



DISTRICT BOARD MEETING AGENDA
December 15, 2021 at 2:00PM
1515 N Flagler Drive, Suite101
West Palm Beach, FL 33401

Remote Participation Link:

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

Via Telephone dial-in access: (646) 558-8656 / Meeting ID: 550 789 5592 / Password: 946503

1. Call to Order – Les Daniels, Chair

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

2. Agenda Approval

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

3. Awards, Introductions and Presentations

- A. Annual Institutional Review Executive Summary (Dr. Dorce-Medard)

4. Disclosure of Voting Conflict

5. Public Comment

6. Meeting Minutes

- A. **Staff Recommends a MOTION TO APPROVE:**
Joint Board and Finance & Audit Committee Meeting Minutes of September 16, 2021 [Pages 1-8]
- B. **Staff Recommends a MOTION TO APPROVE:**
Board Meeting Minutes of September 28, 2021 [Pages 9-14]

6. Meeting Minutes (Continued)

- C. **Staff Recommends a MOTION TO APPROVE:**
Meeting Minutes of the TRIM Public Hearing of September 16, 2021
[Pages 15-17]
- D. **Staff Recommends a MOTION TO APPROVE:**
Meeting Minutes of the TRIM Public Hearing of September 28, 2021
[Pages 18-20]

7. Committee Reports

- 7.1 Finance and Audit Committee – (Commissioner Sabin)
- 7.2 Good Health Foundation Committee – (No Report)
- 7.3 Quality, Patient Safety and Compliance Committee – (Commissioner Alonso)
- 7.4 Lakeside Health Advisory Board – (Commissioner Alonso)
- 7.5 Primary Care Clinics Board – (Commissioner Jackson-Moore)

8. Consent Agenda – Motion to Approve Consent Agenda Items

HEALTH CARE DISTRICT

A. **ADMINISTRATION**

- 8A-1 **RECEIVE AND FILE:**
December 2021 Internet Posting of District Public Meeting
<https://www.hcdpbc.org/EventViewTrainingDetails.aspx?Bck=Y&EventID=344&m=0|0&DisplayType=C>
- 8A-2 **RECEIVE AND FILE**
Health Care District Board Attendance [Page 21]
- 8A-3 **RECEIVE AND FILE:**
Health Care District Financial Statements September 2021 (Candice Abbott)
[Pages 22-71]
- 8A-4 **RECEIVE AND FILE:**
Board Meeting Schedule for 2022 (Darcy Davis) [Pages 72-73]
- 8A-5 **Staff Recommends a MOTION TO APPROVE:**
Clinic Board Bylaws Change (Tom Cleare) [Pages 74-77]
- 8A-6 **Staff Recommends a MOTION TO APPROVE:**
Legal Settlement (Bernabe Icaza) [Pages 78-79]
- 8A-7 **RECEIVE AND FILE:**
Compliance, Privacy and Ethics Work Plan FY22 (Heather Bokor) [Pages 80-88]

8. Consent Agenda (Continued)

DISTRICT HOSPITAL HOLDINGS, INC.

B. ADMINISTRATION

8B-1 Staff Recommends a MOTION TO APPROVE:

Medical Staff Appointment(s) for Lakeside Medical Center (Belma Andric, MD)
[Pages 89-90]

8B-2 Staff Recommends a MOTION TO APPROVE:

Proposed Revisions to the Lakeside Medical Center's Medical Executive
Committee Bylaws, Rules and Regulations (Karen Harris) [Pages 91-94]

9. Regular Agenda

C. ADMINISTRATION

9C-1 Staff Recommends a MOTION TO APPROVE:

Sponsored Programs Award Recommendations (Tom Cleare) [Pages 95-99]

9C-2 RECEIVE AND FILE:

Recent Regulatory Updates and Industry Enforcement Activity (Heather Bokor)
[Pages 100-121]

9C-3 Staff Recommends a MOTION TO APPROVE:

Critical Care On-call Services Agreement. (Karen Harris) [Pages 122-123]

10. CEO Comments

11. HCD Board Member Comments

12. Establishment of Upcoming Board Meetings

March 24, 2022

- 9:00AM, Health Care District Strategic Planning followed by the Health Care District Board Meeting

June 15, 2022

- 2:00PM, Joint Meeting with the Finance & Audit Committee

(1st) September Meeting (Date TBD)

- 4:00PM, Joint Meeting with the Finance & Audit Committee
- 5:15PM, Truth In Millage (TRIM) Meeting

(2nd) September Meeting (Date TBD)

- 4:00PM, Health Care District Board Annual Meeting (Officer Elections)
- 5:15PM, Truth In Millage (TRIM) Meeting

December 14, 2022

- 2:00PM, Health Care District Board Meeting

13. Motion to Adjourn



**HEALTH CARE DISTRICT OF
PALM BEACH COUNTY
BOARD OF COMMISSIONERS AND FINANCE & AUDIT COMMITTEE
SUMMARY MEETING MINUTES
September 16, 2021 at 4:00PM
1515 N Flagler Drive, Suite101
West Palm Beach, FL 33401**

Remote Participation Link:

<https://zoom.us/j/5507895592?pwd=REZ4TWtYUXowQWNpWTBaVXRzZ1dDOT09>

Via Telephone dial-in access: (646) 558-8656 / Meeting ID: 550 789 5592 / Password: 946503

1. Call to Order

Les Daniels called the meeting to order.

A. Roll Call

Health Care District Board members present included: Les Daniels, Chair; Nancy Banner, Vice Chair; Sean O'Bannon, Secretary; Dr. Alonso; Ed Sabin and Tammy Jackson-Moore. Cory Neering was absent.

Finance and Audit Committee members present: Michael Burke; Mark Marciano. Joseph Gibbons and Sophia Eccleston. Richard Sartory was absent.

Staff present included: Darcy Davis, Chief Executive Officer; Dr. Belma Andric, Chief Medical Officer; Bernabe Icaza, General Counsel; Karen Harris, VP of Field Operations; Steven Hurwitz, Chief Administrative Officer; Candice Abbott, Chief Financial Officer; Patty Lavelly, Chief Information & Digital Officer; Heather Bokor, Chief Compliance & Privacy Officer.

Recording/Transcribing Secretary: Heidi Bromley

B. Invocation

Ms. Davis led the invocation.

C. Pledge of Allegiance

The Pledge of Allegiance was recited.

Health Care District Board and Finance & Audit Committee
Summary Meeting Minutes
September 16, 2021
Page 2 of 8

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

2. Agenda Approval

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

CONCLUSION/ACTION: Commissioner O'Bannon made a motion to approve the agenda. The motion was duly seconded by Commissioner Alonso. There being no opposition, the motion passed unanimously.

3. Awards, Introductions and Presentations

- A. Budget FY 2022– Version 2

Ms. Abbott presented the Board with the Budget FY 2022.

- B. OB Service Line at Lakeside Medical Center

Ms. Harris discussed the OB Service Line at Lakeside Medical Center.

- C. Epic Journey Go-Live Update

Ms. Lavelly provided the Board with an update on EPIC.

4. Disclosure of Voting Conflict

5. Public Comment

6. Meeting Minutes

- A. **Staff Recommends a MOTION TO APPROVE:**
Joint Board and Finance & Audit Committee Meeting Minutes of June 29, 2021.

CONCLUSION/ACTION: Commissioner O'Bannon made a motion to approve the Joint Board and Finance & Audit Committee Meeting Minutes of June 29, 2021 as presented. The motion was duly seconded by Commissioner Alonso. There being no objection, the motion passed unanimously.

Health Care District Board and Finance & Audit Committee
Summary Meeting Minutes
September 16, 2021
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7. Committee Reports

7.1 Finance and Audit Committee – (No Report)

7.2 Good Health Foundation Committee – (No Report)

7.3 Quality, Patient Safety and Compliance Committee – (No Report)

7.4 Lakeside Health Advisory Board – (Commissioner Alonso)

Dr. Alonso stated that The Lakeside Health Advisory Board met on September 1st 2021. Ms. Harris introduced Heather Bokor and Bernabe Icaza to the Board. Ms. Harris discussed Community Engagement related to OB services and working with community partners to advertise the OB Services. Ms. Moreland gave an update on the new MRI machine, an update to the ASCOM system and an update on the ambulance. Dr. Dorce-Medard gave an update on the COVID data specific to Lakeside. She highlighted the positivity percentage, the increase that was noted from July to August in the positivity rate and highlighted the increase in the age category 31-40.

7.5 Primary Care Clinics Board – (Commissioner Jackson-Moore)

Ms. Jackson – Moore stated that OD2A is a federal project led by the Centers for Disease Control and Prevention (CDC). We have recently been awarded an additional \$251,450 to add six new positions, including two additional Recovery Coaches, one Lead Recovery Coach, one Care Coordination Specialist, and one Lead Care Coordination Specialist to the program. The grant is awarded through August 2021 with an expectation of renewal for an additional year with all eight positions funded. FACHC (Florida Association of Community Health Centers) has granted the C. L. Brumback Primary Care Clinics with \$212,862 as a part of its efforts to strengthen the safety net across the state. This program ensures the viability and capacity for providing primary care services to low-income and uninsured individuals where there is great need. On the front lines of the COVID-19 pandemic, CDR's team of disaster health and medical experts are assisting state and local governments respond to and manage health crises. Contract was executed for CDR to perform COVID-19 testing in Belle Glade starting this month.

CONCLUSION/ACTION: Commissioner Jackson-Moore made a motion to approve the Consent Agenda. The motion was duly seconded by Commissioner Sabin. There being no objection, the motion passed unanimously.

8. Consent Agenda – Motion to Approve Consent Agenda Items

Health Care District Board and Finance & Audit Committee
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HEALTH CARE DISTRICT

A. ADMINISTRATION

8A-1 RECEIVE AND FILE:

September 2021 Internet Posting of District Public Meeting

<https://www.hcdpbc.org/EventViewTrainingDetails.aspx?Bck=Y&EventID=423&m=0|0&DisplayType=C>

8A-2 RECEIVE AND FILE:

Health Care District Board Attendance

8A-3 RECEIVE AND FILE:

Health Care District Financial Statements July 2021

8A-4 RECEIVE AND FILE:

Good Health Foundation Tax Form 990

8A-5 Staff Recommends a MOTION TO APPROVE:

Medical Staff Appointment(s) for Lakeside Medical Center

8A-6 Staff Recommends a MOTION TO APPROVE:

Re-credentialing and Privileging of Healey Center Practitioner

9. Regular Agenda

A. ADMINISTRATION

9A-1 Staff Recommends a MOTION TO APPROVE:

Low Income Pool Participation for Palm Beach County Hospitals and Federally Qualified Health Centers

Ms. Abbott requested the Board approve funding the 2021-22 Low Income Pool Program IGT funding for the Federally Qualified Health Centers and authorize the CEO to execute the required agreements.

CONCLUSION/ACTION: Commissioner O'Bannon made a motion to approve funding the Low Income Pool Participation for Palm Beach County Hospitals and Federally Qualified Health Centers. The motion was duly seconded by Commissioner Jackson-Moore. There being no objection, the motion passed unanimously.

Health Care District Board and Finance & Audit Committee
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9A-2 Staff Recommends a MOTION TO APPROVE:

Local Provider Participation Fund for the Directed Payment Program

Ms. Abbott presented the Board with an overview of the Health Care District of Palm Beach County's role as the administrator of the Local Provider Participation Fund for the Medicaid Directed Payment Program as requested by PBC Board of Commissioners.

CONCLUSION/ACTION: Commissioner Banner made a motion to approve the Local Provider Participation Fund for the Directed Payment Program. The motion was duly seconded by Commissioner Alonso. There being no objection, the motion passed unanimously.

9A-3 Staff Recommends a MOTION TO APPROVE:

Medicaid Directed Payment Program – Lakeside Medical Center

Ms. Abbott requested the Board approve funding the 2021-22 DPP IGT for Lakeside Medical Center and authorize the CEO or CFO to execute the required agreements.

CONCLUSION/ACTION: Commissioner Banner made a motion to approve the Medicaid Directed Payment Program. The motion was duly seconded by Commissioner O'Bannon. There being no objection, the motion passed unanimously.

9A-4 Staff Recommends a MOTION TO APPROVE:

Indirect Medical Education Program

Ms. Abbott requested the Board approve funding the Intergovernmental Transfer (IGT) required for participation in the retroactive 2020-2021 and the current 2021-22 Indirect Medical Education Program (IME).

CONCLUSION/ACTION: Commissioner Banner made a motion to approve the Indirect Medical Education Program. The motion was duly seconded by Commissioner Jackson-Moore. There being no objection, the motion passed unanimously.

Health Care District Board and Finance & Audit Committee
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9A-5 **RECEIVE AND FILE:**

Internal Audit Update

Ms. Bittar provided the Board with an internal audit update and a summary of one of the completed audits (the vendor risk/vendor management). She reviewed changes to the internal audit work plan and completed items.

CONCLUSION/ACTION: Received and filed.

9A-6 **Staff Recommends a MOTION TO APPROVE:**

Lease Agreement – Delray Primary Care Clinic

Dr. Andric requested the approval of the lease agreement to move the existing Delray Beach clinic to 200 Congress Park Drive Suite 100, Delray Beach, FL 33445, which is located across the street from our existing clinic. Once improvements are completed in approximately nine months, we would move our current Delray Beach Clinic services to this new location.

CONCLUSION/ACTION: Commissioner Jackson-Moore made a motion to approve the Delray Beach Lease Agreement. The motion was duly seconded by Commissioner O'Bannon. There being no objection, the motion passed unanimously.

9A-7 **Staff Recommends a MOTION TO APPROVE:**

Lease Agreement – West Boca Primary Care Clinic

Dr. Andric requested the approval of the lease agreement to move the existing West Boca site to 9960 S Central Park Blvd, Suite 450, Boca Raton, FL 33428, which is located two miles from our existing clinic. Once improvements are completed in approximately six months, we would move our current West Boca Clinic services to this new location.

CONCLUSION/ACTION: Commissioner Jackson-Moore made a motion to approve the West Boca Lease Agreement. The motion was duly seconded by Commissioner Alonso. There being no objection, the motion passed unanimously.

Health Care District Board and Finance & Audit Committee
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9A-8 Staff Recommends a MOTION TO APPROVE:

Lease Agreement – Mangonia Park Primary Care Clinic

Dr. Andric requested the approval of the lease agreement to move the existing Mangonia clinic to 2051 N 45th Street, Suite 300, West Palm Beach, FL 33407, which is located on the same campus as our existing clinic. Once improvements are completed in approximately six months, we would move our current Mangonia services to this new location.

CONCLUSION/ACTION: Commissioner Jackson-Moore made a motion to approve the Mangonia Park Lease Agreement. The motion was duly seconded by Commissioner Alonso. There being no objection, the motion passed unanimously.

10. CEO Comments

Ms. Davis congratulated Mike Burke as Superintendent of Palm Beach County School District.

Ms. Davis congratulated Sophia Eccleston who received a diamond award from the Greater Boca Chamber.

Ms. Davis welcomed Joe Gibbons back from a triple bypass.

Ms. Davis stated that the CL Brumback Primary Care Clinics achieved gold medal status from HRSA recognizing them for being top 10% in the country for their quality. A special recognition was provided for their outreach response to COVID.

11. Finance & Audit Committee Member Comments

12. HCD Board Member Comments

13. Establishment of Upcoming Board Meetings

September 28, 2021

- 4:00PM, Health Care District Board Annual Meeting (Officer Elections)
- 5:15PM, Truth In Millage (TRIM) Meeting

December 15, 2021

- 2:00PM, Health Care District Board Meeting

Health Care District Board and Finance & Audit Committee
Summary Meeting Minutes
September 16, 2021
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14. Motion to Adjourn

There being no further business, the meeting was adjourned.

Sean O'Bannon, Secretary
Health Care District Board

Date

Edward Sabin, Chair
Finance & Audit Committee

Date



**HEALTH CARE DISTRICT OF
PALM BEACH COUNTY
BOARD OF COMMISSIONERS MEETING
SUMMARY MINUTES
September 28, 2021 at 4:00PM
1515 N Flagler Drive, Suite101
West Palm Beach, FL 33401**

Remote Participation Link:

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

Via Telephone dial-in access: (646) 558-8656 / Meeting ID: 550 789 5592 / Password: 946503

1. Call to Order

Les Daniels called the meeting to order.

A. Roll Call

Health Care District Board members present included: Les Daniels, Chair; Nancy Banner, Vice Chair; Sean O'Bannon, Secretary; Dr. Alonso; Cory Neering (Virtual) ; Ed Sabin (Virtual) and Tammy Jackson-Moore.

Staff present included: Darcy Davis, Chief Executive Officer; Dr. Belma Andric, Chief Medical Officer; Bernabe Icaza, General Counsel; Karen Harris, VP of Field Operations; Steven Hurwitz, Chief Administrative Officer; Candice Abbott, Chief Financial Officer; Patty Lavelly, Chief Information & Digital Officer; Heather Bokor, Chief Compliance & Privacy Officer.

Recording/Transcribing Secretary: Heidi Bromley

B. Invocation

Ms. Davis led the invocation.

C. Pledge of Allegiance

The Pledge of Allegiance was recited.

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

Health Care District Board
Summary Meeting Minutes
September 28, 2021
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2. Agenda Approval

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

CONCLUSION/ACTION: Commissioner Banner made a motion to approve the agenda. The motion was duly seconded by Commissioner Alonso. There being no opposition, the motion passed unanimously.

3. Awards, Introductions and Presentations

- A. Recognition of Cory Neering

Ms. Davis recognized Cory Neering for his four years of service on the Health Care District Board.

- B. Health Care District Community COVID Vaccination Initiatives

Dr. Andric provided a presentation to the Board regarding Community COVID Initiatives.

- C. Conflict of Interest Education and Information Update

Ms. Bokor provided the Board with a Conflict of Interest Education and Information Update.

4. Disclosure of Voting Conflict

5. Public Comment

6. Election of Officers

- A. Chair

CONCLUSION/ACTION: Commissioner Banner made a motion to keep Les Daniels as Chair. The motion was duly seconded by Commissioner Alonso. There being no opposition, the motion passed unanimously.

Roll Call Vote:

Commissioner Daniels	Yes
Commissioner Banner	Yes
Commissioner O'Bannon	Yes

Health Care District Board
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Commissioner Alonso	Yes
Commissioner Neering	Yes
Commissioner Sabin	Yes
Commissioner Jackson-Moore	Yes

B. Vice Chair

CONCLUSION/ACTION: Commissioner Banner made a motion to elect Dr. Alonso as Vice Chair. The motion was duly seconded by Commissioner O'Bannon. There being no opposition, the motion passed unanimously.

Roll Call Vote:

Commissioner Daniels	Yes
Commissioner Banner	Yes
Commissioner O'Bannon	Yes
Commissioner Alonso	Yes
Commissioner Neering	Yes
Commissioner Sabin	Yes
Commissioner Jackson-Moore	Yes

C. Secretary

CONCLUSION/ACTION: Commissioner Banner made a motion to elect Ed Sabin as Secretary. The motion was duly seconded by Commissioner Jackson-Moore. There being no opposition, the motion passed unanimously.

Roll Call Vote:

Commissioner Daniels	Yes
Commissioner Banner	Yes
Commissioner O'Bannon	Yes
Commissioner Alonso	Yes
Commissioner Neering	Yes
Commissioner Sabin	Yes
Commissioner Jackson-Moore	Yes

Health Care District Board
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September 28, 2021
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7. Committee Reports

7.1 Finance and Audit Committee Report – (No Report)

7.2 Good Health Foundation Committee Report – (No Report)

7.3 Quality, Patient Safety and Compliance Committee

Commissioner Alonso stated that we had the Quality, Patient Safety and Compliance Committee meeting prior to the Board meeting and it was a wonderful meeting. New quality indicators were presented. Several questions were answered....it was a very productive meeting.

7.4 Lakeside Health Advisory Board Report – (No Report)

7.5 Primary Care Clinics Board Report – (No Report)

8. Consent Agenda – Motion to Approve Consent Agenda Items

CONCLUSION/ACTION: Commissioner Alonso made a motion to approve the Consent Agenda. The motion was duly seconded by Commissioner Jackson-Moore. There being no objection, the motion passed unanimously.

HEALTH CARE DISTRICT

A. ADMINISTRATION

8A-1 RECEIVE AND FILE:

September 2021 Internet Posting of District Public Meeting

<https://www.hcdpbc.org/EventViewTrainingDetails.aspx?Bck=Y&EventID=344&m=0|0&DisplayType=C>

8A-2 RECEIVE AND FILE

Health Care District Board Attendance

8A-3 RECEIVE AND FILE:

Lakeside Medical Center Confidential Public Records Request Quarterly Report

8A-4 Staff Recommends a MOTION TO APPROVE:

Insurance Broker Services Agreement

Health Care District Board
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September 28, 2021
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9. Regular Agenda

A. ADMINISTRATION

9A-1 Staff Recommends a MOTION TO APPROVE:

Board Resolution Regarding Policy and Procedures

Mr. Icaza explained as part of the District's efforts to streamline and improve operational practices, this Resolution clarifies the distinction between Board level guidance and the CEO's authority to draft, approve and implement administrative, clinical and operational policy and procedures. The Board has set forth specific guidance through its policy setting and resolution adoption which all Operational, Administrative and Clinical Policies and Procedures will support.

CONCLUSION/ACTION: Commissioner Alonso made a motion to approve the Board Resolution regarding Policy and Procedures. The motion was duly seconded by Commissioner Banner. There being no objection, the motion passed unanimously.

9A-2 Staff Recommends a MOTION TO APPROVE:

District Fund Balance Policy

Ms. Abbott recommended that we maintain the Stabilization Fund balance in a committed fund and increase the fund balance to 25% of total annual expenditures to ensure the District has an adequate "rainy day" policy in the event of an economic downturn, unexpected budget shortfall and any other material unforeseen event.

CONCLUSION/ACTION: Commissioner Alonso made a motion to approve the District Fund Balance Policy. The motion was duly seconded by Commissioner O'Bannon. There being no objection, the motion passed unanimously.

9A-3 Staff Recommends a MOTION TO APPROVE:

Board Resolution Setting the Stabilization Fund Balance for FY22

Ms. Abbott explained that in efforts to maintain an adequate "rainy day" fund, the District seeks to set the minimum fund balance for FY 2022 to 25% of Annual Expenditures or \$67,253,000 based on uncertainties in the current healthcare economic environment. Staff recommends the Board approve the Resolution to set the stabilization fund balance at 25% or the amount of \$67,253,000 for FY 2022.

CONCLUSION/ACTION: Commissioner Jackson-Moore made a motion to approve the Board Resolution Setting the Stabilization Fund Balance for

Health Care District Board
Summary Meeting Minutes
September 28, 2021
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FY2022. The motion was duly seconded by Commissioner Jackson-Moore. There being no objection, the motion passed unanimously.

10. CEO Comments

11. HCD Board Member Comments

Commissioner O'Bannon thanked Mr. Neering for his service and wished him luck in his new adventures.

Commissioner Alonso stated that it has been a pleasure working with Mr. Neering on this Board. Hopefully he'll stick around.

Commissioner Banner thanked Mr. Neering for everything. You have added so much value to this Board and it's appreciated.

Commissioner Neering thanked Darcy and the Board of Commissioners for their leadership. It has been an honor and pleasure to serve on the Health Care District Board. I've been amazed by the level of commitment from the team throughout my time on the Board. I now understand how important leadership is. Thank you to all.

12. Establishment of Upcoming Board Meetings

December 15, 2021

- 2:00PM, Health Care District Board Meeting

13. Motion to Adjourn

There being no further business, the meeting was adjourned.

Ed Sabin, Secretary

Date



**HEALTH CARE DISTRICT OF PALM BEACH COUNTY
TRUTH IN MILLAGE (TRIM) PUBLIC HEARING MINUTES
September 16, 2021 at 5:15p.m.
1515 N Flagler Drive, Suite 101
West Palm Beach, FL 33401**

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

Via Telephone dial-in access: (646) 558-8656 / Meeting ID: 550 789 5592 / Password: 946503

1. Call to Order

Les Daniels called the meeting to order.

A. Roll Call

Health Care District Board members present included: Les Daniels, Chair; Nancy Banner, Vice Chair; Sean O’Bannon, Secretary; Dr. Alonso; Ed Sabin and Tammy Jackson-Moore. Cory Neering was absent.

Staff present included: Darcy Davis, Chief Executive Officer; Dr. Belma Andric, Chief Medical Officer; Bernabe Icaza, General Counsel; Karen Harris, VP of Field Operations; Steven Hurwitz, Chief Administrative Officer; Candice Abbott, Chief Financial Officer; Patty Lavelly, Chief Information & Digital Officer; Heather Bokor, Chief Compliance & Privacy Officer.

Recording/Transcribing Secretary: Heidi Bromley

2. Adoption of Agenda

CONCLUSION/ACTION: Commissioner Alonso made a motion to adopt the agenda. The motion was duly seconded by Commissioner Banner. There being no opposition, the motion passed unanimously.

3. Regular Agenda

A. Public Hearing

1. Announce the proposed millage rate.

“The proposed millage rate of 0.7261 is 4.23% above the rolled-back rate of 0.6966.”

TRIM PUBLIC HEARING MINUTES

September 16, 2021

Page 2 of 3

- 2. Read into the record the specific purpose for ad valorem taxes.

“The purpose for levying the ad valorem taxes is to provide funding for programs to maximize the health and well-being of Palm Beach County residents by addressing their health care needs and planning for the access and delivery of services. This will be accomplished through the following programs: the trauma system, children’s health programs, managed care programs for indigent and medically needy residents, Primary Care Clinics, Lakeside Medical Center and the Edward J. Healey Rehabilitation and Nursing Center.”

- 3. Public Comment

None.

B. Motion to adopt the proposed millage rate of 0.7261 mills.

C. CONCLUSION/ACTION: Commissioner Alonso made a motion to adopt the proposed millage rate of 0.7261 mills. The motion was duly seconded by Commissioner O’Bannon.

Roll Call Vote:

Commissioner Daniels	Yes
Commissioner Banner	Yes
Commissioner O’Bannon	Yes
Commissioner Alonso	Yes
Commissioner Sabin	Yes
Commissioner Jackson-Moore	Yes

D. Motion to adopt the tentative budget of \$269,010,725.

E. CONCLUSION/ACTION: Commissioner Tammy Jackson-Moore made a motion to adopt the tentative budget of \$269,010,725. The motion was duly seconded by Commissioner O’Bannon.

Roll Call Vote:

Commissioner Daniels	Yes
Commissioner Banner	Yes
Commissioner O’Bannon	Yes
Commissioner Alonso	Yes
Commissioner Sabin	Yes
Commissioner Jackson-Moore	Yes

TRIM PUBLIC HEARING MINUTES

September 16, 2021

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F. Establish Final Public Hearing date of Tuesday, September 28, 2021 at 5:15pm

G. Adjournment

There being no further business, the TRIM Public Hearing was adjourned.

