



C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County

BOARD OF DIRECTORS
December 13, 2023
12:30 P.M.

Meeting Location
1515 N. Flagler Drive, Suite 101
West Palm Beach, FL 33401

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



**BOARD OF DIRECTORS MEETING
AGENDA
December 13, 2023
1515 N. Flagler Drive, Suite 101
West Palm Beach, FL 33401**

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

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

1. Call to Order – Melissa Tascone, Chair

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

2. Agenda Approval

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

3. Awards, Introductions and Presentations

- A. PCC Annual Meeting
(Candice Abbott)

4. Disclosure of Voting Conflict

5. Public Comment

6. Meeting Minutes

- A. **MOTION TO APPROVE:**
Board Meeting Minutes of November 28, 2023 [Pages 1-11]

7. Consent Agenda – Motion to Approve Consent Agenda Items

A. ADMINISTRATION

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

**C. L. Brumback Primary Care Clinics
Board of Directors Meeting
Agenda
December 13, 2023**

- 7A-2 **RECEIVE AND FILE:**
Attendance Tracking [Page 12]
- 7A-3 **RECEIVE AND FILE:**
HRSA Digest
(Jesenia Montalvo) [Pages 13-19]
- 7A-4 **RECEIVE AND FILE:**
Compliance, Privacy & Ethics Annual Board Education
(Heather Bokor) [Pages 20-53]
- 7A-5 **MOTION TO APPROVE:**
Policy Updates
(Jesenia Montalvo) [Pages 54-63]

B. FINANCE

- 7B-1 **MOTION TO APPROVE:**
District Clinic Holdings, Inc. Financial Report October 2023
(Jessica Cafarelli) [Pages 64-81]

8. Regular Agenda

A. ADMINISTRATION

- 8A-1 **MOTION TO APPROVE:**
Change in Scope of Services for Form 5A Required Services
(Candice Abbott) [Pages 82-89]
- 8A-2 **MOTION TO APPROVE:**
Patient Satisfaction Survey
(Alexa Goodwin) [Pages 90-98]
- 8A-3 **MOTION TO APPROVE:**
Local Prevailing Rates – FACHC Fee Schedule Analysis
(Candice Abbott) [Pages 99-100]

B. EXECUTIVE

None.

C. CREDENTIALING

None.

**C. L. Brumback Primary Care Clinics
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D. QUALITY

- 8D-1 **MOTION TO APPROVE:**
Quality Report
(Dr. Charmaine Chibar) [Pages 101-135]

E. OPERATIONS

- 8E-1 **MOTION TO APPROVE:**
Operations Report- October 2023
(Angela Santos) [Pages 136-141]

9. Candice Abbott, Executive Director of FQHC Services Comments

10. Board Member Comments

11. Establishment of Upcoming Meetings

January 24, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

February 28, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

March 27, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

April 24, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

May 22, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

June 26, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

July 24, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

August 28, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

**C. L. Brumback Primary Care Clinics
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December 13, 2023**

September 25, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

October 23, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

November 20, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

December 18, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

12. **Motion to Adjourn Public Meeting Immediately following the Conclusion of the Closed Meeting**
13. **Closed Meeting: [Under Separate Cover]
Closed Pursuant to Florida Statute Ch. 766.101 and 768.28**

**District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
11/28/2023**

Present: Melissa Tascone - Chair; Mike Smith- Vice-Chair; William Johnson - Treasurer; Robert Glass; Julia Bullard; Boris Seymore (ZOOM)

Absent: None.

Excused: Joseph Gibbons- Secretary; Alcolya St.Juste; Tammy Jackson-Moore

Staff: Darcy Davis (ZOOM); Dr. Belma Andric (ZOOM); Bernabe Icaza; Candice Abbott; Jessica Cafarelli; Regina All (ZOOM); Dr. Charmaine Chibar; Alexa Goodwin; Marisol Miranda; Robin Kish; Macson Florvil; Heather Bokor (ZOOM); Maria Chamberlin; Andrea Steele (ZOOM); Angela Santos; Shauniel Brown; Alyssa Tartar; John Van Arnam (ZOOM); Geoff Washburn (ZOOM); Lance Luttrell, Reg Lantern (ZOOM); Gina Kenyon; Deborah Robinson; Monica Georgelis; David Speciale; Steven Sadiku.

Minutes Transcribed By: Gina Kenyon

The meeting is scheduled for 12:30pm.

Meeting Began at 12:35pm.

AGENDA ITEM	DISCUSSION	ACTION
<p>1. Call to Order</p> <p>1A. Roll Call</p> <p>1B. Affirmation of Mission</p>	<p>Ms. Tascone called the meeting to order.</p> <p>Roll call was taken and a quorum was established.</p> <p>Ms. Tascone read the affirmation of mission.</p>	<p>The meeting was called to order at 12:35 p.m.</p>

<p>2. Agenda Approval</p> <p>2A. Additions/Deletions/ Substitutions</p> <p>2B. Motion to Approve Agenda Items</p>	<p>Substitution:</p> <p>Ms. Abbott stated we will be substituting the presenter for Items 8A-1 through 8A-3 on the Regular Agenda, moving from Jesenia Montalvo presenting to David Speciale presenting.</p>	<p>VOTE TAKEN: Mr. Bill Johnson made a motion to approve the agenda. Mr. Robert Glass duly seconded the motion. A vote was called and the motion passed unanimously.</p>
<p>3. Awards, Introductions & Presentations</p>	<p>Community Health Quality Recognition Awards were presented by Steven Sadiku.</p> <p>Mr. Bill Johnson asked if we display the badges in our clinics. David Speciale stated that we do have them on our Viewmedica which can be seen by our patients and employees.</p> <p>Mr. Mike Smith asked when the press release was going out. Dr. Andric stated that it has already been sent out a few weeks ago.</p> <p>Mr. Bill Johnson also wanted to say kudos to the staff and everyone for making this happen. He stated he is well aware that this is not a participation badge, that it is definitely from hard work and we see it every month when we go through the quality numbers and statistical data.</p> <p>Mr. Mike Smith stated we need to figure out new ways to present the Health clinics to our community and our tax payers that fund this organization. We, the board members particularly, need to take a look at what's out there on the website, not as a member of the organization but as a patient that could be looking for healthcare, and figure out what else can we have out there and when they do find us, how to we present ourselves that might attract patients that may not be looking for free care, but ones that have insurance as well? Mr. Smith also stated he does not think we are doing enough in that area.</p> <p>Ms. Abbott stated that we have, in the last few years, reach out to insurance companies to find out if they have the ability to open up their panels to us. We do a lot, and if anyone has any connections in the payor world, please send them our way. She has a lot of connections, sometimes the panels are closed and they don't need</p>	<p>No action necessary.</p>

anyone else, but just recently Florida Blue just reached out to us and said they have about 3,000 members that are needed in Boca. So we said yes, sign us up, we definitely need that. Then they start reaching out to us to see if we can actually assign that location and the physicians to accommodate. I think this is the best way to try and attract what you are saying, the paying patients.

Mr. Mike Smith asked about the fixed income seniors who might be right around the corner that may not know about us.

Ms. Abbott stated that we are contracted with a lot of Medicare Managed Care Organizations and about 63% of the Medicare patients in Palm Beach County alone have already switched to an Advantage Plan. So she believes that “fee for service” is almost going away so that is why we have been focusing more on the Advantage Plans so we have been doing that as well.

Mr. Bill Johnson stated that the TV and radio add that we had just recently, he thought was well done and even though they aren't cheap, he believes that it may be worth while if there is a way to continue those.

Dr. Belma Andric stated that since March the HCD is working on rebranding of the whole Health Care District including all business units. One piece, is that using the term Clinics will be changing to Community Health Care Centers. Early next year, Communications will be presenting an update on rebranding which will include updating the website.

Family Health Centers UDS Performance Update was presented by Monica Georgelis.

Mr. Bill Johnson asked if we have benchmarked with other counties to find out how they got such a high percentage?

Dr. Andric stated that yes, we have reached out to others to recognize best practices and they have reached out to us as well to find out what we are doing. We are very competitive and are always looking for ways to improve and maintain. We also partner with the American Heart Association. This dashboard was created by Monica and Andrea and we are very proud of this.

	<p>HRSA Board Prep was presented by Lance Luttrell from Reg Lantern.</p> <p>The Board requested the presentation via email. Gina will send out. Ms. Abbott stated that the HRSA OSV will be January 23rd – 25th. They will be at the Board Meeting on the 24th.</p>	
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.
<p>6. Meeting Minutes</p> <p>A. Staff Recommends a MOTION TO APPROVE: Board meeting minutes of October 31, 2023</p>	There were no changes or comments to the minutes dated October 31, 2023.	VOTE TAKEN: As presented, Mr. Mike Smith made a motion to approve the Board meeting minutes from October 31, 2023. Mr. Bill Johnson duly seconded the motion. A vote was called, and the motion passed unanimously.
7. Consent Agenda – Motion to Approve Consent Agenda Items		VOTE TAKEN: Mr. Robert Glass motioned to approve the Consent Agenda. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.
A. ADMINISTRATION		
7A-1. Receive & File: October 31, 2023 Internet Posting of District Public Meeting	The meeting notice was posted.	Received & Filed. No further action is necessary.
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Received & Filed. No further action is necessary.

7A-3. Receive & File: HRSA Digest	Per the request of the clinic Board, the latest HRSA Digest was provided.	Received & Filed. No further action is necessary.
7A-4. Receive & File: Proposed Schedule for 2024 Board Meetings	Proposed schedule for 2024 Board Meetings was provided.	Received & Filed. No further action is necessary.
7A-5. Motion To Approve: Community Health Improvement Plan & Community Health Assessment Update (Needs Assessment)	This agenda item presents the Board with the 2023 Palm Beach County Community Health Improvement Plan, our current service area, and confirmation of operating hours.	Motion approved unanimously.
B. FINANCE		
7B-1. Motion To Approve: DCH, Inc. Financial Report September 2023	This agenda item recommends the Board approve the September 2023 Financials which were provided in the Board packet.	Motion approved unanimously.
8. REGULAR AGENDA		
A. ADMINISTRATION:		
8A-1. Staff Recommends a Motion to Approve: Executive Director of FQHC Services Annual Evaluation by Board	David Speciale presented the Board with the Annual Evaluation of Candice Abbott, Executive Director of FQHC Services, tally as of October 2023.	VOTE TAKEN: Mr. Mike Smith motioned to approve the 2023 Annual Evaluation of Candice Abbott by the Board & Mr. Bill Johnson duly seconded the motion. The motion passed unanimously.
8A-2. Staff Recommends a Motion to Approve: Summary of Board Member Self-Evaluations	David Speciale presented the Annual Self-Evaluation tally of results from November 2023. Mr. Bill Johnson asked, before we take any action on this, what do we actually do with this? Ms. Melissa Tascone suggested that, as we get a new board member, the board could introduce themselves, ask them if they have any questions, give them the lay of the land.	Received & Filed. No further action is necessary.

	<p>Ms. Julia Bullard stated that in most cases, if you are new to this, depending on the experiences that the board member has had with clinics or HCD, it is important for the board to look at persons who may or may not need as much training or as much preparation.</p> <p>Ms. Abbott stated that where it starts, is right in the clinics. Dr. Andric has had some of her physicians reaching out to current patients and just trying to ask them if they would like to be a board member and start there. To know what we do in our clinics, it makes sense to start out being a patient if planning to be a board member. And then inform them of the financials, etc. and provide them with and review the onboarding packet during orientation.</p> <p>Mr. Bill Johnson stated we should be able to do group tours, attend ribbon cuttings, etc.</p> <p>Ms. Abbott stated that we have to honor The Sunshine Laws in whatever way that we are advised to do so, but she feels like we get a better understanding of who we are and what we do, when you're an actual patient of the Healthcare Center.</p> <p>Mr. Bill Johnson stated that, as a board and staff, will look into further exploring of tours and training opportunities when seeking client participation.</p>	
<p>8A-3. Staff Recommends a Motion to Approve: Tracking and Emergency Response Policies</p>	<p>David Speciale presented the Referral Tracking Policy, Diagnostic Test Policy, Tracking Higher Level of Care Referral Policy, and Code Blue Emergency Response Policy. There have been no changes since their original effective date but they needed to be reviewed and as a result, we wanted to present them to you for review and approval. At this time, 1:35pm, Ms. Julia Bullard had to leave the room which resulted in a loss of quorum at this time and the board could not vote until she returned at 1:59pm when a quorum was re-established.</p>	<p>VOTE TAKEN: Mr. Robert Glass motioned to approve the Tracking and Emergency Response Policies & Mr. Mike Smith duly seconded the motion. The motion passed unanimously.</p>
<p>8A-3. Staff Recommends a Motion to Approve: Change in Scope for Lewis Center & Belle Glade</p>	<p>Ms. Abbott presented the Change in Scope of Services for the Lewis Center hours which will be reduced to Wednesdays with hours from 8-5pm and the Change in Scope for the Belle Glade location's hours of operation to include Saturday hours.</p>	<p>VOTE TAKEN: Mr. Bill Johnson motioned to approve the TChange in Scope for Lewis Center & Belle Glade & Ms. Julia Bullard duly seconded the motion. The motion passed unanimously.</p>
<p>B. EXECUTIVE</p>		

<p>8B-1 RECEIVE AND FILE: Executive Director Informational Update</p>	<p>Ms. Candice Abbott gave an update on the following:</p> <p style="text-align: center;"><u>Health Center Process Improvement and Efficiencies</u></p> <p><u>Medical Assistant and Registration Workflow</u></p> <p>The purpose of the process improvement event is to create efficiencies in the patient check-out process and allow the Medical Assistant to use the time for patient care related tasks that are relevant to their discipline (i.e., increase patient chart prep).</p> <p><u>Medical Dental Integration</u></p> <p>Dr. Adametz, Dental Program Director assessed the dental program and determined at our Delray Beach and West Palm Beach locations hygienist appointments were booked several months out creating a delay in patient access. He further reviewed our current Medical Dental Integration (MDI) program and determined we could have Dental Assistants occupy the MDI role which are currently held by hygienists and open up hygienist schedules in those locations thereby reducing the wait time for patients.</p>	<p>Received & Filed. No further action is necessary.</p>
<p>C.CREDENTIALING</p>		
<p>8C-1 Staff Recommends a MOTION TO APPROVE: Licensed Independent Practitioner Credentialing and Privileging.</p>	<p>The agenda item represents the licensed independent practitioners recommended for credentialing and privileging by the Vice President, Chief Medical Officer.</p> <p>Dr. Chibar reviewed and The LIPs listed below satisfactorily completed the credentialing and privileges process and met the standards set forth within the approved Credentialing and Privileging Policy. The credentialing and privileging process ensures that all health center practitioners meet specific criteria and standards of professional qualifications. This criterion includes, but is not limited to:</p> <ul style="list-style-type: none"> ➤ Current licensure, registration or certification ➤ Relevant education, training and experience ➤ Current clinical competence ➤ Health fitness, or ability to perform the requested privileges ➤ Malpractice history (NPDB query) 	<p>VOTE TAKEN: Mr. Bill Johnson motioned to approve Licensed Independent Practitioner Credentialing and Privileging Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

	<ul style="list-style-type: none"> ➤ Immunization and PPD status; and ➤ Life support training (BLS) <p>LIP(s):</p> <p>Ana Bernard, DDS joined the Delray Beach Clinic in 2023 specializing in General Dentistry. She attended the Indiana University School of Dentistry. She has been in practice for sixteen years and is fluent in German and Romanian</p> <p>Kiara Jones, LCSW joined the Lake Worth Clinic in 2017 as a Licensed Clinical Social Worker. She attended the Florida Atlantic University. Ms. Jones has been in practice for eleven years.</p> <p>Nancy Lazaro, MD joined the Lantana Clinic in 2015 specializing in Pediatric Medicine. She attended the University of Puerto Rico and also completed her residency at Puerto Rico Medical Center. She has been in practice for twenty years and is fluent in Italian and Spanish.</p> <p>Joann Pierre-Louis, APRN joined the Lake Worth Clinic in 2015 as a Nurse Practitioner. She attended the Florida Atlantic University and is certified as an Adult Health Nurse Practitioner by the American Academy of Nurse Practitioners. She has been in practice for twelve years and is fluent in Creole.</p>	
D.QUALITY		
<p>8D-1. Staff Recommends a MOTION TO APPROVE: Quality Reports</p>	<p>This agenda item presents the updated Quality Improvement & Quality Updates:</p> <ul style="list-style-type: none"> • Quality Council Meeting Minutes – November 2023 • UDS Report – YTD • Provider Productivity – October 2023 <p>Dr. Chibar presented the above topics and reviewed the UDS Report Dashboard.</p>	<p>VOTE TAKEN: Mr. Bill Johnson made a motion to approve the Quality Reports as presented. Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
<p>8D-2. Staff Recommends a MOTION TO APPROVE: Quality Improvement Quality Assurance (QI/QA) Plan Updates</p>	<p>Dr. Chibar presented that there were minor revisions to the QI/QA Plan, which included updating the Executive Director of FQHC Services, the Director of Corporate Quality, and other personnel.</p>	<p>VOTE TAKEN: Mr. Mike Smith made a motion to approve the QI/QA Plan Updates. Mr. Robert Glass duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

E. OPERATIONS

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

In October, the Health Centers had a total of 9,315 unique patients. This is a 5% increase over previous month. Our unique new patients totaled was 2,223 which remains consistently at 25% of overall unique patients. In provider visits the Health Centers had a total of 13,503 visits. This was an increase of 6% from the month prior and 10% higher than October 2022. 38% of patients were from adults Primary Care which is a 2% decrease, 24% from Dental which was a 1% increase and 13% from Pediatrics which is consistent with previous month. In October the Lantana Primary Care Health Center had the highest volume with 2,035 visits followed by the West Palm Beach Primary Health Center with 1,845 visits.

Our payer mix for October reflects 53% uninsured which is a 1% decrease over previous month. 41% of patients were Managed Care and 5% Medicaid which were both consistent with previous month.

61% of patients reported as female which is only a 1% increase over previous months. 50% of patients reported as White and 43% Black or African American. 39% of patients reported as Hispanic. Our largest age group continue to be those between the ages of 30-39 years old with 17% of patients.

In October our Homeless population averaged 32.5% with a total of 3,135 homeless patients between all Health Centers.

Agricultural Worker averaged 4.4% between all Health Centers in October with a total of 430 patients.

The no show rate in October between all service lines and health centers was 21%. By service line, Dental is lower at 18%; Primary Care 21%; Women’s Health 23% and the highest being Behavioral Health at 29%. Only 1% of no shows are from Telehealth.

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

Women’s Health departments show a higher percent of new patient no shows as well as multiple Behavioral Health

VOTE TAKEN: Mr. Robert Glass made a motion to approve the Operations Reports- October 2023 as presented. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.

	<p>departments. For established patients, the highest no show rates are those from Mangonia Behavioral Health, West Palm Beach, Lake Worth and Lantana Primary Care departments.</p> <p>Walk-in visits year to date remain consistent at 19% in medical and 15% in dental. We have provided a total of 23,111 walk-in visits year to date. In October the West Palm Beach Health Center saw the highest number of walk-ins in medical and in dental with a total of 754 walk-in visits.</p>	
9. Executive Director of FQHC Services Comments	<p>Ms. Abbott stated that a couple of the items in the board packet were findings on the Mock Audit and we made edits/updates according to those findings to bring to the Board. We will bring any additional fall out items to next month's meeting since they were not brought to the Board and they need to be updated prior to the HRSA OSV.</p> <p>Ms. Abbott also stated that Andrea Steele, who has done a tremendous job with HRSA in the past, is transitioning her role to AVP of IT and Jesenia Montalvo will be stepping into that role. Andrea and Jesenia along with many other staff members have done so much during the Mock audit, everyone knew exactly what they needed to do to fulfill the requirements of HRSA.</p>	No action necessary.
10. Board Member Comments	<p>Mr. Bill Johnson expressed his opinion on the PBC Community Health Improvement Plan & Community Health Assessment Update document and would like to know how the Board can get more involved with the strategy and goals of this.</p> <p>Mr. Mike Smith asked about re-credentialing and the process regarding knowing how our physicians are doing versus just knowing where they are from and what their licensing is.</p> <p>Dr. Andric explained our process and stated, in the past, the Board only wanted to know the information we currently provide but moving forward we can provide as much or as little information as requested if the Board requests a change and approves.</p>	No action necessary.
11. Establishment of Upcoming Meetings	<p><u>January 24, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>February 28, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p>	No action necessary.

	<p><u>March 27, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>April 24, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>May 22, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>June 26, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>July 24, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>August 28, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>September 25, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>October 23, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>November 20, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>December 18, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p>	
<p>12. Motion to Adjourn</p>	<p>Ms. Tascone motioned to adjourn the public meeting immediately following the Closed Meeting at 2:20 pm.</p>	<p>VOTE TAKEN: Ms. Melissa Tascone made a motion to adjourn. Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

Minutes Reviewed by: _____
Signature
Date

C. L. Brumback Primary Care Clinics

Board of Directors

Attendance Tracking

	01/25/23	02/22/23	03/29/23	04/27/23	05/24/23	06/28/23	07/26/23	08/23/23	09/26/23	10/25/23	10/31/23	11/28/23	12/13/23
Mike Smith	X	X	X	X	X	X	N/A	X	X	X	X	X	
Melissa Tascone	X	X	X	X	X	X	N/A	X	X	E	X	X	
Julia Bullard	X	X	X	E	X	X	N/A	A	E	X	X	X	
Joseph Gibbons	X	X	X	X	X	X	N/A	X	X	E	X	E	
John Casey Mullen	X	---	---	---	---	---	---	---	---	---	---	---	---
James Elder	A	---	---	---	---	---	---	---	---	---	---	---	---
Irene Figueroa	A	---	---	---	---	---	---	---	---	---	---	---	---
Tammy Jackson-Moore	E	A	E	E	E	A	N/A	E	E	E	X (ZOOM)	E	
Robert Glass	X (ZOOM)	X	X	X	A	X	N/A	X	X	X	X	X	
William Johnson	X	X	X	X	X	X	N/A	X	X	X	X	X	
Boris Seymore	----	X	A	A	X	A	N/A	A	A	A	A	X (ZOOM)	
Alcolya St. Juste	----	A	X	X	X	X (ZOOM)	N/A	X	X	E	X	E	

X= Present

C= Cancel

E= Excused

A= Absent

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

1. Description: HRSA Digest

2. Summary:

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

3. Substantive Analysis:

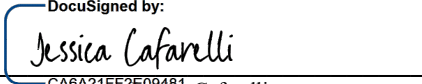
The November HRSA Digest highlighted World AIDS Day, Inflation Reduction Act Catalytic Program Kickoff, Updated CDC Report and Recommendations, and National Influenza Vaccination Week.

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E09481 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

6. Recommendation:

Staff recommends the Board Receive and File the HRSA Digest.

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza

0CF6F7DB670634 Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Jesenia Montalvo

D31F5A902D3B49 Jesenia Montalvo
Manager, Regulatory & Accreditation

DocuSigned by:
Candice Abbott

F637D209DB6248 Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

Today with Macrae Today, World AIDS Day Photos Due Next Week

Subscribe to updates from HRSA

HRSA sent this bulletin at 11/28/2023 09:38 AM EST

Email Address

e.g. name@e

Subscribe

Share Bulletin



Primary Health Care



November 28, 2023

SHARE

TODAY: Today with Macrae: Health Center Program Updates

Join Jim and Dr. Laura Cheever from HRSA's HIV/AIDS Bureau to recognize World AIDS Day.

2:00-3:00 p.m. ET

[Join the session](#)

Join by phone: 833-568-8864

Webinar ID: 160 898 8161



NEXT WEEK: Deadline for World AIDS Day Photos

We'll recognize World AIDS Day (Friday, December 1) at today's Today with Macrae (TWM) webcast. Submit photos of your health center staff, patients, or community members wearing red or attending a World AIDS Day event by Wednesday, December 6. We may share your pictures at a future TWM or through the Digest.



ENDING THE HIV EPIDEMIC
Equitable Access, Everyone's Voice

- Use the [BPHC Contact Form](#) (General/Other HRSA > Other Topics).
- Mention World AIDS Day 2023.
- Include the names and titles of people in the photo(s) and two or three sentences about the event as applicable.
- Upload the photos and a completed [Photo Release Form](#) (PDF) for each person in the photo.



Jump To: [National Influenza Vaccination Week](#) | [Behavioral Health](#) | [HIV](#) | [Workforce](#) | [Additional Resources](#) | [Training Calendar](#)

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

What's New

Inflation Reduction Act Catalytic Program Kickoff

The HHS Office of Climate Change and Health Equity (OCCE) will launch a "catalytic program" early next year to support health care organizations, including health centers, in taking advantage of the tax credits, grants, and other supports made available by the historic Inflation Reduction Act. OCCE's initiative will occur through collaboration with federal partners and will feature national webinars and breakout sessions by provider type to help organizations assess their needs and opportunities.

Learn more during an information session this week:

Thursday, November 30
Noon-1:00 p.m. ET
[Registration page](#)

National Rural Health Day

If you missed any of our webinars or announcements, visit [HRSA's page](#) for recordings, infographics, and more.



Nominations Open for 80% in Every Community National Achievement Awards

Nominate yourself or other outstanding partners for the 80% in Every Community National Achievement Awards. Each winner receives a monetary award to support continued efforts to increase colorectal cancer screenings, as well as having their work highlighted throughout the following year by the American Cancer Society's National Colorectal Cancer Roundtable on a national stage. Submissions are open until Monday, December 4, at 11:59 p.m. ET.

[Learn more and submit a nomination.](#)

Recent Updated CDC Report and Recommendations

CDC recently shared:

- A [report](#) on missed opportunities for preventing congenital syphilis.
- [Updated recommendations](#) on hepatitis C testing among perinatally exposed infants and children.

New Medicare Opportunities in 2024

Health centers should take note of upcoming changes with Medicare starting Monday, January 1, 2024:

- Marriage and family therapists and mental health counselors may bill Medicare directly and be paid as FQHC practitioners and receive the FQHC prospective payment rate.
- CMS [approved new services](#) to address the health-related social needs of Medicare beneficiaries.
- They closed a behavioral health coverage gap when patients require more intense services than traditional outpatient therapy.
- FQHCs may receive payment for [intensive outpatient program services](#) under Medicare.

Learn more about the changes at these upcoming National Association of Community Health Center (NACHC) webinars:

Growing CHC Behavioral Health Providers: Opportunities in Medicare and Medicaid
Wednesday, November 29
4:00-5:00 p.m. ET
[Registration page](#)

NACHC Regulatory Office Hours: Final Calendar Year 2024 Medicare Physician Fee Schedule Rule
Thursday, December 7
4:00-5:00 p.m. ET
[Registration page](#)

These webinars are not federally funded; they are funded by NACHC.

National Influenza Vaccination Week

Earlier this year, CDC published a [report on the high hospitalization rate for children and adolescents last flu season](#). This season, they [recommend vaccination for everyone 6 months or older without contraindications](#), ideally by last month.



Training Calendar



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

Through December 5

Today with Macrae: Health Center Program Updates

Tuesday, November 28
2:00-3:00 p.m. ET
[Join the session](#)
Join by phone: 833-568-8864
Webinar ID: 160 898 8161

Compensation Wellness for Staff

Hosted by ACU's STAR² Center
Tuesday, November 28
3:00-4:00 p.m. ET
[Registration page](#)

Workforce Well-Being TA Kickoff

Wednesday, November 29
2:00-3:00 p.m. ET
[Registration page](#)

Addressing Health Disparities for LGBTQIA+ People and People with HIV in Public Housing

Hosted by the National Center for Health in Public Housing (NCHPH) and the National LGBTQIA+ Health Education Center
Thursday, November 30
Noon-1:00 p.m. ET
[Registration page](#)
Additional sessions on Friday, December 8, and Friday, December 15

Inflation Reduction Act Catalytic Program Kickoff

Hosted by HHS' OCCE
Thursday, November 30
Noon-1:00 p.m. ET
[Registration page](#)

Introduction to Migrant Clinicians Network Portal for Enrolling Patients into Health Network

Hosted by Migrant Clinicians Network
Thursday, November 30
1:00-2:00 p.m. ET
[Registration page](#)

Best Practices for Phone and Virtual Interpretation in Health Centers

Hosted by the National Center for Farmworker Health
Thursday, November 30
2:00-3:00 p.m. ET
[Registration page](#)

Health Center Needs Assessment 101

Hosted by NACHC
Thursday, November 30
2:00-3:00 p.m. ET
[Registration page](#)

Integrating HIV and STI Prevention into Primary Care: Best Practices and Beyond

Hosted by Community Health Center, Inc.
Thursday, November 30
3:00-4:00 p.m. ET
[Registration page](#)
****1.0 CE available****

2023 Annual Update on the IHS Sealant Measure

But it's not too late! Take advantage of next week's annual observance to remind your patients that vaccination can reduce the severity of flu. CDC provides ready-to-use graphics and social media messages in their [digital media toolkit](#).



Behavioral Health

Approaches to Mental Health Care for Migrant and Seasonal Agricultural Workers

Farmworker Justice and Health Outreach Partners offer a webinar to help health centers improve their response to the mental health care needs of migratory and seasonal agricultural workers (MSAWs). Speakers will cover mental health disorders and how outreach and enabling services can provide trauma-informed care to screen and support mental health in MSAWs. Participants can share their experiences, challenges, and successes. The final 30 minutes is optional, addressing ready-to-implement resources and offering time for discussion.

Tuesday, December 5
1:00-2:30 p.m. ET
[Registration page](#)

Cherokee Health Integrating Primary Care and Behavioral Health Academy

HRSA will feature Cherokee Health Systems in an upcoming two-day virtual training. Speakers will discuss the integrated care clinical model, building team-based care, building a primary care provider/behavioral health provider panel, and using health information technology and data analytics.

Tuesday, December 12,
and Wednesday, December 13
10:00 a.m.-4:00 p.m. ET
[Registration page](#)
****12 CE available****

2022 National Survey on Drug Use and Health

SAMHSA has released the results of their [2022 National Survey on Drug Use and Health](#) and a [companion infographic report](#) (PDF).

Findings include that more than 23% of adults aged 18 or older had any mental illness in the past year (59.3 million), with 6% suffering from serious mental illness (15.4 million). Among adolescents aged 12 to 17, nearly 20% (4.8 million) had a major depressive episode in the past year.



HIV

Integrating HIV and STI Prevention into Primary Care: Best Practices and Beyond

Experts will discuss strategies for HIV and STI prevention management, addressing substance use, and incorporating injectable pre-exposure prophylaxis (PrEP) medication. Experts will also discuss models for implementing specialty care for key populations in your training programs. Participants will leave with a deeper understanding of HIV and STI prevention strategies in primary care and actionable steps to strengthen their PrEP program.

Thursday, November 30
3:00-4:00 p.m. ET
[Registration page](#)
****1.0 CE available****

Increasing PrEP Uptake Among African American Cisgender Women

Black cisgender women in the U.S. continue to experience a disproportionately high burden of HIV diagnoses, yet relatively few are prescribed PrEP, a highly effective HIV prevention medication. (See an [article in the National Library of Medicine](#).)



We invite health center staff to join us to hear about common barriers and strategies to promote the successful uptake of PrEP among Black cisgender women. We're featuring speakers from CDC and HRSA-funded Bee Busy Wellness Center. They will share their expertise and

COVID-19 Sealant Measure

Hosted by NNOHA
Thursday, November 30
3:00-4:00 p.m. ET
[Registration page](#)
****1.0 CDE available****

HITEQ Highlights: Enabling a Cyber-Resilient Health Center

Hosted by the Health Information Technology, Evaluation, and Quality (HITEQ) Center
Monday, December 4
1:00-2:00 p.m. ET
[Registration page](#)

The Impact of Public Health Emergencies on Community Mental Health: Preparation and Response

Hosted by NCHPH
Monday, December 4
1:00-2:00 p.m. ET
[Registration page](#)

COVID-19 Response Program Office Hours

Tuesday, December 5
1:00-2:00 p.m. ET
[Registration page](#)

Approaches to Mental Health Care for Migrant and Seasonal Agricultural Workers

Hosted by Farmworker Justice and HOP
Tuesday, December 5
1:00-2:30 p.m. ET
[Registration page](#)

Optimize Your Care Team to Improve Chronic Hypertensive Disease Management

Hosted by the National Nurse-Led Care Consortium (NNCC)
Tuesday, December 5
2:00-3:00 p.m. ET
[Registration page](#)

Removing Barriers and Facilitating Access: Improving Health Care Access for People with Disabilities

Hosted by NCHPH
Tuesday, December 5
2:00-3:00 p.m. ET
[Registration page](#)

Increasing PrEP Uptake Among African American Cisgender Women

Tuesday, December 5
2:00-3:30 p.m. ET
[Registration page](#)

Community Health Worker Workforce Collaborative: Promising Practices and Lessons Learned for Sustaining Our Health Center Workforce

Hosted by the Association of Asian Pacific Community Health Organizations
Tuesday, December 5
4:00-5:00 p.m. ET
[Registration page](#)

Upcoming

Suicide in Older Adults: What You Need to Know About Risk and Prevention

Hosted by the National Center for Equitable Care for Elders
Wednesday, December 6
1:00-2:00 p.m. ET
[Registration page](#)

Supportive Transition Care for Foster and Former Foster Youth

Hosted by NCMH with SBA and

see busy wellness center. They will share their expertise and experiences to increase equitable access to HIV prevention.

Tuesday, December 5
2:00-3:30 p.m. ET
[Registration page](#)

Workforce

Nurturing a Culture of Self-Care: Strategies for Enhancing Organizational Wellness

Health Outreach Partners (HOP) invite health center staff to join a learning collaborative designed to help organizations cultivate a culture of self-care and promote employee wellness. Tools include interactive exercises, case studies, and HOP's Organizational Self-Care Assessment Tool. Participants will explore strategies for encouraging personal growth and organizational success. They will also learn to recognize the signs of burnout, develop healthy habits for maintaining balance, and build a culture where employees feel supported and empowered. Visit the [registration page](#) for more information.

Fact Sheet: Building a Resilient & Trauma-Informed Workforce

A [new fact sheet](#) from the Association of Clinicians for the Underserved's (ACU) STAR² Center asks "What does it mean to be trauma-informed?" The fact sheet also explains the concept of resilience (individual and organizational) and details how health centers can operate in a "new normal" to support staff well-being after experiencing the acute and prolonged trauma of the COVID-19 pandemic and other national and global struggles.

