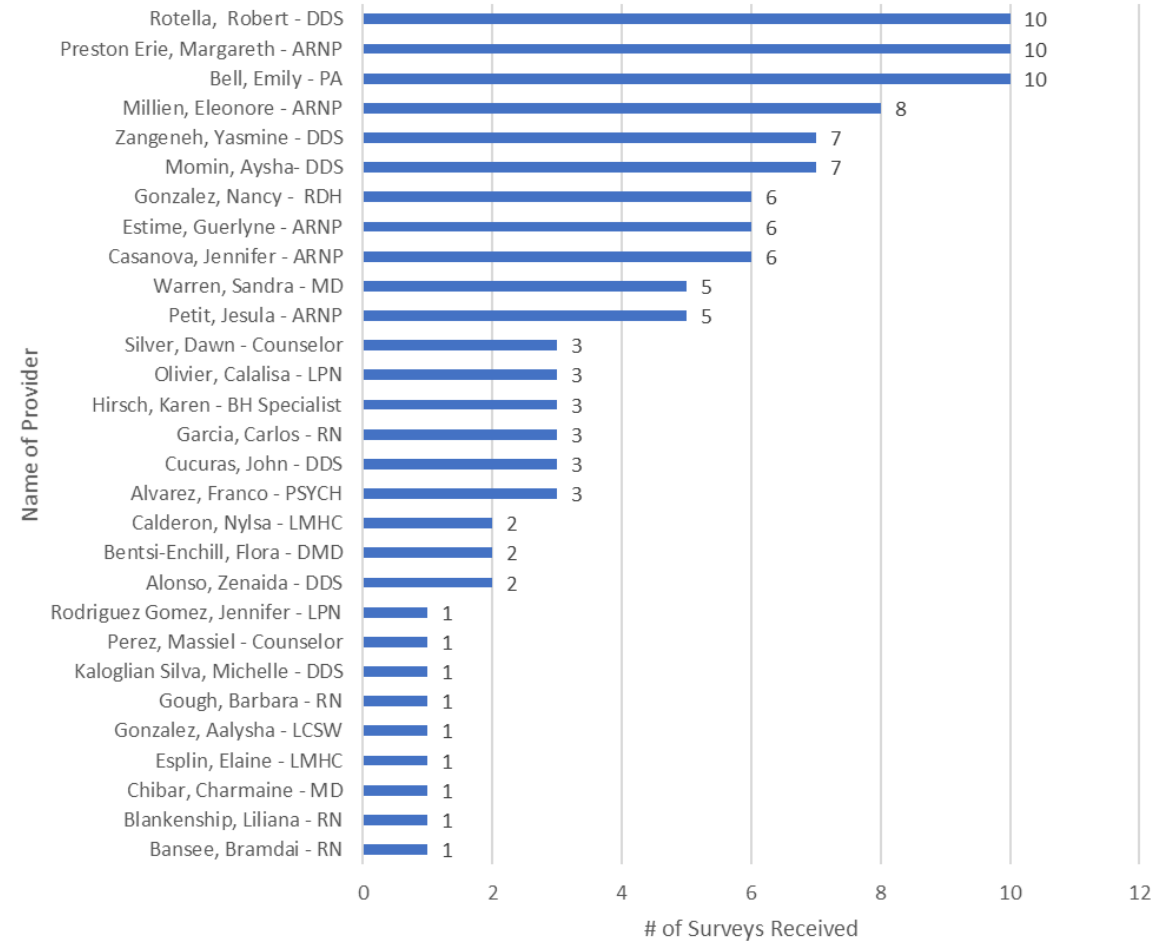


# Survey's Received – By Provider / Clinical Team Member

80% of the Patient Satisfaction Survey's contained a Named Provider

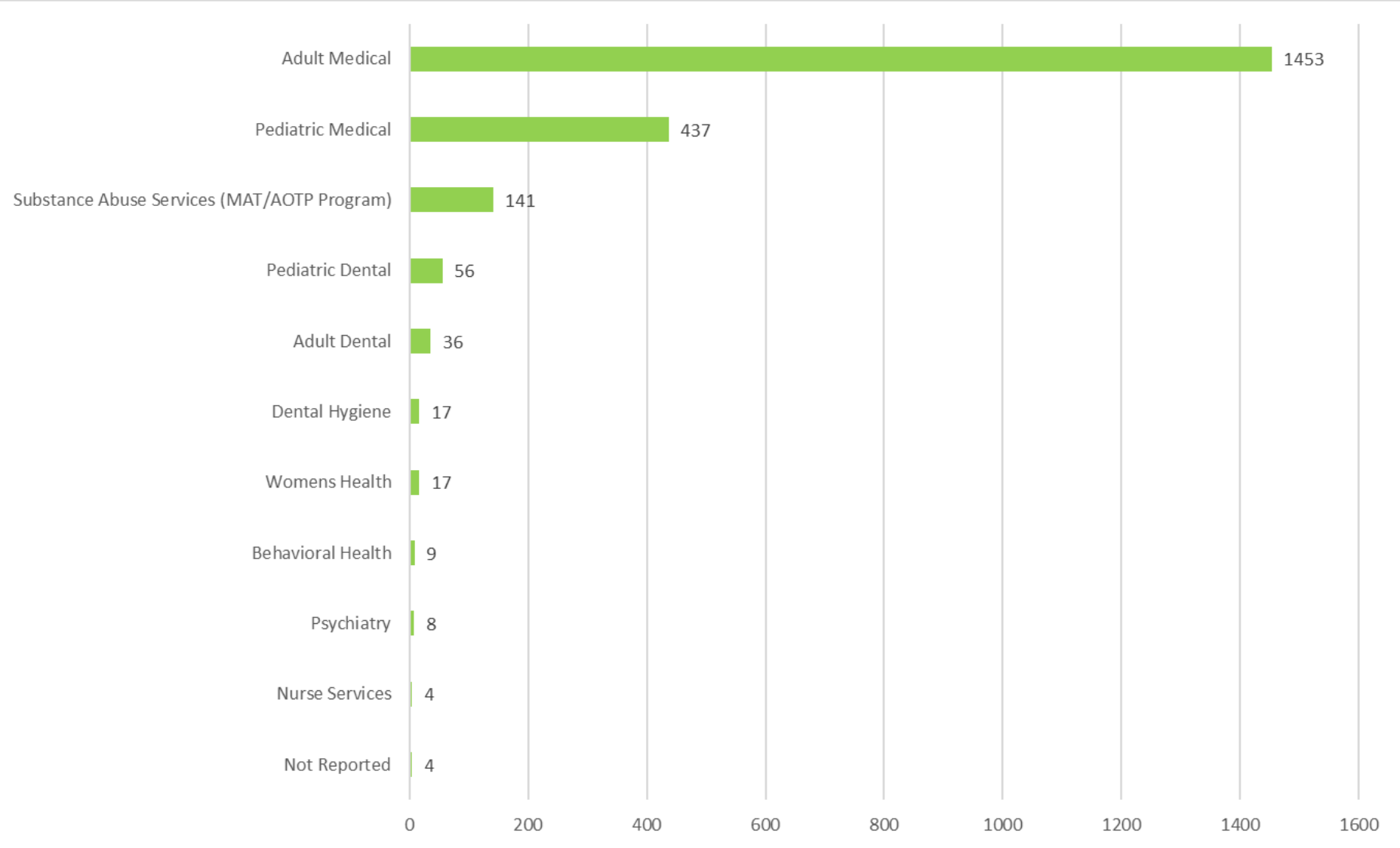


80% of the Patient Satisfaction Survey's contained a Named Provider





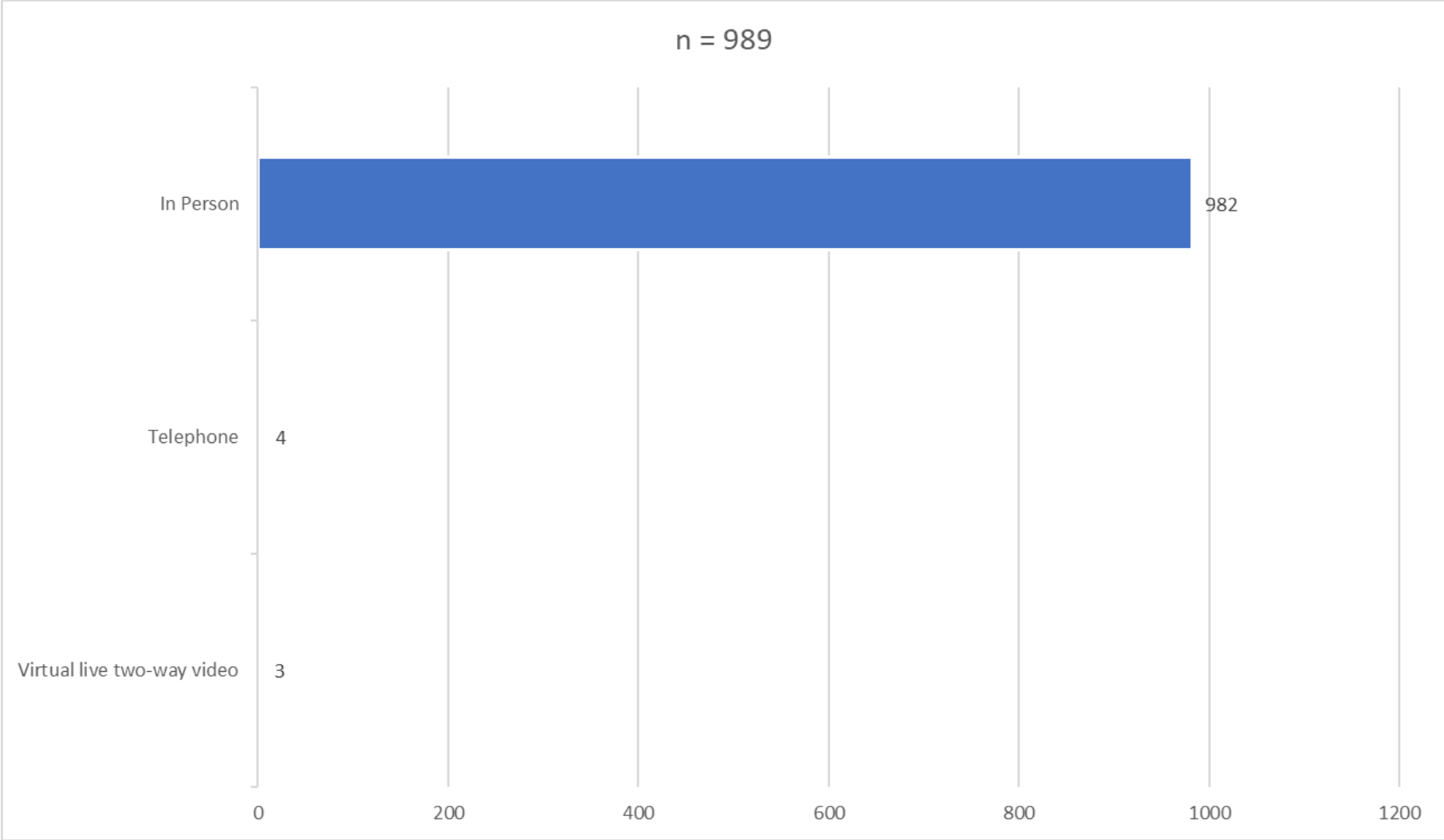
# Patient Service Utilization





# Service Delivery Method

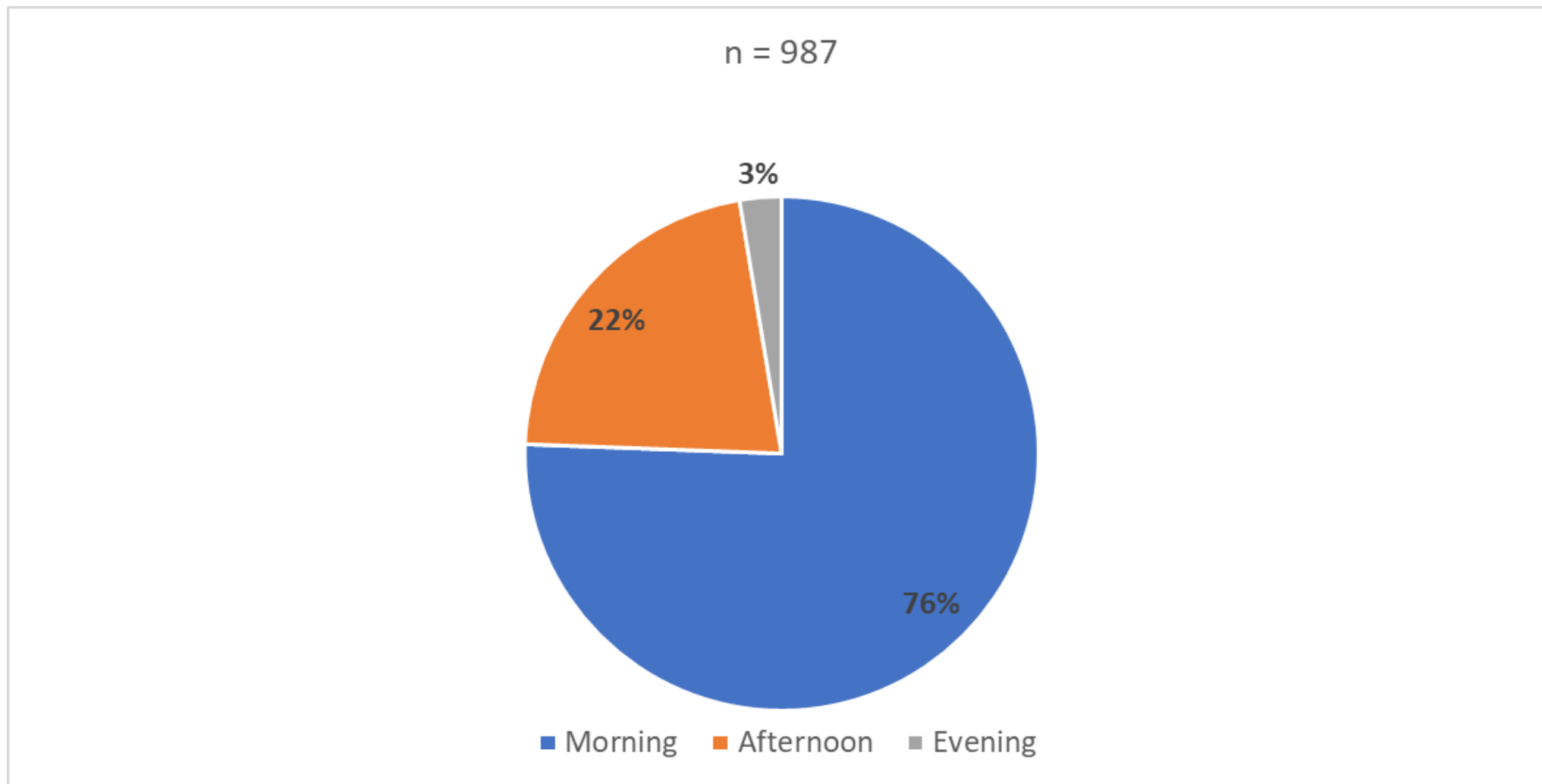
(Implemented 7/27/2020)





# What time of day do you prefer to have your appointment?

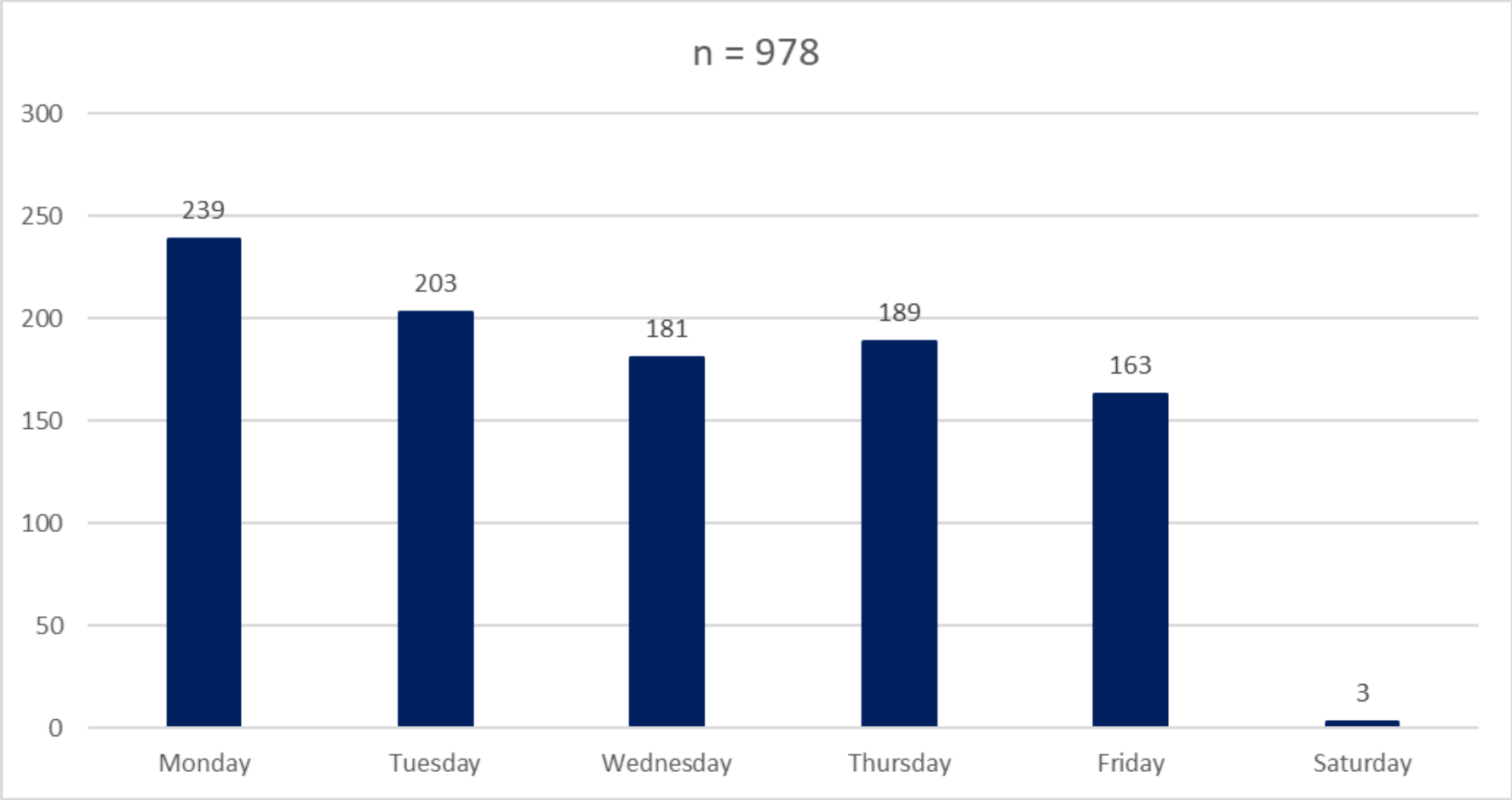
(Implemented 7/27/2020)





# What day of the week do you prefer to be seen?

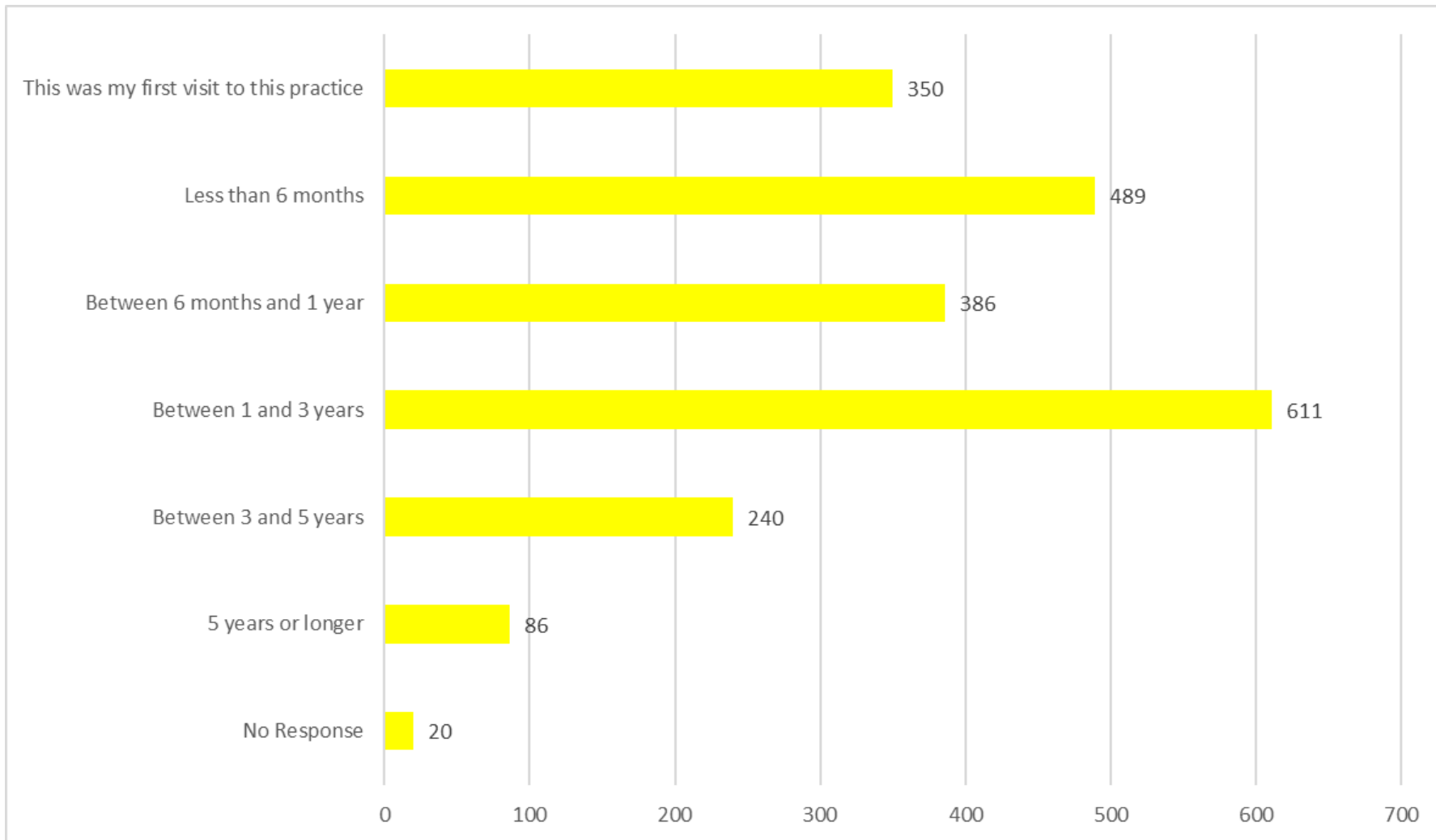
(Implemented 7/27/2020)



24% of patients surveyed prefer to have their appointment scheduled on a Monday.



# How long have you been going to C.L. Brumback Primary Care Clinic?

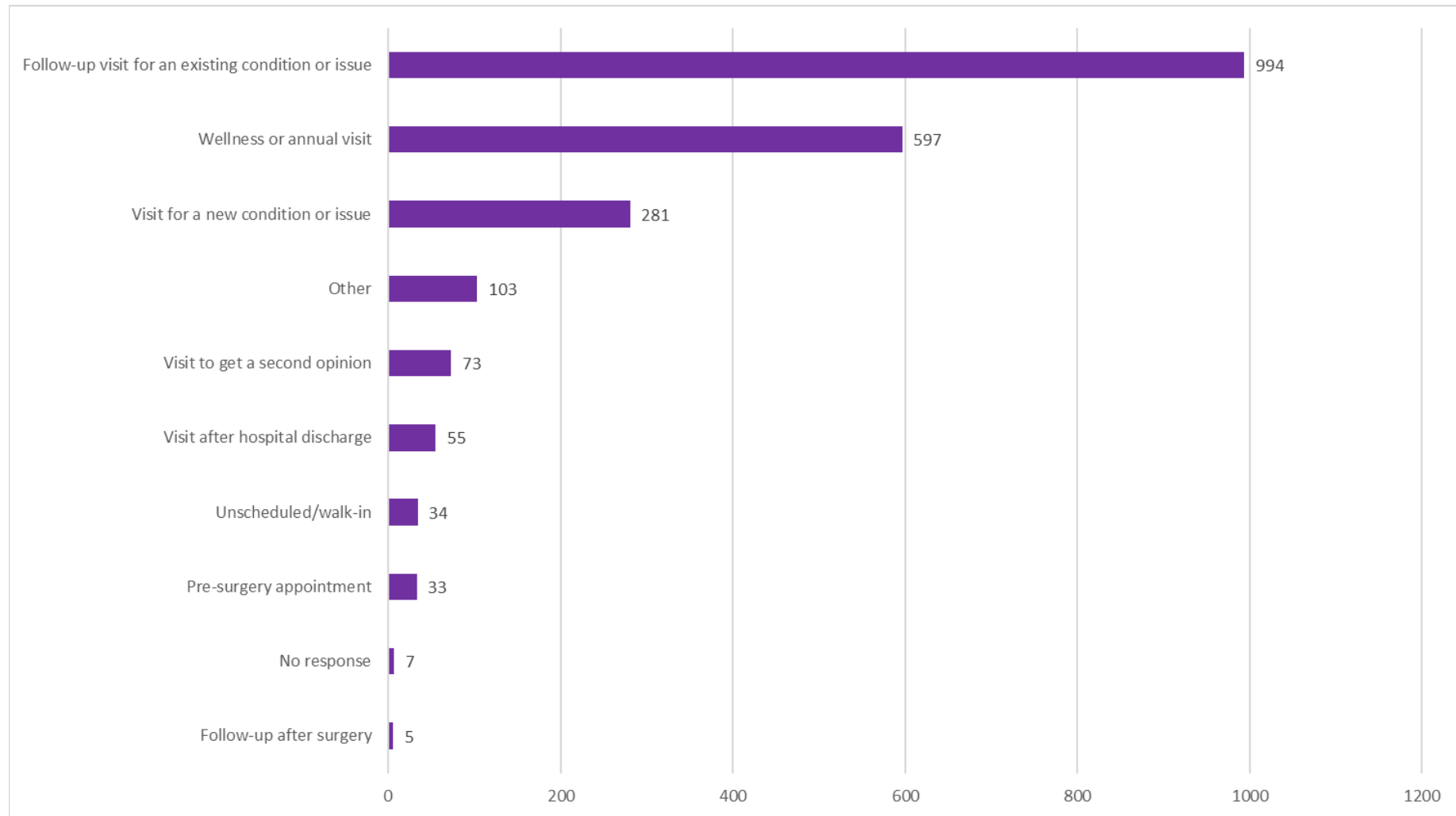


28% of patients surveyed attended the practice between 1 and 3 years





# What is the reason for your clinic visit?



46% of patients surveyed were seen for a follow-up visit for an existing condition or issue.



# Patient Satisfaction VS Patient Experience

## **Patient Satisfaction:**

- “Whether a patient’s expectations about a health encounter were met. Two people who receive the exact same care, but who have different expectations for how that care is supposed to be delivered, can give different satisfaction ratings because of their different expectations” - Agency for Healthcare Research and Quality (AHRQ)
- The extent to which patients are happy with their healthcare, both inside and outside of the doctor's office.

## **Patient Experience (PX):**

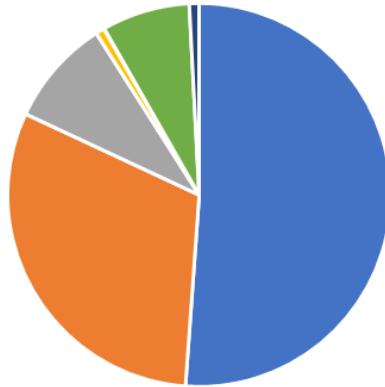
- “The sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care” - The Beryl Institute
- To assess patient experience, one must find out from patients whether something that should happen in a health care setting (such as clear communication with a provider) actually happened or how often it happened.



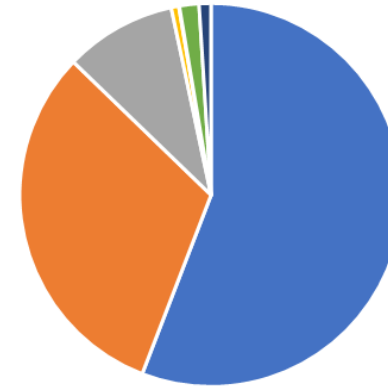
# Patient Satisfaction - Clinic Provider Ratings

■ Excellent ■ Very Good ■ Good ■ Poor ■ Fair ■ N/A - Does not apply ■ No Response

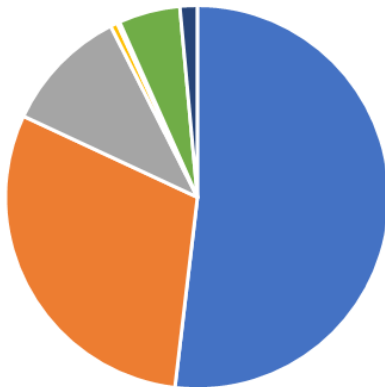
Providing details about new medications prescribed



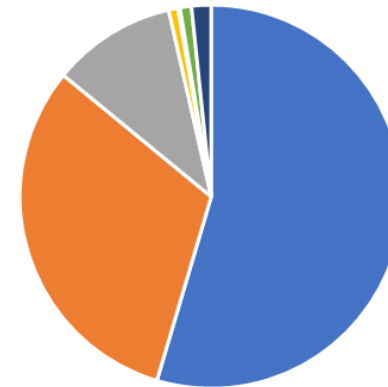
Informing you about any necessary follow-up care



Being aware of care you received from other doctors/providers, not in this practice



Spending as much time with you as you feel you need

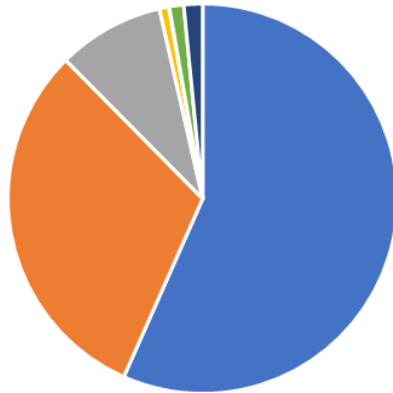




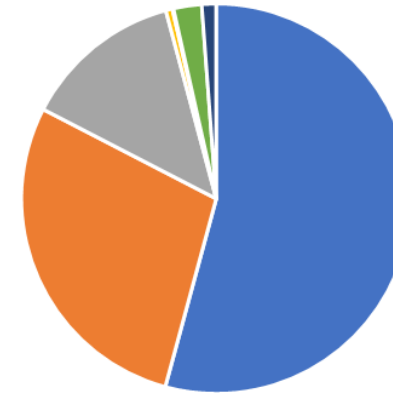
# Patient Satisfaction - Clinic Provider Ratings

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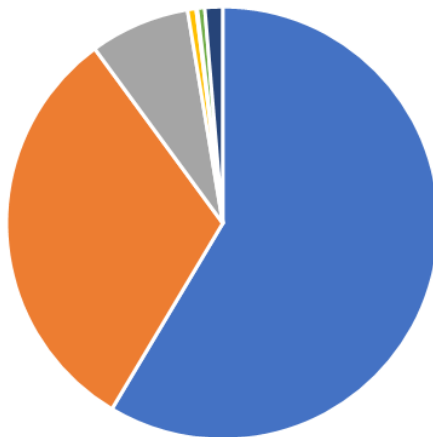
Involving you in making decisions about your health



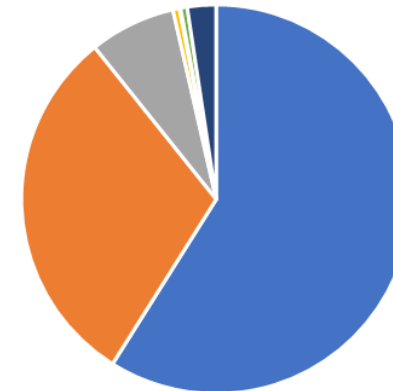
Balancing personal interaction with you while using a laptop or computer



Listening carefully and respectfully to you

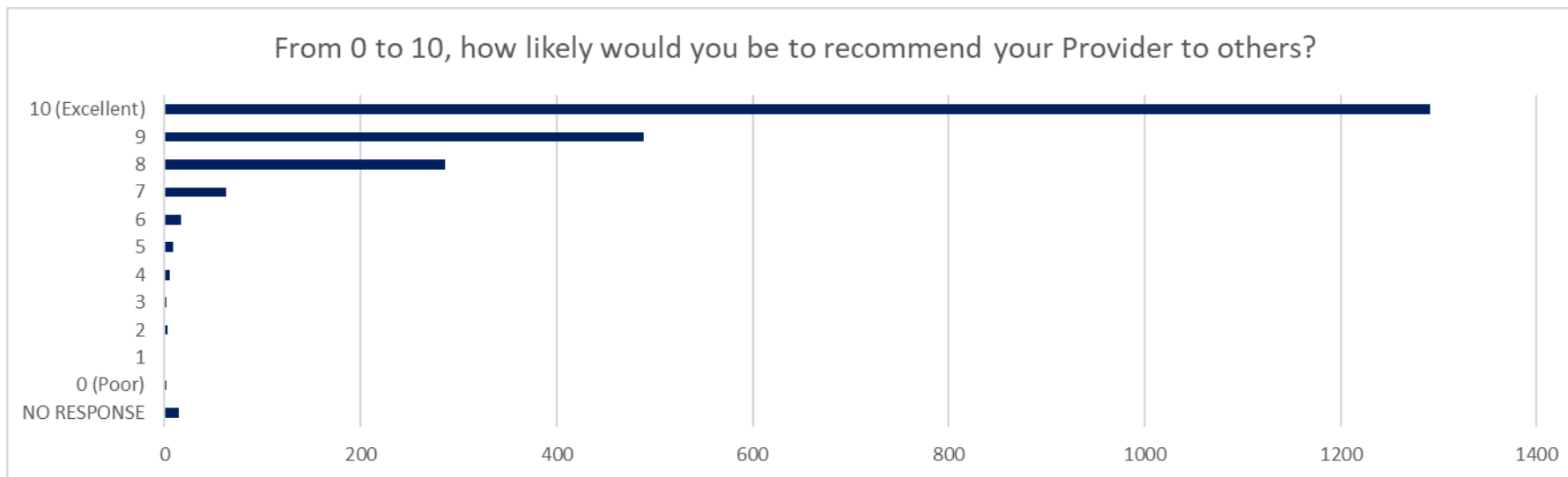
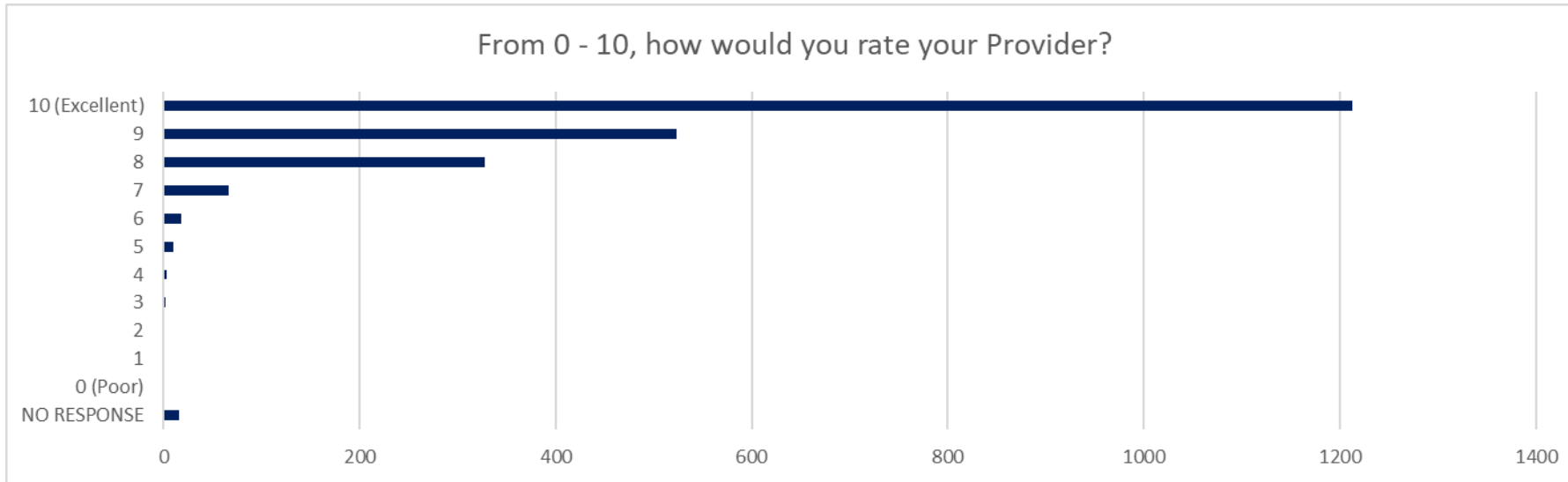


Explaining things in a way that is easy to understand





# Patient Satisfaction - Clinic Provider Ratings





# Patient Satisfaction - Summary

## STRENGTHS

- Informing patients on necessary follow-up care
- Communicating clearly with patients
- Time being spent with patients

## OPPORTUNITIES

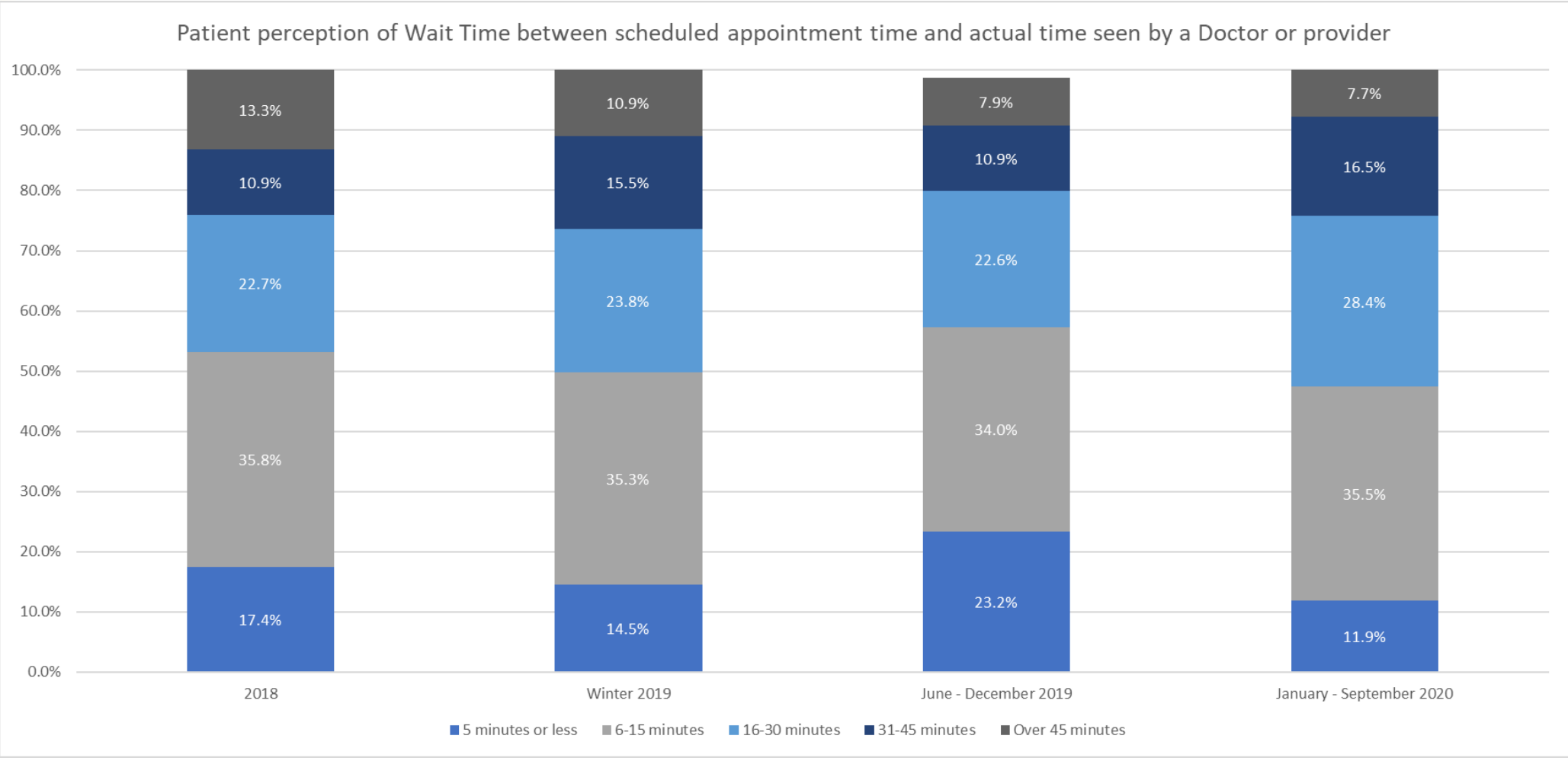
- Provide more details about new medications prescribed.
- Being aware of care you received from other doctors/providers, not in this practice

## INTERVENTIONS IN 2020

- Medications - Launched the “BYMY” (**B**ring **Y**our **M**edications with **Y**ou) campaign to improve and increase medication review and reconciliation with patients.
- Outside Providers / Specialist's - Expanded Phone Tree to include Medical Records and Community Care Plan (CCP).