Sean O'Bannon, Secretary

Date



**HEALTH CARE DISTRICT OF PALM BEACH COUNTY
TRUTH IN MILLAGE (TRIM) PUBLIC HEARING MINUTES
September 28, 2021 at 5:15p.m.
1515 N Flagler Drive, Suite 101
West Palm Beach, FL 33401**

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

Via Telephone dial-in access: (646) 558-8656 / Meeting ID: 550 789 5592 / Password: 946503

1. Call to Order

Les Daniels called the meeting to order.

A. Roll Call

Health Care District Board members present included: Les Daniels, Chair; Nancy Banner, Vice Chair; Sean O’Bannon, Secretary; Dr. Alonso; Cory Neering (Virtual) ; Ed Sabin (Virtual) and Tammy Jackson-Moore.

Staff present included: Darcy Davis, Chief Executive Officer; Dr. Belma Andric, Chief Medical Officer; Bernabe Icaza, General Counsel; Karen Harris, VP of Field Operations; Steven Hurwitz, Chief Administrative Officer; Candice Abbott, Chief Financial Officer; Patty Lavelly, Chief Information & Digital Officer; Heather Bokor, Chief Compliance & Privacy Officer.

Recording/Transcribing Secretary: Heidi Bromley

2. Adoption of Agenda

CONCLUSION/ACTION: Commissioner Alonso made a motion to adopt the agenda. The motion was duly seconded by Commissioner Banner. There being no opposition, the motion passed unanimously.

3. Regular Agenda

A. Public Hearing

1. Announce the proposed millage rate.

“The proposed millage rate of 0.7261 is 4.23% above the rolled-back rate of 0.6966.

2. Read into the record the specific purpose for ad valorem taxes.

“The purpose for levying the ad valorem taxes is to provide funding for programs to maximize the health and well-being of Palm Beach County residents by addressing their health care needs and planning for the access and delivery of services. This will be accomplished through the following programs: the trauma system, children’s health programs, care coordination programs for indigent and medically needy residents, Primary Care Clinics, Lakeside Medical Center and the Edward J. Healey Rehabilitation and Nursing Center.”

3. Public Comment

None.

- B. Motion to adopt resolution number 2021R-003 establishing a millage rate of 0.7261 mills.**
- C. CONCLUSION/ACTION: Commissioner Alonso made a motion to adopt resolution number 2021R-003 establishing a millage rate of 0.7261 mills. The motion was duly seconded by Commissioner O’Bannon.**

Roll Call Vote:

Commissioner Daniels	Yes
Commissioner Banner	Yes
Commissioner O’Bannon	Yes
Commissioner Alonso	Yes
Commissioner Neering	Yes
Commissioner Sabin	Yes
Commissioner Jackson-Moore	Yes

- D. Motion to adopt resolution number 2021R-004 approving a total expenditure budget of \$269,010,725.**
- E. CONCLUSION/ACTION: Commissioner Tammy Jackson-Moore made a motion to adopt resolution number 2021R-004 approving a total expenditure budget of \$269,010,725. The motion was duly seconded by Commissioner O’Bannon.**

TRIM PUBLIC HEARING MINUTES

September 28, 2021

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Roll Call Vote:

Commissioner Daniels	Yes
Commissioner Banner	Yes
Commissioner O'Bannon	Yes
Commissioner Alonso	Yes
Commissioner Neering	Yes
Commissioner Sabin	Yes
Commissioner Jackson-Moore	Yes

D. Adjournment

There being no further business, the TRIM Public Hearing was adjourned.

Sean O'Bannon, Secretary

Date

**HEALTH CARE DISTRICT OF
PALM BEACH COUNTY
BOARD OF COMMISSIONERS**

Board Meeting Attendance Tracking for 12/20 – 12/21

	12/8/20	3/11/21	6/29/21	9/16/21	9/28/21	12/15/21
Leslie Daniels	X	X	X	X	X	
Nancy Banner	X	X	X	X	X	
Sean O'Bannon	X	X		X	X	
Dr. Alonso	X	X	X	X	X	
Cory Neering	X	X	X		X	N/A
Ed Sabin	X	X		X	X	
Tammy Jackson-Moore	X	X	X	X	X	

HEALTH CARE DISTRICT BOARD

December 15, 2021

1. Description: Health Care District Financial Report September 2021

2. Summary:

The unaudited September 2021 financial statements for the Health Care District are presented for Board review.

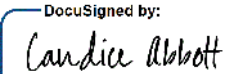
3. Substantive Analysis:

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

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 F837D209DB52427...
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

 Finance and Audit Committee
 Committee Name

 12/15/2021
 Date

6. Recommendation:

Staff recommends the Board receive and file the September 2021 Health Care District financial statement.

HEALTH CARE DISTRICT BOARD
December 15, 2021

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza
0290C8C02014479...
VP & General Counsel

DocuSigned by:
Candice Abbott
F637D209DB52427...
VP & Chief Financial Officer

DocuSigned by:
Darcy Davis
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Chief Executive Officer



Health Care District of Palm Beach County



FINANCIAL STATEMENT

September 2021



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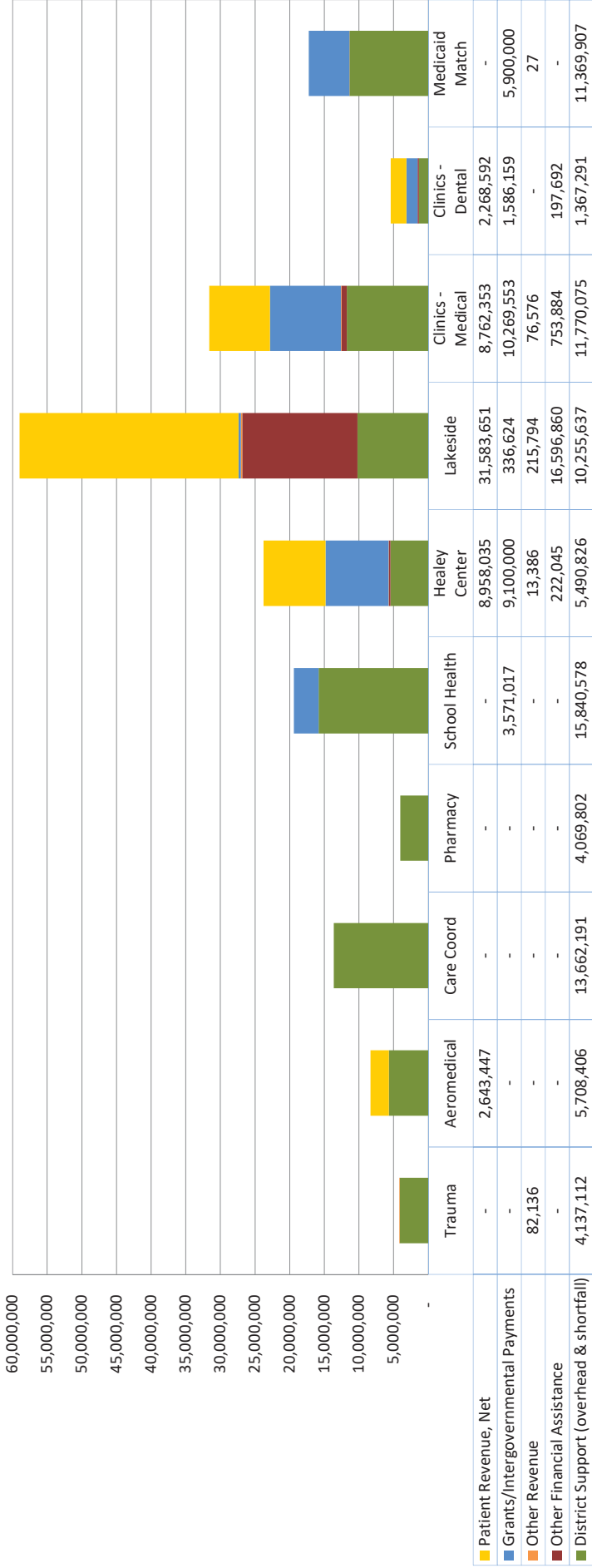
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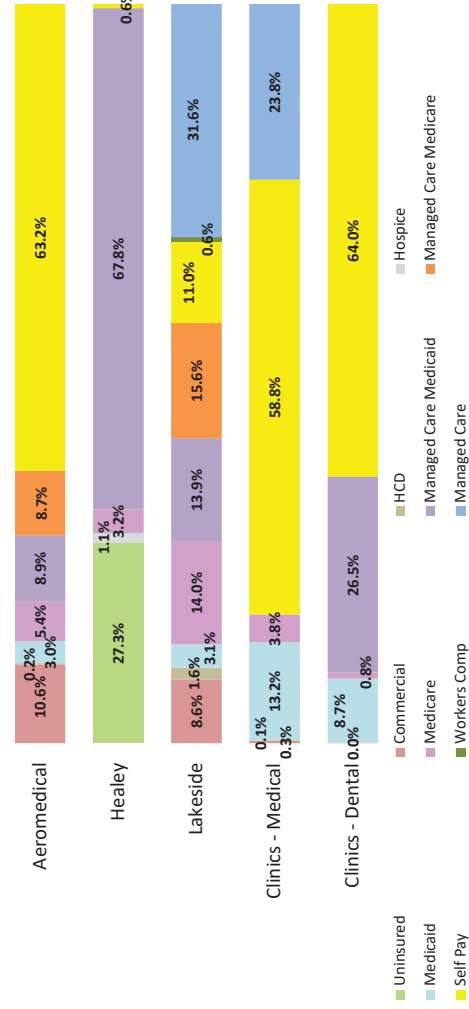
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Program Dashboard - YTD September 2021

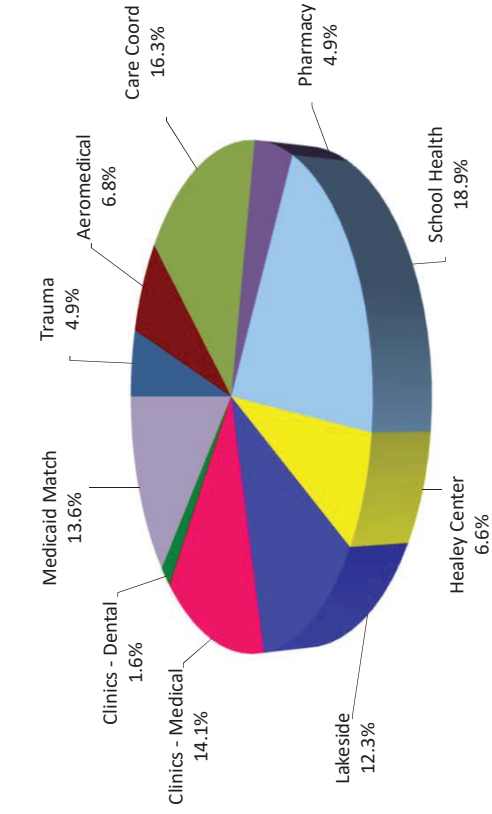
YTD Revenue and District Support by Program



YTD Payor Mix by Volume

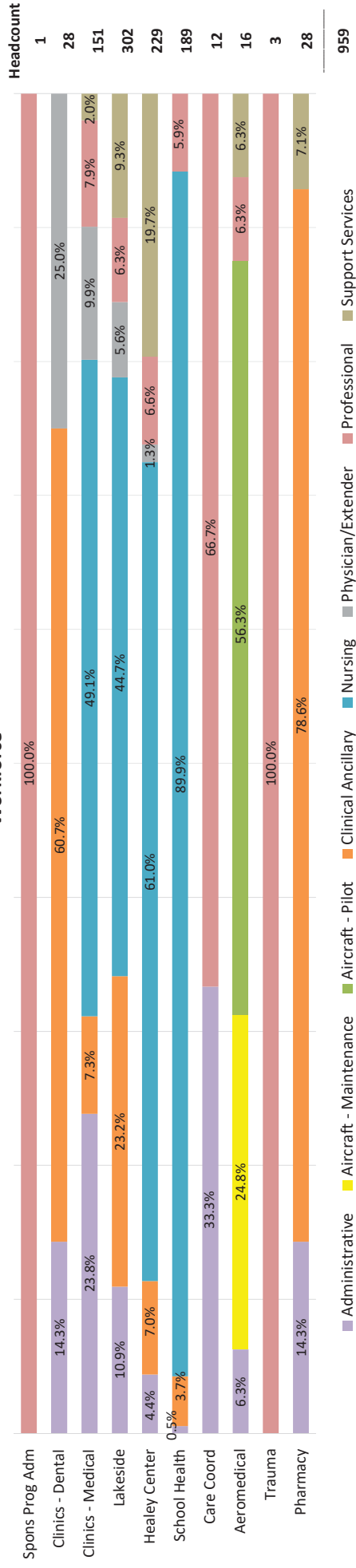


District Support (overhead and shortfall)



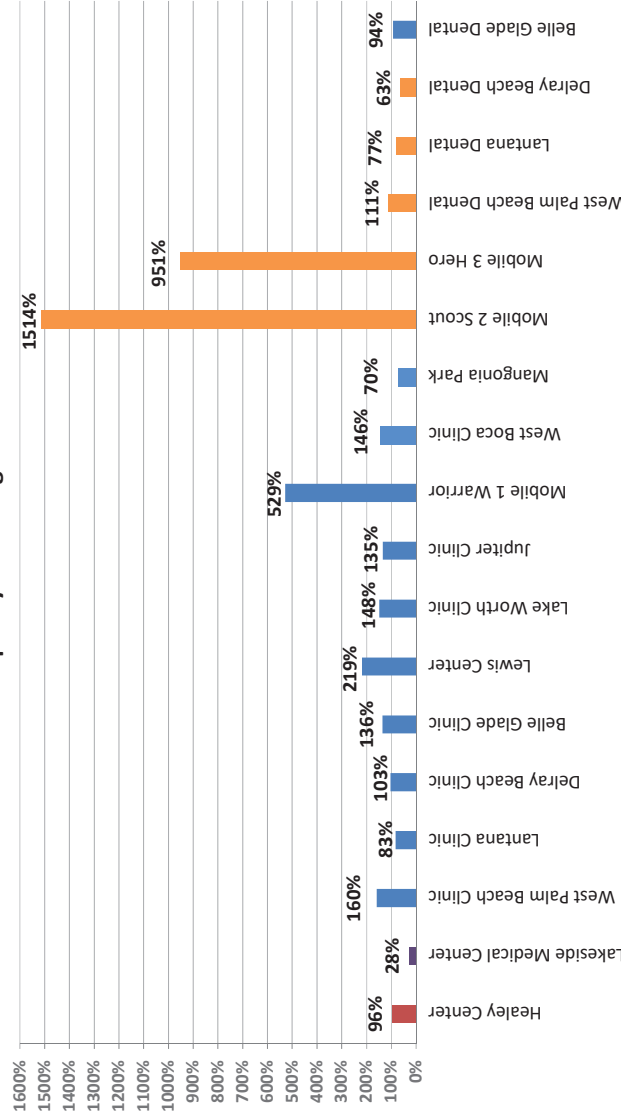
Program Dashboard - YTD September 2021

Workforce

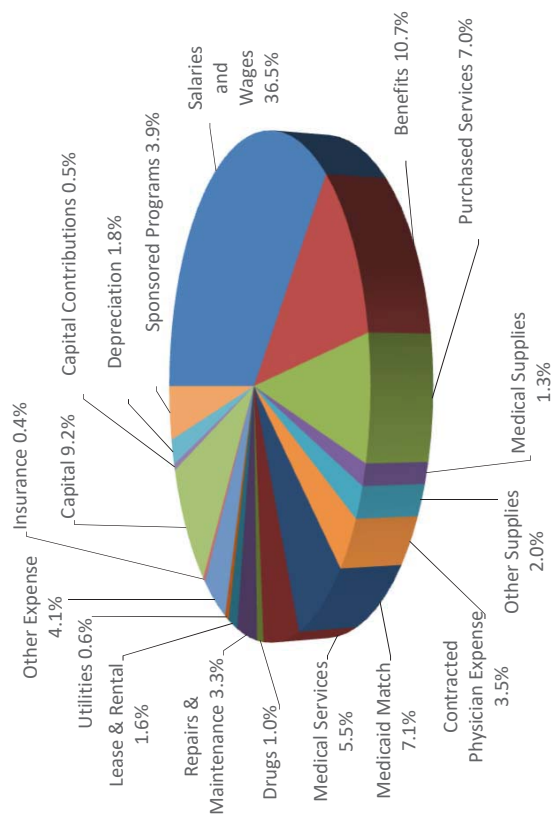


* Clinical Ancillary is comprised of employees in pharmacy, lab, radiology, ultrasound, respiratory, physical therapy, social services, activities, and dental hygienists/assistants
 ** Support Services is comprised of employees in housekeeping, dietary, laundry, purchasing, and warehouse/delivery

Capacity Percentage



Functional Expense Breakdown



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



MEMO

To: Finance & Audit Committee

From: Candice Abbott, Chief Financial Officer

Date: December 15, 2021

Subject: Management Discussion and Analysis as of September 2021 Health Care District Financial Statements

The unaudited September statements represent the financial performance for the twelve months of the 2021 fiscal year for the Health Care District. Total revenue year to date (YTD) of \$258.1M is favorable to budget of \$245.4M by \$12.7M or 5.2%. Operational expenditures YTD are \$28.4M favorable to budget or 11.6%. Year to date, the consolidated net margin is \$37.4M, with a favorable variance to budget of \$40.9M.

The General Fund YTD total revenue of \$161.3M is over budget of \$161.0M by \$293k or 0.2%. This overall favorable variance is mainly due to revenue recognized from Cares Act, as well as timing of intergovernmental revenue for School Health and County related JFK Revenue Guarantee. Unfavorable net patient revenue variance of (\$833k) is due to reduced Aeromedical transport volumes. Unrealized loss on investment variance of (\$1.4M) represents a decrease in current market value of the investment portfolio held by the District, and it will only be realized should the District liquidate its portfolio. Other revenue is unfavorable by \$1.6M due to timing of the subrogation lien revenue anticipated.

Expenditures in the General Fund YTD after overhead allocation are favorable to budget by \$26.6M or 24.1%. Significant categories of favorable YTD budget variance include medical services of \$21.7M, salaries, wages and benefits \$2.2M, other expenses of \$2.0M, repairs and maintenance \$991k, and sponsored programs \$413k. Medical services claims continue to decline through better utilization management of District Cares membership. Trauma contracts cap on payments ended in December 2020, and the new contract started in January. Other expenses are favorable to budget due to less than anticipated training expenses for EPIC as well as receiving refunds for prior year medical claims. Salaries and wages are favorable to budget due primarily to vacancies in the school health program. The repair and



maintenance variance relates to IT software maintenance cost after Epic implementation. The sponsored programs favorable variance is attributable to delayed implementation of the transportation program, as well as reduced contracted personnel. Reduced YTD contracted personnel in the Aeromed program resulted from reduced fire rescue staff due to one helicopter being grounded for repairs. The helicopter has since come back online beginning in April 2021.

The General Fund YTD has a net margin of \$77.6M versus a budgeted net margin of \$50.7M, for a favorable net margin variance of \$26.9M or 53.1%. The General Fund has subsidized a total of \$28.3M YTD to support operations of; Healey Center \$3.7M, Primary Care Clinics \$10.0M, Capital Project \$3.2M, and Medicaid Match \$11.4M.

The Healey Center total revenue YTD of \$18.3M was unfavorable to budget by \$279k. This unfavorable variance is primarily due to increased charity classification. Total YTD operating expenses before overhead allocation of \$19.8M were favorable to budget by \$523k or 2.6%. This favorable variance is mainly due to savings in the categories of salaries, wages, and benefits of \$428k, as well as other supplies of \$92k. Current vacant positions and the timing of certain expenses are the primary reason for savings. The YTD net margin after overhead allocations for the Healey Center was a loss of (\$5.5M) compared to budgeted loss of (\$5.9M) or (7.7%).

Lakeside Medical Center total revenue YTD of \$48.7M was favorable to budget by \$10.8M or 28.3%. This favorable variance resulted from the remaining Provider Relief Funds revenue being fully recognized for a total of \$16.6M YTD. Net patient revenue YTD of \$31.6M was under budget by (\$1.0M) or (3.2%). Total operating expenses YTD of \$45.9M was unfavorable to budget by \$931k or 2.1%. The YTD net margin after overhead allocations at Lakeside Medical Center was a loss of (\$10.3M) compared to a budgeted loss of (\$20.6M) for a variance of \$10.4M or (50.3%).

The Primary Care Clinics total revenue YTD of \$23.9M was over budget by \$2M primarily due to an unanticipated increase in patient visits, and grant funding, however, most of this gain was offset by revenue recognition timing of COVID-19 stimulus funds. Net patient revenue YTD was favorable to budget by \$2.2M or 24.6%. Total operating expenses YTD for the clinics are favorable to budget by \$791k or 2.7%. This favorable variance is primarily due to medical supplies of \$686k. The timing of medical supply purchases including COVID test kits are the primary reason for savings. Total net margin YTD after overhead allocations for the Primary Care Clinics is a loss of (\$13.1M), compared to budgeted loss of (\$16.1M) for a favorable variance of \$3.0M or (18.4%).



Cash and investments have a combined balance of \$157.0M, of which \$1.5M is restricted. Due from other governments of \$11.0M reflects the School District receivable of \$3.3M, grants receivable of \$4.8M, the Tax Collector receivable of \$1.7M and Palm Beach County of \$1.3M. Total net position for all funds combined is \$210M.

Revenues & Expenditures - Combined All Funds (Functional)

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Current Month			Prior Year			Fiscal Year To Date			
	Actual	Budget	Variance	%	Prior Year	Variance	%	Prior Year	Variance	%
\$ (36,501) \$	-	(36,501)	0.0%	(48)	\$ (36,453)	76,245.9%	Ad Valorem Taxes	\$ 139,422,223	\$ 7,983,310	5.7%
5,570,396	4,212,356	1,358,040	32.2%	3,828,111	1,742,285	45.5%	Patient Revenue, Net	44,125,699	10,090,378	22.9%
1,875,687	1,250,011	625,676	50.1%	1,591,625	284,062	17.8%	Intergovernmental Revenue	17,943,440	1,254,376	7.0%
1,936,140	42,350	1,893,790	4,471.8%	1,282,858	653,282	50.9%	Grants	9,857,195	2,335,142	23.7%
114,489	121,338	(6,849)	(5.6%)	164,346	(49,857)	(30.3%)	Interest Earnings	3,066,290	(1,532,863)	(50.0%)
(316,655)	-	(316,655)	0.0%	(106,348)	(210,308)	197.8%	Unrealized Gain/(Loss)	1,186,501	(2,608,542)	(219.9%)
(78,249)	373,852	(752,101)	(100.0%)	5,470,633	(5,470,633)	(100.0%)	Other Financial Assistance	12,270,266	10,546,999	86.0%
	278,298	(356,547)	(128.1%)	872,299	(950,548)	(109.0%)	Other Revenue	3,843,959	(1,664,630)	(43.3%)
\$ 9,065,307	\$ 6,280,205	\$ 2,785,102	44.3%	\$ 13,103,477	\$ (4,038,169)	(30.8%)	Total Revenues	\$ 231,715,574	\$ 26,404,173	11.4%
10,365,151	10,109,800	(255,351)	(2.5%)	8,907,514	(1,457,637)	(16.4%)	Salaries and Wages	86,233,239	(2,862,553)	(3.3%)
2,500,653	2,456,180	(44,473)	(1.8%)	2,665,092	164,439	6.2%	Benefits	26,200,609	97,307	0.4%
2,375,668	(1,080,607)	(3,456,275)	(145.5%)	1,049,306	(1,326,363)	(126.4%)	Purchased Services	15,549,507	(1,626,783)	(10.5%)
435,434	289,149	(146,285)	(33.2%)	176,529	(258,905)	(146.7%)	Medical Supplies	2,967,713	(179,165)	(6.0%)
521,934	401,335	(120,599)	(23.1%)	628,763	106,829	17.0%	Other Supplies	3,573,182	(1,237,702)	(34.6%)
860,657	702,359	(158,298)	(18.3%)	740,942	(119,714)	(16.2%)	Contracted Physician Expense	8,859,205	415,122	4.7%
1,407,924	1,485,815	77,891	5.2%	1,449,573	41,649	2.9%	Medical Match	17,103,799	(166,135)	(1.0%)
1,180,060	1,748,191	568,131	48.1%	(1,108,430)	(2,288,490)	(206.5%)	Medical Services	33,476,853	19,997,846	59.7%
56,320	167,878	111,558	66.5%	238,165	181,845	76.4%	Drugs	2,622,623	131,277	5.0%
924,028	754,380	(169,648)	(18.4%)	586,404	(337,624)	(57.6%)	Repairs & Maintenance	6,352,038	(1,771,593)	(27.9%)
311,786	402,250	90,464	22.5%	295,807	(15,979)	(5.4%)	Lease & Rental	3,862,465	65,128	1.7%
218,687	132,608	(86,079)	(39.6%)	142,666	(76,021)	(53.3%)	Utilities	1,446,011	(49,578)	(3.4%)
1,271,342	780,994	(490,348)	(38.6%)	965,083	(306,259)	(31.7%)	Other Expense	9,255,263	(870,015)	(9.4%)
94,560	83,739	(10,821)	(12.9%)	92,200	(2,360)	(2.6%)	Insurance	1,331,217	275,740	20.7%
783,181	836,491	53,310	6.4%	835,272	52,092	6.2%	Sponsored Programs	9,737,585	113,070	1.2%
23,307,383	21,646,229	(1,661,154)	(7.7%)	17,664,887	(5,642,496)	(31.9%)	Total Operational Expenditures	228,571,308	12,331,967	5.4%
\$ (14,242,076)	\$ (15,366,024)	\$ 1,123,948	(7.3%)	\$ (4,561,410)	\$ (9,680,666)	212.2%	Net Performance before Depreciation & Overhead Allocations	\$ 3,144,266	\$ 38,736,140	1,232.0%
387,524	354,000	(33,524)	(9.5%)	366,736	(20,788)	(5.7%)	Depreciation	4,266,807	(221,243)	(5.2%)
23,694,908	22,000,229	(1,694,678)	(7.7%)	18,031,623	(5,663,284)	(31.4%)	Total Expenses	232,838,116	12,110,724	5.2%
\$ (14,629,600)	\$ (15,720,024)	\$ 1,090,424	(6.9%)	\$ (4,928,146)	\$ (9,701,454)	(196.9%)	Net Margin	\$ (1,122,542)	\$ 38,514,896	3,431.0%
568,123	1,803,451	1,235,328	68.5%	5,226,020	4,657,897	89.1%	Capital	18,765,870	(3,786,951)	(20.2%)
407,850	-	(407,850)	0.0%	1,522,082	1,114,233	73.2%	Capital Contributions	2,155,270	1,036,135	48.1%
\$ (14,789,874)	\$ (17,523,475)	\$ 2,733,602	(15.6%)	\$ (8,632,084)	\$ (6,157,790)	(71.3%)	RESERVES ADDED (USED)	\$ (17,733,142)	\$ 33,691,810	190.0%