2024 Workforce Symposium – Inclusive Innovation: Putting People First

Are you looking for a space to convene with peers, develop your skills, and focus on the workforce? Registration is now open to join the STAR² Center team and health center workforce colleagues at this in-person event in Nashville, Tennessee, next year. A workforce plan workshop will follow the symposium (April 29-30). [Get more information on these events or register.](#)

Additional Resources

Supportive Transition Care for Foster and Former Foster Youth

This webinar will help health centers – and those in the health center network – better understand and address the health and health-related social needs of foster youth as they transition to adulthood. You'll learn about this group's health needs and the disparities they face. Speakers will discuss youth identifying as LGBTQIA+, how school-based health centers serve as critical access points for health care and social services, and promising practices for integrating supportive transition care services that improve health and social outcomes for foster and former foster youth.

Wednesday, December 6
2:00-3:00 p.m. ET
[Registration page](#)

The National Center for Medical-Legal Partnership (NCMLP) hosts this webinar with the School-Based Health Alliance (SBHA) and the National LGBTQIA+ Health Education Center.

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

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

hosted by NCMLP, with SBHA and the National LGBTQIA+ Health Education Center
Wednesday, December 6
2:00-3:00 p.m. ET
[Registration page](#)

Tobacco Cessation from Evidence to Practice

Hosted by the National Health Care for the Homeless Council and NCHPH
Thursday, December 7
Noon-1:00 p.m. ET
[Registration page](#)

Community Dental Health Coordinators: An Introduction to Oral Health Integration for Health Centers

Thursday, December 7
1:00-2:00 p.m. ET
[Registration page](#)
****1.0 CDE available****

Health Network: A Care Coordination Program for Patients Who Move During Treatment (in Spanish with English interpretation)

Hosted by Migrant Clinicians Network
Thursday, December 7
1:00-2:00 p.m. ET
[Registration page](#)

Stratifying Quality Measures by Housing Status/Location

Hosted by NNCC
Thursday, December 7
2:00-3:00 p.m. ET
[Registration page](#)

UDS Training for Primary Care Associations and Health Center Controlled Networks

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

Resilience Through Understanding – A Panel Discussion (in Spanish with English interpretation)

Hosted by Migrant Clinicians Network
Tuesday, December 12
2:00-3:00 p.m. ET
[Registration page](#)

Dental Residency Rotations in Community Health Centers

Tuesday, December 12
3:00-4:00 p.m. ET
[Registration page](#)

Cherokee Health Integrating Primary Care and Behavioral Health Academy

Tuesday, December 12, and Wednesday, December 13
10:00 a.m.-4:00 p.m. ET
[Registration page](#)
****12 CE available****

Using Your EHR to Improve Your Diagnosis and Follow Up of Obesity

Hosted by Renaye James Healthcare Advisors
Wednesday, December 13
3:00-4:15 p.m. ET
[Registration page](#)

Poverty, Housing and Stigma: The Profound Effects of The Social Determinants of Health on Addiction Management

Hosted by NCHPH
Monday, December 18
1:00-2:00 p.m. ET

[Registration page](#)

*Webinars are hosted by HRSA
unless otherwise noted.*



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**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
DECEMBER 13, 2023**

1. Description: Compliance, Privacy & Ethics Annual Board Education

2. Summary:

This item presents annual education on Compliance, Privacy & Ethics for the Health Care District of Palm Beach County (“HCD”).

3. Substantive Analysis:

Boards and Committees often have a role in leading a health care organization’s compliance and quality oversight efforts. This is a critical role to play in ensuring that health care organizations operate in compliance with Federal health care program requirements and provide high quality care. In order to ensure Board and Committee members can fulfill this duty; annual education should be provided on Compliance, Privacy & Ethics.

The compliance function promotes the prevention, detection, and resolution of actions that do not conform to legal, policy, or business standards. This is done through auditing and monitoring, training and education, maintaining open lines of communication (such as the hotline), policies and standards of conduct, responding to questions and issues, working with internal and external parties, and providing guidance to HCD’s workforce.

This training and education covers the following topics:

- Compliance Information for Board and Committee Members
- Regulatory and Governing Bodies
- Importance of Compliance in Healthcare
- HCD Compliance, Privacy & Ethics Program Elements, Purpose, and Function
- Standards of Conduct
- Conflicts of Interest (COI)
- Gifts, Gratuities, & Entertainment
- E-mail, Social Media, and Disposal of Protected or Proprietary Information
- Privacy & Security (HIPAA)
- Fraud, Waste, & Abuse
- Overview of Key Rules, Laws & Regulations (General and Regulatory Compliance topics such as: Stark Law, Anti-Kickback Statute, False Claims Act, Exclusions, and Non-Retaliation)

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
DECEMBER 13, 2023**

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E0481C Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

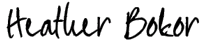
6. Recommendation:


Staff recommends the Board Receive and File this Annual Education.

Approved for Legal sufficiency:

DocuSigned by:

 0CF6F7DB67064B Bernabe Icaza
 SVP & General Counsel

DocuSigned by:

 4766F813A13D48D Heather Bokor
 VP & Chief Compliance, Privacy & Risk Officer

DocuSigned by:

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

**Our Mission
Your Passion**



Annual Board Education

**Compliance, Privacy & Ethics
Annual Training to PCC Clinics Board**

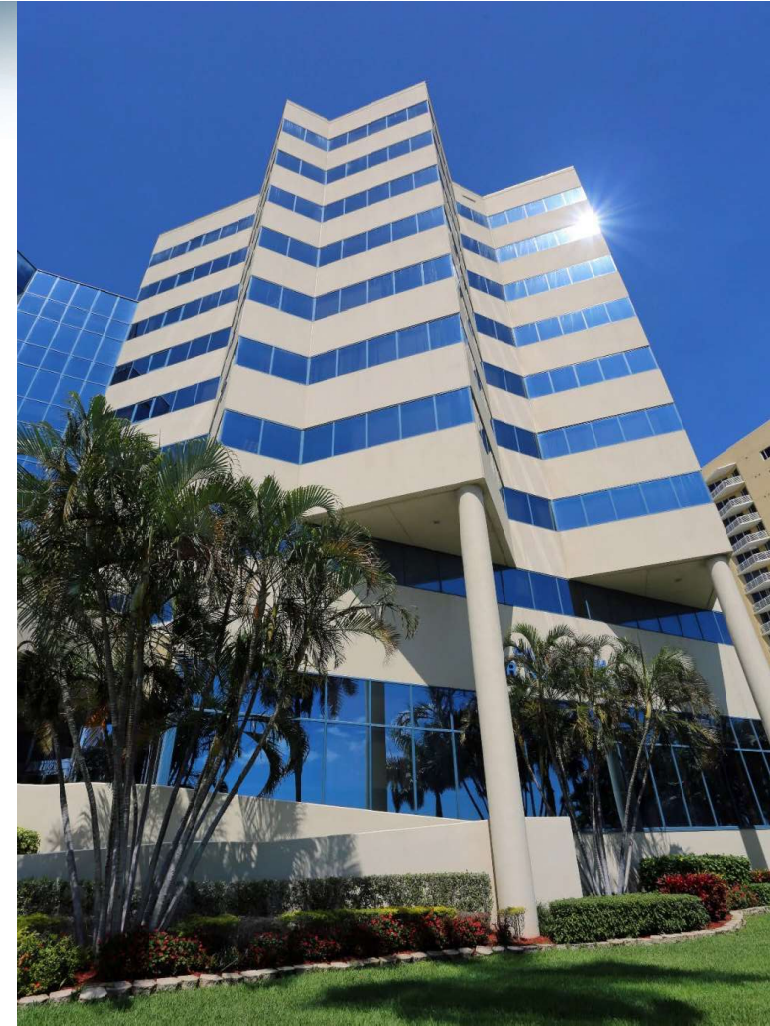
Heather Bokor
Vice President and Chief Compliance, Privacy, & Risk Officer

Health Care District of Palm Beach County



Overview and Objectives

- Introduction
- Compliance for Board and Committee Members
- Healthcare Compliance: Importance and What We Do
- Who Governs Healthcare?
- Compliance, Privacy & Ethics Program Elements and Purpose
- Standards of Conduct
- Conflicts of Interest
- Gifts, Gratuities, & Entertainment
- E-Mail Rules, Social Media, Disposal Information
- Fraud, Waste, & Abuse; Overview of Key Rules, Laws, & Regulations:
 - Privacy & Security (HIPAA)
 - General and Regulatory Compliance (Stark, Anti-Kickback Statute, False Claims Act, Exclusions, Non-Retaliation)
 - *Sunshine Law and Public Records Act (Separate education available)*
 - Takeaways





Introduction: Compliance, Privacy & Ethics



“My name is Heather Bokor.

I am the District’s Vice President and Chief Compliance, Privacy, and Risk Officer. In my role for Compliance and Privacy, I work to create and promote ethics and compliance, manage the daily operations and overall strategy for my department, and am tasked with enhancing the stability and reputation of the District, by providing guidance to ensure compliance with local, state, and federal rules and laws. Compliance deals with conducting auditing and monitoring, providing training and education, maintaining open lines of communication – such as the hotline, setting policies and standards of conduct, responding to questions and issues, working with internal and external parties, and providing guidance to HCD’s workforce. This helps to protect our organization, patients, customers, and employees from risk of harm in a number of ways (financial, legal, reputational, etc.). Please feel free to reach out to me or any member of my team for assistance. I look forward to working with you!”



Compliance for Board Members and Committees: The Compliance Function

The compliance function promotes the prevention, detection, and resolution of actions that do not conform to legal, policy, or business standards. This responsibility includes the obligation to develop policies and procedures that provide employees guidance, the creation of incentives to promote employee compliance, the development of plans to improve or sustain compliance, the development of metrics to measure execution by management of the program and implementation of corrective actions, and the development of reports and dashboards that help management and the Board evaluate the effectiveness of the program.



Compliance for Board Members and Committees

- Boards and Committees often have a role in leading a health care organization's compliance and quality oversight efforts. This is a critical role to play in ensuring that health care organizations operate in compliance with Federal health care program requirements and provide high quality care.
- Board and Committee members should receive training on Compliance, Privacy & Ethics.



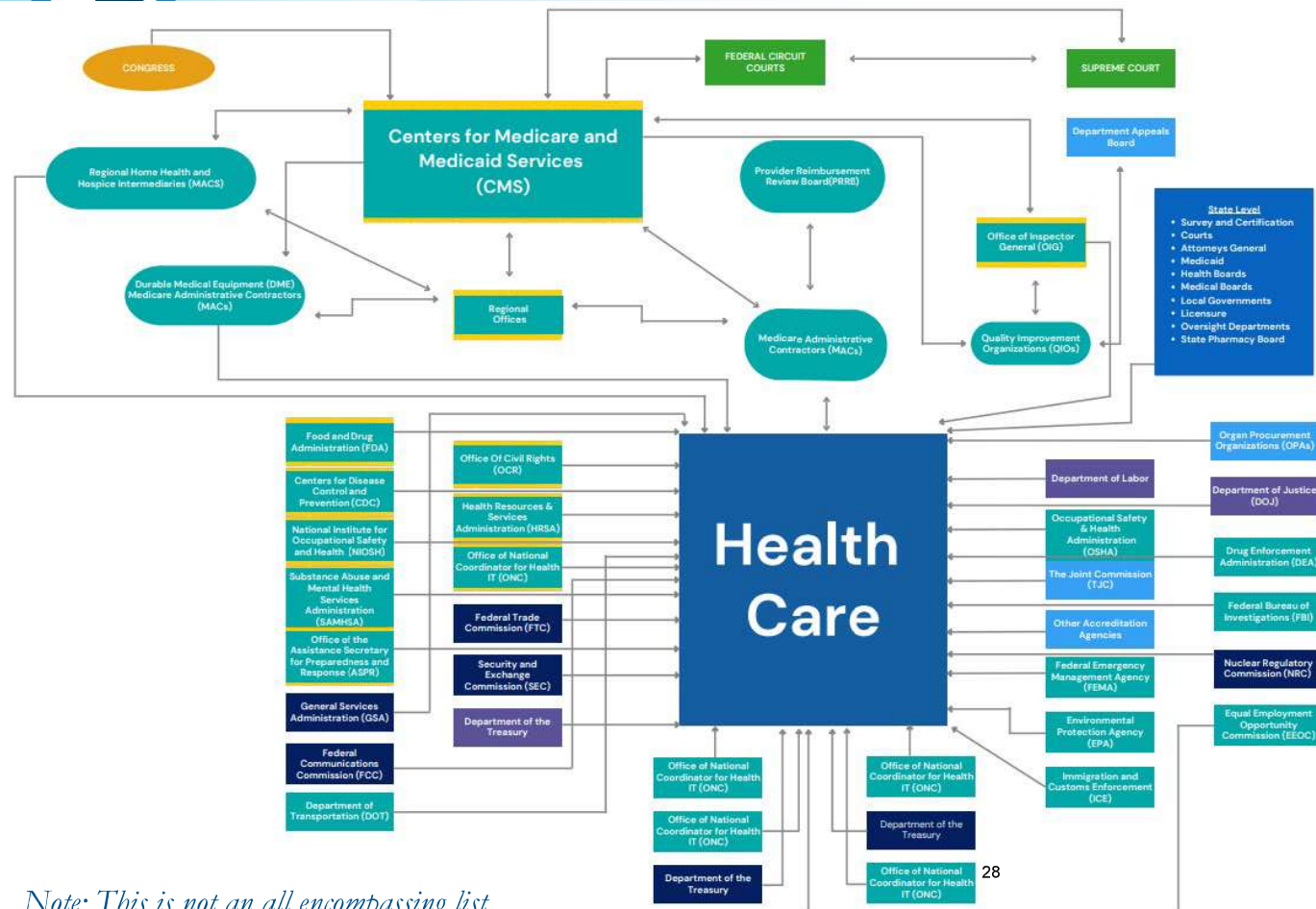
Compliance for Board Members and Committees

- Boards and Committees play a role to ensure that health care organizations operate in compliance with Federal health care program requirements and provide high-quality care.
- A key element of effective oversight is the process of asking the right questions to determine the adequacy and effectiveness of the organization's compliance program, as well as the performance of those who develop and execute that program, and to make compliance a responsibility for all levels of management.
- For example a Board or Committee member may: Ask a department that oversees risk about its reporting system for adverse events to ensure the system collects the appropriate data; Make a reasonable inquiry about compliance with applicable laws to ensure one has appropriate information and faith in the programs; Ask about changes in laws to ensure they are aware of the regulatory landscape of the operating environment; or Ask reasonable questions to understand how the organization identifies, investigates, manages/mitigates, resolves, and reports on compliance risks.
- These types questions and information help ensure Board and Committee members develop a better understanding of industry risks, regulatory requirements, and how effective compliance programs operate.



Who Governs Healthcare?

Healthcare is one of the most regulated industries in the world.



- KEY:**
- Accreditation and Licensure
 - Federal Executive Agency
 - Federal Executive Department
 - Independent Executive Agency
 - Judicial Government
 - Legislative Government
 - State Level Oversight
 - Agencies part of the Health and Human Services

Note: This is not an all encompassing list.



What is Healthcare Compliance? Why is it Important? What do we do?

- Healthcare is one of the most regulated industries in the world. Compliance helps to ensure HCD complies with rules, regulations, and laws that govern us – and to protect our patients, staff, and community from potential harm.
- Compliance is the ongoing process of meeting, or exceeding the legal, ethical, and professional standards applicable to a particular organization or provider.
- The rules and many regulatory authorities require healthcare organizations and providers to develop effective processes, policies, and procedures to define appropriate conduct, train the organization's staff, and then monitor the adherence to the processes, policies, and procedures.
- Compliance and Privacy work to create and promote ethics and compliance, and is tasked with enhancing the stability and reputation of the District, by providing guidance to ensure compliance with local, state, and federal rules and laws.
- Compliance conducts auditing and monitoring, provides training and education, maintains open lines of communication - such as the hotline, sets policies and standards of conduct, responds to questions and issues, works with internal and external parties, and provides guidance to HCD's workforce.



Purpose of the Compliance Program

- Follow the Standards of Conduct and Policies & Procedures
- Follow Rules, Laws, and Regulations
- Help Detect and Prevent Fraud, Waste, and Abuse
- Ensure Safety, Quality, and Standards of Care Are Met
- Honor Patient Rights and Confidentiality
- Always Do the Right Thing
- Provide Care Without Financial Incentives or Conflicts
- Ensure Accurate Documentation, Coding, Billing, and Reimbursement
- Only Qualified Staff Should Provide Care
- Care is Provided in Proper Settings Without Deficiencies



What do we do? “Elements of an Effective Compliance Program”



*HCD's Compliance Program
contains all of these!*



The Standards of Conduct

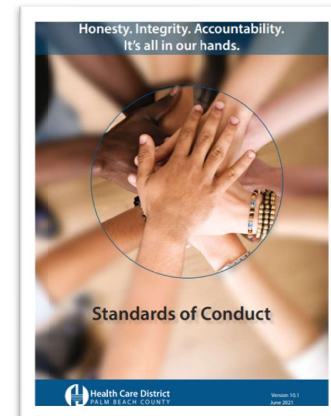
Commitment to Compliance, Honesty, Integrity, and Accountability.

HCD's Standards of Conduct:

- Establishes our commitment to compliance with all federal and state rules.
- States HCD's goals, mission, and ethical requirements.
- Provides guidance and sets clear expectations for all members of HCD's workforce (including our Board and Committees) on what is expected of them and how to operate.

Principles of the Standard of Conduct:

- Core Values
- Legal & Regulatory Compliance
- Business Ethics
- Conflicts of Interest
- Appropriate Use of Resources
- Active Participation
- Confidentiality





Conflicts of Interest ("COI")

- A COI occurs when an individual's personal interests could compromise his or her judgment, decisions, or actions in the workplace.
- We aim to limit COI's, as well as even the appearance of a conflict.
- All members of HCD's workforce (including Board and Committee members) have a duty to disclose / report any potential or actual COI.
- Attestations must be completed before starting with HCD, annually, and whenever a potential COI arises.
- If you aren't sure whether you should disclose, contact us!



Conflicts of Interest: Examples

- A Board or Committee member using information obtained from their position for profit.
- A Board or Committee member awarding or having involvement in awarding a contract or business to friends or family.
- A Board or Committee member or Leader hiring or promoting family.
- A physician did not disclose the acceptance of funding from a pharmaceutical company, including for speaker fees.
- An administrator at the hospital routinely used hospital funds to purchase catering orders from a restaurant owned by her husband.
- A member of leadership has an ownership interest in a medical device manufacturer (or vendor) that does business with the hospital.
- An employee accepts free travel from a vendor to attend a conference.



Gifts, Gratuities, & Entertainment



Never offer, give, solicit, or accept anything that would compromise or appear to compromise the recipient's ability to make fair, impartial, and balanced business decisions.

This includes acting on behalf of the district for business or other financial or personal interests. This is not limited to items, but also to favors or promises.

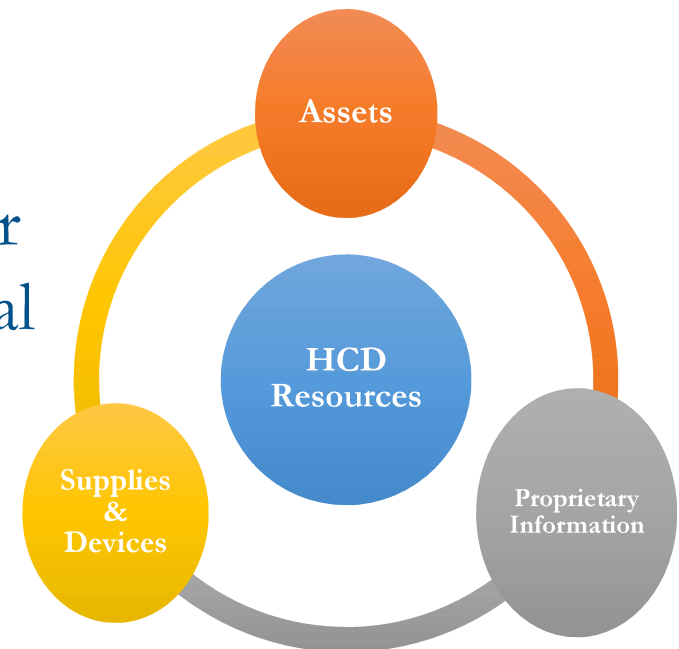
Some examples of Unacceptable Gifts (To or From Vendors, Patients, Physicians):

- Gift Cards
- Cash or equivalents of cash
- Game or event tickets
- Any item of value (*extremely broad*)



Appropriate Use of HCD Resources

- Protect HCD assets and proprietary information;
- Use HCD resources responsibly and for business purposes only (not for personal use); and
- Eliminate wasteful spending.





Important Rules & Laws

■ Privacy and Security Rules:

- The Health Insurance Portability and Accountability Act (HIPAA)
- Florida Information Protection Act of 2014 (FIPA)
- Family Educational Rights and Privacy Act (FERPA)
- The Health Information Technology for Economic and Clinical Health Act (HITECH)

■ Compliance Rules and Laws:

- The False Claims Act (FCA)/Deficit Reduction Act (DRA)
- The Stark Law (Physician Self-Referral)/Anti-Kickback Statute (AKS)
- Excluded Entities and Individuals (e.g., OIG)
- Florida's Government-in-the-Sunshine Law and Public Records Act (*Note: Your Communications are Discoverable*).

KNOW THE RULES!





Common Privacy Laws

HIPAA

Health Insurance Portability and Accountability Act

Federal Law

HIPAA addresses the use and disclosure of an individual's past, present, and future health care, treatment, payment, or operations, known as **Protected Health Information ("PHI")**.

FIPA

Florida Information Protection Act

State Law

Places additional restrictions on any business that acquires, stores, maintains, or uses **personal information** must take reasonable measures to safeguard that information.

FERPA

Family Educational Rights and Privacy Act

Federal Law

Provides parents the rights related to their children's **education records**, and places restrictions on the use and disclosure of **personally identifiable information** from the education records.



HIPAA

HIPAA: As required by Congress, the Privacy Rule covers:

- Health plans;
- Health care clearing houses; and
- Health care providers who transmit any information in an electronic form in connection with a transaction for which HHS has adopted a standard.

These entities (collectively called “covered entities”) are bound by the privacy standards even if they contract with others (called “business associates”) to perform some of their essential functions.



HIPAA Gives Patient's Rights

The HIPAA Privacy Rule generally provides individuals with a legal, enforceable rights to have control over their information and records.



Examples:

- Obtain the Notice of Privacy Practices (NPP)
- Honor patient rights and confidentiality
- Access and correct health information
- Opt Out (e.g., from the Facility Directory, HIE)
- Require written permission to use or share PHI for some purposes, like marketing, fundraising, or media releases
- Use & Disclosures of PHI
- File a complaint
- Receive a breach notification



What Information is Protected?

The Privacy and Security Rules apply to Protected Health Information (“PHI”), Personally Identifiable Information (“PII”), Individually Identifiable Information (“IIHI”).

PHI formats:

- Paper
- Electronic (“ePHI”)
- Verbal
- *Any format!*

PHI Elements:

- Name
- SSN
- Birthdate
- Address
- Images (e.g., photo)
- Genetic Information
- Insurance information

PHI Elements *Contd.:*

- Medical history
- Test and laboratory results
- Mental health conditions
- STD’s/STI’s
- *ANY unique identifier*



Minimum Necessary & Professional Need to Know

Minimum Necessary requires that individuals and covered entities take all reasonable efforts to limit the use or disclosure of PHI by covered entities and business associates to only what is necessary. *Use or disclose Protected Health Information (PHI) only for work related purposes!*

- ✓ Must have a **Professional Need to Know** to access, use, or disclose information.
- ✓ Only access, use, or disclose the **Minimum Necessary** information to do the task.



Privacy audits are performed of Epic and our systems to assess compliance with protecting patients privacy.



Email, Social Media, and Personal Electronic Devices

Do **not** use emails to send, receive, or store unencrypted confidential information.

Encrypt emails by typing **[secure]** in the subject line for all emails containing PHI, PII, or confidential information sent outside of HCD.

Do **not** post about patients or confidential information on Social Media:

- This applies even if it does not contain PHI
- This includes but is not limited to: images, videos, recordings
- This includes other confidential company or employee information



Do **NOT** use personal electronic devices (e.g., cell phones, personal laptop) to communicate or store patient or business information.



Report any breach concerns to Compliance or IT⁴³

Our Mission • Your Passion



Documents Containing PHI or Proprietary Information

All documents containing PHI or proprietary information should be disposed of appropriately in document destruction bins – e.g., Shred-it, Iron Mountain (this includes labels on IV bags, medication labels, etc.).

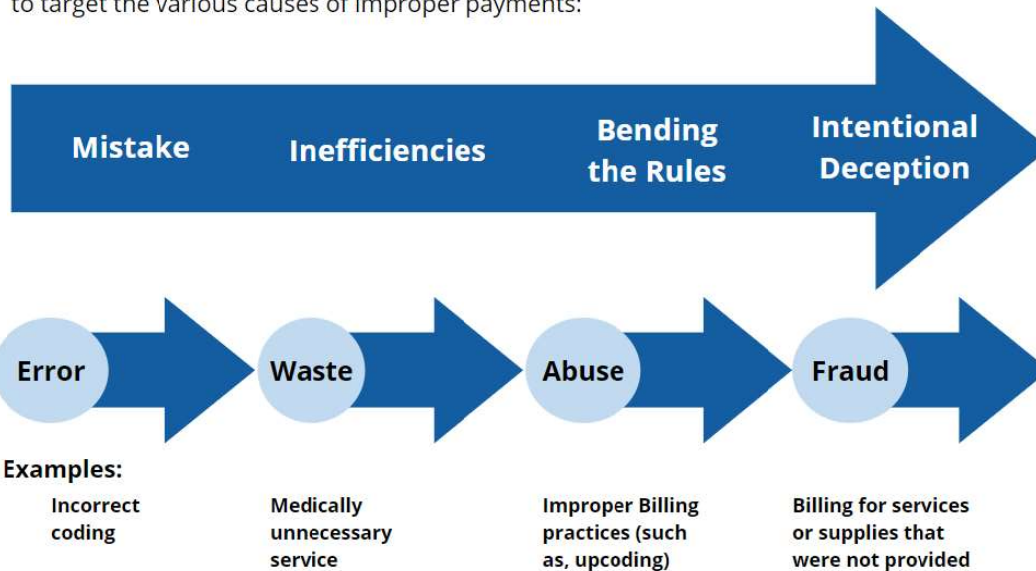


Contact the IT department if you need to dispose of PHI contained on physical hardware (e.g., disks, film, copier, laptop, CDs).



Fraud, Waste, & Abuse

Program Integrity encompasses a range of activities to target the various causes of improper payments:



Common Risks Associated with Claims:

- Insufficient documentation
- Incorrect coding (Misrepresenting diagnosis or procedures to maximize payments, upcoding) duplicate billing
- Incorrect billing units
- Medically unnecessary services
- Billing for services or supplies that were not provided
- False or fraudulent cost reports



False Claims Act (“FCA”)

- Program integrity encompasses a range of activities that target the various causes of improper payments, which could lead to a false or fraudulent claim for payment under the False Claims Act (“FCA”).
- The FCA is a federal law used to fight fraud and abuse in Medicare and Medicaid. It prohibits “knowingly”:
- Presenting (or causing to be presented) to the federal government a false claim for payment.
- Making or using a false record or statement to get a claim paid by the Federal government. Retaining an overpayment more than 60 days.



Stark Law

- The Physician Self-Referral Law is more commonly known as the Stark Law.
- Prohibits physicians from referring Medicare patients to an entity with which the physician or physician's immediate family member has a financial relationship — unless an exception applies.
- Prohibits the entity from billing Federal/State programs.
- Certain exceptions, such as having a written agreement that is set in advance and is at fair market value.
- Similar to the Anti-Kickback Statute ("AKS"), which does not need to involve a physician.
- Stark Law is a strict liability statute, which means proof of specific intent to violate the law is not required.



Anti-Kickback Statute (AKS)

- Prohibits individuals or entities from offering, giving, soliciting or receiving remuneration in order to influence or reward patient referrals or generate healthcare business.
- Remuneration is extremely broad and includes any item of value, including cash, gifts, supplies, land, concert tickets, etc.
- Certain safe harbors apply, such as bona fide employment arrangements, professional service arrangements, leases or rentals of office space, equipment rentals, etc.
- Both the party giving the remuneration and receiving the remuneration violate the AKS.
- Violations of the Anti-Kickback Statute can result in significant fines and/or imprisonment.
- Any federal healthcare claims submitted for reimbursement that are tainted by kickbacks generate liability under the False Claims Act (for example: gifts to/from physicians, patients, or vendors).



OIG Exclusions

- An Exclusion is an administrative action by the Office of the Inspector General (OIG) that prohibits participation in any Federal Health Care Program. Exclusions are imposed because the individual or entity is found to pose unacceptable risks to patient safety and/or program fraud.
- Anyone who hires an excluded individual or entity may be subject to civil monetary penalties (CMP) ranging from \$2,000 to over \$100,000 per violation.
- The District routinely checks the exclusion list to ensure that new hires, physicians, board members, and current employees are not on it or are cleared.



Non-Retaliation

- The District maintains a Non-Retaliation policy that protects an employee who raises a concern in "good faith" from facing any adverse actions.



Government-in-the-Sunshine Law and Public Records Act

- HCDPBC is subject to the Sunshine Law and Public Records Act.
- These rules provide:
 - A right to access government proceedings (**meetings**) of public boards, and
 - A right to access the **records** of any local government.
- Separate information is available to Board and Committee members for Government-in-the-Sunshine Law and Public Records Act.



Compliance is Everyone's Responsibility!

Honesty. Integrity. Accountability.

- ✓ *Follow* Laws, Rules, and Regulations
- ✓ *Comply* with the Standards of Conduct and District Policies & Procedures
- ✓ *Help Detect and Prevent* Fraud, Waste, and Abuse. Ensure documentation, coding, billing, and reimbursement are accurate
- ✓ *Focus on* Quality, Safety, and Patient Care. Care must be medically necessary, provided by qualified staff in properly licensed settings, and provided without financial incentives or conflicts
- ✓ *Honor* Patient Rights and Confidentiality
- ✓ *Always Do the Right Thing!*
- ✓ *Speak Up!* Report Concerns and Potential Issues





Thank You!

Compliance, Privacy, & Ethics Department

Heather Bokor

VP / Chief Compliance, Privacy & Risk Officer

hbokor@hcdpbc.org

Department email: compliance@hcdpbc.org (or) privacy@hcdpbc.org

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

1. Description: Policy Updates

2. Summary:

This agenda item presents the Hearing Speech and Sight Policy, Limited English Proficiency (LEP) Policy, Peer Review Policy and After-Hours Policy for review and approval.

3. Substantive Analysis:

The following policies have been revised to align with updates from the last review and approval of the Board.

1. Hearing Speech and Sight Policy
2. Limited English Proficiency (LEP) Policy
3. Peer Review Policy
4. After Hours Policy

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF290340a.Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

6. Recommendation:

Staff recommends the Board approve the Hearing Speech and Sight Policy, Limited English Proficiency (LEP) Policy, Peer Review Policy and After-Hours Policy.

Approved for Legal sufficiency:

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

DocuSigned by:
Jesenia Montalvo
D31F5A902D3848 Jesenia Montalvo
Manager, Regulatory and Accreditation

DocuSigned by:
Candice Abbott
F637D209DB4247 Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services



Hearing, Speech and Sight Impaired Policy

Policy #:	111-13.1	Effective Date:	11/29/2023
Business Unit:	Primary Care Clinics	Original Effective Date:	5/23/2013
Approval Group:	PCC Administrative Policy	Board Approval Date:	

PURPOSE

N/A

SCOPE

All C.L. Brumback Primary Care team members

POLICY

It is the policy of the C.L. Brumback Primary Care Clinics (CLBPCC) to ensure that a patient who is hearing, speech or sight impaired, will be offered services to assist communication with all CLBPCC staff.

EXCEPTIONS

N/A

RELATED DOCUMENTS

Related Policy Document(s)	Limited English Proficiency (LEP) Policy and Procedure
Related Forms	
Reference(s)	
Last Revision	
Revision Information/Changes	

APPROVALS

Reviewer approval	Marisol Miranda; Lisa Hogans; Angela Santos;
Reviewer approval date	12/7/2023
Final approver	Regina All; Belma Andric; Candice Abbott; Darcy Davis;
Final approval date	12/11/2023



This policy is only intended to serve as a general guideline to assist staff in the delivery of patient care; it does not create standard(s) of care or standard(s) of practice. The final decision(s) as to patient management shall be based on the professional judgement of the health care providers(s) involved with the patient, taking into account the circumstances at that time. Any references are to sources, some parts of which were reviewed in connection with formulation of the policy/procedure. The references are not adopted in whole or in part by the hospital(s) or clinic(s) / provider(s).

The master document is controlled electronically. Printed copies of this document are not controlled. Document users are responsible for ensuring printed copies are valid prior to use.



Limited English Proficiency (LEP) Policy

Policy #:	112-13.1	Effective Date:	11/30/2023
Business Unit:	Primary Care Clinics	Original Effective Date:	5/23/2013
Approval Group:	PCC Administrative Policy		

PURPOSE

N/A

SCOPE

All C.L. Brumback Primary Care team members

POLICY

It is the policy of the C.L. Brumback Primary Care Clinics (CLBPCC) to assist non-English speaking patients to effectively communicate with CLBPCC staff by utilizing the language line for interpretation by phone or video. The language line vendor offers various language interpretation.

EXCEPTIONS

N/A

RELATED DOCUMENTS

Related Policy Document(s)	
Related Forms	
Reference(s)	
Last Revision	
Revision Information/Changes	

APPROVALS

Reviewer approval	Marisol Miranda; Lisa Hogans; Angela Santos;
Reviewer approval date	12/6/2023
Final approver	Regina All; Belma Andric; Candice Abbott; Darcy Davis;
Final approval date	12/11/2023



This policy is only intended to serve as a general guideline to assist staff in the delivery of patient care; it does not create standard(s) of care or standard(s) of practice. The final decision(s) as to patient management shall be based on the professional judgement of the health care providers(s) involved with the patient, taking into account the circumstances at that time. Any references are to sources, some parts of which were reviewed in connection with formulation of the policy/procedure. The references are not adopted in whole or in part by the hospital(s) or clinic(s) / provider(s).