# Patient Experience - Wait Time Perceptions



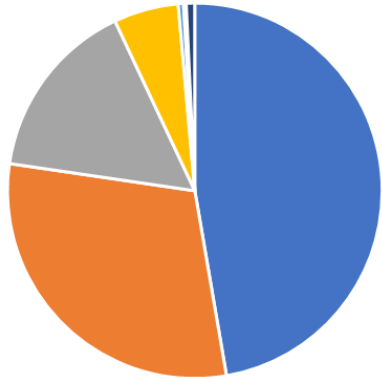
- Patient Experience related to perceived wait time is improving.
- Perceived wait time “Over 45 Minutes” at its lowest in 2 years, continuing to trend downward.
- In May 2020 the clinics launched “Phreesia” – an electronic / mobile patient registration and intake software service.



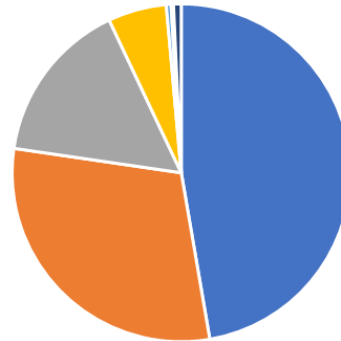
# Patient Experience - Clinic Operations

■ Strongly Agree   ■ Agree   ■ Not Sure   ■ Disagree   ■ Strongly Disagree   ■ N/A - Does not apply   ■ No Response

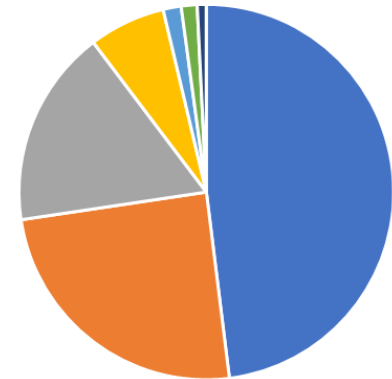
Having a comfortable and pleasant waiting area



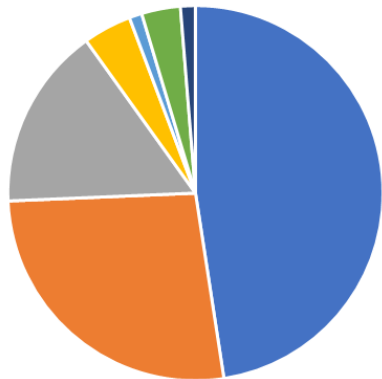
Ability to communicate with the practice on the phone



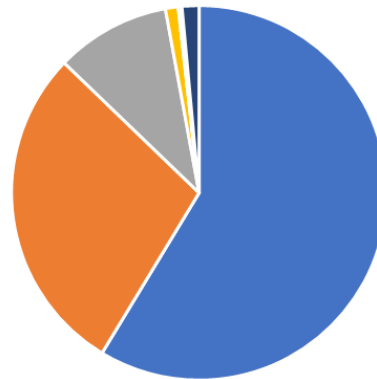
Ease of scheduling this appointment



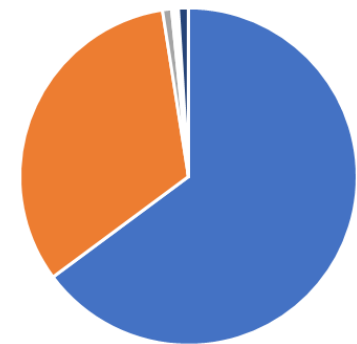
Being informed about any delays during this visit



Maintaining patient privacy throughout this visit



The doctors, nurses, and other staff did a good job coordinating care during my visit



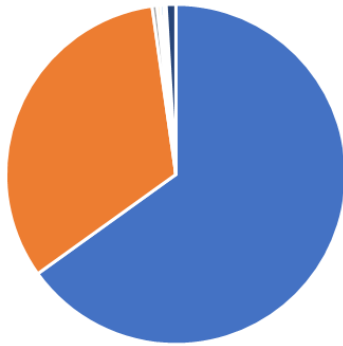




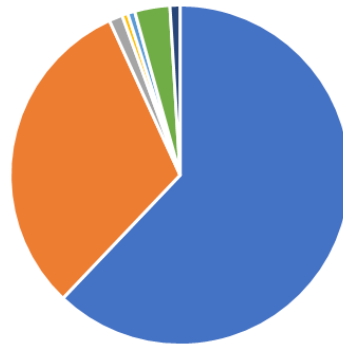
# Patient Experience - Provider & Staff Ratings

■ Excellent ■ Very Good ■ Good ■ Poor ■ Fair ■ N/A - Does not apply ■ No Response

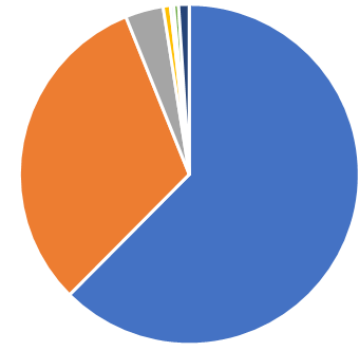
Check-in and check-out staff were respectful and courteous



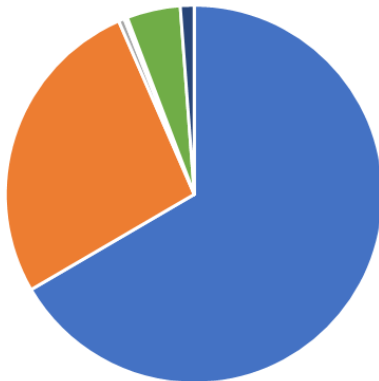
Phone and scheduling staff were respectful and courteous



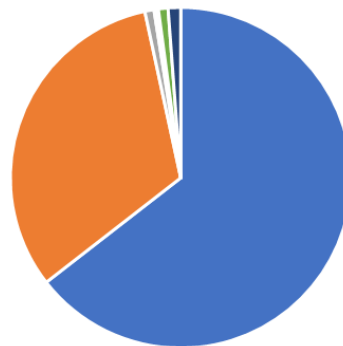
Each member of my care team identified themselves and their role in my care



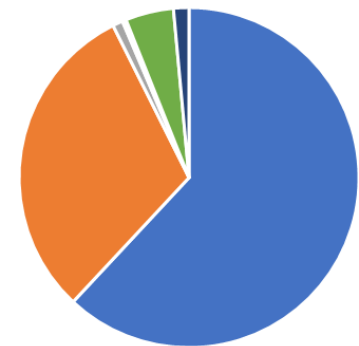
Nursing staff was respectful and courteous



The staff clearly explained the details of any procedures

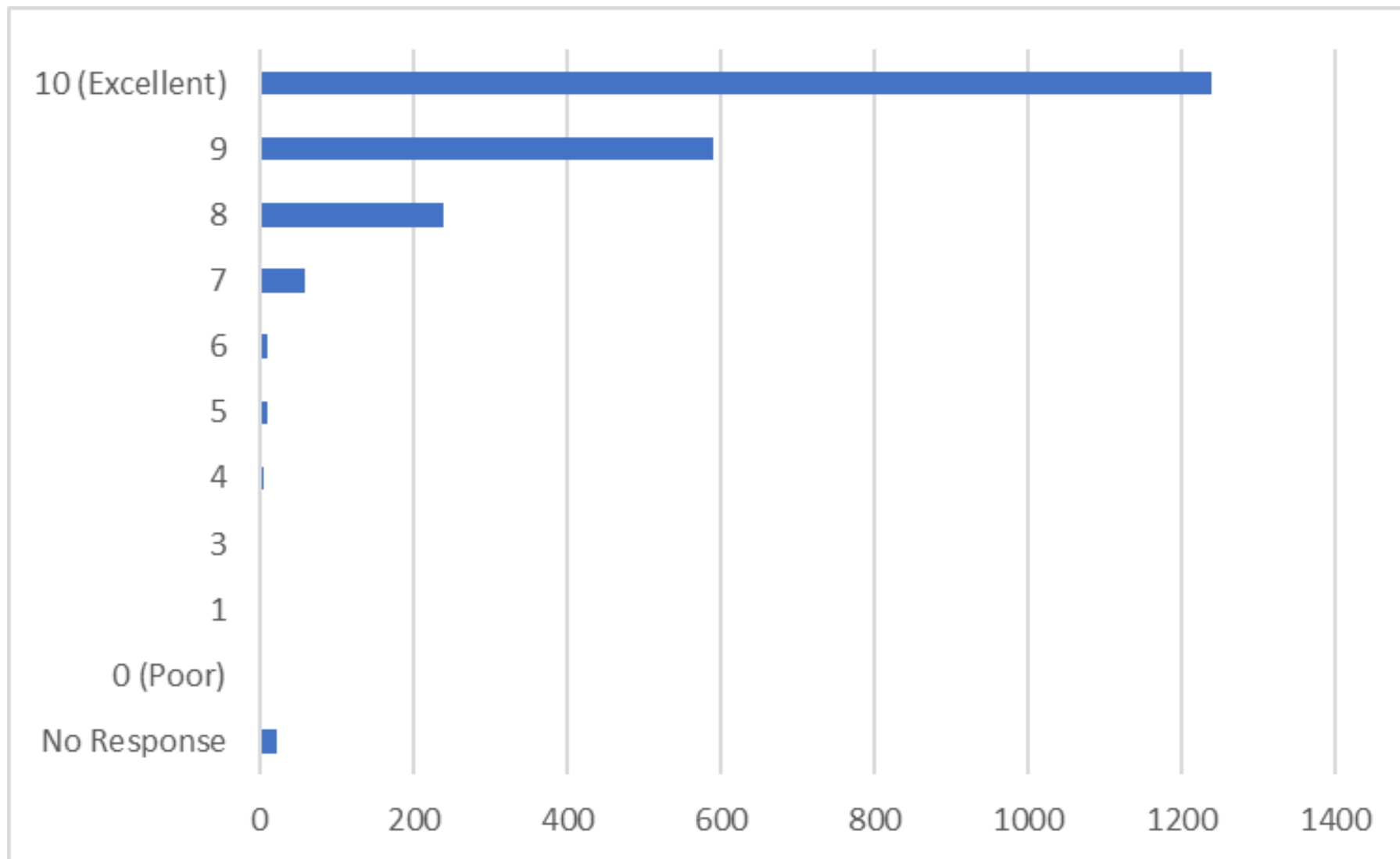


The practice worked with my other providers to coordinate my care effectively





## How likely would you be to recommend this Practice to others?





# Patient Experience - Summary

## STRENGTHS

- Managing Patient privacy
- The doctors, nurses, and other staff did a good job coordinating care during my visit
- Respectful and courteous staff
- Decreased patient wait time
- Likely to recommend Practice to others

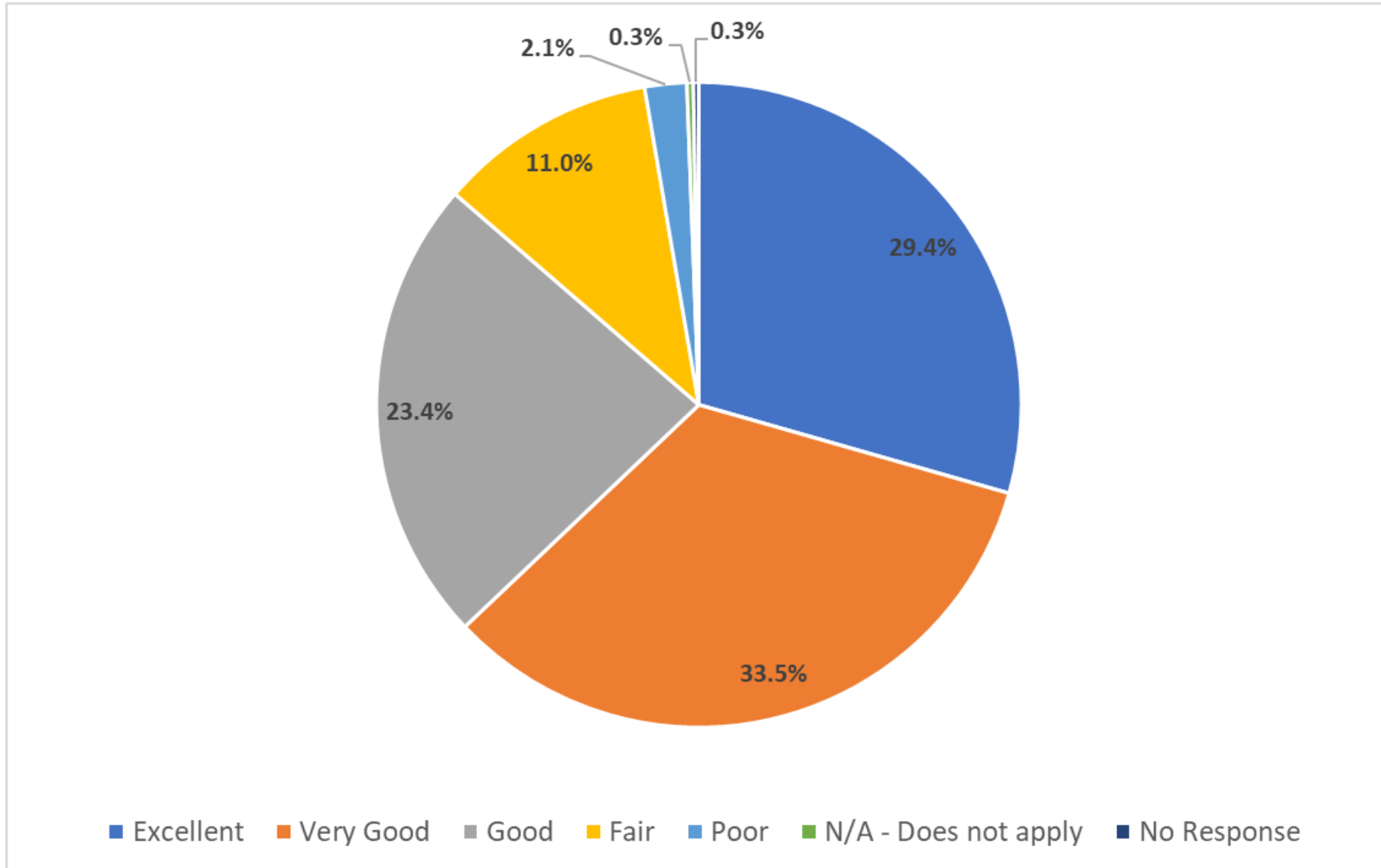
## OPPORTUNITIES

- Improvement to the waiting area (6% of completed surveys rated below a score of “good”)
- Communication by phone (6% of completed surveys rated below a score of “good”)
- Ease of scheduling appointments (7% of completed surveys rated below a score of “good”)
- Being informed bout delays (4% of completed surveys rated below a score of “good”)

## INTERVENTIONS IN 2020

- Wait Area: Updated furniture & space in Lantana; Placed brochures in clinics; Utilize “SnapComm” for patient and staff-facing communication.
- Communication By Phone: Established the Clinic Service Center (CSC) under Clinic Operations and increased number of Agents; Revised the Phone Tree; Created CSC dashboards, reports and metrics; Revising CSC workflows.
- Ease of Scheduling: Launched Phreesia; Offer Telemedicine appointments, Increased # of phone agents
- Delays / Wait Times: Initiated the routine measurement of Patient Cycle Time and 3<sup>rd</sup> Next Available; updating provider templates; share metrics with all clinic teams.

# How would you rate your overall health?





# Patient Comments – Clinic Strengths

- “Very good service, very caring. Thanks so much for your help”
- “He has called me while he was away to tell me about a test I needed to take”
- “Healthcare District has been a God send for me and my hope of improving my mental and physical health. I wouldn't have a way to address my needs in service, or medicine without Healthcare assistance. So, I'm very appreciative of the services you provide and for allowing me to have the best I've ever had in my 59+ Years of living!”
- “MA went above and beyond to help me obtain my records from specialists”
- “I feel so much better than I did my first visit! I am so filled with hope, now that I am apart of this team of great supporters and professionals. Grateful the word cant describe my mood enough for my gratitude”
- “I have referred others to this clinic. The doctors and therapists here are very personal and have always reached out to be a help to me”
- “Very positive initial visit”
- “Everyone is great and I am very thankful blessed grateful for the care given me and time spent”
- “Keep doing GREATNESS!”
- “The people who work at this office are amazing. They are always nice and are very attentive with their patients. I enjoy coming to my appointments”
- “Everyone is very nice and attentive. I will recommend the HCD to anyone in need of a Dr. thank you guys for all you do for me”



# Patient Comments – Clinic Strengths

- “I really enjoy coming here. Everyone is very pleasant & that helps my recovery process”
- “Everyone at this clinic is really nice and helps with all my medical questions. I am always treated with care and compassion”
- “Took time to listen to my concerns and went above and beyond to help me move forward with my treatment plan and after care”
- “I can not say enough positive things about this program and the people who run it. They go above and beyond in every situation and since I've been in the program help has always been a phone call away. The nurses and doctors treat you with dignity and respect and thanks to their help I have a great life today”
- “Anyone struggling to get clean please pick up the phone and call them they will help.”
- “This program has been a greater good for my life. The quality of my life is something I take very seriously, I definitely owe this program and the staff of professionals who make it all magical”
- “My healthcare provider provides me with excellent service. I always leave feeling satisfied”
- “Thank you for being so caring and time spent with me . Answering all my concerns. Prompt on stat issues , making sure everything is correct”
- “I am always treated with respect and everyone makes me feel like they truly care”
- “This program saved my Life! The staff is amazing compassionate and caring!”
- “I felt right at home”



# Patient Comments - Areas of Opportunities

- “It would have very helpful if they let patients know when your regular doctor will not been in”
- “Reception needs to be more understanding, also on the phone”
- “It took a long time to see the doctor. I have a newborn”
- “I’m disappointed that I have to go somewhere else for blood tests. If I had known that I would have gone to a different doctors office”
- “So hard to get an appointment”
- “You cannot communicate by phone”
- “It would be good if there was a direct telephone line to communicate with the front desk”
- “The waiting time for the doctor to see you is too long”
- “They must extend the waiting room”
- “There is no access to the dental clinic”
- “More availability to receiving calls and directed to the proper reason of the call”
- “Make people aware about impending paperwork needed before visits”
- “A little warm in facilities”
- “Providers need to be a little bit discreet while with patients”



# Areas of Opportunities - Interventions

## 1. Improve Communication between Patient, Clinic, and Support Staff

- Reconstructed the clinic phone tree from 4 options to 10 options. Patients can reach a live agent to schedule an appointment or leave a message for Nursing, Referral Clerks, Billing Staff, Medical Records, and a Certified Application Counselor. Voicemails are tracked.
- Created a Clinic Service Center that focuses on patient registration, appointment scheduling, responding to inbound calls, and returning voicemails. Increased staffing of the Clinic Service Center Team.
- Created metrics and productivity benchmarks for the Clinic Service Center.
- Launched scripts to improve customer service by phone.
- Leadership monitors, assesses, and documents agent calls weekly to improve customer service.

## 2. Improve Customer Service

- In process of streamlining communication across staff members through development of scripts.
- Launched “Phreesia” – an electronic registration / intake software program to pre-register patients.
- Hired a Patient Relations Manager to address patient complaints and grievances.

## 3. Wait Time

- Created Patient Cycle Time report to measure and manage patient cycle time for all appointment types & service lines.
- Trained staff to “Chart-Prep” charts in advance of a patient’s appointment.

## 4. Patient Access

- Created a “Time to Third” appointment report to measure and manage patient access.
- Implemented Telemedicine appointments at all clinic sites.
- A PDCA (Plan Do Study Act) quality initiative was created to improve areas of concern related to patient access.



**District Clinic Holdings, Inc.  
d.b.a. C.L. Brumback Primary Care Clinics  
Board of Directors Meeting  
Summary Minutes  
09/30/2020**

**Present:** Mike Smith, Chairperson; Melissa Mastrangelo, Vice-Chairperson; Irene Figueroa, Secretary; Tammy Jackson-Moore, Treasurer; James Elder; John Casey Mullen; Julia Bullard; Marjorie Etienne

**Excused:**

**Absent:** Lisa Strickland

**Staff:** Darcy Davis, Chief Executive Officer; Dr. Belma Andric, CMO, VP & Executive Director of Clinical Services; Valerie Shahriari, General Counsel; Joel Snook, VP & Chief Financial Officer; Steven Hurwitz, VP, Chief HR & Administrative Officer; Dr. Hyla Fritsch, Executive Director of FQHC Practice Operations and Pharmacy Services; Shauniel Brown, Risk Manager; Dr. Ana Ferwerda, Medical Director; Thomas Cleare, Assistant Vice President, Planning & Community Engagement; Robin Kish, Director of Community Engagement; Andrea Steele, Director of Corporate Quality ; Lisa Hogans, Director of Nursing; Joshua Burrill, Director of Compliance and Internal Audit; Dominique Domond, Operations Process Manager, Dr. Jennifer Dorce-Medard ACO, Lakeside Medical Center, DIO, Family Medicine Residency Program; Marisol Miranda, Director of Practice Management; Hector Sanchez, Director of Security Services; Dr. Seneca Harberger, Family Medicine Residency Program Director; Rosella Weymer, AVP, HR & School Health; Martha Hyacinthe, Director of Corporate Risk; David Speciale, Director of Patient Relations; Patricia Lavelly, Interim CIO.

**Minutes Transcribed By:** Jonathan Dominique

**Meeting Scheduled For** 12:45 PM

**Meeting Began at** 12:47PM

AGENDA ITEM	DISCUSSION	ACTION
<b>1. Call to Order</b>	Mr. Smith called the meeting to order.	<b>The meeting was called to order at 12:47pm</b>
<b>1A. Roll Call</b>	Roll call was taken.	
<b>1B. Affirmation of Mission</b>	Mr. Smith read the affirmation of mission.	

<p><b>2. Agenda Approval</b></p> <p><b>2A. Additions/Deletions/ Substitutions</b></p> <p><b>2B. Motion to Approve Agenda Items</b></p>	<p>Mr. Smith asked if the team could provide the board with a monthly general COVID update (along with the clinical data provided every month). Dr. Andric offered to provide update as part of the Executive director comments.</p> <p>Mr. Smith called for an approval of the meeting agenda.</p> <p>The agenda for the September 2020 meeting was approved.</p>	<p><b>VOTE TAKEN: Ms. Mastrangelo made a motion to approve the agenda. The motion was duly seconded by Ms. Jackson-Moore. A vote was called, and the motion passed unanimously.</b></p>
<p><b>3. Awards, Introductions and Presentations</b></p>	<p>Dr. Seneca Harberger, Residency Program Director of the Lakeside Family Medicine Residency program, provided the Clinics board information on the Residency program. Dr. Harberger introduced the FMRP team including preceptors, coordinators, and other clinical educators. Dr. Harberger also covered:</p> <ul style="list-style-type: none"> <li>• Residency program structure</li> <li>• Recent changes in the program</li> <li>• Contributions to both patient care and the community as a whole</li> <li>• Plans for improvement</li> </ul> <p>Dr. Andric asked how much time the residents spend in the clinics. Dr. Harberger explained that, in addition to their inpatient training, residents spend a minimum of at least five hours per week in the clinics to upwards of 60% of their time (depending on their clinical rotation). Mr. Smith asked about financial incentives for residents that decide to stay with the organization after graduation. Dr. Harberger explained that Residents can get a part of their loans paid if they work for any nonprofit for a certain amount of time, but he would like to develop other incentives specific to HCD in order to retain these physicians.</p>	<p><b>No action necessary.</b></p>

	<p>Rosella Weymer, Director of Human Resources Presented the Employee Engagement Survey 2020.</p> <p>In this presentation Ms. Weymer covered the following</p> <ul style="list-style-type: none"> <li>• The purpose behind the employee engagement survey including the benefits of higher employee engagement.</li> <li>• The 12 questions listed in the employee engagement survey.</li> <li>• HCD Response Rate, Mean, Engagement Percentage</li> <li>• Identifying the Top strengths and Areas of opportunity.</li> <li>• A timeline for Action / Improvement Plans, and survey schedule.</li> </ul> <p>There were no questions.</p>	
<b>4. Disclosure of Voting Conflict</b>	None.	<b>No action necessary.</b>
<b>5. Public Comment</b>	None.	<b>No action necessary.</b>
<b>6. Meeting Minutes</b>  <b>6A-1 Staff Recommends a MOTION TO APPROVE:</b> Board meeting minutes of August 26, 2020	There were no changes or comments to the minutes dated August 26, 2020	<b>VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the Board meeting minutes of August 26, 2020 as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.</b>
<b>7. Consent Agenda – Motion to Approve Consent Agenda Items</b>		<b>VOTE TAKEN: Ms. Bullard made a motion to approve the consent agenda as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.</b>

<b>7A. ADMINISTRATION</b>		
<b>7A-1. Receive &amp; File:</b> September 2020 Internet Posting of District Public Meeting	The meeting notice was posted.	<b>Receive &amp; File. No further action necessary.</b>
<b>7A-2. Receive &amp; File:</b> Attendance tracking	Attendance tracking was updated.	<b>Receive &amp; File. No further action necessary.</b>
<b>7A-3. Receive &amp; File:</b> Change in Board Schedule	At the August 2020 meeting, the board discussed moving its scheduled November meeting from November 25, 2020 to November 30, 2020. This would allow for travel during the holiday, time for reports to be prepared, whilst still allowing a meeting to take place in the month of November.	<b>Motion referenced above, no further action necessary.</b>
<b>7B. FINANCE</b>		
<b>7B-1 Receive &amp; File:</b> C. L. Brumback Primary Care Clinics Financial Report – July 2020	The YTD July 2020 financial statements for the District Clinic Holdings, Inc. presented for Board review. Management has provided the income statements and key statistical information for District Clinic Holdings, Inc. Additional Management discussion and analysis are incorporated into the financial statement presentation.	<b>Receive &amp; File. No further action necessary.</b>
<b>8. REGULAR AGENDA</b>		
<b>8A. EXECUTIVE</b>		
<b>8A-1. Staff Recommends a MOTION TO APPROVE:</b> Executive Director’s Annual Evaluation	The Bylaws and HRSA Compliance Manual indicate that the Executive Director of the Clinics be evaluated annually. This evaluation is then to be reviewed and approved by the Board. Dr. Belma Andric, CMO, VP & Executive Director of Clinical Services was evaluated by the Board members in her role as the Executive Director of Clinical services. The results were tallied, and brought to the board members under separate cover.	<b>VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the Executive Director’s Annual Evaluation as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.</b>

<p><b>8A-2. Staff Recommends a MOTION TO APPROVE:</b> Change in Scope – Bylaws Update</p>	<p>Mr. Cleare presented for a second time the following updates made to the bylaws for board approval: This agenda item presents a change to the District Clinics Holdings, Inc. Bylaws. Per the Bylaws, all changes must come before the Board for two meetings before final approval. The Bylaw Change below was initially approved at the August 26, 2020 Board Meeting. If approved at today's meeting, we will officially update the Bylaws to reflect the change. The change, provided below, allows the Quality Council meetings to be postponed during a state of emergency.</p> <p style="padding-left: 40px;">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. <u>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.</u> The Executive Director, or his/her designee, will serve as a non-voting, ex-officio member of this committee.</p>	<p><b>VOTE TAKEN: Ms. Mastrangelo made a motion to approve the Change in Scope as presented. The motion was duly seconded by Ms. Jackson-Moore. A vote was called, and the motion passed unanimously.</b></p>
<p><b>8A-3. Staff Recommends a MOTION TO APPROVE:</b> Department of Security Services Policy of Operations.</p>	<p>Mr. Hector Sanchez, Director of Security This agenda item presents the Department of Security Services (DSS) Policy of Operations to ensure the referred complies with corresponding regulatory, compliance, and best industry practices. The Department of Security Services (DSS) Policy of Operations will serve as the guidance and foundation of subsequent Policies, Procedures, Protocols, Plans, and SOPs supporting the safety, protection, and</p>	<p><b>VOTE TAKEN: Mr. Mullen made a motion to approve the adoption of the Department of Security Services Policy of Operations as presented. The motion was duly seconded by Ms. Jackson-Moore. A vote was called, and the motion passed unanimously.</b></p>

	<p>security of all business units, employees, patients, visitors, vendors, contractors, suppliers, intellectual &amp; physical property, and reputation.</p>	
<p><b>8B. EXECUTIVE</b></p>		
<p><b>8B-1. Receive &amp; File:</b> Executive Director Informational Update</p>	<p>Dr. Andric provided the following updates to the board: The Health Resources and Services Administration's Bureau of Primary Health Care (BPHC) has completed their review of our FTCA application. The Notice of Deeming Action (NDA) for FY2021 was issued on 8/25/2020. In reference to Mr. Smith's earlier question regarding benefits for residents who stay on as employees after graduation; Dr. Andric pointed out that this is yet another benefit we can afford that most other non-profits cannot provide: The ability to cover physician malpractice insurance. The team monitors both quality and risk metrics constantly in order to maintain HRSA approved standards.</p> <p>The Health Resources and Services Administration (HRSA) recognized the C. L. Brumback Primary Care Clinics with several Health Center Quality Improvement Fiscal Year 2020 Grant Awards, including \$180,431 and a gold badge as a Health Center Quality Leader for ranking among the top 10% of health centers nationally for clinical quality. The Brumback Clinics received recognition in the following categories:</p> <ul style="list-style-type: none"> <li>• Gold Health Center Quality Leader: Achieved the best overall clinical performance among all health centers and were recognized in the Gold tier (top 10%).</li> <li>• Clinical Quality Improvers: Demonstrated at least 15% improvement for each clinical quality measures (CQM) from 2018 to 2019.</li> <li>• Advancing Health Information Technology (HIT) for Quality: Recognized health centers that optimized health information technology services for advancing telehealth, patient engagement, interoperability, and collection of social determinants of health to increase</li> </ul>	<p><b>Receive &amp; File. No further action necessary.</b></p>

	<p>access to care and advance quality of care between 2018 and 2019.</p> <ul style="list-style-type: none"> <li>• Patient Centered Medical Home (PCMH) Recognition: Recognized health centers with patient centered medical home recognition in one or more delivery sites.</li> </ul> <p>The Brumback Clinics also received \$167,000 for the second year of supplemental funding for Integrated Behavioral Health Services (IBHS) for fiscal year 2019. Our third Mobile Clinic arrived on 9/25/2020. Our IT department is currently making preparations for deployment.</p> <p>Dr. Andric also presented the board with pictures of the New mobile clinic 'HERO'.</p>	
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**8C. OPERATIONS**

<p><b>8C-1. Staff Recommends a MOTION TO APPROVE:</b> Operations Reports – September 2020</p>	<p>Dr. Hyla Fritsch, Director of Clinical Operations and Pharmacy Services, presented the following report: The Clinics continue to see an increase in overall total billable visits since the start of the pandemic, with just under 9,000 in the previous month, which is slightly lower than July. Telemedicine visits comprise almost 30% of overall visits. No Show percentages are slightly lower at 17%, which is down from 18% in July. Pediatric services are meeting productivity targets for both in-person and telehealth visits. Approximately 40% of adult providers are at or over 100% of their productivity targets for in-person visits while 22% are at target for telehealth visits. Boca Clinic is nearly 100% of productivity targets in both in-person and telehealth. Clinic Service Center (CSC) received 61,617 calls from 24,739 unique phone numbers. Mr. Smith asked about how it is possible to have 80,000 unique visits YTD, while fielding only 61,000 phone calls. Dr. Andric explained that we could attribute the high number of calls to testing, billing, claims, referrals, etc. Mr. Smith then asked if the</p>	<p><b>VOTE TAKEN: Ms. Mastrangelo made a motion to approve the September 2020 Operations Report as presented. The motion was duly seconded by Ms. Bullard. A vote was called, and the motion passed unanimously.</b></p>
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	<p>team could route these calls to an automated system. Dr. Andric and Dr. Fritsch confirmed that this is already the case. The busiest time of the day continues to be morning hours, and the busiest day of the week is typically Monday. Mr. Mullen inquired about the turnaround time for testing. Dr. Fritsch informed Mr. Mullen that the numbers for Access Lab kits are twenty-four hours, while Quest / GENETWORx kits see turnaround times of about two days. Mr. Smith asked if we ever compare our internal HCD COVID numbers to the rest of the county, or other places. Dr. Fritsch informed Mr. Smith that the team provides the county with our data, and the county passes that information along to the Governor's office. We are currently providing drive thru COVID-19 testing at the FITTEAM Ball Park and Belle Glade Clinic. Additionally, we offer walk up and walk in testing in Jupiter, West Palm Beach, Lantana, Delray, Belle Glade, and Outreach (our new mobile testing unit Scout). Clinic Service Center has fielded 8,490 calls from 5,939 unique numbers.</p>	
<p><b>8D. Quality</b></p>		
<p><b>8D-1. Staff Recommends a MOTION TO APPROVE</b> Quality Reports</p>	<p>Dr. Ana Ferwerda, Medical Director and Director of Women's Health presented the following: Patient safety and risk, including adverse events, peer review and chart review are brought to the board "under separate cover" on a quarterly basis. 1,739 surveys were completed since January 2020. Twenty-two percent were completed in Spanish, 6% in Creole and 72% in English. The team is making a concerted effort to increase the number of non-English surveys conducted. The highest number of respondents were between the ages of 50-59. The majority of the patients were pleased with their care. There was a perceived increase in wait time, perhaps due to new COVID-19 safety measures. For August 2020, there were a total of 19 complaints and grievances received. 6 out of 19 were from Boca Clinic. The top 5 categories were Communication, Other, Care &amp; Treatment, Physician Related and Finance. Poor Communication was the</p>	<p><b>VOTE TAKEN: Mr. Mullen made a motion to approve the Quality Reports as presented. The motion was duly seconded by Ms. Mastrangelo. A vote was called, and the motion passed unanimously.</b></p>



	<p>greatest subcategory. No compliments, including Thumb's Up, were received for August. Dr. Ferwerda informed the board that Athena reporting has had issues due to the in process updates to UDS 2020 reporting capabilities. The team has not been able to validate the data; therefore, updates will be presented at the next board meeting. The Clinics continue to see an increase in total visits since the start of the pandemic with around 9,000 visits in the previous month. Telemedicine visits comprise almost 30% of all visits. There continues to be a significant community need for Medication Assisted Treatment services. The program has doubled in size in the past year, and the census has increased significantly for phase I patients. Diabetes point of care testing has been a very successful with around 600 point of care tests performed for the month of August. This allowed more patients to have their testing done in the clinics, instead of having to schedule separate lab appointments. This also allowed for an increase in patients considered compliant with UDS metrics.</p>	
<p><b>9. CMO, VP and Executive Director of Clinical Services Comments</b></p>	<p>The team has started discussing and currently working on building the framework for COVID-19 vaccine distribution once FDA approved and available. It does appear that the first recipients of the vaccines will be nursing homes and first responders. Dr. Andric believes that the first two vaccines will require storage 'deep freezer' conditions (-112°F). Team has met internally in anticipation to discuss possibilities (dry ice, special carriers, etc.). Mr. Mullen asked if we would be using the mobile clinics for vaccine distribution. Dr. Andric answered that we will provide the vaccine to our patients, but we are also open to function as a distributor on behalf of the county. Meetings currently in process with both the Department of Health and Palm Beach County. Ms. Mastrangelo asked about the rapid testing process and qualifications for receiving a rapid test. Dr. Andric answered that the state provides rapid antigen testing is offered at the ballpark. The tests are free, but patients must be ages 5+ and symptomatic.</p>	<p><b>No action necessary.</b></p>

	Dr. Andric also informed the board that the state of Florida had just received approximately 6.5 million 15-minute rapid tests that do not require machinery.	
<b>10. Board Member Comments</b>	Mr. Mullen spoke about his experience at the Delray Beach clinic with a provider. He was very happy with his experience and low wait time.	<b>No action necessary.</b>
<b>12. Establishment of Upcoming Meetings</b>	<u>October 28, 2020 (TBD)</u> 12:45pm Board of Directors  <u>November 30, 2020 (TBD)</u> 12:45pm Board of Directors  <u>December 16, 2020 (TBD)</u> 12:45pm Board of Directors	<b>No action necessary.</b>
<b>13. Motion to Adjourn</b>	There being no further business, the meeting was adjourned at 2:29 PM	<b>VOTE TAKEN: Mr. Mullen made a motion to adjourn. The motion was duly seconded by Ms. Mastrangelo. A vote was called, and the motion passed unanimously.</b>

Minutes Submitted by: \_\_\_\_\_  
Signature Date

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

**Attendance Tracking**

	1/29/20	2/26/20	5/27/20	6/24/20	7/29/20	8/26/20	9/30/20	10/28/20	11/25/20	12/16/2020
James Elder	X	X	X	X	X	X	X			
Gary Butler	X	X								
Mike Smith	X	X	X	X	X	X	X			
Irene Figueroa	X	X	E	X	X	X	X			
John Casey Mullen	X	X	X	X	X	X	X			
Julia Bullard	X	X	X	X	X	X	X			
Marjorie Etienne	X	E	E	E	X	X	X			
Lisa Strickland	X	X	E	E	A	E	A			
Melissa Mastrangelo	X	X	X	X	X	X	X			
Tammy Jackson-Moore	X	X	X	X	X	X	X			
Susan Foster		X	E	E	E					

X= Present

C= Cancel

E= Excused

A= Absent

**DISTRICT CLINICS HOLDING, INC.**  
**BOARD OF DIRECTORS**  
**August 26, 2020**

**1. Description: Board Member Departure – Lisa Strickland**

**2. Summary:**

Lisa Strickland is no longer eligible to serve on the District Clinics Holdings Board.