Revenues and Expenses by Fund YTD

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	General Fund	Healey Center	Lakeside Medical	Primary Care Clinics	Medicaid Match	Capital Funds	Total
Revenues:							
Ad Valorem Taxes	\$ 147,405,534	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 147,405,534
Premiums	-	-	-	-	-	-	-
Patient Revenue, Net	2,643,447	8,958,035	31,583,651	11,030,946	-	-	54,216,078
Intergovernmental Revenue	4,197,817	9,100,000	-	-	5,900,000	-	19,197,817
Grants	-	-	336,624	11,855,713	-	-	12,192,337
Interest Earnings	1,526,653	-	-	-	-	-	1,526,653
Unrealized Gain/(Loss)-Investments	(1,422,041)	-	-	-	-	-	(1,422,041)
Other Financial Assistance	5,046,784	222,045	16,596,860	951,576	-	-	22,817,265
Other Revenue	1,878,733	13,386	215,794	76,576	27	1,589	2,186,104
Total Revenues	\$ 161,276,926	\$ 18,293,465	\$ 48,732,929	\$ 23,914,810	\$ 5,900,027	\$ 1,589	\$ 258,119,746
Expenditures:							
Salaries and Wages	38,564,420	12,131,893	20,506,614	17,892,865	-	-	89,095,792
Benefits	11,680,734	4,067,543	5,506,358	4,848,667	-	-	26,103,302
Purchased Services	11,696,781	654,750	3,665,649	1,159,111	-	-	17,176,290
Medical Supplies	146,294	667,260	1,596,400	736,923	-	-	3,146,878
Other Supplies	2,111,786	840,492	1,593,611	264,995	-	-	4,810,884
Contracted Physician Expense	12,500	14,237	8,417,346	-	-	-	8,444,083
Medicaid Match	-	-	-	-	17,269,934	-	17,269,934
Medical Services	12,632,488	132,560	-	713,958	-	-	13,479,007
Drugs	(52,221)	357,490	1,442,078	743,999	-	-	2,491,346
Repairs & Maintenance	6,825,208	291,470	723,995	282,957	-	-	8,123,631
Lease & Rental	1,939,676	17,338	598,390	1,241,933	-	-	3,797,337
Utilities	107,122	438,720	861,806	87,942	-	-	1,495,589
Other Expense	8,823,824	133,506	809,711	358,236	-	-	10,125,278
Insurance	722,946	87,001	200,433	45,096	-	-	1,055,477
Sponsored Programs	9,624,515	-	-	-	-	-	9,624,515
Total Operational Expenditures	104,836,074	19,834,259	45,972,391	28,376,683	17,269,934	-	216,239,342
Net Performance before Depreciation & Overhead Allocations	\$ 56,440,852	\$ (1,540,794)	\$ 2,810,537	\$ (4,461,873)	\$ (11,369,907)	\$ 1,589	\$ 41,880,405
Budget	\$ 28,327,960	\$ (1,784,361)	\$ (7,018,549)	\$ (7,244,955)	\$ (11,602,311)	\$ 62,976	\$ 740,759
Prior Year: Net Performance before Depreciation & Overhead Allocations	\$ 33,312,373	\$ (1,224,954)	\$ (10,742,391)	\$ (7,046,745)	\$ (11,202,780)	\$ 48,762	\$ 3,144,266

Combined Governmental Funds Statement of Net Position

As of September 30, 2021

	General Fund September 2021	General Fund August 2021	Medicaid Match September 2021	Medicaid Match August 2021	Capital Projects September 2021	Capital Projects August 2021	Governmental Funds September 2021	Governmental Funds August 2021
Assets								
Cash and Cash Equivalents	\$ 51,709,859	\$ 59,151,384	\$ 117,376	\$ 117,376	\$ 8,007,606	\$ 8,687,770	\$ 59,834,840	\$ 67,956,529
Restricted Cash	-	-	-	-	-	-	-	-
Investments	111,744,419	112,100,243	-	-	-	-	111,744,419	112,100,243
Notes Receivable	-	-	-	-	-	-	-	-
Accounts Receivable, net	1,862,050	2,251,511	-	-	-	-	1,862,050	2,251,511
Due From Other Funds	-	-	-	-	-	-	-	-
Due From Other Governments	4,942,368	5,209,877	491,667	491,667	-	-	5,434,035	5,701,544
Inventory	32,405	47,382	-	-	-	-	32,405	47,382
Other Current Assets	5,871,813	4,584,442	-	-	-	-	5,871,813	4,584,442
Total Assets	\$ 176,162,914	\$ 183,344,840	\$ 609,042	\$ 609,042	\$ 8,007,606	\$ 8,687,770	\$ 184,779,562	\$ 192,641,652
Liabilities								
Accounts Payable	4,980,713	3,802,172	-	-	269,089	358,422	5,249,803	4,160,594
Medical Benefits Payable	2,080,723	1,081,482	-	-	-	-	2,080,723	1,081,482
Due To Other Funds	-	-	-	-	-	-	-	-
Due To Other Governments	-	-	-	-	-	-	-	-
Deferred Revenue	2,597,844	3,333,563	-	-	-	-	2,597,844	3,333,563
Other Current Liabilities	3,998,139	2,302,119	-	-	-	-	3,998,139	2,302,119
Noncurrent Liabilities	575,174	648,810	-	-	-	-	575,174	648,810
Total Liabilities	14,232,594	11,168,146	-	-	269,089	358,422	14,501,683	11,526,568
Fund Balances								
Nonspendable	5,372,573	4,101,583	-	-	-	-	5,372,573	4,101,583
Assigned to Subsequent Year's Budget	51,900,000	51,900,000	-	-	-	-	51,900,000	51,900,000
Assigned to Capital Projects	-	-	-	-	7,738,516	8,329,348	7,738,516	8,329,348
Assigned to Medicaid Match	-	-	609,042	609,042	-	-	609,042	609,042
Unassigned	104,657,747	116,175,110	-	-	-	-	104,657,747	116,175,110
Ending Fund Balance	161,930,320	172,176,693	609,042	609,042	7,738,516	8,329,348	170,277,878	181,115,084
Total Liabilities and Fund Balances	\$ 176,162,914	\$ 183,344,840	\$ 609,042	\$ 609,042	\$ 8,007,605	\$ 8,687,770	\$ 184,779,560	\$ 192,641,651

Combined Business-Type Funds Statement of Net Position

As of September 30, 2021

	Healey Center September 2021		Healey Center August 2021		Healthy Palm Beaches September 2021		Healthy Palm Beaches August 2021		Lakeside Medical Center September 2021		Lakeside Medical Center August 2021		Primary Care Clinics September 2021		Primary Care Clinics August 2021		Business-Type Funds September 2021		Business-Type Funds August 2021		
Assets																					
Cash and Cash Equivalents	\$ 1,795,207	\$ 2,028,651	\$ 1,415,104	\$ 1,415,104	\$ 1,415,104	\$ 1,415,104	\$ 1,415,104	\$ 1,415,104	\$ (13,071,351)	\$ (10,972,474)	\$ (6,193,478)	\$ (4,523,276)	\$ (16,054,517)	\$ (12,051,995)							
Restricted Cash	8,855	8,855	1,500,000	1,500,000	1,500,000	1,500,000	1,500,000	-	-	-	-	-	1,508,855	1,508,855							
Accounts Receivable, net	780,055	799,071	1,630	1,630	1,630	1,630	1,630	5,042,420	6,967,443	2,499,163	3,359,665	11,127,809	8,323,269	11,127,809							
Due From Other Funds	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
Due From Other Governments	758,333	758,333	-	-	-	-	-	1,116,247	427,634	3,730,086	1,646,586	2,832,554	5,604,666	2,832,554							
Inventory	-	-	-	-	-	-	-	900,512	690,481	-	-	690,481	900,512	690,481							
Other Current Assets	62,599	79,833	45,555	45,555	45,555	45,555	45,555	296,058	335,004	205,884	206,935	667,326	610,096	667,326							
Net Investment in Capital Assets	17,252,485	17,307,905	-	-	-	-	-	34,203,016	34,099,191	2,814,171	2,767,117	54,174,214	54,269,672	54,174,214							
Total Assets	\$ 20,657,535	\$ 20,982,649	\$ 2,962,289	\$ 2,962,289	\$ 2,962,289	\$ 2,962,289	\$ 2,962,289	\$ 28,486,902	\$ 31,547,280	\$ 3,055,826	\$ 3,457,027	\$ 58,949,245	\$ 55,162,552	\$ 58,949,245							
Deferred Outflows of Resources																					
Deferred Outflows Related to Pensions	\$ 112,870	\$ 112,870	\$ -	\$ -	\$ -	\$ -	\$ -	13,243	13,243	20,199	20,199	146,312	146,312	146,312							
Liabilities																					
Accounts Payable	169,167	183,560	-	-	-	-	-	1,184,773	602,603	224,972	317,493	1,103,656	1,578,913	1,103,656							
Medical Benefits Payable	-	-	-	-	-	-	-	-	-	-	-	-	-	-							
Due to Other Funds	-	-	-	-	-	-	-	-	-	-	-	-	-	-							
Due to Other Governments	55,857	55,857	-	-	-	-	-	57,723	2,301,819	-	-	113,581	113,581	2,357,676							
Deferred Revenue	-	-	-	-	-	-	-	130,264	130,264	834,022	834,022	964,286	964,286	964,286							
Other Current Liabilities	1,937,082	1,390,595	-	-	-	-	3,504,645	2,874,667	2,874,667	2,531,682	1,542,692	7,973,409	7,973,409	5,807,953							
Noncurrent Liabilities	1,370,203	1,376,865	-	-	-	-	2,012,393	1,994,314	1,994,314	1,413,145	1,426,124	4,797,303	4,795,740	4,797,303							
Total Liabilities	\$ 3,532,309	\$ 3,006,876	\$ -	\$ -	\$ -	\$ -	\$ 6,889,798	\$ 7,903,667	\$ 5,003,821	\$ 4,120,331	\$ 15,030,874	\$ 15,425,929	\$ 15,030,874	\$ 15,425,929							
Deferred Inflows of Resources																					
Deferred Inflows	\$ 102,110	\$ 102,110	\$ -	\$ -	\$ -	\$ -	\$ 13,627	13,627	13,627	474	474	116,211	116,211	116,211							
Net Position																					
Net Investment in Capital Assets	17,252,485	17,307,905	-	-	-	-	34,203,016	34,099,191	2,814,171	2,767,117	54,174,214	54,269,672	54,174,214	54,269,672							
Restricted	8,855	8,855	1,500,000	1,500,000	1,500,000	1,500,000	-	-	-	-	-	1,508,855	1,508,855	1,508,855							
Unrestricted	(125,354)	669,773	1,462,289	1,462,289	1,462,289	1,462,289	(12,606,296)	(10,455,963)	(4,742,441)	(3,410,697)	(11,734,597)	(16,011,802)	(16,011,802)	(11,734,597)							
Total Net Position	17,135,986	17,986,533	2,962,289	2,962,289	2,962,289	2,962,289	21,596,720	23,643,229	(1,928,270)	(643,579)	43,948,471	39,766,725	43,948,471	39,766,725							
Total Net Position and Liabilities	\$ 20,668,295	\$ 20,993,409	\$ 2,962,289	\$ 2,962,289	\$ 2,962,289	\$ 2,962,289	\$ 28,486,518	\$ 31,546,896	\$ 3,075,551	\$ 3,476,752	\$ 58,979,346	\$ 55,192,653	\$ 58,979,346	\$ 55,192,653							



SUPPLEMENTAL INFORMATION

GENERAL FUND

General Fund Revenue & Expenditures

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Current Month			Fiscal Year To Date			Prior Year	Variance	%			
	Actual	Budget	Variance	Actual	Budget	Variance						
\$ (36,501) \$	(36,501)	\$	0.0%	(48)	\$	(36,453)	76.245.9%	Ad Valorem Taxes	139,422,223	\$	7,983,310	5.7%
326,861	264,624	62,237	23.5%	(496,040)	822,902	(496,040)	(165.9%)	Patient Revenue, Net	1,682,428	961,018	57.1%	
625,687	-	625,687	0.0%	341,625	284,062	83.2%	83.2%	Intergovernmental Revenue	2,943,440	1,254,376	42.6%	
			0.0%	-	-	0.0%	0.0%	Grants	108,084	(108,084)	(100.0%)	
114,453	114,051	402	0.4%	163,773	(49,320)	(49,320)	(30.1%)	Interest Earnings	2,998,373	(1,471,720)	(49.1%)	
(316,655)	-	(316,655)	0.0%	(106,348)	(210,508)	(210,508)	197.8%	Unrealized Gain/(Loss)-Investments	(1,422,041)	(1,422,041)	(219.9%)	
-	230,000	(230,000)	(100.0%)	-	-	-	0.0%	Other Financial Assistance	1,186,501	(2,608,542)	(219.9%)	
(93,212)	220,163	(313,375)	(142.3%)	250,868	(344,080)	(344,080)	(137.2%)	Other Revenue	5,046,784	(1,022,124)	(35.2%)	
\$ 620,633	\$ 828,838	(208,205)	(25.1%)	\$ 153,830	\$ 466,803	\$ 303,5%	303.5%	Total Revenues	\$ 151,241,907	\$ 10,035,019	6.6%	
Expenditures:												
4,674,873	4,565,684	(109,188)	(2.4%)	4,066,885	(607,988)	(607,988)	(14.9%)	Salaries and Wages	36,822,898	(1,741,522)	(4.7%)	
1,109,839	1,125,540	15,702	1.4%	1,396,821	286,983	286,983	20.5%	Benefits	12,103,371	422,637	3.5%	
1,829,128	931,654	(897,474)	(96.3%)	920,061	(909,068)	(909,068)	(98.8%)	Purchased Services	10,299,389	(1,397,392)	(13.6%)	
21,563	19,989	(1,574)	(7.9%)	15,464	(6,099)	(6,099)	(39.4%)	Medical Supplies	71,774	(74,520)	(103.8%)	
154,005	204,834	50,829	24.8%	335,292	181,286	181,286	54.1%	Other Supplies	1,402,747	(709,038)	(50.5%)	
-	4,163	4,163	100.0%	4,167	4,167	4,167	100.0%	Contracted Physician Expense	143,750	131,250	91.3%	
1,153,586	1,667,000	513,414	30.8%	(1,204,160)	(2,357,746)	(2,357,746)	195.8%	Medical Services	32,336,068	19,703,579	60.9%	
7,169	6,600	(569)	(8.6%)	14,415	7,247	7,247	50.3%	Drugs	125,800	171,0%	171.0%	
762,009	651,292	(110,717)	(17.0%)	345,844	(416,165)	(416,165)	(120.3%)	Repairs & Maintenance	3,933,220	(2,891,988)	(73.5%)	
162,794	181,753	18,959	10.4%	151,519	(11,274)	(11,274)	(7.4%)	Lease & Rental	1,799,331	(140,345)	(7.8%)	
10,877	9,723	(1,154)	(11.9%)	7,507	(3,370)	(3,370)	(44.9%)	Utilities	103,427	(3,695)	(3.6%)	
1,039,479	654,734	(384,745)	(58.8%)	550,067	(489,413)	(489,413)	(89.0%)	Other Expense	8,056,985	(766,839)	(9.5%)	
66,067	55,850	(10,217)	(18.3%)	65,085	(982)	(982)	(1.5%)	Insurance	1,045,410	322,643	30.8%	
783,181	836,491	53,310	6.4%	835,272	52,092	52,092	6.2%	Sponsored Programs	9,737,585	113,070	1.2%	
11,774,568	10,915,308	(859,261)	(7.9%)	7,504,238	(4,270,331)	(4,270,331)	(56.9%)	Total Operational Expenditures	117,929,535	13,093,461	11.1%	
(11,153,935)	(10,086,470)	(1,067,466)	10.6%	(7,350,408)	(3,803,527)	(3,803,527)	51.7%	Net Performance before Overhead	33,312,373	23,128,480	69.4%	
(1,823,819)	(1,866,559)	42,741	(2.3%)	(952,877)	870,942	(952,877)	(91.4%)	Overhead Allocations	(12,120,638)	9,083,011	(74.9%)	
9,950,749	9,048,748	(902,001)	(10.0%)	6,551,361	(3,399,389)	(3,399,389)	(51.9%)	Total Expenses	105,808,897	22,176,471	21.0%	
\$ (9,330,117)	\$ (8,219,910)	\$ (1,110,206)	13.5%	\$ (6,397,531)	\$ (2,932,586)	\$ (2,932,586)	45.8%	Net Margin	\$ 45,433,010	\$ 32,211,490	70.9%	
-	-	-	0.0%	-	-	-	0.0%	Capital	-	-	0.0%	
\$ (916,257)	\$ (6,940,818)	\$ 6,024,561	(86.8%)	\$ 8,967,449	\$ 9,883,706	\$ 9,883,706	110.2%	General Fund Support/Transfer In(Out)	\$ (55,658,783)	\$ (27,347,538)	49.1%	

Trauma Statement of Revenues and Expenditures

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

Actual	Budget	Current Month		Prior Year	Fiscal Year To Date		Variance	%	
		Variance	%		Variance	%			
\$ 172	\$ 115,413	\$ (115,241)	(99.9%)	\$ 99,362	\$ (99,190)	\$ (1,302,864)	(94.1%)	\$ 879,217	(90.7%)
172	115,413	(115,241)	(99.9%)	99,362	(99,190)	(1,302,864)	(94.1%)	879,217	(90.7%)
28,451	38,782	10,331	26.6%	29,640	1,189	92,177	20.0%	425,019	13.4%
8,764	12,184	3,420	28.1%	10,084	1,320	36,210	24.9%	134,538	18.9%
-	-	-	0.0%	-	-	(25,000)	0.0%	-	0.0%
713,768	258,337	(455,431)	(176.3%)	146,859	(566,908)	13,532,120	77.5%	18,210,713	78.4%
-	38	38	100.0%	-	-	500	202	332	34
-	4,163	4,163	100.0%	4,167	833	37,500	75.0%	143,750	91.3%
-	-	-	0.0%	833	-	-	0.0%	9,708	100.0%
1,079	718	(361)	(50.3%)	191	(888)	8,660	4,016.8%	5,337	6,455.1%
-	-	-	0.0%	13,326	13,326	-	0.0%	449,925	100.0%
752,063	314,222	(437,840)	(139.3%)	205,100	(546,962)	14,021,067	77.3%	19,379,323	78.8%
Net Performance before Overhead									
(751,891)	(198,809)	(553,081)	278.2%	(105,738)	(646,153)	12,718,202	(315.6%)	(18,500,106)	(78.2%)
<i>Overhead Allocations:</i>									
-	66	66	100.0%	71	71	795	1	288	(175.9%)
87	89	2	2.3%	-	(87)	796	269	984	188
3,643	3,302	(342)	(10.3%)	3,716	73	39,620	2,117	38,562	1,059
-	766	766	100.0%	944	944	9,188	3	9,976	789
238	895	657	73.4%	342	104	10,652	86	9,256	(1,396)
-	397	397	100.0%	631	631	4,768	-	5,127	358
16	186	169	91.3%	165	149	1,760	466	1,982	222
122	159	37	23.0%	146	24	1,461	443	2,281	819
113	161	48	29.8%	-	-	1,937	1	-	-
2,047	1,910	(136)	(7.1%)	-	-	22,922	3,440	-	-
159	195	35	18.2%	-	-	2,334	2	-	-
519	730	211	28.9%	724	205	7,927	830	8,936	1,009
156	232	76	32.6%	166	10	1,921	2,781	2,536	615
-	191	191	100.0%	3,271	3,271	2,296	-	30,629	28,332
330	259	(71)	(27.4%)	-	(330)	2,798	309	1,457	(1,341)
-	110	110	100.0%	-	-	1,316	1	422	(894)
7,431	9,647	2,216	23.0%	10,176	5,064	115,761	8,828	112,434	29,254
759,493	323,869	(435,624)	(134.5%)	215,276	(541,898)	14,029,894	76.9%	19,491,757	78.5%
\$ (759,321)	\$ (208,456)	\$ (550,865)	264.3%	\$ (115,914)	\$ (641,089)	\$ (16,864,142)	\$ (12,727,030)	\$ (18,612,540)	\$ 14,499,182
			553.1%						77.9%

Aeromedical Statement of Revenues and Expenditures

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Current Month			Prior Year			Fiscal Year To Date			%
	Actual	Budget	Variance	%	Prior Year	Variance	%	Prior Year	Variance	
\$	978,153	\$ 1,084,053	\$ (105,900)	(9.8%)	\$ 897,424	\$ 80,729	(14.9%)	13,016,021	\$ (695,890)	(5.3%)
1,089,829	546,408	(543,421)	(99.5%)	890,435	(199,394)	(22.4%)	688,900	8,689,736	2,133,188	24.5%
(28,436)	159,096	187,532	117.9%	(14,548)	13,887	(95.5%)	2,005,186	1,602,910	1,431,943	89.3%
(410,102)	113,925	524,027	460.0%	517,577	927,680	179.2%	(1,368,898)	1,040,947	(1,908,223)	(183.3%)
651,291	819,429	168,138	20.5%	1,393,464	742,173	53.3%	1,325,189	11,333,593	1,656,908	14.6%
326,861	264,624	62,237	23.5%	(496,040)	822,902	(165.9%)	(832,770)	1,682,428	961,018	57.1%
33,42%	24.41%	-55.27%					24.01%	12.93%		
326,862	264,624	62,237	23.5%	(496,041)	822,902	(165.9%)	(832,770)	1,682,429	961,018	57.1%
<i>Direct Operational Expenses:</i>										
210,517	184,462	(26,055)	(14.1%)	197,068	(13,449)	(6.8%)	131,747	2,096,001	39,350	1.9%
63,698	56,643	(7,055)	(12.5%)	62,033	(1,665)	(2.7%)	52,124	698,629	75,996	10.9%
286,305	263,486	(22,819)	(8.7%)	226,576	(59,730)	(26.4%)	760,768	3,004,767	352,395	11.7%
1,138	1,538	400	26.0%	2,489	1,351	54.3%	18,500	(7,266)	(10,353)	(67.2%)
8,647	9,843	1,196	12.1%	3,550	(5,097)	(143.6%)	118,116	34,944	(3,467)	(4.3%)
111,420	98,416	(13,004)	(13.2%)	55,488	(55,932)	(100.8%)	(101,371)	880,300	(402,206)	(45.7%)
5,235	4,936	(299)	(6.1%)	5,284	49	0.9%	4,906	53,341	(854)	(1.6%)
5,090	5,100	10	0.2%	5,090	-	0.0%	61,200	118	0.2%	0.0%
40,877	27,565	(13,312)	(48.3%)	23,498	(17,379)	(74.0%)	37,822	260,253	(32,869)	(12.6%)
19,244	15,181	(4,063)	(26.8%)	14,048	(5,195)	(37.0%)	(46,939)	165,930	(63,247)	(38.1%)
752,171	667,170	(85,001)	(12.7%)	595,124	(157,047)	(26.4%)	866,853	7,315,420	(45,256)	(0.6%)
(425,310)	(402,546)	(22,764)	5.7%	(1,091,165)	665,855	(61.0%)	34,083	(5,632,991)	915,762	(16.3%)
<i>Net Performance before Overhead</i>										
-	887	887	100.0%	866	866	100.0%	7	3,509	(7,129)	(203.2%)
8,029	13,798	5,769	41.8%	-	(8,029)	0.0%	0	430,152	264,578	61.5%
1,162	1,188	26	2.2%	-	(1,162)	0.0%	3,601	11,990	1,330	11.1%
-	10,254	10,254	100.0%	11,503	11,503	100.0%	41	121,563	(1,450)	(1.2%)
862	3,239	2,377	73.4%	1,238	376	30.3%	312	33,506	(5,053)	(15.1%)
-	5,320	5,320	100.0%	7,686	7,686	100.0%	-	62,469	(1,373)	(2.2%)
216	2,483	2,267	91.3%	2,007	1,791	89.2%	6,238	24,153	590	2.4%
1,635	2,125	490	23.0%	1,780	145	8.2%	5,930	27,792	8,225	29.6%
1,517	2,162	645	29.8%	-	(1,517)	0.0%	13	-	(25,933)	0.0%
27,402	25,575	(1,827)	(7.1%)	-	(27,402)	0.0%	46,055	-	(260,850)	0.0%
2,131	2,606	475	18.2%	-	(2,131)	0.0%	21	-	(31,250)	0.0%
6,948	9,771	2,823	28.9%	8,825	1,877	21.3%	11,112	108,885	2,748	2.5%
2,091	3,103	1,012	32.6%	2,025	(67)	(3.3%)	11,524	30,903	5,188	16.8%
-	2,562	2,562	100.0%	39,856	39,856	100.0%	-	373,222	342,478	91.8%
4,417	3,467	(950)	(27.4%)	-	(4,417)	0.0%	4,141	17,753	(111,090)	(111.0%)
-	1,469	1,469	100.0%	-	-	0.0%	(40)	5,140	(12,530)	(243.8%)
56,412	90,011	33,599	37.3%	75,785	19,374	25.6%	88,955	1,251,038	259,860	20.8%
808,583	757,181	(51,402)	(6.8%)	670,909	(137,674)	(20.5%)	955,808	8,566,457	214,604	2.5%
\$ (481,721)	\$ (492,557)	\$ 10,836	(2.2%)	\$ (1,166,951)	\$ 685,228	(58.7%)	\$ 123,038	\$ (6,884,029)	\$ 1,175,622	17.1%

Care Coordination Statement of Revenues and Expenditures

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

		Current Month		Prior Year		Fiscal Year To Date	
Actual	Budget	Variance	%	Variance	%	Variance	%
-	-	-	0.0%	-	0.0%	-	0.0%
<i>Direct Operational Expenses:</i>							
66,831	101,909	35,078	34.4%	55,818	45.5%	338,089	28.0%
25,860	36,817	10,957	29.8%	4,762	15.6%	151,125	34.2%
308,657	320,223	11,566	3.6%	(53,623)	(21.0%)	3,842,632	2.8%
439,718	1,216,663	776,945	63.9%	(2,397,053)	(118.3%)	14,600,000	47.8%
2,141	1,413	(728)	(51.5%)	(1,270)	(145.7%)	17,000	1.0%
-	-	-	0.0%	14,128	100.0%	(199)	0.0%
-	-	-	0.0%	-	0.0%	-	0.0%
-	-	-	0.0%	-	0.0%	-	0.0%
354,427	8,094	(346,333)	(4,278.9%)	4,057	(8,636.8%)	97,150	(167.3%)
1,197,634	1,685,119	487,485	28.9%	(1,969,691)	(160.8%)	7,414,500	36.7%
Net Performance before Overhead							
(1,197,634)	(1,685,119)	487,485	(28.9%)	(3,167,325)	(160.8%)	7,414,500	(36.7%)
<i>Overhead Allocations:</i>							
-	605	605	100.0%	1,127	100.0%	7,255	0.0%
818	810	(8)	(0.9%)	(818)	0.0%	9,720	22.9%
26,921	24,397	(2,524)	(10.3%)	539	2.0%	292,761	5.3%
-	6,989	6,989	100.0%	14,975	100.0%	83,866	0.0%
-	3,758	3,758	100.0%	5,335	100.0%	45,099	0.0%
-	3,626	3,626	100.0%	10,006	100.0%	43,511	0.0%
152	1,693	1,540	91.0%	2,461	94.2%	20,311	3.7%
1,150	1,448	298	20.6%	1,168	50.4%	13,764	18.4%
509	1,474	964	65.5%	(509)	0.0%	17,683	0.0%
19,275	17,431	(1,844)	(10.6%)	(19,275)	0.0%	209,169	12.3%
830	1,776	946	53.3%	(830)	0.0%	21,313	0.0%
4,887	6,659	1,772	26.6%	6,602	57.5%	79,910	5.2%
1,471	2,115	644	30.4%	1,165	44.2%	25,380	7.2%
-	1,746	1,746	100.0%	51,887	100.0%	20,953	(50)
3,107	2,363	(744)	(31.5%)	(3,107)	0.0%	28,354	2,003
-	1,001	1,001	100.0%	-	0.0%	12,016	-
59,120	77,890	18,770	24.1%	129,846	54.5%	65,397	7.0%
1,256,754	1,763,009	506,255	28.7%	(3,096,600)	(168.3%)	7,479,897	35.4%
\$ (1,256,754)	\$ (1,763,009)	\$ 506,255	(28.7%)	\$ (3,096,600)	(168.3%)	\$ 7,479,897	(35.4%)
Net Margin							
\$ (13,662,191)	\$ (21,142,088)	\$ 7,479,897	(35.4%)	\$ (21,694,492)	(37.0%)	\$ 8,032,301	(37.0%)