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Peer Review Policy

Policy #:	603-13.1B	Effective Date:	5/24/2017
Business Unit:	Primary Care Clinics	Last Review Date:	5/24/2017
Approval Group:	PCC Clinical Policy	Document Owner(s):	Primary Care Clinics
Board Approval Date:			

PURPOSE

To provide the highest level of quality and care to all C.L. Brumback Primary Care Clinic Patients.

SCOPE

All C.L. Brumback Primary Care Clinic Providers.

POLICY

It is the policy of C.L. Brumback Primary Care Clinics to perform clinical peer reviews which is a mechanism for evaluating the appropriateness of all clinical services (including medical, dental, woman's health and behavioral health). Providers will review each other's charts routinely using the established peer review form. Results from peer review will be presented at Quality Meetings and used for provider's annual assessment and privileging

EXCEPTIONS

N/A

RELATED DOCUMENTS	
Related Policy Document(s)	
Related Forms	
Reference(s)	
Last Revision	
Revision Information/Changes	
Next Review Date	

APPROVALS	
Reviewer approval	Sandra Warren; Charmaine Chibar; Belma Andric;



Reviewer approval date	12/11/2023
Final approver	Candice Abbott; Darcy Davis;
Final approval date	12/11/2023

This policy is only intended to serve as a general guideline to assist staff in the delivery of patient care; it does not create standard(s) of care or standard(s) of practice. The final decision(s) as to patient management shall be based on the professional judgement of the health care providers(s) involved with the patient, taking into account the circumstances at that time. Any references are to sources, some parts of which were reviewed in connection with formulation of the policy/procedure. The references are not adopted in whole or in part by the hospital(s) or clinic(s) / provider(s).

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After Hours On Call Policy

Policy #:	106-13.1	Effective Date:	3/18/2022
Business Unit:	Primary Care Clinics	Last Review Date:	1/20/2023
Approval Group:	PCC Administrative Policy	Document Owner(s):	Primary Care Clinics
Board Approval Date:	2/22/2023		

PURPOSE

To provide guidelines for after hours and emergency care.

SCOPE

The 24-hour answering service will answer phone calls after clinic hours. The on-call provider or recovery coach will be responsible for contacting the patient in a timely manner.

POLICY

C.L. Brumback Primary Care Clinics will ensure that a patient will have access to a clinic Provider after-hours, during clinic closures, during regular clinic hours, and in an emergency.

EXCEPTIONS

N/A

RELATED DOCUMENTS

Related Policy Document(s)	106-13-A.1
Related Forms	
Reference(s)	
Last Revision	
Revision Information/Changes	
Next Review Date	1/20/2025

APPROVALS

Reviewer approval	Marisol Miranda; Lisa Hogans; Angela Santos;
Reviewer approval date	12/7/2023



Final approver	Regina All; Belma Andric; Candice Abbott; Darcy Davis;
Final approval date	12/11/2023

This policy is only intended to serve as a general guideline to assist staff in the delivery of patient care; it does not create standard(s) of care or standard(s) of practice. The final decision(s) as to patient management shall be based on the professional judgement of the health care providers(s) involved with the patient, taking into account the circumstances at that time. Any references are to sources, some parts of which were reviewed in connection with formulation of the policy/procedure. The references are not adopted in whole or in part by the hospital(s) or clinic(s) / provider(s).

The master document is controlled electronically. Printed copies of this document are not controlled. Document users are responsible for ensuring printed copies are valid prior to use.

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

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

2. Summary:

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

3. Substantive Analysis:

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

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E09481 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

6. Recommendation:

Staff recommends the Board approve the October 2023 District Clinic Holdings, Inc. Financial Statements.

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza

0CF6F7DB6706433 Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Jessica Cafarelli

CA6A21FF2E09411 Jessica Cafarelli
Interim VP & Chief Financial Officer

DocuSigned by:
Candice Abbott

F637D209DB62427 Candice Abbott
SVP & Chief Operating Officer



MEMO

To: Finance Committee
From: Jessica Cafarelli
Interim VP, Chief Financial Officer
Date: December 13, 2023

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

The October financial statements represent the financial performance through the first month of the 2024 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, cash increased \$1.5M as a result of normal operations. Due from Other Governments increased \$740k as a result of grant recognition.

On the Statement of Revenues and Expenses, net patient revenue YTD was favorable to budget by \$448k or 59.4% primarily due to increased patient visits. Increased patient visits also contributed to Gross patient revenue YTD being favorable to budget by \$697k. Total YTD revenues were favorable to budget by \$223k. Operational expenses before depreciation were favorable to budget by \$662k due mostly to positive variances in salaries, wages, and benefits of \$374k, purchased services of \$113k, other supplies of \$40k, medical services of \$30k, repairs and maintenance \$24k, and other expense of \$30k. Total YTD net margin was a loss of (\$1.8M) compared to the budgeted loss of (\$3.0M) resulting in a favorable variance of \$1.2M or (39.7%).

Net patient revenue YTD for the Medical clinics was favorable to budget by \$103k. The Medical clinics YTD gross patient revenue was favorable to budget by \$553k due to increased patient volumes. The Medical clinics total YTD revenue was unfavorable to budget by (\$84k) primarily due to a timing difference in grant recognition. Total operating expenses of \$2.3M were favorable to the budget of \$2.9M by \$585k or 20.1%. The positive variance is mostly due to salaries, wages, and benefits of \$325k, purchased services of \$108k, and medical supplies of \$74k. Expense timing are driving these favorable YTD variances. Total YTD net margin was favorable to budget by \$761k or (30.2%).

Net patient revenue YTD for the Dental clinics was favorable to budget by \$356k or 262.0%. The Dental clinics total YTD gross patient revenue was favorable to budget by \$122k. Total YTD operating expenses of \$500k were favorable to budget by \$77k. Total YTD net margin was favorable to budget by \$442k or (90.2%).

District Clinic Holdings, Inc.
Comparative Statement of Net Position

	<u>October 31, 2023</u>	<u>September 30, 2023</u>	<u>Increase (Decrease)</u>
Assets			
Cash and Cash Equivalents	\$ 17,679,313	\$ 16,133,258	\$ 1,546,056
Accounts Receivable, net	2,029,353	2,563,555	(534,202)
Due From Other Governments	2,600,372	1,860,367	740,005
Other Current Assets	270,955	280,535	(9,581)
Net Investment in Capital Assets	3,614,192	3,440,235	173,958
Right Of Use Assets	3,239,214	3,239,214	0
Total Assets	<u>\$ 29,433,399</u>	<u>\$ 27,517,162</u>	<u>\$ 1,916,237</u>
Liabilities			
Accounts Payable	402,184	575,994	(173,810)
Deferred Revenue-	1,340	2,170	(830)
Accrued Interest	43,109	43,109	0
Other Current Liabilities	2,321,325	2,099,343	221,982
Lease Liability	3,475,476	3,475,476	0
Non-Current Liabilities	1,216,485	1,148,766	67,719
Total Liabilities	<u>7,459,918</u>	<u>7,344,857</u>	<u>115,061</u>
Deferred Inflows of Resources			
Deferred Inflows	<u>\$ 33,656</u>	<u>\$ 33,656</u>	<u>\$ 0</u>
Net Position			
Net Investment in Capital Assets	3,614,192	3,440,235	173,958
Unrestricted	18,325,632	16,698,414	1,627,218
Total Net Position	<u>21,939,825</u>	<u>20,138,649</u>	<u>1,801,176</u>
Total Liabilities, Deferred Inflows of Resources and Net Position	<u>\$ 29,433,399</u>	<u>\$ 27,517,162</u>	<u>\$ 1,916,237</u>

Note: Amounts may not foot due to rounding.

Primary Care Clinics Statement of Revenues and Expenses
For The First Month Ended October 31, 2023

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 3,208,530	\$ 2,511,811	\$ 696,719	27.7%	\$ 2,421,964	\$ 786,566	32.5%	Gross Patient Revenue	\$ 3,208,530	\$ 2,511,811	\$ 696,719	27.7%	\$ 2,421,964	\$ 786,566	32.5%
1,059,426	805,259	254,167	31.6%	942,552	116,874	12.4%	Contractual Allowance	1,059,426	805,259	254,167	31.6%	942,552	116,874	12.4%
1,188,343	1,052,501	135,842	12.9%	1,080,772	107,571	10.0%	Charity Care	1,188,343	1,052,501	135,842	12.9%	1,080,772	107,571	10.0%
325,374	224,074	101,300	45.2%	49,730	275,644	554.3%	Bad Debt	325,374	224,074	101,300	45.2%	49,730	275,644	554.3%
2,573,143	2,081,834	491,309	23.6%	2,073,054	500,089	24.1%	Total Contractuals and Bad Debt	2,573,143	2,081,834	491,309	23.6%	2,073,054	500,089	24.1%
566,684	324,247	242,437	74.8%	474,943	91,741	19.3%	Other Patient Revenue	566,684	324,247	242,437	74.8%	474,943	91,741	19.3%
1,202,071	754,225	447,847	59.4%	823,853	378,218	45.9%	Net Patient Service Revenue	1,202,071	754,225	447,847	59.4%	823,853	378,218	45.9%
37.46%	30.03%			34.02%			Collection %	37.46%	30.03%			34.02%		
550,122	766,917	(216,795)	(28.3%)	831,658	(281,536)	(33.9%)	Grants	550,122	766,917	(216,795)	(28.3%)	831,658	(281,536)	(33.9%)
1,943	-	1,943	-	-	1,943	-	Interest Earnings	1,943	-	1,943	-	-	1,943	-
-	-	-	-	12,477	(12,477)	-	Other Financial Assistance	-	-	-	-	12,477	(12,477)	-
1,437	11,204	(9,767)	(87.2%)	624	813	130.3%	Other Revenue	1,437	11,204	(9,767)	(87.2%)	624	813	130.3%
\$ 1,755,573	\$ 1,532,346	\$ 223,227	14.6%	\$ 1,668,611	\$ 86,962	5.2%	Total Revenues	\$ 1,755,573	\$ 1,532,346	\$ 223,227	14.6%	\$ 1,668,611	\$ 86,962	5.2%
							Direct Operating Expenses:							
1,872,309	2,173,165	300,856	13.8%	1,713,850	(158,459)	(9.2%)	Salaries and Wages	1,872,309	2,173,165	300,856	13.8%	1,713,850	(158,459)	(9.2%)
471,718	544,436	72,719	13.4%	427,827	(43,891)	(10.3%)	Benefits	471,718	544,436	72,719	13.4%	427,827	(43,891)	(10.3%)
3,780	117,137	113,357	96.8%	13,764	9,984	72.5%	Purchased Services	3,780	117,137	113,357	96.8%	13,764	9,984	72.5%
31,086	116,203	85,117	73.2%	35,872	4,786	13.3%	Medical Supplies	31,086	116,203	85,117	73.2%	35,872	4,786	13.3%
5,859	45,513	39,654	87.1%	12,383	6,525	52.7%	Other Supplies	5,859	45,513	39,654	87.1%	12,383	6,525	52.7%
37,749	68,151	30,402	44.6%	55,581	17,832	32.1%	Medical Services	37,749	68,151	30,402	44.6%	55,581	17,832	32.1%
74,182	57,362	(16,820)	(29.3%)	37,475	(36,707)	(98.0%)	Drugs	74,182	57,362	(16,820)	(29.3%)	37,475	(36,707)	(98.0%)
34,302	58,246	23,944	41.1%	10,726	(23,576)	(219.8%)	Repairs and Maintenance	34,302	58,246	23,944	41.1%	10,726	(23,576)	(219.8%)
191,910	153,520	(38,390)	(25.0%)	107,496	(84,414)	(78.5%)	Lease and Rental	191,910	153,520	(38,390)	(25.0%)	107,496	(84,414)	(78.5%)
5,558	14,618	9,060	62.0%	8,438	2,881	34.1%	Utilities	5,558	14,618	9,060	62.0%	8,438	2,881	34.1%
86,265	116,459	30,194	25.9%	115,489	29,224	25.3%	Other Expense	86,265	116,459	30,194	25.9%	115,489	29,224	25.3%
-	10,045	10,045	-	-	-	-	Interest Expense	-	10,045	10,045	-	-	-	-
4,947	6,528	1,580	24.2%	6,154	1,207	19.6%	Insurance	4,947	6,528	1,580	24.2%	6,154	1,207	19.6%
2,819,665	3,481,382	661,718	19.0%	2,545,056	(274,608)	(10.8%)	Total Operating Expenses	2,819,665	3,481,382	661,718	19.0%	2,545,056	(274,608)	(10.8%)
\$ (1,064,092)	\$ (1,949,037)	\$ 884,945	(45.4%)	\$ (876,445)	\$ (187,647)	21.4%	Net Performance before Depreciation & Overhead Allocations	\$ (1,064,092)	\$ (1,949,037)	\$ 884,945	(45.4%)	\$ (876,445)	\$ (187,647)	21.4%
30,892	73,871	42,979	58.2%	25,462	(5,431)	(21.3%)	Depreciation	30,892	73,871	42,979	58.2%	25,462	(5,431)	(21.3%)
							Overhead Allocations:							
11,508	16,443	4,935	30.0%	11,692	184	1.6%	Risk Management	11,508	16,443	4,935	30.0%	11,692	184	1.6%
81,046	103,522	22,476	21.7%	63,371	(17,675)	(27.9%)	Revenue Cycle	81,046	103,522	22,476	21.7%	63,371	(17,675)	(27.9%)
3,588	3,182	(406)	(12.8%)	2,627	(961)	(36.6%)	Internal Audit	3,588	3,182	(406)	(12.8%)	2,627	(961)	(36.6%)
26,450	28,133	1,683	6.0%	30,821	4,371	14.2%	Home Office Facilities	26,450	28,133	1,683	6.0%	30,821	4,371	14.2%
2,283	14,511	12,228	84.3%	46,107	43,824	95.0%	Administration	2,283	14,511	12,228	84.3%	46,107	43,824	95.0%
85,592	99,173	13,581	13.7%	76,105	(9,487)	(12.5%)	Human Resources	85,592	99,173	13,581	13.7%	76,105	(9,487)	(12.5%)
22,394	38,033	15,639	41.1%	3,344	(19,050)	(569.7%)	Legal	22,394	38,033	15,639	41.1%	3,344	(19,050)	(569.7%)
3,633	4,523	890	19.7%	4,206	573	13.6%	Records	3,633	4,523	890	19.7%	4,206	573	13.6%
13,667	8,915	(4,752)	(53.3%)	6,347	(7,320)	(115.3%)	Compliance	13,667	8,915	(4,752)	(53.3%)	6,347	(7,320)	(115.3%)
42,187	58,201	16,014	27.5%	35,658	(6,529)	(18.3%)	IT Operations	42,187	58,201	16,014	27.5%	35,658	(6,529)	(18.3%)
11,440	19,491	8,051	41.3%	9,905	(1,535)	(15.5%)	IT Security	11,440	19,491	8,051	41.3%	9,905	(1,535)	(15.5%)
34,202	39,351	5,149	13.1%	24,232	(9,970)	(41.1%)	Finance	34,202	39,351	5,149	13.1%	24,232	(9,970)	(41.1%)
18,203	20,025	1,822	9.1%	10,421	(7,782)	(74.7%)	Corporate Communications	18,203	20,025	1,822	9.1%	10,421	(7,782)	(74.7%)
24,790	19,300	(5,490)	(28.4%)	10,834	(13,956)	(128.8%)	Information Technology	24,790	19,300	(5,490)	(28.4%)	10,834	(13,956)	(128.8%)

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
111,456	242,579	131,123	54.1%	81,636	(29,820)	(36.5%)	IT Applications	111,456	242,579	131,123	54.1%	81,636	(29,820)	(36.5%)
41,803	45,852	4,049	8.8%	25,999	(15,804)	(60.8%)	IT Service Center	41,803	45,852	4,049	8.8%	25,999	(15,804)	(60.8%)
24,133	20,701	(3,432)	(16.6%)	6,591	(17,542)	(266.2%)	Performance Excellence	24,133	20,701	(3,432)	(16.6%)	6,591	(17,542)	(266.2%)
13,253	13,780	527	3.8%	8,434	(4,819)	(57.1%)	Corporate Quality	13,253	13,780	527	3.8%	8,434	(4,819)	(57.1%)
40,055	55,383	15,328	27.7%	39,124	(931)	(2.4%)	Security Services	40,055	55,383	15,328	27.7%	39,124	(931)	(2.4%)
20,666	21,357	691	3.2%	6,253	(14,413)	(230.5%)	Supply Chain	20,666	21,357	691	3.2%	6,253	(14,413)	(230.5%)
13,556	12,286	(1,270)	(10.3%)	8,351	(5,205)	(62.3%)	HIM Department	13,556	12,286	(1,270)	(10.3%)	8,351	(5,205)	(62.3%)
25,327	20,831	(4,496)	(21.6%)	21,345	(3,982)	(18.7%)	Coding	25,327	20,831	(4,496)	(21.6%)	21,345	(3,982)	(18.7%)
1,908	2,394	486	20.3%	2,482	574	23.1%	Reimbursement	1,908	2,394	486	20.3%	2,482	574	23.1%
2,245	29,523	27,278	92.4%	-	(2,245)	-	Clinical Labor Pool	2,245	29,523	27,278	92.4%	-	(2,245)	-
20,342	22,557	2,215	9.8%	-	(20,342)	-	District Nursing Admin	20,342	22,557	2,215	9.8%	-	(20,342)	-
11,946	10,674	(1,273)	(11.9%)	-	(11,946)	-	District Operations Admin	11,946	10,674	(1,273)	(11.9%)	-	(11,946)	-
3,893	4,779	886	18.5%	-	(3,893)	-	Mail Room	3,893	4,779	886	18.5%	-	(3,893)	-
711,568	975,498	263,931	27.1%	535,885	(175,683)	(32.8%)	Total Overhead Allocations-	711,568	975,498	263,931	27.1%	535,885	(175,683)	(32.8%)
3,562,125	4,530,752	968,627	21.4%	3,106,403	(455,722)	(14.7%)	Total Expenses	3,562,125	4,530,752	968,627	21.4%	3,106,403	(455,722)	(14.7%)
\$ (1,806,552)	\$ (2,998,406)	\$ 1,191,854	(39.7%)	\$ (1,437,791)	\$ (368,760)	25.6%	Net Margin	\$ (1,806,552)	\$ (2,998,406)	\$ 1,191,854	(39.7%)	\$ (1,437,791)	\$ (368,760)	25.6%
-	-	-	-	36,782	36,782	-	Capital	-	-	-	-	36,782	36,782	-
204,850	252,458	(47,608)	(18.9%)	-	204,850	-	Capital Contributions.	204,850	252,458	(47,608)	(18.9%)	-	204,850	-
-	\$ 9,250,000	\$ (9,250,000)	-	-	-	-	Transfer In/(Out)	-	\$ 9,250,000	\$ (9,250,000)	-	-	-	-

venues and Expenses by Month

	Oct-23	Year to Date
Gross Patient Revenue	\$ 3,208,530	\$ 3,208,530
Contractual Allowance	1,059,426	1,059,426
Charity Care	1,188,343	1,188,343
Bad Debt	325,374	325,374
Total Contractuals and Bad Debt	2,573,143	2,573,143
Other Patient Revenue	566,684	566,684
Net Patient Service Revenue	1,202,071	1,202,071
Collection %	37.46%	37.46%
 Non-Operating Revenues		
Grants	550,122	550,122
Interest Earnings	1,943	1,943
Other Revenue	1,437	1,437
Total Other Revenues	\$ 553,502	\$ 553,502
Total Non-Operating Revenues	\$ 1,755,573	\$ 1,755,573
 Direct Operating Expenses:		
Salaries and Wages	1,872,309	1,872,309
Benefits	471,718	471,718
Purchased Services	3,780	3,780
Medical Supplies	31,086	31,086
Other Supplies	5,859	5,859
Medical Services	37,749	37,749
Drugs	74,182	74,182
Repairs and Maintenance	34,302	34,302

venues and Expenses by Month

	Oct-23	Year to Date
Lease and Rental	191,910	191,910
Utilities	5,558	5,558
Other Expense	86,265	86,265
Insurance	4,947	4,947
Total Operating Expenses	2,819,665	2,819,665
Net Performance before Depreciation & Overhead Allocations	\$ (1,064,092)	\$ (1,064,092)
Depreciation	30,892	30,892
<i>Overhead Allocations:</i>		
Risk Management	11,508	11,508
Revenue Cycle	81,046	81,046
Internal Audit	3,588	3,588
Home Office Facilities	26,450	26,450
Administration	2,283	2,283
Human Resources	85,592	85,592
Legal	22,394	22,394
Records	3,633	3,633
Compliance	13,667	13,667
IT Operations	42,187	42,187
IT Security	11,440	11,440
Finance	34,202	34,202
Corporate Communications	18,203	18,203
Information Technology	24,790	24,790
IT Applications	111,456	111,456

venues and Expenses by Month

	Oct-23	Year to Date
IT Service Center	41,803	41,803
Performance Excellence	24,133	24,133
Corporate Quality	13,253	13,253
Security Services	40,055	40,055
Supply Chain	20,666	20,666
HIM Department	13,556	13,556
Coding	25,327	25,327
Reimbursement	1,908	1,908
Clinical Labor Pool	2,245	2,245
District Nursing Admin	20,342	20,342
District Operations Admin	11,946	11,946
Mail Room	3,893	3,893
Total Overhead Allocations	711,568	711,568
Total Expenses	3,562,125	3,562,125
Net Margin	\$ (1,806,552)	\$ (1,806,552)
Capital Contributions.	204,850	204,850

Primary Care Medical Statement of Revenues and Expenses
For The First Month Ended October 31, 2023

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 2,143,429	\$ 1,590,063	\$ 553,366	34.8%	\$ 1,499,415	\$ 644,013	43.0%	Gross Patient Revenue	\$ 2,143,429	\$ 1,590,063	\$ 553,366	34.8%	\$ 1,499,415	\$ 644,013	43.0%
812,345	454,997	357,348	78.5%	587,445	224,900	38.3%	Contractual Allowance	812,345	454,997	357,348	78.5%	587,445	224,900	38.3%
772,026	611,044	160,982	26.3%	606,654	165,373	27.3%	Charity Care	772,026	611,044	160,982	26.3%	606,654	165,373	27.3%
206,173	150,678	55,495	36.8%	28,298	177,874	628.6%	Bad Debt	206,173	150,678	55,495	36.8%	28,298	177,874	628.6%
1,790,544	1,216,719	573,825	47.2%	1,222,397	568,147	46.5%	Total Contractuals and Bad Debt	1,790,544	1,216,719	573,825	47.2%	1,222,397	568,147	46.5%
361,444	237,758	123,686	52.0%	334,637	26,807	8.0%	Other Patient Revenue	361,444	237,758	123,686	52.0%	334,637	26,807	8.0%
714,329	611,102	103,227	16.9%	611,655	102,673	16.8%	Net Patient Service Revenue	714,329	611,102	103,227	16.9%	611,655	102,673	16.8%
33.33%	38.43%			40.79%			Collection %	33.33%	38.43%			40.79%		
449,408	628,521	(179,113)	(28.5%)	703,896	(254,488)	(36.2%)	Grants	449,408	628,521	(179,113)	(28.5%)	703,896	(254,488)	(36.2%)
1,943	-	1,943	-	-	1,943	-	Interest Earnings	1,943	-	1,943	-	-	1,943	-
-	-	-	-	12,477	(12,477)	-	Other Financial Assistance	-	-	-	-	12,477	(12,477)	-
962	11,025	(10,063)	(91.3%)	633	329	52.0%	Other Revenue	962	11,025	(10,063)	(91.3%)	633	329	52.0%
\$ 1,166,641	\$ 1,250,648	\$ (84,007)	(6.7%)	\$ 1,328,661	\$ (162,020)	(12.2%)	Total Revenues	\$ 1,166,641	\$ 1,250,648	\$ (84,007)	(6.7%)	\$ 1,328,661	\$ (162,020)	(12.2%)
							Direct Operating Expenses:							
1,524,763	1,787,437	262,674	14.7%	1,424,955	(99,808)	(7.0%)	Salaries and Wages	1,524,763	1,787,437	262,674	14.7%	1,424,955	(99,808)	(7.0%)
381,534	443,735	62,202	14.0%	356,864	(24,669)	(6.9%)	Benefits	381,534	443,735	62,202	14.0%	356,864	(24,669)	(6.9%)
3,488	111,219	107,731	96.9%	12,668	9,180	72.5%	Purchased Services	3,488	111,219	107,731	96.9%	12,668	9,180	72.5%
16,492	90,537	74,045	81.8%	20,163	3,671	18.2%	Medical Supplies	16,492	90,537	74,045	81.8%	20,163	3,671	18.2%
5,402	37,540	32,138	85.6%	12,022	6,620	55.1%	Other Supplies	5,402	37,540	32,138	85.6%	12,022	6,620	55.1%
37,749	68,151	30,402	44.6%	55,581	17,832	32.1%	Medical Services	37,749	68,151	30,402	44.6%	55,581	17,832	32.1%
74,182	57,154	(17,028)	(29.8%)	37,475	(36,707)	(98.0%)	Drugs	74,182	57,154	(17,028)	(29.8%)	37,475	(36,707)	(98.0%)
31,116	55,755	24,639	44.2%	8,701	(22,414)	(257.6%)	Repairs and Maintenance	31,116	55,755	24,639	44.2%	8,701	(22,414)	(257.6%)
155,935	120,629	(35,306)	(29.3%)	84,934	(71,002)	(83.6%)	Lease and Rental	155,935	120,629	(35,306)	(29.3%)	84,934	(71,002)	(83.6%)
4,735	11,959	7,224	60.4%	6,657	1,921	28.9%	Utilities	4,735	11,959	7,224	60.4%	6,657	1,921	28.9%
79,228	104,091	24,863	23.9%	109,595	30,368	27.7%	Other Expense	79,228	104,091	24,863	23.9%	109,595	30,368	27.7%
-	10,045	10,045	-	-	-	-	Interest Expense	-	10,045	10,045	-	-	-	-
4,902	6,479	1,577	24.3%	6,077	1,175	19.3%	Insurance	4,902	6,479	1,577	24.3%	6,077	1,175	19.3%
2,319,526	2,904,732	585,206	20.1%	2,135,693	(183,833)	(8.6%)	Total Operating Expenses	2,319,526	2,904,732	585,206	20.1%	2,135,693	(183,833)	(8.6%)
\$ (1,152,884)	\$ (1,654,084)	\$ 501,199	(30.3%)	\$ (807,031)	\$ (345,853)	42.9%	Net Performance before Depreciation & Overhead Allocations	\$ (1,152,884)	\$ (1,654,084)	\$ 501,199	(30.3%)	\$ (807,031)	\$ (345,853)	42.9%
24,779	69,165	44,386	64.2%	18,017	(6,761)	(37.5%)	Depreciation	24,779	69,165	44,386	64.2%	18,017	(6,761)	(37.5%)
							Overhead Allocations:							
9,603	13,720	4,117	30.0%	9,870	267	2.7%	Risk Management	9,603	13,720	4,117	30.0%	9,870	267	2.7%
60,237	76,942	16,705	21.7%	52,392	(7,845)	(15.0%)	Revenue Cycle	60,237	76,942	16,705	21.7%	52,392	(7,845)	(15.0%)
2,993	2,655	(338)	(12.7%)	2,218	(775)	(34.9%)	Internal Audit	2,993	2,655	(338)	(12.7%)	2,218	(775)	(34.9%)
20,662	21,977	1,315	6.0%	26,953	6,291	23.3%	Home Office Facilities	20,662	21,977	1,315	6.0%	26,953	6,291	23.3%
1,905	12,108	10,203	84.3%	38,923	37,018	95.1%	Administration	1,905	12,108	10,203	84.3%	38,923	37,018	95.1%
70,396	81,566	11,170	13.7%	64,997	(5,399)	(8.3%)	Human Resources	70,396	81,566	11,170	13.7%	64,997	(5,399)	(8.3%)
18,686	31,734	13,048	41.1%	2,823	(15,863)	(561.9%)	Legal	18,686	31,734	13,048	41.1%	2,823	(15,863)	(561.9%)
3,032	3,774	742	19.7%	3,551	519	14.6%	Records	3,032	3,774	742	19.7%	3,551	519	14.6%
11,404	7,439	(3,965)	(53.3%)	5,358	(6,046)	(112.8%)	Compliance	11,404	7,439	(3,965)	(53.3%)	5,358	(6,046)	(112.8%)
35,201	48,562	13,361	27.5%	30,102	(5,099)	(16.9%)	IT Operations	35,201	48,562	13,361	27.5%	30,102	(5,099)	(16.9%)
9,546	16,263	6,717	41.3%	8,362	(1,184)	(14.2%)	IT Security	9,546	16,263	6,717	41.3%	8,362	(1,184)	(14.2%)
28,538	32,834	4,296	13.1%	20,457	(8,081)	(39.5%)	Finance	28,538	32,834	4,296	13.1%	20,457	(8,081)	(39.5%)
15,188	16,709	1,521	9.1%	8,797	(6,391)	(72.6%)	Corporate Communications	15,188	16,709	1,521	9.1%	8,797	(6,391)	(72.6%)
20,685	16,104	(4,581)	(28.4%)	9,146	(11,539)	(126.2%)	Information Technology	20,685	16,104	(4,581)	(28.4%)	9,146	(11,539)	(126.2%)

Primary Care Medical Statement of Revenues and Expenses
 For The First Month Ended October 31, 2023

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
92,998	202,405	109,407	54.1%	68,917	(24,081)	(34.9%)	IT Applications	92,998	202,405	109,407	54.1%	68,917	(24,081)	(34.9%)
34,880	38,258	3,378	8.8%	21,948	(12,932)	(58.9%)	IT Service Center	34,880	38,258	3,378	8.8%	21,948	(12,932)	(58.9%)
20,137	17,273	(2,864)	(16.6%)	5,564	(14,573)	(261.9%)	Performance Excellence	20,137	17,273	(2,864)	(16.6%)	5,564	(14,573)	(261.9%)
11,058	11,498	440	3.8%	7,120	(3,938)	(55.3%)	Corporate Quality	11,058	11,498	440	3.8%	7,120	(3,938)	(55.3%)
26,703	36,922	10,219	27.7%	32,293	5,590	17.3%	Security Services	26,703	36,922	10,219	27.7%	32,293	5,590	17.3%
17,244	17,820	576	3.2%	5,279	(11,965)	(226.7%)	Supply Chain	17,244	17,820	576	3.2%	5,279	(11,965)	(226.7%)
11,311	10,251	(1,060)	(10.3%)	7,050	(4,261)	(60.4%)	HIM Department	11,311	10,251	(1,060)	(10.3%)	7,050	(4,261)	(60.4%)
21,133	17,381	(3,752)	(21.6%)	18,019	(3,114)	(17.3%)	Coding	21,133	17,381	(3,752)	(21.6%)	18,019	(3,114)	(17.3%)
1,592	1,998	406	20.3%	2,095	503	24.0%	Reimbursement	1,592	1,998	406	20.3%	2,095	503	24.0%
1,873	24,634	22,761	92.4%	-	(1,873)	-	Clinical Labor Pool	1,873	24,634	22,761	92.4%	-	(1,873)	-
16,973	18,821	1,848	9.8%	-	(16,973)	-	District Nursing Admin	16,973	18,821	1,848	9.8%	-	(16,973)	-
9,968	8,906	(1,062)	(11.9%)	-	(9,968)	-	District Operations Admin	9,968	8,906	(1,062)	(11.9%)	-	(9,968)	-
3,248	3,987	739	18.5%	-	(3,248)	-	Mail Room	3,248	3,987	739	18.5%	-	(3,248)	-
577,191	792,541	215,350	27.2%	452,234	(124,957)	(27.6%)	Total Overhead Allocations-	577,191	792,541	215,350	27.2%	452,234	(124,957)	(27.6%)
2,921,496	3,766,438	844,942	22.4%	2,605,944	(315,552)	(12.1%)	Total Expenses	2,921,496	3,766,438	844,942	22.4%	2,605,944	(315,552)	(12.1%)
\$ (1,754,854)	\$ (2,515,790)	\$ 760,936	(30.2%)	\$ (1,277,283)	\$ (477,572)	37.4%	Net Margin	\$ (1,754,854)	\$ (2,515,790)	\$ 760,936	(30.2%)	\$ (1,277,283)	\$ (477,572)	37.4%
-	-	-	-	23,881	23,881	-	Capital	-	-	-	-	23,881	23,881	-
153,638	198,183	(44,546)	(22.5%)	-	153,638	-	Capital Contributions.	153,638	198,183	(44,546)	(22.5%)	-	153,638	-
-	\$ 7,750,000	\$ (7,750,000)	-	-	-	-	Transfer In/(Out)	-	\$ 7,750,000	\$ (7,750,000)	-	-	-	-