**3. Substantive Analysis:**

Lisa Strickland is no longer eligible to serve on the District Clinics Holdings Board. Consistent with the District Clinics Holdings, Inc. Bylaws, Section 9.2(a), the Board has the following requirements to fill the open Board position.

9.2 Selection of New Board Member(s) for open Member positions. The selection of new Board members to fill any vacancy then existing 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. The newly elected member will serve for the unexpired term of the Member position being filled and shall be eligible to seek reappointment upon expiration of such term.

Staff recommends that the Nominating/Membership Committee meet prior to the next Board meeting to identify candidates to nominate to fill the vacancy.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

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Joel Snook  
 VP & Chief Financial Officer

**DISTRICT CLINICS HOLDING, INC.**  
**BOARD OF DIRECTORS**  
**August 26, 2020**

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

N/A

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Committee Name Date Approved

**6. Recommendation:**

Staff recommends the Board Receive and File Lisa Strickland's departure from the Board.

Approved for Legal sufficiency:

 FOR

Valerie Shahriari  
VP & General Counsel

*Christy Goddeau, Esq.*



Thomas Cleare  
AVP, Communication, Community Engagement  
and Corporate Security

**DISTRICT CLINIC HOLDINGS, INC**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

**1. Description: District Clinic Holdings, Inc. Financial Report August 2020**

**2. Summary:**

The YTD August 2020 financial statements for the District Clinic Holdings, Inc. are presented for Board review.

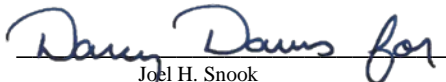
**3. Substantive Analysis:**

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

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

  
 Joel H. Snook  
 VP & Chief Financial Officer

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

Finance Committee  
 \_\_\_\_\_  
 Committee Name


10/28/2020  
 \_\_\_\_\_  
 Date Approved


**DISTRICT CLINIC HOLDINGS, INC**  
**BOARD OF DIRECTORS**  
**October 28, 2020**


**6. Recommendation:**

Staff recommends the Board receive and file the YTD August 2020 District Clinic Holdings, Inc. financial statements.

Approved for Legal sufficiency:

 FOR  
\_\_\_\_\_  
Christy Goddard, Esq. Valerie Shahriari  
VP & General Counsel

 for  
\_\_\_\_\_  
Joel H. Snook  
VP & Chief Financial Officer

  
\_\_\_\_\_  
Dr. Belma Andric  
Chief Medical Officer, VP & Executive Director  
of Clinic Services

## MEMO

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To: Finance Committee  
From: Joel H. Snook  
VP & Chief Financial Officer  
Date: September 30, 2020

Subject: Management Discussion and Analysis of August 2020 C.L. Brumback Primary Care Clinic Financial Statements.

The August statements represent the financial performance for the eleventh month of the 2020 fiscal year for C.L. Brumback Primary Care Clinics. Total YTD revenue was favorable to budget by \$740k due to the COVID-19 stimulus funds. Net patient revenue YTD was unfavorable to budget by (\$946k). The COVID-19 national emergency started mid-March and 9 clinics were closed to start countywide COVID-19 testing. Expenses before depreciation were over budget by (\$1.0M) or (4.3%) due mostly to negative variances in salaries, wages, and benefits (\$590), purchase services (\$71k), medical services (\$263k), and repair and maintenance (\$147k). Total YTD net margin was (\$11.3M) compared to budget of (\$11.1M) for an unfavorable variance of (\$133k) or (1.2%).

The Medical clinics total YTD revenue was favorable to budget by \$1.5M, this favorable variance resulted from the recognition of COVID-19 related grant funding of \$2.0M. Gross patient revenue under budget of (\$3.3M) or (18.9%) was a result of reduced clinic operation and closure from mid-March through May. During clinic closure, staff were reassigned to start countywide COVID-19 testing. Total operating expenses of \$20.8M were unfavorable to budget of \$19.5M by (\$1.3M) or (6.6%). This negative variance is mostly related to salaries, wages and benefits (\$793k), purchase services (\$60k), medical supplies (\$68k), medical services (\$263k) and repairs and maintenance (\$170k). Purchase services are unfavorable to budget due to higher collection fees from Athena. Medical supplies and medical services are unfavorable to budget due to unanticipated service use and supplies purchases. Repairs and maintenance is unfavorable to budget primarily due to unanticipated Allscripts software maintenance cost. Total YTD net margin of (\$9.7M) was favorable to budget of (\$10.0M) by \$307k or 3.1%.

The Dental clinics gross patient revenue was unfavorable to budget by (\$1.4M) or (35.6%). Total revenue of \$3.1M was under budget of \$3.9M by (\$732k) or (19.0%) due to grant revenue recognition timing, as well as reduced services. Total operating expenses of \$3.9M were favorable to budget by \$276k or 6.5% due mainly to combined salaries, wages, and benefits \$203k, medical supplies of \$47k, and repairs and maintenance \$23k. Total YTD net margin was (\$1.6M) compared to a budgeted loss of (\$1.2M) for a negative variance of (\$439k).

As of August 2020, the Clinics has been awarded \$3.1M in COVID-19 grants from HRSA (\$3.0M) and the CARES Act (\$52K) to make up for lost revenue related to the pandemic and to prevent, prepare, respond with increase healthcare capacity and staffing levels for COVID-19. These funds were appropriated under the HRSA and the CARES Act to cover health care related expenses or lost revenues that are attributable to coronavirus and to expand testing and increase health care capacity. The Clinics through August have recognized \$2.3M of the \$3.1M and the



remaining monies will be recognized in coming months as the Clinics incur payroll and other expenses related to COVID-19 due to the implementation of countywide testing to respond to COVID-19. The District has established strong internal control systems to ensure compliance with grantor requirements.

On the Comparative Statement of Net Position, due from other governments increased by \$1.5M to \$4.3M, this balance is due mainly from Health Resources and Service Administration (HRSA). The District subsidy YTD for the Medical and Dental clinics are \$9.5M, and \$1.7M respectively for a combined subsidy of \$11.2M.

**DISTRICT CLINIC HOLDINGS, INC.**  
**COMPARATIVE STATEMENT OF NET POSITION**

	<u>Aug 31, 2020</u>	<u>Jul 31, 2020</u>	<u>Increase (Decrease)</u>
<b>Assets</b>			
Cash and Cash Equivalents	(1,514,452)	(101,368)	\$ (1,413,083)
Accounts Receivable, net	1,297,569	1,195,816	101,753
Due From Other Funds	-	-	-
Due from Other Governments	4,345,783	2,867,315	1,478,467
Other Current Assets	176,596	189,602	(13,006)
Net Investment in Capital Assets	2,507,806	2,437,294	70,512
<b>Total Assets</b>	<u>\$ 6,813,301</u>	<u>\$ 6,588,659</u>	<u>\$ 224,643</u>
<b>Liabilities</b>			
Accounts Payable	472,987	344,039	128,947
Due To Other Governments	-	-	-
Deferred Revenue	321,299	327,932	(6,634)
Other Current Liabilities	2,928,818	2,714,285	214,533
Non-Current Liabilities	1,505,722	1,360,990	144,732
<b>Total Liabilities</b>	<u>5,228,825</u>	<u>4,747,247</u>	<u>481,579</u>
<b>Deferred Inflows of Resources</b>			
Deferred Inflows- Other Post Employment Benefits	<u>\$ 543</u>	<u>\$ 543</u>	<u>\$ -</u>
<b>Net Position</b>			
Net Investment in Capital Assets	2,507,806	2,437,294	70,512
Unrestricted	(923,872)	(596,425)	(327,448)
<b>Total Net Position</b>	<u>1,583,933</u>	<u>1,840,869</u>	<u>(256,936)</u>
<b>Total Liabilities, Deferred Inflows of Resources and Net Position</b>	<u>\$ 6,813,301</u>	<u>\$ 6,588,659</u>	<u>\$ 224,643</u>

**Note:** Amounts may not foot due to rounding.

# District Clinics Holdings, Inc. Statement of Revenues and Expenses

FOR THE ELEVENTH MONTH ENDED AUGUST 31, 2020

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
<b>1,469,870</b>	<b>2,096,968</b>	<b>(627,098)</b>	<b>(29.9%)</b>	<b>1,980,107</b>	<b>(510,237)</b>	<b>(25.8%)</b>	<b>16,519,083</b>	<b>21,192,026</b>	<b>(4,672,943)</b>	<b>(22.1%)</b>	<b>20,538,597</b>	<b>(4,019,515)</b>	<b>(19.6%)</b>
<b>Gross Patient Revenue</b>							<b>16,519,083</b>						
368,547	345,637	(22,910)	(6.6%)	424,955	56,408	13.3%	3,163,847	3,511,412	347,565	9.9%	7,142,360	3,978,512	55.7%
44,970	863,342	818,372	94.8%	770,012	725,042	94.2%	5,683,431	8,704,402	3,020,971	34.7%	5,913,740	230,309	3.9%
747,950	360,851	(387,099)	(107.3%)	239,329	(508,621)	(212.5%)	3,365,822	3,645,523	279,701	7.7%	2,201,265	(1,164,557)	(52.9%)
1,161,467	1,569,830	408,363	26.0%	1,434,295	272,828	19.0%	12,213,100	15,861,337	3,648,237	23.0%	15,257,364	3,044,264	20.0%
414,367	380,319	34,048	9.0%	602,019	(187,652)	(31.2%)	4,262,020	4,183,509	78,511	1.9%	5,397,740	(1,135,720)	-21%
<b>722,770</b>	<b>907,457</b>	<b>(184,687)</b>	<b>(20.4%)</b>	<b>1,147,830</b>	<b>(425,060)</b>	<b>(37.0%)</b>	<b>8,568,002</b>	<b>9,514,198</b>	<b>(946,196)</b>	<b>(9.9%)</b>	<b>10,678,973</b>	<b>(2,110,971)</b>	<b>(19.8%)</b>
49.17%	43.27%			57.97%			51.87%	44.90%		51.99%			
561,075	57,154	503,921	881.7%	65,083	495,991	762.1%	6,964,872	7,601,506	(636,634)	(8.4%)	10,454,546	(3,489,673)	(33.4%)
651,736	-	651,736	0.0%	-	651,736	0.0%	2,274,607	-	2,274,607	0.0%	-	2,274,607	0.0%
3,731	2,442	1,289	52.8%	2,335,320	(2,331,589)	(99.8%)	75,025	26,862	48,163	179.3%	2,422,621	(2,347,597)	(96.9%)
1,216,541	59,596	1,156,945	1,941.3%	2,400,403	(1,183,862)	(49.3%)	9,314,504	7,628,368	1,686,136	22.1%	12,877,167	(3,562,663)	(27.7%)
<b>1,939,311</b>	<b>967,053</b>	<b>972,258</b>	<b>100.5%</b>	<b>3,548,234</b>	<b>(1,608,922)</b>	<b>(45.3%)</b>	<b>17,882,506</b>	<b>17,142,566</b>	<b>739,940</b>	<b>4.3%</b>	<b>23,556,140</b>	<b>(5,673,634)</b>	<b>(24.1%)</b>
<i>Direct Operational Expenses:</i>													
1,498,535	1,298,379	(200,156)	(15.4%)	1,339,919	(158,616)	(11.8%)	15,410,714	14,837,786	(572,928)	(3.9%)	14,302,605	(1,108,109)	(7.7%)
298,886	362,727	63,841	17.6%	370,714	71,827	19.4%	4,067,204	4,050,034	(17,170)	(0.4%)	3,898,408	(168,796)	(4.3%)
50,189	65,753	15,564	23.7%	70,467	20,278	28.8%	794,554	723,283	(71,271)	(9.9%)	744,551	(50,003)	(6.7%)
36,977	36,001	(976)	(2.7%)	26,940	(10,037)	(37.3%)	417,064	396,011	(21,053)	(5.3%)	386,632	(30,432)	(7.9%)
33,647	19,686	(13,961)	(70.9%)	61,336	27,689	45.1%	183,698	216,546	32,848	15.2%	430,827	247,129	57.4%
164,329	72,424	(91,905)	(126.9%)	78,865	(85,464)	(108.4%)	999,062	736,428	(262,634)	(35.7%)	516,167	(482,896)	(93.6%)
86,206	94,786	8,580	9.1%	70,540	(15,666)	(22.2%)	905,376	963,951	58,575	6.1%	688,705	(216,670)	(31.5%)
14,612	13,887	(725)	(5.2%)	23,925	9,313	38.9%	299,841	152,757	(147,084)	(96.3%)	410,474	110,633	27.0%
120,490	106,850	(13,640)	(12.8%)	115,673	(4,817)	(4.2%)	1,256,533	1,206,072	(50,461)	(4.2%)	1,244,418	(12,114)	(1.0%)
25,813	6,682	(19,131)	(286.3%)	9,960	(15,853)	(159.2%)	75,299	73,502	(1,797)	(2.4%)	68,633	(6,666)	(9.7%)
24,332	28,941	4,609	15.9%	43,479	19,148	44.0%	273,862	318,351	44,489	14.0%	247,580	(26,282)	(10.6%)
3,716	2,236	(1,480)	(66.2%)	2,377	(1,339)	(56.3%)	28,957	24,596	(4,361)	(17.7%)	21,465	(7,492)	(34.9%)
2,357,733	2,108,352	(249,381)	(11.8%)	2,214,194	(143,539)	(6.5%)	24,712,164	23,699,317	(1,012,847)	(4.3%)	22,960,466	(1,751,698)	(7.6%)
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>							<b>(6,829,658)</b>						
<b>(418,421)</b>	<b>(1,141,299)</b>	<b>722,878</b>	<b>(63.3%)</b>	<b>1,334,039</b>	<b>(1,752,461)</b>	<b>(131.4%)</b>	<b>(6,829,658)</b>	<b>(6,556,751)</b>	<b>(272,907)</b>	<b>4.2%</b>	<b>595,674</b>	<b>(7,425,332)</b>	<b>(1,246.5%)</b>

# District Clinics Holdings, Inc. Statement of Revenues and Expenses

FOR THE ELEVENTH MONTH ENDED AUGUST 31, 2020

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
20,995	13,280	(7,715)	(58.1%)	13,167	(7,828)	(59.5%)	Depreciation	206,898	146,080	(60,818)	(41.6%)	145,298	(61,600)	(42.4%)
<i>Overhead Allocations:</i>														
(11,117)	2,255	13,372	593.0%	2,541	13,658	537.5%	Risk Mgt	8,932	24,803	15,871	64.0%	28,038	19,106	68.1%
-	96,913	96,913	100.0%	93,752	93,752	100.0%	Rev Cycle	1,162,953	1,066,040	(96,913)	(9.1%)	1,001,737	(161,216)	(16.1%)
-	5,506	5,506	100.0%	5,274	5,274	100.0%	Internal Audit	40,512	60,571	20,058	33.1%	57,904	17,391	30.0%
17,315	21,420	4,106	19.2%	36,601	19,287	52.7%	Home Office Facilities	208,635	235,622	26,987	11.5%	228,657	20,022	8.8%
32,060	36,548	4,487	12.3%	15,829	(16,231)	(102.5%)	Administration	371,874	402,024	30,150	7.5%	265,045	(106,829)	(40.3%)
34,774	40,465	5,691	14.1%	35,288	513	1.5%	Human Resources	434,460	445,116	10,656	2.4%	376,695	(57,765)	(15.3%)
25,073	18,543	(6,530)	(35.2%)	12,733	(12,340)	(96.9%)	Legal	185,103	203,972	18,869	9.3%	140,063	(45,040)	(32.2%)
6,798	8,410	1,612	19.2%	9,013	2,214	24.6%	Records	74,828	92,510	17,683	19.1%	72,281	(2,546)	(3.5%)
5,123	11,534	6,411	55.6%	34,324	29,201	85.1%	Compliance	87,891	126,875	38,984	30.7%	103,503	15,612	15.1%
-	-	-	0.0%	-	-	0.0%	Planning/Research	-	-	-	0.0%	5,697	5,697	100.0%
29,815	31,318	1,503	4.8%	39,491	9,676	24.5%	Finance	338,087	344,496	6,409	1.9%	332,069	(6,018)	(1.8%)
5,555	11,356	5,801	51.1%	11,688	6,133	52.5%	Public Relations	97,575	124,920	27,345	21.9%	101,534	3,959	3.9%
160,423	109,427	(50,996)	(46.6%)	128,787	(31,636)	(24.6%)	Information Technology	1,126,387	1,203,700	77,313	6.4%	1,064,037	(62,349)	(5.9%)
-	1,447	1,447	100.0%	2,803	2,803	100.0%	Corporate Quality	17,368	15,921	(1,447)	(9.1%)	27,559	10,191	37.0%
-	4,999	4,999	100.0%	-	-	0.0%	Project MGMT Office	59,985	54,986	(4,999)	(9.1%)	-	(59,985)	0.0%
2,007	3,755	1,748	46.6%	4,900	2,893	59.0%	Managed Care Contract	27,468	41,309	13,841	33.5%	40,418	12,950	32.0%
307,827	403,897	96,070	23.8%	433,023	125,196	28.9%	Total Overhead Allocations	4,242,056	4,442,864	200,808	4.5%	3,845,237	(396,820)	(10.3%)
<b>2,686,555</b>	<b>2,525,529</b>	<b>(161,026)</b>	<b>(6.4%)</b>	<b>2,660,383</b>	<b>(26,171)</b>	<b>(1.0%)</b>	<b>Total Expenses</b>	<b>29,161,118</b>	<b>28,288,261</b>	<b>(872,857)</b>	<b>(3.1%)</b>	<b>26,951,001</b>	<b>(2,210,117)</b>	<b>(8.2%)</b>
<b>\$ (747,243)</b>	<b>\$ (1,558,476)</b>	<b>\$ 811,233</b>	<b>(52.1%)</b>	<b>\$ 887,850</b>	<b>\$ (1,635,093)</b>	<b>(184.2%)</b>	<b>Net Margin</b>	<b>\$ (11,278,612)</b>	<b>\$ (11,145,695)</b>	<b>\$ (132,917)</b>	<b>1.2%</b>	<b>\$ (3,394,861)</b>	<b>\$ (7,883,751)</b>	<b>232.2%</b>
96,485	3,988	(92,497)	(2,319.4%)	-	(96,485)	0.0%	Capital	102,945	43,868	(59,077)	(134.7%)	-	(102,945)	0.0%
<b>\$ 586,792</b>	<b>\$ 1,551,354</b>	<b>\$ 964,562</b>	<b>62.2%</b>	<b>\$ -</b>	<b>\$ (586,792)</b>	<b>0.0%</b>	<b>General Fund Support/ Transfer In</b>	<b>\$ 11,174,659</b>	<b>\$ 11,077,344</b>	<b>\$ (97,315)</b>	<b>(0.9%)</b>	<b>\$ 4,150,580</b>	<b>\$ (7,024,079)</b>	<b>(169.2%)</b>

## District Clinics Holdings, Inc. Statement of Revenues and Expenses by Month

	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Year to Date
<b>Gross Patient Revenue</b>	<b>2,170,266</b>	<b>1,734,463</b>	<b>1,899,323</b>	<b>2,006,755</b>	<b>2,006,769</b>	<b>1,801,952</b>	<b>160,855</b>	<b>403,778</b>	<b>1,413,235</b>	<b>1,451,817</b>	<b>1,469,870</b>	-	<b>16,519,083</b>
Contractual Allowances	453,586	336,609	271,867	363,658	456,343	271,731	(59,194)	114,972	256,581	329,147	368,547	-	3,163,847
Charity Care	811,861	727,479	715,762	727,882	755,536	763,916	60,440	96,417	462,775	516,395	44,970	-	5,683,431
Bad Debt	341,494	193,678	306,448	343,282	34,054	266,273	189,943	133,496	515,415	293,790	747,950	-	3,365,822
Other Patient Revenue	385,820	385,820	341,366	190,933	514,094	363,607	333,912	778,072	394,539	159,491	414,367	-	4,262,020
<b>Net Patient Revenue</b>	<b>949,144</b>	<b>862,516</b>	<b>946,612</b>	<b>762,866</b>	<b>1,274,930</b>	<b>863,640</b>	<b>303,579</b>	<b>836,965</b>	<b>573,003</b>	<b>471,977</b>	<b>722,770</b>	-	<b>8,568,002</b>
Collections %	43.73%	49.73%	49.84%	38.01%	63.53%	47.93%	188.73%	207.28%	40.55%	32.51%	49.17%	-	51.87%
Grant Funds	53,241	48,416	28,234	383,141	1,156,633	797,135	1,364,639	862,240	102,955	1,607,165	561,075	-	6,964,872
Other Financial Assistance	-	-	-	-	-	-	-	809,249	554,571	259,050	651,736	-	2,274,607
Other Revenue	21,291	2,647	6,897	1,641	12,750	5,134	4,770	5,564	5,849	4,752	3,731	-	75,025
Total Other Revenues	74,531	51,063	35,130	384,782	1,169,383	802,270	1,369,409	1,677,053	663,374	1,870,968	1,216,541	-	9,314,504
<b>Total Revenues</b>	<b>1,023,676</b>	<b>913,579</b>	<b>981,742</b>	<b>1,147,648</b>	<b>2,444,313</b>	<b>1,665,909</b>	<b>1,672,988</b>	<b>2,514,018</b>	<b>1,236,377</b>	<b>2,342,945</b>	<b>1,939,311</b>	-	<b>17,882,506</b>
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,489,724	1,328,404	1,427,860	1,204,612	1,217,711	1,440,687	1,543,379	1,234,387	1,587,443	1,437,972	1,498,535	-	15,410,714
Benefits	380,176	378,148	365,616	354,929	265,010	369,330	366,442	424,266	466,608	397,791	298,886	-	4,067,204
Purchased Services	101,033	80,005	43,837	125,015	59,974	106,492	57,310	56,861	63,545	50,292	50,189	-	794,554
Medical Supplies	15,280	65,422	33,103	32,205	48,440	53,844	12,994	10,092	23,562	85,145	36,977	-	417,064
Other Supplies	8,043	19,713	1,026	15,087	18,774	11,678	16,520	1,213	24,577	33,418	33,647	-	183,698
Medical Services	67,974	43,699	53,733	61,772	93,803	74,266	94,104	71,459	131,722	142,201	164,329	-	999,062
Drugs	65,352	106,112	85,786	79,805	83,941	76,212	84,585	96,741	68,456	72,180	86,206	-	905,376
Repairs & Maintenance	36,932	11,167	19,935	19,129	24,857	102,610	22,582	16,666	15,665	15,685	14,612	-	299,841
Lease & Rental	117,472	120,395	121,087	102,313	100,186	110,890	115,797	116,344	112,369	119,189	120,490	-	1,256,533
Utilities	6,959	6,781	4,724	4,942	3,268	4,694	4,407	4,607	3,895	5,209	25,813	-	75,299
Other Expense	19,578	37,182	33,567	43,749	17,228	17,735	26,386	13,042	16,952	24,110	24,332	-	273,862
Insurance	2,377	2,377	2,377	2,377	2,377	2,377	1,320	3,716	2,228	3,716	3,716	-	28,957
Total Operational Expenses	2,310,900	2,199,405	2,192,652	2,045,937	1,935,571	2,370,815	2,345,826	2,049,393	2,517,022	2,386,910	2,357,733	-	24,712,164
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(1,287,225)</b>	<b>(1,285,826)</b>	<b>(1,210,910)</b>	<b>(898,289)</b>	<b>508,743</b>	<b>(704,906)</b>	<b>(672,838)</b>	<b>464,625</b>	<b>(1,280,645)</b>	<b>(43,965)</b>	<b>(418,421)</b>	-	<b>(6,829,658)</b>
Depreciation	13,167	10,357	26,292	19,329	19,356	19,355	19,259	19,268	19,109	20,412	20,995	-	206,898
<i>Overhead Allocations:</i>													
Risk Mgt	1,623	2,089	1,990	1,944	1,968	2,232	1,937	2,108	2,526	1,631	(11,117)	-	8,932
Rev Cycle	62,997	84,377	69,757	272,531	(5,098)	191,748	158,636	201,835	126,169	-	-	-	1,162,953
Internal Audit	5,281	6,983	5,435	5,263	4,570	5,288	5,186	1,363	1,144	-	-	-	40,512
Home Office Facilities	18,086	19,184	20,918	17,204	18,345	18,562	18,588	18,504	20,731	21,199	17,315	-	208,635
Administration	28,448	37,990	37,093	34,890	38,177	33,799	31,099	30,151	37,362	30,804	32,060	-	371,874
Human Resources	35,210	38,104	66,995	39,343	22,674	43,414	39,978	38,269	36,991	38,708	34,774	-	434,460
Legal	11,308	15,984	19,536	13,924	21,646	16,997	12,561	17,534	14,207	16,333	25,073	-	185,103
Records	6,516	6,638	7,687	5,290	7,035	7,290	7,681	5,647	6,976	7,269	6,798	-	74,828
Compliance	3,902	6,147	11,403	15,681	12,839	7,333	11,124	5,293	4,708	4,338	5,123	-	87,891
Finance	27,070	34,293	28,393	46,646	20,187	44,494	30,084	33,940	10,927	32,237	29,815	-	338,087
Public Relations	9,057	15,976	11,021	11,326	7,463	6,968	9,064	9,596	5,757	5,791	5,555	-	97,575
Information Technology	80,822	61,834	94,710	97,188	90,619	92,458	100,648	121,853	94,306	131,527	160,423	-	1,126,387
Corporate Quality	1,964	2,269	2,876	2,441	(2,313)	2,874	2,175	3,058	-	-	-	-	17,368
Project MGMT Office	4,280	5,685	6,754	9,544	(1,268)	11,455	10,972	10,238	2,327	-	-	-	59,985
Managed Care Contract	3,150	3,685	2,822	2,038	2,312	2,379	1,975	3,526	1,520	2,054	2,007	-	27,468
Total Overhead Allocations	299,713	341,238	387,389	575,252	239,156	487,131	441,707	502,041	368,711	291,890	307,827	-	4,242,056
<b>Total Expenses</b>	<b>2,623,781</b>	<b>2,551,001</b>	<b>2,606,333</b>	<b>2,640,518</b>	<b>2,194,083</b>	<b>2,877,301</b>	<b>2,806,792</b>	<b>2,570,702</b>	<b>2,904,842</b>	<b>2,699,213</b>	<b>2,686,555</b>	-	<b>29,161,118</b>
<b>Net Margin</b>	<b>\$ (1,600,105)</b>	<b>\$ (1,637,421)</b>	<b>\$ (1,624,591)</b>	<b>\$ (1,492,870)</b>	<b>\$ 250,231</b>	<b>\$ (1,211,391)</b>	<b>\$ (1,133,804)</b>	<b>\$ (56,684)</b>	<b>\$ (1,668,465)</b>	<b>\$ (356,268)</b>	<b>\$ (747,243)</b>	<b>\$ -</b>	<b>\$ (11,278,612)</b>
Capital	-	81,965	(81,965)	21,988	(12,580)	-	(6,663)	-	10,532	(6,816)	96,485	-	102,945
Capital Contributions	-	-	-	-	-	-	-	-	-	-	-	-	-
General Fund Support/ Transfer In	1,726,629	1,664,089	1,421,583	1,495,529	-	909,870	1,107,882	2,229,064	33,221	-	586,792	-	\$ 11,174,659

# District Clinic Holdings, Inc.- Medical Statement of Revenue and Expenses

FOR THE ELEVENTH MONTH ENDED AUGUST 31, 2020

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
<b>1,400,114</b>	<b>1,692,837</b>	<b>(292,723)</b>	<b>(17.3%)</b>	<b>1,623,414</b>	<b>(223,300)</b>	<b>(13.8%)</b>	<b>13,949,641</b>	<b>17,203,636</b>	<b>(3,253,995)</b>	<b>(18.9%)</b>	<b>16,836,413</b>	<b>(2,886,771)</b>	<b>(17.1%)</b>
<b>Gross Patient Revenue</b>							<b>Gross Patient Revenue</b>						
348,377	296,381	(51,996)	(17.5%)	351,755	3,378	1.0%	2,718,665	3,024,137	305,472	10.1%	6,332,810	3,614,145	57.1%
-	637,672	637,672	100.0%	571,179	571,179	100.0%	4,188,478	6,480,993	2,292,515	35.4%	4,158,360	(30,118)	(0.7%)
740,009	338,025	(401,984)	(118.9%)	282,453	(457,556)	(162.0%)	3,180,564	3,420,494	239,930	7.0%	2,106,445	(1,074,120)	(51.0%)
<b>1,088,387</b>	<b>1,272,078</b>	<b>183,692</b>	<b>14.4%</b>	<b>1,205,387</b>	<b>117,001</b>	<b>9.7%</b>	<b>10,087,708</b>	<b>12,925,624</b>	<b>2,837,916</b>	<b>22.0%</b>	<b>12,597,615</b>	<b>2,509,907</b>	<b>19.9%</b>
342,918	244,640	98,278	40.2%	423,794	(80,876)	(19.1%)	3,128,714	2,691,040	437,674	16.3%	3,827,681	(698,968)	(18.3%)
<b>654,646</b>	<b>665,399</b>	<b>(10,753)</b>	<b>(1.6%)</b>	<b>841,821</b>	<b>(187,175)</b>	<b>(22.2%)</b>	<b>6,990,647</b>	<b>6,969,052</b>	<b>21,595</b>	<b>0.3%</b>	<b>8,066,479</b>	<b>(1,075,832)</b>	<b>(13.3%)</b>
46.76%	39.31%			51.85%			50.11%	40.51%		47.91%			
346,855	52,614	294,241	559.2%	45,306	301,549	665.6%	5,734,901	6,289,303	(554,402)	(8.8%)	8,565,864	(2,830,963)	(33.0%)
535,807	-	535,807	0.0%	-	535,807	0.0%	1,956,378	-	1,956,378	0.0%	-	1,956,378	0.0%
3,731	2,442	1,289	52.8%	2,335,320	(2,331,589)	(99.8%)	75,025	26,862	48,163	179.3%	2,422,388	(2,347,364)	(96.9%)
886,392	55,056	831,336	1,510.0%	2,380,626	(1,494,233)	(62.8%)	7,766,303	6,316,165	1,450,138	23.0%	10,988,253	(3,221,949)	(29.3%)
<b>1,541,038</b>	<b>720,455</b>	<b>820,583</b>	<b>113.9%</b>	<b>3,222,446</b>	<b>(1,681,408)</b>	<b>(52.2%)</b>	<b>14,756,951</b>	<b>13,285,217</b>	<b>1,471,734</b>	<b>11.1%</b>	<b>19,054,732</b>	<b>(4,297,782)</b>	<b>(22.6%)</b>
<b>Total Revenues</b>							<b>Total Revenues</b>						
<i>Direct Operational Expenses:</i>													
1,265,659	1,063,671	(201,988)	(19.0%)	1,123,907	(141,752)	(12.6%)	12,843,741	12,155,564	(688,177)	(5.7%)	11,763,287	(1,080,454)	(9.2%)
252,440	293,376	40,936	14.0%	305,317	52,877	17.3%	3,380,376	3,275,525	(104,851)	(3.2%)	3,167,889	(212,486)	(6.7%)
43,904	58,128	14,224	24.5%	52,229	8,326	15.9%	699,558	639,408	(60,150)	(9.4%)	644,132	(55,427)	(8.6%)
20,455	13,917	(6,538)	(47.0%)	10,908	(9,547)	(87.5%)	221,460	153,087	(68,373)	(44.7%)	152,790	(68,670)	(44.9%)
15,175	18,159	2,984	16.4%	43,168	27,992	64.8%	153,898	199,749	45,851	23.0%	293,703	139,806	47.6%
164,329	72,424	(91,905)	(126.9%)	78,865	(85,464)	(108.4%)	999,062	736,428	(262,634)	(35.7%)	516,167	(482,896)	(93.6%)
86,206	94,561	8,355	8.8%	70,506	(15,700)	(22.3%)	905,157	961,476	56,319	5.9%	687,368	(217,788)	(31.7%)
11,729	8,235	(3,494)	(42.4%)	22,486	10,757	47.8%	260,830	90,585	(170,245)	(187.9%)	360,595	99,765	27.7%
95,490	81,072	(14,418)	(17.8%)	89,034	(6,456)	(7.3%)	979,801	922,514	(57,287)	(6.2%)	954,911	(24,890)	(2.6%)
14,765	4,632	(10,133)	(218.8%)	8,320	(6,445)	(77.5%)	53,944	50,952	(2,992)	(5.9%)	57,508	3,564	6.2%
24,047	25,242	1,195	4.7%	39,176	15,129	38.6%	249,338	277,662	28,324	10.2%	217,206	(32,132)	(14.8%)
3,675	2,205	(1,470)	(66.7%)	2,346	(1,329)	(56.7%)	28,578	24,255	(4,323)	(17.8%)	21,003	(7,575)	(36.1%)
1,997,875	1,735,622	(262,253)	(15.1%)	1,846,262	(151,612)	(8.2%)	20,775,744	19,487,205	(1,288,539)	(6.6%)	18,836,561	(1,939,183)	(10.3%)
<b>Total Operational Expenses</b>							<b>Total Operational Expenses</b>						
<b>(456,836)</b>	<b>(1,015,167)</b>	<b>558,331</b>	<b>(55.0%)</b>	<b>1,376,184</b>	<b>(1,833,021)</b>	<b>(133.2%)</b>	<b>(6,018,793)</b>	<b>(6,201,988)</b>	<b>183,195</b>	<b>(3.0%)</b>	<b>218,171</b>	<b>(6,236,964)</b>	<b>(2,858.7%)</b>
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>							<b>Net Performance before Depreciation &amp; Overhead Allocations</b>						