Pharmacy Services Statement of Revenues and Expenditures

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

		Current Month		Prior Year		Fiscal Year To Date		Variance		%			
Actual	Budget	Variance	%	Prior Year	Variance	%	Total Revenues	0.0%	0.0%	Variance	%		
Direct Operational Expenses:													
223,068	237,063	13,996	5.9%	202,645	(20,423)	(10.1%)	2,557,786	254,540	9.1%	2,734,249	176,463	6.5%	
78,068	76,146	(1,922)	(2.5%)	66,053	(12,015)	(18.2%)	797,137	111,221	12.2%	820,493	23,356	2.8%	
4,698	1,905	(2,793)	(146.6%)	9,719	5,020	51.7%	17,645	5,160	22.6%	93,163	75,519	81.1%	
3,969	15,288	11,319	74.0%	5,602	1,633	29.1%	65,415	118,085	64.4%	97,148	31,733	32.7%	
7,169	6,600	(569)	(8.6%)	14,415	7,247	50.3%	(52,221)	79,200	131,421	165.9%	73,579	125,800	171.0%
2,100	776	(1,324)	(170.6%)	19,133	17,032	89.0%	8,763	637	6.8%	211,137	202,374	95.8%	
8,278	8,968	690	7.7%	6,999	(1,279)	(18.3%)	93,929	107,671	13,742	12.8%	83,359	(10,570)	(12.7%)
7,133	13,571	6,438	47.4%	13,232	6,099	46.1%	72,354	162,775	90,421	55.5%	77,338	4,984	6.4%
2,349	1,901	(448)	(23.6%)	1,898	(451)	(23.8%)	25,591	22,779	(2,812)	(12.3%)	17,308	(8,283)	(47.9%)
336,831	362,218	25,387	7.0%	339,694	2,863	0.8%	3,586,399	4,308,814	722,415	16.8%	4,207,775	621,376	14.8%
Net Performance before Overhead													
(336,831)	(362,218)	25,387	(7.0%)	(339,694)	2,863	(0.8%)	(3,586,399)	(4,308,814)	722,415	(16.8%)	(4,207,775)	621,376	(14.8%)
Overhead Allocations:													
-	464	464	100.0%	478	478	100.0%	5,567	5,570	4	0.1%	1,939	(3,628)	(187.1%)
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
608	622	14	2.2%	-	(608)	0.0%	5,578	7,463	1,884	25.3%	6,624	1,046	15.8%
-	5,366	5,366	100.0%	6,355	6,355	100.0%	64,367	64,388	21	0.0%	67,161	2,795	4.2%
1,601	6,013	4,412	73.4%	2,264	663	29.3%	71,579	72,159	580	0.8%	61,274	(10,306)	(16.8%)
-	2,784	2,784	100.0%	4,246	4,246	100.0%	33,406	33,406	-	0.0%	34,513	1,108	3.2%
113	1,300	1,186	91.3%	1,109	996	89.8%	12,330	15,594	3,264	20.9%	13,344	1,015	7.6%
856	1,112	256	23.0%	984	128	13.0%	10,239	13,342	3,103	23.3%	15,355	5,116	33.3%
794	1,131	337	29.8%	-	(794)	0.0%	13,569	13,576	7	0.0%	-	(13,569)	0.0%
14,338	13,383	(956)	(7.1%)	-	(14,338)	0.0%	136,491	160,589	24,098	15.0%	-	(136,491)	0.0%
1,115	1,364	248	18.2%	-	(1,115)	0.0%	16,352	16,363	11	0.1%	-	(16,352)	0.0%
3,635	5,113	1,477	28.9%	4,876	1,240	25.4%	55,537	61,351	5,814	9.5%	60,157	4,621	7.7%
1,094	1,624	529	32.6%	1,119	24	2.2%	13,455	19,486	6,030	30.9%	17,073	3,618	21.2%
-	1,341	1,341	100.0%	22,020	22,020	100.0%	16,087	16,087	-	0.0%	206,199	190,112	92.2%
-	769	769	100.0%	-	-	0.0%	9,246	9,225	(21)	(0.2%)	2,840	(6,406)	(225.6%)
2,311	1,814	(497)	(27.4%)	-	(2,311)	0.0%	19,602	21,769	2,167	10.0%	9,808	(9,793)	(99.8%)
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
26,466	44,197	17,731	40.1%	43,450	16,984	39.1%	483,404	530,366	46,962	8.9%	496,288	12,885	2.6%
363,298	406,415	43,117	10.6%	383,145	19,847	5.2%	4,069,802	4,839,180	769,378	15.9%	4,704,063	634,261	13.5%
\$ (363,298)	\$ (406,415)	\$ 43,117	(10.6%)	\$ (383,145)	\$ 19,847	(5.2%)	\$ (4,069,802)	\$ (4,839,180)	\$ 769,378	(15.9%)	\$ (4,704,063)	\$ 634,261	(13.5%)

School Health Statement of Revenues and Expenditures

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Current Month			Fiscal Year To Date							
	Actual	Budget	Variance	Actual	Budget	Variance					
\$ 625,687	\$ -	\$ 625,687	0.0%	\$ 3,571,017	\$ 2,783,000	\$ 788,017	28.3%	\$ 2,137,982	\$ 1,433,035	\$ 704,947	32.9%
625,687	-	625,687	0.0%	3,571,017	2,783,000	788,017	28.3%	2,246,066	1,324,951	1,324,951	59.0%
Direct Operational Expenses:											
1,201,761	1,103,486	(98,275)	(8.9%)	12,791,877	13,435,789	643,912	4.8%	12,941,012	149,135	12,791,877	1.2%
377,913	390,533	12,620	3.2%	4,115,213	4,688,560	573,347	12.2%	4,823,499	708,285	4,115,213	14.7%
19,049	18,201	(848)	(4.7%)	107,182	218,412	111,230	50.9%	56,361	(50,821)	107,182	(90.2%)
28,184	3,750	(24,434)	(651.6%)	83,126	45,000	(38,126)	(84.7%)	24,848	(58,278)	83,126	(234.5%)
5,162	76	(5,086)	(6,692.1%)	5,162	1,000	(4,162)	(416.2%)	133,824	128,662	5,162	96.1%
319	230	(89)	(38.7%)	3,383	2,760	(623)	(22.6%)	-	(3,383)	3,383	0.0%
917	2,463	1,546	62.8%	10,487	29,600	19,113	64.6%	5,994	(4,492)	10,487	(74.9%)
1,633,305	1,518,739	(114,566)	(7.5%)	17,116,431	18,421,121	1,304,690	7.1%	17,985,538	869,107	17,116,431	4.8%
Net Performance before Overhead											
(1,007,618)	(1,518,739)	511,121	(33.7%)	(13,545,414)	(15,638,121)	2,092,707	(13.4%)	(15,739,472)	2,194,058	(13,545,414)	(13.9%)
Overhead Allocations:											
-	1,986	1,986	100.0%	23,427	23,831	403	1.7%	8,694	(14,734)	23,427	(169.5%)
2,560	2,661	101	3.8%	23,476	31,927	8,450	26.5%	29,705	6,228	23,476	21.0%
8,455	7,662	(793)	(10.3%)	87,035	91,947	4,913	5.3%	89,492	2,457	87,035	2.7%
-	22,956	22,956	100.0%	270,894	275,470	4,576	1.7%	301,162	30,269	270,894	10.1%
-	39,534	39,534	100.0%	474,403	474,403	-	0.0%	443,724	(30,679)	474,403	(6.9%)
-	11,910	11,910	100.0%	141,026	142,918	1,892	1.3%	154,762	13,736	141,026	8.9%
476	5,559	5,083	91.4%	51,890	66,714	14,824	22.2%	59,837	7,947	51,890	13.3%
3,601	4,757	1,156	24.3%	43,091	57,079	13,988	24.5%	68,854	25,763	43,091	37.4%
3,342	4,840	1,499	31.0%	57,108	58,082	974	1.7%	-	(57,108)	57,108	0.0%
60,344	57,254	(3,090)	(5.4%)	574,434	687,045	112,611	16.4%	-	(574,434)	574,434	0.0%
4,693	5,834	1,141	19.6%	68,818	70,005	1,187	1.7%	-	(68,818)	68,818	0.0%
15,300	21,873	6,573	30.1%	233,731	262,477	28,746	11.0%	269,756	36,025	233,731	13.4%
4,606	6,947	2,341	33.7%	56,629	83,365	26,736	32.1%	76,560	19,931	56,629	26.0%
-	5,735	5,735	100.0%	67,909	68,824	914	1.3%	924,630	856,721	67,909	92.7%
9,727	7,761	(1,966)	(25.3%)	82,496	93,132	10,636	11.4%	43,982	(38,514)	82,496	(87.6%)
-	3,289	3,289	100.0%	38,797	39,467	670	1.7%	12,735	(26,062)	38,797	(204.7%)
113,103	210,557	97,454	46.3%	2,295,164	2,526,686	231,522	9.2%	2,483,893	188,729	2,295,164	7.6%
1,746,408	1,729,296	(17,112)	(1.0%)	19,411,595	20,947,807	1,536,213	7.3%	20,469,431	1,057,836	19,411,595	5.2%
\$ (1,120,721)	\$ (1,729,296)	\$ 608,575	(35.2%)	\$ (15,840,578)	\$ (18,164,807)	\$ 2,324,230	(12.8%)	\$ (18,223,365)	\$ 2,382,787	\$ (15,840,578)	(13.1%)

Sponsored Programs

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

Actual	Current Month			Sponsored Programs:			Fiscal Year To Date					
	Budget	Variance	%	Prior Year	Variance	%	Budget	Variance	%	Prior Year	Variance	%
708,996	708,991	(5)	(0.0%)	708,996	-	0.0%	8,507,947	-	0.0%	8,507,947	-	0.0%
74,185	125,000	50,815	40.7%	126,277	52,092	41.3%	1,500,000	393,432	26.2%	1,219,638	113,070	9.3%
-	2,500	2,500	100.0%	-	-	0.0%	30,000	20,000	66.7%	10,000	-	0.0%
783,181	836,491	53,310	6.4%	835,272	52,092	6.2%	10,037,947	413,432	4.1%	9,737,585	113,070	1.2%
Total Sponsored Programs												
8,671	14,122	5,451	38.6%	8,411	(261)	(3.1%)	167,531	57,879	34.5%	166,045	56,993	34.0%
3,865	6,292	2,427	38.6%	2,905	(960)	(33.0%)	74,889	37,218	49.7%	62,999	25,327	40.2%
-	50	50	100.0%	-	-	0.0%	600	591	98.4%	382	373	97.5%
-	-	-	0.0%	-	-	0.0%	-	-	0.0%	73,333	73,333	100.0%
182	456	274	60.1%	-	(182)	(0.0%)	5,450	2,463	45.2%	5,279	2,292	43.4%
12,718	20,920	8,202	2	11,316	(1,403)	(12.4%)	248,470	98,150	65.3%	308,039	157,718	51.2%
\$ 795,899	\$ 857,411	\$ 61,512	7.2%	\$ 846,588	\$ 50,689	6.0%	\$ 10,286,417	\$ 511,582	5.0%	\$ 10,045,624	\$ 270,788	2.7%
Total Expenses												

General Fund Statement of Revenues and Expenditures by Month

Revenues:	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Year to Date
Ad Valorem Taxes	\$ -	\$ 11,309,327	\$ 113,608,685	\$ 3,600,591	\$ 5,167,017	\$ 2,615,797	\$ 6,542,362	\$ 1,355,359	\$ 694,365	\$ 2,403,695	\$ 144,837	\$ (36,501)	\$ 147,405,534
Premiums													
Patient Revenue, Net	38,235	161,158	215,563	195,556	147,541	211,119	131,370	70,129	82,473	456,562	796,879	326,861	2,643,447
Intergovernmental Revenue	231,917	231,917	231,917	231,917	927,667	231,917	231,917	231,917	1,021,046	(0)	-	625,687	4,197,817
Grants													
Interest Earnings	158,408	147,222	143,533	141,543	125,590	130,224	125,229	101,105	92,911	160,361	86,075	114,453	1,526,653
Unrealized Gain/(Loss)-Investments	(206,894)	(66,642)	(51,801)	(139,529)	(266,557)	(162,231)	(33,570)	13,568	(227,144)	103,064	(67,649)	(316,655)	(1,422,041)
Other Financial Assistance						5,127,280	(1,649)	-	-	(78,847)	-	-	5,046,784
Other Revenue	63,590	175,729	1,393,054	23,445	68,010	31,159	101,161	46,288	56,816	11,929	865	(93,212)	1,878,733
Total Revenues	\$ 285,255	\$ 11,958,710	\$ 115,540,950	\$ 4,053,523	\$ 6,169,267	\$ 7,995,265	\$ 7,096,820	\$ 1,818,366	\$ 1,720,468	\$ 3,056,662	\$ 961,007	\$ 620,633	\$ 161,276,926
Expenditures:													
Salaries and Wages	3,189,482	3,111,543	2,975,420	3,029,754	2,769,394	3,114,176	3,065,449	3,220,980	3,062,132	3,139,718	3,211,499	4,674,873	38,564,420
Benefits	998,042	911,723	1,212,841	990,225	1,023,711	695,254	895,325	1,090,736	957,740	969,946	825,353	1,109,839	11,680,734
Purchased Services	734,073	758,271	719,752	768,563	641,679	1,107,672	1,255,997	844,966	1,260,989	850,289	925,401	1,829,128	11,696,781
Medical Supplies	13,396	16,488	4,646	2,557	20,441	11,286	22,973	5,736	2,466	4,815	19,927	21,563	146,294
Other Supplies	37,422	135,078	69,928	335,691	154,277	600,885	100,693	236,223	156,211	74,382	56,990	154,005	2,111,786
Contracted Physician Expense	4,167	4,167	4,167										12,500
Medical Services	819,433	877,365	1,016,722	852,671	865,740	884,162	1,401,501	1,488,764	1,312,402	590,669	1,369,474	1,153,586	12,632,488
Drugs	(24,554)	(23,726)	4,927	29,404	(36,791)	17,982	69,273	(9,094)	(56,898)	(17,465)	(12,447)	7,169	(52,221)
Repairs & Maintenance	312,118	525,062	547,098	488,808	366,645	571,206	800,267	645,753	844,114	202,979	759,150	762,009	6,825,208
Lease & Rental	151,518	145,084	184,407	158,915	176,441	149,002	115,304	155,828	204,730	163,103	172,551	162,794	1,939,676
Utilities	9,467	7,957	7,783	7,957	8,286	8,037	8,205	8,424	4,913	13,626	10,022	10,877	107,122
Other Expense	416,870	671,743	2,420,049	493,346	610,776	587,704	596,511	498,028	559,661	448,188	481,468	1,039,479	8,823,824
Insurance	52,241	64,556	59,871	58,724	58,399	58,678	58,677	59,583	61,633	65,387	59,132	66,067	722,946
Sponsored Programs	772,711	783,439	782,562	755,982	819,287	819,287	821,829	820,619	819,938	819,506	825,773	783,181	9,624,515
Total Operational Expenditures	7,486,386	7,990,316	10,010,746	7,972,421	7,478,285	8,637,020	9,200,317	9,066,546	9,190,031	7,325,143	8,704,293	11,774,568	104,836,074
Net Performance before Overhead Allocations	\$ (7,201,131)	\$ 3,968,394	\$ 105,530,204	\$ (3,918,898)	\$ (1,309,019)	\$ (641,755)	\$ (2,103,498)	\$ (7,248,181)	\$ (7,469,563)	\$ (4,268,481)	\$ (7,743,286)	\$ (11,153,935)	\$ 56,440,852
Overhead Allocations	(1,321,067)	(1,530,952)	(1,808,686)	(1,789,027)	(1,549,725)	(2,231,113)	(1,679,208)	(1,996,680)	(2,036,124)	(1,534,358)	(1,902,890)	(1,823,819)	(21,203,648)
Total Expenses	6,165,320	6,459,365	8,202,060	6,183,394	5,928,560	6,405,907	7,521,110	7,069,866	7,153,907	5,790,786	6,801,403	9,950,749	83,632,426
Net Margin	\$ (5,880,064)	\$ 5,499,345	\$ 107,338,890	\$ (2,129,871)	\$ 240,706	\$ 1,589,358	\$ (424,290)	\$ (5,251,501)	\$ (5,433,438)	\$ (2,734,123)	\$ (5,840,396)	\$ (9,330,117)	\$ 77,644,500
General Fund Support/ Transfer In (Out)	\$ (3,492,667)	\$ (1,229,915)	\$ (4,572,336)	\$ (1,222,165)	\$ (1,884,241)	\$ (1,253,623)	\$ (957,905)	\$ (7,364,728)	\$ (2,221,363)	\$ (1,421,844)	\$ (1,774,202)	\$ (916,257)	\$ (28,311,245)



General Fund Program Statistics

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Current Year Total	Prior Year Total
Aeromedical														
Patients Transported - Actual	19	29	46	41	44	45	55	49	43	50	47	41	509	551
Patients Transported - Budget	50	50	50	60	53	54	50	49	45	47	48	45	601	623
Variance	(31)	(21)	(4)	(19)	(9)	(9)	5	-	(2)	3	(1)	(4)	(92)	(72)
Actual Hours Available for Service	432	718	729	741	645	722	930	1,116	1,040	1,116	1,098	1,076	10,363	12,227
Service Hours Utilized	25.0	48.0	70.0	58.0	66.0	68.0	85.0	79.0	66.0	83.0	73.0	64.0	785	788
Utilization %	5.8%	6.7%	9.6%	7.8%	10.2%	9.4%	9.1%	7.1%	6.3%	7.4%	6.6%	5.9%	7.6%	6.4%
# of Flights - Training/Public Education	-	-	-	1	-	1	9	14	13	5	5	8	8	56
# of Flights - Maintenance	7	2	5	9	8	6	8	4	8	4	9	6	76	105
School Health														
Medical Events	23,436	12,837	10,863	16,732	18,970	19,438	23,963	24,864	17,856	-	30,099	28,908	227,966	238,762
Screenings	9,208	15,559	13,212	15,340	17,758	14,199	19,493	11,440	5,239	-	18,870	31,998	172,316	124,224
Covid-19 Testing	6,236	5,749	3,516	6,205	3,100	2,095	4,458	3,052	1,356	-	5,302	1,616	42,685	514
Total Events- Actual	38,880	34,145	27,591	38,277	39,828	35,732	47,914	39,356	24,451	-	54,271	62,522	442,967	362,986
Total Events- Budget	44,326	35,717	35,502	43,311	42,584	45,622	52,682	51,278	-	-	46,185	15,444	412,651	585,598
Pharmacy														
Total Prescriptions Filled at In-House Pharmacies	16,335	12,569	14,010	14,035	14,344	16,178	15,404	14,681	15,762	11,383	12,633	13,361	170,695	215,614
Total Prescriptions Filled at Retail Pharmacies	48	58	57	37	14	8	2	2	24	36	-	-	286	1,994
Total Prescriptions Filled Inhouse/Retail- Actual	16,383	12,627	14,067	14,072	14,358	16,186	15,406	14,683	15,786	11,419	12,633	13,361	170,981	217,608
Total Prescriptions Filled- Budget	23,973	20,608	19,946	22,591	20,791	21,344	22,181	20,959	19,436	21,257	21,456	19,126	253,668	262,049



SUPPLEMENTAL INFORMATION

HEALEY CENTER

Healey Center Statement of Revenues and Expenses

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Current Month			Prior Year			Fiscal Year To Date					
	Actual	Budget	Variance	%	Variance	%	Actual	Budget	Variance	%		
	\$ 1,452,977	\$ 1,203,169	\$ (50,192)	(4.2%)	\$ 1,130,855	\$ 22,121	\$ 1,404,487	\$ 14,638,632	\$ 14,264,536	\$ 233,609	1.6%	
113,518	88,722	(24,796)	(27.9%)	171,607	58,089	33.3%	(113,540)	1,079,477	(1,500,515)	307,497	20.5%	
336,967	315,553	(21,414)	(6.8%)	307,241	(29,725)	(9.7%)	(200,769)	3,839,233	(200,769)	3,751,833	(288,168)	(7.7%)
21,122	22,363	1,241	5.5%	(43,925)	(65,047)	(148.1%)	(34,993)	272,098	(289,704)	(17,387)	(6.0%)	
471,607	426,638	(44,969)	(10.5%)	434,923	(36,684)	(8.4%)	(349,302)	5,190,808	(5,542,052)	1,942	0.0%	
681,370	776,531	(95,161)	(12.3%)	695,932	(14,562)	(2.1%)	(489,789)	9,447,824	8,722,484	725,340	7.7%	
59.10%	64.54%			61.54%				64.54%		61.15%		
758,333	758,337	(4)	(0.0%)	758,333	-	0.0%	(0)	9,100,000	9,100,000	-	0.0%	
-	-	-	0.0%	268,499	(268,499)	(100.0%)	222,045	-	836,651	(614,606)	(73.5%)	
784	2,071	(1,287)	(62.1%)	1,923	(1,139)	(59.2%)	(11,367)	24,753	31,001	(17,616)	(56.8%)	
759,118	760,408	(1,290)	(1)	1,028,756	(269,638)	(26.2%)	210,678	9,124,753	9,967,652	(842,899)	(9.2%)	
1,440,487	1,536,939	(96,452)	(6.3%)	1,724,688	(284,200)	(16.5%)	(279,112)	18,572,577	18,690,136	(117,559)	(0.6%)	
<i>Direct Operational Expenses:</i>												
1,322,138	1,271,132	(51,006)	(4.0%)	1,131,556	(190,582)	(16.8%)	109,772	12,241,664	11,959,820	(281,844)	(2.3%)	
399,708	384,095	(15,613)	(4.1%)	384,752	(14,956)	(3.9%)	317,799	4,385,342	4,197,042	(188,300)	(4.3%)	
57,953	57,940	(13)	(0.0%)	77,099	19,146	24.8%	40,662	695,412	863,489	208,740	24.2%	
79,204	46,059	(33,145)	(41.8%)	80,906	1,702	2.1%	(114,618)	552,642	721,753	54,942	7.6%	
96,921	77,699	(19,222)	(24.7%)	86,012	(10,909)	(12.7%)	91,841	932,333	815,622	(24,870)	(3.0%)	
868	1,975	1,107	56.1%	1,426	558	39.1%	9,463	23,700	12,549	(11,151)	(47.0%)	
(7,581)	4,500	12,081	268.5%	18,002	25,582	142.1%	(78,560)	54,000	63,994	(9,994)	(18.3%)	
25,595	31,750	6,155	24.2%	18,573	(7,022)	(37.8%)	47,510	405,000	417,510	12,510	3.1%	
28,718	25,419	(3,299)	(13.0%)	33,869	5,151	15.2%	13,635	305,105	317,616	12,511	4.1%	
1,544	1,290	(254)	(19.7%)	1,064	(480)	(45.1%)	(1,858)	15,480	13,274	(2,206)	(14.3%)	
38,393	40,884	2,491	6.1%	38,587	194	0.5%	15,789	490,509	450,232	(49,277)	(10.0%)	
19,829	14,374	(5,455)	(37.9%)	26,535	6,706	25.3%	39,587	173,006	129,203	(43,803)	(25.3%)	
7,713	6,879	(834)	(12.1%)	6,826	(887)	(13.0%)	(4,343)	82,658	71,499	(11,159)	(13.5%)	
2,071,003	1,965,996	(105,007)	(5.3%)	1,905,206	(165,798)	(8.7%)	522,679	20,356,938	19,915,090	(441,848)	(2.2%)	
(630,516)	(429,057)	(201,459)	47.0%	(180,518)	(449,998)	249.3%	243,568	(1,784,361)	(1,224,954)	(559,407)	(31.8%)	
80,220	78,337	(1,883)	(2.4%)	78,789	(1,431)	(1.8%)	(12,198)	940,000	942,232	(2,232)	(0.2%)	
<i>Overhead Allocations:</i>												
-	2,159	2,159	100.0%	2,220	2,220	100.0%	17	25,905	8,998	(16,907)	(65.3%)	
2,829	2,892	63	2.2%	-	(2,829)	(0.0%)	8,763	34,706	30,743	(3,963)	(11.4%)	
-	24,954	24,954	100.0%	29,493	29,493	100.0%	99	299,348	311,685	12,336	4.1%	
10,700	40,187	29,487	73.4%	15,496	4,796	30.9%	3,874	478,367	419,381	(58,986)	(12.3%)	
-	12,946	12,946	100.0%	19,707	19,707	100.0%	-	155,358	160,170	4,812	3.1%	
526	6,043	5,517	91.3%	5,146	4,619	89.8%	15,180	73,521	61,928	(11,593)	(15.8%)	
3,979	5,171	1,192	23.0%	4,565	586	12.8%	47,617	62,048	14,430	23.3%		
3,693	5,262	1,569	29.8%	-	(3,693)	(0.0%)	63,107	63,138	31	0.0%		
66,683	62,237	(4,445)	(7.1%)	-	(66,683)	(0.0%)	112,074	746,846	(634,773)	(82,073)	(10.7%)	
5,186	6,342	1,156	18.2%	-	(5,186)	(0.0%)	76,047	76,099	52	0.1%		
-	17,617	17,617	100.0%	-	-	(0.0%)	211,409	211,409	-	0.0%		
38,270	33,076	(5,194)	(15.7%)	-	(38,270)	(0.0%)	4,011	396,911	(392,900)	(4,011)	(1.0%)	
16,907	23,777	6,870	28.9%	22,628	5,721	25.3%	27,041	285,323	208,999	(76,324)	(27.1%)	
5,980	7,552	2,462	32.6%	5,191	101	2.0%	28,044	70,621	79,235	16,658	23.6%	
-	6,234	6,234	100.0%	102,190	102,190	100.0%	74,814	94,814	9,000	9.5%		
-	3,575	3,575	100.0%	-	-	(0.0%)	42,902	42,902	-	0.0%		
10,749	8,436	(2,312)	(27.4%)	-	(10,749)	(0.0%)	101,161	101,238	77	0.1%		
164,611	268,461	103,850	38.7%	206,634	42,024	20.3%	223,693	3,221,527	2,438,214	(783,313)	(24.3%)	
2,315,834	2,312,794	(3,040)	(0.1%)	2,190,629	(125,205)	(5.7%)	734,174	24,518,466	23,295,536	(1,222,930)	(5.0%)	
(875,346)	(775,855)	(99,491)	12.8%	(465,941)	(409,405)	87.9%	455,063	(5,945,889)	(4,605,400)	(1,340,489)	(22.4%)	
24,799	-	24,799	0.0%	15,427	9,373	60.8%	201,648	-	37,271	164,378	441.0%	
\$ -	\$ 701,000	\$ (701,000)	(100.0%)	\$ -	\$ -	0.0%	\$ (1,280,696)	\$ 5,025,000	\$ 3,254,172	\$ (1,770,828)	(35.2%)	