	Dental Clinic Administration	Belle Glade Dental Clinic	Delray Dental Clinic	Lantana Dental Clinic	West Palm Beach Dental Clinic	Port Dental Clinic	Total
Gross Patient Revenue	-	\$ 170,728	\$ 163,816	\$ 275,840	\$ 332,475	\$ 4,987	\$ 947,846
Contractual Allowance	-	44,275	11,231	43,833	65,508	-	184,847
Charity Care	-	62,907	73,269	109,743	139,703	5,099	390,721
Bad Debt	-	5,766	25,175	24,794	28,546	(426)	83,856
Total Contractual Allowances and Bad Debt	-	112,948	109,675	178,370	253,758	4,673	659,424
Other Patient Revenue	-	35,876	39,171	54,884	72,960	-	202,891
Net Patient Revenue	-	93,656	93,312	152,354	151,677	314	491,314
Collection %	-	54.86%	56.96%	55.23%	45.62%	6.29%	51.83%
Grants	10,659	11,443	14,697	26,067	37,848	-	100,714
Other Revenue	475	-	-	-	-	-	475
Total Other Revenues	11,134	11,443	14,697	26,067	37,848	-	101,189
Total Revenues	\$ 11,134	\$ 105,099	\$ 108,009	\$ 178,421	\$ 189,525	\$ 314	\$ 592,503
<i>Direct Operational Expenses:</i>							
Salaries and Wages	51,085	37,746	29,895	86,656	142,164	-	347,546
Benefits	15,052	11,694	8,378	22,744	32,316	-	90,184
Purchased Services	-	292	-	-	-	-	292
Medical Supplies	-	1,711	101	5,676	7,107	-	14,594
Other Supplies	-	11	359	7	79	-	456
Repairs and Maintenance	-	25	484	2,463	215	-	3,187
Lease and Rental	-	2,922	16,663	5,553	10,836	-	35,974
Utilities	-	822	-	-	-	-	822
Other Expense	929	837	1,192	2,428	1,652	-	7,037
Insurance	-	45	-	-	-	-	45
Total Operating Expenses	67,066	56,107	57,071	125,527	194,369	-	500,139
Net Performance before Depreciation & Overhead Allocations	(55,932)	48,992	50,938	52,895	(4,844)	314	92,364
Depreciation	-	1,214	1,856	533	2,510	-	6,113
<i>Overhead Allocations:</i>							
Risk Management	1,906	-	-	-	-	-	1,906
Revenue Cycle	20,809	-	-	-	-	-	20,809
Internal Audit	594	-	-	-	-	-	594
Home Office Facilities Administration	5,788	-	-	-	-	-	5,788
Human Resources	378	-	-	-	-	-	378
Legal	15,196	-	-	-	-	-	15,196
Records	3,709	-	-	-	-	-	3,709
Compliance	602	-	-	-	-	-	602
IT Operations	2,263	-	-	-	-	-	2,263
IT Security	6,987	-	-	-	-	-	6,987
Finance	1,895	-	-	-	-	-	1,895
Corporate Communications	5,664	-	-	-	-	-	5,664
Information Technology	3,015	-	-	-	-	-	3,015
IT Applications	4,106	-	-	-	-	-	4,106
IT Service Center	18,458	-	-	-	-	-	18,458
Performance Excellence	6,923	-	-	-	-	-	6,923
Corporate Quality	3,997	-	-	-	-	-	3,997
Security Services	2,195	-	-	-	-	-	2,195
Supply Chain	13,352	-	-	-	-	-	13,352
HIM Department	3,423	-	-	-	-	-	3,423
Coding	2,245	-	-	-	-	-	2,245
Reimbursement	4,194	-	-	-	-	-	4,194
Clinical Labor Pool	316	-	-	-	-	-	316
District Nursing Admin	372	-	-	-	-	-	372
District Operations Admin	3,369	-	-	-	-	-	3,369
Mail Room	1,978	-	-	-	-	-	1,978
	645	-	-	-	-	-	645
Total Overhead Allocations	134,376	-	-	-	-	-	134,376
Total Expenses	201,442	57,320	58,927	126,060	196,879	-	640,629
Net Margin	\$ (190,308)	\$ 47,779	\$ 49,082	\$ 52,361	\$ (7,354)	\$ 314	\$ (48,126)
Capital	-	-	-	-	-	-	-
Transfer In/(Out)	-	76	-	-	-	-	-

Primary Care Dental Statement of Revenues and Expenses
 For The First Month Ended October 31, 2023

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 947,846	\$ 825,815	\$ 122,031	14.8%	\$ 823,508	\$ 124,339	15.1%	Gross Patient Revenue	\$ 947,846	\$ 825,815	\$ 122,031	14.8%	\$ 823,508	\$ 124,339	15.1%
184,847	304,151	(119,304)	(39.2%)	306,499	(121,652)	(39.7%)	Contractual Allowance	184,847	304,151	(119,304)	(39.2%)	306,499	(121,652)	(39.7%)
390,721	422,827	(32,106)	(7.6%)	456,241	(65,519)	(14.4%)	Charity Care	390,721	422,827	(32,106)	(7.6%)	456,241	(65,519)	(14.4%)
83,856	49,180	34,676	70.5%	1,233	82,623	6,701.0%	Bad Debt	83,856	49,180	34,676	70.5%	1,233	82,623	6,701.0%
659,424	776,158	(116,734)	(15.0%)	763,973	(104,549)	(13.7%)	Total Contractuals and Bad Debt	659,424	776,158	(116,734)	(15.0%)	763,973	(104,549)	(13.7%)
202,891	86,072	116,819	135.7%	137,064	65,827	48.0%	Other Patient Revenue	202,891	86,072	116,819	135.7%	137,064	65,827	48.0%
491,314	135,729	355,584	262.0%	196,599	294,715	149.9%	Net Patient Service Revenue	491,314	135,729	355,584	262.0%	196,599	294,715	149.9%
51.83%	16.44%			23.87%			Collection %	51.83%	16.44%			23.87%		
100,714	138,396	(37,682)	(27.2%)	127,762	(27,048)	(21.2%)	Grants	100,714	138,396	(37,682)	(27.2%)	127,762	(27,048)	(21.2%)
475	179	296	165.4%	(9)	484	(5,377.8%)	Other Revenue	475	179	296	165.4%	(9)	484	(5,377.8%)
\$ 592,503	\$ 274,304	\$ 318,198	116.0%	\$ 324,351	\$ 268,151	82.7%	Total Revenues	\$ 592,503	\$ 274,304	\$ 318,198	116.0%	\$ 324,351	\$ 268,151	82.7%
Direct Operating Expenses:							Direct Operating Expenses:							
347,546	385,728	38,182	9.9%	288,896	(58,651)	(20.3%)	Salaries and Wages	347,546	385,728	38,182	9.9%	288,896	(58,651)	(20.3%)
90,184	100,701	10,517	10.4%	70,962	(19,222)	(27.1%)	Benefits	90,184	100,701	10,517	10.4%	70,962	(19,222)	(27.1%)
292	5,918	5,626	95.1%	1,096	804	73.4%	Purchased Services	292	5,918	5,626	95.1%	1,096	804	73.4%
14,594	25,666	11,072	43.1%	15,709	1,115	7.1%	Medical Supplies	14,594	25,666	11,072	43.1%	15,709	1,115	7.1%
456	7,973	7,517	94.3%	361	(95)	(26.3%)	Other Supplies	456	7,973	7,517	94.3%	361	(95)	(26.3%)
-	208	208	-	-	-	-	Drugs	-	208	208	-	-	-	-
3,187	2,491	(696)	(27.9%)	2,025	(1,162)	(57.4%)	Repairs and Maintenance	3,187	2,491	(696)	(27.9%)	2,025	(1,162)	(57.4%)
35,974	32,890	(3,084)	(9.4%)	22,562	(13,412)	(59.4%)	Lease and Rental	35,974	32,890	(3,084)	(9.4%)	22,562	(13,412)	(59.4%)
822	2,659	1,837	69.1%	1,782	959	53.8%	Utilities	822	2,659	1,837	69.1%	1,782	959	53.8%
7,037	12,368	5,331	43.1%	5,894	(1,144)	(19.4%)	Other Expense	7,037	12,368	5,331	43.1%	5,894	(1,144)	(19.4%)
45	49	3	6.1%	77	32	41.6%	Insurance	45	49	3	6.1%	77	32	41.6%
500,139	576,650	76,511	13.3%	409,364	(90,775)	(22.2%)	Total Operating Expenses	500,139	576,650	76,511	13.3%	409,364	(90,775)	(22.2%)
\$ 92,364	\$ (302,346)	\$ 394,710	(130.5%)	\$ (85,012)	\$ 177,376	(208.6%)	Net Performance before Depreciation & Overhead Allocations	\$ 92,364	\$ (302,346)	\$ 394,710	(130.5%)	\$ (85,012)	\$ 177,376	(208.6%)
6,113	4,706	(1,407)	(29.9%)	7,444	1,331	17.9%	Depreciation	6,113	4,706	(1,407)	(29.9%)	7,444	1,331	17.9%
Overhead Allocations:							Overhead Allocations:							
1,906	2,723	817	30.0%	1,822	(84)	(4.6%)	Risk Management	1,906	2,723	817	30.0%	1,822	(84)	(4.6%)
20,809	26,580	5,771	21.7%	10,979	(9,830)	(89.5%)	Revenue Cycle	20,809	26,580	5,771	21.7%	10,979	(9,830)	(89.5%)
594	527	(67)	(12.7%)	409	(185)	(45.2%)	Internal Audit	594	527	(67)	(12.7%)	409	(185)	(45.2%)
5,788	6,156	368	6.0%	3,868	(1,920)	(49.6%)	Home Office Facilities	5,788	6,156	368	6.0%	3,868	(1,920)	(49.6%)
378	2,403	2,025	84.3%	7,184	6,806	94.7%	Administration	378	2,403	2,025	84.3%	7,184	6,806	94.7%
15,196	17,607	2,411	13.7%	11,108	(4,088)	(36.8%)	Human Resources	15,196	17,607	2,411	13.7%	11,108	(4,088)	(36.8%)
3,709	6,299	2,590	41.1%	521	(3,188)	(611.9%)	Legal	3,709	6,299	2,590	41.1%	521	(3,188)	(611.9%)
602	749	147	19.6%	655	53	8.1%	Records	602	749	147	19.6%	655	53	8.1%
2,263	1,476	(787)	(53.3%)	989	(1,274)	(128.8%)	Compliance	2,263	1,476	(787)	(53.3%)	989	(1,274)	(128.8%)
6,987	9,639	2,652	27.5%	5,556	(1,431)	(25.8%)	IT Operations	6,987	9,639	2,652	27.5%	5,556	(1,431)	(25.8%)
1,895	3,228	1,333	41.3%	1,543	(352)	(22.8%)	IT Security	1,895	3,228	1,333	41.3%	1,543	(352)	(22.8%)
5,664	6,517	853	13.1%	3,775	(1,889)	(50.0%)	Finance	5,664	6,517	853	13.1%	3,775	(1,889)	(50.0%)
3,015	3,316	301	9.1%	1,624	(1,391)	(85.7%)	Corporate Communications	3,015	3,316	301	9.1%	1,624	(1,391)	(85.7%)
4,106	3,196	(910)	(28.5%)	1,688	(2,418)	(143.2%)	Information Technology	4,106	3,196	(910)	(28.5%)	1,688	(2,418)	(143.2%)
18,458	40,174	21,716	54.1%	12,719	(5,739)	(45.1%)	IT Applications	18,458	40,174	21,716	54.1%	12,719	(5,739)	(45.1%)
6,923	7,594	671	8.8%	4,051	(2,872)	(70.9%)	IT Service Center	6,923	7,594	671	8.8%	4,051	(2,872)	(70.9%)
3,997	3,428	(569)	(16.6%)	1,027	(2,970)	(289.2%)	Performance Excellence	3,997	3,428	(569)	(16.6%)	1,027	(2,970)	(289.2%)
2,195	2,282	87	3.8%	1,314	(881)	(67.0%)	Corporate Quality	2,195	2,282	87	3.8%	1,314	(881)	(67.0%)

Primary Care Dental Statement of Revenues and Expenses
 For The First Month Ended October 31, 2023

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
13,352	18,461	5,109	27.7%	6,831	(6,521)	(95.5%)	13,352	18,461	5,109	27.7%	6,831	(6,521)	(95.5%)
3,423	3,537	114	3.2%	974	(2,449)	(251.4%)	3,423	3,537	114	3.2%	974	(2,449)	(251.4%)
2,245	2,035	(210)	(10.3%)	1,301	(944)	(72.6%)	2,245	2,035	(210)	(10.3%)	1,301	(944)	(72.6%)
4,194	3,450	(744)	(21.6%)	3,326	(868)	(26.1%)	4,194	3,450	(744)	(21.6%)	3,326	(868)	(26.1%)
316	396	80	20.2%	387	71	18.3%	316	396	80	20.2%	387	71	18.3%
372	4,889	4,518	92.4%	-	(372)	-	372	4,889	4,518	92.4%	-	(372)	-
3,369	3,736	367	9.8%	-	(3,369)	-	3,369	3,736	367	9.8%	-	(3,369)	-
1,978	1,768	(211)	(11.9%)	-	(1,978)	-	1,978	1,768	(211)	(11.9%)	-	(1,978)	-
645	791	147	18.6%	-	(645)	-	645	791	147	18.6%	-	(645)	-
134,376	182,957	48,581	26.6%	83,651	(50,725)	(60.6%)	134,376	182,957	48,581	26.6%	83,651	(50,725)	(60.6%)
640,629	764,314	123,685	16.2%	500,459	(140,170)	(28.0%)	640,629	764,314	123,685	16.2%	500,459	(140,170)	(28.0%)
\$ (48,126)	\$ (490,009)	\$ 441,883	(90.2%)	\$ (176,108)	\$ 127,981	(72.7%)	\$ (48,126)	\$ (490,009)	\$ 441,883	(90.2%)	\$ (176,108)	\$ 127,981	(72.7%)
-	-	-	-	12,901	12,901	-	-	-	-	-	12,901	12,901	-
51,213	54,275	(3,063)	(5.6%)	-	51,213	-	51,213	54,275	(3,063)	(5.6%)	-	51,213	-
-	\$ 1,500,000	\$ (1,500,000)	-	-	-	-	-	\$ 1,500,000	\$ (1,500,000)	-	-	-	-

d Expenses by Location (YTD)

	Belle Glade Behavioral Health	St Ann Place Behavioral Health	Delray Behavioral Health	Lantana Behavioral Health	Mangonia Park Behavioral Health	West Palm Beach Behavioral Health	Lewis Center Behavioral Health	Total
Gross Patient Revenue	-	-	\$11,589	\$774	\$103,065	\$1,827	-	\$117,255
Contractual Allowance	-	-	5,334	337	56,562	-	-	62,233
Charity Care	-	-	2,802	177	21,739	767	111	25,595
Bad Debt	1	(9)	1,679	113	32,649	451	462	35,346
Total Contractual Allowances and Bad Debt	1	(9)	9,815	626	110,950	1,218	573	123,174
Other Patient Revenue	-	-	-	-	2,349	-	-	2,349
Net Patient Revenue	(1)	9	1,774	148	(5,537)	609	(573)	(3,571)
Collection %	-	-	15.31%	19.07%	(5.37%)	33.32%	-	(3.05%)
Ad Valorem Taxes	-	-	-	-	-	-	-	-
Intergovernmental Revenue	-	-	-	-	-	-	-	-
Grants	-	-	-	-	-	-	-	-
Interest Earnings	-	-	-	-	-	-	-	-
Unrealized Gain/(Loss) On Investments	-	-	-	-	-	-	-	-
Other Financial Assistance	-	-	-	-	-	-	-	-
Other Revenue	-	-	-	-	-	-	-	-
Total Other Revenues	-	-	-	-	-	-	-	-
Total Revenues	\$ (1)	\$ 9	\$ 1,774	\$ 148	\$ (5,537)	\$ 609	\$ (573)	\$ (3,571)
<i>Direct Operational Expenses:</i>								
Total Operating Expenses	-	-	-	-	-	-	-	-
Net Performance before Depreciation & Overhead Allocations	(1)	9	1,774	148	(5,537)	609	(573)	(3,571)
Depreciation	-	-	-	-	-	-	-	-
<i>Overhead Allocations:</i>								
Total Overhead Allocations	-	-	-	-	-	-	-	-
Total Expenses	-	-	-	-	-	-	-	-
Net Margin	\$ (1)	\$ 9	\$ 1,774	\$ 148	\$ (5,537)	\$ 609	\$ (573)	\$ (3,571)
Capital	-	-	-	-	-	-	-	-
General Fund Support/Transfer In	-	-	-	-	-	-	-	-

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 117,255	\$ 95,933	\$ 21,321	22.2%	\$ 99,041	\$ 18,214	18.4%	Gross Patient Revenue	\$ 117,255	\$ 95,933	\$ 21,321	22.2%	\$ 99,041	\$ 18,214	18.4%
62,233	46,111	16,122	35.0%	48,607	13,626	28.0%	Contractual Allowance	62,233	46,111	16,122	35.0%	48,607	13,626	28.0%
25,595	18,630	6,966	37.4%	17,878	7,717	43.2%	Charity Care	25,595	18,630	6,966	37.4%	17,878	7,717	43.2%
35,346	24,216	11,130	46.0%	20,199	15,147	75.0%	Bad Debt	35,346	24,216	11,130	46.0%	20,199	15,147	75.0%
123,174	88,957	34,218	38.5%	86,684	36,490	42.1%	Total Contractuals and Bad Debt	123,174	88,957	34,218	38.5%	86,684	36,490	42.1%
2,349	417	1,932	463.3%	3,242	(893)	(27.5%)	Other Patient Revenue	2,349	417	1,932	463.3%	3,242	(893)	(27.5%)
(3,571)	7,393	(10,964)	(148.3%)	15,599	(19,170)	(122.9%)	Net Patient Service Revenue	(3,571)	7,393	(10,964)	(148.3%)	15,599	(19,170)	(122.9%)
(3.05%)	7.71%			15.75%			Collection %	(3.05%)	7.71%			15.75%		
\$ (3,571)	\$ 7,393	\$ (10,964)	(148.3%)	\$ 15,599	\$ (19,170)	(122.9%)	Total Revenues	\$ (3,571)	\$ 7,393	\$ (10,964)	(148.3%)	\$ 15,599	\$ (19,170)	(122.9%)
-	-	-	-	-	-	-	Direct Operating Expenses:	-	-	-	-	-	-	-
-	-	-	-	-	-	-	Total Operating Expenses	-	-	-	-	-	-	-
\$ (3,571)	\$ 7,393	\$ (10,964)	(148.3%)	\$ 15,599	\$ (19,170)	(122.9%)	Net Performance before Depreciation & Overhead Allocations	\$ (3,571)	\$ 7,393	\$ (10,964)	(148.3%)	\$ 15,599	\$ (19,170)	(122.9%)
-	-	-	-	-	-	-	Total Expenses	-	-	-	-	-	-	-
\$ (3,571)	\$ 7,393	\$ (10,964)	(148.3%)	\$ 15,599	\$ (19,170)	(122.9%)	Net Margin	\$ (3,571)	\$ 7,393	\$ (10,964)	(148.3%)	\$ 15,599	\$ (19,170)	(122.9%)



District Clinic Holdings, Inc.

Clinic Visits - Adults and Pediatrics	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Current Year	Current YTD	%Var to	Prior Year
													Total	Budget	Budget	Total
West Palm Beach	1,749												1,749	1,446	21.0%	1,446
Delray	728												728	-	#DIV/0!	729
Lantana	1,894												1,894	1,894	0.0%	1,894
Belle Glade & Women's Health Care	821												821	796	3.1%	796
Lewis Center	22												22	24	(8.3%)	5
Lake Worth & Women's Health Care	1,205												1,205	1,342	(10.2%)	1,342
Jupiter & Women's Health Care	599												599	469	27.7%	469
West Boca & Women's Health Care	388												388	321	20.9%	321
St Ann Place	15												15	18	(16.7%)	-
Clb Mob 1 Warrior	30												30	-	#DIV/0!	-
Clb Mob 2 Scout	-												-	-	#DIV/0!	-
Clb Mob 3 Hero	5												5	40	(87.5%)	40
Portable Medical	88												88	27	225.9%	-
Mangonia Park	623												623	897	(30.5%)	897
Total Clinic Visits	8,167	-	-	-	-	-	-	-	-	-	-	-	8,167	7,274	12.3%	7,939
Dental Visits																
West Palm Beach Dental	1,292												1,292	1,101	17.3%	1,101
Delray Dental	533												533	536	(0.6%)	536
Lantana Dental	921												921	769	19.8%	769
Belle Glade Dental	543												543	369	47.2%	369
Portable Dental	15												15	10	50.0%	10
Total Dental Visits	3,304	-	-	-	-	-	-	-	-	-	-	-	3,304	2,785	18.6%	2,785
Total Medical and Dental Visits	11,471	-	-	-	-	-	-	-	-	-	-	-	11,471	10,059	14.0%	10,724
Mental Health Counselors (non-billable)																
West Palm Beach BH	96												96	169	(43.2%)	169
Delray BH	436												436	157	177.7%	157
Lantana BH	144												144	80	80.0%	80
Belle Glade BH	-												-	-	#DIV/0!	148
Mangonia Park BH	1,110												1,110	852	30.3%	852
Lewis Center BH	-												-	-	#DIV/0!	-
Lake Worth BH	143												143	174	(17.8%)	174
Jupiter BH	-												-	-	#DIV/0!	-
St Ann Place BH	82												82	95	(13.7%)	-
West Boca BH	33												33	35	(5.7%)	-
Mobile Van	-												-	-	#DIV/0!	-
Total Mental Health Screenings	2,044	-	-	-	-	-	-	-	-	-	-	-	2,044	1,562	30.9%	1,580
GRAND TOTAL	13,515	-	-	-	-	-	-	-	-	-	-	-	13,515	11,621		12,304

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

1. Description: Change in Scope of Services for Form 5A Required Services – Screenings, Gynecological Care, Prenatal Care, Intrapartum Care (Labor & Delivery) & Postpartum Care

2. Summary:

C. L. Brumback Primary Care Clinics request to remove the following services from HRSA Form 5A Column II Scope of Services:

- Screenings
- Gynecological Care
- Prenatal Care
- Intrapartum Care (Labor & Delivery)
- Postpartum Care

3. Substantive Analysis:

Staff respectfully recommends the Board remove Screenings, Gynecological Care, Prenatal Care, Intrapartum Care (Labor & Delivery) and Postpartum Care from HRSA Form 5A Column II services since the clinics do not pay for these services within our HRSA scope. The clinics will continue referring to Florida Department of Health for screenings, gynecological care, prenatal care and postpartum care, then refer high-risk pregnancies to OB Hospitalists Group for intrapartum care on an as needed basis.

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

Jessica Cafarelli

CA6A21FF2E098185 Jessica Cafarelli

Interim VP & Chief Financial Officer

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

5. Reviewed/Approved by Committee:

N/A

Committee Name

N/A

Date

6. Recommendation:

Staff recommends the Board approve the Change in Scope of Services for Form 5A Required Services to remove Screenings, Gynecological Care, Prenatal Care, Intrapartum Care (Labor & Delivery) & Postpartum Care from Column II.

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza

0CF6F7DB6706B Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Candice Abbott

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

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration FORM 5A: SERVICES PROVIDED		FOR HRSA USE ONLY	
		Grant Number	Application Tracking #
		H80CS25684	
REQUIRED SERVICES			
Service Type	Service provided directly by Health Center I.	Service provided by formal written agreement (Health Center pays for service) II.	Service provided by formal written referral arrangement (Health Center DOES NOT pay) III.
General Primary Medical Care	x		
Diagnostic Laboratory	x (CLIA waiver, urine dips, drug UA)	Quest Diagnostics	Quest Diagnostics
Diagnostic Radiology			Midtown (Good Sam) Imaging
Screenings	x	Florida Dept of Health, Palm Beach County	1. Promise Fund 2. Lakeside Medical Center 3. Florida Dept of Health, Palm Beach County
Coverage for Emergencies During and After Hours	x		
Voluntary Family Planning	x		Florida Dept of Health, Palm Beach County
Immunizations	x		
Well Child Services	x		
Gynecological Care	x	Florida Dept of Health, Palm Beach County	Florida Dept of Health, Palm Beach County
Obstetrical Care			
• Prenatal Care	x	Florida Dept of Health, Palm Beach County	Florida Dept of Health, Palm Beach County
• Intrapartum Care (Labor & Delivery)		OB Hospitalists Group	OB Hospitalists Group
• Postpartum Care	x	Florida Dept of Health, Palm Beach County	Florida Dept of Health, Palm Beach County
Preventive Dental	x		
Pharmaceutical Services	x	Health Care District 340B Administrative Agreement	
HCH Required Substance Abuse Services	x		1. Ebb Tibe 2. Wellington Retreat 3. South County Mental Health
Case Management	x		Florida Dept of Health, Palm Beach County
Eligibility Assistance	x		
Health Education	x		Florida Dept of Health, Palm Beach County
Outreach	x		
Transportation		1. ModivCare 2. City of Belle Glade	
Translation	x	1. Language Line	

REQUIRED SERVICES			
Service Type	Service provided directly by Health Center I.	Service provided by formal written agreement (Health Center pays for service) II.	Service provided by formal written referral arrangement (Health Center DOES NOT pay) III.
		2. Nationwide Interpreter Resource	

ADDITIONAL SERVICES			
Service Type	Service provided directly by Health Center	Service provided by formal written agreement (Health Center pays for service)	Service provided by formal written referral arrangement (Health Center DOES NOT pay)
Additional Dental Services	x		
Behavioral Health Services			
• Mental Health Services	x		
• Substance Abuse Services (Part of HCH)			
Optometry			
Recuperative Care Program Services			
Environmental Health Services			
Occupational Therapy			
Physical Therapy			
Speech Language Pathology/Therapy			
Nutrition	x		
Complementary Alternative Medicine			
Additional Enabling/Supportive Services			

SPECIALTY SERVICES			
Service Type	Service provided directly by Health Center	Service provided by formal written agreement (Health Center pays for service)	Service provided by formal written referral arrangement (Health Center DOES NOT pay)
Podiatry			
Psychiatry	x		
Other – Dental Oral Surgery	x		
Orthopedics			
Pain management specialist			
Cardiology			
Pulmonology			
Dermatology			
Infectious Disease			Florida Dept of Health, Palm Beach County
Gastroenterology			
Advanced Diagnostic Radiology (e.g., CT, MRI, diagnostic mammogram, advanced ultrasound, advanced imaging or nuclear medicine)			

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 - Services**
 - Sites
 - Other Activities and Locations

Self Updates: Services details

H80CS25684: Health Care District of Palm Beach County, West Palm Beach, FL

Grant Number: H80CS25684 BHCMS ID: 04E00551 Project Period: 01/01/2013 - 12/31/2025

Budget Period: 01/01/2024 - 12/31/2024

Resources [↗](#)

View

Form 5A | Form 5B | Form 5C

Pending Approved Changes	Additional Services	Specialty Services
Pending Approved Changes (0)	Pending Approved Changes (0)	Pending Approved Changes (0)

Approved Required Services	Service Delivery Methods		
	Column I. Direct (Health Center Pays)	Column II. Formal Written Contract/Agreement (Health Center Pays)	Column III. Formal Written Referral Arrangement (Health Center DOES NOT pay)
General Primary Medical Care	X		
Diagnostic Laboratory	X	X	X
Diagnostic Radiology			X
Screenings	X	X	X
Coverage for Emergencies During and After Hours	X		
Voluntary Family Planning	X		X
Immunizations	X		
Well Child Services	X		
Gynecological Care	X	X	X
Obstetrical Care			
Prenatal Care	87 X	X	X

Service Type	Service Delivery Methods		
	Column I. Direct (Health Center Pays)	Column II. Formal Written Contract/Agreement (Health Center Pays)	Column III. Formal Written Referral Arrangement (Health Center DOES NOT pay)
Postpartum Care	X	X	X
Preventive Dental	X		
Pharmaceutical Services	X	X	
HCH Required Substance Use Disorder Services	X		X
Case Management	X		X
Eligibility Assistance	X		
Health Education	X		X
Outreach	X		
Transportation		X	
Translation	X	X	

Approved Additional Services			
Service Type	Service Delivery Methods		
	Column I. Direct (Health Center Pays)	Column II. Formal Written Contract/Agreement (Health Center Pays)	Column III. Formal Written Referral Arrangement (Health Center DOES NOT pay)
Additional Dental Services	X		

Behavioral Health Services			
Mental Health Services	X		
Nutrition	X		

Approved Specialty Services			
Service Type	Service Delivery Methods		
	Column I. Direct (Health Center Pays)	Column II. Formal Written Contract/Agreement (Health Center Pays)	Column III. Formal Written Referral Arrangement (Health Center DOES NOT pay)
Psychiatry	X		
Infectious Disease			X
Other - Dental Oral Surgery	X		



**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
DECEMBER 13, 2023**

1. Description: CLBPC Patient Satisfaction Survey

2. Summary:

This agenda item provides the following: 2023 Patient Satisfaction Survey Report

3. Substantive Analysis:

Year to Date we have had a total of nearly 5,000 patient satisfaction surveys completed. 83% of responses in November were promoters, 11% of responses were neutrals and 6% of responses were detractors. This is a steady increase in promoters while also a decrease in detractors since January 2022.

We have improved in multiple survey questions throughout the year such as overall comfort, quality of medical care, our practice and more. Some areas of improvement include waiting time in the exam room, waiting room and the patient’s ability to contact us after-hours.

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E9841 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
DECEMBER 13, 2023**

6. Recommendation:

Staff recommends the Board approve the 2023 Patient Satisfaction Survey Report.

Approved for Legal sufficiency:

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

DocuSigned by:
Alexa Goodwin
25C1B22931DA490A
Alexa Goodwin
Manager, Patient Experience & Relations

DocuSigned by:
Candice Abbott
F637D209DB52427
Candice Abbott
SVP & Chief Operating Officer



Health Care District of Palm Beach County

Dedicated to the health of our community

Patient Satisfaction Survey
January – November 2023



Patient Satisfaction Survey Responses Trends Over Time

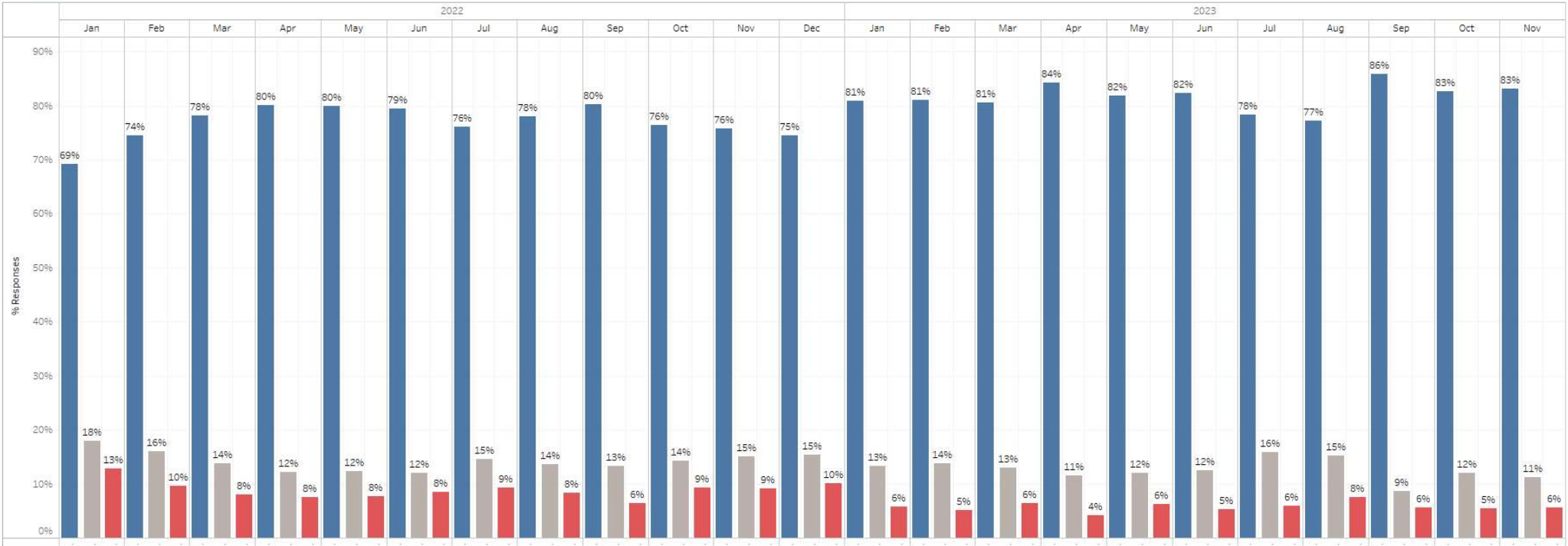
Start Date
Jan-2022

End Date
Nov-2023

Responses All Questions All Clinics
Promoters, Neutral, and Detractors

- Promoters (score 9-10) are loyal enthusiasts who will refer others, fueling growth.
- Neutrals (score 7-8) are satisfied but unenthusiastic patients who are vulnerable to competitors.
- Detractors (score 0-6) are unhappy patients who can impede growth through negative word-of-mouth.