# District Clinic Holdings, Inc.- Medical Statement of Revenue and Expenses

FOR THE ELEVENTH MONTH ENDED AUGUST 31, 2020

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
15,379	9,840	(5,539)	(56.3%)	9,863	(5,516)	(55.9%)	Depreciation	152,769	108,240	(44,529)	(41.1%)	107,769	(45,000)	(41.8%)
<i>Overhead Allocations:</i>														
(9,142)	1,854	10,997	593.0%	2,043	11,185	547.6%	Risk Mgt	7,345	20,397	13,052	64.0%	22,540	15,195	67.4%
-	78,723	78,723	100.0%	74,323	74,323	100.0%	Rev Cycle	944,673	865,951	(78,723)	(9.1%)	794,145	(150,528)	(19.0%)
-	4,528	4,528	100.0%	4,240	4,240	100.0%	Internal Audit	33,317	49,812	16,496	33.1%	46,551	13,234	28.4%
15,474	19,144	3,669	19.2%	32,563	17,089	52.5%	Home Office Facilities	186,462	210,580	24,119	11.5%	203,423	16,961	8.3%
26,366	30,056	3,690	12.3%	12,726	(13,640)	(107.2%)	Administration	305,822	330,617	24,795	7.5%	213,086	(92,736)	(43.5%)
28,467	33,126	4,659	14.1%	28,279	(188)	(0.7%)	Human Resources	355,662	364,385	8,723	2.4%	301,884	(53,778)	(17.8%)
20,620	15,249	(5,371)	(35.2%)	10,236	(10,384)	(101.4%)	Legal	152,225	167,742	15,517	9.3%	112,596	(39,629)	(35.2%)
5,591	6,916	1,325	19.2%	7,246	1,655	22.8%	Records	61,537	76,079	14,542	19.1%	58,109	(3,428)	(5.9%)
4,213	9,485	5,273	55.6%	27,594	23,381	84.7%	Compliance	72,280	104,339	32,059	30.7%	83,210	10,930	13.1%
-	-	-	0.0%	-	-	0.0%	Planning/Research	-	-	-	0.0%	4,580	4,580	100.0%
24,519	25,755	1,236	4.8%	31,748	7,229	22.8%	Finance	278,036	283,307	5,271	1.9%	266,960	(11,076)	(4.1%)
4,568	9,339	4,771	51.1%	9,397	4,828	51.4%	Public Relations	80,244	102,732	22,488	21.9%	81,626	1,383	1.7%
131,929	89,991	(41,938)	(46.6%)	103,536	(28,393)	(27.4%)	Information Technology	926,319	989,900	63,581	6.4%	855,413	(70,907)	(8.3%)
-	1,190	1,190	100.0%	2,253	2,253	100.0%	Corporate Quality	14,283	13,093	(1,190)	(9.1%)	22,151	7,867	35.5%
-	4,111	4,111	100.0%	-	-	0.0%	Project MGMT Office	49,331	45,220	(4,111)	(9.1%)	-	(49,331)	0.0%
1,630	3,051	1,420	46.6%	3,884	2,254	58.0%	Managed Care Contract	22,312	33,556	11,243	33.5%	32,042	9,730	30.4%
254,235	332,519	78,284	23.5%	350,067	95,831	27.4%	Total Overhead Allocations	3,489,847	3,657,710	167,862	4.6%	3,098,315	(391,532)	(12.6%)
<b>2,267,489</b>	<b>2,077,981</b>	<b>(189,508)</b>	<b>(9.1%)</b>	<b>2,206,192</b>	<b>(61,297)</b>	<b>(2.8%)</b>	<b>Total Expenses</b>	<b>24,418,360</b>	<b>23,253,155</b>	<b>(1,165,205)</b>	<b>(5.0%)</b>	<b>22,042,645</b>	<b>(2,375,715)</b>	<b>(10.8%)</b>
<b>\$ (726,451)</b>	<b>\$ (1,357,526)</b>	<b>\$ 631,075</b>	<b>(46.5%)</b>	<b>\$ 1,016,255</b>	<b>\$ (1,742,705)</b>	<b>(171.5%)</b>	<b>Net Margin</b>	<b>\$ (9,661,409)</b>	<b>\$ (9,967,938)</b>	<b>\$ 306,529</b>	<b>(3.1%)</b>	<b>\$ (2,987,913)</b>	<b>\$ (6,673,497)</b>	<b>223.3%</b>
(6,460)	-	6,460	0.0%	-	6,460	0.0%	Capital	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Capital Contributions	-	-	-	0.0%	-	-	0.0%
<b>\$ 336,232</b>	<b>\$ 1,347,856</b>	<b>\$ 1,011,624</b>	<b>75.1%</b>	<b>\$ -</b>	<b>\$ (336,232)</b>	<b>0.0%</b>	<b>General Fund Support/ Transfer In</b>	<b>\$ 9,508,641</b>	<b>\$ 9,861,567</b>	<b>\$ 352,926</b>	<b>3.6%</b>	<b>\$ 4,150,580</b>	<b>\$ (5,358,061)</b>	<b>(129.1%)</b>

# District Clinics Holdings, Inc.- Medical Statement of Revenues and Expenses by Location

FOR THE ELEVENTH MONTH ENDED AUGUST 31, 2020

	Clinic Administration	West Palm Beach Clinic	Lantana Clinic	Delray Clinic	Belle Glade Clinic	Lewis Center	Lake Worth Clinic	Jupiter Clinic	West Boca Clinic	Subxone Clinic	Mobile Van	Mobile Van 2	COVID 19 Testing	Total
<b>Gross Patient Revenue</b>	-	2,412,138	3,194,343	1,710,658	1,166,905	616,441	2,084,146	733,766	1,189,858	709,424	131,964	-	-	<b>13,949,641.24</b>
Contractual Allowances	-	516,087	616,248	328,181	244,585	43,815	427,611	155,722	364,145	32,566	(10,353)	-	-	2,718,665
Charity Care	-	847,021	1,020,185	414,260	264,965	144,214	719,686	197,050	231,672	189,778	159,648	-	-	4,188,478
Bad Debt	-	448,520	739,387	497,185	355,873	178,112	364,902	122,164	128,758	209,372	136,291	-	-	3,180,564
<b>Total Contractual Allowances and Bad Debt</b>	-	<b>1,811,628</b>	<b>2,375,821</b>	<b>1,239,626</b>	<b>865,423</b>	<b>366,141</b>	<b>1,512,199</b>	<b>474,936</b>	<b>724,575</b>	<b>431,716</b>	<b>285,586</b>	-	-	<b>10,087,708</b>
Other Patient Revenue	-	610,817	737,468	346,734	187,357	281,968	408,489	117,285	171,947	201,558	65,090	-	-	3,128,714
<b>Net Patient Revenue</b>	-	<b>1,211,327</b>	<b>1,555,990</b>	<b>817,765</b>	<b>488,839</b>	<b>532,268</b>	<b>980,436</b>	<b>376,115</b>	<b>637,230</b>	<b>479,266</b>	<b>(88,532)</b>	-	-	<b>6,990,647</b>
Collection %	0.00%	50.22%	48.71%	47.80%	41.89%	86.35%	47.04%	51.26%	53.56%	67.56%	(67.09%)	0.00%	0.00%	50.11%
Grant Funds	440,429	897,288	1,043,167	618,692	555,206	174,886	770,384	277,574	330,016	490,196	137,064	-	-	5,734,901
Other Financial Assistance	788,054	185,587	244,829	86,866	153,227	38,169	154,200	83,222	70,276	82,778	69,047	124	-	1,956,378
Other Revenue	19,299	9,915	15,978	5,439	7,536	839	6,815	1,947	6,509	399	349	-	-	75,025
<b>Total Other Revenues</b>	<b>1,247,781</b>	<b>1,092,790</b>	<b>1,303,974</b>	<b>710,997</b>	<b>715,970</b>	<b>213,894</b>	<b>931,399</b>	<b>362,743</b>	<b>406,801</b>	<b>573,372</b>	<b>206,459</b>	<b>124</b>	-	<b>7,766,303</b>
<b>Total Revenues</b>	<b>1,247,781</b>	<b>2,304,117</b>	<b>2,859,964</b>	<b>1,528,762</b>	<b>1,204,809</b>	<b>746,162</b>	<b>1,911,835</b>	<b>738,858</b>	<b>1,044,030</b>	<b>1,052,638</b>	<b>117,927</b>	<b>124</b>	-	<b>14,756,951</b>
<i>Direct Operational Expenses:</i>														
Salaries and Wages	2,467,758	1,796,329	1,837,990	1,229,219	1,018,644	395,454	1,599,613	611,449	763,132	840,230	273,074	6,911	3,940	12,843,741
Benefits	587,224	453,974	491,980	352,287	265,923	99,459	447,779	161,230	191,928	230,410	95,979	1,882	320	3,380,376
Purchased Services	126,079	94,439	70,729	56,020	65,311	6,443	107,632	63,111	55,941	45,039	8,816	-	-	699,558
Medical Supplies	9,725	33,492	49,778	14,648	20,457	7,334	21,114	5,763	7,441	40,360	11,297	51	-	221,460
Other Supplies	35,486	12,310	31,037	5,788	16,397	1,000	7,043	5,601	4,021	28,632	3,965	2,617	-	153,898
Medical Services	63,256	124,234	389,304	66,508	106,944	18,332	112,633	22,047	53,856	41,949	-	-	-	999,062
Drugs	-	346,653	286,662	125,628	82,856	126	20,067	10,259	8,596	24,109	201	-	-	905,157
Repairs & Maintenance	1,404	40,946	37,741	35,630	37,289	7,502	40,405	13,037	22,604	10,297	13,715	259	-	260,830
Lease & Rental	-	131,039	185,162	84,177	115,166	3,768	217,154	74,369	108,732	40,233	-	20,000	-	979,801
Utilities	-	2,978	4,177	948	16,195	2,086	11,221	7,072	5,881	3,385	-	-	-	53,944
Other Expense	134,740	11,937	12,276	11,776	11,506	3,513	13,534	3,150	10,629	31,688	4,589	-	-	249,338
Insurance	-	5,403	3,855	4,595	1,874	-	2,644	678	758	296	5,179	3,297	-	28,578
<b>Total Operational Expenses</b>	<b>3,425,672</b>	<b>3,053,734</b>	<b>3,400,692</b>	<b>1,987,223</b>	<b>1,758,560</b>	<b>545,017</b>	<b>2,600,840</b>	<b>977,767</b>	<b>1,233,519</b>	<b>1,336,629</b>	<b>416,814</b>	<b>35,017</b>	<b>4,260</b>	<b>20,775,744</b>
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(2,177,891)</b>	<b>(749,617)</b>	<b>(540,728)</b>	<b>(458,460)</b>	<b>(553,751)</b>	<b>201,146</b>	<b>(689,005)</b>	<b>(238,909)</b>	<b>(189,489)</b>	<b>(283,991)</b>	<b>(298,887)</b>	<b>(34,894)</b>	<b>(4,260)</b>	<b>(6,018,793)</b>
Depreciation	7,212	6,687	6,509	1,647	47,809	977	5,199	3,046	4,395	537	68,750	-	-	152,769
<i>Overhead Allocations:</i>														
Risk Mgt	988	1,053	1,081	800	636	191	1,123	383	554	385	151	-	-	7,345
Rev Cycle	-	156,424	160,655	118,838	94,470	28,372	166,901	56,953	82,345	57,280	22,435	-	-	944,673
Internal Audit	4,481	4,775	4,904	3,628	2,884	866	5,095	1,739	2,514	1,748	685	-	-	33,317
Home Office Facilities	186,462	-	-	-	-	-	-	-	-	-	-	-	-	186,462
Administration	41,129	43,829	45,015	33,298	26,470	7,950	46,765	15,958	23,073	16,049	6,286	-	-	305,822
Human Resources	39,934	57,049	55,444	42,786	30,307	7,131	53,483	17,828	24,959	19,610	7,131	-	-	355,662
Legal	20,472	21,816	22,406	16,574	13,176	3,957	23,278	7,943	11,485	7,989	3,129	-	-	152,225
Records	8,276	8,819	9,058	6,700	5,326	1,600	9,410	3,211	4,643	3,229	1,265	-	-	61,537
Compliance	9,721	10,359	10,639	7,870	6,256	1,879	11,053	3,772	5,453	3,793	1,486	-	-	72,280
Finance	37,392	39,847	40,925	30,273	24,065	7,227	42,516	14,508	20,976	14,591	5,715	-	-	278,036
Public Relations	10,792	11,500	11,811	8,737	6,945	2,086	12,271	4,187	6,054	4,211	1,649	-	-	80,244
Information Technology	124,577	132,756	136,347	100,858	80,177	24,079	141,649	48,336	69,886	48,613	19,041	-	-	926,319
Budget & Decision Support	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Corporate Quality	1,921	2,047	2,102	1,555	1,236	371	2,184	745	1,078	750	294	-	-	14,283
Project MGMT Office	6,634	7,070	7,261	5,371	4,270	1,282	7,543	2,574	3,722	2,589	1,014	-	-	49,331
Managed Care Contract	-	3,695	3,795	2,807	2,231	670	3,942	1,345	1,945	1,353	530	-	-	22,312
<b>Total Overhead Allocations</b>	<b>492,778</b>	<b>501,039</b>	<b>511,443</b>	<b>380,095</b>	<b>298,450</b>	<b>87,662</b>	<b>527,212</b>	<b>179,482</b>	<b>258,684</b>	<b>182,191</b>	<b>70,811</b>	-	-	<b>3,489,847</b>
<b>Total Expenses</b>	<b>3,925,662</b>	<b>3,561,459</b>	<b>3,918,645</b>	<b>2,368,965</b>	<b>2,104,819</b>	<b>633,655</b>	<b>3,133,251</b>	<b>1,160,295</b>	<b>1,496,599</b>	<b>1,519,358</b>	<b>556,375</b>	<b>35,017</b>	<b>4,260</b>	<b>24,418,360</b>
<b>Net Margin</b>	<b>\$ (2,677,881)</b>	<b>\$ (1,257,342)</b>	<b>\$ (1,058,681)</b>	<b>\$ (840,203)</b>	<b>\$ (900,010)</b>	<b>\$ 112,507</b>	<b>\$ (1,221,416)</b>	<b>\$ (421,437)</b>	<b>\$ (452,569)</b>	<b>\$ (466,720)</b>	<b>\$ (438,448)</b>	<b>\$ (34,894)</b>	<b>\$ (4,260)</b>	<b>\$ (9,661,409)</b>
<b>Capital</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>General Fund Support/ Transfer In</b>	<b>\$ 9,508,641</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 9,508,641</b>





# District Clinics Holdings, Inc.- Dental Statement of Revenues and Expenses

FOR THE ELEVENTH MONTH ENDED AUGUST 31, 2020

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
5,616	3,440	(2,176)	(63.3%)	3,304	(2,312)	(70.0%)	Depreciation	54,129	37,840	(16,289)	(43.0%)	37,529	(16,600)	(44.2%)
<i>Overhead Allocations:</i>														
(1,975)	401	2,375	593.0%	498	2,473	496.3%	Risk Mgt	1,586	4,406	2,819	64.0%	5,497	3,911	71.1%
-	18,190	18,190	100.0%	19,429	19,429	100.0%	Rev Cycle	218,279	200,089	(18,190)	(9.1%)	207,592	(10,687)	(5.1%)
-	978	978	100.0%	1,034	1,034	100.0%	Internal Audit	7,196	10,759	3,563	33.1%	11,353	4,157	36.6%
1,840	2,277	436	19.2%	4,038	2,198	54.4%	Home Office Facilities	22,174	25,042	2,868	11.5%	25,234	3,060	12.1%
5,695	6,492	797	12.3%	3,104	(2,591)	(83.5%)	Administration	66,052	71,407	5,355	7.5%	51,959	(14,093)	(27.1%)
6,307	7,339	1,032	14.1%	7,009	702	10.0%	Human Resources	78,798	80,731	1,933	2.4%	74,811	(3,987)	(5.3%)
4,454	3,294	(1,160)	(35.2%)	2,497	(1,957)	(78.4%)	Legal	32,878	36,229	3,352	9.3%	27,467	(5,411)	(19.7%)
1,208	1,494	286	19.2%	1,767	560	31.7%	Records	13,291	16,431	3,141	19.1%	14,172	881	6.2%
910	2,049	1,139	55.6%	6,730	5,820	86.5%	Compliance	15,611	22,535	6,924	30.7%	20,294	4,683	23.1%
-	-	-	0.0%	-	-	0.0%	Planning/Research	-	-	-	0.0%	1,117	1,117	100.0%
5,296	5,563	267	4.8%	7,743	2,447	31.6%	Finance	60,051	61,189	1,138	1.9%	65,108	5,058	7.8%
987	2,017	1,030	51.1%	2,292	1,305	56.9%	Public Relations	17,331	22,188	4,857	21.9%	19,908	2,577	12.9%
28,494	19,436	(9,058)	(46.6%)	25,251	(3,243)	(12.8%)	Information Technology	200,067	213,800	13,732	6.4%	208,625	8,557	4.1%
-	257	257	100.0%	550	550	100.0%	Corporate Quality	3,085	2,828	(257)	(9.1%)	5,409	2,324	43.0%
-	888	888	100.0%	-	-	0.0%	Project MGMT Office	10,654	9,767	(888)	(9.1%)	-	(10,654)	0.0%
377	705	328	46.6%	1,015	639	62.9%	Managed Care Contract	5,156	7,753	2,598	33.5%	8,376	3,220	38.4%
53,591	71,378	17,786	24.9%	82,956	29,365	35.4%	Total Overhead Allocations	752,209	785,154	32,945	4.2%	746,922	(5,287)	(0.7%)
419,066	447,548	28,482	6.4%	454,192	35,126	7.7%	Total Expenses	4,742,759	5,035,106	292,348	5.8%	4,908,356	165,598	3.4%
<b>\$ (20,792)</b>	<b>\$ (200,950)</b>	<b>\$ 180,157</b>	<b>(89.7%)</b>	<b>\$ (128,405)</b>	<b>\$ 107,612</b>	<b>(83.8%)</b>	Net Margin	<b>\$ (1,617,203)</b>	<b>\$ (1,177,757)</b>	<b>\$ (439,446)</b>	<b>37.3%</b>	<b>\$ (406,948)</b>	<b>\$ (1,210,255)</b>	<b>297.4%</b>
102,945	3,988	(98,957)	(2,481.4%)	-	(102,945)	0.0%	Capital	102,945	43,868	(59,077)	(134.7%)	-	(102,945)	0.0%
-	-	-	0.0%	-	-	0.0%	Capital Contributions	-	-	-	0.0%	-	-	0.0%
<b>\$ 250,560</b>	<b>\$ 203,498</b>	<b>\$ (47,062)</b>	<b>(23.1%)</b>	<b>\$ -</b>	<b>\$ (250,560)</b>	<b>0.0%</b>	General Fund Support/ Transfer In	<b>\$ 1,666,019</b>	<b>\$ 1,215,777</b>	<b>\$ (450,242)</b>	<b>(37.0%)</b>	<b>\$ -</b>	<b>\$ (1,666,019)</b>	<b>0.0%</b>

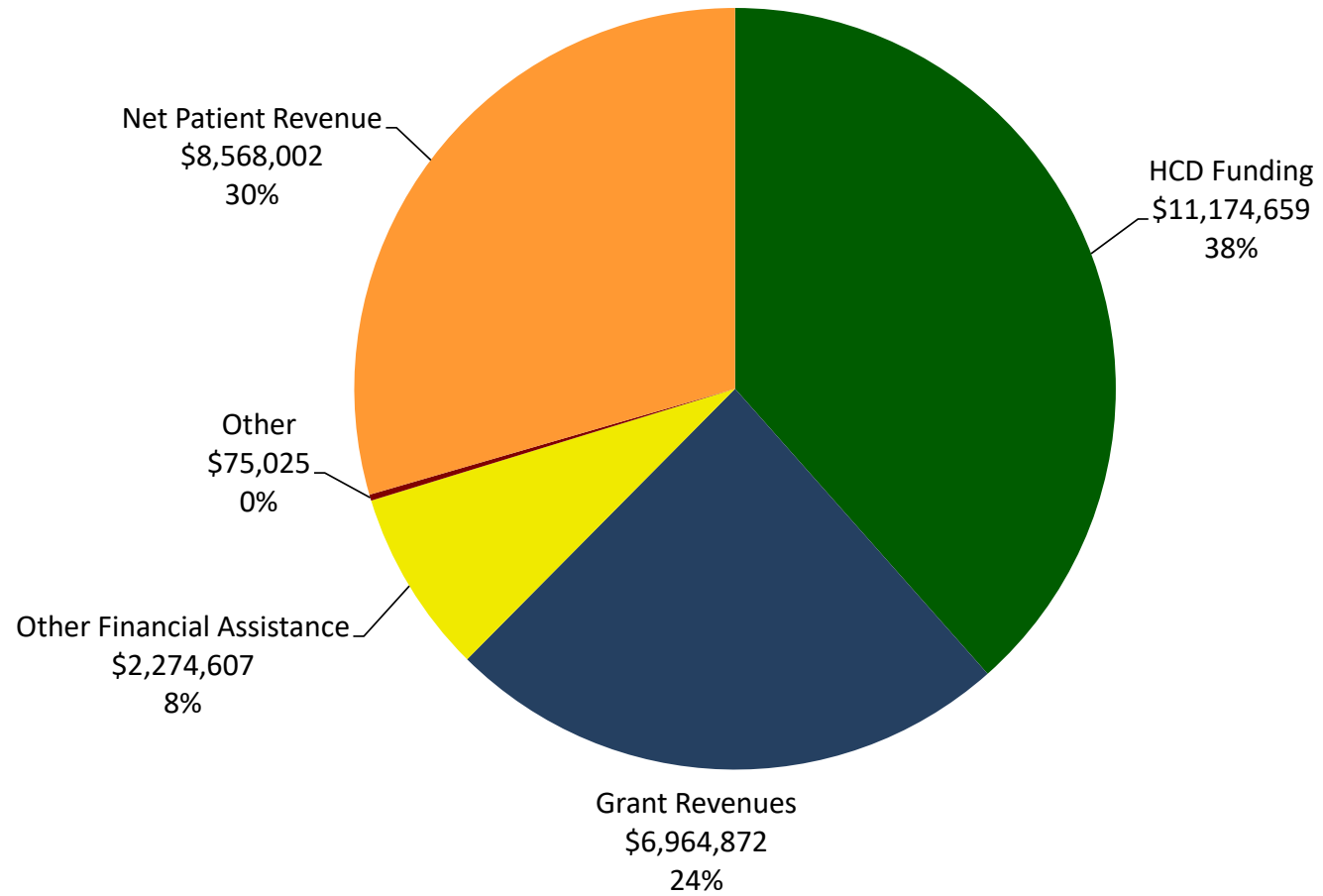
## District Clinics Holdings, Inc.- Dental Statement of Revenues and Expenses by Location

FOR THE ELEVENTH MONTH ENDED AUGUST 31, 2020

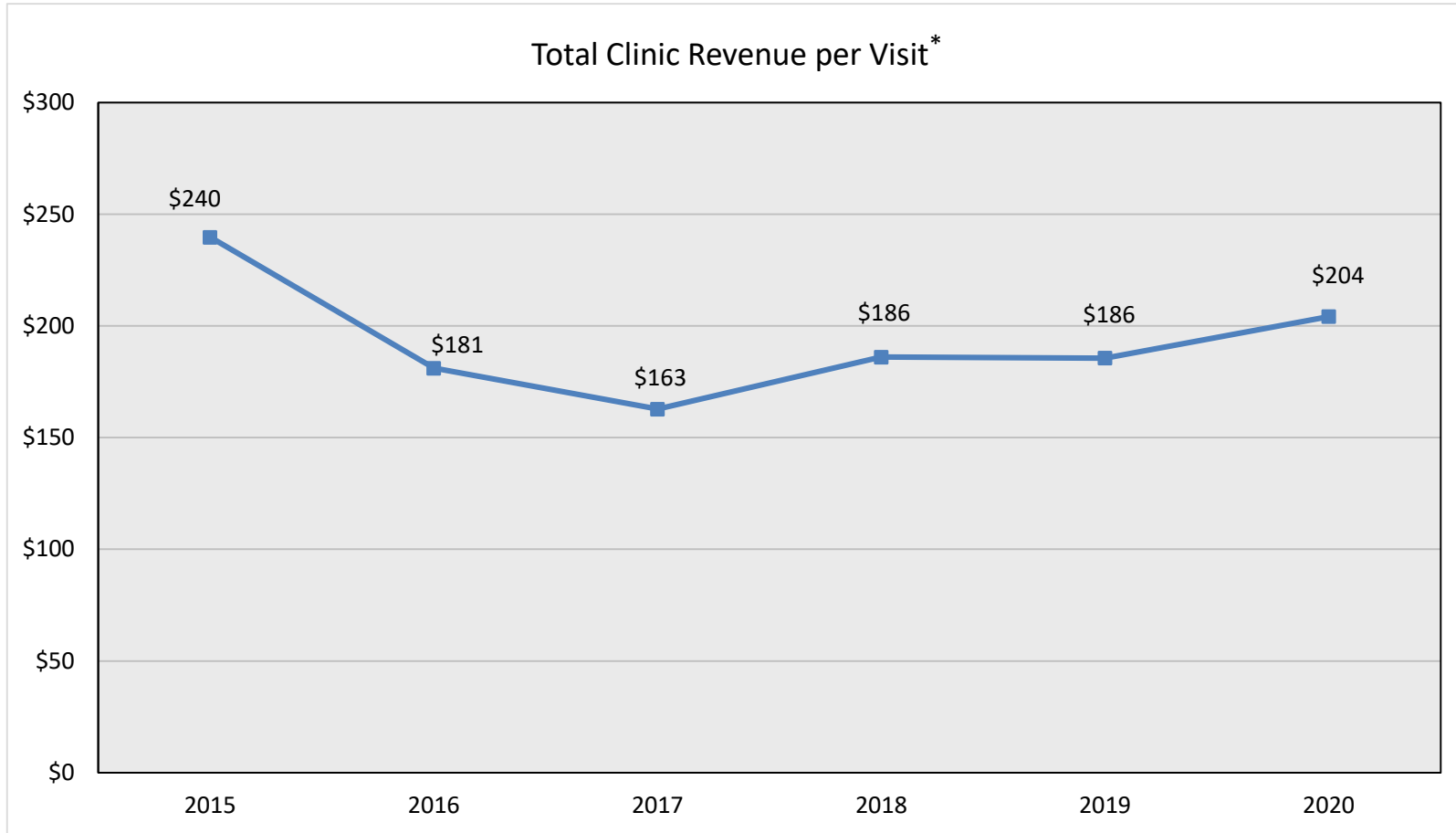
	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Total
<b>Gross Patient Revenue</b>	-	1,067,719	571,221	571,542	358,959	2,569,441
Contractual Allowances	-	208,870	92,987	62,360	80,965	445,182
Charity Care	-	596,211	328,434	392,572	177,735	1,494,953
Bad Debt	-	63,403	56,610	32,029	33,215	185,257
Total Contractual Allowances and Bad Debt	-	868,484	478,032	486,962	291,915	2,125,392
Other Patient Revenue	-	419,798	253,365	167,924	292,219	1,133,306
<b>Net Patient Revenue</b>	-	619,033	346,555	252,504	359,263	1,577,355
Collection %	-	57.98%	60.67%	44.18%	100.08%	61.39%
Grant Funds	99,702	447,377	288,655	264,544	129,694	1,229,971
Other Financial Assistance	29,244	106,564	46,585	93,933	41,902	318,229
Other Revenue	-	-	-	-	-	-
Total Other Revenues	128,946	553,941	335,241	358,477	171,596	1,548,201
<b>Total Revenues</b>	<b>128,946</b>	<b>1,172,974</b>	<b>681,795</b>	<b>610,981</b>	<b>530,859</b>	<b>3,125,556</b>
<i>Direct Operational Expenses:</i>						
Salaries and Wages	337,120	852,370	502,127	558,278	317,077	2,566,973
Benefits	83,234	219,517	142,769	152,022	89,286	686,828
Purchased Services	-	20,862	22,716	16,924	34,493	94,996
Medical Supplies	69	103,620	33,282	38,661	19,972	195,604
Other Supplies	2	12,372	5,345	4,503	7,578	29,800
Drugs	-	117	47	55	0	219
Repairs & Maintenance	-	11,918	8,761	9,968	8,364	39,011
Lease & Rental	-	105,482	60,417	56,707	54,126	276,731
Utilities	-	3,550	3,950	1,617	12,239	21,355
Other Expense	1,885	5,958	8,134	4,941	3,608	24,525
Insurance	-	-	-	-	379	379
Total Operational Expenses	422,309	1,335,767	787,546	843,676	547,122	3,936,421
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(293,363)</b>	<b>(162,792)</b>	<b>(105,751)</b>	<b>(232,695)</b>	<b>(16,263)</b>	<b>(810,865)</b>
Depreciation	-	7,310	7,173	6,596	33,051	54,129
<i>Overhead Allocations:</i>						
Risk Mgt	117	545	388	340	196	1,586
Rev Cycle	-	80,929	57,624	50,577	29,149	218,279
Internal Audit	533	2,470	1,759	1,544	890	7,196
Home Office Facilities	22,174	-	-	-	-	22,174
Administration	4,891	22,676	16,146	14,172	8,167	66,052
Human Resources	3,566	24,959	21,750	19,610	8,914	78,798
Legal	2,435	11,287	8,037	7,054	4,065	32,878
Records	984	4,563	3,249	2,852	1,643	13,291
Compliance	1,156	5,359	3,816	3,349	1,930	15,611
Finance	4,447	20,616	14,679	12,884	7,425	60,051
Public Relations	1,283	5,950	4,236	3,718	2,143	17,331
Information Technology	14,814	68,684	48,905	42,925	24,739	200,067
Corporate Quality	228	1,059	754	662	381	3,085
Project MGMT Office	789	3,658	2,604	2,286	1,317	10,654
Managed Care Contract	-	1,911	1,361	1,195	688	5,156
Total Overhead Allocations	57,417	254,666	185,307	163,168	91,651	752,209
<b>Total Expenses</b>	<b>479,726</b>	<b>1,597,742</b>	<b>980,026</b>	<b>1,013,440</b>	<b>671,824</b>	<b>4,742,759</b>
<b>Net Margin</b>	<b>\$ (350,780)</b>	<b>\$ (424,768)</b>	<b>\$ (298,231)</b>	<b>\$ (402,459)</b>	<b>\$ (140,965)</b>	<b>\$ (1,617,203)</b>
<b>Capital</b>	-	102,945	-	-	-	102,945
<b>Capital Contributions</b>	-	-	-	-	-	-
<b>General Fund Support/ Transfer In</b>	<b>\$ 1,666,019</b>	-	-	-	-	<b>1,666,019</b>

Clinic Visits - Adults and Pediatrics	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
	West Palm Beach	1,929	1,472	1,653	1,797	1,532	1,095	-	224	1,030	1,111	1,150	-	12,993	17,541	(25.9%)
Delray	1,429	957	1,019	1,151	994	542	-	99	895	1,058	1,071	-	9,215	9,514	(3.1%)	13,935
Lantana	1,752	1,489	1,664	2,034	1,809	1,415	563	464	1,215	1,477	1,461	-	15,343	15,347	(0.0%)	15,708
Belle Glade	950	746	912	847	762	484	10	71	462	504	527	-	6,275	9,692	(35.3%)	9,325
Lewis Center	296	213	241	246	246	198	-	-	236	437	577	-	2,690	2,674	0.6%	2,716
Lake Worth & Women's Health Care	1,553	1,161	1,303	1,255	1,301	731	296	632	1,039	1,048	1,067	-	11,386	16,926	(32.7%)	14,856
Jupiter Clinic	609	471	417	520	412	233	-	97	319	410	478	-	3,966	5,441	(27.1%)	5,356
West Boca & Women's Health Care	997	680	745	782	817	395	20	110	678	720	704	-	6,648	8,530	(22.1%)	9,821
Mobile Van	156	136	132	108	107	442	-	-	6	-	-	-	1,087	2,100	(48.2%)	1,928
Mangonia Park	-	67	58	80	168	166	-	193	450	396	326	-	1,904	-	-	-
Mangonia Park-Substance	499	497	455	423	464	-	-	-	-	-	-	-	2,338	6,591	(64.5%)	5,027
<b>Total Clinic Visits</b>	<b>10,170</b>	<b>7,889</b>	<b>8,599</b>	<b>9,243</b>	<b>8,612</b>	<b>5,701</b>	<b>889</b>	<b>1,890</b>	<b>6,330</b>	<b>7,161</b>	<b>7,361</b>	<b>-</b>	<b>73,845</b>	<b>94,356</b>	<b>(21.7%)</b>	<b>96,415</b>
<b>Dental Visits</b>																
West Palm Beach	975	776	778	915	864	460	-	56	218	216	207	-	5,465	8,870	(38.4%)	9,006
Lantana	733	570	541	470	470	225	-	-	-	-	17	-	3,026	9,638	(68.6%)	7,064
Delray	628	547	596	598	557	245	-	-	-	-	-	-	3,171	6,199	(48.8%)	6,466
Belle Glade	360	251	343	376	296	154	109	135	57	-	-	-	2,081	3,820	(45.5%)	3,530
<b>Total Dental Visits</b>	<b>2,696</b>	<b>2,144</b>	<b>2,258</b>	<b>2,359</b>	<b>2,187</b>	<b>1,084</b>	<b>109</b>	<b>191</b>	<b>275</b>	<b>216</b>	<b>224</b>	<b>-</b>	<b>13,743</b>	<b>28,527</b>	<b>(51.8%)</b>	<b>26,066</b>
<b>Total Medical and Dental Visits</b>	<b>12,866</b>	<b>10,033</b>	<b>10,857</b>	<b>11,602</b>	<b>10,799</b>	<b>6,785</b>	<b>998</b>	<b>2,081</b>	<b>6,605</b>	<b>7,377</b>	<b>7,585</b>	<b>-</b>	<b>87,588</b>	<b>122,883</b>	<b>(28.7%)</b>	<b>122,481</b>
<b>Key Ratios</b>																
Collection Ratio													18%			
Bad debt write off as a percentage of total billing													13%			
Collections per visit													29			
Charges Per Visit													164			
Percentage of A/R less than 120 days													64%			
Days in AR													58			
<b>Mental Health Counselors (non-billable)</b>																
West Palm Beach	178	101	164	171	153	192	10	70	183	108	15	-	1,345	1,313	2.4%	1,515
Delray	139	119	41	35	111	95	-	29	171	95	17	-	852	1,333	(36.1%)	1,498
Lantana	611	440	496	701	551	417	9	92	388	384	303	-	4,392	2,786	57.6%	5,070
Belle Glade	53	95	149	137	103	38	-	7	114	114	61	-	871	250	248.4%	216
Mangonia Park	53	150	296	391	278	189	3	85	143	235	229	-	2,052	5,508	(62.7%)	-
Lewis Center	240	173	215	178	177	-	-	-	58	178	158	-	1,377	2,912	(52.7%)	2,510
Lake Worth	204	146	163	192	140	89	1	34	169	58	9	-	1,205	2,117	(43.1%)	1,575
Jupiter	-	-	-	-	-	1	-	-	-	-	-	-	1	-	0.0%	-
West Boca	3	1	-	1	-	4	1	-	1	-	-	-	11	-	0.0%	-
Mobile Van	96	71	76	45	44	30	-	-	-	-	-	-	362	1,198	(69.8%)	619
<b>Total Mental Health Screenings</b>	<b>1,577</b>	<b>1,296</b>	<b>1,600</b>	<b>1,851</b>	<b>1,557</b>	<b>1,055</b>	<b>24</b>	<b>317</b>	<b>1,227</b>	<b>1,172</b>	<b>792</b>	<b>-</b>	<b>12,468</b>	<b>17,417</b>	<b>-28.4%</b>	<b>13,003</b>