Healey Center Statement of Revenues and Expenses by Month

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Year to Date
Gross Patient Revenue	\$ 1,211,900	\$ 1,196,363	\$ 1,226,062	\$ 1,234,757	\$ 1,136,960	\$ 1,266,882	\$ 1,225,395	\$ 1,222,137	\$ 1,201,157	\$ 1,219,939	\$ 1,203,616	\$ 1,152,977	\$ 14,498,145
Contractual Allowances	140,804	47,683	111,948	76,057	61,142	74,804	172,011	109,401	51,651	109,715	124,284	113,518	1,193,017
Charity Care	329,734	348,071	317,308	373,912	336,631	408,673	213,188	353,205	330,834	340,868	348,668	336,967	4,040,002
Bad Debt	28,647	13,200	-	29,581	64,400	26,339	8,981	41,767	20,301	13,431	39,324	21,122	307,091
Total Contractuals and Bad Debt	499,185	408,953	429,256	479,549	462,173	509,815	394,180	504,373	422,563	453,980	504,476	471,607	5,540,110
Net Patient Revenue	712,716	787,410	796,806	755,208	674,787	757,067	831,215	717,763	778,594	765,960	699,141	681,370	8,958,035
Collections %	58.81%	65.82%	64.99%	61.16%	59.35%	59.76%	67.83%	58.73%	64.82%	62.79%	58.09%	59.10%	61.79%
PBC Interlocal	758,333	758,333	758,333	758,333	758,333	758,333	758,333	758,333	758,333	758,333	758,333	758,333	9,100,000
Other Financial Assistance	-	-	-	54,840	27,116	102,299	21,520	16,270	-	-	-	-	222,045
Other Revenues	10	1,688	822	1,683	146	1,378	2,318	1,003	1,607	1,306	641	784	13,386
Total Other Revenues	758,343	760,021	759,155	814,857	785,595	862,010	782,172	775,606	759,940	759,639	758,974	759,118	9,335,431
Total Revenues	1,471,059	1,547,431	1,555,961	1,570,065	1,460,382	1,619,077	1,613,387	1,493,370	1,538,534	1,525,599	1,458,115	1,440,487	18,293,465
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,142,186	946,754	1,023,941	867,242	895,350	950,798	1,034,001	954,670	974,689	1,007,992	1,012,132	1,322,138	12,131,893
Benefits	366,476	340,335	375,229	341,963	323,884	311,777	329,967	338,079	328,804	329,435	281,886	399,708	4,067,543
Purchased Services	52,581	47,198	48,968	59,554	45,209	59,546	56,398	43,278	62,261	67,754	59,649	57,953	654,750
Medical Supplies	37,009	47,907	46,804	51,803	59,416	65,985	46,644	73,985	55,178	48,758	54,568	79,204	667,260
Other Supplies	56,764	58,154	81,006	63,121	58,677	78,884	61,678	105,509	43,582	59,469	76,728	96,921	840,492
Contracted Physician Expense	1,003	1,205	512	1,214	1,220	1,050	1,580	1,485	729	2,078	1,284	868	14,237
Medical Services	2,727	39,204	7,717	16,772	9,244	13,542	21,302	25,235	10,757	2,578	(8,938)	(7,581)	132,560
Drugs	33,777	26,168	30,578	27,747	29,122	35,881	39,275	27,382	30,238	30,238	25,309	25,595	357,490
Repairs & Maintenance	19,330	26,782	24,070	39,918	20,018	21,263	34,845	14,482	16,225	25,823	19,996	28,718	291,470
Lease & Rental	1,064	1,064	1,340	1,437	1,480	1,482	1,496	1,433	1,625	1,536	1,823	1,544	17,338
Utilities	36,885	38,997	32,289	31,471	34,946	36,569	36,401	35,532	41,843	37,214	38,181	38,393	438,720
Other Expense	6,781	7,187	9,855	14,236	14,236	3,311	6,828	20,981	18,064	9,968	18,064	19,829	133,506
Insurance	6,826	6,826	6,826	6,826	6,826	6,826	6,826	7,713	7,713	7,713	8,368	7,713	87,001
Total Operational Expenses	1,763,409	1,586,775	1,686,467	1,513,322	1,499,628	1,586,916	1,677,249	1,649,764	1,585,615	1,625,063	1,589,048	2,071,003	19,834,259
Net Performance before Depreciation & Overhead Allocations	(292,350)	(99,344)	(130,506)	56,743	(99,246)	32,161	(63,863)	(156,394)	(47,081)	(99,465)	(130,933)	(630,516)	(1,540,794)
Depreciation	78,770	78,571	78,671	79,792	79,365	79,304	79,304	79,402	79,323	79,533	79,943	80,220	952,198
<i>Overhead Allocations:</i>													
Risk Mgt	1,499	1,303	1,426	1,414	1,276	3,288	4,613	2,481	3,757	3,112	1,720	-	25,888
Internal Audit	194	1,949	1,511	1,639	846	929	1,564	1,564	3,325	4,905	928	2,829	25,942
Administration	17,872	19,459	27,584	36,982	26,826	32,856	33,733	30,876	31,867	26,223	15,069	-	299,348
Human Resources	36,071	31,182	65,754	40,918	51,387	65,199	2,790	54,785	39,591	39,741	40,250	10,700	478,367
Legal	8,027	13,032	11,771	10,312	10,728	19,126	28,947	13,683	31,475	31,475	-	-	155,358
Records	5,309	5,601	6,012	5,571	4,485	6,006	6,055	6,254	7,178	2,523	1,820	526	57,341
Compliance	3,586	3,789	2,328	3,862	3,862	(1,432)	(1,432)	7,944	9,439	4,899	1,500	3,979	47,617
Comm Engage Plan	5,033	4,557	5,170	4,932	4,515	4,935	5,531	5,945	8,509	4,982	5,303	3,693	63,107
IT Operations	37,850	52,665	52,784	71,980	55,330	81,437	32,834	53,533	50,896	39,632	39,130	66,683	634,773
IT Security	5,952	3,961	6,978	5,765	4,652	5,687	5,385	6,144	12,881	6,144	7,758	5,186	76,047
IT Applications	1,674	20,112	15,865	21,973	13,177	33,610	30,361	28,682	30,361	29,674	29,674	-	211,409
Security Services	29,700	29,277	32,895	32,479	29,825	32,011	32,302	34,052	32,803	35,124	33,756	38,270	392,900
Finance	22,145	21,188	21,292	22,101	18,247	19,178	17,921	19,488	24,169	30,229	25,416	16,907	258,282
Public Relations	8,542	6,215	2,694	3,916	5,702	7,171	4,205	6,907	4,298	4,020	3,817	5,090	62,577
Information Technology	7,321	6,514	6,971	8,053	8,369	7,596	8,695	1,518	1,518	1,518	-	-	74,814
Corporate Quality	3,802	5,395	3,693	3,906	4,444	4,621	3,675	3,074	4,404	3,074	30	-	42,902
Project MGMT Office	5,811	6,466	6,743	6,938	6,312	7,119	7,468	8,118	7,468	9,760	9,760	10,749	91,161
Managed Care Contract	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Overhead Allocations	200,388	232,665	270,873	284,852	249,983	337,931	230,636	286,980	282,147	270,511	186,258	164,611	2,997,834
Total Expenses	2,042,567	1,898,011	2,036,010	1,877,966	1,828,977	2,004,151	1,987,189	2,016,146	1,947,085	1,975,106	1,855,250	2,315,834	23,784,291
Net Margin	(571,508)	(350,580)	(480,049)	(307,901)	(368,594)	(385,074)	(373,802)	(522,776)	(408,551)	(449,508)	(397,135)	(875,346)	(5,496,826)
Capital Contributions	-	-	-	-	-	-	-	-	-	-	-	-	-
General Fund Support/ Transfer In	\$ 492,738	\$ 272,009	\$ 386,429	\$ 264,266	\$ 226,339	\$ 295,719	\$ 283,191	\$ 737,549	\$ 283,191	\$ 327,221	\$ 458,843	\$ -	\$ 3,744,304



Census	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Current Year Total	Prior Year Total
Admissions	17	7	13	9	10	5	8	8	6	7	2	4	96	116
Discharges	10	6	12	9	7	6	11	8	7	6	5	7	94	136
Average Daily Census	110	115	115	115	113	117	117	115	116	115	114	113	115	115
Budget Census	118	118	118	118	118	118	118	118	118	118	118	118	118	118
Occupancy % (120 licensed beds)	92%	96%	96%	96%	94%	97%	98%	96%	97%	96%	95%	94%	96%	96%
Days By Payor Source:														
Medicaid	-	-	-	-	-	-	-	-	-	-	-	-	72	376
Managed Care Medicaid	2,381	2,314	2,386	2,375	2,181	2,399	2,386	2,378	2,339	2,475	2,478	2,369	28,461	29,764
Medicare	103	186	179	144	98	87	108	145	131	98	32	30	1,341	1,000
Private Pay	-	-	-	-	-	23	30	31	59	40	32	17	232	8
Hospice	62	60	62	62	56	62	60	36	3	3	11	-	477	524
Charity	858	898	930	987	938	1,052	929	979	957	964	961	930	11,383	10,270
Total Resident Days	3,404	3,458	3,557	3,568	3,273	3,623	3,513	3,569	3,489	3,580	3,543	3,389	41,966	41,942



SUPPLEMENTAL INFORMATION

LAKESIDE MEDICAL CENTER

Lakeside Medical Center Statement of Revenues and Expenses

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Current Month			Fiscal Year To Date					
	Actual	Budget	Variance	Actual	Budget	Variance	Prior Year	Variance	%
\$ 6,202,380	\$ 3,337,562	\$ 2,864,818	85.8%	\$ 4,038,926	\$ 2,163,455	53.6%	\$ 54,099,435	\$ 4,491,598	8.3%
5,645,447	7,072,966	(1,427,519)	(20.2%)	5,892,037	(246,591)	(4.2%)	79,595,919	1,782,415	2.2%
11,847,827	10,410,528	1,437,299	13.8%	9,930,963	1,916,864	19.3%	133,695,353	6,274,014	4.7%
7,801,221	6,832,058	(969,163)	(14.2%)	7,518,718	(282,503)	(3.8%)	90,544,028	(10,445,748)	(11.5%)
70,594	273,945	203,351	74.2%	2,503,035	2,432,441	97.2%	4,928,427	2,719,436	55.2%
313,544	971,257	657,713	67.7%	(2,903,634)	(3,217,178)	110.8%	15,224,452	8,171,600	53.7%
\$ 8,185,359	\$ 8,077,260	\$ (108,099)	(1.3%)	\$ 7,118,120	\$ (1,067,240)	(15.0%)	\$ 110,696,907	\$ 445,288	0.4%
137,278	143,229	(5,951)	(4.2%)	182,581	(45,302)	-25%	1,521,543	344,360	22.6%
3,799,746	2,476,497	1,323,249	53.4%	2,995,424	804,322	26.9%	24,519,989	7,063,662	28.8%
32.07%	23.79%	30.16%					18.34%		
(14,240)	192	(14,432)	(7,516.7%)	103,743	(117,983)	(113.7%)	14,304.1%	(1,268,499)	(79.0%)
-	-	-	0.0%	5,055,555	(5,055,555)	(100.0%)	9,012,429	7,584,431	84.2%
12,667	12,984	(317)	(2.4%)	116,375	(103,708)	(89.1%)	351,864	(136,070)	(38.7%)
(1,573)	13,176	(14,749)	(111.9%)	5,275,673	(5,277,245)	(100.0%)	11,788,948	6,179,861	56.3%
3,798,173	2,489,673	1,308,500	52.6%	8,271,097	(4,472,923)	(54.1%)	35,489,406	13,243,523	37.3%
2,268,544	2,090,807	(177,737)	(8.5%)	1,913,531	(355,013)	(18.6%)	20,244,263	(262,351)	(1.3%)
535,673	505,145	(30,528)	(6.0%)	471,138	(64,534)	(13.7%)	5,420,610	(85,747)	(1.6%)
416,021	259,787	(156,234)	(60.1%)	(25,341)	(441,363)	1,741.7%	3,514,588	(151,061)	(4.3%)
244,220	111,714	(133,006)	(119.6%)	(2,980)	(247,200)	8,296.1%	1,673,983	77,583	4.6%
245,839	92,297	(153,542)	(166.4%)	223,198	(22,642)	(10.1%)	1,186,853	(406,758)	(34.3%)
859,789	696,221	(163,568)	(23.5%)	735,349	(124,440)	(16.9%)	8,702,906	285,560	3.3%
(77,357)	72,156	149,513	207.2%	120,809	198,166	164.0%	1,260,304	(181,775)	(14.4%)
99,930	68,045	(31,885)	(46.9%)	189,819	89,889	47.4%	1,784,488	1,060,493	59.4%
50,415	52,242	1,827	3.5%	54,266	3,852	7.1%	704,370	105,980	15.0%
160,517	74,678	(85,839)	(114.9%)	88,161	(72,356)	(82.1%)	808,642	(53,164)	(6.6%)
176,008	73,055	(102,953)	(140.9%)	342,423	166,415	48.6%	749,154	(60,557)	(8.1%)
16,754	16,659	(95)	(0.6%)	16,573	(81)	(1.1%)	181,635	(18,798)	(10.3%)
4,996,352	4,112,306	(884,046)	(21.5%)	4,126,946	(869,406)	(21.1%)	46,231,796	309,405	0.7%
(1,198,179)	(1,622,633)	424,454	(26.2%)	4,144,151	(5,342,329)	(128.9%)	(10,742,391)	13,552,928	(126.2%)
							9,829,086		
							(7,018,549)		
							2,810,537		
							(140.0%)		
							9,829,086		
							(10,742,391)		
							13,552,928		
							(126.2%)		

Direct Operational Expenses:

Salaries and Wages	20,506,614	20,769,052	262,438	1.3%	20,244,263	(262,351)	(1.3%)
Benefits	5,506,358	5,729,104	222,746	3.9%	5,420,610	(85,747)	(1.6%)
Purchased Services	3,665,649	3,123,879	(541,770)	(17.3%)	3,514,588	(151,061)	(4.3%)
Medical Supplies	1,596,400	1,503,815	(92,585)	(6.2%)	1,673,983	77,583	4.6%
Other Supplies	1,593,611	1,141,459	(452,152)	(39.6%)	1,186,853	(406,758)	(34.3%)
Contracted Physician Expense	8,417,346	8,354,674	(62,672)	(0.8%)	8,702,906	285,560	3.3%
Drugs	1,442,078	975,700	(466,378)	(47.8%)	1,260,304	(181,775)	(14.4%)
Repairs & Maintenance	723,995	816,661	92,666	11.3%	1,784,488	1,060,493	59.4%
Lease & Rental	598,390	626,871	28,481	4.5%	704,370	105,980	15.0%
Utilities	861,806	896,015	34,209	3.8%	808,642	(53,164)	(6.6%)
Other Expense	809,711	854,737	45,026	5.3%	749,154	(60,557)	(8.1%)
Insurance	200,433	199,919	(514)	(0.3%)	181,635	(18,798)	(10.3%)
Total Operational Expenses	45,922,391	44,991,886	(930,505)	(2.1%)	46,231,796	309,405	0.7%

Lakeside Medical Center Statement of Revenues and Expenses

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Current Month			Fiscal Year To Date		
	Actual	Budget	Variance	Actual	Budget	Variance
	275,662	258,337	(17,325)	3,157,413	3,100,000	(57,413)
			(6.7%)			(1.9%)
			(17,695)			(69,716)
			4,955			37
			(32,115)			(0)
			(6,282)			19,460
			65,831			664,740
			20,095			621,952
			43,988			344,992
			10,317			127,332
			10,189			105,740
			(82,000)			140,136
			(148,077)			1,409,591
			(11,515)			168,871
			(93,623)			1,514,363
			(43,738)			449,029
			(312,869)			2,370,375
			15,255			573,547
			285			138,960
			228,103			166,134
			50,508			633,595
			11,587			201,235
			228,103			62,275
			-			-
			7,939			95,269
			(5,135)			202,435
			7,848			37,902
			(78,582)			9,908,761
			(502,299)			10,525,631
			4,838,332			58,988,566
			(1,389,400)			(371,049)
			(5,862,323)			10,388,543
			(1,123,605)			917,487
			(10,000,000)			17,550,000
			(10,000,000)			8,969,322
			(10,000,000)			8,969,322
			(170,8%)			(50,3%)
			(74.6%)			(1,200,512)
			(100.0%)			8,969,322
			(100.0%)			8,969,322
			(100.0%)			100.0%

Overhead Allocations:

	Actual	Budget	Variance	Actual	Budget	Variance	Prior Year	Fiscal Year To Date
Depreciation			(17,695)			(69,716)	3,087,697	(1.9%)
Risk Mgt			4,955			37	20,084	0.1%
Rev Cycle			(32,115)			(0)	-	(0.0%)
Internal Audit			(6,282)			19,460	68,622	25.3%
Administration			65,831			664,740	695,724	0.0%
Human Resources			6,184			543,872	78,080	0.8%
Legal			43,988			357,521	13,529	0.0%
Records			10,317			33,710	138,232	20.9%
Compliance			10,189			32,044	159,062	23.3%
Comm Engage Plan			(82,000)			69	-	0.0%
IT Operations			(148,077)			248,874	-	15.0%
IT Security			(11,515)			116	-	0.1%
IT Applications			(93,623)			10,091	-	0.7%
Security Services			(43,738)			4,584	-	1.0%
IT EPIC			(515,538)			61,657	-	2.5%
Finance			12,964			60,048	623,170	9.5%
Public Relations			285			62,275	176,862	30.9%
Information Technology			228,103			-	2,136,015	0.0%
Corporate Quality			-			-	29,419	0.0%
Project MGMT Office			(23,869)			22,377	101,605	10.0%
Managed Care Contract			6,676			56,271	97,357	59.8%
Total Overhead Allocations			(502,299)			616,869	5,147,543	5.9%
Total Expenses			(1,389,400)			(371,049)	54,467,037	(0.6%)
Net Margin			(5,862,323)			10,388,543	(18,977,631)	(50.3%)
Capital Contributions			(1,123,605)			917,487	2,117,999	0.0%
General Fund Support/ Transfer In			(10,000,000)			17,550,000	8,969,322	(100.0%)

Lakeside Medical Center Statement of Revenues and Expenses by Month

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Year to Date
Inpatient Revenue	\$ 3,985,448	\$ 3,985,552	\$ 4,894,393	\$ 5,375,408	\$ 4,888,944	\$ 3,711,527	\$ 3,711,764	\$ 4,344,014	\$ 7,311,764	\$ 4,647,633	\$ 8,865,605	\$ 6,202,380	\$ 58,551,033
Outpatient Revenue	6,740,835	6,028,589	6,198,016	7,082,417	7,029,810	7,659,810	8,078,520	7,708,593	7,659,892	6,671,987	5,189,614	5,645,447	81,378,334
Gross Patient Revenue	10,696,282	10,014,140	11,092,409	12,457,825	11,918,754	11,366,047	12,146,980	12,052,607	11,061,656	11,319,620	14,055,219	11,847,827	139,969,367
Contractual Allowances	7,259,800	7,895,305	8,141,013	8,438,082	8,347,527	7,816,726	7,398,405	9,105,485	10,380,325	9,829,453	8,576,436	7,801,221	100,989,776
Charity Care	2,324,516	466,637	(2,173,316)	435,829	435,829	239,491	269,109	625,052	283,970	79,893	7,265	70,594	2,081,991
Bad Debt	1,255,741	(3,319,433)	2,119,861	1,479,938	534,278	4,000,330	(154,532)	2,227,125	(2,011,520)	(808,897)	1,416,423	313,544	7,052,853
Total Contractuals and Bad Debt	10,840,057	4,062,510	8,087,568	9,916,020	9,317,093	12,036,987	7,312,982	11,357,062	8,052,725	9,100,449	10,000,124	8,183,359	110,233,019
Other Patient Revenue	142,009	142,009	523,423	142,009	142,009	148,119	173,857	147,432	(203,550)	163,652	207,653	137,278	1,865,903
Net Patient Revenue	(61,765)	5,933,640	3,528,725	2,681,814	2,743,129	(542,377)	4,807,855	242,377	2,005,381	2,382,822	4,262,748	3,799,746	31,583,651
Collection %	-0.58%	55.26%	31.81%	21.53%	23.02%	-4.77%	39.58%	2.01%	19.94%	21.05%	30.33%	32.07%	22.56%
Grant Funds	81,867	-	-	13,644	40,933	27,289	-	-	-	187,131	-	(14,240)	336,624
Other Financial Assistance	25,133	16,319	44,660	498,853	257,463	285,015	130,107	-	204,852	15,220,570	-	(14,240)	16,596,860
Other Revenue	107,000	16,319	44,660	554,300	297,345	300,035	145,445	15,493	253,748	15,233,000	183,505	(1,573)	17,149,278
Total Other Revenues	45,235	5,949,959	3,572,935	3,236,114	3,040,473	(242,335)	4,953,300	257,870	2,459,129	17,615,822	4,446,253	3,798,173	48,732,929
Direct Operational Expenses:													
Salaries and Wages	1,839,260	1,564,927	1,661,704	1,533,257	1,533,257	1,564,709	1,698,291	1,605,193	1,663,916	1,725,387	1,847,896	2,268,544	20,506,614
Benefits	482,565	450,228	487,782	451,141	449,532	427,860	446,584	455,307	457,699	486,660	411,505	535,673	5,506,358
Purchased Services	289,929	332,220	257,375	236,978	323,285	242,137	304,400	363,162	268,939	398,111	398,111	416,021	3,665,649
Medical Supplies	91,738	142,210	115,484	117,523	118,985	210,739	218,183	210,739	210,739	97,252	149,356	244,220	1,596,400
Other Supplies	39,537	9,922	139,625	137,179	137,179	207,278	146,574	65,774	138,321	114,802	138,524	245,839	1,593,611
Contracted Physician Expense	663,185	660,448	717,386	823,931	692,946	356,973	950,197	764,286	543,889	691,766	692,548	859,789	8,417,346
Drugs	77,901	104,180	158,282	144,236	147,869	119,501	106,164	114,424	78,544	62,974	384,361	(77,357)	1,442,078
Repairs & Maintenance	46,164	49,242	47,833	74,846	54,356	42,353	55,489	74,846	81,978	45,693	45,693	99,930	723,995
Lease & Rental	52,258	50,554	68,444	58,905	32,799	44,541	51,391	45,580	48,050	48,050	45,685	50,415	598,300
Utilities	68,800	72,412	76,840	48,908	51,859	61,833	70,491	54,911	64,247	52,131	78,857	160,517	861,806
Other Expense	46,086	97,638	36,172	71,181	33,600	110,255	52,335	49,574	101,138	33,052	176,008	809,711	809,711
Insurance	16,573	16,573	16,573	16,573	16,573	16,573	16,573	16,754	16,754	16,754	17,408	16,754	200,433
Total Operational Expenses	3,713,996	3,523,966	3,810,226	3,695,666	3,611,070	3,487,089	4,075,445	3,682,213	3,424,924	3,658,446	4,242,998	4,996,352	45,922,391
Net Performance before Depreciation & Overhead Allocations	(3,668,761)	2,025,993	(237,291)	(455,532)	(570,596)	(3,729,424)	877,855	(3,424,343)	(965,796)	13,937,376	203,255	(1,198,179)	2,810,537
Depreciation	258,659	261,436	259,965	259,804	259,804	260,086	260,673	261,186	261,185	264,298	274,656	275,662	3,157,743
Overhead Allocations:													
Risk Mgt	3,328	2,893	3,167	3,141	2,834	7,301	10,244	5,509	8,342	6,910	3,820	-	57,488
Rev Cycle	57,418	47,266	51,614	51,149	45,293	53,592	56,572	60,795	60,742	68,161	78,578	32,115	662,295
Internal Audit	432	3,356	1,878	3,639	2,062	7,383	11,824	3,472	7,383	10,891	2,062	6,282	57,608
Administration	39,687	43,211	61,254	82,122	59,571	72,961	74,909	68,565	70,764	58,231	33,464	-	664,740
Human Resources	46,898	40,541	85,490	66,812	66,812	84,769	3,628	71,230	51,474	51,669	52,331	13,911	621,952
Legal	17,825	28,940	26,138	22,898	23,823	42,472	64,280	18,337	30,384	69,894	-	-	344,992
Records	11,788	12,438	12,371	13,351	9,959	13,445	13,889	13,889	15,940	5,603	4,041	1,169	127,332
Compliance	7,963	8,414	5,170	13,263	8,575	13,683	(3,179)	17,641	20,959	1,085	3,330	8,836	105,740
Comm Engage Plan	11,177	10,119	11,482	10,953	10,026	12,282	18,896	13,202	18,896	11,777	8,200	8,200	140,136
IT Operations	84,051	116,950	117,713	159,840	122,867	180,840	72,912	118,920	113,021	88,007	86,893	148,077	1,409,991
IT Security	13,217	8,797	15,495	12,803	10,330	12,630	11,958	12,630	13,643	17,228	11,515	11,515	168,871
IT Applications	31,724	170,938	256,322	112,810	99,879	126,396	33,403	114,178	107,803	260,981	106,305	93,623	1,514,363
Security Services	33,943	36,909	37,119	34,086	37,726	36,917	37,489	40,142	38,923	40,142	43,738	43,738	449,029
IT Equipment	88,644	108,508	135,518	112,323	297,967	227,468	234,401	257,819	(61,300)	373,773	515,538	2,370,375	
Finance	49,176	47,050	47,282	49,078	40,521	42,586	39,797	43,276	53,670	67,127	56,438	37,544	573,547
Public Relations	18,969	13,802	8,697	12,663	9,338	15,924	9,338	15,337	9,544	8,926	8,476	11,302	138,960
Information Technology	16,257	14,465	15,480	17,883	18,584	16,867	18,161	19,308	25,757	3,372	-	-	166,134
Budget & Decision Support	8,444	11,980	8,200	6,073	9,869	10,262	13,008	8,161	9,780	6,825	67	-	95,269
Corporate Quality	12,904	14,358	14,016	15,408	14,016	15,808	17,831	18,028	16,584	16,982	21,674	23,869	202,435
Managed Care Contract	7,116	6,835	7,346	7,112	6,476	3,001	17	-	-	-	-	-	37,902
Total Overhead Allocations	552,033	725,428	894,736	817,675	710,384	1,060,147	729,813	895,822	944,957	728,215	898,835	955,718	9,908,761
Total Expenses	4,524,868	4,510,930	4,964,927	4,773,145	4,581,257	4,807,322	5,060,931	4,839,221	4,631,066	4,650,958	5,416,489	6,227,733	58,988,566
Net Margin	(4,479,453)	1,059,129	(1,391,992)	(1,597,031)	(1,540,783)	(5,049,657)	(107,651)	(4,581,351)	(2,171,938)	12,964,864	(970,235)	(2,429,559)	(10,255,637)
Capital Contributions	-	-	-	-	-	-	-	-	-	-	-	-	-
General Fund Support/Transfer In	-	-	-	-	-	-	-	-	-	-	-	-	-