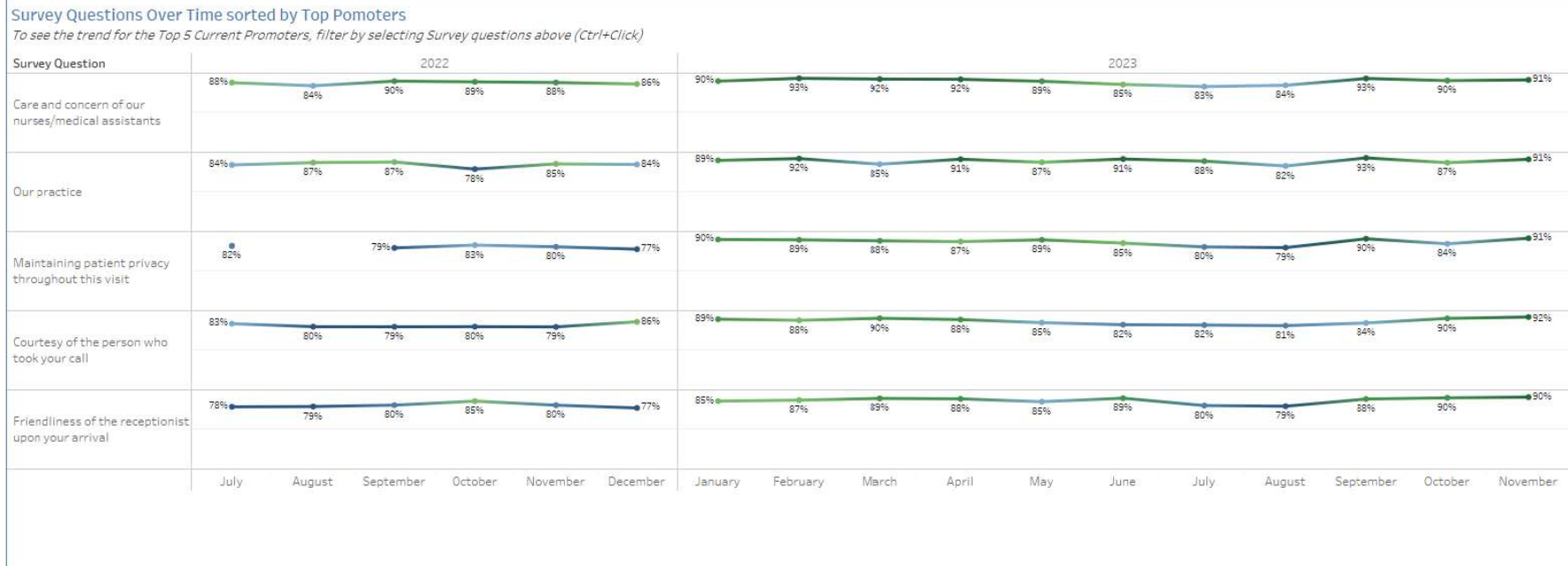
■ % Responses Promoters
■ % Responses Neutrals
■ % Responses Detractors





Top 5 Current Promoters for November 2023

Survey Question	Percentage
Courtesy of the person who took your call	92%
Maintaining patient privacy throughout this visit	91%
Care and concern of our nurses/medical assistants	91%
Our practice	91%
Friendliness of the receptionist upon your arrival	90%





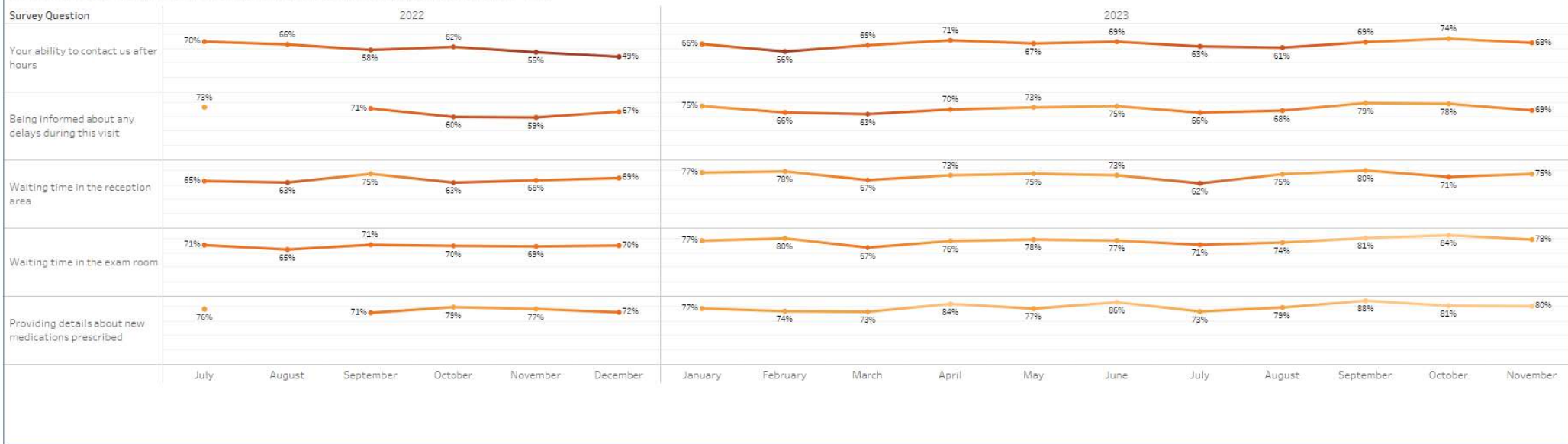
Top 5 Current Detractors for November 2023

Month / Year
November 2023

Survey Question	Percentage
Your ability to contact us after hours	12%
Being informed about any delays during this visit	12%
Waiting time in the reception area	13%
Waiting time in the exam room	11%
Providing details about new medications prescribed	10%

Survey Questions Over Time sorted by Top Detractors

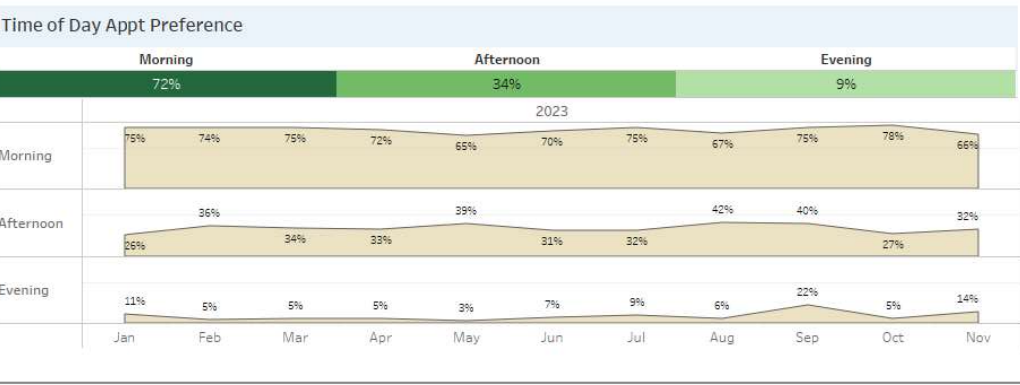
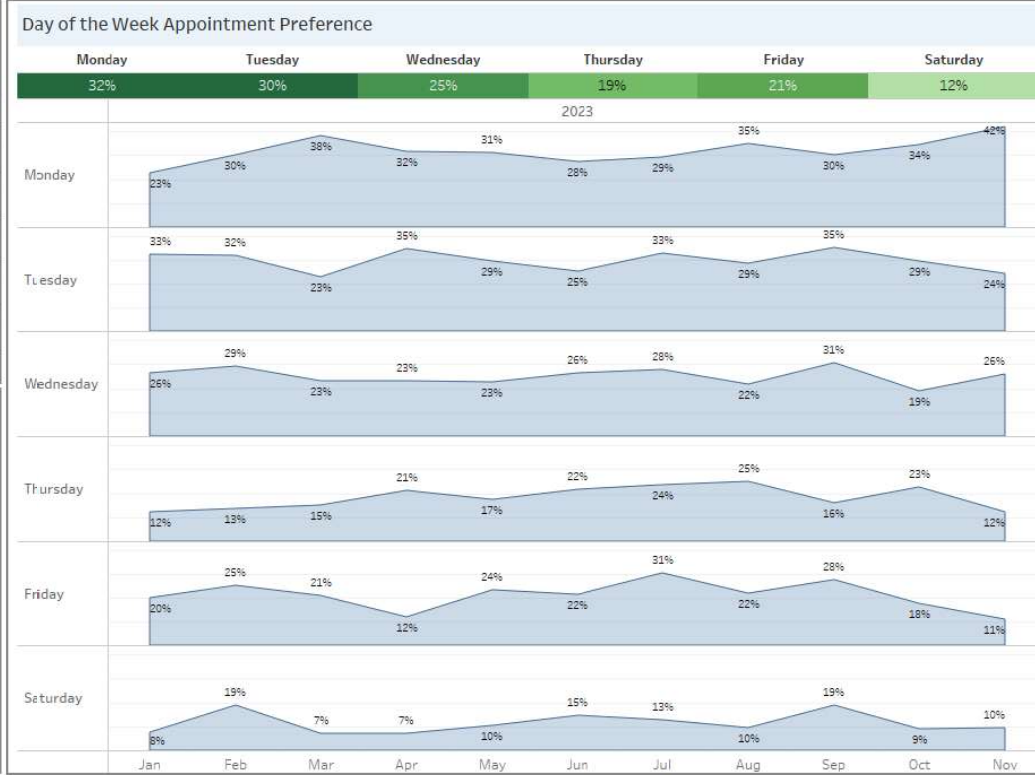
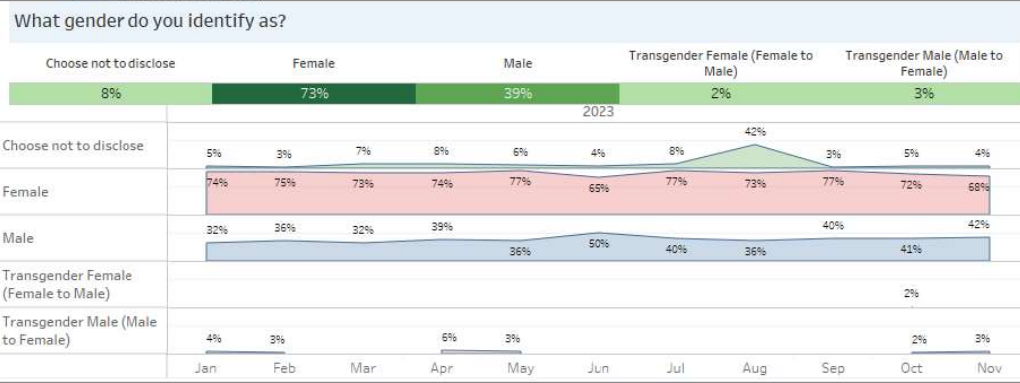
To see the trend for the Top 5 Current Detractors, filter by selecting Survey questions above (Ctrl+Click)





Custom Questions

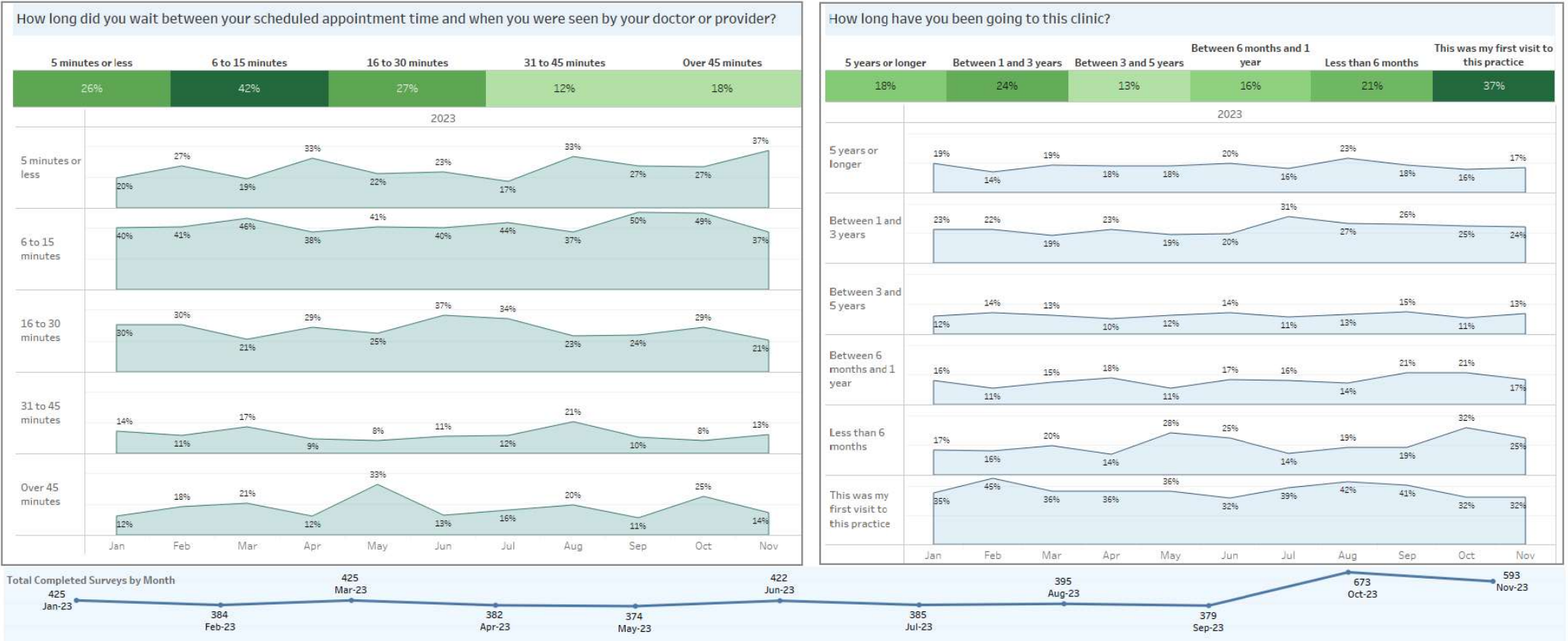
Month/Year
Multiple values





Custom Questions

Month/Year
Multiple values

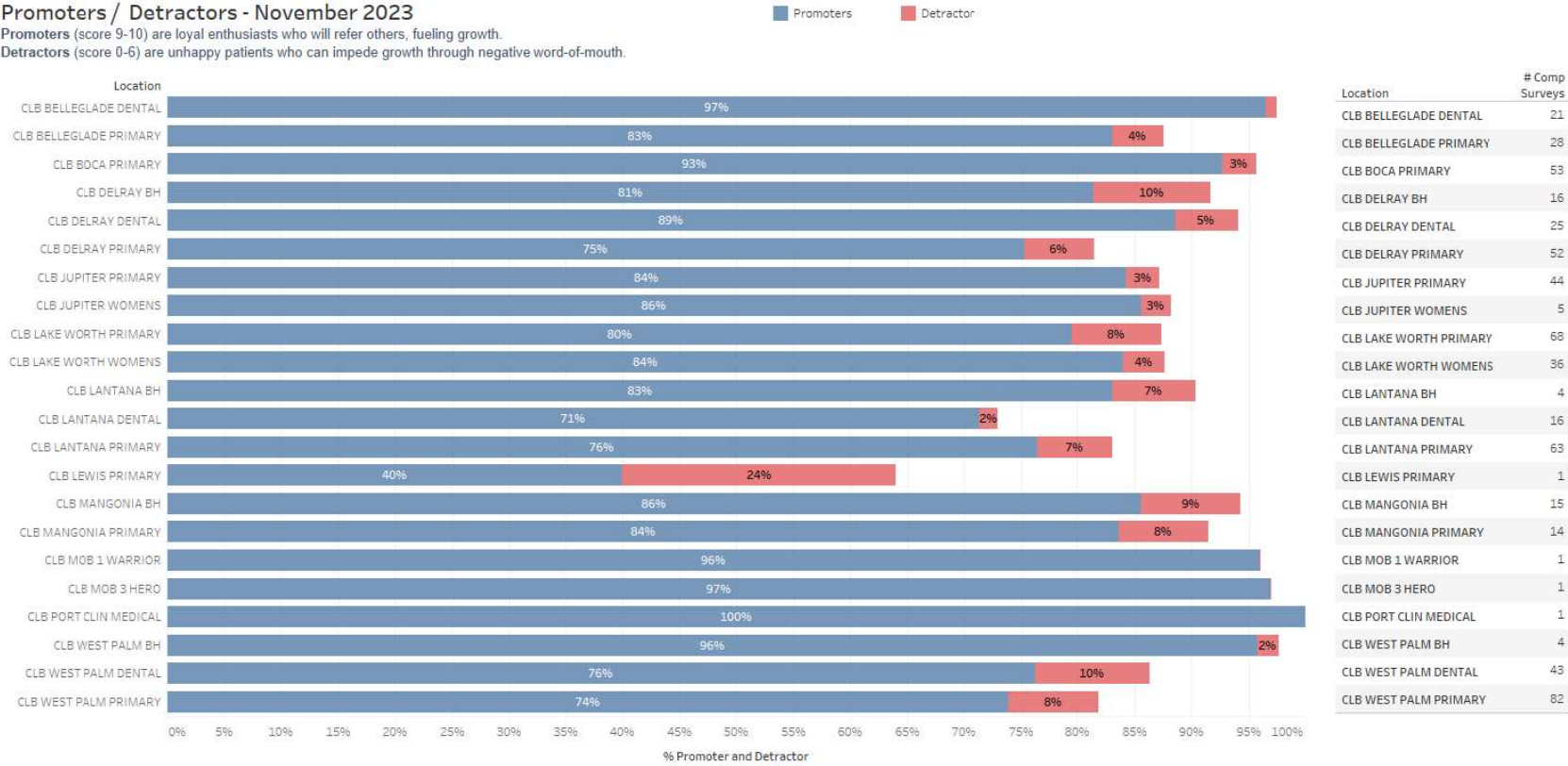




Promoters / Detractors - November 2023

Promoters (score 9-10) are loyal enthusiasts who will refer others, fueling growth.

Detractors (score 0-6) are unhappy patients who can impede growth through negative word-of-mouth.



**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

1. Description: Local Prevailing Rates- FACHC Fee Schedule

2. Summary:

This agenda item presents the FACHC Fee Schedule for Local Prevailing Rates.

3. Substantive Analysis:

The HRSA Compliance Manual requires the health center must prepare a schedule of fees for the provision of its services consistent with locally prevailing rates or charges and designed to cover its reasonable costs of operation. CL Brumback Primary Care Clinics received a comparison file from the Florida Association of Community Health Care Centers (FACHC) which represents locally prevailing rates in several comparable local market rates to determine fees related to the Primary Care Clinics.

Staff will analyze the data provided and bring recommendations to the fee schedule prior to finalizing the budget for FY25.

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF20040A.Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A


 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**


6. Recommendation:

Staff recommends the Board approve the Local Prevailing Rates- FACHC Fee Schedule Analysis.

Approved for Legal sufficiency:

DocuSigned by:


0CF6F7DB6706433 Bernabe Icaza
SVP & General Counsel

DocuSigned by:


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

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

1. Description: Quality Report

2. Summary:

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

- Quality Council Meeting Minutes – December 2023
- UDS Report – YTD
- Provider Productivity – November 2023

3. Substantive Analysis:

PATIENT SAFETY & ADVERSE EVENTS

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

PATIENT SATISFACTION AND GRIEVANCES

Patient relations to be presented as separate agenda item.

QUALITY ASSURANCE & IMPROVEMENT

Colorectal Cancer Screening Initiative: In November, as part of our continued colorectal cancer screening efforts, we created a list of our insured patients who are due for colorectal cancer screening. We coordinated with their health center provider and Exact Sciences Laboratories to create Cologuard orders for about 675 patients. We then sent messages and emails to patients informing them that their provider had ordered the test. The Cologuard kits from the lab at the beginning of this month.

HPV Vaccine Initiative Update: In our efforts to continue increasing our HPV vaccine series completion rates in our patients 9-12y, we are focusing our efforts in educating our patients and their parents on the benefits of completing the vaccine series by 12y. As part of this education, we plan to play a patient facing video in our waiting room from the AAP parenting website (healthychildren.org). The video can be found at the following link: <https://youtu.be/uGugqRSMA2s>

UTILIZATION OF HEALTH CENTER SERVICES

Individual monthly provider productivity stratified by clinic.

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA9A21FF2E0881 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name


N/A


 Date


6. Recommendation:

Staff recommends the Board approve the updated Quality Report.

Approved for Legal sufficiency:

DocuSigned by:

 0CF6F7DB6706434 Bernabe Icaza
 SVP & General Counsel

DocuSigned by:

 B6F5640C1C58174 Charmaine Chibar
 FQHC Medical Director

DocuSigned by:

 F637D209DB52472 Candice Abbott
 SVP & Chief Operating Officer
 Executive Director of FQHC Services



Quality Council Meeting Minutes

Date: December 6, 2023

Time: 9:30am-12:00pm

Attendees: Steven Sadiku – Director of Corporate Quality; Maria Chamberlin – Assistant Director of Nursing; Shauniel Brown – Senior Risk Manager; Carolina Foksinski- Operations Process Manager; Jokebed Laurore- Nurse Educator; Erik Lalani – Dental Operations Manager; Alexa Goodwin – Patient Relations Manager; Dr. Sandra Warren – Associate Medical Director; Dr. Ana Ferwerda – Director of Clinic EHR Optimization & Women’s Health; Dr. Charmaine Chibar – FQHC Medical Director; Angela Santos – Director of Ops; Dr. Josh Adametz – Dental Director; Jessica Ramirez; Marisol Miranda – Director of Clinic Operations; Ivonne Cohen – Business Intelligence Developer; Miriam Meza – Patient Access Coordinator, Valena Gibric – Medical Director District Cares

Excused: Courtney Phillips – Director of Behavioral Health; Lisa Hogans – Director of Nursing; Nancy Gonzalez – Dental Program Director; Candice Abbot – SVP & Chief Operating Officer; Belma Andric – SVP & Chief Medical Officer

Minutes by: Christine Ferguson – Executive Assistant

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



UTILIZATION

OPERATIONS	Productivity	Change "other" to straight under the patient sexual orientation report.	Ivonne																																																																														
	<table border="1"> <thead> <tr> <th colspan="6">Productivity November 2023</th> </tr> <tr> <th rowspan="2">Service Line</th> <th colspan="2">Target</th> <th colspan="2">Seen</th> <th rowspan="2">% of Goal</th> </tr> <tr> <th>In Person</th> <th>Tele</th> <th>In Person</th> <th>Tele</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Adult Care</td> <td>5,944</td> <td></td> <td>4,629</td> <td></td> <td>78%</td> </tr> <tr> <td>Pediatrics</td> <td>1,789</td> <td></td> <td>1,642</td> <td></td> <td>92%</td> </tr> <tr> <td>Primary Residents</td> <td>607</td> <td></td> <td>547</td> <td></td> <td>90%</td> </tr> <tr> <td>Women's Health</td> <td>681</td> <td></td> <td>541</td> <td></td> <td>79%</td> </tr> <tr> <td>Behavioral Health</td> <td>541</td> <td></td> <td>480</td> <td></td> <td>89%</td> </tr> <tr> <td>Behavioral Health - Psych</td> <td>418</td> <td></td> <td>245</td> <td></td> <td>59%</td> </tr> <tr> <td>Psych Residents</td> <td>546</td> <td></td> <td>400</td> <td></td> <td>73%</td> </tr> <tr> <td>Substance Use</td> <td>504</td> <td></td> <td>616</td> <td></td> <td>122%</td> </tr> <tr> <td>Dental</td> <td>2,085</td> <td></td> <td>1,968</td> <td></td> <td>94%</td> </tr> <tr> <td>Dental Hygiene</td> <td>741</td> <td></td> <td>694</td> <td></td> <td>94%</td> </tr> </tbody> </table> <p><i>(Clinic productivity report with graphs were presented.)</i></p>	Productivity November 2023						Service Line	Target		Seen		% of Goal	In Person	Tele	In Person	Tele	Total	Adult Care	5,944		4,629		78%	Pediatrics	1,789		1,642		92%	Primary Residents	607		547		90%	Women's Health	681		541		79%	Behavioral Health	541		480		89%	Behavioral Health - Psych	418		245		59%	Psych Residents	546		400		73%	Substance Use	504		616		122%	Dental	2,085		1,968		94%	Dental Hygiene	741		694		94%			
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	<p>Walk-ins</p> <p>Medical</p> <ul style="list-style-type: none"> Scheduled: 7,844 Walk-Ins: 1,954 <p>Dental:</p> <ul style="list-style-type: none"> Scheduled: 2,425 Walk-Ins: 470 																																																																																



	<p><u>No Show Rates</u> No Show rate was 21% which is consistent with previous month. Year to date no show rate is 22%, between medical and dental, of which 1% is from telehealth visits.</p> <p>(Report with graph presented.)</p>			
PATIENT RELATIONS				
<p>GRIEVANCES, COMPLAINTS & COMPLIMENTS</p>	<p><u>Patient Relations Dashboard</u> For October 2023, there were a total of 7 Patient Relations Occurrences that occurred between 4 Clinics. Of the 7 occurrences, there was 3 Grievances and 4 Complaints. The top 3 categories were Care & Treatment, Respect Related and Nursing Related issues. The top subcategory was Care & Treatment Competency of Staff with 2 occurrences. There was also a total of 41 patient compliments received across 6 Clinics. Breakdown of each clinic presented.</p> <p><i>(Patient Relations Report & Patient Relations Dashboard with Graphs presented.)</i></p>	<p>Next month we will present on November and December data so that we can catch up on the reports.</p>	<p>Alexa</p>	
<p>SURVEY RESULTS</p>	<p><u>Patient Satisfaction Survey – November 2023</u> For November 2023 there were 593 Patient Satisfaction Surveys completed out of a total of 12,083 patient visits. This is a 5% return rate out of the total survey delivered for the month. West Palm Primary had the highest return rate (82/1,655). The top 5 and lowest 5 scored-questions were presented for each area.</p> <p>“Best Questions” for in person visits – November 2023:</p> <ul style="list-style-type: none"> • Courtesy of the person who took your call – 92% 			



	<ul style="list-style-type: none"> • Maintaining privacy throughout this visit – 91% • Care and concern of our nurses/medical assistants - 91% • Our practice – 91% • Friendliness of the receptionist upon your arrival – 90% <p>“Worst Questions” for in person visits – November 2023:</p> <ul style="list-style-type: none"> • Your ability to contact us after hours - 12% (decrease from last month) • Being informed about any delays during this visit – 12% (decrease from last month) • Waiting time in reception area – 11% (same as last month) • Waiting time in exam room – 14% (increase from last month) • Providing details about new medication prescribed – 10% <p>Of the surveys received for November, 42% of patients perceived wait time between 6 to 15 minutes, 37% of responses were from patients that this was their first visit to the practice, 73% of surveys completed were by females and most patients preferred to be seen on Monday, Tuesday and Wednesday mornings. 83% of responses in November were promoters (same from the last month), 11% of responses were neutrals (decrease from the previous month where neutrals were 12%) and 6% of responses were detractors (increase from the previous month where detractors were 5%).</p>			
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	<p>Top promoters, detractors, and patient comments presented by clinic and service line. Clinic trends over time to be shared with Clinic Supervisors and Coordinators. (Patient Satisfaction Survey PowerPoint presented.)</p>			
<p>OUTBOUND CALL CAMPAIGNS</p>	<p><u>Afterhours Report – Nov 2023</u> In Nov 2023, the Clinic Service Center returned 276 after hours calls. This was a 59% increase from the previous month, most likely due to the holiday. We saw our highest volume in Medical related/ Appt request calls with 92% of the calls returned. Our WPB Location recieved the highest volume of AHC’s with 25% of calls for Nov 23.</p> <p><u>Outreach Call Campaigns</u> The call center assisted the care coordination team with a Humana Medicare Call Campaign in Nov 23. The list was received from the payer and included all patients assigned to our clinics that have either not been seen in 6 months OR have not established with one of our providers. The focus of this campaign was to assist the clinics in filling our lower volume clinics. The list included 326 unique Humana Medicare patients. The CSC team ws able to schedule 214 Appts or 65% of the patients on the list. (Outbound Campaign PowerPoint presented.)</p>			



<p>NEXT THIRD AVAILABLE</p>	<p><u>Primary Care</u> Belle Glade – 15 days out Mobile school buses – 6 days out Delray – 23 days out Jupiter – 1 day out Lake Worth – 26 days out Lantana – 34 days out Lewis – 2 days out Mangonia – 35 days out WPB – 8 days out</p> <p><u>Womens Health</u> Belle Glade – 18 days out Jupiter- 6 days out LW – 5 days out</p> <p><u>BH</u> Delray – 3 days out LW – 0 days out Lantana – 1 days out Mangonia – 5 days out WPB – 2 days out</p> <p><u>Dental</u> Belle glade – 1 days out Delray – 18 days out Lantana – 22 days out WPB – 21 days out</p>			
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QUALITY				
QUALITY				
MEDICAL	<p><u>Hemoglobin A1C/Point of Care Testing</u> Shows: The diabetes measure data for November, 2023 shows that our patients are currently controlled at (2900)73 % while (984) 25% are uncontrolled (of 3982 diabetic patients total) and (98) 2% of patients need data. Our HRSA goal is to have 67% of patients with controlled diabetes. Up to November, there were 3369 POC A1Cs done. The majority of controlled patients (92%) and uncontrolled patients (97%) had the A1c done at POC vs. lab. (Diabetes dashboard presented.)</p>			
	<p><u>Colorectal Cancer Screening - November 2023</u> Satisfied: 4396 (44%) No met: 5630 (56%) (Report with graph presented.)</p>			
	<p><u>FIT Test - October 2023</u> Among patients with the colorectal cancer screening that do not meet having the screening completed, the screening was ordered in 61.5% of the patients and 38.5% of the patient did not have and order for Fit test. The rate of completion persists low. Our highest return rates during</p>			



	<p>the past year up to November, 2023 were at Boca Clinic (57%), Lantana Clinic (50%), and Belle Glade Clinic (48%).</p> <p>(Report with graph presented.)</p>			
	<p><u>Cervical Cancer Screening - November, 2023</u> Satisfied: 6952 (61%) Needs Data: 4457 (39%)</p> <p>(Report with graph presented.)</p>			
	<p><u>HPV</u> Second dose in both females and males for 9-10y and 11-12y has improved, especially when compared to Meningococcal & TDAP.</p> <p>(Report with graph presented.)</p>			
	<p><u>Breast Cancer Screening – November, 2023</u> Satisfied screenings – 2382 (58%) Unsatisfied Screenings – 1742 (42%)</p> <ul style="list-style-type: none"> • Not Met with order – 1351 (77%) • Not Met (Patient Missed) – 385 (23%) <p>(Report with graph presented.)</p>			
Dental	<p><u>Dental Sealants</u></p> <p>YTD 2023: 96% (578; n=602) November 2023: 99% (140; n= 142)</p>			
	<p><u>Limited Exams</u></p> <p>November 2023: 362 -Same Day Extractions: 164 (45% n=362)</p>			



	<p>-Antibiotics Given: Patients without a future extraction appointment type 103 (28% n=362)</p> <p>-Ext. not needed(non-emergent): 70 (19%n=362)</p> <p>-Returns (Follow-Up): Patients with a future extraction appointment type 25 (7% n=362)</p> <p>-Returned within 21 days for ext.: 15 (60% n=25)</p>							
	<p><u>MDI/WHO</u></p> <p>November 2023</p> <p><u>Total Well Visit Pediatric Patients: 129</u></p> <ul style="list-style-type: none"> - Excluded from MDI KPI 62 (48%; n=129) - Eligible MDI 67 (52%; n=129) <p><u>Total Pediatrician KPI Patients (Pts who do not have a dental home): 67</u></p> <ul style="list-style-type: none"> - No MDI 41 (61% n=67) - MDI 26 (39% n=67) <p><u>Total of patients who had MDI visit:26</u></p> <ul style="list-style-type: none"> - Declined WHO 12 (46% n=26) - Interested in WHO 14 (54% n=29) <p><u>Total Pts. Interested in WHO: 14</u></p> <ul style="list-style-type: none"> - WHO not seen by Dentists 3 (21%; n=14) - WHO seen by Dentists 11 (79%; n=14) 							
	<p>Dental Clinic Audit Summary</p> <table border="1" data-bbox="432 1256 1060 1386"> <tr> <td data-bbox="432 1256 884 1341">Dental Clinic Audit – November 2023</td> <td data-bbox="884 1256 1060 1341"></td> </tr> <tr> <td data-bbox="432 1341 884 1386">Belle Glade</td> <td data-bbox="884 1341 1060 1386">98%</td> </tr> </table>	Dental Clinic Audit – November 2023		Belle Glade	98%			
Dental Clinic Audit – November 2023								
Belle Glade	98%							



	<table border="1"> <tr> <td>Delray</td> <td>97%</td> </tr> <tr> <td>Lantana</td> <td>96%</td> </tr> <tr> <td>West Palm Beach</td> <td>98%</td> </tr> </table>	Delray	97%	Lantana	96%	West Palm Beach	98%			
Delray	97%									
Lantana	96%									
West Palm Beach	98%									
Behavioral Health	<p><u>PHQ9 – November 2023</u> Total encounters with PHQ9: 5,272 12.44% positive rate Unique patients with positive PHQ9= 372/7% (Report with graph presented.)</p>									
	<p><u>Depression Remission November 2023</u> 42% achieving depression remission (296 patients) 0% increase from the previous month. We are exceeding our goal of 14% (Report with graph presented.)</p>									
WOMENS HEALTH	<p><u>Early Entry into Prenatal Care Jan-Nov 2023</u> Early Entry into care into the First Trimester is 52%, an improvement from last year's 45.4%. Total population of 317 prenatal patients <u>Low Birth Weight Jan-Nov 2023</u> Babies born with a birth weight below normal (under 2,500 grams) 9% 2022 National average 8.43% Total deliveries/birth weight= 121</p>									



<p>NURSING</p>	<p><u>Higher Level of Care</u></p> <p>Higher Level of Care October 2023 112 ER referrals/ 105 patients were sent to the ER in September. The breakdown of the referrals is:</p> <ul style="list-style-type: none"> • WH- 19 (17 %) • Peds- 22 (20%) • Adult- 69 (62%) (this combines urgent care and emergency medicine referrals) • Life Trans to LMC- 1 (0.5%) • Adult Crisis- 1 (0.5 %) • Peds Crisis- 0 <p>There were 7 patients with multiple orders in October.</p> <p>PEDS REFERRALS- highest producer was Dr. Marzouca 9 (41%) and Dr. Clarke with 8 (36%)</p> <p>ADULT REFERRALS- highest producers this month were Ewelina Stanek with 6 in WPB (1%), and Dr. Forez with 5 in WPB (~1 %).</p> <p>The clinic with the most referrals continues to be Belle Glade primary with 13 (12%).</p> <p>The top 2 diagnosis associated with higher level of care referrals- Chest pain, unspecified type and</p>	<p>Next month we will present on Novemember and December data so that we can catch up on the reports.</p>	<p>Lisa</p>	
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	<p>Obesity affecting pregnancy in third trimester, unspecified obesity type.</p> <p>Meetings are underway to revise the data that is collected for higher level of care and the utilization of that data. That is why we have added top 2 diagnosis to the reporting.</p>			
<p>PEER REVIEW</p>	<p><u>Womens Health</u></p> <p>Q2</p> <p>15 charts were peer reviewed. 15 were evaluated as “within standard of care”, 0 were evaluated as , “ Provider Self-identified Remediation” and 3 as “ Provider Education Required”, 0 chart was evaluated as “Inappropriate care”.</p> <p>Q3</p> <p>15 charts were peer reviewed. 15 were evaluated as “within standard of care”, 0 were evaluated as , “ Provider Self-identified Remediation” and 4 as “ Provider Education Required”, 0 chart was evaluated as “Inappropriate care”.</p> <p><u>Adult Medical</u></p> <p>Q2</p>			



	<p>82 charts were peer reviewed. 80 were evaluated as “within standard of care” and 2 were evaluated as, “Provider Self-identified Remediation”.</p> <p><u>Pediatric</u> Q2 20 charts were peer reviewed. 20 were evaluated as “within standard of care”, 0 were evaluated as, “Provider Self-identified Remediation,” 0 were evaluated as “Provider Education needed,” and 0 were evaluated as “Provider Review Required” 0 were evaluated as “Inappropriate care”</p>			
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QUALITY METRICS

UDS YTD 2023

Of the 16 UDS Measures: 9 Exceeded the HRSA Goal and 7 were short of the HRSA Goal (*Clinic Score/ HRSA Goal / Healthy People Goal*)

Medical UDS Report	Adult Weight screening and follow-up: (90% / 90%)			
	Breast Cancer Screening: (_58_ %/60%)			
	Cervical Cancer Screening: (_61_ % /65%)			
	Childhood immunization: (_42_ %/ 60%)			
	Colorectal Cancer Screening: (_44_ % / 82%)			
	Coronary Artery Disease CAD: (_84_ % / 81%)			
	Dental Sealants: (_96_ % / 75%)			
	Depression Remission: (_41_ % / 14%)			
Diabetes: (_72_ % / 67%)				