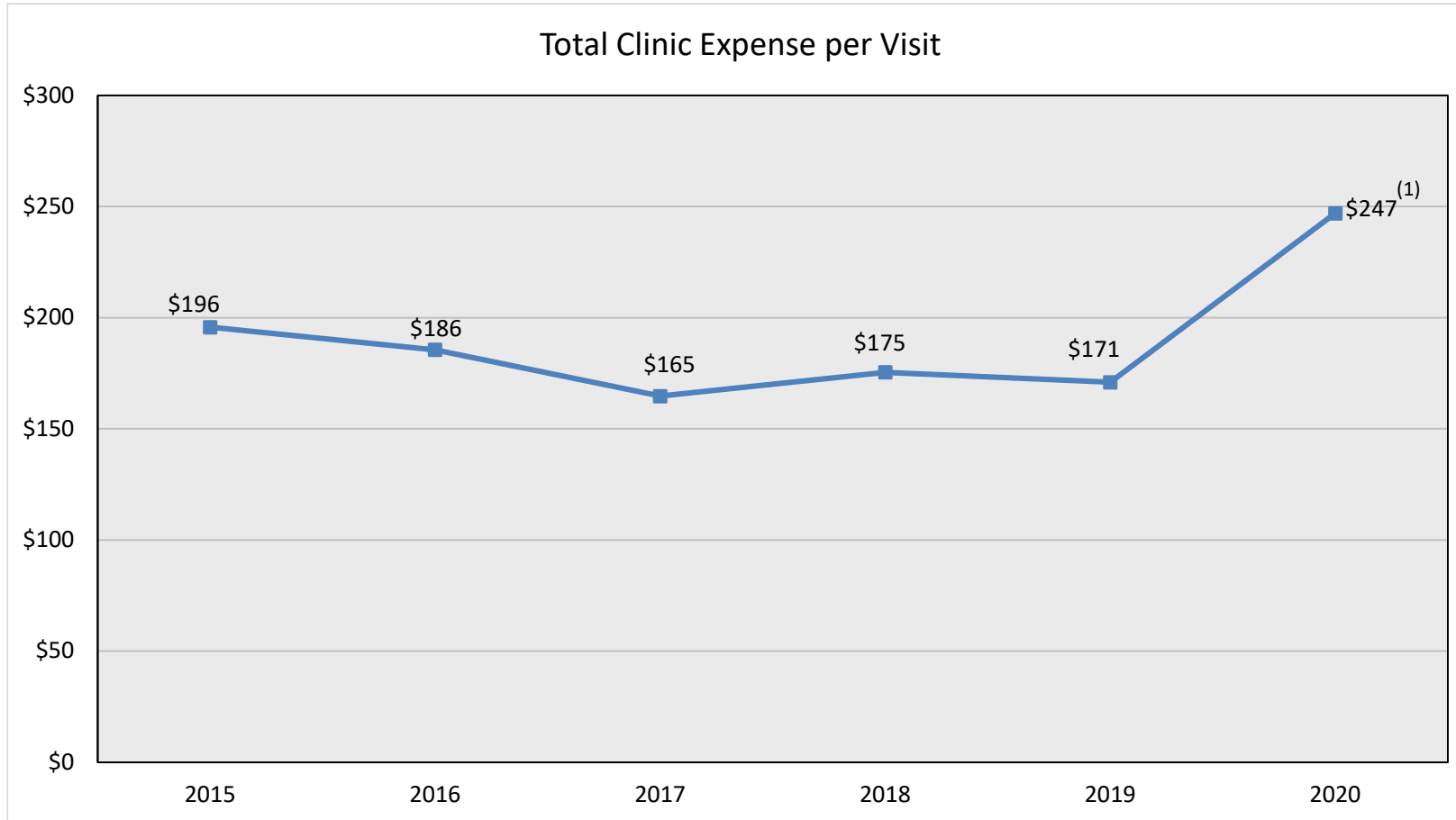
### Primary Care Clinics Funding Sources



Fiscal YTD August 2020 Total Revenues \$29,057,165



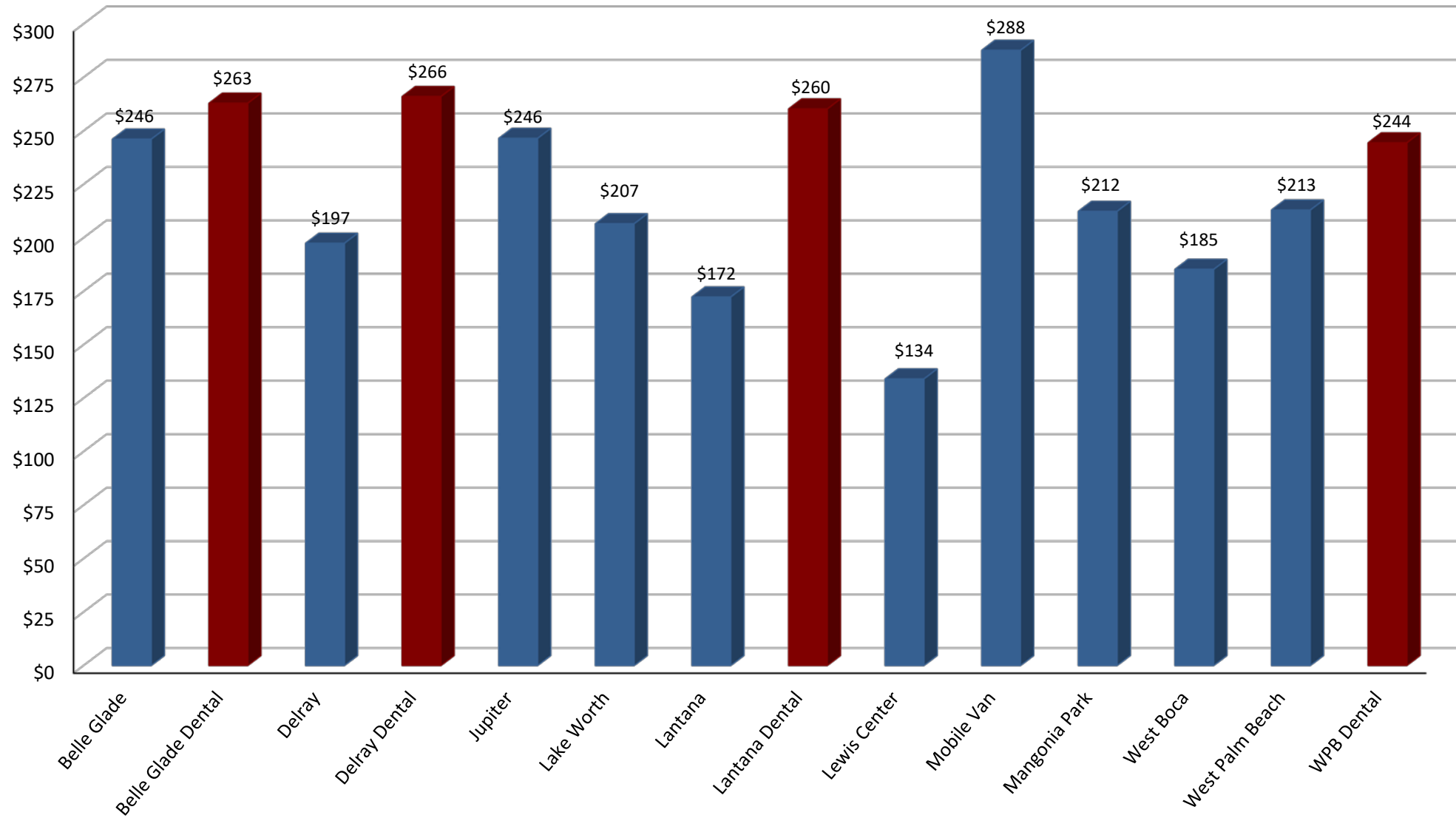
\* Based on total medical and dental visits



(1) Increase in expense per visit is due to lower visits in Fiscal Year 2020 related to operational changes for Covid-19

\* Based on total medical, dental, and mental health visits

Total Operating Expenses per Visit by Clinic



\*Based on Fiscal Year-to-Date August 2020 total operating expenses

\*\* Visits for the medical clinics include medical and mental health visits



**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

**1. Description: Expanding the Finance Committee**

**2. Summary:**

This agenda item presents a summary of the bylaw requirements of the Finance Committee and information on steps to add members to the committee.

**3. Substantive Analysis:**

At the September 30, 2020 Board Meeting, a request to add additional members to the Finance Committee was raised. This agenda item presents information from the Bylaws about the Finance Committee to assist the Board in adding additional members.

The current members of the Finance Committee are:

- Mike Smith
- James Elder
- Tammy Jackson-Moore

The Bylaws are silent on the number of committee members for the Finance Committee. The Executive Director or his /her designee are identified as a non-voting, ex-officio member. The Bylaws permit clinic staff employees to be members of the committee as well.

Section 11.10 of the Bylaws is presented below as reference for this agenda item:

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 monthly 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.

As per the Bylaws, the Clinic Board can appoint additional members to the Finance Committee.

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

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

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

Reviewed for financial accuracy and compliance with purchasing procedure:

\_\_\_\_\_  
N/A  
Joel H. Snook  
VP & Chief Financial Officer

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

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

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

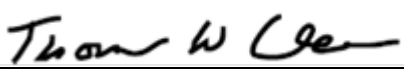
**6. Recommendation:**

Staff recommends the Board approve additional members to the Finance Committee.

Approved for Legal sufficiency:

Christy Goddeau, Esq.  FOR \_\_\_\_\_

Valerie Shahriari  
VP & General Counsel

  
\_\_\_\_\_  
Thomas Cleare  
AVP, Planning & Community Engagement

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

**1. Description: Health Care District recommendation for permanent replacement of Executive Director**

**2. Summary:**

Dr. Belma Andric was appointed by the C. L. Brumback Primary Clinics Board as the permanent Project Director in 2018. Since that time, her role as the Chief Medical Officer at the Health Care District has expanded and continues to do so. At this time we would like to recommend that Dr. Hyla Fritsch be made the Executive Director of Clinics and Pharmacy (HRSA Project Director). She will continue to work closely with and report to Dr. Andric.

**3. Substantive Analysis:**

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

- Establishment of 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, services and utilization
- Assuring that the clinics are operated in compliance with applicable Federal, State and local laws and regulations

There is an additional agreement that has been entered between the Health Care District and District Clinic Holdings, Inc. which further outlines the role of each party in operating the clinics. The Health Care District has a robust infrastructure which provides necessary operational support, including an understanding that all clinics' personnel are employees of the District. Additionally, both parties have agreed to jointly review and approve a budget and financial plan each year.

Over the past eight years, since the District accepted responsibility for the FQHC's, there has been only one Executive Director who was skilled in facilitating open communications and was able to navigate the complex relationship between the two entities. At the same time, the District investment in the primary care clinics continues to grow from approximately \$6M per year to over \$12M per year in 2020. The District has supported the strategic growth and expanded services that have been offered in the clinics and continues to identify the clinics as the primary access point for care into

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

the “District Cares” program. While the underlying purpose of expansion is to increase access to patients, which has occurred, the rate of expense to grow has increased at a higher rate. For example, there were 21,809 unique patients in 2014 and 46,384 patients in 2019.

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 interests of staff, the respective Boards, and most importantly the patient, to allow Dr. Hyla Fritsch to continue serving the C. L. Brumback Primary Care Clinics in an expanded capacity. Her long history with the District and proven track record of successfully developing strong clinic operations is invaluable in assessing various approaches clinic management. She is able to work with existing staff and leadership, as well as the DCHI Board and HCD Board to develop suggestions to optimize care to patients of the FQHC’s in a cost-effective, sustainable manner.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A  
 \_\_\_\_\_  
 Joel Snook  
 VP & Chief Financial Officer

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

N/A

\_\_\_\_\_

Committee Name

\_\_\_\_\_

Date Approved

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

**6. Recommendation:**

HCD Management recommends DCHI, Inc. d/b/a C. L. Brumback Primary Care Clinics appoint Dr. Hyla Fritsch as the permanent Executive Director of Clinics and Pharmacy (HRSA Project Director).

Approved for Legal sufficiency:

*Christy Goddeau, Esq.*

*Valerie Shahriari FOR*

\_\_\_\_\_  
Valerie Shahriari  
VP & General Counsel

*Dr. Belma Andric*

\_\_\_\_\_  
Dr. Belma Andric  
VP, CMO & Executive Director of Clinics

*Darcy J. Davis*

\_\_\_\_\_  
Darcy J. Davis  
Chief Executive Officer

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

**1. Description: Executive Director Informational Update**

**2. Summary:**

Updates on key changes within C. L. Brumback Primary Care Clinics:

- COVID Progress Reports

**3. Substantive Analysis:**

**COVID Progress Reports**

The quarterly progress reports for all three COVID grants were submitted on 10/12/2020.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
Joel Snook  
Chief Financial Officer

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

N/A

\_\_\_\_\_  
Committee Name


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


**6. Recommendation:**

Staff recommends Board receive and file the Executive Director Informational Update.

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

Approved for Legal sufficiency:

*Christy Goddeer, Esq.*  *FOR*  
\_\_\_\_\_  
Valerie Shahriari  
General Counsel

  
\_\_\_\_\_  
Dr. Belma Andric  
Chief Medical Officer, VP & Executive Director  
of Clinic Services

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

**1. Description: Licensed Independent Practitioner Credentialing and Privileging**

**2. Summary:**

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

**3. Substantive Analysis:**

The LIP 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
Grbic	Valena	MD	Internal Medicine	Initial Credentialing

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

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

Valena Grbic, MD is joining the West Palm Beach Clinic specializing in Internal Medicine. She attended the University of Novisad Yugoslavia and also completed her Residency at the University of Illinois. Dr. Grbic is certified in Internal Medicine by The American Board of Internal Medicine. She has been in practice for twenty one years and is fluent in Serbian.



**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
 Joel H. Snook, CPA  
 Chief Financial Officer

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

N/A

\_\_\_\_\_  
 Committee Name

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

**6. Recommendation:**

Staff recommends the Board approve the Initial Credentialing and privileging of Dr. Valena Grbic, MD, Internal Medicine.

Approved for Legal sufficiency:

*Christy Goddeer, Esq. [Signature] For*

\_\_\_\_\_  
 Valerie Shahriari  
 VP & General Counsel

\_\_\_\_\_  
 Dr. Ana Ferwerda  
 FQHC Medical Director

\_\_\_\_\_  
 Dr. Belma Andric  
 Chief Medical Officer, VP & Executive Director  
 of Clinic Services

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

**1. Description: Operations Reports – September 2020**

**2. Summary:**

This agenda item provides the following operations reports for September 2020:

- Provider Productivity, including in-person and telehealth metrics and No Show trended over time
- Clinic Service Center (CSC) metrics

**3. Substantive Analysis:**

The Clinics continue to see a gradual increase in overall total billable visits with just over 9,200 in the previous month, which is higher than August. Telemedicine visits comprise almost 25% of overall visits. No Show percentage for September is slightly higher at 18%, which is up from 17% in August. Of the no shows reported, approximately 78% were for in-person visits. Pediatric services continue to exceed productivity targets for both in-person and telehealth visits and Women’s Health is meeting 97% of their target for in-person. Just over 55% of adult providers are at or over 90% of their productivity targets for in-person visits and overall productivity is at 87% for in-person and 75% for telehealth. Boca, Jupiter, Lake Worth, Lantana Clinics exceeded 90% of productivity targets for in-person visits.

The main phone number for the Clinics (561-642-1000) received 68,072 calls from 25,498 unique phone numbers. The busiest time of the day continues to be morning hours, and the busiest day of the week is typically Monday. Of these incoming calls, 31,254 were handled directly by our Clinic Service Center team who made 9,472 appointments.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

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Joel H. Snook  
 VP & Chief Financial Officer

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

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

N/A


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Committee Name Date Approved

**6. Recommendation:**

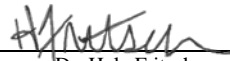
Staff recommends the Board Approve the Operations Reports for September 2020.

Approved for Legal sufficiency:

*Christy Goddard, Esq.*  FOR


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Valerie Shahriari  
VP & General Counsel



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Dr. Hyla Fritsch  
Executive Director Clinic Operations & Pharmacy  
Services



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Dr. Belma Andric  
Chief Medical Officer, VP & Executive Director  
of Clinic Services

## Billable Visits

Rndrng Prvdrtype  
All

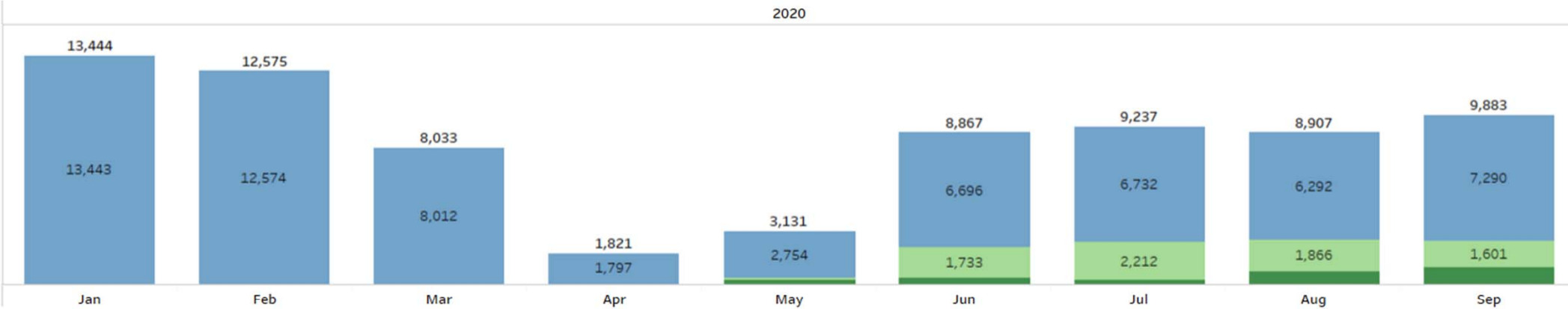
Chgservicedt  
1/1/2020 to 9/30/2020

Type  
All

All

■ In Person   
 ■ Telephonic   
 ■ Virtual

### Monthly Encounters

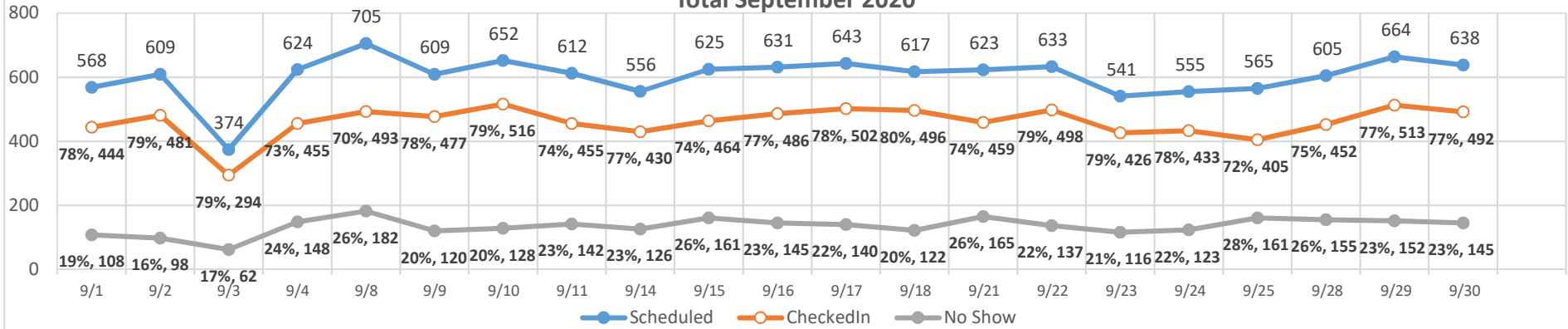


### Clinic

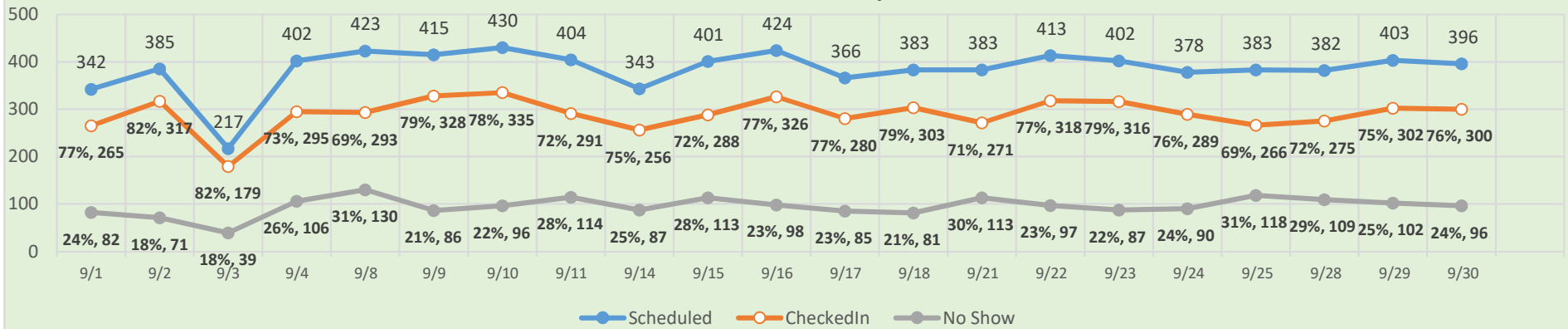
Clinic	Pts	Encs	Provs
Lantana	8,345	14,791	16,793
West Palm Beach	5,232	9,327	9,825
Lake Worth	4,334	8,670	9,075
Delray Beach	3,960	7,132	7,512
West Palm Beach Dental	2,376	3,143	3,356
Lantana Dental	1,370	1,676	1,975
Delray Beach Dental	1,005	1,330	1,436
Belle Glade	2,629	4,909	5,138
Boca	2,447	4,988	5,003
Belle Glade Dental	761	971	1,182
Jupiter	1,625	3,036	3,038
Lewis Center	1,492	3,384	3,765
Mobile Clinic	620	740	786
Mangonia Park	597	2,982	4,373
<b>Grand Total</b>	<b>30,109</b>	<b>65,590</b>	<b>73,254</b>

# SEPTEMBER 2020 TOTAL APPOINTMENTS

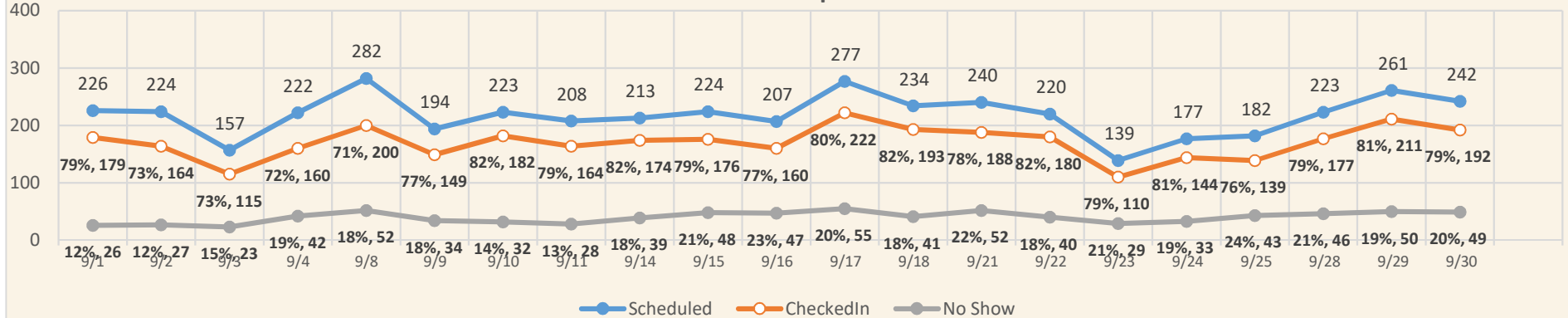
## Total September 2020



## Total In-Person September 2020



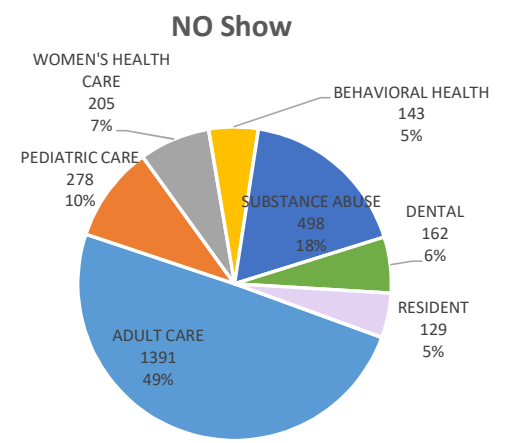
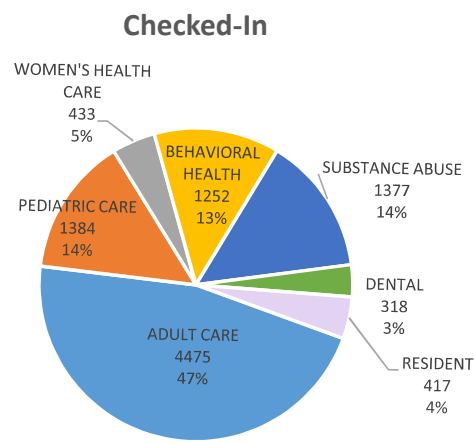
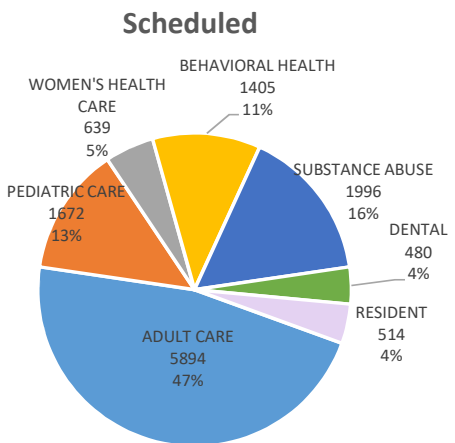
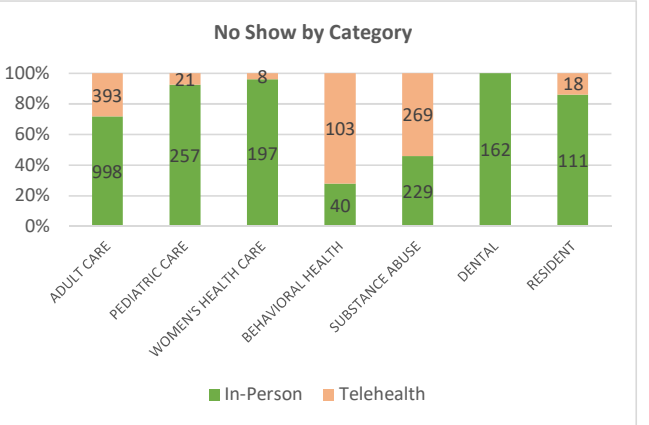
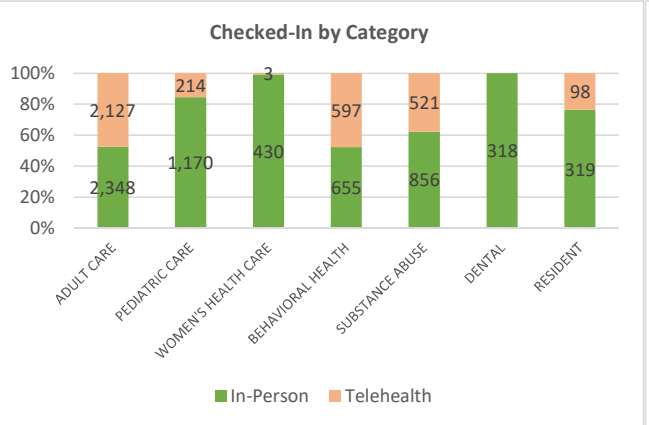
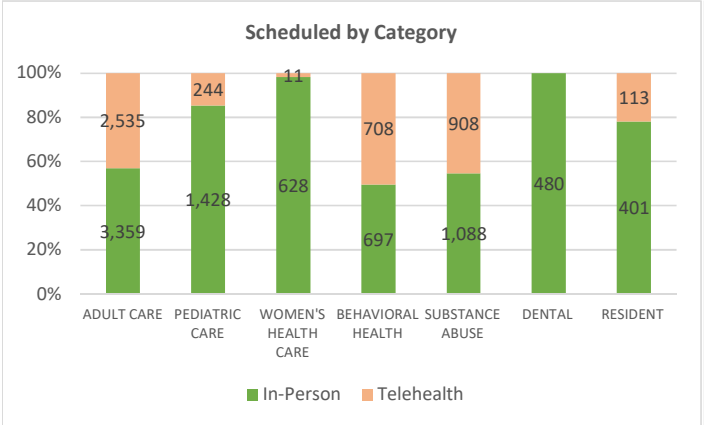
## Total Telehealth September 2020



<51%	>=51% and < 80%	>= 80% and <100%	>= 100%
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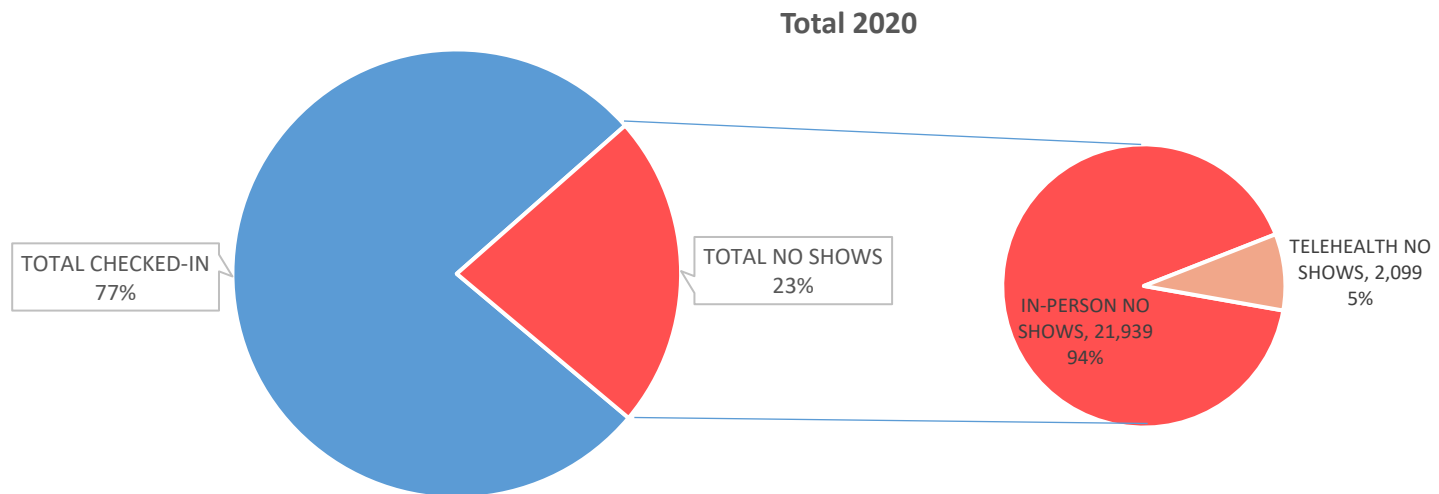
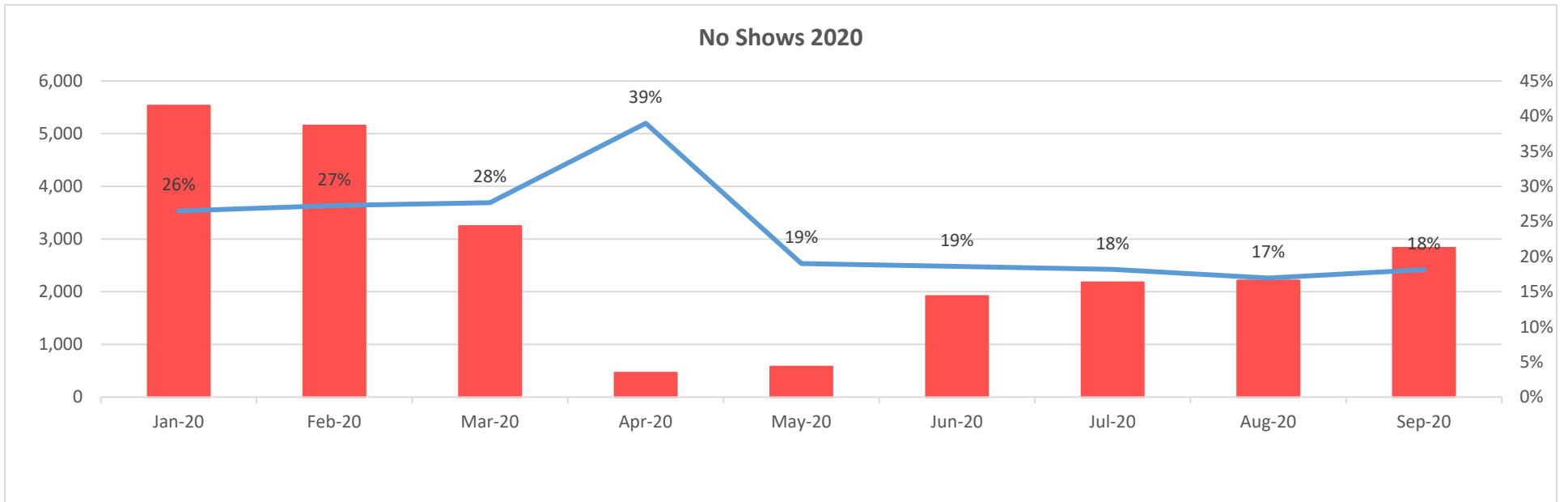
**SEPTEMBER 2020 WEEKLY TOTAL APPOINTMENTS BY CATEGORY**

Category	In-Person						Telehealth						
	September 2020 (as 9/30/2020)	Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No show	% Target	% No Show
ADULT CARE		2,667	3,359	2,348	998	88%	30%	2,821	2,535	2,127	393	75%	16%
PEDIATRIC CARE		1,092	1,428	1,170	257	107%	18%	186	244	214	21	115%	9%
WOMEN'S HEALTH CARE		445	628	430	197	97%	31%	9	11	3	8	33%	73%
BEHAVIORAL HEALTH		761	697	655	40	86%	6%	774	708	597	103	77%	15%
SUBSTANCE ABUSE		1,183	1,088	856	229	72%	21%	801	908	521	269	65%	30%
DENTAL		445	480	318	162	71%	34%						
RESIDENT		399	401	319	111	80%	28%	165	113	98	18	59%	16%
<b>Grand Total</b>		<b>6,992</b>	<b>8,081</b>	<b>6,096</b>	<b>1,994</b>	<b>87%</b>	<b>25%</b>	<b>4,756</b>	<b>4,519</b>	<b>3,560</b>	<b>812</b>	<b>75%</b>	<b>18%</b>