Lakeside Medical Center
Statistical Information

Admissions	Current Year												% Var to Budget	Prior YTD Total		
	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21			Total	
Newborn	10	9	3	5	4	4	7	10	9	11	7	9	88	129	(31.8%)	211
Pediatrics	3	2	3	3	2	3	3	6	6	6	6	6	2	50	(15.5%)	121
Adult	101	77	88	100	98	69	85	94	86	128	155	95	1,176	1,272	(7.6%)	1,334
Total	114	86	94	107	105	76	103	110	98	145	168	106	1,314	1,461	(10.0%)	1,666
Adjusted Admissions	311	221	213	248	256	233	308	305	292	353	266	202	3,209	4,556	(29.6%)	1,666

Patient Days

Med Surg 2nd and 3rd Floor (14 beds)	41	39	28	84	119	30	30	30	26	115	57	26	625	942	(33.7%)	811
Pediatrics (12 beds)	17	22	30	27	11	10	34	15	13	13	7	9	208	316	(34.2%)	468
Telemetry (22 beds)	243	222	394	402	349	247	269	312	288	327	828	608	4,489	3,376	33.0%	2,478
ICU (6 beds)	126	142	163	154	157	143	147	135	108	166	152	49	1,642	1,662	(1.2%)	744
Obstetrics (16 beds)	29	25	13	18	11	17	18	31	25	34	25	22	268	459	(41.6%)	600
Total (70 beds)	456	450	628	685	647	447	498	523	460	655	1,069	714	7,232	6,755	7.1%	5,101

Adjusted Acute Patient Days

	1,245	1,131	1,423	1,588	1,577	1,369	1,487	1,451	1,371	1,595	1,695	1,364	17,296	21,070	(17.9%)	5,101
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Other Key Inpatient Statistics

Occupancy Percentage	21%	21%	29%	32%	33%	21%	24%	24%	22%	30%	0.4926	0.3400	28%	26%	7.1%	20%
Average Daily Census (excl. newborns)	14.7	15.0	20.3	22.1	23.1	14.4	16.6	16.9	15.3	21.1	34.5	23.8	19.8	18.5	7.2%	14.0
Average Daily Census (incl. newborns)	15.4	15.8	20.6	22.6	23.5	14.8	17.2	17.7	15.9	22.1	35.1	24.5	20.4	19.5	4.6%	15.4
Average Length of Stay (excl. newborns)	4.38	5.70	6.90	6.72	6.41	6.21	5.19	5.23	5.17	4.89	6.64	7.36	5.90	5.07	16.3%	3.49
Average Length of Stay (incl. newborns)	4.19	5.40	6.81	6.55	6.26	6.04	5.00	4.98	4.87	4.72	6.48	6.92	5.69	4.88	16.6%	3.36
Case Mix Index- Medicare	1.9433	1.7109	1.3353	2.4190	1.5160	1.9575	1.4246	1.5021	1.8288	2.1165	1.7732	1.4634	1.7482	1.7482		1.3740
Case Mix Index- Medicaid	0.5706	2.1950	2.4349	1.7665	1.6697	0.7644	0.8969	0.6547	0.3407	0.7633	0.8105	0.8092	1.1397	1.1397		0.7600
Case Mix Index- All Payers	1.3453	1.5504	1.6374	2.0162	1.6634	1.5066	1.6564	1.2173	1.3335	1.2836	1.7427	1.3992	1.5293	1.5293		1.0650

Emergency Room and Outpatients

ER Admissions	59	34	48	48	58	44	50	49	51	100	138	72	751	789	(4.9%)	1,192
ER Visits	1,367	1,269	1,292	1,502	1,396	1,629	1,707	1,647	1,522	1,649	1,285	1,288	17,553	17,407	0.8%	23,543
Outpatient Visits	280	235	247	213	258	213	329	313	276	364	397	406	3,531	2,216	59.3%	5,027
ER and Outpatient Visits	1,647	1,504	1,539	1,715	1,654	1,842	2,036	1,960	1,798	2,013	1,682	1,694	21,084	19,623	7.4%	28,570
Observation Patient Stays	219	202	169	182	206	236	245	185	201	147	106	112	2,210	3,352	(34.1%)	2,661

Surgery and Other Procedures

Inpatient Surgeries	24	31	30	28	32	28	46	39	37	20	11	21	347	383	(9.3%)	350
Outpatient Surgeries	7	6	10	5	9	2	5	6	5	3	2	5	65	34	91.5%	29
Endoscopies	19	9	11	14	13	16	20	13	6	6	4	6	137	165	(17.1%)	67
Radiology Procedures	2,280	1,983	2,163	2,449	2,356	2,640	2,641	2,518	2,444	2,162	1,893	1,945	27,474	26,017	5.6%	27,466
Lab Charges	14,701	14,408	15,963	18,014	17,243	15,960	17,635	16,948	15,721	12,182	15,363	12,215	186,353	199,279	(6.5%)	177,508

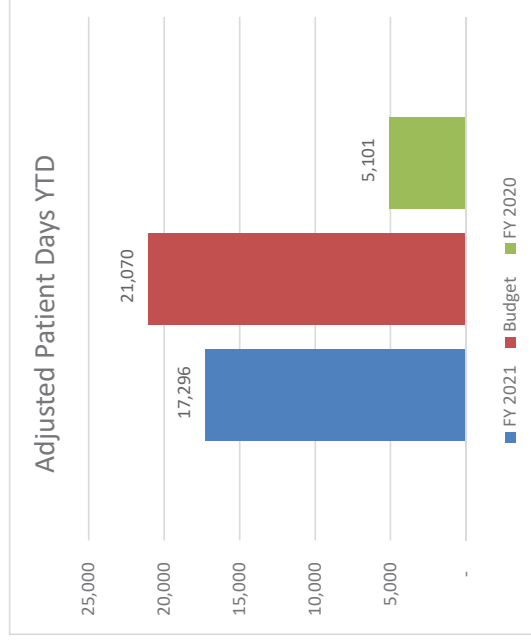
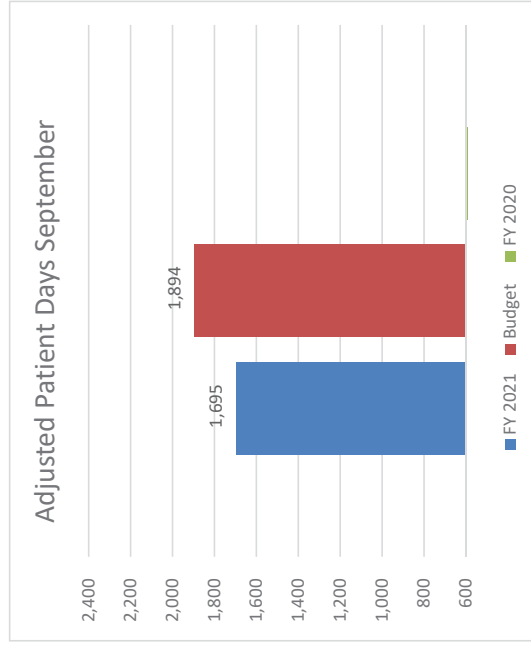
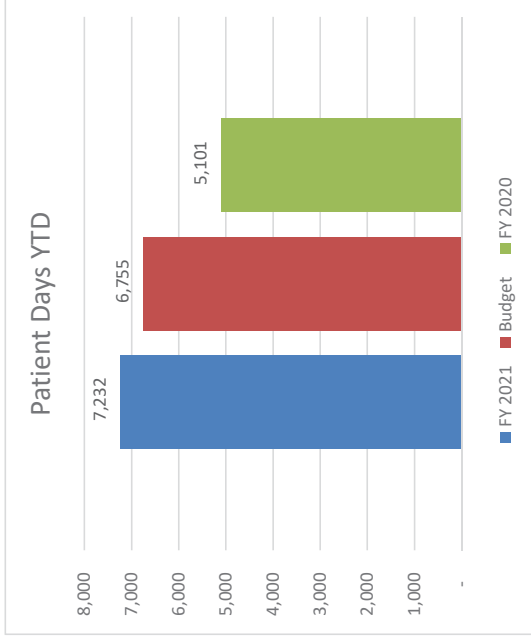
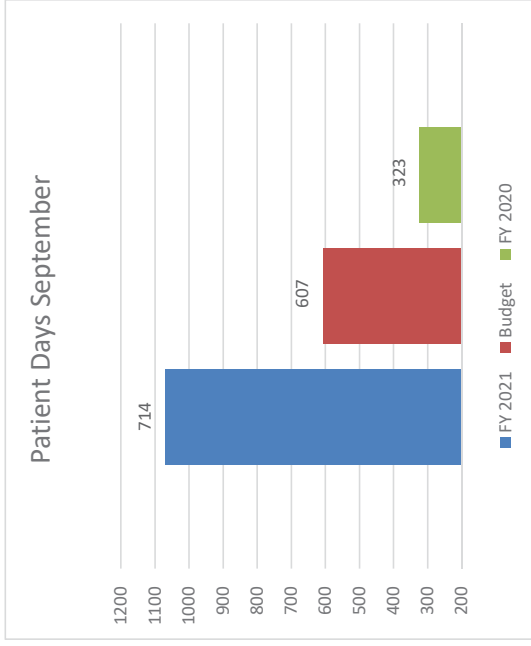
Staffing

Paid FTE	281.61	273.82	271.52	270.27	280.54	273.60	248.28	275.39	276.28	284.85	276.94	296.60	275.81	291.95	(5.5%)	296.85
Paid FTE per Adjusted Occupied Bed	7.01	7.27	5.91	5.28	4.98	6.20	5.01	5.88	6.05	5.54	5.07	6.52	5.82	5.06	14.8%	6.97

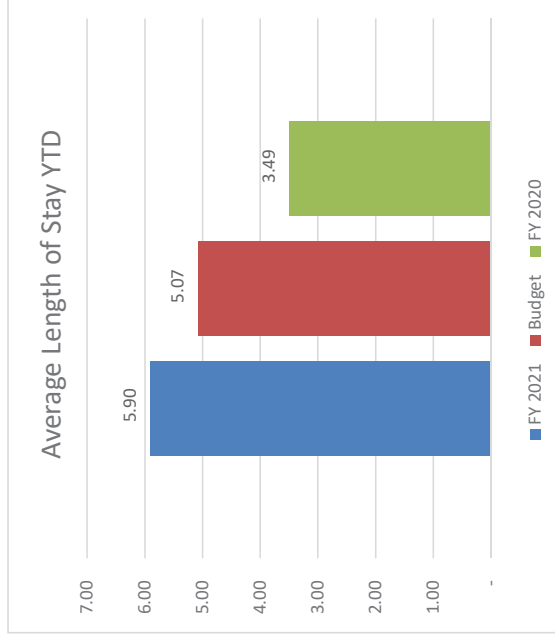
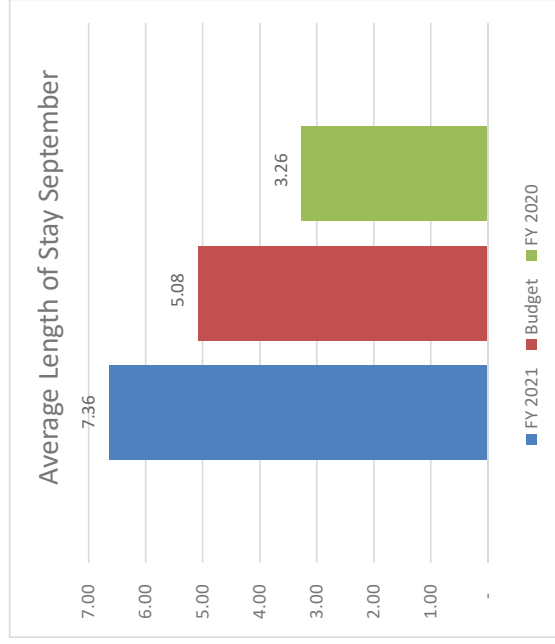
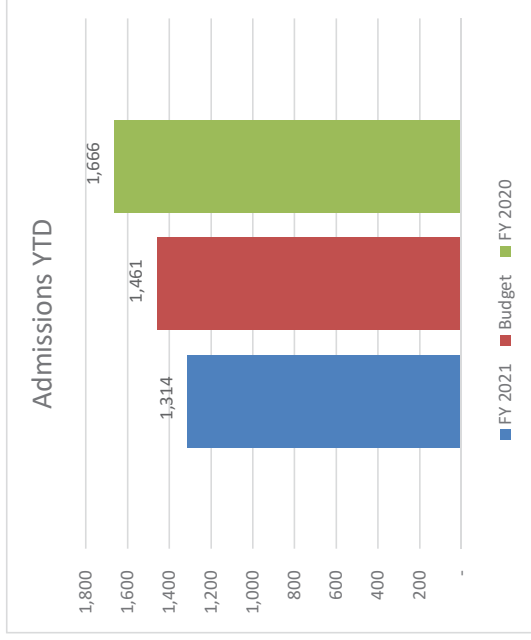
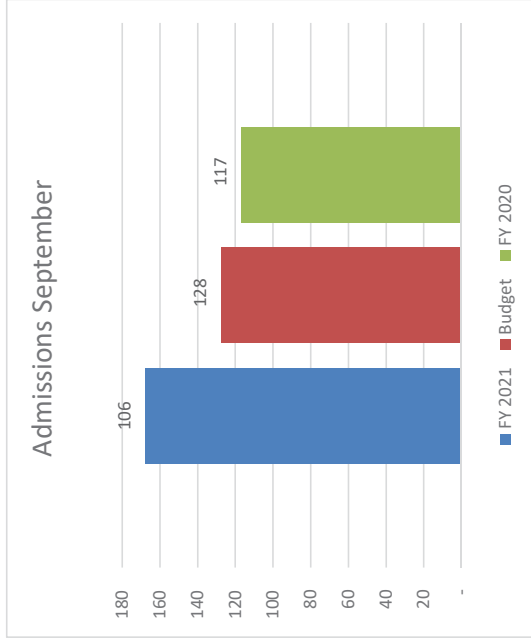
Operational Performance

Gross Revenue Per Adj Pat Day	8,543	8,857	7,794	7,847	7,556	8,303	8,169	8,306	8,069	7,096	8,293	8,687	8,127	7,034	15.5%	27,162
Net Revenue Per Adj Pat Day	(50)	4,884	2,479	1,689	1,739	(396)	3,234	167	1,609	1,494	2,515	2,786	2,216	1,664	33.2%	5,209
Salaries & Benefits as % of Net Pat Revenue	-3759%	36%	61%	74%	72%	-367%	45%	850%	96%	91%	53%	74%	82%	82%	0.3%	98%
Labor Cost per Adj Pat Day	1,865	1,782	1,510	1,250	1,257	1,456	1,444	1,420	1,548	1,363	1,333	2,056	1,524	1,348	13.0%	5,271
Total Expense Per Adj Pat Day	2,983	3,117	2,677	2,328	2,289	2,547	2,741	2,538	2,498	2,293	2,504	3,663	2,682	2,285	17.4%	9,621

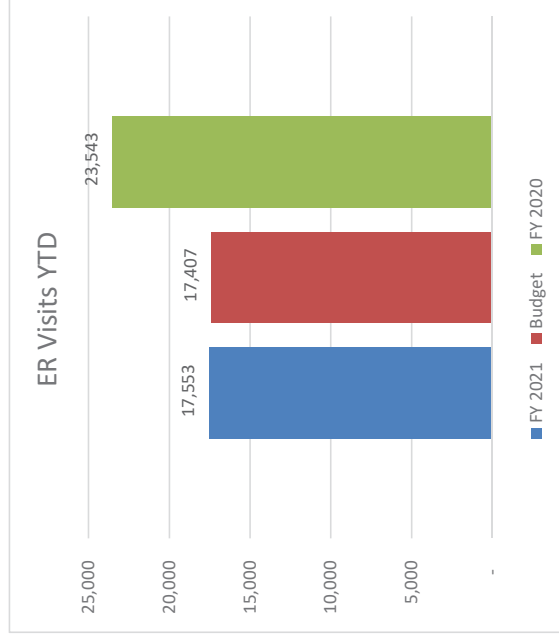
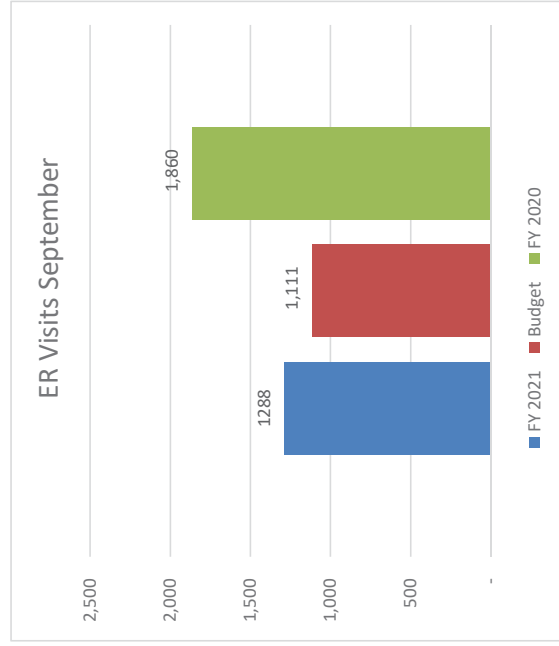
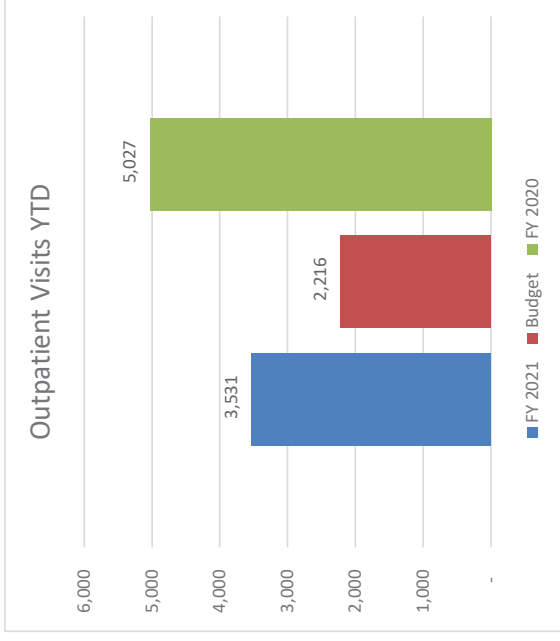
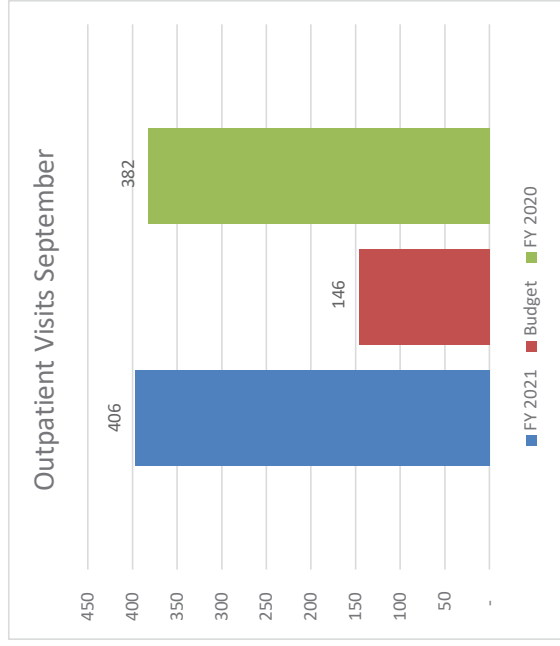
LAKESIDE MEDICAL CENTER Inpatient



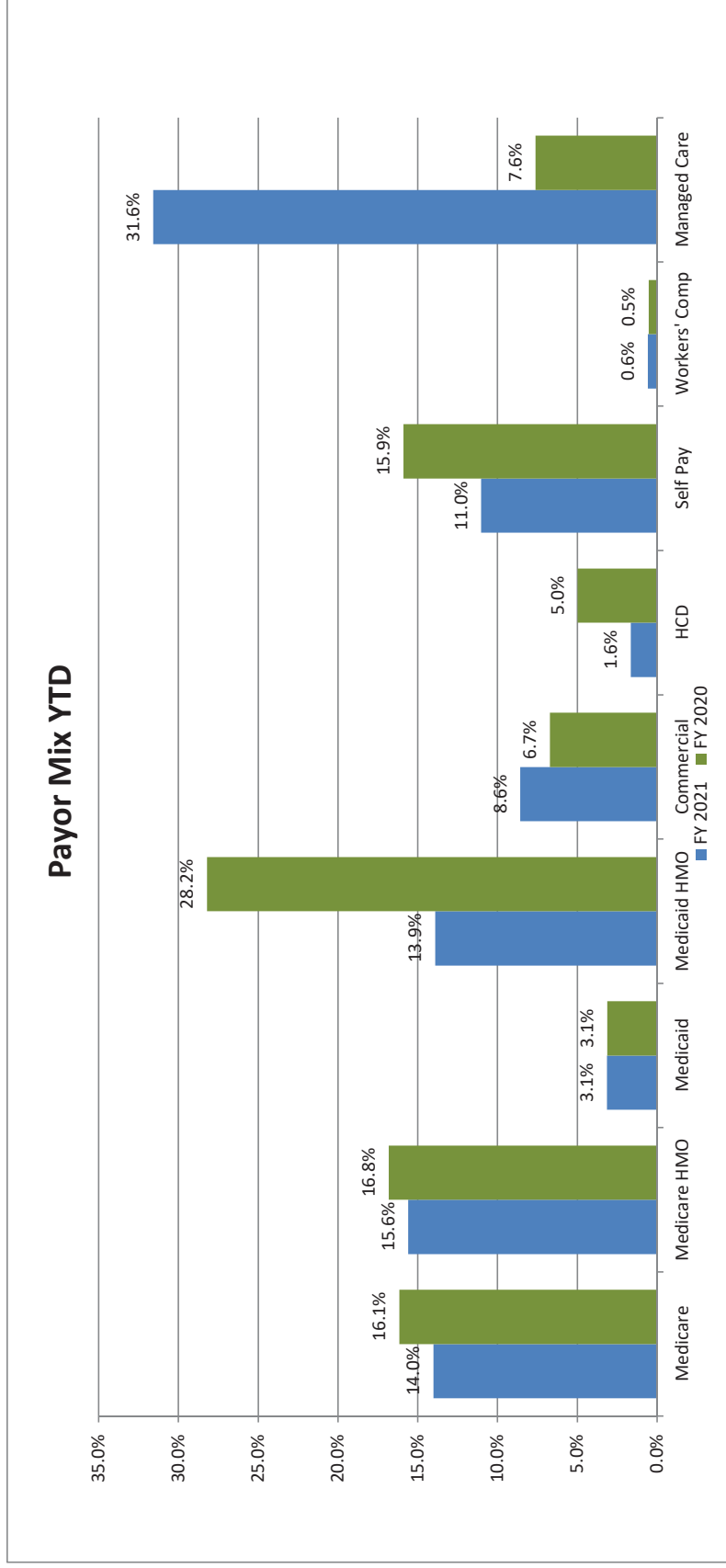
LAKESIDE MEDICAL CENTER Inpatient



LAKESIDE MEDICAL CENTER Outpatient



LAKESIDE MEDICAL CENTER Revenue





SUPPLEMENTAL INFORMATION

PRIMARY CARE CLINICS

Primary Care Clinics Statement of Revenues and Expenses

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

		Current Month			Fiscal Year To Date		
Actual	Budget	Variance	%	Actual	Budget	Variance	%
31,642	17,326	(14,316)	(82.6%)	29,980	(1,662)	(5.5%)	Depreciation
<i>Overhead Allocations:</i>							
-	2,875	2,875	100.0%	2,925	2,925	100.0%	Risk Mgmt
118,450	206,967	88,518	42.8%	-	(118,450)	0.0%	Rev Cycle
3,797	3,852	55	1.4%	-	(3,797)	0.0%	Internal Audit
21,814	19,769	(2,045)	(10.3%)	22,250	437	2.0%	Home Office Facilities
-	33,232	33,232	100.0%	38,865	38,865	100.0%	Administration
11,850	47,193	35,343	74.9%	4,818	28,9%	Human Resources	
-	17,241	17,241	100.0%	25,970	25,970	100.0%	Legal
707	8,048	7,342	91.2%	6,074	89.6%	Records	
5,341	6,886	1,545	22.4%	6,015	674	11.2%	Compliance
4,431	7,007	2,575	36.8%	(4,431)	(4,431)	0.0%	Comm Engage Plan
89,506	82,883	(6,622)	(8.0%)	-	(89,506)	0.0%	IT Operations
6,238	8,445	2,208	26.1%	-	(6,238)	0.0%	IT Security
31,112	40,421	9,309	23.0%	-	(31,112)	0.0%	IT Applications
54,672	47,251	(7,421)	(15.7%)	-	(54,672)	0.0%	Security Services
311,620	121,544	(190,076)	(156.4%)	-	(311,620)	0.0%	IT EPIC
22,694	31,664	8,970	28.3%	29,819	7,125	23.9%	Finance
6,832	10,057	3,226	32.1%	6,841	9	0.1%	Public Relations
-	8,302	8,302	100.0%	134,667	134,667	100.0%	Information Technology
-	4,762	4,762	100.0%	-	-	0.0%	Corporate Quality
14,428	11,235	(3,193)	(28.4%)	-	(14,428)	0.0%	Project MGMT Office
-	1,328	1,328	100.0%	2,022	2,022	100.0%	Managed Care Contract
703,490	720,963	17,473	2.4%	292,824	(410,666)	(140.2%)	Total Overhead Allocations
3,792,668	3,905,094	112,426	2.9%	3,001,728	(790,940)	(26.3%)	Total Expenses
\$ (1,078,331)	\$ (2,977,373)	\$ 1,899,041	(63.8%)	\$ (539,891)	\$ (538,441)	99.7%	Net Margin
(22,718)	-	22,718	0.0%	(102,945)	(80,227)	77.9%	Capital
\$ -	\$ 2,791,000	\$ 2,791,000	100.0%	\$ 74,652	\$ 74,652	100.0%	General Fund Support/Transfer In