HIV Screening: (_53_ % / 32%)			
Hypertension: (_71_ % / 80%)			
Ischemic Vascular Disease (IVD): (_77_ % / 86%)			
Depression screening: (_94_ % / 83%)			
Depression screening (Homeless): (_92_ % / 83%)			
Tobacco use screening & cessation: (_96_ % / 93%)			
Weight assessment, Children & Adolescent: (93% /90%)			
Meeting Adjourned: 11:06am			

PRODUCTIVITY REPORT NOVEMBER 2023

ALL PROVIDERS

AS 11/30/2023 Based on Completed Appointments

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

Provider	Daily Target	Days Worked	Target for the Month	% Monthly Target Achieved		Daily Average
			Total	Total	Total	
ALFONSO PUENTES, RAMIRO, MD	18	14.5	261	217	83%	15.0
CASTIGLIA, SARAH, MD	18	16.0	288	185	64%	11.6
DABU, DARNEL, MD	18 when no precepting	6.5	35	28	80%	4.3
FERNANDEZ SANCHEZ, MARCO, NP	20	17.5	350	286	82%	16.3
FIDLER, LISA, APRN	16	19.0	304	231	76%	12.2
FLOREZ, GLORIA MATILDE, MD	18	14.0	252	208	83%	14.9
JEAN-JACQUES, FERNIQUE, NP	16	17.5	280	258	92%	14.7
KOOPMAN, REBECCA SUE, PA	20	15.5	310	233	75%	15.0
LAM, MINH DAI, NP	16	14.5	232	271	117%	18.7
LANGLEY, TAMARA, NP	16	17.5	280	153	55%	8.7
LARA SUAREZ, MARIA, NP	16	18.5	296	170	57%	9.2
MILLIEN, ELEONORE, APRN	8	15.5	140	69	49%	4.5
NAVARRO, ELSY, NP	16	14.5	232	209	90%	14.4
NOUKELAK, GERMAINE, MD	18	18.0	324	311	96%	17.3
PEREZ, DANIEL JESUS, MD	18 when no precepting	9.0	62	57	92%	6.3
PHILISTIN, KETELY, NP	16	19.0	304	246	81%	12.9
PIERRE LOUIS, JOANN, NP	16	16.5	264	210	80%	12.7
REGAN, PATRICK, DO	New Provider	1.0	1	1	100%	1.0
TAHERI, NERGESS, DO	18 when no precepting	3.5	48	44	92%	12.6
TUCKER, CHELSEA, PA	16	18.0	288	175	61%	9.7
TUSSEY, CLAUDIA, MD	18	18.5	333	266	80%	14.4
ST. VIL, CARLINE, NP	16	14.5	232	203	88%	14.0
STANEK, EWELINA, PA	16	14.5	232	195	84%	13.4
WARREN, SANDRA, MD	18	8.5	153	126	82%	14.8
WILMOT, ALTHEA, NP	18 / 6 Mobile, St Ann, Lewis	15.5	108	92	85%	5.9
ZHANG, MICHAEL, MD	18	18.5	333	185	56%	10.0
ADULT CARE TOTALS		376.0	5,942	4,629	78%	

RESIDENCY PROGRAM						
PGY-1	5	16.5	83	90	109%	5.5
PGY-2	11	24.0	264	214	81%	8.9
PGY-3	14	20.0	261	243	93%	12.2
RESIDENTS TOTAL		60.5	607	547	90%	

PEDIATRIC CARE						
CLARKE-AARON, NOELLA, MD	20	18.5	370	322	87%	17.4
DESSALINES, DUCLOS, MD	20	13.5	270	252	93%	18.7
HERNANDEZ GARCIA, JOSE, MD	20	12.0	159	129	81%	10.8
NORMIL-SMITH, SHERLOUNE, MD	20	14.5	290	267	92%	18.4
LAZARO RIVERA, NANCY, MD	20	17.5	350	360	103%	20.6
MARZOUCO, KISHA F., MD	20	17.5	350	312	89%	17.8
PEDIATRIC CARE TOTALS		93.5	1,789	1,642	92%	

WOMEN'S HEALTH CARE						
FERWERDA, ANA, MD	18 / 14 BG	9.5	157	132	84%	13.9
FINLEY, NICOLE, NP	16	15.0	240	202	84%	13.5
PROPHETE, JOYCE, MD	18 / 14 BG	16.0	284	207	73%	12.9
WOMEN'S HEALTH CARE TOTALS		40.5	681	541	79%	

BEHAVIORAL HEALTH INTEGRATION						
CALDERON, NYLSA, LMHC	10	14.5	145	121	83%	8.3
HIRSCH, KAREN, LCSW	6	11.0	66	65	98%	5.9
BROWN, JEREMY, LCSW	10	12.5	125	99	79%	7.9
HART, SHAKIYLA, LCSW	New Provider	14.5	74	72	97%	5.0
JONES, KIARA, LCSW	10	17.5	131	123	94%	7.0
BH INTEGRATION TOTALS		70	541	480	89%	

BEHAVIORAL HEALTH PSYCHIATRY						
PETER, AMANDA, NP	12	16.5	198	96	48%	5.8
DEMNER, ADAM, MD	12	3.0	7	7	100%	2.3
PHILLIPS, COURTNEY, MD	12	2.0	3	3	100%	1.5
BURROWS, SHARON, NP	12	17.5	210	139	66%	7.9
BEHAVIORAL HEALTH PSYCHIATRY		39	418	245	59%	

RESIDENT PSYCHIATRY						
MENEFFEE, STEPHEN, MD	12	6.0	72	50	69%	8.3
BEAMAN, DAVID, MD	12	5.0	60	33	55%	6.6
DHALIWAL, AMAREEN, MD	12	4.5	54	58	107%	12.9
HOGUE, KRISTIAN, MD	12	5.5	66	36	55%	6.5
MAXWELL, CHRISTIAN, MD	12	5.5	66	55	83%	10.0
NGUYEN, ANH-VU, MD	12	4.0	48	38	79%	9.5
SANCHEZ, GRETEL, MD	12	7.0	84	46	55%	6.6
TORRES, MICHAEL, MD	12	8.0	96	84	88%	10.5
RESIDENTS PSYCHIATRY TOTAL		45.5	546.0	400.0	73%	

BEHAVIORAL HEALTH ADDICTION						
MILETA, SNJEZANA, LMHC	10	18.0	180	292	162%	16.2
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW	10	18.0	180	115	64%	6.4
MITCHELL, ANGELA DENISE, LCSW	8	18.0	144	209	145%	11.6
BH ADDICTION TOTALS		54	504	616	122%	

DENTAL						
ABREU, MARIANA, DDS	16	18.0	288	261	91%	14.5
BERNARD, ANA, DDS	New Provider	4.0	22	22	100%	5.5
ADAMETZ, JOSHUA, DMD	16	5.5	88	95	108%	17.3
ALWEHAIB, ARWA, DDS	16	15.5	247	275	111%	17.7
BOWEN, BEVERLY, DMD	16	17.5	280	255	91%	14.6
SEMINARIO, ADA, DDS	16	17.5	280	247	88%	14.1
SOFIANOS, MICHAEL, DMD	16	19.0	304	326	107%	17.2
WILLIAMS, RICHARD, DMD	16	17.5	280	233	83%	13.3
ZANGENEH, YASMINE, DMD	16	18.5	296	254	86%	13.7
DENTAL TOTALS		133.0	2,085	1,968	94%	

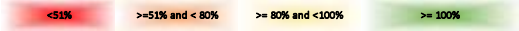
DENTAL HYGIENE						
MOZER NASCIMENTO, ARIANNE MILENA	8	13.5	108	106	98%	7.9
GONZALEZ, NANCY	8	3.5	21	21	100%	6.0
DUCHARME, RHONDA	8 / 16 MDI	9.5	112	102	91%	10.7
HARDCASTLE, CORINA	8	17.5	140	139	99%	7.9
FEOLA, LEYDA	8	15.5	124	113	91%	7.9
MASON, SHERRY	8	18.5	148	130	88%	7.0
PETERSEN, PATRICE	8 / 16 MDI	6.5	88	83	94%	12.8
DENTAL HYGIENE TOTALS		84.5	741	694	94%	

GRAND TOTAL		996.5	13,854	11,762	85%	
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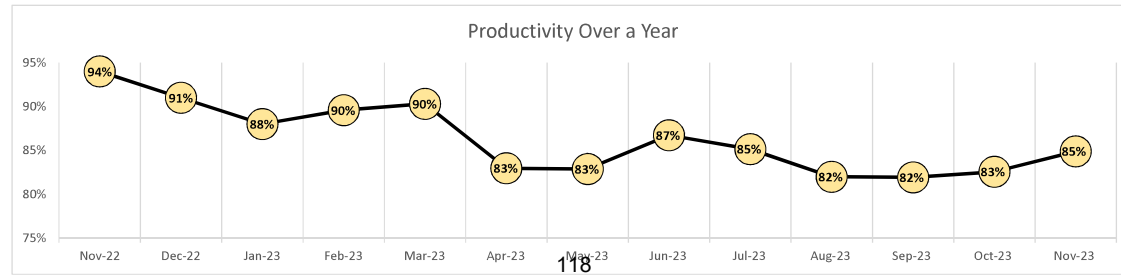
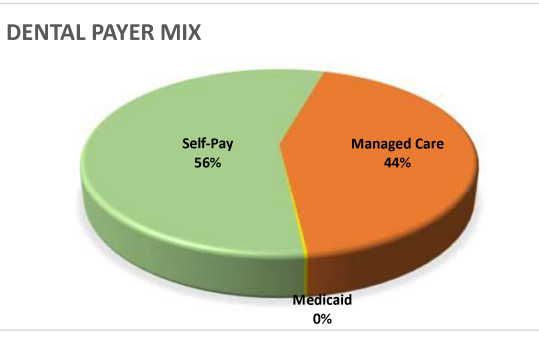
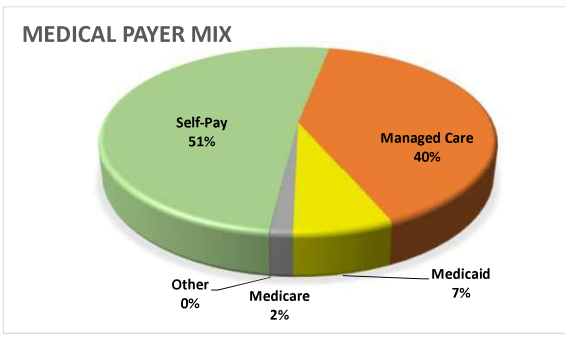
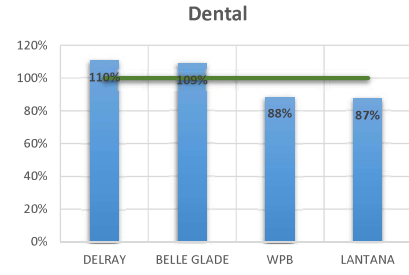
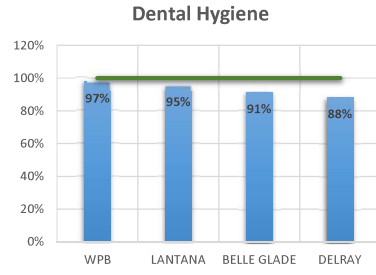
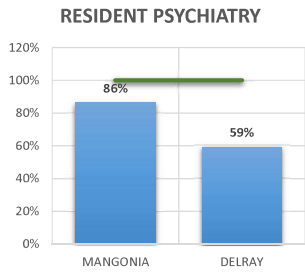
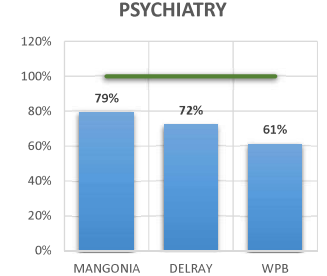
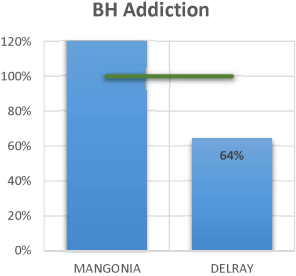
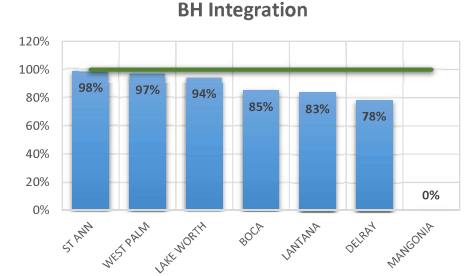
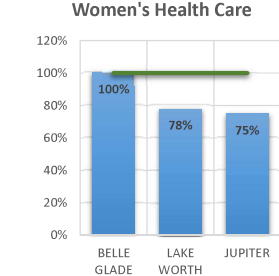
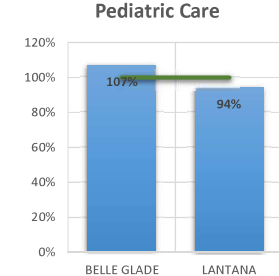
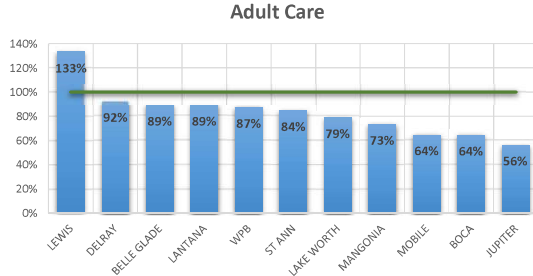
PRODUCTIVITY REPORT NOVEMBER 2023

ALL CLINICS

AS 11/30/2023 Based on Completed Appointments



Category	Target for the Month			Total for the Month Seen			% Monthly Target Achieved
	AS 11/30/2023	AM	PM	Total	AM	PM	
ADULT CARE	3,084	2,858	5,942	2,813	1,816	4,629	78%
PEDIATRIC CARE	930	859	1,789	1,031	611	1,642	92%
WOMEN'S HEALTH CARE	362	319	681	356	185	541	79%
BH INTEGRATION	281	260	541	254	226	480	89%
BH ADDICTION	257	247	504	389	227	616	122%
DENTAL HEALTH	1,084	1,001	2,085	1,341	627	1,968	94%
DENTAL HYGIENE	384	357	741	383	311	694	94%
BH PSYCHIATRY	214	204	418	127	118	245	59%
RESIDENCY PSYCHIATRY	282	264	546	251	149	400	73%
RESIDENCY PROGRAM	325	282	607	345	202	547	90%
Grand Total	7,203	6,651	13,854	7,290	4,472	11,762	85%



ADULT CARE	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23
ALFONSO PUENTES, RAMIRO, MD	88%	85%	102%	85%	87%	85%	89%	84%	83%	78%	76%	83%
	212/240	225/264	90/88	261/308	321/369	300/351	265/297	303/360	344/414	233/297	274/360	217/261
CASTIGLIA, SARAH, MD	50%	46%	47%	65%	61%			54%	49%	63%	57%	64%
	164/330	144/316	153/325	226/350	203/333			184/342	196/396	211/333	226/396	185/288
DABU, DARNEL, MD	92%	80%	71%	94%	83%	87%	100%	88%	100%	83%	97%	80%
	41/45	29/36	21/29	30/32	33/40	21/24	10/10	35/40	29/29	15/18	28/29	28/35
DORCE-MEDARD, JENNIFER, MD			78%	94%	75%	67%	92%	74%	74%	74%	74%	
			7/9	17/18	18/24	6/9	24/26	225/306	225/306	225/306	225/306	
FERNANDEZ SANCHEZ, MARCO, NP	96%	100%	94%	98%	79%	77%	72%	71%	93%	101%	79%	82%
	282/294	143/143	241/257	229/234	286/360	347/450	286/400	270/380	448/480	395/390	339/430	286/350
FIDLER, LISA, APRN		100%	100%	69%	50%	64%	74%	47%	44%	59%	61%	76%
		15/15	135/135	214/309	168/278	229/300	265/300	141/248	187/423	187/315	198/326	231/304
FLOREZ, GLORIA MATILDE, MD	82%	86%	87%	86%	79%	89%	110%	88%	89%	84%	80%	83%
	167/204	265/308	252/289	310/359	262/333	321/360	407/369	260/297	232/261	264/315	266/333	208/252
JEAN-JACQUES, FERNIQUE, NP	97%	95%	95%	90%	85%	86%	98%	105%	103%	93%	117%	92%
	234/242	286/302	244/257	314/349	237/234	332/323	291/248	332/316	349/338	254/272	291/248	258/280
KOOPMAN, REBECCA SUE, PA	98%	123%	103%	108%	80%	83%	88%	83%	81%	85%	74%	75%
	238/242	391/318	296/287	375/347	271/340	371/440	388/440	299/360	350/430	341/400	283/380	233/310
LAM, MINH DAI, NP	107%	108%	107%	104%	92%	101%	108%	102%	101%	103%	116%	117%
	307/288	154/143	267/250	260/250	348/317	283/233	302/233	295/241	328/324	372/360	363/312	271/232
LANGLEY, TAMARA, NP	89%	89%	69%	73%	68%	74%	65%	67%	60%	56%	59%	55%
	276/309	236/264	151/219	247/339	177/218	239/270	245/315	210/263	199/333	177/315	183/312	153/280
LARA SUAREZ, MARIA, NP	78%	88%	75%	75%	72%	77%	59%	65%	58%	53%	58%	57%
	242/189	189/166	215/287	250/332	246/286	202/218	214/300	239/308	142/243	189/360	195/336	170/296
NAVARRO, ELSY, NP	96%	90%	99%	91%	83%	83%	83%	81%	83%	77%	85%	90%
	240/251	204/227	263/266	304/335	270/271	305/308	210/211	270/278	194/234	269/351	212/248	209/232
NOUKELAK, GERMAINE, MD	73%	77%	92%	84%	75%	84%	107%	104%	105%	104%	94%	96%
	126/172	252/325	306/334	311/368	278/369	342/405	375/351	328/315	311/297	376/360	362/387	311/324
MILLIEN, ELEONORE, APRN											66%	49%
											109/164	69/140
PEREZ, DANIEL JESUS, MD	90%	78%	80%	79%	83%	86%	95%	91%	77%	94%	69%	92%
	33/37	34/43	26/33	34/43	45/54	50/58	42/44	31/34	23/30	29/31	27/39	57/62
PHILISTIN, KETELY, NP	90%	85%	77%	84%	70%	73%	72%	76%	75%	70%	83%	81%
	218/243	276/325	232/302	254/302	260/309	294/338	278/323	172/188	291/387	252/360	278/336	246/304
PIERRE LOUIS, JOANN, NP	83%	83%	91%	90%	72%	75%	74%	79%	73%	64%	80%	80%
	236/196	272/225	200/219	271/302	214/249	276/308	259/293	213/226	250/342	203/315	250/312	210/264
TUCKER, CHELSEA, PA						93%		97%	93%	81%	65%	61%
						35/38		64/66	160/172	136/168	129/197	175/288
TUSSEY, CLAUDIA, MD											100%	80%
											62/62	266/333

	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23
ADULT CARE												
ST. VIL, CARLINE, NP	79%	82%	85%	82%	71%	78%	91%	75%	78%	96%	99%	88%
	186/234	190/233	187/219	247/302	211/248	253/270	221/204	217/240	183/234	338/351	300/304	203/232
STANEK, EWELINA, PA	76%	80%	72%	75%	65%	70%	70%	72%	76%	72%	78%	84%
	240/317	230/287	120/167	181/240	176/226	269/323	260/308	267/308	299/396	219/306	275/352	195/232
TAHERI, NERGESS, DO	100%	100%	97%	100%	96%	100%	100%	92%	95%	114%	87%	92%
	50/50	31/31	33/34	32/32	53/55	50/50	50/50	34/37	61/64	56/49	68/78	44/48
WARREN, SANDRA, MD	75%	72%	78%	82%	71%	70%	80%	84%	75%	74%	82%	82%
	148/197	100/138	147/189	190/232	140/198	133/189	166/207	196/234	168/225	133/180	155/189	126/153
WILMOT, ALTHEA, NP	35%	49%	56%	39%	71%	69%	79%	81%	86%	63%	61%	85%
	68/192	75/154	125/222	107/273	77/108	149/195	85/99	107/126	176/204	95/150	90/147	92/108
ZHANG, MICHAEL, MD											46%	56%
											165/360	185/333
RESIDENTS	80%	82%	96%	83%	67%	68%	82%	82%	89%	95%	87%	90%
	573/718	665/811	658/687	692/833	508/759	650/951	630/773	612/746	681/761	642/678	638/735	547/607
PEDIATRIC CARE												
CLARKE-AARON, NOELLA, MD	100%	107%	101%	109%	87%	81%	82%	88%	78%	79%	88%	87%
	264/265	290/272	303/299	382/350	322/370	244/300	345/420	229/260	328/420	278/350	238/270	322/370
CHIBAR, CHARMAINE, MD						53%	100%					
						16/30	10/10					
DESSALINES, DUCLOS, MD	110%	104%	110%	117%	92%	97%	104%	95%	90%	86%	97%	93%
	235/214	276/265	291/265	311/265	249/270	348/360	354/340	267/280	358/400	302/350	300/310	252/270
HERNANDEZ GARCIA, JOSE, MD											75%	81%
											222/297	129/159
LAZARO RIVERA, NANCY, MD	127%	113%	109%	128%	104%	106%	105%	106%	100%	92%	101%	103%
	316/248	308/272	309/282	339/265	323/310	444/420	377/360	255/240	380/380	358/390	416/410	360/350
MARZOUCA, KISHA F., MD	106%	116%	105%	109%	91%	83%	82%	88%	79%	85%	86%	89%
	372/350	346/299	333/316	419/384	353/390	348/420	212/260	193/220	365/460	316/370	354/410	312/350
NORMIL-SMITH, SHERLOUNE, MD	118%	110%	104%	122%	98%	99%	101%	100%	88%	84%	81%	92%
	233/197	310/282	311/299	353/289	372/380	357/360	182/180	341/340	370/420	295/350	234/290	267/290
WOMEN'S HEALTH CARE												
FERWERDA, ANA, MD	83%	82%	67%	89%	78%	53%			62%	72%	77%	84%
	106/128	136/166	107/159	214/239	151/193	19/36			110/177	121/168	134/175	132/157
FINLEY, NICOLE, NP	80%	88%	94%	95%	76%	81%	87%	85%	78%	83%	80%	84%
	210/264	246/279	257/273	193/204	239/263	278/285	329/315	292/285	296/378	283/342	236/296	202/240
PROPHETE, JOYCE, MD	70%	70%	76%	82%	71%	72%	75%	81%	67%	67%	64%	73%
	233/334	224/321	180/235	240/294	244/342	285/396	249/330	223/275	229/344	174/258	226/355	207/284

BEHAVIORAL HEALTH INTEGRATION	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23
CALDERON, NYLSA, LMHC	93%	95%	103%	100%	96%	91%	84%	88%	86%	90%	87%	83%
	191/206	158/166	140/136	205/206	159/165	127/140	160/190	159/180	190/220	103/115	143/165	121/145
JONES, KIARA, LCSW	104%	111%	112%	111%	105%	104%	100%	98%	101%	97%	107%	94%
	172/166	187/169	182/162	228/206	184/175	197/190	200/200	192/195	167/165	150/155	188/175	123/131
SILVER, DAWN, PhD					100%	92%	79%	95%	95%	77%	72%	
					87/87	202/220	166/210	124/130	180/190	151/195	36/50	
BROWN, JEREMY, LCSW		100%	103%	94%	92%	93%	87%	97%	92%	79%	87%	79%
		40/40	170/165	213/226	180/195	204/220	179/205	175/180	202/220	154/195	188/215	99/125
BURROWES, SHARON, NP	54%	46%	51%	58%	58%	56%	61%	69%	68%	62%	58%	66%
	73/136	89/192	114/223	158/271	104/180	148/264	142/234	150/216	146/216	138/222	143/246	139/210
HIRSCH, KAREN, LCSW	67%	92%	107%	101%	104%	102%	97%	91%	92%	90%	79%	98%
	44/66	44/48	58/54	98/97	109/105	86/84	116/120	87/96	94/102	86/96	82/104	65/66
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW						76%	81%	78%	63%	78%	53%	64%
						81/107	170/210	156/200	145/230	145/185	115/215	115/180
MILETA, SNJEZANA, LMHC	179%	128%	117%	115%	139%	95%		130%	81%	93%	101%	162%
	226/126	246/192	211/180	253/220	195/140	95/100		104/80	114/140	172/185	218/215	292/180
MITCHELL, ANGELA DENISE, LCSW	120%	106%	117%	119%	96%	87%	93%	109%	75%	104%	116%	145%
	235/196	190/180	202/172	204/172	89/93	182/210	186/200	163/150	142/190	125/120	191/164	209/144
PETER, AMANDA, NP	68%	64%	50%	73%	76%	72%	70%	42%	43%	58%	69%	48%
	105/154	151/235	105/211	171/235	179/234	172/240	163/234	86/204	107/246	128/222	170/246	96/198
REXACH, CLAUDIA, LMHC	134%	139%	123%	110%	122%	104%	123%	99%	90%	83%	104%	
	222/166	223/160	199/162	232/210	237/195	207/200	221/180	158/160	208/230	146/175	161/155	
RESIDENT PSYCHIATRY	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23
MENEFFEE, STEPHEN, MD								100%	84%	81%	67%	69%
								33/33	67/80	68/84	64/96	50/72
BEAMAN, DAVID, MD								100%	52%	27%	53%	55%
								35/35	32/61	21/78	41/78	33/60
DHALIWAL, AMAREEN, MD								104%	92%	72%	74%	107%
								29/28	59/64	56/78	49/66	58/54
HOGUE, KRISTIAN, MD								100%	56%	30%	47%	55%
								19/19	40/72	29/96	28/60	36/66
MAXWELL, CHRISTIAN, MD								100%	92%	83%	104%	83%
								33/33	25/23	50/60	56/54	55/66
NGUYEN, ANH-VU, MD								100%	50%	33%	60%	79%
								36/36	31/62	24/72	29/48	38/48
SANCHEZ, GRETTEL, MD								100%	29%	33%	59%	55%
								23/23	17/58	28/84	57/96	46/84
TORRES, MICHAEL, MD								100%	87%	72%	69%	88%
								23/23	72/83	39/54	83/120	84/96

DENTAL	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23
ABREU, MARIANA, DDS	107%	71%	75%	80%	91%	98%	101%	105%	87%	96%	96%	91%
	226/211	233/330	205/274	303/379	285/312	313/320	355/352	377/360	195/224	284/296	338/351	261/288
ADAMETZ, JOSHUA, DMD										86%	100%	108%
										100/116	99/99	95/88
ALWEHAIB, ARWA, DDS	107%	86%	115%	119%	114%	118%	114%	121%	126%	122%	114%	111%
	273/254	270/314	334/290	430/362	373/328	395/336	310/273	348/288	468/371	342/280	392/344	275/247
BOWEN, BEVERLY, DMD	114%	81%	81%	77%	86%	83%	96%	92%	96%	86%	97%	91%
	241/211	253/314	240/298	243/314	261/304	264/320	262/272	266/288	339/352	200/232	310/321	255/280
SEMINARIO, ADA, DDS	95%	84%	98%	104%	87%	91%	94%	95%	98%	95%	81%	88%
	223/235	262/314	277/282	259/250	180/208	276/304	286/304	228/240	88/90	235/248	280/344	247/280
SOFIANOS, MICHAEL, DMD	111%	91%	97%	88%	113%	96%	104%	101%	104%	110%	111%	107%
	247/274	275/251	296/306	247/282	343/304	293/304	309/296	308/304	359/344	325/296	356/320	326/304
WILLIAMS, RICHARD, DMD	88%	84%	84%	94%	83%	91%	85%	89%	84%	83%	83%	83%
	208/235	269/322	249/298	265/282	233/280	262/288	285/336	272/304	309/368	245/296	245/296	233/280
ZANGENEH, YASMINE, DMD	102%			91%	95%	83%	92%	91%	94%	87%	82%	86%
	86/84			219/240	281/296	238/288	294/320	219/240	317/336	243/280	282/344	254/296
HARDCASTLE, CORINA	98%	96%	102%	91%	93%	95%	96%	102%		90%	94%	99%
	138/141	143/149	127/125	150/165	138/148	144/152	107/112	122/120		112/124	146/156	139/140
MASON, SHERRY	91%		97%	95%	90%	88%	92%	89%	83%	81%	88%	88%
	139/152		137/141	165/173	119/132	147/168	140/152	143/160	133/160	88/108	144/164	130/148
MOZER NASCIMENTO, ARIANNE	89%	96%	95%	106%	106%	96%	109%	98%	95%	103%	99%	98%
	147/165	151/157	142/149	191/181	165/156	138/144	165/152	141/144	168/176	123/120	154/156	106/108
FEOLA, LEYDA				92%	99%	92%	99%	91%	96%	97%	90%	91%
				159/173	154/156	154/168	158/160	146/160	176/184	105/108	154/172	113/124
DUCHARME, RHONDA		99%	98%	96%	100%	95%	99%	90%	88%	90%	91%	91%
		237/240	293/298	256/266	264/264	311/328	316/320	218/241	275/312	206/228	196/216	102/112
PETERSEN, PATRICE	94%	102%	97%	96%	96%	92%	95%	82%	106%	102%	104%	94%
	309/330	286/281	210/218	309/322	299/312	202/220	230/242	183/224	136/128	245/240	208/200	83/88

SATURDAY

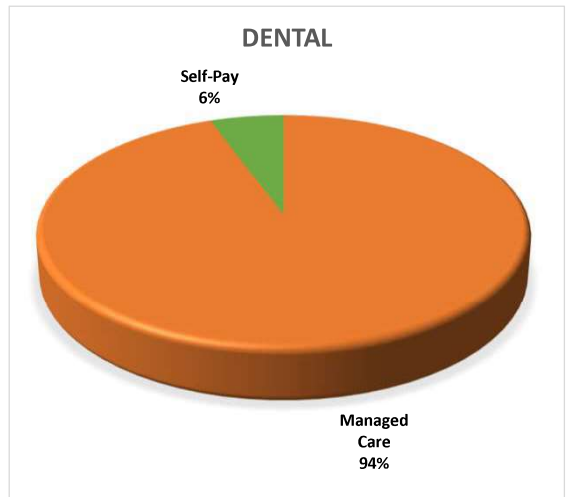
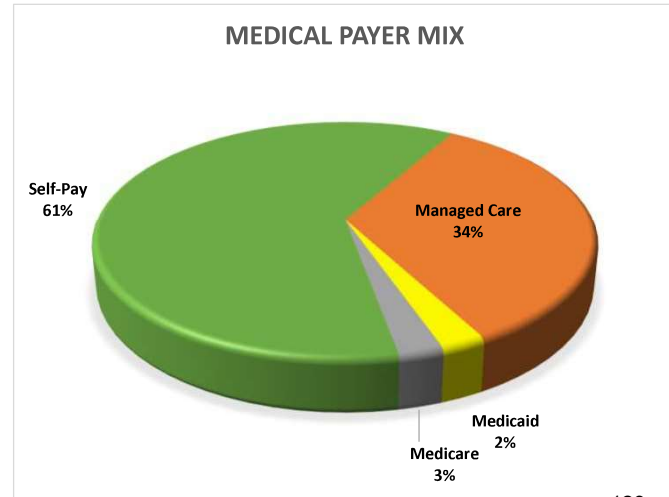
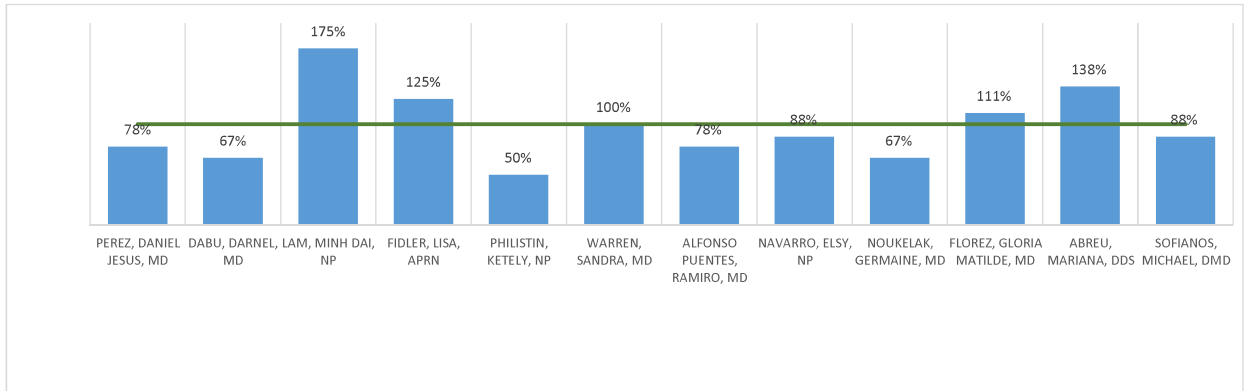
PRODUCTIVITY REPORT NOVEMBER 2023

AS 11/30/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target (1/2 Day)	# Saturdays Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
BELLE GLADE						
PEREZ, DANIEL JESUS, MD	9	1	9	7	78%	7.0
DABU, DARNEL, MD	9	1	9	6	67%	6.0
DELRAY						
LAM, MINH DAI, NP	8	1	8	14	175%	14.0
FIDLER, LISA, APRN	8	1	8	10	125%	10.0
LAKE WORTH						
PHILISTIN, KETELY, NP	8	1	8	4	50%	4.0
WARREN, SANDRA, MD	9	1	9	9	100%	9.0
LANTANA						
ALFONSO PUENTES, RAMIRO, MD	9	1	9	7	78%	7.0
NAVARRO, ELSY, NP	8	1	8	7	88%	7.0
WEST PALM BEACH						
NOUKELAK, GERMAINE, MD	9	1	9	6	67%	6.0
FLOREZ, GLORIA MATILDE, MD	9	1	9	10	111%	10.0
ADULT CARE TOTALS			86	80	93%	

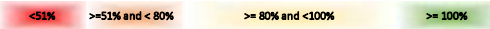
BELLE GLADE DENTAL						
ABREU, MARIANA, DDS	8	1	8	11	138%	11.0
WEST PALM BEACH DENTAL						
SOFIANOS, MICHAEL, DMD	8	1	8	7	88%	7.0
DENTAL TOTALS			16	18	113%	
GRAND TOTAL			102	98	96%	