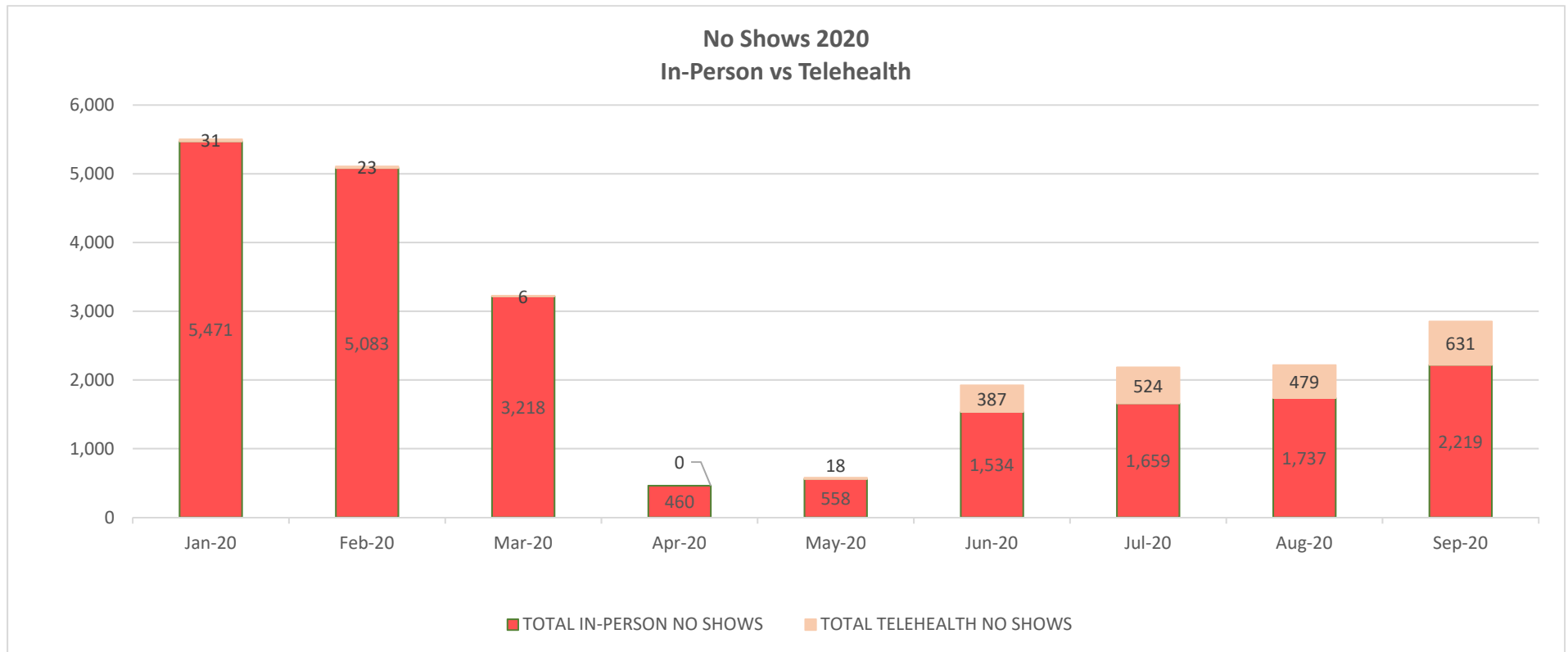


## NO SHOW AS SEPTEMBER 2020

# Appointments including Dental (except M/Quick Testing and Covid)	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Total 2020
TOTAL CHECKED-IN	15,355	13,745	8,486	728	2,467	8,409	9,811	10,854	12,786	82,641
TOTAL NO SHOWS	5,535	5,155	3,248	465	579	1,921	2,180	2,215	2,835	24,133
	26%	27%	28%	39%	19%	19%	18%	17%	18%	23%



# Appointments including Dental (except M/Quick Testing and Covid)	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Total 2020
TOTAL NO SHOWS	5,535	5,155	3,248	465	579	1,921	2,180	2,215	2,835	24,133
TOTAL IN-PERSON NO SHOWS	5,471	5,083	3,218	460	558	1,534	1,659	1,737	2,219	21,939
	98.84%	98.60%	99.08%	98.92%	96.37%	79.85%	76.10%	78.42%	78.27%	90.91%
TOTAL TELEHEALTH NO SHOWS	31	23	6	0	18	387	524	479	631	2,099
	0.56%	0.45%	0.18%	0.00%	3.11%	20.15%	24.04%	21.63%	22.26%	8.70%





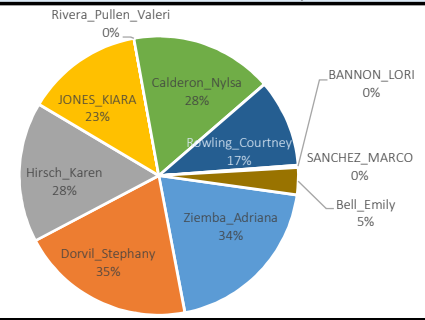
SEPTEMBER 2020 WEEKLY TOTAL APPOINTMENTS BY PROVIDER

<51%	>=51% and < 80%	>= 80% and <100%	>= 100%
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SEPTEMBER 2020 (as 9/30/2020)		In-Person						Telehealth					
Provider / App Type		Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show
ADULT CARE	Alfonso_Puentes_Rami	107	165	106	60	99%	36%	190	169	147	20	77%	12%
	Dabu_Viray_Dabu	242	278	217	62	90%	22%	127	98	75	23	59%	23%
	Dorce_Medard_Jennife	11	11	7	2	64%	18%	70	36	25	10	36%	28%
	Duthil_Marie	142	142	85	58	60%	41%	227	177	144	33	63%	19%
	Florez_Gloria	135	170	123	47	91%	28%	144	137	107	29	74%	21%
	Harberger_Seneca	185	138	87	33	47%	24%	40	17	11	4	28%	24%
	Inacio_Vanessa	144	178	142	36	99%	20%	225	213	202	7	90%	3%
	Montenegro_Claudia	157	182	127	55	81%	30%	176	160	126	32	72%	20%
	Secin_santana_delvis	232	285	183	101	79%	35%	119	98	92	6	77%	6%
	Perez_Daniel	277	292	204	90	74%	31%	74	43	38	5	51%	12%
	Cesaire_Jean_Rose_Ca	112	152	99	53	88%	35%	168	152	126	25	75%	16%
	JeanJacques_Fernique	142	196	143	53	101%	27%	186	174	147	27	79%	16%
	Lam_MinH_Dai	102	164	123	41	121%	25%	194	216	198	18	102%	8%
	Navarro_Elsy	145	227	173	55	119%	24%	183	169	141	28	77%	17%
	Philistin_Ketely	126	196	130	66	103%	34%	202	181	156	25	77%	14%
	Pierre_Louis_Joanne	148	227	156	72	105%	32%	180	181	145	36	81%	20%
Shoaf_Noremi	109	147	114	35	105%	24%	139	146	110	35	79%	24%	
St_VilJoseph_Carline	151	209	129	79	85%	38%	177	168	137	30	77%	18%	
PEDS	Clarke_Aaron_Noella	351	405	305	100	87%	25%						
	Dessalines_Duclos	85	119	98	20	115%	17%	140	171	148	17	106%	10%
	Lazaro_Nancy	288	393	338	59	117%	15%	45	72	66	3	147%	4%
	Normil_Smith_Sherlou	368	511	429	78	117%	15%	1	1		1		100%
WOMEN'S HEALTH CARE	Ferwerda_Ana	126	137	89	48	71%	35%						
	Casanova_Jennifer	319	491	341	149	107%	30%	9	11	3	8	33%	73%
BEHAVIORAL HEALTH & SUBSTANCE ABUSE	Alvarez_Franco	71	64	52	12	73%	19%	298	259	213	46	71%	18%
	Esplin_Elaine	1	1		1		100%	221	219	118	64	53%	29%
	Rexach_Claudia	82	88	85	2	104%	2%	164	195	100	69	61%	35%
	Romain_Reynette	24	29	28	1	117%	3%	222	295	169	80	76%	27%
	STANFIELD_LUCIA	82	74	64	8	78%	11%	164	176	117	50	71%	28%
DENTAL	Alonso_Zenaida	150	130	80	50	53%	38%						
	Cucuras_John	130	161	115	46	88%	29%						
	Rotella_Robert	165	189	123	66	75%	35%						
	Seminario_Ada												

% Telehealth Checked-In for combined BH & SA providers

In-Person and Telehealth (combined)		Target	Scheduled	CheckedIn	No show	% Target	% No Show
BH & SUBSTANCE ABUSE	Provider / App Type						
	Ziemba_Adriana	116	142	115	27	99%	19%
	Dorvil_Stephany	246	245	207	29	84%	12%
	Hirsch_Karen	246	180	171	9	70%	5%
	JONES_KIARA	234	202	191	11	82%	5%
	Rivera_Pullen_Valeri	78	72	72	0	92%	0%
	Calderon_Nylsa	246	241	231	9	94%	4%
	Rowling_Courtney	80	24	19	4	24%	17%
	BANNON_LORI	312	273	210	64	67%	23%
	SANCHEZ_MARCO	320	359	257	99	80%	28%
Bell_Emily	312	263	210	56	67%	21%	

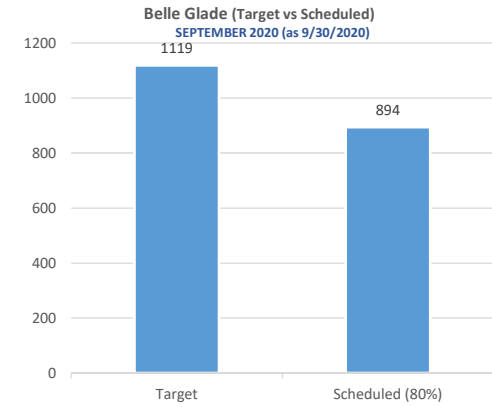


RESIDENT	Falconi_Giselle												
	Hernandez_Anthony	20	21	13	6	65%	29%						
	Hua_Jennifer												
	Preseendieu_Heden												
	Saunders_Nzingha												
	BUI_THY	30	39	36	10	120%	26%	24	11	13		54%	0%
	Draper_William	24	19	16	10	67%	53%						
	Grieb_Jesse	102	104	82	24	80%	23%						
	Kosubevsky_Benjamin	60	68	55	23	92%	34%						
	Saoji_Janaki												
	Adame_John												
	Beasley_Quanecia												
	Dusseault_Sonya	112	107	85	24	76%	22%						
Landeros_Christal	2	1	1		50%	0%	78	48	38	10	49%	21%	
St_Prix_Kerlan	49	42	31	14	63%	33%	63	54	47	8	75%	15%	
<b>Grand Total</b>	<b>6,992.00</b>	<b>8,081</b>	<b>6,096</b>	<b>1,994</b>	<b>87%</b>	<b>25%</b>	<b>4,756</b>	<b>4,519</b>	<b>3,560</b>	<b>812</b>	<b>75%</b>	<b>18%</b>	

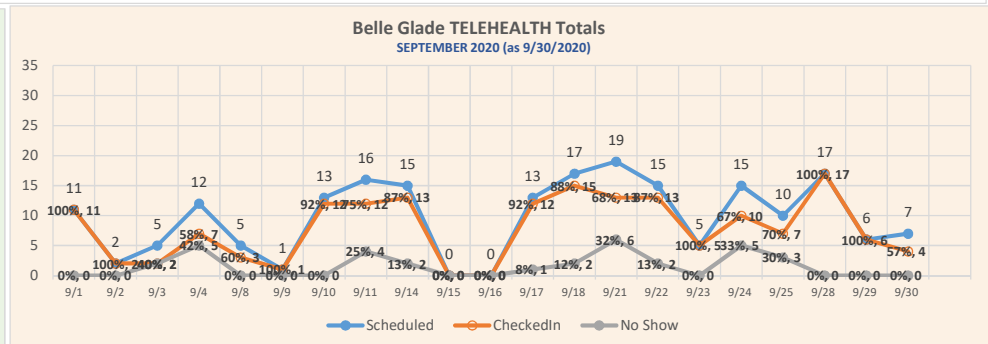
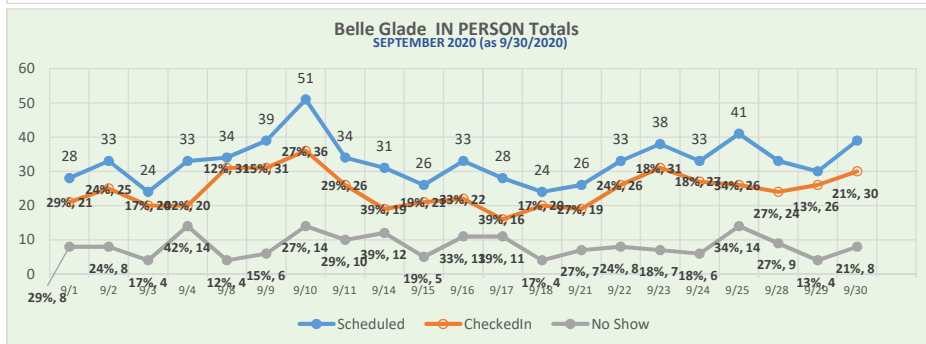
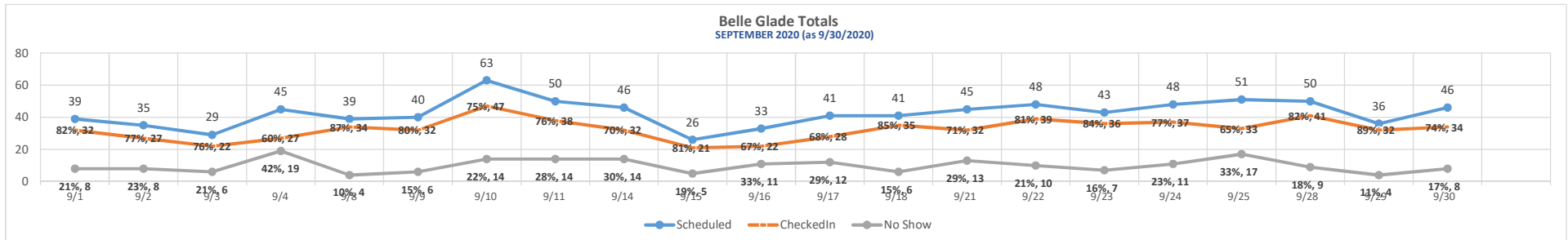
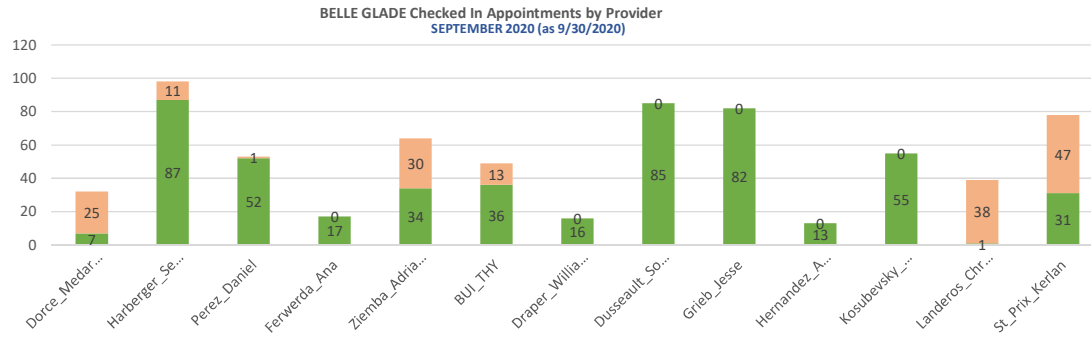
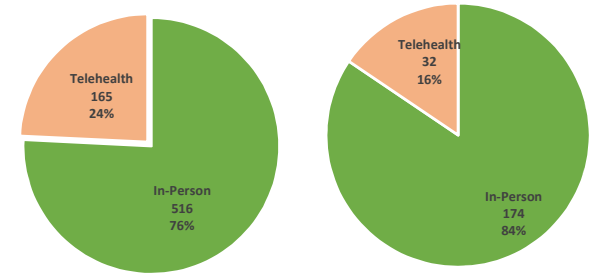
**BELLE GLADE**

<51%	>=51% and <80%	>=80% and <100%	>=100%
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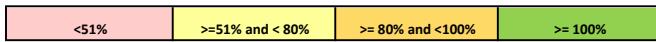
SEPTEMBER 2020 (as 9/30/2020)	In-Person						Telehealth					
Provider / App Type	Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show
Dorce_Medard_Jennife	11	11	7	2	64%	18%	70	36	25	10	36%	28%
Harberger_Seneca	185	138	87	33	47%	37%	40	17	11	4	28%	24%
Perez_Daniel	122	75	52	21	43%	28%	4	1	1		25%	0%
Ferwerda_Ana	54	24	17	7	31%	29%						
Ziembra_Adriana	69	78	64		93%	18%	% Telehealth CheckedIn for combined BH & SA Teams					
							47%					
BUI_THY	30	39	36	10	120%	26%	24	11	13		54%	0%
Draper_William	24	19	16	10	67%	53%						
Dusseault_Sonya	112	107	85	24	76%	22%						
Grieb_Jesse	102	104	82	24	80%	23%						
Hernandez_Anthony	20	21	13	6	65%	29%						
Kosubevsky_Benjamin	60	68	55	23	92%	34%						
Landeros_Christal	2	1	1		50%	0%	78	48	38	10	49%	21%
St_Prix_Kerlan	49	42	31	14	63%	33%	63	54	47	8	75%	15%
<b>Grand Total</b>	<b>806</b>	<b>690</b>	<b>516</b>	<b>174</b>	<b>64%</b>	<b>25%</b>	<b>313</b>	<b>204</b>	<b>165</b>	<b>32</b>	<b>53%</b>	<b>19%</b>



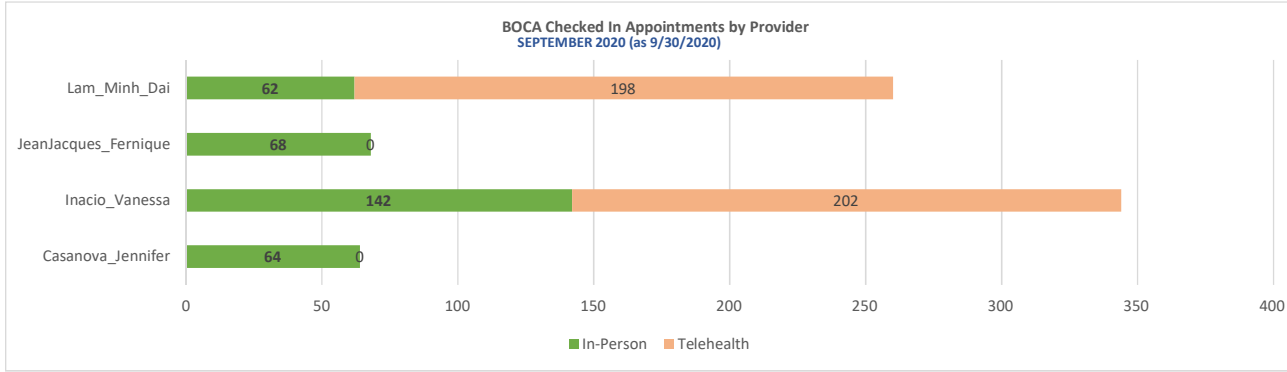
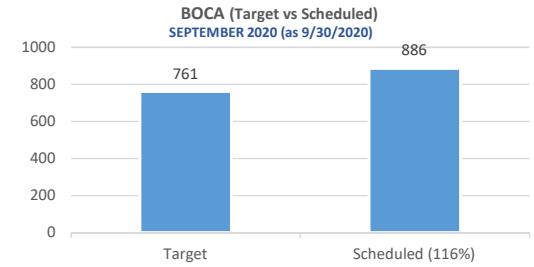
BELLE GLADE Checked-In      BELLE GLADE NO Show



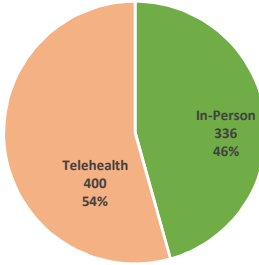
**BOCA**



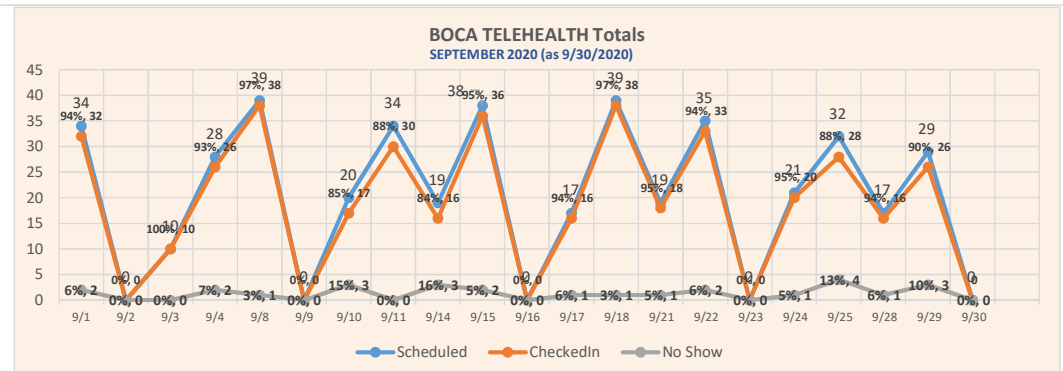
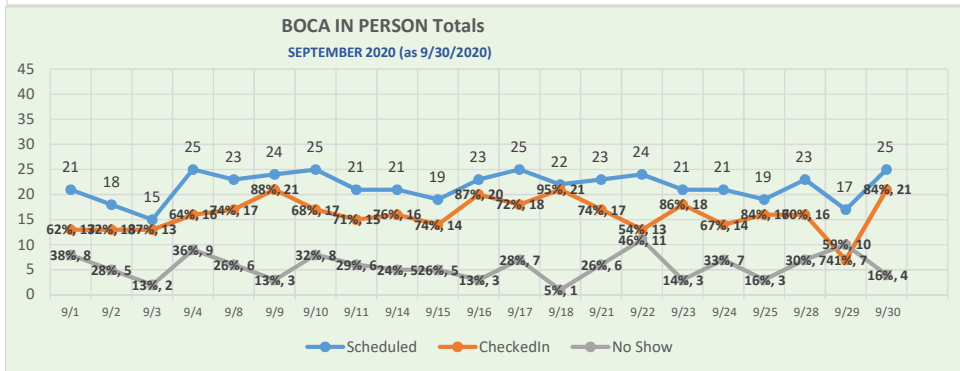
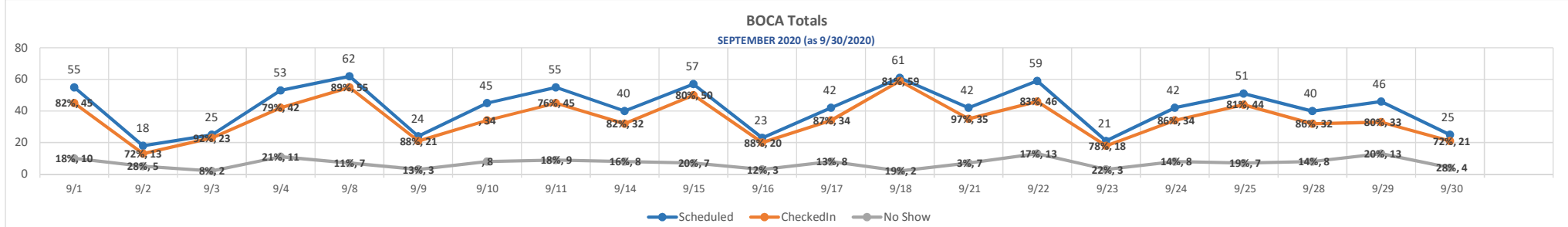
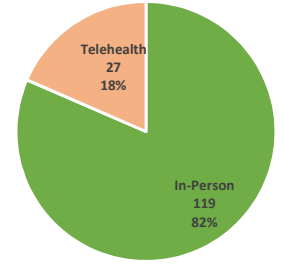
SEPTEMBER 2020 (as 9/30/2020)	In-Person						Telehealth					
	Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show
Casanova_Jennifer	78	104	64	40	82%	38%	2	2		2		100%
Inacio_Vanessa	144	178	142	36	99%	20%	225	213	202	7	90%	5%
JeanJacques_Fernique	63	87	68	19	108%	22%	1	2		2		100%
Lam_Minh_Dai	56	86	62	24	111%	28%	192	214	198	16	103%	7%
<b>Grand Total</b>	<b>341</b>	<b>455</b>	<b>336</b>	<b>119</b>	<b>99%</b>	<b>26%</b>	<b>420</b>	<b>431</b>	<b>400</b>	<b>27</b>	<b>95%</b>	<b>7%</b>



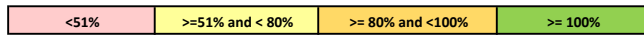
BOCA Total Checked-In



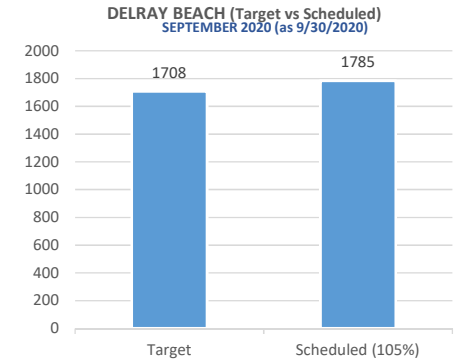
BOCA Total NO Show



# DELRAY BEACH

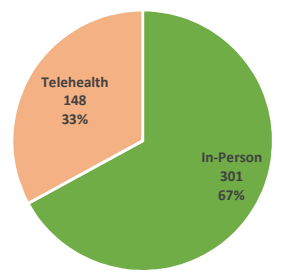
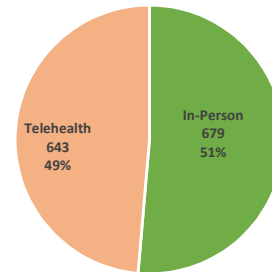


SEPTEMBER 2020 (as 9/30/2020) Provider / App Type	In-Person						Telehealth					
	Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show
Cesaire_Jean_Rose_Ca	112	152	99	53	88%	35%	168	152	126	25	75%	17%
Duthil_Marie	142	142	85	58	60%	40%	227	177	144	33	63%	19%
JeanJacques_Fernique	78	108	74	34	95%	31%	2	2		2		100%
Lam_Minh_Dai	46	78	61	17	133%	22%	2	2		2		100%
Montenegro_Claudia	157	182	127	55	81%	30%	176	160	126	32	72%	21%
St_VilJoseph_Carline	151	209	129	79	85%	38%	177	168	137	30	77%	18%
	In-Person and Telehealth (combined)						% Telehealth CheckedIn for combined BH & SA Teams					
Rowling_Courtney	24	8	7		29%	13%			0%			
Dorvil_Stephany	246	245	207	29	84%	16%			53%			
<b>Grand Total</b>	<b>809</b>	<b>983</b>	<b>679</b>	<b>301</b>	<b>84%</b>	<b>31%</b>	<b>899</b>	<b>802</b>	<b>643</b>	<b>148</b>	<b>72%</b>	<b>20%</b>



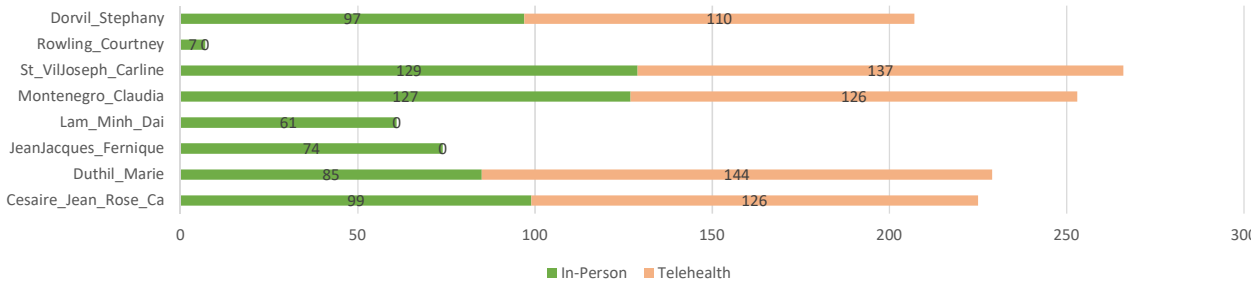
DELRAY BEACH Total Checked-In

DELRAY BEACH Total NO Show



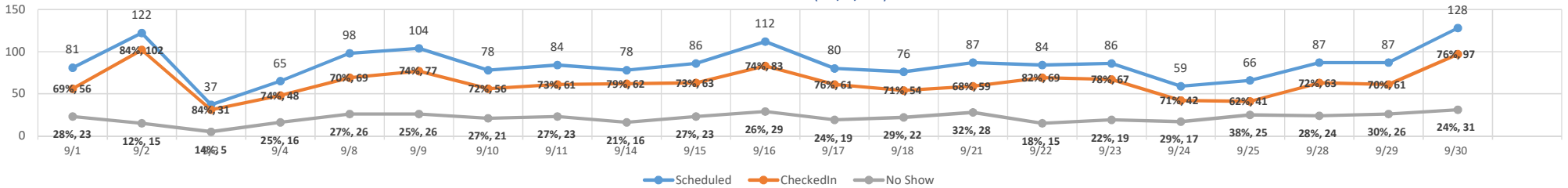
DELRAY BEACH Checked In Appointments by Provider

SEPTEMBER 2020 (as 9/30/2020)



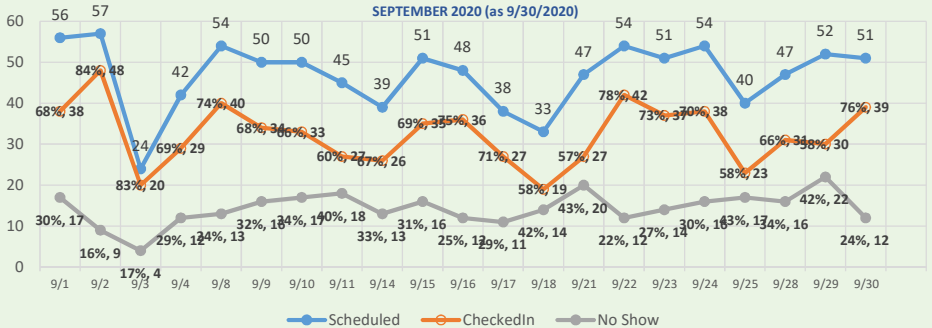
DELRAY BEACH Totals

SEPTEMBER 2020 (as 9/30/2020)



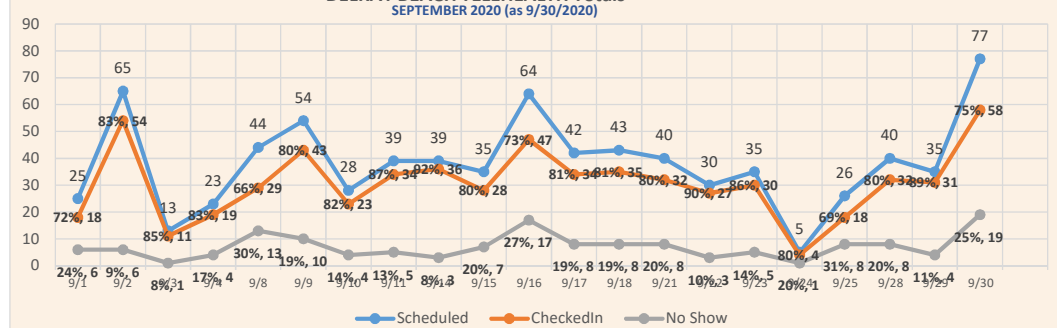
DELRAY BEACH IN PERSON Totals

SEPTEMBER 2020 (as 9/30/2020)



DELRAY BEACH TELEHEALTH Totals

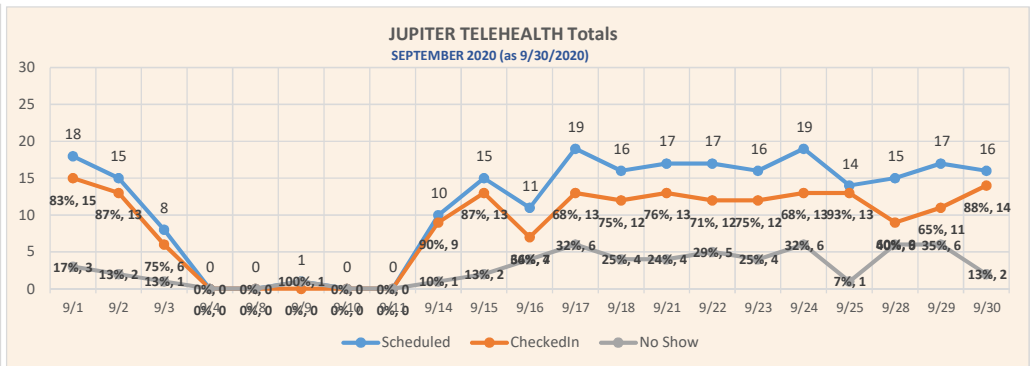
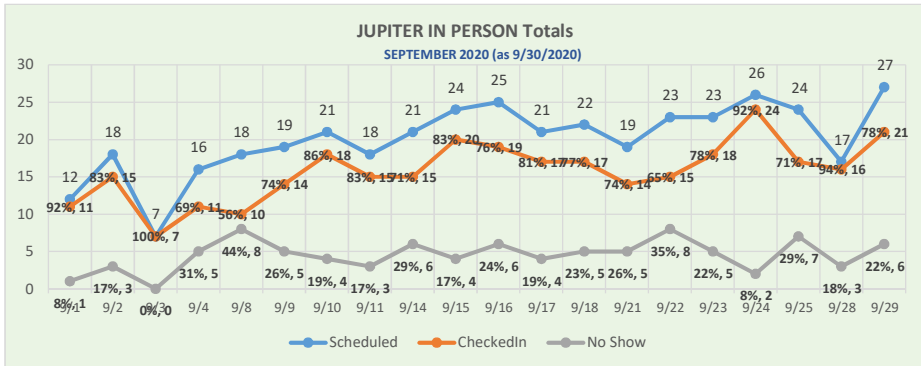
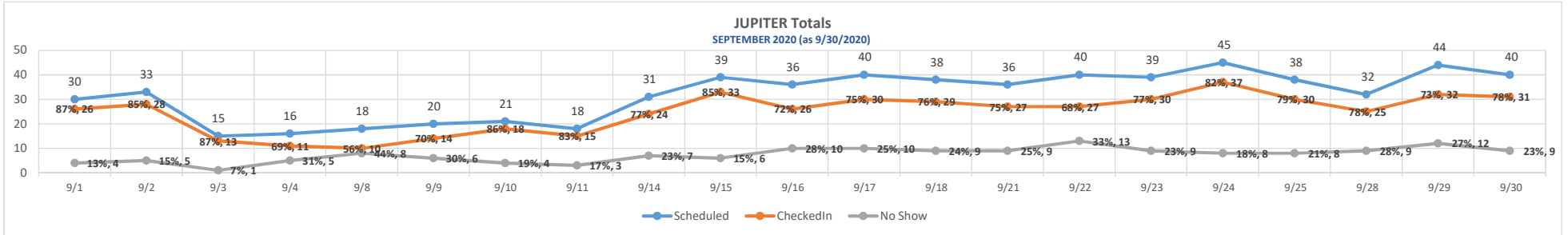
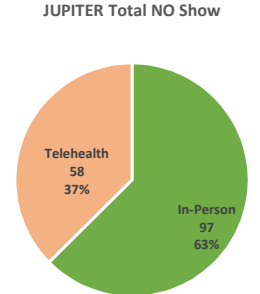
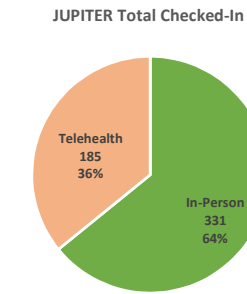
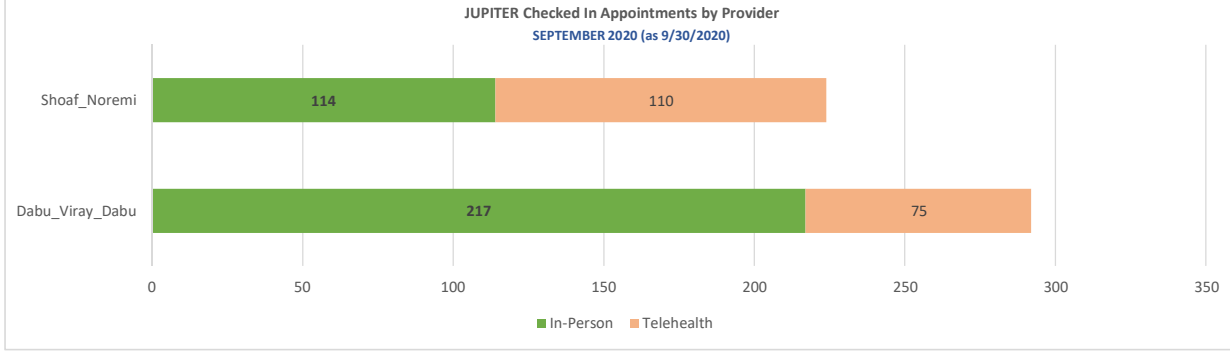
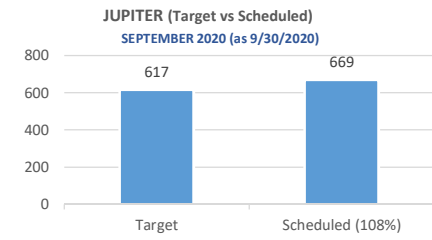
SEPTEMBER 2020 (as 9/30/2020)