Primary Care Clinics Statement of Revenues and Expenses by Month

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Year to Date
Gross Patient Revenue	1,842,091	1,535,619	1,685,042	1,321,289	1,595,963	1,870,757	2,230,803	2,066,863	2,570,345	1,642,906	1,898,181	1,993,303	22,193,163
Contractual Allowances	509,972	470,624	453,962	303,580	404,818	543,358	562,148	464,663	764,925	1,306,229	997,078	1,247,167	8,028,524
Charity Care	158,009	-	1,751,178	434,796	538,927	782,187	809,796	782,187	998,787	46,809	34,285	1,180	6,086,572
Bad Debt	788,060	799,873	(860,761)	338,348	289,586	402,163	405,163	331,418	331,418	(33,070)	(5,864)	242,880	3,066,575
Other Patient Revenue	414,367	286,936	350,651	704,172	439,031	439,031	905,685	513,976	513,976	732,778	398,507	320,343	6,019,454
Net Patient Revenue	800,416	552,056	691,315	948,737	801,664	833,649	1,359,153	965,440	989,190	1,055,716	1,271,190	762,419	11,030,946
Collections %	43.45%	35.95%	41.03%	71.80%	50.23%	44.56%	60.93%	46.71%	38.48%	64.26%	66.97%	39.44%	49.70%
Grant Funds	104,059	-	130,321	2,271,653	(629,521)	974,299	1,566,400	1,488,547	1,325,105	1,403,407	1,271,064	1,950,380	11,855,713
Other Financial Assistance	-	-	588,890	-	179,158	5,710	27,883	19,439	10,358	80,496	39,642	-	951,576
Other Revenue	9,732	1,689	3,302	809	26,487	13,061	14,654	1,578	513	1,823	1,392	1,537	76,576
Total Other Revenues	113,791	1,689	722,512	2,272,462	(423,876)	993,070	1,608,937	1,509,564	1,335,976	1,485,726	1,312,098	1,951,917	12,883,865
Total Revenues	914,207	553,745	1,413,827	3,221,199	377,788	1,826,719	2,968,090	2,475,004	2,325,166	2,541,441	2,583,288	2,714,337	23,914,810
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,612,557	1,177,306	1,310,859	1,482,538	1,423,741	1,551,730	1,629,754	1,480,781	1,418,683	1,315,072	1,390,250	2,099,596	17,892,865
Benefits	394,482	358,883	404,282	407,085	420,732	406,226	427,189	429,489	409,178	401,983	333,706	455,433	4,848,667
Purchased Services	35,150	59,503	33,586	71,484	37,746	151,018	248,133	165,470	118,524	109,493	56,438	72,565	1,159,111
Medical Supplies	19,841	24,253	46,148	84,529	35,626	41,196	28,620	177,731	28,620	46,960	114,069	90,448	736,923
Other Supplies	2,686	4,538	6,638	12,332	32,280	13,176	13,176	25,786	26,739	89,909	19,548	25,168	264,995
Medical Services	92,709	55,338	56,152	45,535	47,251	80,848	55,468	61,653	74,408	63,843	46,697	34,055	713,958
Drugs	82,365	73,242	60,219	55,947	59,708	49,636	62,547	51,857	43,509	54,509	43,486	100,914	743,999
Repairs & Maintenance	6,725	4,061	3,703	7,491	3,518	6,010	14,332	5,264	16,859	153,420	28,202	33,372	282,957
Lease & Rental	105,605	104,935	96,815	102,475	102,093	106,287	97,843	125,417	100,952	101,103	101,374	97,033	1,241,933
Utilities	5,024	7,438	6,515	7,438	6,285	6,819	7,229	7,549	7,689	8,900	7,689	8,900	87,942
Other Expense	26,726	23,914	19,350	30,184	26,817	25,554	52,110	12,164	21,251	24,966	59,175	36,025	358,236
Insurance	3,716	2,892	4,649	3,331	3,331	3,331	3,331	4,026	4,026	4,026	4,026	4,026	45,096
Total Operational Expenses	2,387,586	1,900,008	2,050,081	2,310,763	2,199,128	2,432,851	2,639,732	2,396,345	2,425,163	2,372,830	2,204,660	3,057,536	28,376,683
Net Performance before Depreciation & Overhead Allocations	(1,473,379)	(1,346,263)	(636,254)	910,436	(1,821,340)	(606,132)	328,358	78,659	(99,997)	168,611	378,628	(343,199)	(4,461,873)
Depreciation	20,995	42,335	31,665	31,896	31,706	31,593	31,592	31,525	31,296	31,098	31,096	31,642	378,440
<i>Overhead Allocations:</i>													
Risk Mgt	2,012	1,749	1,914	1,899	1,713	4,413	6,192	3,330	5,042	4,167	2,046	-	34,477
Rev Cycle	215,318	177,247	193,553	191,807	169,849	197,221	212,145	227,981	227,784	255,603	294,666	118,450	2,481,625
Internal Audit	261	2,616	2,029	2,200	1,135	1,246	7,147	2,099	4,462	6,583	1,246	3,797	34,822
Home Office Facilities	17,338	17,140	20,876	18,248	17,620	20,104	9,551	18,817	22,018	20,056	20,987	21,814	224,547
Administration	23,989	26,119	37,026	49,639	36,008	44,102	45,279	41,444	42,774	34,474	17,706	-	398,561
Human Resources	42,681	36,896	77,803	48,416	60,805	77,147	45,279	64,825	46,846	46,879	44,579	11,850	562,029
Legal	10,774	17,493	15,799	13,841	14,400	25,673	38,855	11,084	18,366	40,541	70	-	206,896
Records	7,126	7,518	8,070	7,478	6,020	8,062	8,127	8,395	9,635	3,387	2,443	707	76,967
Compliance	4,813	5,086	3,125	8,017	5,183	8,271	(1,922)	10,663	12,669	656	2,013	5,341	63,915
Comm Engage Plan	6,756	6,116	6,940	6,621	6,060	6,624	7,424	7,980	11,422	6,688	7,031	4,431	84,094
IT Operations	50,805	70,691	70,850	96,616	74,267	109,310	44,072	71,882	68,316	53,197	52,523	89,506	852,036
IT Security	7,989	5,317	9,366	7,739	6,244	7,634	7,228	7,647	17,290	8,247	10,402	6,238	101,341
IT Applications	23,045	40,862	27,197	44,176	20,639	34,133	93,419	84,646	50,443	(19,562)	35,527	31,112	465,452
Security Services	42,428	41,825	46,136	46,399	42,607	47,158	46,146	46,862	50,177	48,223	48,223	54,672	561,286
IT EPIC	48,185	53,582	65,588	81,914	67,894	180,108	137,495	141,685	155,840	(37,053)	225,929	311,620	1,482,787
Finance	29,725	28,440	29,666	29,666	28,580	25,741	24,055	26,159	34,115	34,115	32,694	22,694	346,684
Public Relations	11,466	8,342	3,617	5,257	7,654	9,625	5,644	9,271	5,769	5,395	5,124	6,832	83,995
Information Technology	9,827	8,743	9,357	10,810	11,233	10,196	10,978	11,671	15,104	1,680	35	-	99,633
Corporate Quality	5,104	7,241	4,957	5,242	5,965	6,203	7,863	3,677	5,912	3,677	32	-	57,129
Project MGMT Office	7,800	8,679	9,051	9,313	8,472	9,555	10,778	10,897	10,025	10,265	13,101	14,428	122,363
Managed Care Contract	1,205	1,157	1,243	1,204	1,096	508	3	-	-	-	-	-	6,415
Total Overhead Allocations	568,646	572,859	643,078	686,500	589,359	833,035	723,759	813,878	809,020	535,632	817,797	703,490	8,297,053
Total Expenses	2,977,227	2,515,202	2,724,824	3,029,159	2,820,193	3,297,479	3,395,083	3,241,748	3,265,479	2,939,561	3,053,553	3,792,668	37,082,176
Net Margin	(2,063,020)	(1,961,457)	(1,310,997)	192,040	(2,442,405)	(1,470,760)	(426,994)	(766,744)	(940,313)	(398,119)	(470,265)	(1,078,331)	(13,137,366)
Capital	-	13,568	3,078	(16,646)	-	-	-	-	-	-	22,718	-	-
General Fund Support/ Transfer In	2,042,025	-	3,228,001	-	700,000	-	-	4,017,004	-	-	-	-	9,987,030

Primary Care Clinics - Medical Statement of Revenues and Expenses by Location

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Clinic Administration	West Palm Beach Clinic	Lantana Clinic	Delray Clinic	Belle Glade Clinic	St Ann Place	Lewis Center	Lake Worth Clinic	Jupiter Clinic	West Boca Clinic	Mangonia Park Clinic	Mobile Warrior	Mobile Van Scout	Mobile Van Hero	Total
Gross Patient Revenue	-	2,256,345	3,648,657	1,559,643	1,374,758	-	1,449,432	2,757,178	1,126,334	1,383,387	1,075,700	7,558	-	3,177	16,642,170.48
Contractual Allowances	-	798,453	1,308,077.16	394,024	264,395	-	294,479	893,095	404,436	557,015	244,991	(25,413)	-	(102)	5,133,452
Charity Care	-	583,384	894,234	448,229	267,251	-	491,615	859,517	262,935	222,722	308,163	4,024	-	-	4,342,076
Bad Debt	-	350,458	241,065	173,666	173,666	-	531,466	1,736,666	210,435	63,680	426,598	17,119	-	-	2,572,308
Total Contractual Allowances and Bad Debt	-	1,732,296	2,666,847	1,083,318	705,312	-	1,317,560	1,963,047	760,657	843,417	979,753	(4,270)	-	(102)	12,047,835
Other Patient Revenue	-	819,218	1,053,963	498,197	253,826	-	295,536	520,605	190,979	253,527	221,545	60,825	-	-	4,168,222
Net Patient Revenue	-	1,343,268	2,035,774	974,522	923,272	-	427,409	1,314,736	556,656	793,496	317,492	72,652	-	3,075	8,762,353
Collection %	0.00%	59.53%	55.80%	62.48%	67.16%	0.00%	29.49%	47.68%	49.42%	57.36%	29.51%	96.128%	0.00%	0.00%	52.65%
Grant Funds	3,083,727	1,131,320	1,463,712	658,217	673,373	827	304,635	1,106,508	439,515	469,071	760,186	159,297	(43,512)	62,676	10,269,553
Other Financial Assistance	349,232	3,629	132,235	763	(6,990)	-	6,530	(24,746)	12,267	(4,079)	(23,024)	31,226	131,246	145,595	753,884
Other Revenue	12,878	10,809	7,038	12,141	13,167	-	58	6,687	3,236	10,534	13	-	15	-	76,576
Total Other Revenues	3,445,836	1,145,758	1,602,984	671,121	679,550	827	311,223	1,088,449	455,018	475,526	737,176	190,524	87,749	208,271	11,100,013
Total Revenues	3,445,836	2,489,026	3,638,758	1,645,643	1,602,822	827	738,632	2,403,186	1,011,674	1,269,023	1,054,668	263,176	87,749	211,347	19,862,366
<i>Direct Operational Expenses:</i>															
Salaries and Wages	4,458,544	1,633,312	2,171,932	1,000,411	960,396	-	445,155	1,732,535	675,434	709,426	1,000,732	239,676	51,123	69,757	15,148,433
Benefits	1,069,512	451,770	598,322	295,612	282,920	-	122,336	494,691	177,397	213,134	283,065	85,954	10,548	18,809	4,104,072
Purchased Services	752,407	40,882	91,424	36,441	42,929	-	15,789	56,534	27,389	35,541	23,870	2,696	2,696	2,696	1,131,293
Medical Supplies	83,197	62,901	82,645	40,818	52,376	-	62,300	65,814	24,754	22,312	48,308	8,453	1,144	1,332	557,949
Other Supplies	50,042	14,794	35,218	20,588	4,075	6,560	3,278	7,980	6,741	7,120	6,785	3,110	6,454	5,470	178,214
Medical Services	24,150	83,385	147,478	74,161	54,327	-	29,235	169,807	42,697	67,099	21,618	-	-	247	713,958
Drugs	-	328,797	206,336	96,519	64,314	-	1,663	20,349	6,708	13,125	596	1,302	-	247	743,956
Repairs & Maintenance	193,174	4,293	3,662	4,783	4,741	-	2,512	23,225	3,075	6,118	5,162	10,143	2,585	1,731	265,202
Lease & Rental	-	129,035	166,320	88,920	83,260	-	270	256,144	83,333	114,467	50,848	205	70	205	973,077
Utilities	-	4,385	4,188	1,294	20,410	-	2,352	14,373	8,327	6,696	5,227	-	-	-	67,254
Other Expense	206,104	16,386	25,674	9,814	6,390	340	7,124	16,592	4,158	8,265	10,711	5,241	3,790	1,429	322,017
Insurance	-	5,451	5,195	4,136	1,955	-	553	2,705	1,342	1,657	933	8,102	5,458	6,885	44,374
Total Operational Expenses	6,837,129	2,775,390	3,538,393	1,673,498	1,578,094	8495	692,568	2,864,748	1,061,357	1,204,960	1,457,855	364,882	83,868	108,561	24,249,800
Net Performance before Depreciation & Overhead Allocations	(3,391,293)	(286,365)	100,365	(27,855)	24,728	(7,668)	46,064	(461,562)	(49,683)	64,063	(403,187)	(101,706)	3,881	102,786	(4,387,433)
Depreciation	5,661	13,745	14,520	1,366	69,536	-	326	4,441	2,743	4,795	1,842	75,000	13,884	83,526	291,385
<i>Overhead Allocations:</i>															
Risk Mgt	5,578	3,202	5,589	2,416	1,968	-	878	3,521	1,236	1,541	2,103	631	435	443	29,542
Rev Cycle	-	279,982	488,203	211,224	172,057	-	76,860	307,905	108,119	134,744	183,816	55,187	38,040	38,733	2,094,870
Internal Audit	5,814	3,235	5,601	2,423	1,974	-	882	3,532	1,240	1,546	2,109	633	436	444	29,870
Home Office Facilities	202,190	-	-	-	-	-	-	-	-	-	-	-	-	-	202,190
Administration	64,482	37,017	64,630	27,928	22,753	-	10,153	40,706	14,293	17,812	24,305	7,295	5,023	5,118	341,513
Human Resources	124,671	59,862	68,384	38,346	31,955	-	14,912	53,471	17,043	21,303	34,298	8,521	6,391	6,391	485,550
Legal	33,462	19,205	33,639	14,489	11,804	-	5,268	21,119	7,415	9,241	12,610	3,785	2,606	2,655	177,298
Records	12,851	7,150	12,380	5,356	4,363	-	1,949	7,808	2,742	3,417	4,661	1,399	965	982	66,023
Compliance	10,672	5,938	10,281	4,448	3,623	-	1,619	6,484	2,277	2,837	3,871	1,162	801	816	54,827
Comrn Engage Plan	13,595	7,805	13,625	5,895	4,802	-	2,145	8,593	3,017	3,760	5,130	1,540	1,062	1,081	72,050
IT Operations	142,261	79,153	137,048	59,295	48,300	-	21,576	86,435	30,351	37,825	51,601	15,492	10,679	10,873	730,888
IT Security	16,384	9,407	16,419	7,104	5,786	-	2,585	10,355	3,636	4,532	6,182	1,856	1,303	1,303	86,827
IT Applications	77,715	43,240	74,867	32,392	26,385	-	11,787	47,218	16,580	20,663	28,189	8,463	5,834	5,940	399,271
IT Support	22,050	61,219	105,998	45,861	37,357	-	16,688	66,852	23,474	29,255	39,910	11,982	8,410	8,410	8,259
Security Services	239,227	133,103	230,461	99,710	81,221	-	36,282	145,349	51,038	63,607	63,607	26,051	17,957	18,284	1,229,064
IT EPIC	57,885	32,206	55,763	24,126	19,653	-	8,779	35,169	12,349	15,391	20,996	6,304	4,345	4,424	297,390
Finance	14,024	7,803	13,510	5,845	4,761	-	2,127	2,992	3,729	5,087	5,087	1,527	1,053	1,072	72,052
Public Relations	16,114	9,248	16,199	6,978	5,685	-	2,537	10,170	3,571	4,450	6,072	1,279	1,255	1,279	85,380
Information Technology	9,241	5,303	9,284	4,001	3,260	-	1,455	5,832	2,048	2,552	3,482	1,045	720	733	48,955
Corporate Quality	20,431	11,367	19,682	8,515	6,936	-	3,099	12,413	4,359	5,432	7,411	2,225	1,534	1,562	104,965
Project MGMT Office	-	728	1,261	546	444	-	199	795	279	348	475	143	98	100	5,416
Managed Care Contract	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Overhead Allocations	1,088,646	816,176	1,382,823	606,898	495,087	-	221,778	882,248	308,061	383,987	529,078	157,063	108,770	110,642	7,091,256
Total Expenses	7,931,437	3,605,311	4,935,737	2,281,763	2,142,718	8,495	914,671	3,751,437	1,372,160	1,593,742	1,988,774	596,946	206,522	302,730	31,632,441
Net Margin	\$(4,485,601)	\$(1,116,285)	\$(1,296,978)	\$(636,120)	\$(539,896)	\$(7,668)	\$(176,039)	\$(1,348,251)	\$(360,486)	\$(324,719)	\$(934,106)	\$(333,769)	\$(118,773)	\$(91,383)	\$(11,770,075)
Capital	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
General Fund Support/ Transfer In	\$ 9,025,566	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,025,566

Primary Care Clinics- Medical Statement of Revenue and Expenses

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Current Month			Prior Year			Fiscal Year To Date			%			
	Actual	Budget	Variance	%	Variance	%	Actual	Budget	Variance				
	1,312,970	912,599	400,371	43.9%	1,527,021	(214,051)	(14.0%)	11,589,352	5,052,818	15,476,662	43.6%	1,165,508	7.5%
388,545	168,894	(219,651)	416,191	(130.1%)	27,646	6.6%	2,136,534	2,997,122	(860,588)	3,134,856	(140.3%)	(1,998,799)	(63.8%)
1,180	309,744	(308,564)	-	99.6%	(1,180)	0.0%	4,342,076	3,928,562	(413,514)	4,188,478	(10.5%)	(153,598)	(3.7%)
205,288	147,824	(57,464)	987,858	(38.9%)	782,571	79.2%	1,871,730	(700,578)	(2,572,308)	4,168,423	(37.4%)	1,596,115	38.3%
595,012	626,462	31,450	1,404,049	5.0%	809,037	57.6%	7,936,826	(4,114,213)	(11,491,757)	11,491,757	(51.8%)	(556,282)	(4.8%)
272,654	263,851	8,803	310,039	3.3%	(37,385)	(12.1%)	3,330,302	837,920	2,492,382	3,438,753	25.2%	729,469	21.2%
990,612	549,988	440,624	493,011	80.1%	557,601	128.8%	6,982,828	1,779,525	5,203,303	7,423,658	25.5%	1,338,695	18.0%
75.45%	60.27%		28.36%				60.25%			47.97%			
1,702,848	35,414	1,667,434	4,708.4%	975,356	727,492	74.6%	6,170,191	4,099,362	2,070,829	6,710,257	66.4%	3,559,296	53.0%
-	145,852	(145,852)	(100.0%)	(35,644)	35,644	(100.0%)	5,041,440	(4,287,556)	(753,884)	1,920,733	(85.0%)	(1,166,849)	(60.8%)
1,537	45,007	(43,470)	(96.6%)	503,348	(501,811)	(99.7%)	540,381	(463,805)	(76,576)	578,373	(85.8%)	(501,797)	(86.8%)
1,704,385	226,273	1,478,112	653.2%	1,443,060	261,325	18.1%	11,100,013	11,752,012	(651,999)	9,209,363	(5.5%)	1,890,650	20.5%
2,694,997	776,261	1,918,736	247.2%	1,876,071	818,926	43.7%	18,734,840	1,127,526	17,607,314	16,633,021	6.0%	3,229,345	19.4%
<i>Direct Operational Expenses:</i>													
1,765,749	1,810,850	45,101	2.5%	1,521,816	(243,933)	(16.0%)	15,232,298	83,865	15,148,433	14,365,557	0.6%	(782,875)	(5.4%)
385,062	373,549	(11,513)	(3.1%)	350,730	(34,332)	(9.8%)	3,982,100	(121,972)	4,104,072	3,731,106	(3.1%)	(372,966)	(10.0%)
69,684	42,589	(27,095)	(63.6%)	72,659	2,975	4.1%	606,831	(524,462)	1,131,293	772,218	(86.4%)	(359,075)	(46.5%)
62,948	99,694	36,746	36.9%	75,285	12,336	16.4%	1,265,188	707,239	557,949	296,745	55.9%	(261,205)	(88.0%)
15,546	19,080	3,534	18.5%	(16,074)	(31,621)	(196.7%)	178,214	50,889	127,325	137,824	22.2%	(40,391)	(29.3%)
34,055	76,691	42,636	55.6%	77,729	43,674	56.2%	973,182	259,724	713,458	1,076,791	26.6%	362,833	33.7%
100,879	55,312	(45,567)	(82.4%)	84,349	(16,531)	(19.6%)	743,956	702,074	41,882	989,506	(6.0%)	245,550	24.8%
26,266	7,305	(18,961)	(259.6%)	11,593	(14,673)	(126.6%)	265,202	87,693	177,509	272,423	(202.4%)	7,221	2.7%
74,633	140,296	65,662	46.8%	64,174	(10,459)	(16.3%)	1,362,274	389,196	973,077	1,043,975	28.6%	70,898	6.8%
7,052	5,990	(1,062)	(17.7%)	5,446	(1,606)	(29.5%)	67,254	72,078	4,824	59,389	6.7%	(7,865)	(13.2%)
35,341	33,415	(1,926)	(5.8%)	44,718	9,378	21.0%	322,017	415,775	93,758	294,056	22.6%	(27,961)	(9.5%)
3,938	4,314	376	8.7%	3,675	(263)	(7.2%)	44,374	51,537	7,163	32,253	13.9%	(12,120)	(37.6%)
2,581,155	2,669,084	87,929	3.3%	2,296,100	(285,056)	(12.4%)	24,249,800	730,333	24,980,132	23,071,844	2.9%	(1,177,956)	(5.1%)
113,841	(1,892,823)	2,006,665	(106.0%)	(420,029)	533,871	(127.1%)	(4,387,453)	1,857,859	(6,245,292)	(6,438,822)	(29.7%)	2,051,389	(31.9%)
Net Performance before Depreciation and Overhead Allocations													

Primary Care Clinics- Medical Statement of Revenue and Expenses

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

Actual	Budget	Current Month		Prior Year	Fiscal Year To Date		Variance	%
		Variance	%		Variance	%		
24,070	12,913	(11,157)	(86.4%)	21,006	(3,064)	(14.6%)	(117,610)	(67.7%)
-	2,464	2,464	100.0%	2,406	2,406	100.0%	29,563	22
99,696	174,744	75,048	42.9%	-	(99,696)	0.0%	2,096,920	2,050
3,257	3,301	44	1.3%	-	(3,257)	0.0%	39,607	9,737
19,642	17,713	(1,928)	(10.9%)	19,886	244	1.2%	212,558	10,368
-	28,478	28,478	100.0%	31,962	31,962	100.0%	341,737	224
10,140	40,769	30,629	75.1%	13,645	3,506	25.7%	485,550	3,671
606	14,775	14,169	95.2%	13,645	21,357	100.0%	177,298	-
4,581	6,897	2,316	33.6%	5,577	4,971	89.1%	82,763	16,740
3,727	5,901	2,174	36.8%	4,947	365	7.4%	70,810	15,983
76,779	71,027	(5,753)	(8.1%)	-	(3,727)	0.0%	72,054	5
5,248	7,237	1,989	27.5%	-	(76,779)	0.0%	852,320	121,432
26,688	34,639	7,950	23.0%	-	(5,248)	0.0%	86,846	19
46,493	40,184	(6,309)	(15.7%)	-	(26,688)	0.0%	415,662	16,391
267,312	104,156	(163,155)	(156.6%)	-	(46,493)	0.0%	482,208	4,893
5,860	27,135	21,270	78.4%	24,522	(267,312)	0.0%	1,229,064	20,808
-	8,618	8,618	100.0%	5,626	5,055	20.6%	325,618	28,227
-	7,115	7,115	100.0%	110,747	(235)	(4.2%)	103,419	31,367
-	4,080	4,080	100.0%	-	110,747	100.0%	85,380	-
12,376	9,628	(2,748)	(28.5%)	-	(12,376)	0.0%	48,955	6
-	1,121	1,121	100.0%	1,643	1,643	100.0%	115,536	10,571
601,872	615,984	14,112	2.3%	242,317	(359,555)	(148.4%)	7,391,810	300,554
3,207,098	3,297,982	90,883	2.8%	2,559,423	(647,675)	(25.3%)	32,526,943	894,501
\$ (512,101) \$	(2,521,721) \$	2,009,619	(79.7%)	(683,353) \$	171,251	(25.1%)	(13,792,103) \$	2,022,028
(22,718)	-	22,718	0.0%	-	22,718	0.0%	847,210	847,210
\$ - \$	2,485,000 \$	2,485,000	100.0%	74,652 \$	74,652	100.0%	14,650,000 \$	5,624,434
							9,583,293 \$	557,727
							26,977,783	(4,654,658)
							(10,344,762) \$	(1,425,313)
							18,539	77.4%
							3,732,165	(3,359,091)
							2,883	(17.3%)
							(1,425,313)	13.8%
							100.0%	0.0%
							38.4%	5.8%