BELLE GLADE

PRODUCTIVITY REPORT NOVEMBER 2023

AS 11/30/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
TAHERI, NERGESS, DO	18 when no precepting	3.5	48	44	92%	12.6
DABU, DARNEL, MD	18 when no precepting	6.5	35	28	80%	4.3
PEREZ, DANIEL JESUS, MD	18 when no precepting	9.0	62	57	92%	6.3
REGAN, PATRICK, DO	New Provider	1.0	1	1	100%	1.0
ADULT CARE TOTALS		20.0	146	130	89%	

RESIDENCY PROGRAM						
PGY-1	6	16.5	83	90	109%	5.5
PGY-2	10	24	264	214	81%	8.9
PGY-3	14	20.0	261	243	93%	12.2
RESIDENTS TOTALS		60.5	607	547	90%	

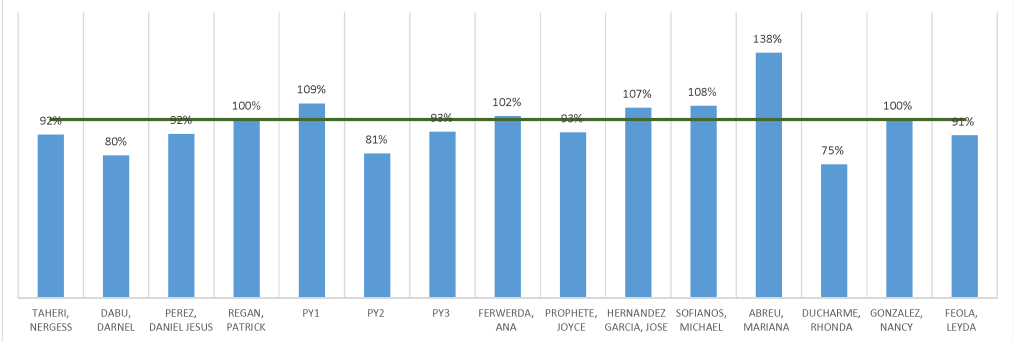
WOMEN'S HEALTH CARE						
FERWERDA, ANA, MD	18 / 14 BG	3.5	49	50	102%	14.3
PROPHETE, JOYCE, MD	18 / 14 BG	1.0	14	13	93%	13.0
WOMEN'S HEALTH CARE TOTALS		4.5	63	63	100%	

PEDIATRIC CARE						
HERNANDEZ GARCIA, JOSE, MD	20 when no precepting	4.0	15	16	107%	4.0
PEDIATRIC CARE TOTALS		4.0	15	16	107%	

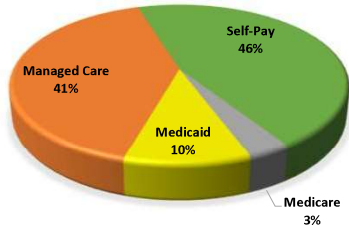
DENTAL						
SOFIANOS, MICHAEL, DMD	16	18.5	296	319	108%	17.2
ABREU, MARIANA, DDS	16	0.5	8	11	138%	22.0
DENTAL TOTALS		19.0	304	330	109%	

DENTAL HYGIENE						
DUCHARME, RHONDA	16	1.0	8	6	75%	6.0
GONZALEZ, NANCY	8	2.0	13	13	100%	6.5
FEOLA, LEYDA	8	15.5	124	113	91%	7.3
DENTAL HYGIENE TOTALS		18.5	145	132	91%	

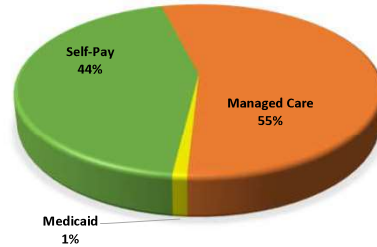
GRAND TOTAL						
		126.5	1,280	1,218	95%	



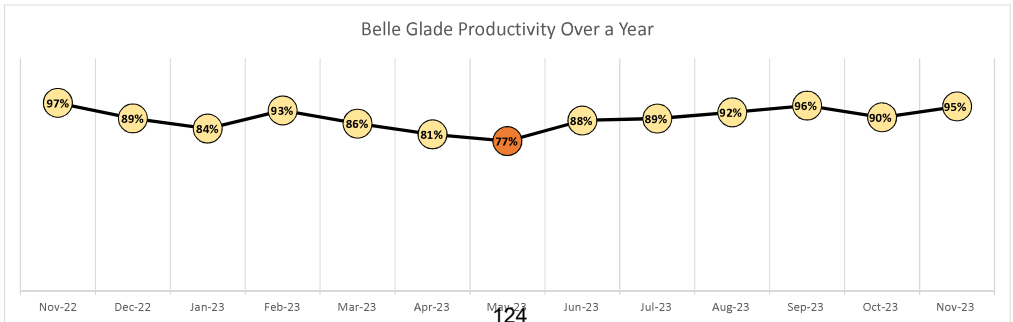
MEDICAL PAYER MIX



DENTAL PAYER MIX



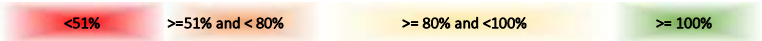
Belle Glade Productivity Over a Year



BOCA

PRODUCTIVITY REPORT NOVEMBER 2023

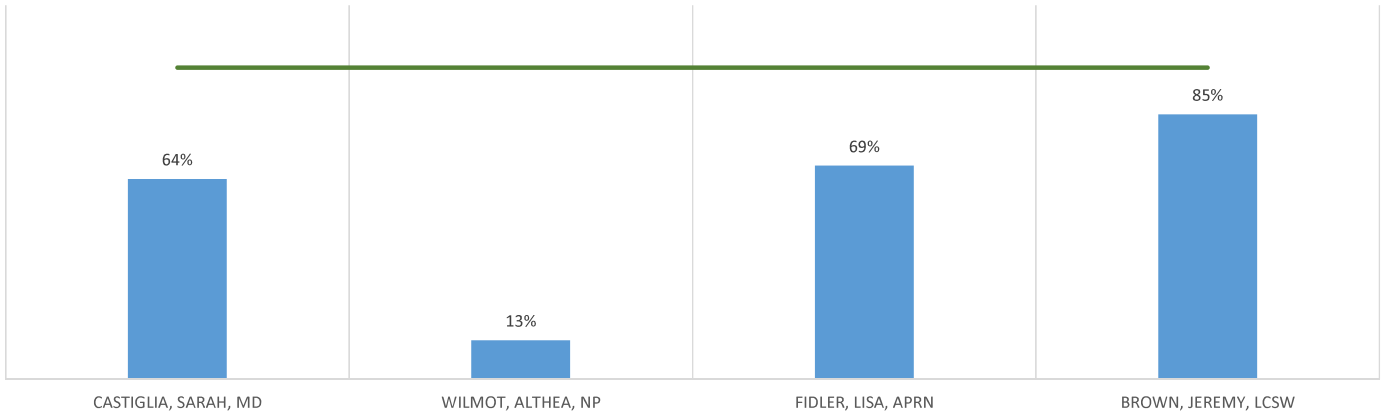
AS 11/30/2023 Based on Completed Appointments



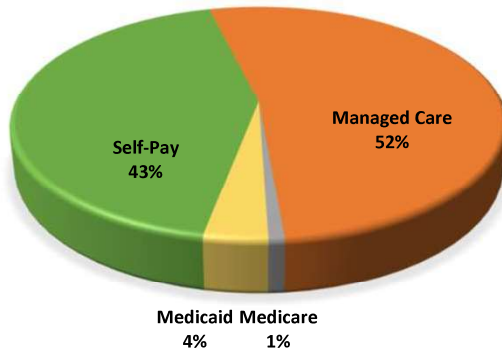
ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
CASTIGLIA, SARAH, MD	18	16.0	288	185	64%	11.6
WILMOT, ALTHEA, NP	16	1.0	16	2	13%	2.0
FIDLER, LISA, APRN	16	12.5	200	137	69%	11.0
ADULT CARE TOTALS		29.5	504	324	64%	

BEHAVIORAL HEALTH INTEGRATION						
BROWN, JEREMY, LCSW	10	2.0	20	17	85%	8.5
BH INTEGRATION TOTALS		2.0	20	17	85%	

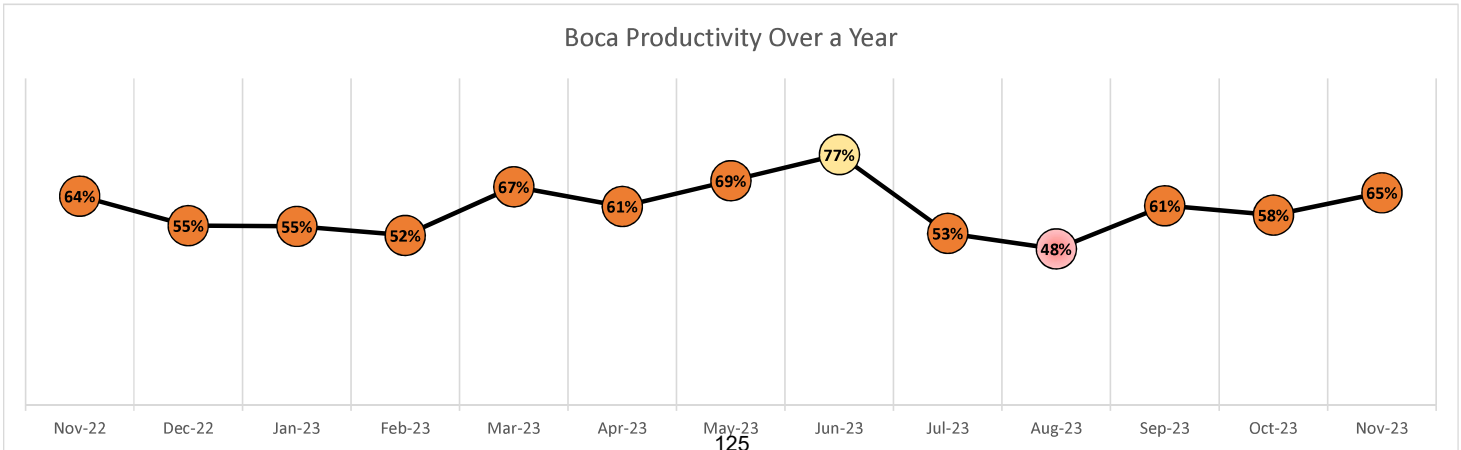
GRAND TOTAL		31.5	524	341	65%	
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MEDICAL PAYER MIX



Boca Productivity Over a Year



DELRAY
PRODUCTIVITY REPORT NOVEMBER 2023
 AS 11/30/2023 Based on Completed Appointments

ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
LAM, MINH DAI, NP	16	14.5	232	271	117%	18.7
FERNANDEZ SANCHEZ, MARCO, NP	20	1.0	20	10	50%	10.0
ST. VIL, CARLINE, NP	16	14.5	232	203	88%	14.0
FIDLER, LISA, APRN	16	0.5	8	10	125%	20.0
TUSSEY, CLAUDIA, MD	18	18.5	333	266	80%	14.4
ADULT CARE TOTALS		49	825	760	92%	

BEHAVIORAL HEALTH INTEGRATION						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
BROWN, JEREMY, LCSW	10	10.5	105	82	78%	7.8
BH INTEGRATION TOTALS		10.5	105	82	78%	

BEHAVIORAL HEALTH ADDICTION						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW	10	18.0	180	115	64%	6.4
BH ADDICTION TOTALS		18.0	180	115	64%	

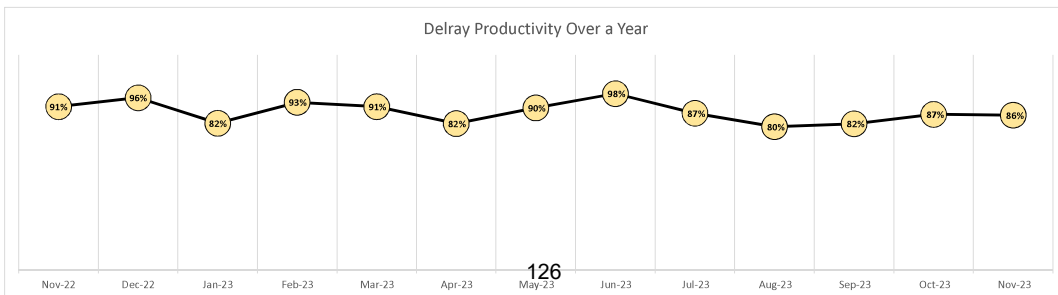
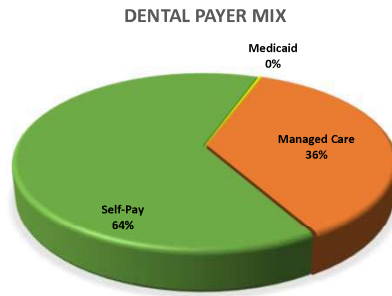
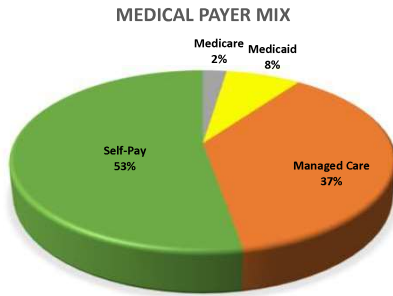
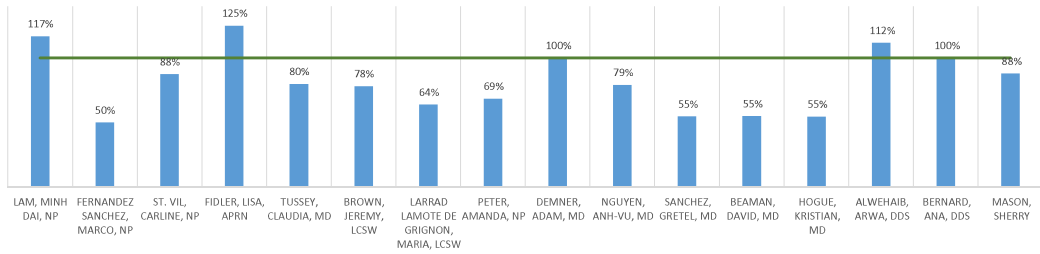
BEHAVIORAL HEALTH PSYCHIATRY						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
PETER, AMANDA, NP	12	4.5	54	37	69%	8.2
DEMNER, ADAM, MD	12	3.0	7	7	100%	2.3
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		7.5	61	44	72%	

RESIDENT PSYCHIATRY						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
NGUYEN, ANH-VU, MD	12	4.0	48	38	79%	9.5
SANCHEZ, GRETTEL, MD	12	7.0	84	46	55%	6.6
BEAMAN, DAVID, MD	12	5.0	60	33	55%	6.6
HOGUE, KRISTIAN, MD	12	5.5	66	36	55%	6.5
RESIDENT PSYCHIATRY TOTAL		21.5	258	153	59%	

DENTAL						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ALWEHAIB, ARWA, DDS	16	14.5	232	259	112%	17.9
ADAMETZ, JOSHUA, DMD	16	1	16	19	119%	19.0
BERNARD, ANA, DDS	16	4	22	22	100%	5.5
BOWEN, BEVERLY, DMD	16	3	48	51	106%	17.0
DENTAL TOTALS		22.5	318	351	110%	

DENTAL HYGIENE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
MASON, SHERRY	8	18.5	148	130	88%	7.0
DENTAL HYGIENE TOTALS		18.5	148	130	88%	

GRAND TOTAL						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
GRAND TOTAL		148	1895	1635	86%	



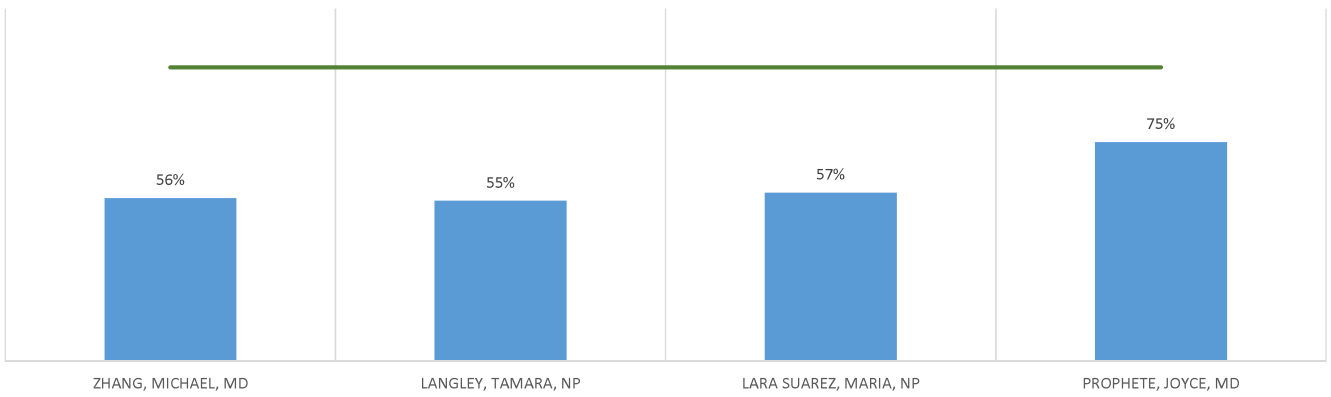
JUPITER



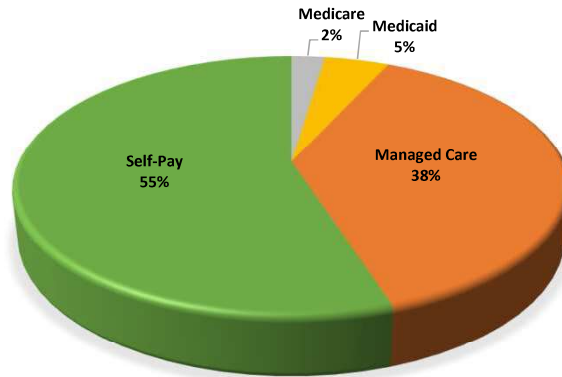
PRODUCTIVITY REPORT NOVEMBER 2023

AS 11/30/2023 Based on Completed Appointments

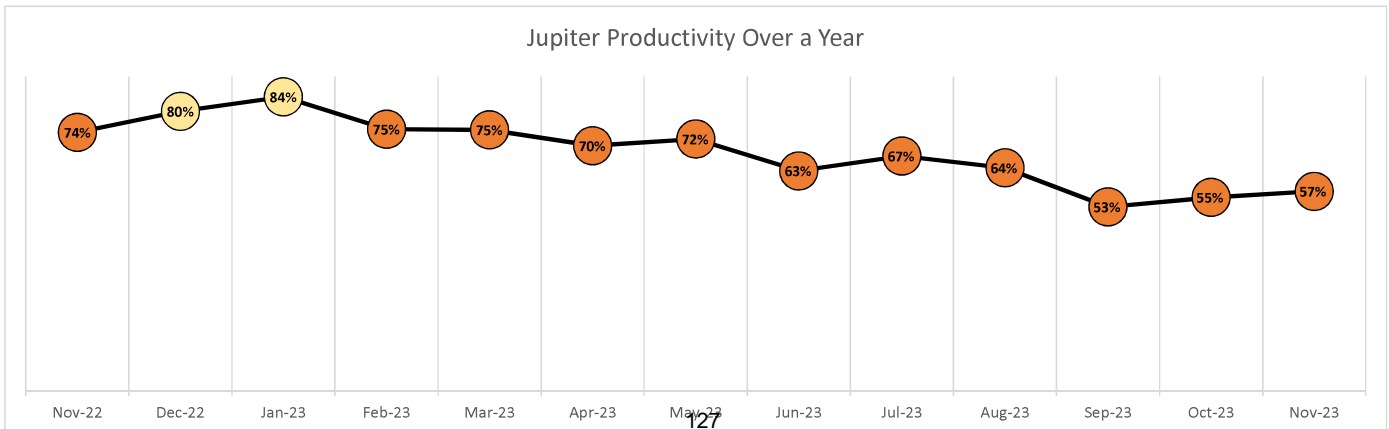
ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ZHANG, MICHAEL, MD	18	18.5	333	185	56%	10.0
LANGLEY, TAMARA, NP	16	17.5	280	153	55%	8.7
LARA SUAREZ, MARIA, NP	16	18.5	296	170	57%	9.2
ADULT CARE TOTALS		54.5	909	508	56%	
WOMENS HEALTH CARE						
PROPHETE, JOYCE, MD	18	3.5	63	47	75%	13.4
WOMENS HEALTH CARE TOTALS		3.5	63	47	75%	
GRAND TOTAL		58	972	555	57%	



MEDICAL PAYER MIX



Jupiter Productivity Over a Year



LAKE WORTH

PRODUCTIVITY REPORT NOVEMBER 2023

AS 11/30/2023 Based on Completed Appointments

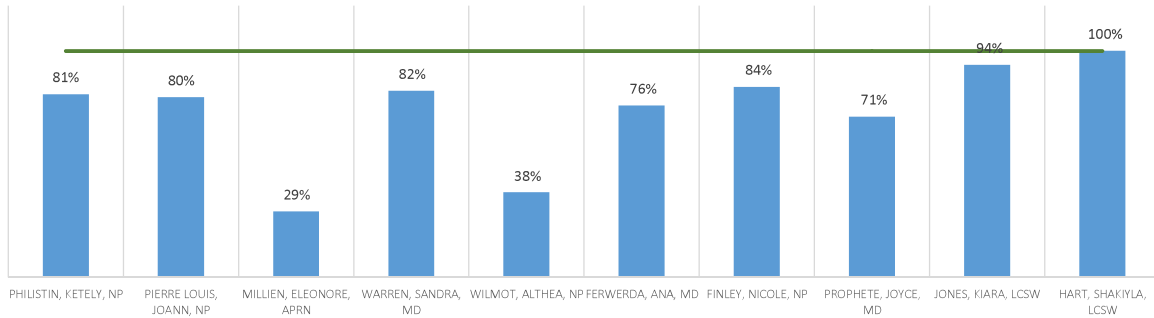


ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
PHILISTIN, KETELY, NP	16	19.0	304	246	81%	12.9
PIERRE LOUIS, JOANN, NP	16	16.5	264	210	80%	12.7
MILLIEN, ELEONORE, APRN	8	2.0	24	7	29%	3.5
WARREN, SANDRA, MD	18	8.5	153	126	82%	14.8
WILMOT, ALTHEA, NP	16	0.5	8	3	38%	6.0
ADULT CARE TOTALS		46.5	753	592	79%	

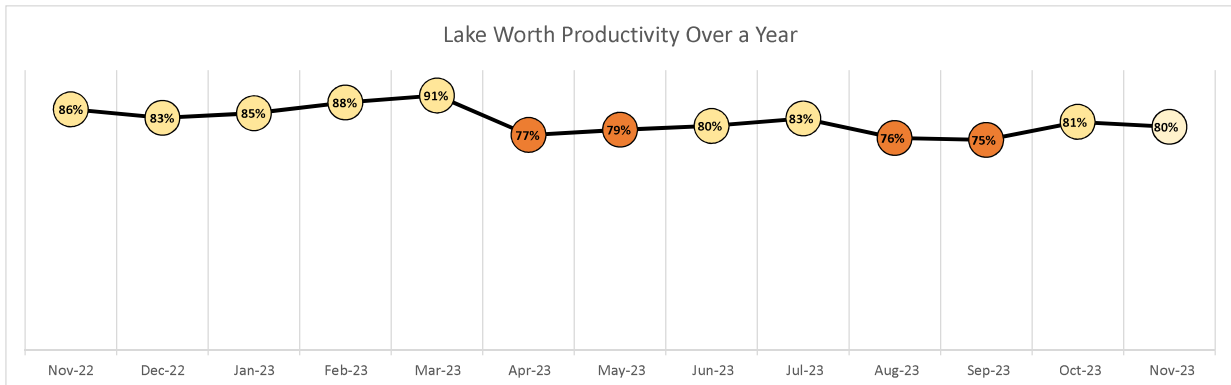
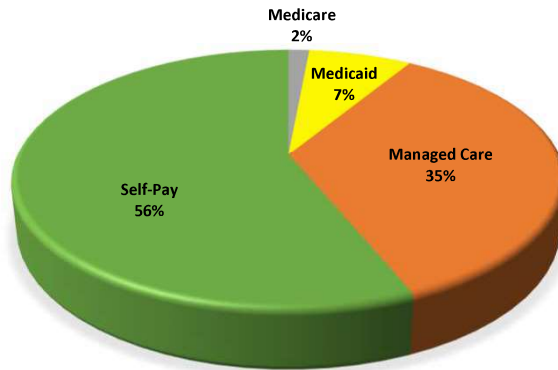
WOMEN'S HEALTH CARE						
FERWERDA, ANA, MD	18	6	108	82	76%	13.7
FINLEY, NICOLE, NP	16	15	240	202	84%	13.5
PROPHETE, JOYCE, MD	18	11.5	207	147	71%	12.8
WOMEN'S HEALTH CARE TOTALS		32.5	555	431	78%	

BEHAVIORAL HEALTH INTEGRATION						
JONES, KIARA, LCSW	10	17.5	131	123	94%	7.0
HART, SHAKIYLA, LCSW	10	2	8	8	100%	4.0
BH INTEGRATION TOTALS		19.5	139	131	94%	

GRAND TOTAL						
		98.5	1,447	1,154	79.8%	



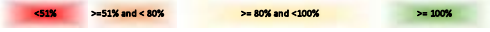
MEDICAL PAYER MIX



LANTANA

PRODUCTIVITY REPORT NOVEMBER 2023

AS 11/30/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ALFONSO PUENTES, RAMIRO, MD	18	14.5	261	217	83%	15.0
JEAN-JACQUES, FERNIQUE, NP	16	17.5	280	258	92%	14.7
MILLIEN, ELEONORE, APRN	8	1.0	16	13	81%	13.0
FIDLER, LISA, APRN	16	3.0	48	45	94%	15.0
NAVARRO, ELSY, NP	16	14.5	232	209	90%	14.4
ADULT CARE TOTALS		50.5	837	742	89%	

PEDIATRIC CARE						
DESSALINES, DUCLOS, MD	20	13.5	270	252	93%	18.7
LAZARO RIVERA, NANCY, MD	20	17.5	350	360	103%	20.6
NORMIL-SMITH, SHERLOUNE, MD	20	14.5	290	267	92%	18.4
HERNANDEZ GARCIA, JOSE, MD	20	7	126	95	75%	13.6
PEDIATRIC CARE TOTALS		52.5	1,036	974	94%	

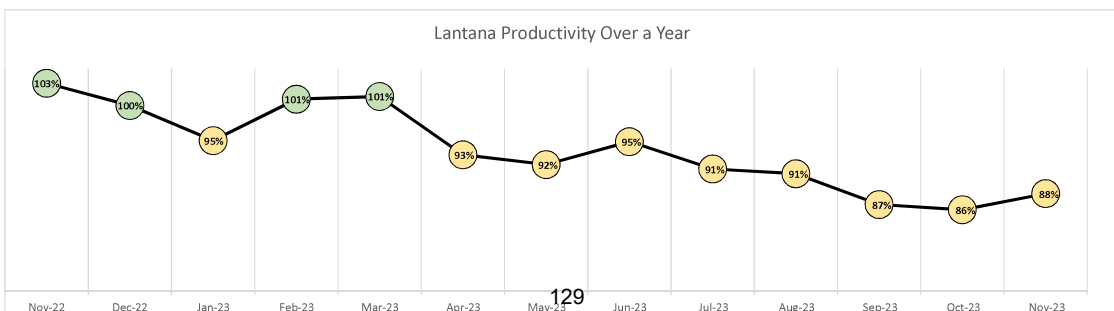
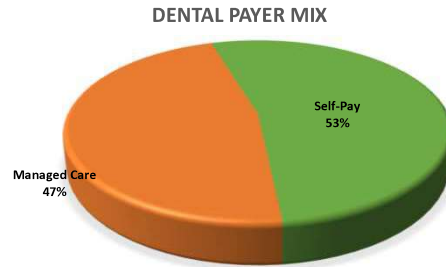
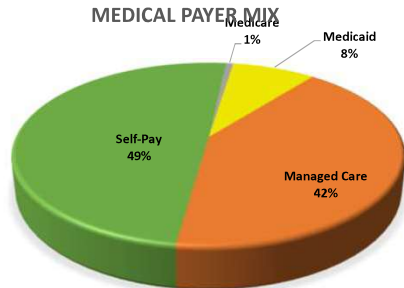
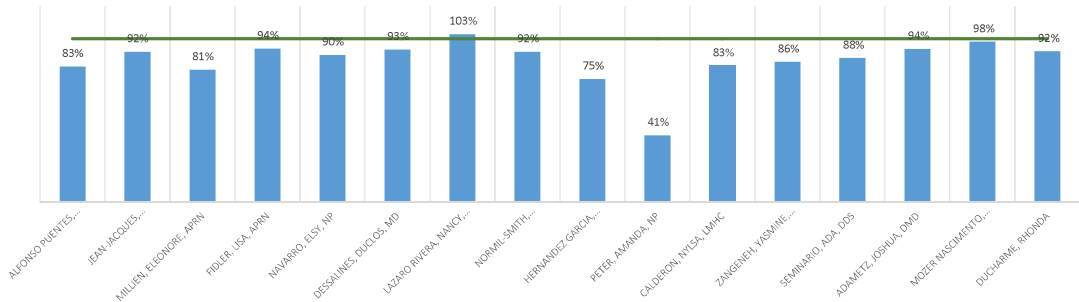
BEHAVIORAL HEALTH PSYCHIATRY						
PETER, AMANDA, NP	12	12.0	144	59	41%	4.9
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		12.0	144	59	41%	

BEHAVIORAL HEALTH INTEGRATION						
CALDERON, NYLSA, LMHC	10	14.5	145	121	83%	8.3
BH INTEGRATION TOTALS		14.5	145	121	83%	

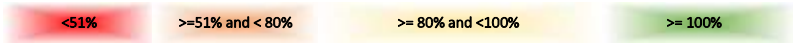
DENTAL						
ZANGENEH, YASMINE, DMD	16	18.5	296	254	86%	13.7
SEMINARIO, ADA, DDS	16	17.5	280	247	88%	14.1
ADAMETZ, JOSHUA, DMD	16	1.0	16	15	94%	15.0
DENTAL TOTALS		37	592	516	87%	

DENTAL HYGIENE						
MOZER NASCIMENTO, ARIANNE MILENA	8	13.5	108	106	98%	7.9
DUCHARME, RHONDA	16	8.5	104	96	92%	11.3
DENTAL HYGIENE TOTALS		22	212	202	95%	

GRAND TOTAL						
		189	2966	2614	88%	



LEWIS



PRODUCTIVITY REPORT NOVEMBER 2023

AS 11/30/2023 Based on Completed Appointments

ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
WILMOT, ALTHEA, NP	6	5.5	33	44	133%	8.0
ADULT CARE TOTALS			33	44	133%	

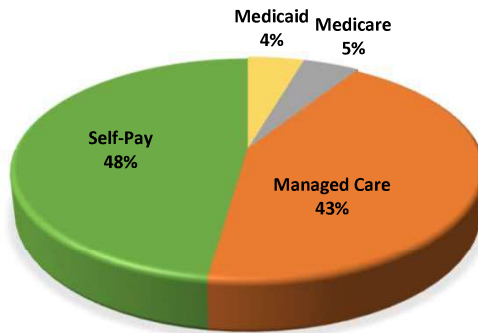
BEHAVIORAL HEALTH INTEGRATION						
BH INTEGRATION TOTALS		0	0	0		

BEHAVIORAL HEALTH ADDICTION						
BH ADDICTION TOTALS						

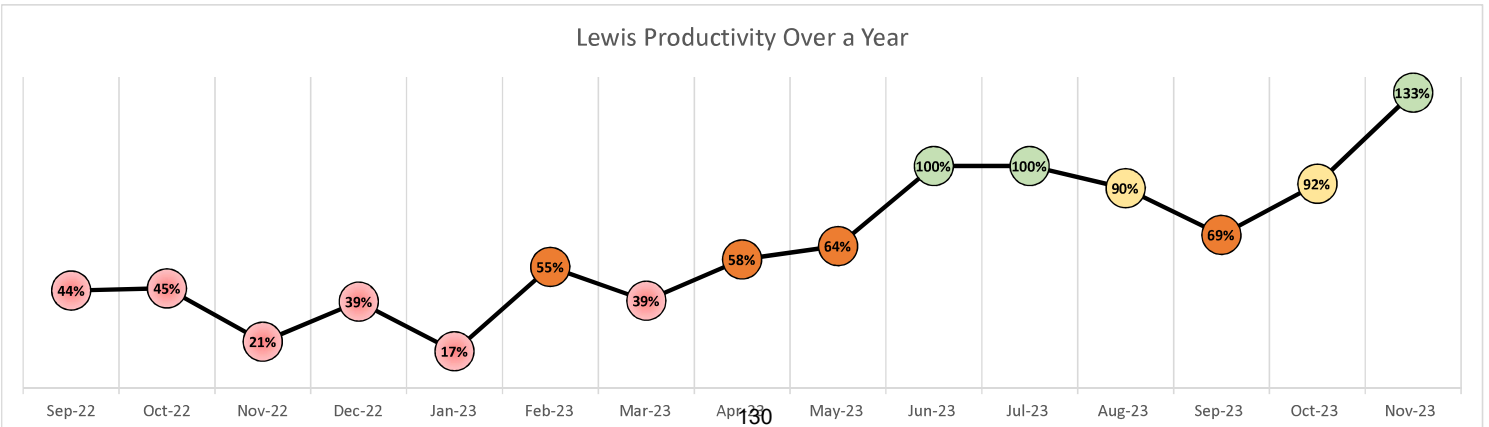
GRAND TOTAL		0	33	44	133%	
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MEDICAL PAYER MIX



Lewis Productivity Over a Year



MANGONIA

PRODUCTIVITY REPORT NOVEMBER 2023

AS 11/30/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
KOOPMAN, REBECCA SUE, PA	20	15.5	310	233	75%	15.0
FERNANDEZ SANCHEZ, MARCO, NP	20	16.5	330	276	84%	16.7
TUCKER, CHELSEA, PA	16	13.0	214	116	54%	8.9
ADULT CARE TOTALS		45.0	854	625	73%	