# JUPITER



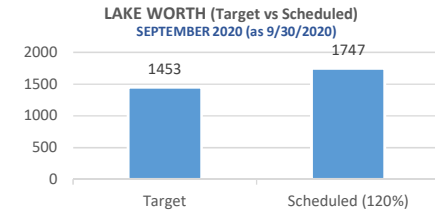
SEPTEMBER 2020 (as 9/30/2020) Provider / App Type	In-Person						Telehealth					
	Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show
Dabu_Viray_Dabu	242	278	217	62	90%	22%	127	98	75	23	59%	23%
Shoaf_Noremi	109	147	114	35	105%	22%	139	146	110	35	79%	25%
<b>Grand Total</b>	<b>351.00</b>	<b>425</b>	<b>331</b>	<b>97</b>	<b>94%</b>	<b>22%</b>	<b>266</b>	<b>244</b>	<b>185</b>	<b>58</b>	<b>70%</b>	<b>24%</b>



# LAKE WORTH

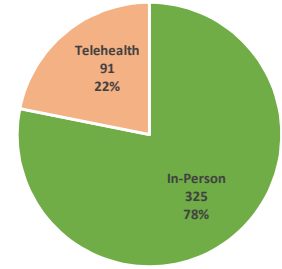
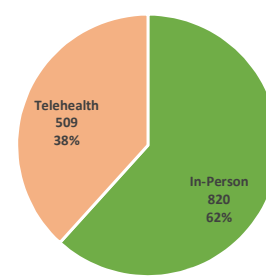
<51%    >=51% and < 80%    >= 80% and <100%    >= 100%

SEPTEMBER 2020 (as 9/30/2020)	In-Person						Telehealth					
Provider / App Type	Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show
Alfonso_Puentes_Rami	53	83	52	31	98%	37%	190	168	147	19	77%	13%
Casanova_Jennifer	241	387	277	109	115%	28%	7	9	3	6	43%	67%
Ferwerda_Ana	72	113	72	41	100%	36%						
Philistin_Ketely	126	196	130	66	103%	34%	202	181	156	25	77%	14%
Pierre_Louis_Joanne	148	227	156	72	105%	31%	180	181	145	36	81%	20%
	In-Person and Telehealth (combined)						% Telehealth CheckedIn for combined BH & SA Teams					
JONES_KIARA	234	202	191	11	82%	5%			30%			
<b>Grand Total</b>	<b>802</b>	<b>1145</b>	<b>820</b>	<b>325</b>	<b>102%</b>	<b>28%</b>	<b>651</b>	<b>602</b>	<b>509</b>	<b>91</b>	<b>78%</b>	<b>15%</b>

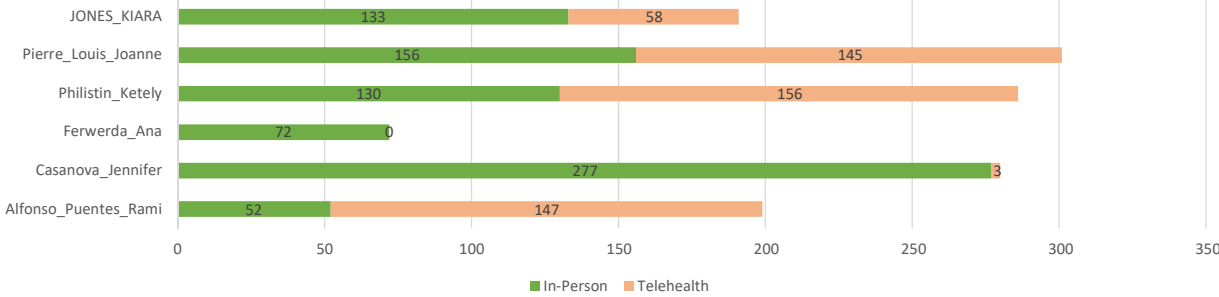


LAKE WORTH Total Checked-In

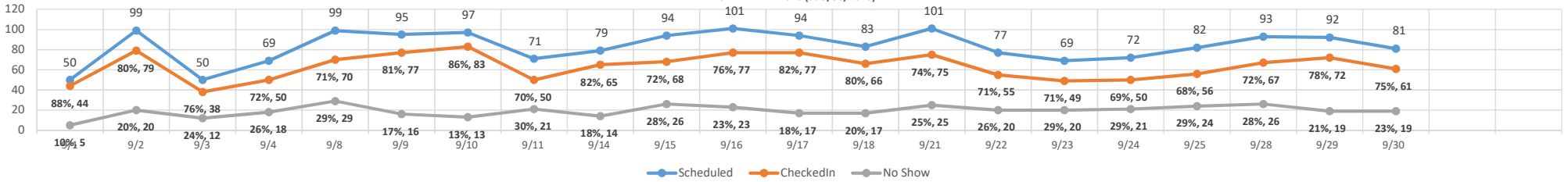
LAKE WORTH Total NO Show



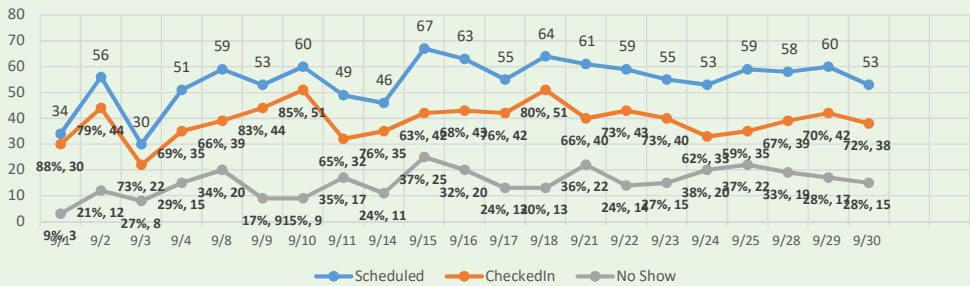
LAKE WORTH Checked In Appointments by Provider  
SEPTEMBER 2020 (as 9/30/2020)



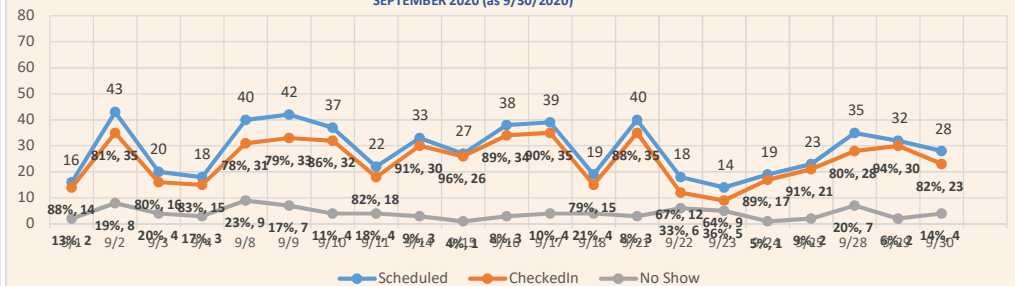
LAKE WORTH Totals  
SEPTEMBER 2020 (as 9/30/2020)



LAKE WORTH IN PERSON Totals  
SEPTEMBER 2020 (as 9/30/2020)

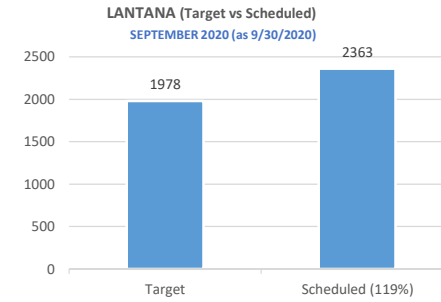


LAKE WORTH TELEHEALTH Totals  
SEPTEMBER 2020 (as 9/30/2020)

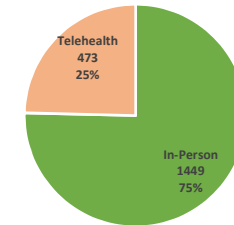


# LANTANA

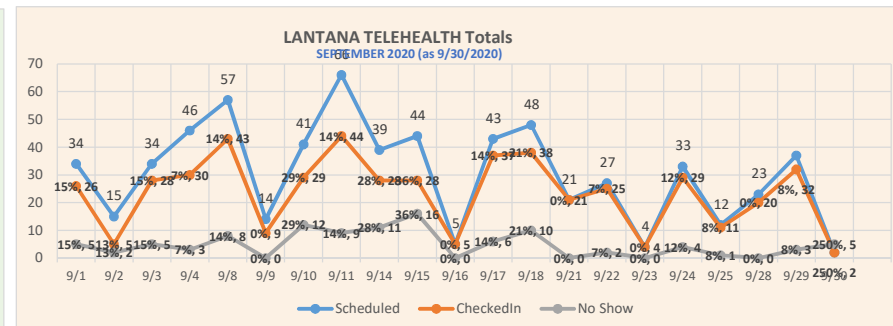
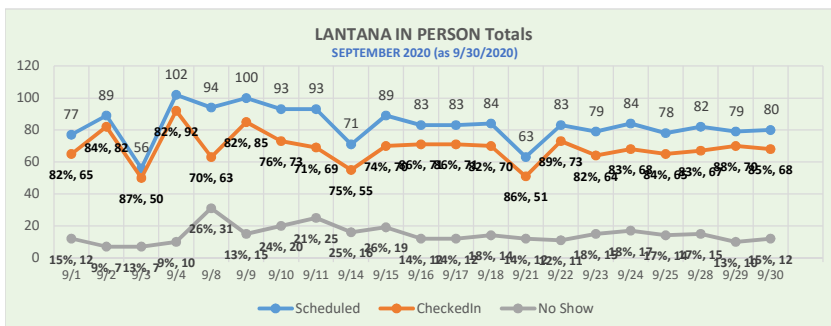
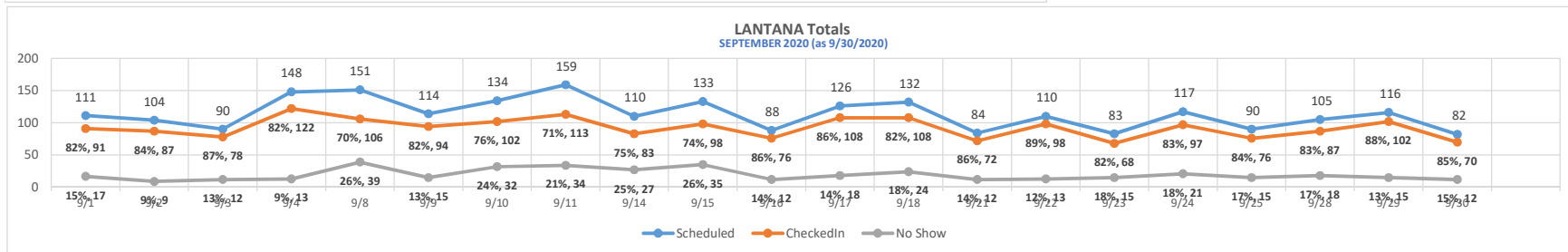
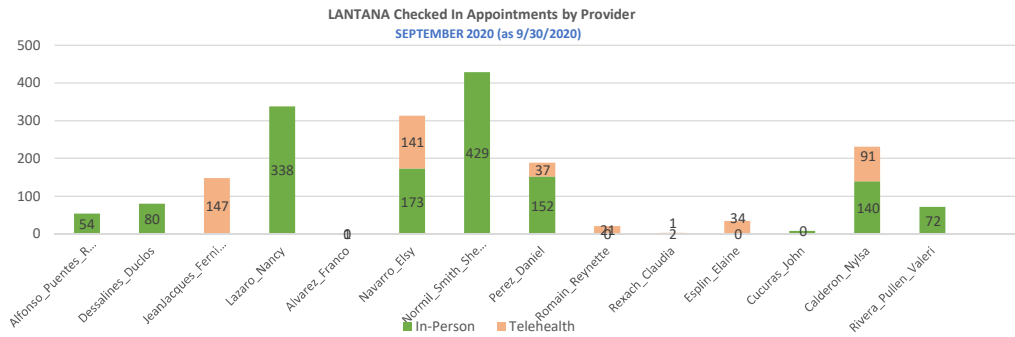
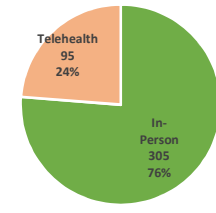
	<51%		>=51% and < 80%		>= 80% and <100%		>= 100%					
SEPTEMBER 2020 (as 9/30/2020)	In-Person						Telehealth					
Provider / App Type	Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show
Alfonso_Puentes_Rami	54	82	54	29	100%	34%		1		1		
Dessalines_Duclos	63	94	80	14	127%	15%						
JeanJacques_Fernique	1	1	1		100%	0%	183	170	147	23	80%	
Lazaro_Nancy	288	393	338	59	117%	14%						
Alvarez_Franco							1	1	1		100%	
Navarro_Elisy	145	227	173	55	119%	24%	183	169	141	28	77%	
Normil_Smith_Sherlou	368	511	429	78	117%	16%	1	1		1		
Perez_Daniel	155	217	152	69	98%	30%	70	42	37	5	53%	
Romain_Reynette							36	36	21	10	58%	
Rexach_Claudia	11	2	2		18%	0%	13	13	1		8%	
Esplin_Elaine							72	82	34	19	47%	
Cucuras_John	10	8	8		80%	0%						
	In-Person and Telehealth (combined)						% Telehealth CheckedIn for combined BH & SA Teams					
Calderon_Nylsa	246	241	231	9	94%	4%			39%			
Rivera_Pullen_Valeri	78	72	72		92%	0%						
<b>Grand Total</b>	<b>1317</b>	<b>1748</b>	<b>1449</b>	<b>305</b>	<b>110%</b>	<b>17%</b>	<b>661</b>	<b>615</b>	<b>473</b>	<b>95</b>	<b>72%</b>	<b>23%</b>



LANTANA Total Checked-In



LANTANA Total NO Show

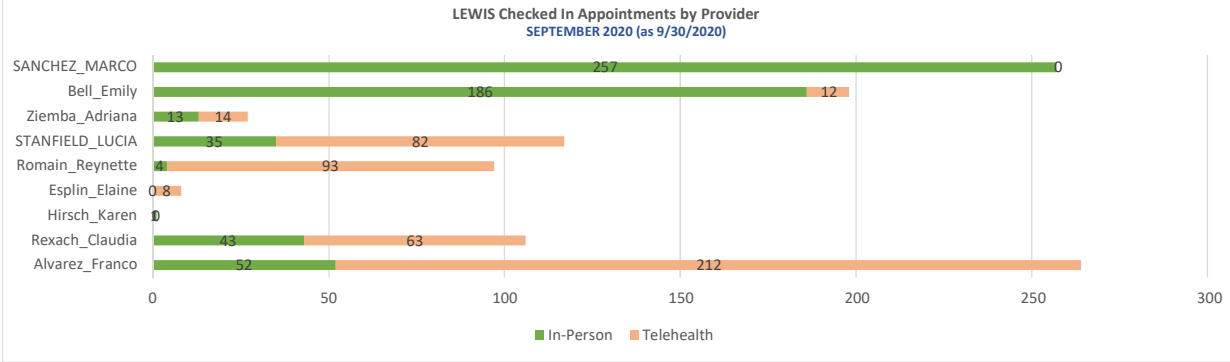
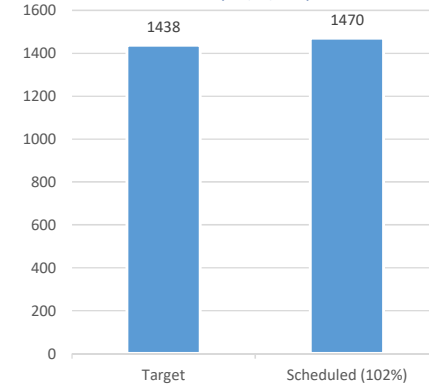


**LEWIS**

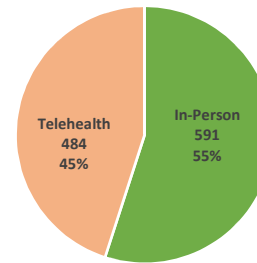
<51%	>=51% and < 80%	>= 80% and <100%	>= 100%
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SEPTEMBER 2020 (as 9/30/2020)	In-Person						Telehealth					
	Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show
Alvarez_Franco	71	64	52	12	73%	19%	297	258	212	46	71%	18%
Rexach_Claudia	33	44	43		130%	2%	87	117	63	40	72%	46%
Hirsch_Karen	1	1	1		100%	0%						
Esplin_Elaine							24	15	8	1	33%	47%
Romain_Reynette	9	4	4		44%	0%	129	174	93	50	72%	47%
STANFIELD_LUCIA	38	42	35	5	92%	17%	112	109	82	23	73%	25%
	In-Person and Telehealth (combined)						% Telehealth CheckedIn for combined BH & SA Teams					
Ziamba_Adriana	29	37	27	10	93%	27%			52%			
Bell_Emily	288	246	198	51	69%	20%			6%			
SANCHEZ_MARCO	320	359	257	99	80%	28%			0%			
<b>Grand Total</b>	<b>753</b>	<b>758</b>	<b>591</b>	<b>164</b>	<b>78%</b>	<b>22%</b>	<b>685</b>	<b>712</b>	<b>484</b>	<b>173</b>	<b>71%</b>	<b>32%</b>

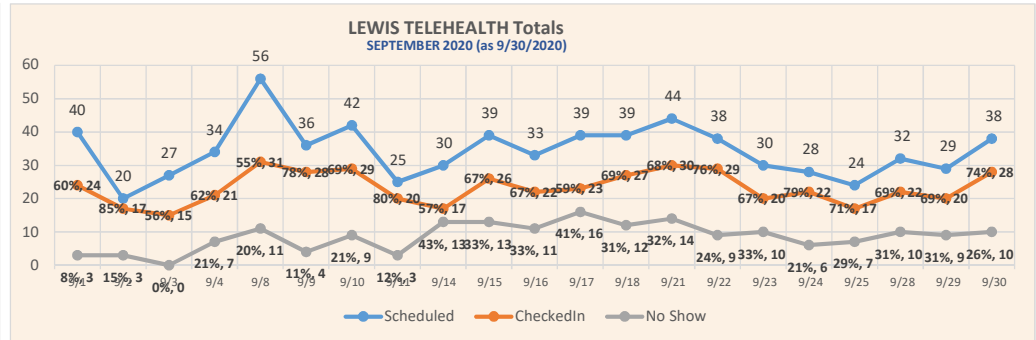
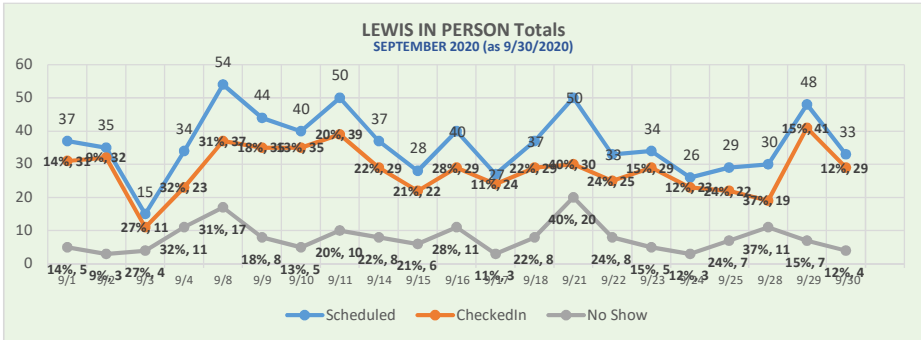
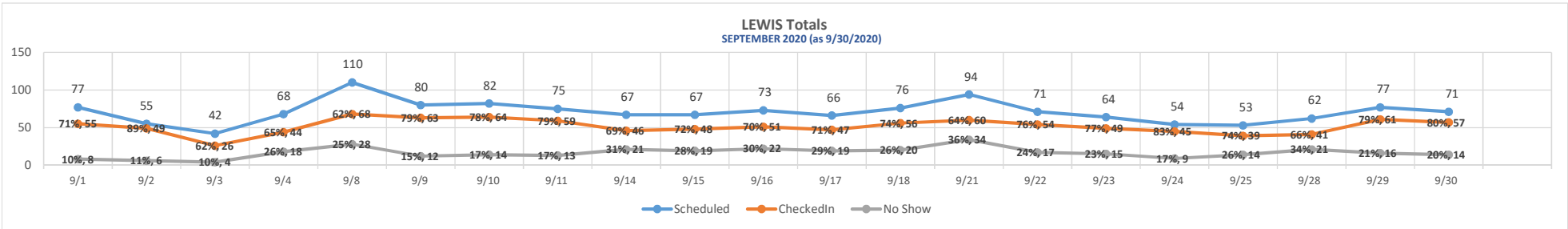
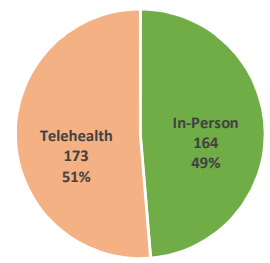
LEWIS (Target vs Scheduled)  
SEPTEMBER 2020 (as 9/30/2020)



LEWIS Total Checked-In



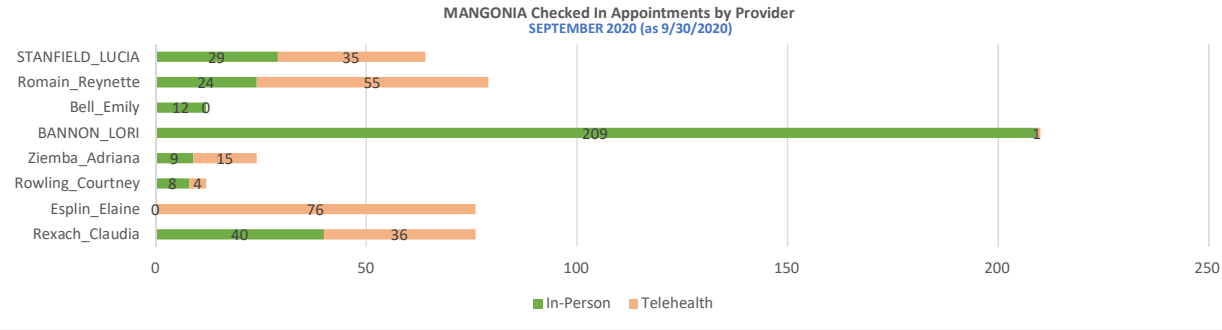
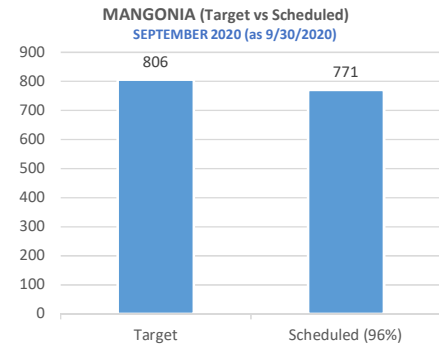
LEWIS Total NO Show



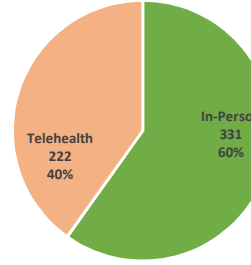


# MANGONIA

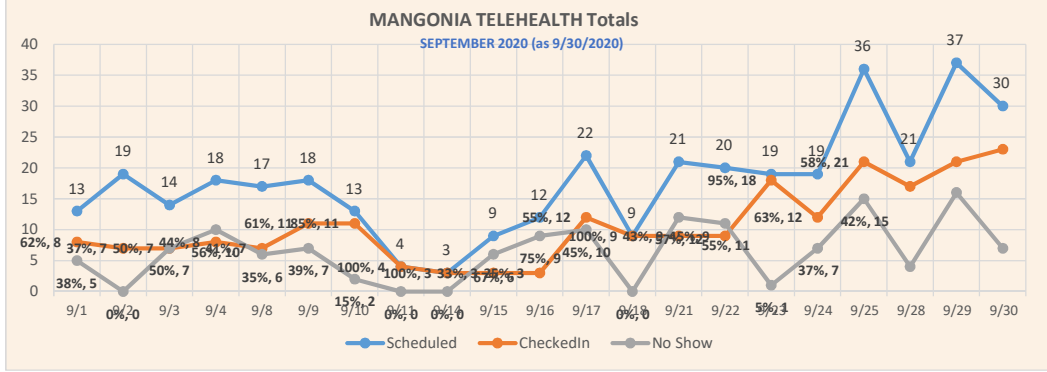
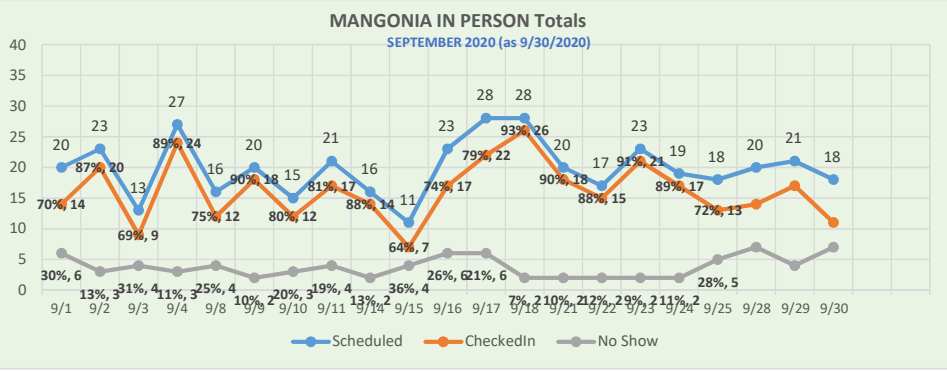
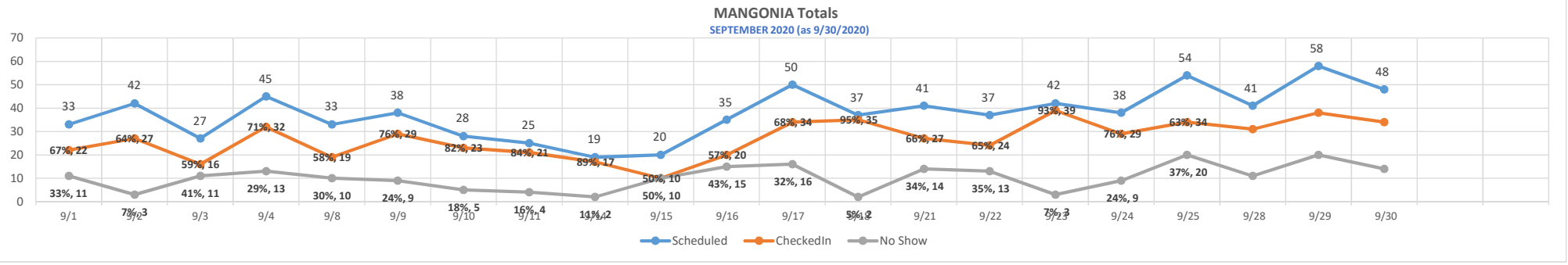
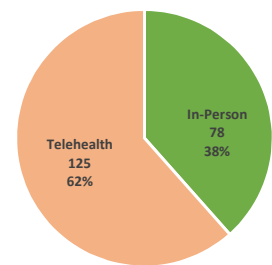
	<51%		>=51% and < 80%		>= 80% and <100%		>= 100%													
SEPTEMBER 2020 (as 9/30/2020)									In-Person						Telehealth					
Provider / App Type	Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show		
Rexach_Claudia	38	42	40	2	105%	5%	64	65	36	29	56%	45%								
Esplin_Elaine	1	1		1		100%	125	122	76	44	61%	38%								
STANFIELD_LUCIA	44	32	29	3	66%	9%	52	66	35	27	67%	47%								
In-Person and Telehealth (combined)									% Telehealth CheckedIn for combined BH & SA Teams											
Rowling_Courtney	56	16	12	4	21%	25%											33%			
Ziemba_Adriana	18	27	24	3	133%	11%											63%			
BANNON_LORI	312	273	210	64	67%	23%											0%			
Bell_Emily	24	17	12	5	50%	29%											0%			
Romain_Reynette	72	110	79	21	110%	28%											70%			
<b>Grand Total</b>	<b>488</b>	<b>408</b>	<b>331</b>	<b>78</b>	<b>68%</b>	<b>19%</b>	<b>318</b>	<b>363</b>	<b>222</b>	<b>125</b>	<b>70%</b>	<b>39%</b>								



MANGONIA Total Checked-In

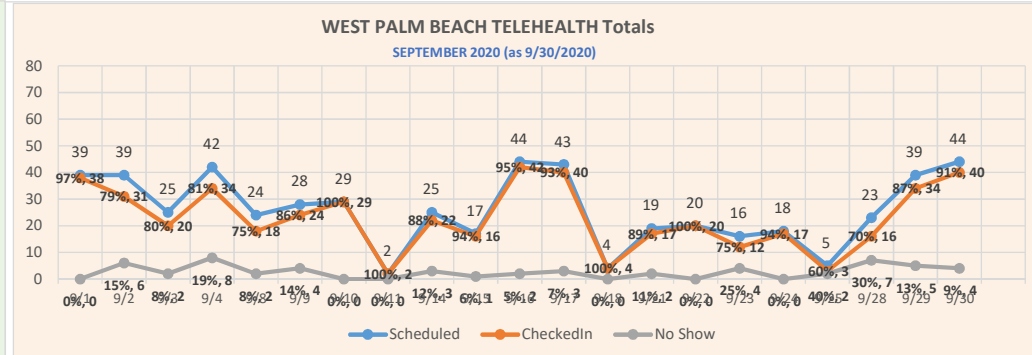
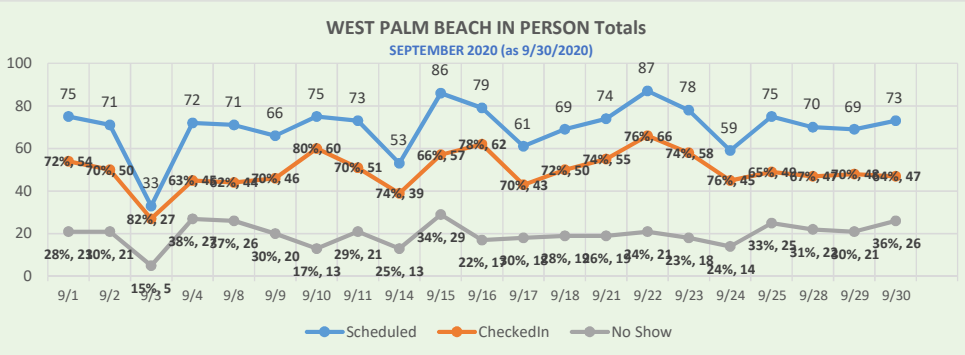
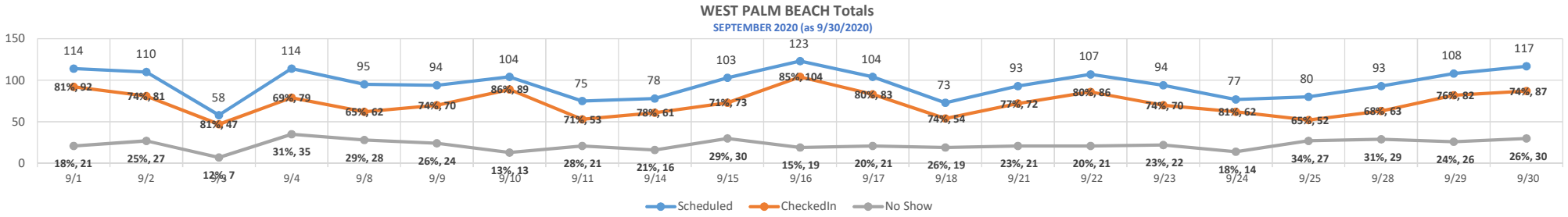
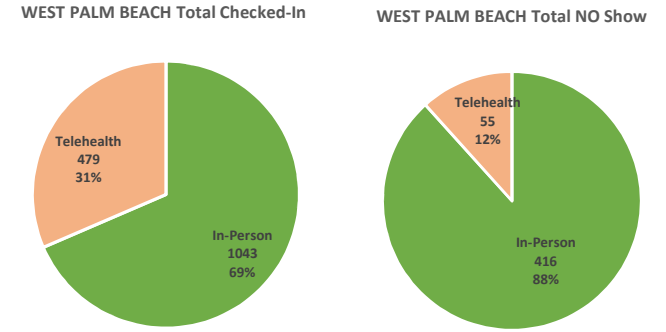
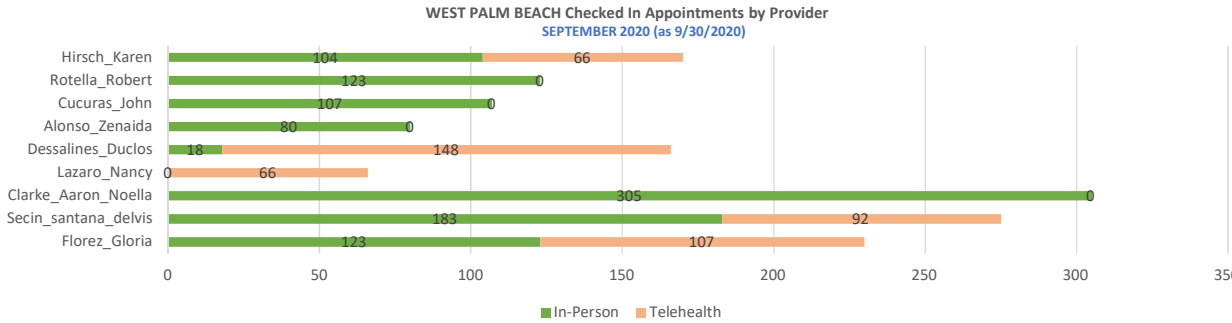
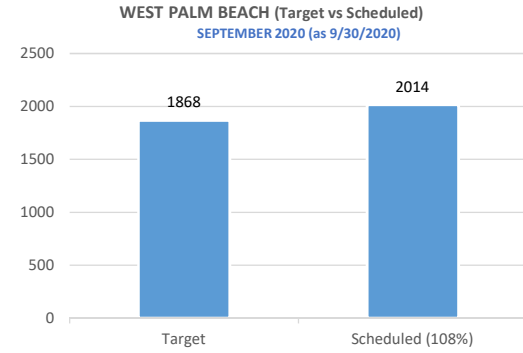


MANGONIA Total NO Show



# WEST PALM BEACH

	<51%		>=51% and < 80%		>= 80% and <100%		>= 100%		Telehealth					
SEPTEMBER 2020 (as 9/30/2020)	In-Person						Telehealth							
Provider / App Type	Target	Scheduled	CheckedIn	No show	% Target	% No Show	Target	Scheduled	CheckedIn	No Show	% Target	% No Show		
Florez_Gloria	135	170	123	47	91%	28%	144	137	107	29	74%	22%		
Secin_santana_delvis	232	285	183	101	79%	36%	119	98	92	6	77%	6%		
Clarke_Aaron_Noella	351	405	305	100	87%	25%								
Lazaro_Nancy							45	72	66	3	147%	8%		
Dessalines_Duclos	22	25	18	6	82%		140	171	148	17	106%	13%		
Alonso_Zenaida	150	130	80	50	53%	38%								
Cucuras_John	120	153	107	46	89%	30%								
Rotella_Robert	165	189	123	66	75%	35%								
	In-Person and Telehealth (combined)						% Telehealth CheckedIn for combined BH & SA Teams							
Hirsch_Karen	245	179	170		69%	5%			39%					
<b>Grand Total</b>	<b>1325</b>	<b>1469</b>	<b>1043</b>	<b>416</b>	<b>79%</b>	<b>29%</b>	<b>543</b>	<b>545</b>	<b>479</b>	<b>55</b>	<b>88%</b>	<b>12%</b>		



## Clinic Service Center Stats

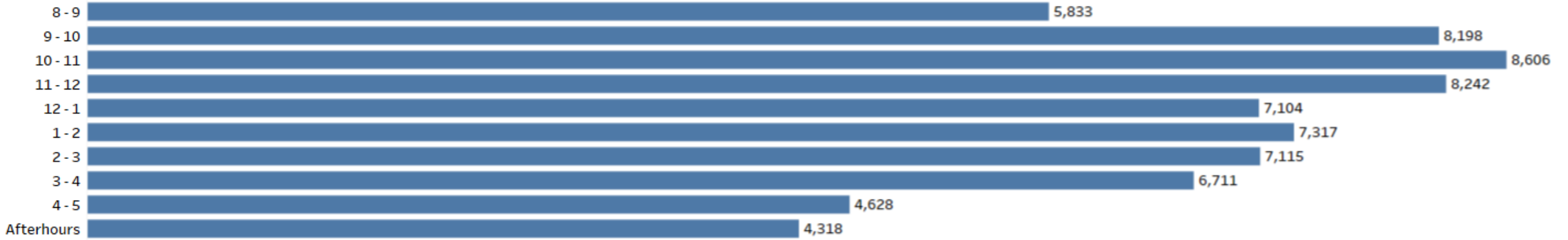
<b>Number of Calls</b>	<b>68,072</b>
<b>Unique Phone Numbers</b>	<b>25,498</b>