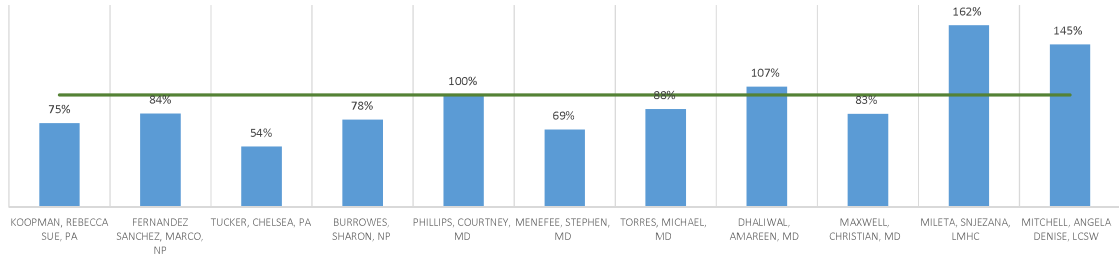
BEHAVIORAL HEALTH PSYCHIATRY						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
BURROWES, SHARON, NP	12	5.0	60	47	78%	9.4
PHILLIPS, COURTNEY, MD	12	2.0	3	3	100%	1.5
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		7.0	63	50	79%	

RESIDENT PSYCHIATRY						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
MENEFFEE, STEPHEN, MD	12	6.0	72	50	69%	8.3
TORRES, MICHAEL, MD	12	8.0	96	84	88%	10.5
DHALIWAL, AMAREEN, MD	12	4.5	54	58	107%	12.9
MAXWELL, CHRISTIAN, MD	12	5.5	66	55	83%	10.0
RESIDENT PSYCHIATRY TOTAL		24.0	288	247	86%	

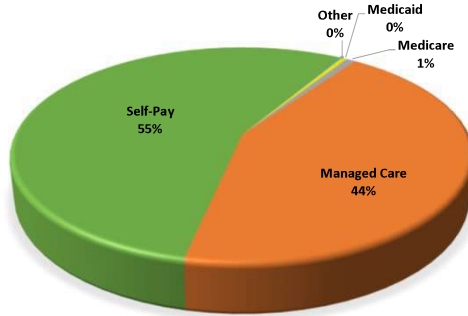
BEHAVIORAL HEALTH INTEGRATION						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
BH INTEGRATION TOTALS		0.0	0	0		

BEHAVIORAL HEALTH ADDICTION						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
MILETA, SNJEZANA, LMHC	10	18.0	180	292	162%	16.2
MITCHELL, ANGELA DENISE, LCSW	8	18.0	144	209	145%	11.6
BH ADDICTION TOTALS		36.0	324	501	155%	

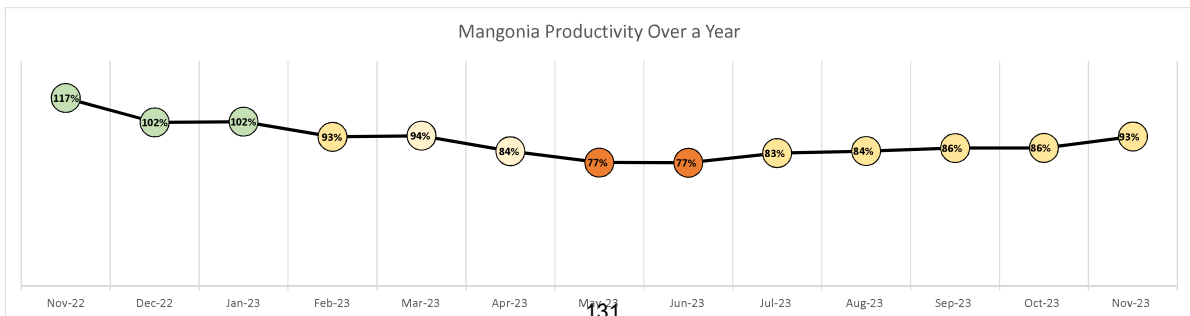
GRAND TOTAL						
		112.0	1,529	1,423	93%	



MEDICAL PAYER MIX



Mangonia Productivity Over a Year



WEST PALM BEACH

PRODUCTIVITY REPORT NOVEMBER 2023

AS 11/30/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
NOUKELAK, GERMAINE, MD	18	18.0	324	311	96%	17.3
FLOREZ, GLORIA MATILDE, MD	18	14.0	252	208	83%	14.9
STANEK, EWELINA, PA	16	14.5	232	195	84%	13.4
FIDLER, LISA, APRN	16	3.0	48	39	81%	13.0
TUCKER, CHELSEA, PA	16	4.5	72	57	79%	12.7
ADULT CARE TOTALS		54	928	810	87%	

PEDIATRIC CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
CLARKE-AARON, NOELLA, MD	20	18.5	370	322	87%	17.4
MARZOUCA, KISHA F., MD	20	17.5	350	312	89%	17.8
HERNANDEZ GARCIA, JOSE, MD	20	1	18	18	100%	18.0
PEDIATRIC CARE TOTALS		37	738	652	88%	

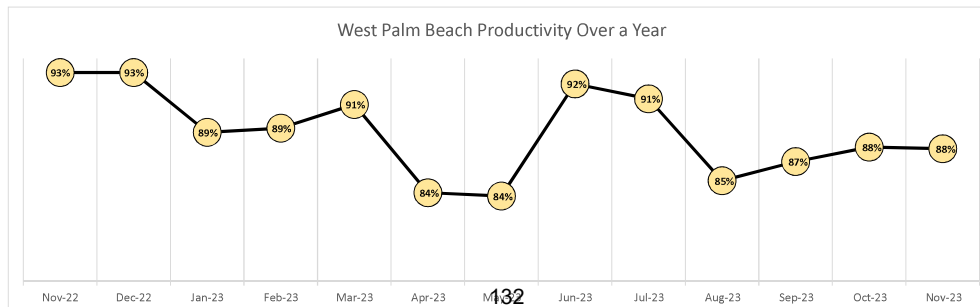
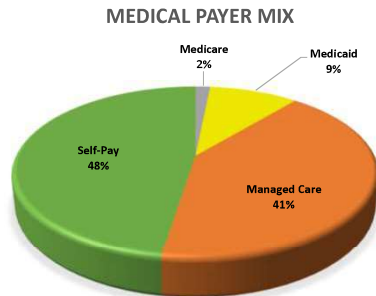
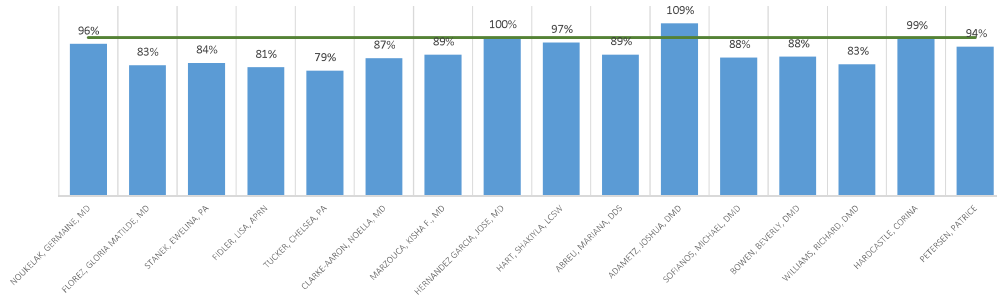
BEHAVIORAL HEALTH PSYCHIATRY						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
BURROWES, SHARON, NP	12	12.5	150	92	61%	7.4
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		12.5	150	92	61%	

BEHAVIORAL HEALTH INTEGRATION						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
HART, SHAKIYLA, LCSW	10	12.5	66	64	97%	5.1
BH INTEGRATION TOTALS		12.5	66	64	97%	

DENTAL						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ABREU, MARIANA, DDS	16	17.5	280	250	89%	14.3
ADAMETZ, JOSHUA, DMD	16	3.5	56	61	109%	17.4
SOFIANOS, MICHAEL, DMD	16	0.5	8	7	88%	14.0
BOWEN, BEVERLY, DMD	16	14.5	232	204	88%	14.1
WILLIAMS, RICHARD, DMD	16	17.5	280	233	83%	13.3
DENTAL TOTALS		53.5	856	755	88%	

DENTAL HYGIENE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
HARDCASTLE, CORINA	8	17.5	140	139	99%	7.9
PETERSEN, PATRICE	8 / 16 MDI	6.5	88	83	94%	12.8
GONZALEZ, NANCY	8 / 16 MDI	1.5	8	8	100%	5.3
DENTAL HYGIENE TOTALS		25.5	236	230	97%	

GRAND TOTAL	195	2974	2603	88%	
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MOBILE & PORT CLIN

<51%

>=51% and < 80%

>= 80% and <100%

>= 100%

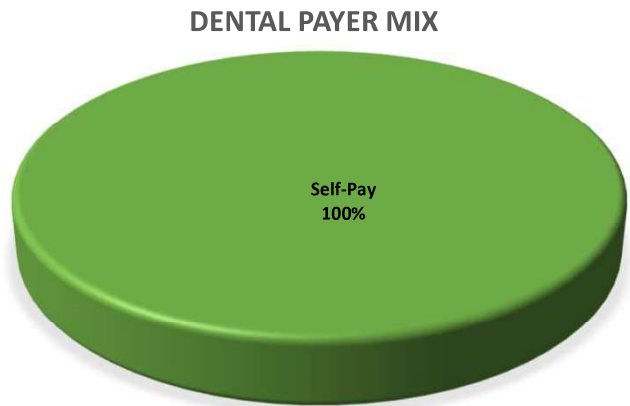
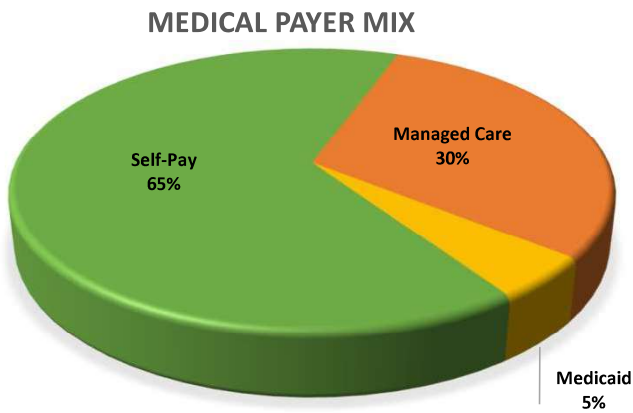
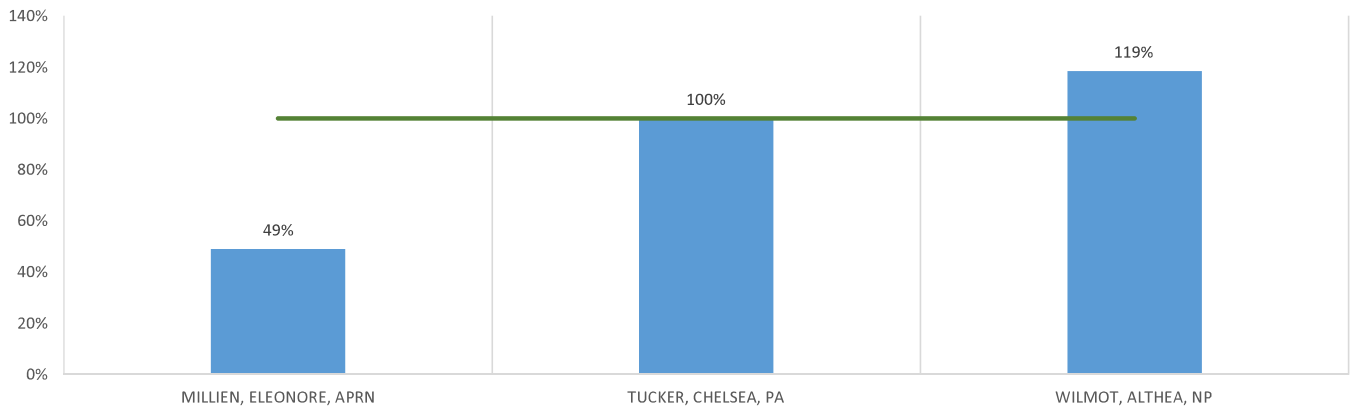
PRODUCTIVITY REPORT NOVEMBER 2023

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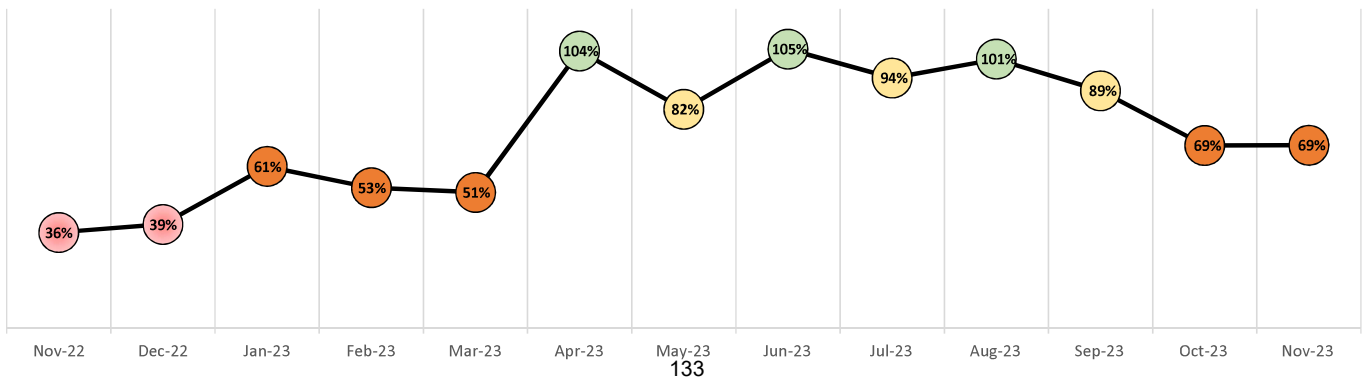
ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
MILLIEN, ELEONORE, APRN	6	12.5	100	49	49%	3.9
TUCKER, CHELSEA, PA	6	0.5	2	2	100%	4.0
WILMOT, ALTHEA, NP	6	4.5	27	32	119%	7.1
ADULT CARE TOTALS		18	129	83	64%	

DENTAL						
ALWEHAIB, ARWA, DDS	6	1.0	15	16	107%	16.0
DENTAL TOTALS		1.0	15	16	107%	

GRAND TOTAL		19	144	99	69%	
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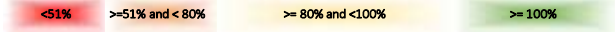
Mobile Productivity Over a Year



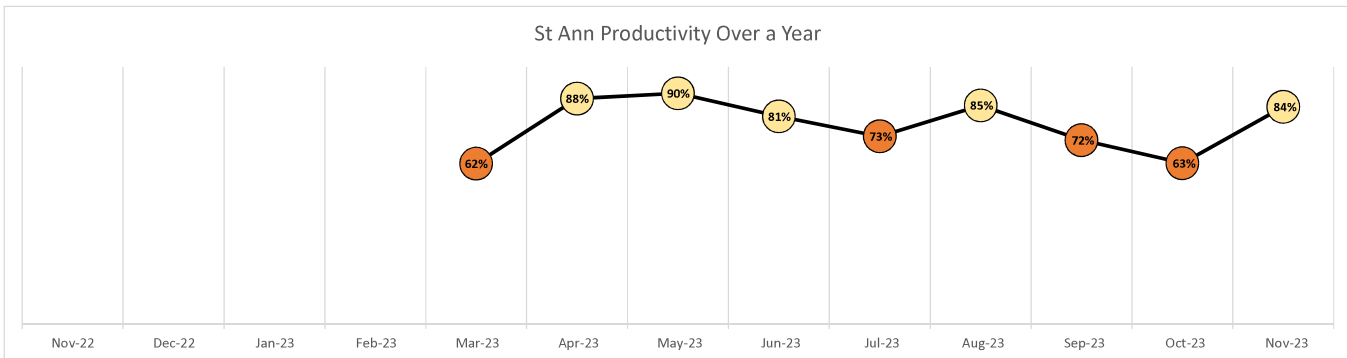
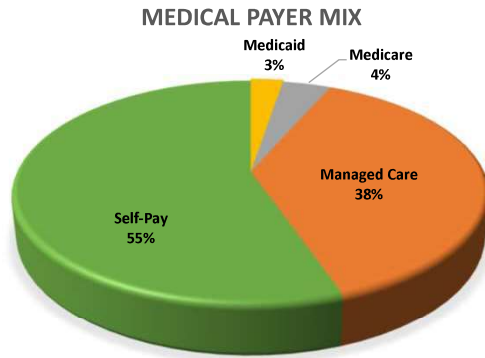
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PRODUCTIVITY REPORT NOVEMBER 2023

AS 11/30/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
WILMOT, ALTHEA, NP	6	4.0	24	11	46%	2.8
ADULT CARE TOTALS		4.0	24	11	46%	
BEHAVIORAL HEALTH INTEGRATION						
HIRSCH, KAREN, LCSW	8	11.0	66	65	98%	5.9
BH INTEGRATION TOTALS		11.0	66	65	98%	
BEHAVIORAL HEALTH PSYCHIATRY						
BH PSYCHIATRY TOTALS		0.0	0	0		
GRAND TOTAL						
		15.0	90.0	76.0	84%	





UDS PROVIDER LEVEL QUALITY MEASURES 2023

NATIONAL QUALITY LEADER METRICS

Load Date
12/4/2023

Filters

HEART HEALTH

Universe



Coronary Artery Disease (CAD): Lipid Thera..	5,116	84%						
Hypertension	6,720	71%						
Ischemic Vascular Disease (IVD)	989	77%						
Tobacco use Screening and Cessation Inter..	18,155	96%						

DIABETES

Adult Weight Screening and Follow Up	23,360	90%						
Diabetes: (HbA1c < 9%)	3,672	72%						
Diabetes: (HbA1c < 9%) Migrant	354	77%						

BEHAVIORAL HEALTH

Depression Remission	710	41%						
Patients Screened for Depression and Follo..	15,588	95%						
Pts Screened for Depression and F/U (Hom..	4,872	92%						

CHILDHOOD MEASURES

Childhood Immunization	492	42%						
Dental Sealants	616	96%						
Weight Screening and Counseling for childr..	4,566	93%						

HIV PREVENTION AND CARE

HIV Screening	22,282	53%						
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CANCER PREVENTION

Breast Cancer Screening	4,151	58%						
Cervical Cancer Screening	11,531	61%						
Colorectal Cancer Screening	10,124	44%						



**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

1. Description: Operations Report – November 2023

2. Summary:

This agenda item provides the following operations report for November 2023

- Clinic Productivity, Demographics, Payor Mix and Homeless and Agricultural Status.

3. Substantive Analysis:

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

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

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

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

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

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

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
December 13, 2023**

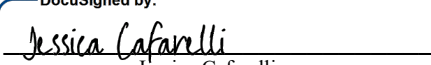
population of Creole-speaking patients at 32%, which is up 2% over last month. Boca continues to lead the rest of the centers with a population of Portuguese speaking patients at 12%. Other languages reported for November included French, Vietnamese, Bengali, Castilian and Russian.

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E0688 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

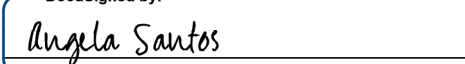
6. Recommendation:

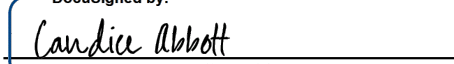
Staff recommends the Board approve the Operations Report for November 2023.

Approved for Legal sufficiency:

DocuSigned by:

 0CF6F7DB670643 Bernabe Icaza
 SVP & General Counsel

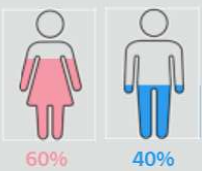
DocuSigned by:

 6F31AD3F82334F5 Angela Santos
 Director of Specialty Operations

DocuSigned by:

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

Patient Patients 8,490
Visits 11,723
New Patients 1,948

Monthly Productivity November 2023

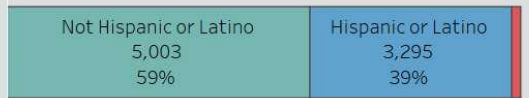
DEMOGRAPHICS



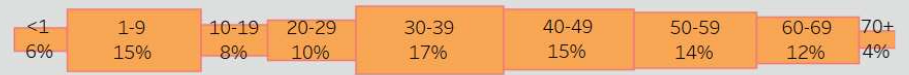
RACE



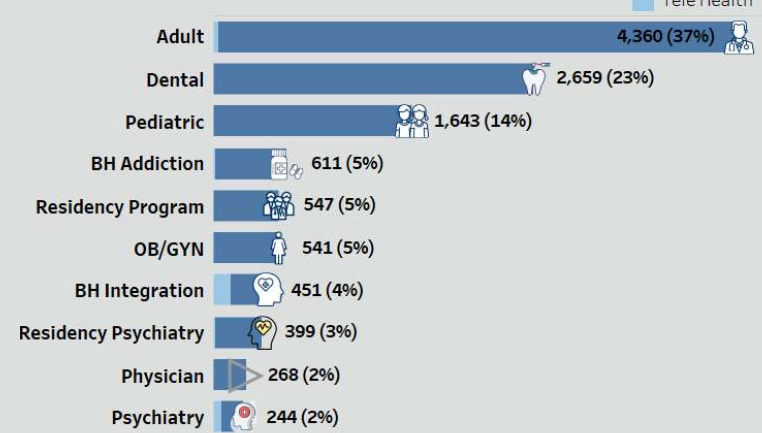
ETHNICITY



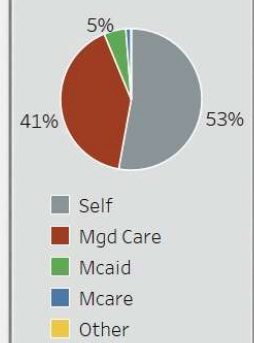
AGE GROUP



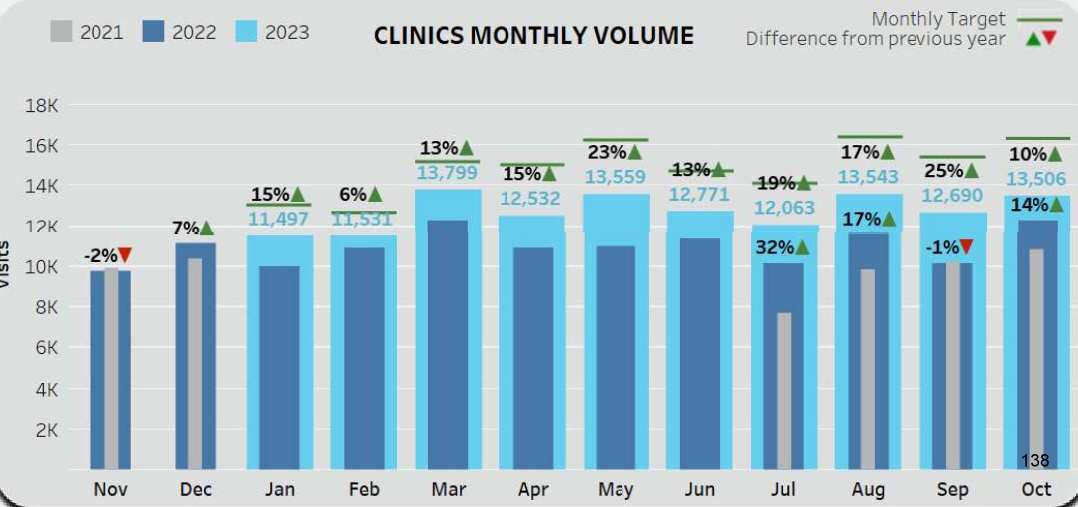
VISIT TYPE



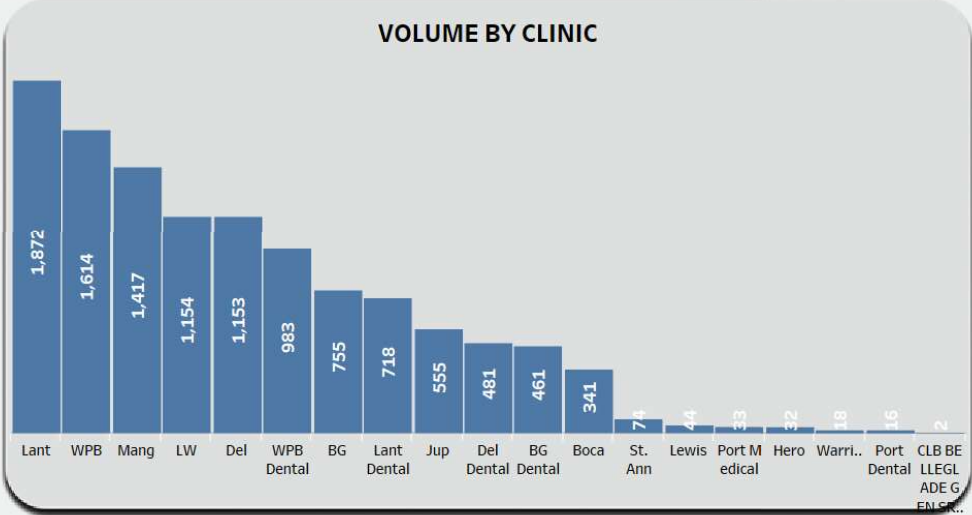
PAYOR MIX



CLINICS MONTHLY VOLUME



VOLUME BY CLINIC



HOMELESS BREAKDOWN BY CLINIC

11/1/2023 - 11/30/2023

Unique Patients

2,711

31.0%



Average Visits per Patient

Homeless

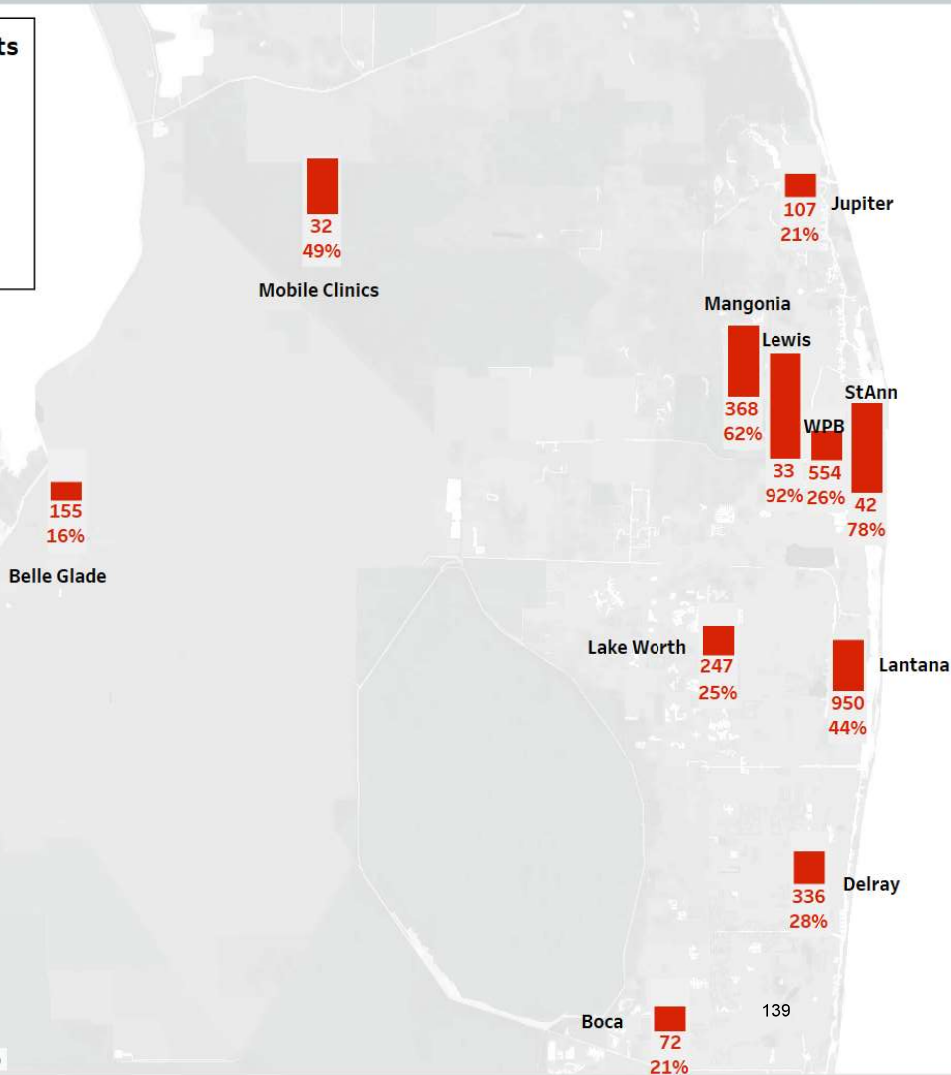
No

Yes



1.3

1.6



HOMELESS VISITS OVER TIME

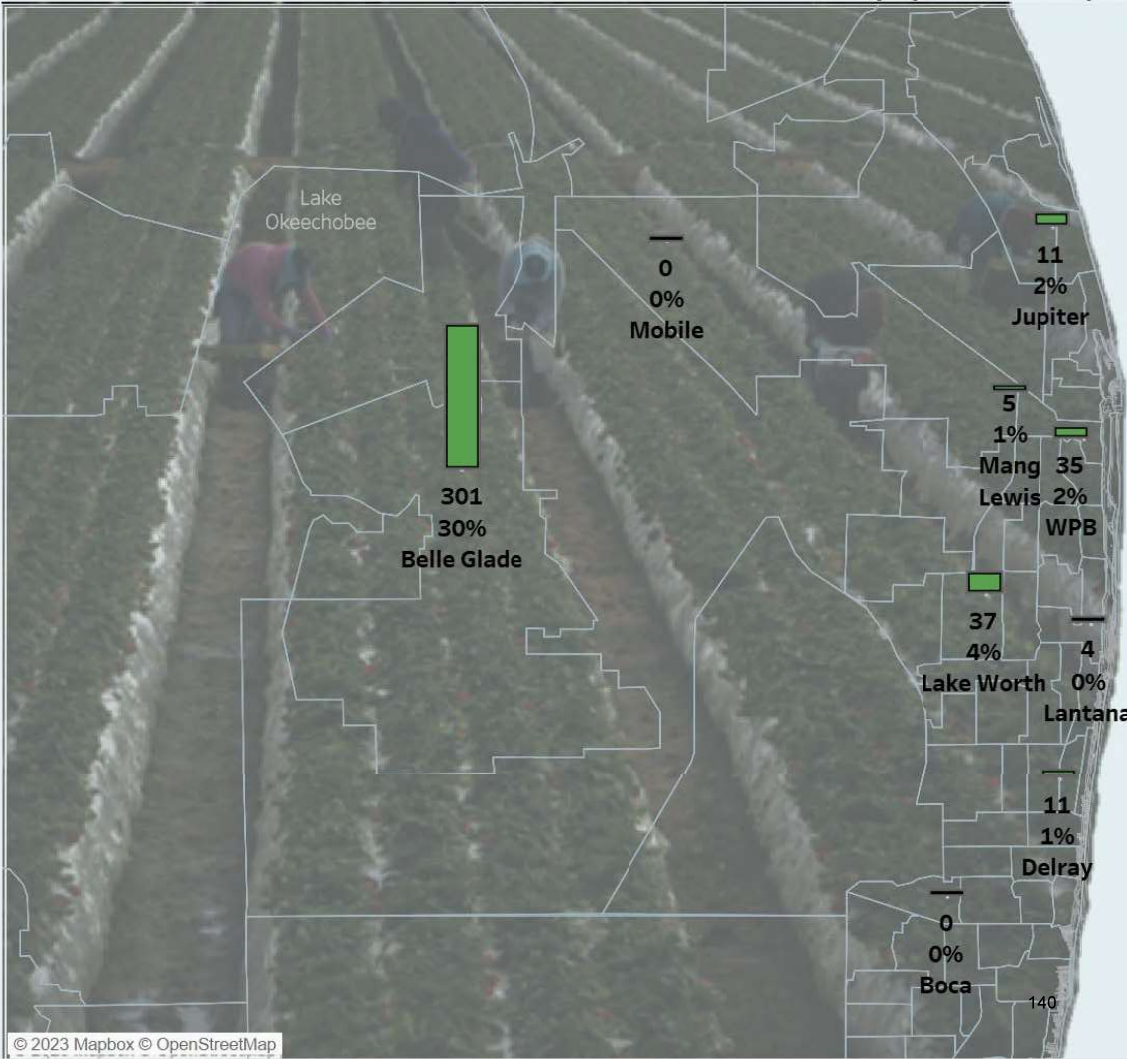


HOMELESS TYPE OVER TIME

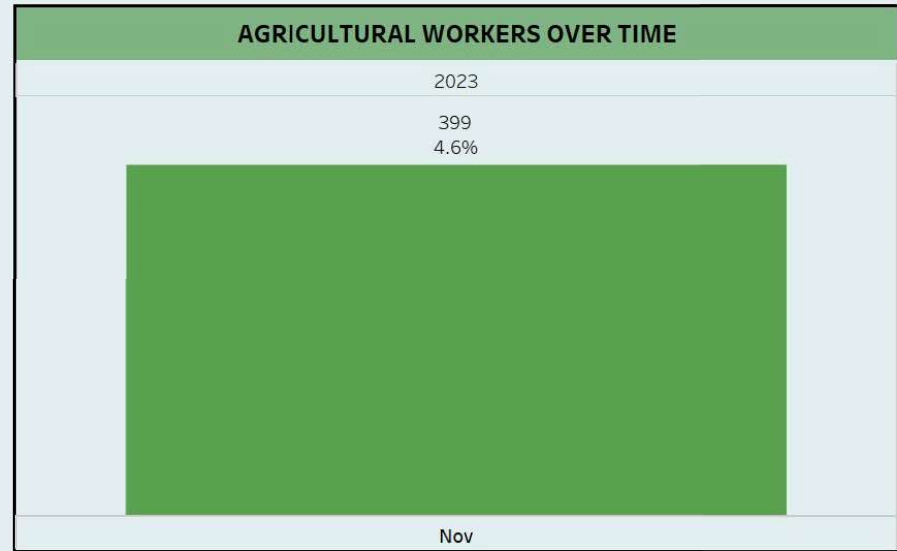


AGRICULTURAL WORKERS BREAKDOWN BY CLINIC

11/1/2023 - 11/30/2023




385
4.5%



LANGUAGE BREAKDOWN BY CLINIC

11/1/2023 - 11/30/2023