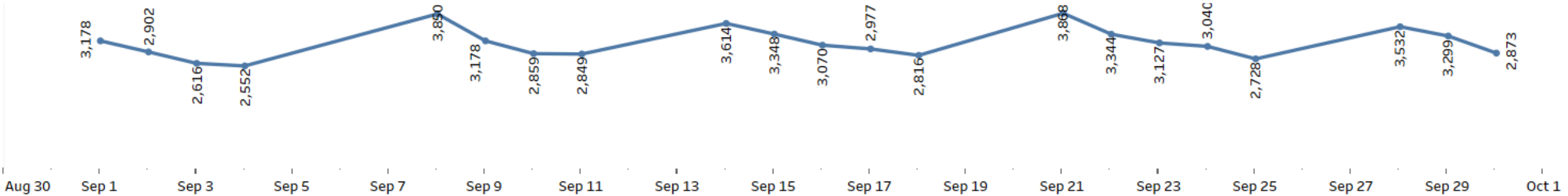
**Call Date**  
 9/1/2020 to 9/30/2020

Anonymous numbers counted individually

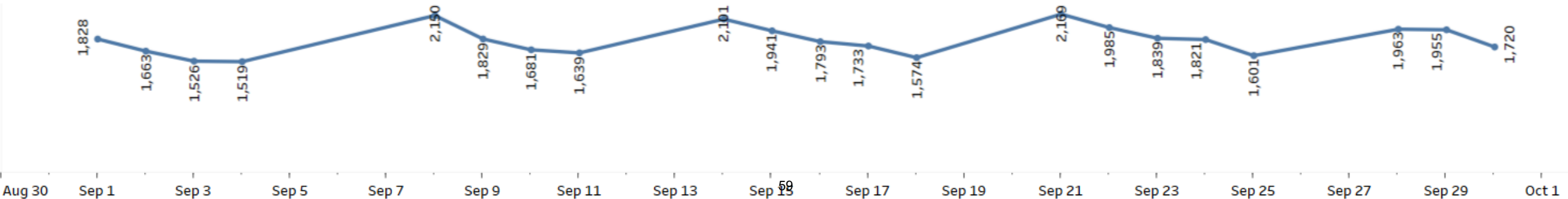
### Calls per time of day



### Calls Received



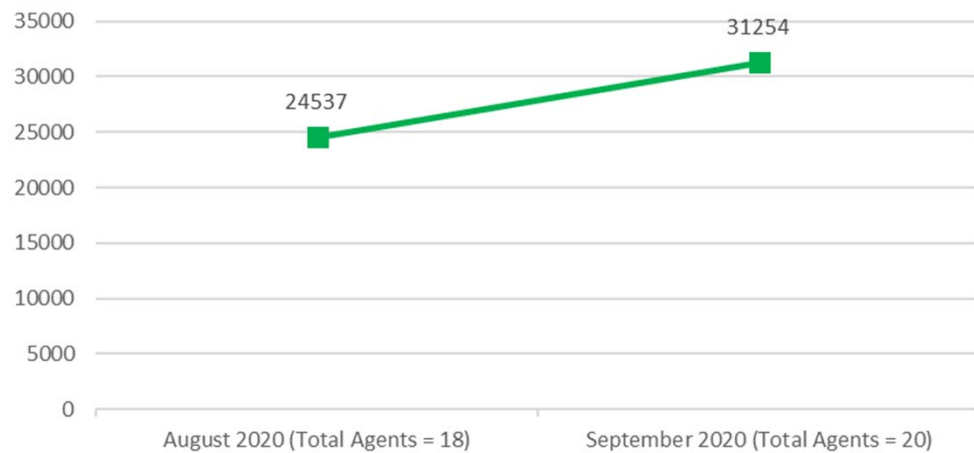
### Unique Numbers



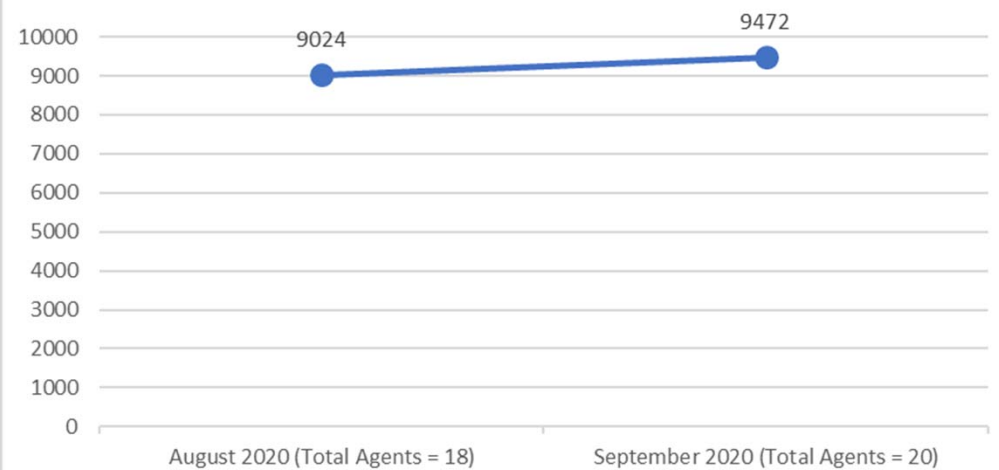


## Clinic Service Center Productivity – Trends Over Time

Clinic Service Center  
Total # of Calls Handled - Trend Over Time  
2020



Clinic Service Center  
# of Appointments Scheduled - Trend Over Time  
2020



**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

**1. Description: Quality Report**

**2. Summary:**

This agenda item provides the following:

- Medication Assisted Treatment (MAT) Program Update
- Quality Council Minutes

**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 & GRIEVANCES

For September 2020, there were a total of 23 complaints and grievances received. 7 out of 23 were from Mobile 1 Warrior. The top 5 categories were Care & Treatment, Communication, Other, Respect Related and Physician Related. Poor Communication remains the greatest subcategory two months in a row.

Three compliments were entered. Two were Physician related.

In the month of September 463 Patient Satisfaction surveys were completed. 61% were completed in English, 32% in Spanish and 7% in creole. 96% of the surveys gave positive feedback. To address the concerns of the 4% of patients who gave negative feedback, a “Patient Experience Outcomes Taskforce” has been created.

QUALITY ASSURANCE & IMPROVEMENT

Athena reporting has known issues due to the updates made to UDS 2020 reporting capabilities. The team is working with Athena to fix reporting issues.

UTILIZATION OF HEALTH CENTER SERVICES

9,883 patient visits were performed during the month of September, which is an increase of 10% from the previous month. 26% of the visits were performed using Telemedicine. As of September 2020, we have 314 patients enrolled in our MAT Program receiving either Suboxone, Naltrexone or Vivitrol. This is more than double the number of patients compared to last year. 192 are in Phase 1 of treatment, 46 are in phase 4.

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**October 28, 2020**

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
 Joel Snook  
 Chief Financial Officer

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

N/A

\_\_\_\_\_  
 Committee Name

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

**6. Recommendation:**

Staff recommends the Board Approve the Quality Report.

Approved for Legal sufficiency:

*Christy Goddard, Esq.*

*Valerie Shahriari* FOR

\_\_\_\_\_  
 Valerie Shahriari  
 General Counsel

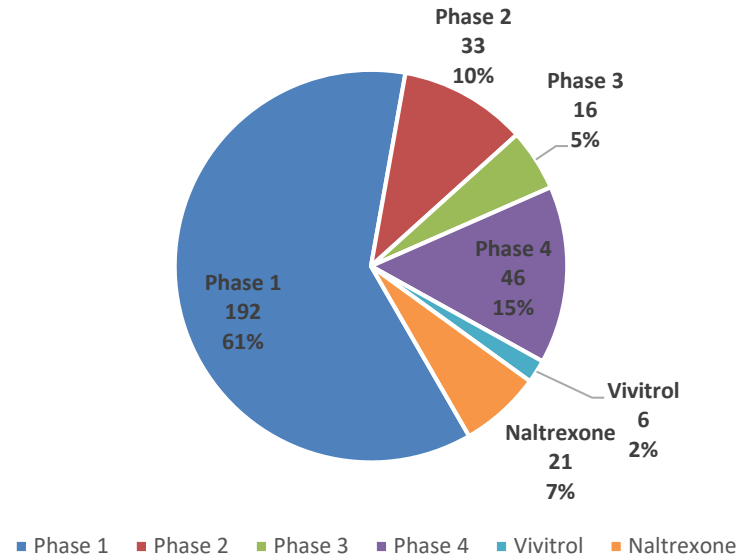
*Dr. Ana Ferwerda*  
 \_\_\_\_\_  
 Dr. Ana Ferwerda  
 FQHC Medical Director

*Dr. Belma Andric*  
 \_\_\_\_\_  
 Dr. Belma Andric  
 Chief Medical Officer, VP & Executive Director  
 of Clinic Services

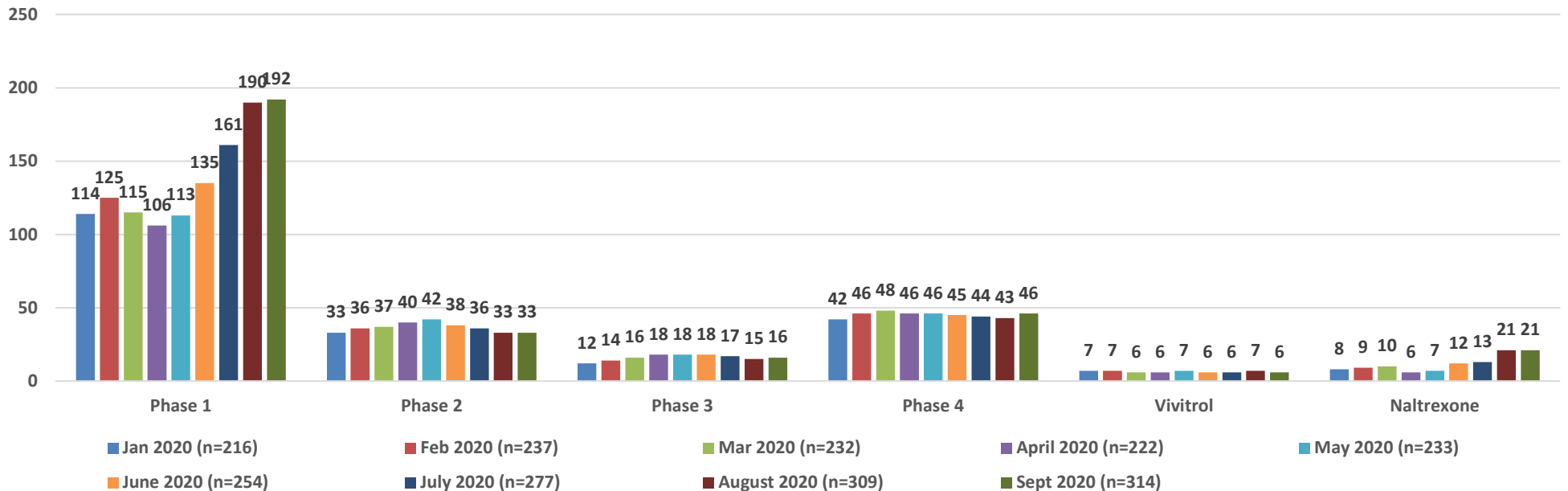
# MAT CENSUS REPORT AS SEPT 2020

	Sept 2020 (n=314)
Phase 1	192
Phase 2	33
Phase 3	16
Phase 4	46
Vivitrol	6
Naltrexone	21
	<b>314</b>

C. L. Brumback Primary Care Clinics  
Addiction Outpatient Treatment Program  
Treatment Phase for Current Census September 2020  
(Total=314)



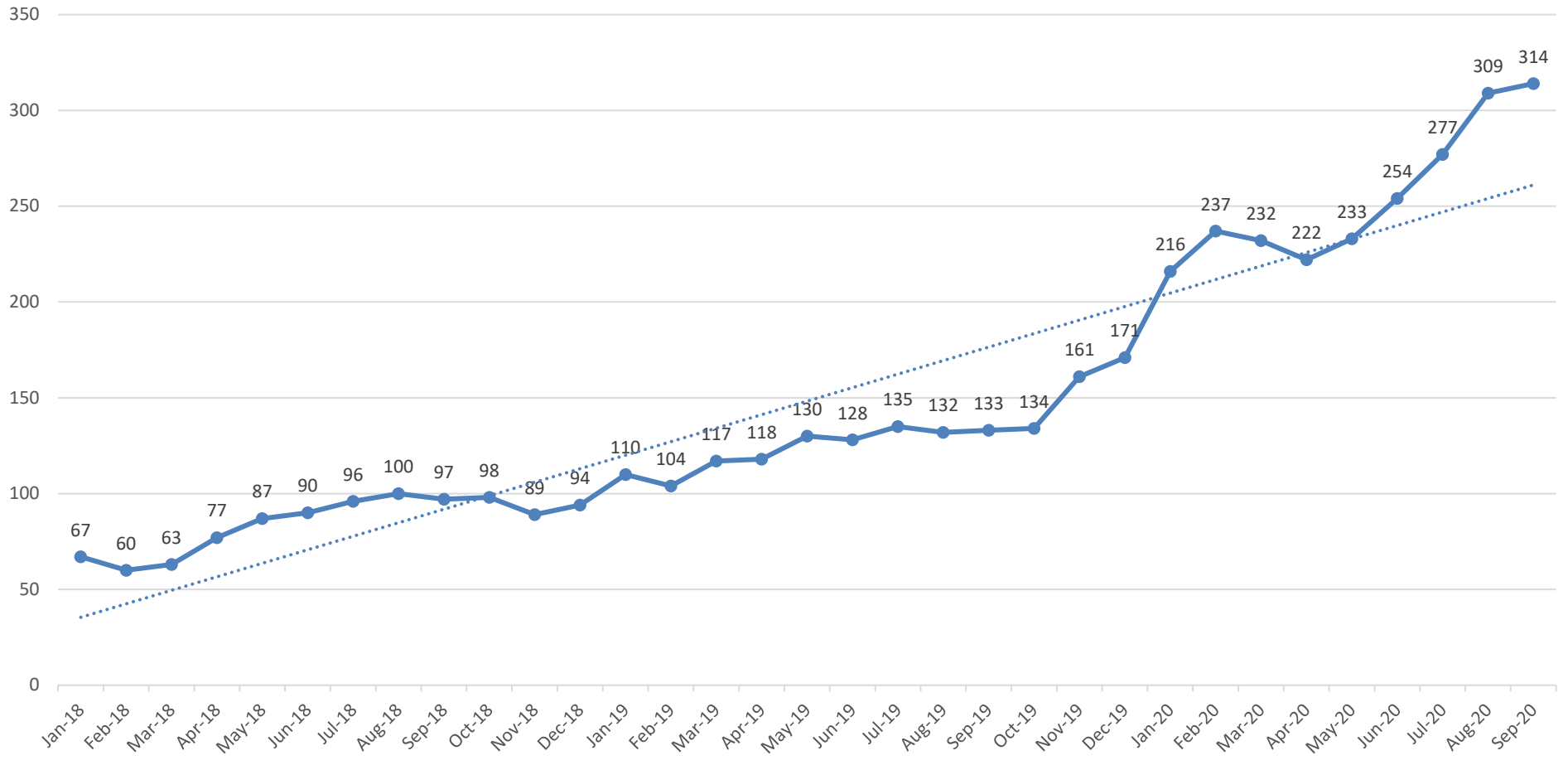
C. L. Brumback Primary Care Clinics  
Medication-Assisted Treatment Program  
2020 Phase of Treatment Trends



**MAT CENSUS REPORT AS SEPTEMBER 2020**

	January	February	March	April	May	June	July	August	September	October	November	December
<b>Patient Census Report 2018</b>	67	60	63	77	87	90	96	100	97	98	89	94
<b>Patient Census Report 2019</b>	110	104	117	118	130	128	135	132	133	134	161	171
<b>Patient Census Report 2020</b>	216	237	232	222	233	254	277	309	314			
<b>Increase / Decrease 2020 vs 2019</b>	96%	128%	98%	88%	79%	98%	105%	134%	136%			

**C. L. Brumback Primary Care Clinics  
Medication-Assisted Treatment Program  
Patient Census Report - as September 2020**





**Quality Council Meeting Minutes**

**Date: October 9, 2020**

**Time: 1:00pm – 3:00pm**

**Attendees:** Dr. Ana Ferwerda – Medical Director; Jonathan Dominique – Executive Assistant; Andrea Steele – Quality Director; Lisa Hogans –Director of Nursing; Shauniel Brown – Risk Manager; Ivonne Cohen – Quality Reporting Analyst; Dr. Charmaine Chibar – Director of Pediatrics; Belma Andric – Chief Medical Officer/Executive Director; Hyla Fritsch – Executive Director of Clinic Operations & Pharmacy; Dr. John Cucuras - Dental Director; David Speciale – Patient Experience Director; Dominique Domond – Operations Process Manager; Marisol Miranda – Director of Practice Management; Dr. Courtney Phillips - Director of Behavioral Health; Alexa Goodwin – Patient Relations Manager

**Excused:**

**Minutes by:** Jonathan Dominique

<u>AGENDA ITEM</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
<b>PATIENT RELATIONS</b>				
<b>OUTREACH SUMMARY</b>	<p><b>Outreach</b>            Testing data at the Ballpark using our Mobile Clinic, named Warrior, through September 2020 shows 2,215 tests performed compared to last month at 9,325 (down by 76%). Rate of positives at Ballpark has stayed the same at 5% when compared to last month at 5%.</p> <p>For Outreach using our second Mobile Clinic called Scout, we have tested 767 patients compared to last month at 1,313 for COVID-19 (down by 41%). Rate of positive for Outreach has also declined to 1% compared to last month at 11%. Team suggests that based on data, the mobile clinic might be travelling to the wrong locations.</p>			

	<p>HERO Bus to start testing.</p> <p>Health Care District Of Palm Beach County Covid-19 Data Tracker by Date Positive Results last reported day 10/2/2020 shows 6 new positives for last Friday and the % Positive last reported day 10/2/2020 is 7.6%</p> <ul style="list-style-type: none"> <li>▪ Although Tests performed Prior Day is blank due to yesterday being Sunday, Saturdays tests performed at Ballpark totaled 123</li> </ul> <p>The COVID-19 HCD Clinics All Overall dashboard since March 2020 rate of positive continues to be 9% compared to the COVID-19 HCD Clinics All Last 30 days dashboard rate of positive is still at 4%</p> <ul style="list-style-type: none"> <li>▪ Rate of positives for patients that identify as Not Hispanic/Latino Ethnicity is now 51% compared to last week at 46%</li> <li>▪ Rate of positives for patients that identify as Black/African American is now 21% compared to last week at 17%</li> </ul> <p>The COVID-19 Positive Results All dashboard continues to trend down with Weekly Positive Results for Week Ending on Saturdays for 10/3 is at 37 new positives (down by 44% compared to week prior)</p> <p>The Weekly positive rate trend by testing site dashboard shows the following sites total</p>	<p>HERO Mobile clinic dashboard to be presented in addition to our other locations next month.</p>	<p>Marisol</p>	<p>11/13/20</p>
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	<p>positive results trended up for week ending 10/3:</p> <ul style="list-style-type: none"> <li>▪ Belle Glade: 8.5%</li> <li>▪ Delray: 6%</li> <li>▪ Jupiter: 2.2%</li> </ul> <p>The COVID-19 HCD All Geolocation Last 30 days shows Zip Code 33430 (Belle Glade) rate of positive is now 11%</p> <p>The COVID-19 HCD Clinics Outreach dashboard shows that we only received 6 positive results in the last 30 days  <b>(COVID-19 testing dashboard presented with graphs.)</b></p>			
<p><b>CLINIC SERVICE CENTER</b></p>	<p>There were 68,072 calls received by 25,498 unique numbers for the month of September. Most calls were received between 10am and 11am and there continue to be many more calls on Monday's than any other day of the week.  <b>(Clinic Service Center Stats dashboard presented with graphs.)</b></p> <p>Andrea asked how many after-hours calls translate to after-hours messages.</p> <p>The <i>"Total Calls Handled – Appointment Lines"</i> and <i>"# of Appointment Line Calls / Employee Hours Worked"</i> by agent reports presented. For</p>	<p>David will provide data showing the number of after-hours messages coming from after-hours calls at the next Quality Council.</p> <p>David and his team are developing monthly target metrics for CSC staff.</p>	<p>David</p> <p>David</p>	<p>11/13/20</p> <p>11/13/20</p>

	<p>September 2020 there were 31,254 calls handled through the appointment line. The average number of calls handled per agent hour worked is 11 calls.</p> <p>Of the 31,254 calls handled through the appointment lines there were 9,472 patient appointments made. The <i>“Total # of Appointments Scheduled”</i> and <i>“ # of Appointments Scheduled / Employee Hours Worked”</i> by agent reports presented. The average # of appointment scheduled per agent hour worked is 3 appointments. Data may be skewed due to one employee resignation and one employee out on medical leave.</p> <p>The <i>“Total # of Appointments Scheduled vs. Total # of Calls Handled by Agent”</i> and related reports (3 total) presented. Of the total calls handled by a Clinic Service Center Agent, 30% results in a scheduled appointment.</p> <p>The <i>“# of CISCO HOURS WORKED VS # of ADP HOURS WORKED”</i> report presented. These numbers should be fairly close together. Staff need to be reminded / re-trained to log out of Cisco Finesse when shift is completed. Trends over time reports presented. In September 2020 the Clinic Service Center Team handled 6,717 more calls than in August 2020. In September 2020 the Clinic Service</p>	<p>David will start to present report comparing COVID appointment calls and Non-COVID appointment calls. David will present the # of appointments scheduled/ hours worked in a different format (%).</p> <p>Team to be trained once more on clocking in/out of Cisco Finesse and ADP.</p>	<p>David</p> <p>David</p>	<p>11/13/20</p> <p>11/13/20</p>
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	<p>Center Team scheduled 448 more appointments than in August 2020. Both metrics trending upward. Summary data and agent specific data presented.</p> <p>Monthly highlights for the Clinic Service Center include: Held first Clinic Service Center Team Meeting (in person / Web ex) on 10/1/2020.</p> <ul style="list-style-type: none"> <li>▪ Presented &amp; started the use of scripts.</li> <li>▪ Presented team with Productivity Data.</li> <li>▪ Began to assess, monitor and document Clinic Service Center agent QUALITY through call monitoring.</li> <li>▪ Decreased complaints in reaching an agent.</li> <li>▪ Established share drive to improve flow of communication.</li> <li>▪ One agent resigned and one out on medical leave.</li> <li>▪ Implemented a workflow for identifying scheduling errors and providing timely corrective actions.</li> <li>▪ Validated CSC dashboards in Tableau.</li> <li>▪ Validated voicemail reports – COMING SOON!</li> </ul>			
<p><b>SURVEY RESULTS</b></p>	<p><b>Patient Satisfaction Survey</b>          As of October 8<sup>th</sup>, 2020, 2165 surveys have been completed since January 2020.</p> <p>For the month of September, there were 463 Surveys: 281 (61%) of the surveys were in English, 148 (32%) of surveys completed were</p>			

	<p>in Spanish and 34 (7%) completed were in Creole (compared to 14% of our population who speak Creole).</p> <p>Clinic locations with improved Rate of return in comparison to last month:</p> <ul style="list-style-type: none"> <li>– Boca Raton: +60</li> <li>– Delray Beach: +52</li> <li>– Jupiter: +32</li> <li>– Lake Worth: +67</li> <li>– Lantana: + 106</li> <li>– WPB: +94</li> </ul> <p>Positive feedback and areas of opportunities from September surveys were presented. Of the 463 surveys, there were 18 surveys that contained a low score or rating of Fair/Poor/Strongly Disagree which accounts for less than 4% of total surveys received for September.</p> <p><b><i>(Patient Satisfaction Survey PowerPoint presented.)</i></b></p> <p>Dr. Andric asked if it was possible to track the negative findings and compare them to data from before the restructuring of the call tree.</p>	<p>Plans for mitigation and service recovery proposed and will be addressed at the “Patient Experience Outcomes Task Force” meetings schedule twice per month. David to present trends in his roll up report.</p> <p>David will run a roll up report and present once complete.</p>	<p>David</p> <p>David</p>	<p>11/13/20</p> <p>11/13/20</p>
	<p><b><u>Cycle Time</u></b></p> <p>Cycle time for in-person visits remain greater than for telehealth visits by almost 30 minutes. Average wait for intake and Phase 2 intake remain the largest difference in time between</p>			

	<p>in-person vs. tele, but there is also a difference of about 12 minutes in Phase 3 exam.</p> <p>Substance Abuse cycle time has decreased dramatically due to the changes implements by Ingrid and Dominique.</p> <p>West Palm Beach continues to have the longest cycle time overall across all clinics. However, that probably factors in BH visits are taken in the same as primary care.  <b>(Report with graphs presented.)</b></p>			
	<p><b><u>Third Next Available</u></b>          Third Next Available trended over time shows 97 days for a telehealth appointment with Dr. Harberger.  <b>(Report presented.)</b></p> <p>There are instances where staff members continue to schedule patients in the walk in slots.</p> <p>Dr. Andric suggests moving the following from Delray Clinic to Lantana:</p> <ul style="list-style-type: none"> <li>• 1 Full time provider</li> <li>• 1 Full time registration</li> <li>• 2 Full time MAs</li> </ul>	<p>Team to investigate reason for Dr. Harberger’s telehealth appt Third Next Available being in January of 2021.</p> <p>David has instructed clinic coordinators to inform him when they encounter appointments scheduled over walk-in slots. He has also developed a report to indicate which CSC might be responsible for said scheduled appointment.</p> <p>Team to investigate why the no show rates especially when presented in the context of the third next available report are so high for all clinic locations (Delray).</p>	<p>Marisol/David</p> <p>Marisol/David /Dominique/ Hyla/Andrea/ Dr. Ferwerda</p> <p>Dr. Andric / Hyla / Marta / Dr. Ferwerda / Lisa / Marisol /</p>	<p>11/13/20</p> <p>11/13/20</p> <p>11/13/20</p>

	Questions about the Delray beach clinic / team culture.	Clinic Admin team to meet to discuss Delray Clinic practice culture.	Rosella / David / Zorica / Dominique	11/13/20
<b>GRIEVANCES, COMPLAINTS &amp; COMPLIMENTS</b>	<p><b><u>Patient Relations Report</u></b>          For September 2020, there were a total of 23 complaints and grievances received. 7 out of 23 were from Mobile 1 Warrior. The top 5 categories were Care &amp; Treatment, Communication, Other, Respect Related and Physician Related. Poor Communication remains the greatest subcategory two months in a row.</p> <p>Three compliments were entered. Two were Physician related.  <i><b>(Patient Relations Report &amp; Patient Relations Dashboard with Graphs presented.)</b></i></p>			
<b>QUALITY AUDITS</b>				
<b>DENTAL</b>	<p><b><u>Dental Encounter Closed Rate</u></b>          Unlocked dental chart notes for 2020 are as follows:              June – 4              July – 0              August – 0              September – 6  <b>(Report with graph presented.)</b></p>	Dr. Cucuras has spoken with the provider and provided education.		



	<p><b><u>Dental Encounters/Triage</u></b>          632 unique patients seen with almost equal numbers at WPB and Lantana.</p> <p>319 triages and 60 reschedules for future extraction.  <b>(Report with graph presented.)</b></p>			
	<p><b><u>Dexis Imaging:</u></b>          3 lost radiographs.  <b>(Report with graph presented.)</b></p> <p>If there is a discrepancy in the spelling of patient names, and the Das do not merge the files between Dexis and Dentrix, the files are lost.</p>	<p>Dental Admin team continues to provide education on merging and correcting error.</p>		
	<p><b><u>Dental Referrals</u></b>          34 dental referrals mostly to oral surgery.  <b>(Report with graph presented.)</b></p>			
	<p><b><u>MDI</u></b>          193 medical dental integrations in Lantana and 60 warm hand-offs at 29%.  <b>(Report with graph presented.)</b></p>			
	<p><b><u>Same Day Extractions</u></b>          160 same-day extractions. 148 of them performed in WPB.  <b>(Report with graph presented.)</b></p> <p>Dr. Andric asked about how only 50% of our procedures are 50% when we are only doing</p>		<p>Dr. Cucuras</p>	<p>11/13/20</p>

	<p>emergency procedures. Dr. Cucuras explained that there is a possibility where the extractions were not coded correctly.</p>	<p>Dr. Cucuras to extrapolate what percentage of the 'No extraction' group had return visits.</p>		
<b>WOMEN'S HEALTH</b>	<p><b><u>Prenatal Age</u></b>          16 newly pregnant patients entered into care in September. 1 without the initial provider recorded.</p> <p>1 pregnant woman between age 15-19.</p> <p><b>(Report with graph presented.)</b></p>			
	<p><b><u>Entry into Care</u></b>          Half entered in their 2<sup>nd</sup> trimester.  <b>(Report with graph presented.)</b></p>			
	<p><b><u>Deliveries &amp; Birthweights</u></b>          There is a UDS reporting issue with grantee vs. non-grantee deliveries that Athena is working on resolving as a "known issue".</p> <p>Still no deliveries &lt;1500 grams.  <b>(Report with graph presented.)</b></p>			
<b>MEDICAL</b>	<p><b><u>Hemoglobin A1C/Point of Care Testing</u></b>          The uncontrolled diabetes measure data shows that our patients that "Need Data" is shrinking, but our A1C&gt; 9 is growing. Controlled A1C is also trending in the right direction.</p> <p>Lewis Center and Mobile 1 Warrior are the least controlled sites.  <b>(Report with graph presented.)</b></p>			

<b>NURSING</b>	<p><b><u>Higher Level of Care</u></b>          60 unique patients sent to a higher level of care for September. 85% of referrals are to ER with WPB referring 23 patients for the month.</p> <p>3 patients were sent to the ER twice this month.  <b>(Report with graph presented.)</b></p>			
	<p><b><u>Cage-Aid</u></b>          57 positive cages for September. Almost 60% of positive cages had a score of 4 out of 4.  <b>(Report with graph presented.)</b></p>	Angela to follow-up on unscored cage-aids.	Angela	11/13/20
	<p><b><u>SBIRT</u></b>          39 patients with a positive cage and no SBIRT in September. 22 successful SBIRTS for the month.  <b>(Report with graph presented.)</b></p>	Dr. Ferwerda to follow-up with providers on SBIRT order set.	Dr. Ferwerda	11/13/20
	<p><b><u>PHQ9</u></b>          477 positives for the month of September. 63 positive PHQ2/9s with no BH appt this year.</p> <p>Boca and Jupiter have a very high percentage of patients in need of BHC appts.  <b>(Report with graph presented.)</b></p>	Angela to follow-up on unscored PHQ2/9s.	Angela	11/13/20
	<p><b><u>FIT Test</u></b>          % of patients with no lab result is trending up. Delray has the highest rate of unreturned FITs. Abnormals remain steady at 7%.  <b>(Report with graph presented.)</b></p>			
	<p><b><u>Chart Prep</u></b>          70% of charts were prepped on 9/30 with rolling average of percent prepped at about</p>			

	52% at the end of the month for in-person visits and 63% prepped for telehealth visits.  (Report with graph presented.)			
QUALITY METRICS				
UDS September 2020				
Of the 17 UDS Measures: <b>9</b> Exceeded the HRSA Goal and <b>8</b> were short of the HRSA Goal ( <i>Clinic Score/ HRSA Goal / Healthy People Goal</i> )				
<i>*Athena reporting has known issues due to the updates being made to UDS 2020 reporting capabilities. Data not validated.</i>				
<b>Medical UDS Report</b>	<b>Breast Cancer Screening:</b> (60%/60%)			
	<b>Childhood immunization:</b> (51%/ 60%)			
	<b>Cervical Cancer Screening:</b> (55% /65%)	Several examples of five-year paps provided to Athena for review.		
	<b>Weight assessment, Children &amp; Adolescent:</b> (90% /90%)			
	<b>Adult Weight screening and follow up:</b> (98% / 90%)			
	<b>Tobacco use screening &amp; cessation:</b> (97% / 93%)			
	<b>Coronary Artery Disease CAD:</b> (83% / 81%)			
	<b>Ischemic Vascular Disease (IVD):</b> (90% / 86%)			
	<b>Colorectal Cancer Screening:</b> (23% / 82%)	CRC dropped by 21% due to change in Athena reporting not counting Quest results with a discreet value of "See Note".		
	<b>HIV linkage:</b> (83% / 100%)			
	<b>Depression screening:</b> (96% / 83% )			
	<b>Depression screening (Homeless):</b> (95% / 83% )			

	<b>Depression remission:</b> (1% / no goal set)	Data has not been validated, but appear accurate. Needs deep dive in Behavioral Health Workgroup.		
	<b>Hypertension:</b> (73% / 80% )			
	<b>Diabetes:</b> (60% / 66% )			
	<b>Diabetes (Migrant):</b> (58% / 66% )			
<b>Dental UDS &amp; Quality Metrics</b>	<b>Dental Sealants</b> September 2020 86% (273/316)			
<b>UTILIZATION</b>				
<b>OPERATIONS</b>	<p><b>Productivity</b>          Clinic visits increased since last month by almost 10%. Of the 9,883 billable visits, 992 were virtual and 1,601 were telephonic.</p> <p>Pediatricians have increased their productivity to 107% of target.</p> <p>Dr. Harberger’s targets appear to remain too great for the number of visits being attributed to his residents.</p> <p><i>(Clinic productivity report with graphs were presented.)</i></p>			
	<p><b>No Show Rates</b>          No Show percentages are up slightly at 18.3% compared to August at 17.8%. Dental no shows appear greatest.</p> <p>No shows for telehealth account for only about 1/5<sup>th</sup> of all no shows.</p>			

	<p>Number of patients rescheduled was greater than no shows for the month.  <b>(Report with graph presented.)</b></p>																			
	<p><b><u>BYMY</u></b>          For September, Belle Glade and Delray seemed to have the most success.           Boca and Jupiter appear consistently low.</p>																			
<p><b>BEHAVIORAL HEALTH</b></p>	<p><b><u>MAT Census</u></b>          In September 2020, the census remains high especially for Phase 1 patients at 192. When compared to last year, we are up by 136% compared to last year. New patient intake is 46, a 318% improvement in comparison to the same time last year.           Discharge rates increased 12.47% and Re-admits are steady at about 6.37%. 24 readmits for the month.           39 lost to follow-up.           OD2A grant data for September was submitted describing successes for the month: Typically, when a patient is new to the program or unstable, the person is often in mild-moderate withdrawal, sleep deprived, and are dealing with many stressors regarding social determinants of health for the first time sober. Simultaneously, they are enrolling in programs at two different facilities (JFK/HCD) and are often feeling overwhelmed while being sick and</p>	<table border="1" data-bbox="1010 597 1425 940"> <thead> <tr> <th></th> <th>Sept 2020 (n=314)</th> </tr> </thead> <tbody> <tr> <td><b>Phase 1</b></td> <td>192</td> </tr> <tr> <td><b>Phase 2</b></td> <td>33</td> </tr> <tr> <td><b>Phase 3</b></td> <td>16</td> </tr> <tr> <td><b>Phase 4</b></td> <td>46</td> </tr> <tr> <td><b>Vivitrol</b></td> <td>6</td> </tr> <tr> <td><b>Naltrexone</b></td> <td>21</td> </tr> <tr> <td></td> <td><b>314</b></td> </tr> </tbody> </table>		Sept 2020 (n=314)	<b>Phase 1</b>	192	<b>Phase 2</b>	33	<b>Phase 3</b>	16	<b>Phase 4</b>	46	<b>Vivitrol</b>	6	<b>Naltrexone</b>	21		<b>314</b>		
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	<p>stressed when it comes to dealing with all of the staff and trusting the plan. This often leads to miscommunication, frustration, and the patient not following up as they cannot cope with all of the early requirements.</p> <p>Care coordinators serve as a one on one concierge with no medical background that helps the patient get advocacy through complex systems. This is vital as care coordinators build trust, serve as “interpreters” for complex systems of care and as a support through the beginning of recovery or during a crisis point. This concierge also helps them navigate the complex agencies involved with assisting with social determinants of health early in the process. Finally, they assist staff in keeping the patient calm throughout the necessary evaluations to get treatment so that staff can focus on their role without multiple interruptions from overwhelmed patients. Other agencies also build relationships with care coordinators to streamline referrals back and forth.</p> <p>This crucial service makes a big difference in a patient returning. Once they are stable, patients are often more able to problem solve independently but always feel supported that a care coordinator who is very accessible can help them if they are in a bad spot.</p>			
<p><b>Meeting Adjourned: 3:05PM</b></p>				