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

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Total
Gross Patient Revenue	-	2,063,874	1,906,959	887,656	692,504	5,550,992
Contractual Allowances	-	980,178	1,013,382	456,977	444,331	2,894,868
Charity Care	-	81,493	478,466	370,440	130,697	1,744,496
Bad Debt	-	122,939	302,658	46,369	22,301	494,267
Total Contractual Allowances and Bad Debt	-	1,918,010	1,794,506	823,787	597,329	5,133,631
Other Patient Revenue	-	811,476	405,889	290,840	343,027	1,851,231
Net Patient Revenue	-	957,339	518,342	354,709	438,202	2,268,592
Collection %	-	46.39%	27.18%	39.96%	63.28%	40.87%
Grant Funds	160,642	606,077	375,040	303,395	141,005	1,586,159
Other Financial Assistance	(1,389)	64,763	28,930	91,833	13,555	197,692
Other Revenue	-	-	-	-	-	-
Total Other Revenues	159,253	670,839	403,970	395,229	154,560	1,783,851
Total Revenues	159,253	1,628,179	922,312	749,937	592,762	4,052,444
<i>Direct Operational Expenses:</i>						
Salaries and Wages	477,118	935,631	569,398	530,856	231,429	2,744,432
Benefits	99,695	270,332	146,718	152,016	75,834	744,595
Purchased Services	-	5,544	6,514	4,606	11,154	27,818
Medical Supplies	-	62,782	50,208	36,001	29,983	178,974
Other Supplies	488	34,068	19,984	18,600	13,640	86,781
Drugs	-	-	41	2	-	43
Repairs & Maintenance	-	4,016	6,422	3,509	3,809	17,755
Lease & Rental	-	110,280	65,325	61,150	32,100	268,855
Utilities	-	4,344	4,708	1,814	9,822	20,688
Other Expense	2,282	14,007	8,304	7,710	3,917	36,220
Insurance	-	-	-	-	723	723
Total Operational Expenses	579,583	1,441,004	877,622	816,265	412,410	4,126,884
Net Performance before Depreciation & Overhead Allocations	(420,329)	187,175	44,690	(66,328)	180,353	(74,440)
Depreciation	-	23,941	11,266	10,135	41,712	87,054
<i>Overhead Allocations:</i>						
Risk Mgt	512	1,735	1,099	1,071	518	4,935
Rev Cycle	-	151,653	96,180	93,617	45,306	386,755
Internal Audit	514	1,740	1,103	1,074	520	4,951
Home Office Facilities	22,358	-	-	-	-	22,358
Administration	5,923	20,051	12,706	12,380	5,988	57,048
Human Resources	6,391	28,547	15,978	19,173	6,391	76,479
Legal	3,073	10,403	6,592	6,423	3,107	29,597
Records	1,136	3,846	2,439	2,374	1,149	10,944
Compliance	944	3,194	2,025	1,971	954	9,088
Comm Engage Plan	1,251	4,232	2,684	2,613	1,264	12,044
IT Operations	12,578	42,572	27,000	26,280	12,718	121,148
IT Security	1,507	5,100	3,235	3,148	1,524	14,514
IT Applications	6,871	23,256	14,749	14,356	6,948	66,181
Security Services	-	32,927	20,882	20,326	9,837	83,972
IT EPIC	21,152	71,589	45,403	44,193	21,387	203,723
Finance	5,118	17,322	10,986	10,693	5,175	49,294
Public Relations	1,240	4,197	2,662	2,591	1,254	11,943
Information Technology	1,480	5,010	3,174	3,093	1,496	14,253
Corporate Quality	849	2,873	1,820	1,774	858	8,173
Project/ MGMT Office	1,806	6,114	3,877	3,774	1,826	17,398
Managed Care Contract	-	392	248	242	117	999
Total Overhead Allocations	94,703	436,750	274,844	271,165	128,335	1,205,796
Total Expenses	674,286	1,901,695	1,163,732	1,097,565	582,457	5,419,735
Net Margin	\$(515,033)	\$(273,516)	\$(241,419)	\$(347,628)	10,305	\$(1,367,291)
Capital	-	-	-	-	-	-
General Fund Support/ Transfer In	-	961,464	65	-	-	961,464

Primary Care Clinics- Dental Statement of Revenues and Expenses

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

	Current Month				Fiscal Year To Date						
	Actual	Budget	Variance	%	Prior Year	Variance	%	Prior Year	Variance	%	
620,333	257,099	363,234	141.3%	371,587	248,746	149.4%	149.4%	2,220,778	2,818,188	2,732,804	97.0%
858,622	41,915	(816,707)	(1,948.5%)	(809,271)	49,351	(1,639.8%)	Contractual Allowances	(2,349,899)	494,533	(2,400,335)	(485.4%)
-	148,047	148,047	100.0%	114,058	114,058	100.0%	Charity Care	169,033	1,609,010	(135,486)	(8.4%)
37,592	16,344	(21,248)	(130.0%)	1,822	39,415	4.6%	Bad Debt	(281,337)	224,672	(269,595)	(120.0%)
896,215	206,306	(689,909)	(334.4%)	(693,391)	202,824	(341.9%)	Total Contractuals and Bad Debts	(2,462,203)	2,328,216	(2,805,416)	(120.5%)
47,689	93,923	(46,234)	(49.2%)	(106,173)	153,862	(69.0%)	Other Patient Revenue	639,117	1,287,168	564,064	43.8%
(228,192)	144,716	(372,908)	(257.7%)	(427,977)	199,785	(214.2%)	Net Patient Revenue	397,692	1,777,140	491,452	27.7%
-36.79%	56.29%	80.32%	Collection %					56.18%	63.06%		
247,532	6,744	240,788	3,570.4%	43,773	203,759	21.5%	Grant Funds	269,538	1,433,731	152,429	10.6%
-	-	-	0.0%	(182,223)	182,223	(100.0%)	Other Financial Assistance	197,692	500,452	(302,760)	(60.5%)
-	-	-	0.0%	-	-	0.0%	Other Revenue	-	-	-	0.0%
247,532	6,744	240,788	3,570.4%	(138,450)	385,982	(35.9%)	Total Other Revenues	467,230	1,934,183	(150,331)	(7.8%)
19,340	151,460	(132,120)	(87.2%)	(566,427)	585,767	(96.7%)	Total Revenues	864,923	3,711,323	341,121	9.2%
<i>Direct Operational Expenses:</i>											
333,847	371,326	37,479	10.1%	273,727	(60,120)	(22.0%)	Salaries and Wages	69,750	2,840,700	96,268	3.4%
70,371	67,851	(2,520)	(3.7%)	61,651	(8,721)	(14.1%)	Benefits	(57,571)	748,479	3,883	0.5%
2,881	3,091	210	6.8%	4,828	1,947	40.3%	Purchased Services	10,657	99,824	72,006	72.1%
27,499	12,193	(15,306)	(125.5%)	7,854	(19,645)	(250.1%)	Medical Supplies	(21,027)	203,458	24,484	12.0%
9,622	7,425	(2,197)	(29.6%)	336	(9,286)	(2,762.0%)	Other Supplies	2,419	30,136	(56,645)	(188.0%)
-	-	-	0.0%	-	-	0.0%	Medical Services	-	-	-	0.0%
34	60	26	42.8%	20	(15)	(75.8%)	Drugs	800	238	195	81.8%
7,105	2,319	(4,786)	(206.4%)	5,279	(1,826)	(34.6%)	Repairs & Maintenance	10,095	44,290	26,535	59.9%
22,400	26,669	4,269	16.0%	24,783	2,383	9.6%	Lease & Rental	19,023	301,515	32,660	10.8%
1,848	1,333	(515)	(38.6%)	2,966	1,118	37.7%	Utilities	(4,692)	24,321	3,633	14.9%
685	5,416	4,731	87.4%	1,340	656	48.9%	Other Expense	31,124	25,865	(10,355)	(40.0%)
88	37	(51)	(136.8%)	41	(47)	(115.7%)	Insurance	(235)	420	(303)	(72.1%)
476,380	497,720	21,340	4.3%	382,825	(93,556)	(24.4%)	Total Operational Expenses	60,300	4,319,245	192,361	4.5%
(457,040)	(346,260)	(110,780)	32.0%	202,942	(659,983)	(325.2%)	Net Performance before Depreciation & Overhead Allocations	925,223	(607,922)	533,482	(87.8%)

Primary Care Clinics- Dental Statement of Revenues and Expenses

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

		Current Month				Fiscal Year To Date				
Actual	Budget	Variance	%	Prior Year	Variance	%	Prior Year	Variance	%	
7,572	4,413	(3,159)	(71.6%)	8,974	1,402	15.6%	63,103	(23,952)	(38.0%)	
<i>Overhead Allocations:</i>										
			100.0%	520	520	100.0%	2,106	(2,829)	(134.3%)	
18,754	32,224	13,470	41.8%	-	(18,754)	0.0%	218,279	(168,476)	(77.2%)	
540	551	11	2.0%	-	(540)	0.0%	7,196	2,245	31.2%	
2,172	2,055	(117)	(5.7%)	2,365	193	8.2%	24,538	2,181	8.9%	
-	4,754	4,754	100.0%	6,903	6,903	100.0%	57,048	-	0.0%	
1,711	6,425	4,714	73.4%	3,023	1,313	43.4%	77,099	15,907	21.8%	
-	2,466	2,466	100.0%	4,613	4,613	100.0%	37,490	7,893	21.1%	
100	1,151	1,051	91.3%	1,204	1,104	91.7%	14,495	3,552	24.5%	
759	985	226	22.9%	1,068	309	28.9%	16,680	7,592	45.5%	
705	1,002	297	29.7%	-	(705)	0.0%	-	(12,044)	0.0%	
12,727	11,857	(870)	(7.3%)	-	(12,727)	0.0%	-	(121,148)	0.0%	
990	1,208	219	18.1%	-	(990)	0.0%	-	(14,514)	0.0%	
4,424	5,782	1,359	23.5%	-	(4,424)	0.0%	-	(66,181)	0.0%	
8,179	7,067	(1,112)	(15.7%)	-	(8,179)	0.0%	-	(83,972)	0.0%	
44,308	17,387	(26,921)	(154.8%)	-	(44,308)	0.0%	-	(203,723)	0.0%	
3,227	4,530	1,303	28.8%	5,296	2,070	39.1%	65,347	16,053	24.6%	
971	1,439	467	32.5%	1,215	244	20.1%	18,546	6,603	35.6%	
-	1,188	1,188	100.0%	23,919	23,919	100.0%	223,987	209,734	93.6%	
-	681	681	100.0%	-	-	0.0%	3,085	(5,088)	(164.9%)	
2,051	1,607	(444)	(27.6%)	-	(2,051)	0.0%	10,654	(6,744)	(63.3%)	
-	207	207	100.0%	380	380	100.0%	5,535	4,536	82.0%	
101,618	104,979	3,361	3.2%	50,507	(51,111)	(101.2%)	802,715	(403,081)	(50.2%)	
585,570	607,112	21,542	3.5%	442,305	(143,265)	(32.4%)	5,185,063	(234,671)	(4.5%)	
\$ (566,230)	\$ (455,652)	\$ (110,578)	24.3%	\$ 143,462	\$ (709,692)	(494.7%)	\$ (1,473,741)	\$ 106,450	(7.2%)	
-	-	-	0.0%	(102,945)	(102,945)	100.0%	-	-	0.0%	
\$ -	\$ 306,000	\$ 306,000	100.0%	\$ -	\$ -	0.0%	\$ 1,666,019	\$ 704,555	42.3%	



Health Care District Palm Beach County

Clinic Visits - Adults and Pediatrics	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total	
West Palm Beach	1,227	929	1,068	836	879	1,119	1,138	1,007	1,173	911	1,004	1,166	12,457	6,858	81.6%	14,042	
Delray	1,061	883	989	776	582	723	600	541	560	457	528	664	8,364	7,368	13.5%	10,332	
Lantana	1,738	1,282	1,379	1,374	1,480	1,638	1,799	1,695	1,832	1,258	1,452	1,684	18,611	19,176	(2.9%)	16,932	
Belle Glade	616	395	661	451	555	656	622	566	616	621	792	725	7,276	5,022	44.9%	6,899	
Lewis Center	786	695	807	662	696	685	541	448	648	227	427	448	7,206	2,000	260.3%	3,401	
Lake Worth & Women's Health Care	1,153	979	958	907	953	1,339	1,206	1,222	1,409	1,002	1,246	1,278	13,652	8,223	66.0%	12,522	
Jupiter Clinic	602	407	468	450	527	656	501	415	533	484	456	476	5,975	4,437	34.7%	4,473	
West Boca & Women's Health Care	786	679	730	641	666	798	741	637	562	354	395	473	7,462	5,115	45.9%	7,381	
Cib Mob 1 Warrior	16	-	-	1	-	-	-	-	-	351	2,234	810	3,412	150	2,174.7%	1,117	
Cib Mob 2 Scout	-	-	-	-	-	-	-	-	-	559	1,115	597	2,271	150	1,414.0%	-	
Cib Mob 3 Hero	-	-	-	-	-	-	-	-	-	592	460	374	1,426	150	850.7%	-	
Mangonia Park	259	203	198	224	261	447	508	523	554	64	52	65	3,358	1,476	-	2,125	
Mangonia Park-Substance	-	-	-	-	-	-	-	-	-	-	-	-	-	1,952	(100.0%)	2,338	
Total Clinic Visits	82,444	64,522	72,258	63,322	65,599	80,061	76,999	71,147	78,887	68,880	101,161	87,600	914,770	62,077	47.3%	81,562	
Dental Visits																	
West Palm Beach	467	334	427	172	159	179	693	691	705	469	703	664	5,663	5,118	10.6%	5,812	
Lantana	447	358	473	466	495	558	553	423	561	475	603	484	5,896	7,608	(22.5%)	3,413	
Delray	-	-	-	-	-	-	306	480	403	338	362	408	2,297	3,665	(37.3%)	3,171	
Belle Glade	-	-	-	-	-	-	201	270	346	307	375	364	1,865	1,988	(6.2%)	2,081	
Lake Worth	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
West Boca	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Total Dental Visits	914	692	900	640	654	737	1,753	1,864	2,015	1,589	2,043	1,920	15,721	18,379	(14.5%)	14,477	
Total Medical and Dental Visits	91,558	71,144	81,158	69,962	72,253	80,798	78,752	78,291	80,902	70,458	103,204	89,520	1,071,911	80,456	33.2%	96,039	
Mental Health Counselors (non-billable)																	
West Palm Beach	-	2	-	1	-	-	-	-	-	54	86	89	232	936	(75.2%)	1,345	
Delray	60	41	22	1	3	2	-	-	1	19	-	3	152	728	(79.1%)	915	
Lantana	-	36	2	-	1	-	-	3	1	-	-	-	43	3,117	(98.6%)	4,684	
Belle Glade	26	18	41	21	14	21	18	15	11	67	80	62	394	333	18.3%	882	
Mangonia Park	458	205	225	214	205	311	441	387	409	463	533	438	4,289	1,365	214.2%	2,351	
Lewis Center	308	381	544	678	709	838	729	625	677	764	927	949	8,129	1,290	530.2%	1,685	
Lake Worth	12	-	1	-	-	-	-	-	-	137	174	178	502	978	(48.7%)	1,258	
Jupiter	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	
West Boca	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11	
Mobile Van	-	-	-	-	-	-	-	-	-	-	-	-	-	495	(100.0%)	362	
Total Mental Health Screenings	864	683	835	915	932	1,172	1,188	1,030	1,099	1,504	1,800	1,719	13,741	9,242	48.7%	13,494	



SUPPLEMENTAL INFORMATION

MEDICAID MATCH FUND

Medicaid Match Statement of Revenues and Expenditures

FOR THE TWELVE MONTH ENDED SEPTEMBER 30, 2021

Actual	Current Month		Prior Year	Variance	%		Fiscal Year To Date						
	Budget	Variance					%	Budget	Variance	%			
491,667	491,674	(7)	491,667	-	0.0%	PBC Interlocal	5,900,000	5,900,000	0	0.0%	5,900,000	-	0.0%
1	112	(111)	8	(7)	(99.3%)	Other revenue	27	1,289	(1,262)	(97.9%)	1,019	(991)	(97.3%)
491,667	491,786	(119)	491,675	(7)	(0.0%)	Total Revenue	5,900,027	5,901,289	(1,262)	(0.0%)	5,901,019	(991)	(0.0%)
<i>Direct Operational Expenses:</i>													
-	-	-	-	-	0.0%	Salaries and Wages	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Benefits	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Purchased Services	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Medical Supplies	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Other Supplies	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Contracted Physician Expense	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Medical Services	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Drugs	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Repairs & Maintenance	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Lease & Rental	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Utilities	-	-	-	0.0%	-	-	0.0%
1,407,924	1,485,815	77,891	1,449,573	41,649	5.2%	Other Expense	17,269,934	17,503,600	233,666	1.3%	17,103,799	(166,135)	(1.0%)
-	-	-	-	-	0.0%	Insurance	-	-	-	0.0%	-	-	0.0%
1,407,924	1,485,815	77,891	1,449,573	41,649	5.2%	Total Operational Expenses	17,269,934	17,503,600	233,666	1.3%	17,103,799	(166,135)	(1.0%)
(916,257)	(994,029)	77,772	(957,899)	41,642	(7.8%)	Net Performance before Overhead Allocations	(11,369,907)	(11,602,311)	232,404	(2.0%)	(11,202,780)	(167,127)	1.5%
<i>Overhead Allocations:</i>													
-	-	-	-	-	0.0%	Risk Mgt	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Rev Cycle	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Internal Audit	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Legislative Affairs	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Administration	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Human Resources	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Legal	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Records	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Compliance	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Finance	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Communications	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Information Technology	-	-	-	0.0%	-	-	0.0%
-	-	-	-	-	0.0%	Total Overhead Allocations	-	-	-	0.0%	-	-	0.0%
1,407,924	1,485,815	77,891	1,449,573	41,649	5.2%	Total Expenses	17,269,934	17,503,600	233,666	1.3%	17,103,799	(166,135)	(1.0%)
(916,257)	(994,029)	77,772	(957,899)	41,642	(4.3%)	Net Margin	(11,369,907)	(11,602,311)	232,404	(2.0%)	(11,202,780)	(167,127)	(1.5%)
\$ 916,257	\$ 995,318	\$ (79,061)	\$ 957,899	(41,642)	(7.9%)	Total Transfers In	\$ 11,369,906	\$ 11,603,600	\$ (233,694)	(2.0%)	\$ 11,202,780	\$ 167,126	1.5%

Medicaid Match Statement of Revenues and Expenditures by Month

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Year to Date
Patient Revenue	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
PBC Interlocal	491,667	491,667	491,667	491,667	491,667	491,667	491,667	491,667	491,667	491,667	491,667	491,667	5,900,000
Other revenue	3	1	-	8	5	2	2	2	1	1	1	1	27
Total Revenue	491,669	491,668	491,667	491,674	491,672	491,669	491,669	491,669	491,668	491,668	491,668	491,667	5,900,027
<i>Direct Operational Expenses:</i>													
Salaries and Wages	-	-	-	-	-	-	-	-	-	-	-	-	-
Benefits	-	-	-	-	-	-	-	-	-	-	-	-	-
Purchased Services	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical Supplies	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Supplies	-	-	-	-	-	-	-	-	-	-	-	-	-
Contracted Physician Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical Services	-	-	-	-	-	-	-	-	-	-	-	-	-
Drugs	-	-	-	-	-	-	-	-	-	-	-	-	-
Repairs & Maintenance	-	-	-	-	-	-	-	-	-	-	-	-	-
Lease & Rental	-	-	-	-	-	-	-	-	-	-	-	-	-
Utilities	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Expense	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,407,924	1,407,924	1,407,924	17,269,933
Insurance	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operational Expenses	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,407,924	1,407,924	1,407,924	17,269,933
Net Performance before Overhead Allocations	(957,904)	(957,906)	(957,907)	(957,899)	(957,902)	(957,904)	(957,905)	(957,905)	(957,905)	(916,256)	(916,256)	(916,257)	(11,369,906)
<i>Overhead Allocations:</i>													
Risk Mgt	-	-	-	-	-	-	-	-	-	-	-	-	-
Rev Cycle	-	-	-	-	-	-	-	-	-	-	-	-	-
Internal Audit**	-	-	-	-	-	-	-	-	-	-	-	-	-
Legislative Affairs	-	-	-	-	-	-	-	-	-	-	-	-	-
Administration**	-	-	-	-	-	-	-	-	-	-	-	-	-
Human Resources	-	-	-	-	-	-	-	-	-	-	-	-	-
Legal	-	-	-	-	-	-	-	-	-	-	-	-	-
Records	-	-	-	-	-	-	-	-	-	-	-	-	-
Compliance**	-	-	-	-	-	-	-	-	-	-	-	-	-
Finance	-	-	-	-	-	-	-	-	-	-	-	-	-
Communications	-	-	-	-	-	-	-	-	-	-	-	-	-
Information Technology	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Overhead Allocations	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Expenses	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,407,924	1,407,924	1,407,924	17,269,933
Net Margin	(957,904)	(957,906)	(957,907)	(957,899)	(957,902)	(957,904)	(957,905)	(957,905)	(957,905)	(916,256)	(916,256)	(916,257)	(11,369,906)
Total Transfers In	\$ 957,904	\$ 957,906	\$ 957,907	\$ 957,899	\$ 957,902	\$ 957,904	\$ 957,905	\$ 957,905	\$ 957,905	\$ 916,256	\$ 916,256	\$ 916,257	\$ 11,369,906

HEALTH CARE DISTRICT BOARD

December 15, 2021

1. **Description: Board Meeting Schedule for 2022**

2. **Summary:**

This agenda item provides the Board with the meeting schedule for 2022.

3. **Substantive Analysis:**

In September, the Health Care District will convene two (2) Truth In Millage (TRIM) meetings. The actual dates will be determined once other taxing authorities establish their TRIM dates.

March 24, 2022

- 9:00AM, Health Care District Strategic Planning followed by the Health Care District Board Meeting

June 15, 2022

- 2:00PM, Joint Meeting with the Finance & Audit Committee

(1st) September Meeting (Date TBD)

- 4:00PM, Joint Meeting with the Finance & Audit Committee
- 5:15PM, Truth In Millage (TRIM) Meeting

(2nd) September Meeting (Date TBD)

- 4:00PM, Health Care District Board Annual Meeting (Officer Elections)
- 5:15PM, Truth In Millage (TRIM) Meeting

December 14, 2022

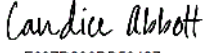
- 2:00PM, Health Care District Board Meeting

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

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

HEALTH CARE DISTRICT BOARD December 15, 2021

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

F837D209DB52427...
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name


N/A


Date Approved

6. Recommendation:

Staff recommends the Board receive and file the Board meeting schedule for 2022.

Approved for Legal sufficiency:

DocuSigned by:

0290C6C02014479...
VP & General Counsel

DocuSigned by:

77A3B53589A1477...
Chief Executive Officer

HEALTH CARE DISTRICT BOARD December 15, 2021

1. **Description: Clinic Board Bylaws Change**

2. **Summary:**

This agenda item presents changes to the District Clinic Holdings, Inc. Bylaws approved at the Clinic Board Meetings on November 30, 2021 and December 14, 2021. This update presents two changes. The first update changes the membership term from three (3) to four (4) years and the term period from January through December three (3) years later to the date of appointment until 4 years later. The second update changes the requirement for the Finance Committee meeting from monthly to quarterly.

3. **Substantive Analysis:**

The District Clinic Holdings, Inc. Bylaws require a multi-step process to change the Bylaws. This includes bringing the changes to the Clinic Board at two subsequent meetings and then bringing them to the District Board for approval. These changes to the District Clinic Holdings, Inc. Bylaws were approved at the Clinic Board Meetings on November 30, 2021 and December 14, 2021.

The first update recommended includes a change to the Bylaws Section 9.1 Term of Membership. The update includes the following changes:

- The membership term will change from three (3) to four (4) years. This change will align the Clinic Board Membership Terms to the same number of years as the District Board, Lakeside Health Advisory Board, and District Committees.
- The period of time for membership terms will change from January through December, 3 years later to a simple 4 year term. This change should reduce the number of Board members whose terms expire at the same time.
- The language related to unexpired terms will be removed from 9.2(b) since according to this update all appointments will be for a 4 year period.

The recommended changes are provided below:

Section 9 – Term of Membership

- 9.1 Board membership will be for a period of ~~three (3)~~ four (4) years starting ~~in January of each year and terminate in December of the third year~~ on the date membership is approved and terminating four (4) years from the date of approval.

HEALTH CARE DISTRICT BOARD

December 15, 2021

No Board member shall serve more than two (2) consecutive terms. If at any time there is a question concerning the length of the term of office for any Board member, the Governing Board will decide through any appropriate means the term of the questioned incumbent.

9.2 Selection of New Board Member(s) for open Member positions. The selection of new Board members to fill any vacancy then existing may or to replace any member whose Term is ended, will be as follows:

- a. Vacancies on the Board due to the termination, resignation or death of a Member prior to the expiration of his/her Term may be filled within sixty (60) days of the vacancy by a majority vote of the Members at the next regular meeting, or at a special meeting called for that purpose, from those eligible persons recommended by the Nominating/Membership Committee. ~~The newly elected member will serve for the unexpired term of the Member position being filled and shall be eligible to seek reappointment upon expiration of such term.~~
- b. Members eligible to serve for a second ~~3-year~~ 4-year term may apply for reappointment according to the procedures instituted by the Nominating Committee and approved by the Board. When a vacancy is anticipated to occur at the completion of any Member's ~~3-year~~ 4-year term, the Nominating Committee shall submit names of eligible persons to the Board for consideration at least one month prior to the annual meeting of the Board, and the Board shall select those persons to fill the anticipated vacancy by a majority vote at the annual meeting. In selecting its new members, the Board will use the criteria set out in Section 8.

This update will be effective once approved by the Board and will apply to the current Board Member terms. The updated Membership Terms, if approved, are presented below.

	Appointment Date	Term End Date
James Elder	1/30/2019	1/29/2023
John Casey Mullen	1/30/2019	1/29/2023
Irene Figueroa	1/30/2019	1/29/2023
R. Michael Smith	1/30/2019	1/29/2023
Melissa Mastrangelo	9/25/2019	9/24/2023
Joe Gibbons	5/19/2021	5/18/2025
Julia Bullard	1/30/2019	1/29/2023
Tammy Jackson Moore	10/30/2019	10/29/2023
Robert Glass	1/27/2021	1/26/2025
Marjorie Etienne	9/25/2019	9/24/2023

HEALTH CARE DISTRICT BOARD December 15, 2021

The second update recommends changing the Finance Committee meetings from monthly to quarterly. The recommended changes are provided below:

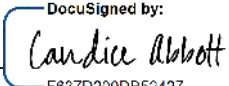
Section 11 – Committees

11.10 The Finance Committee shall review the budget, expenditures, and all other financial reports related to the operations of the C. L. Brumback Primary Care Clinics. The Finance Committee will report to the full Board of Directors. The Finance Committee will meet on a ~~monthly~~ quarterly basis, and may include clinic staff employees. The Executive Director, or his/her designee, will serve as a non-voting, exofficio member of this committee.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

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 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name Date

6. Recommendation:

Staff recommends the Board approve the recommended Clinic Bylaws update changing the membership terms from 3 to 4 years, the term period from January through December 3 years later to the date of appointment until 4 years later, removal of language related to unexpired terms, and the Finance Committee meeting requirement from monthly to quarterly.

HEALTH CARE DISTRICT BOARD
December 15, 2021

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza
0290C6C02014479...
VP & General Counsel

DocuSigned by:
Thomas Cleare
DF3D11A7A3564EF...
AVP, Communications, Community
Engagement and Corporate Security

DocuSigned by:
Darcy Davis
77A3B53589A1477...
Chief Executive Officer

**HEALTH CARE DISTRICT BOARD
December 15, 2021**

1. Description: Legal Settlement

2. Summary:

This agenda item presents a proposed settlement related to a professional liability matter at Lakeside Medical Center.

3. Substantive Analysis:

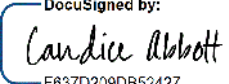
Guidance was provided by the Health Care District Board during a closed risk session on September 28, 2021. After much negotiation, and consideration of the facts, the District proposes a settlement of the following:

- The gross amount of \$250,000 payable to the Plaintiff’s Attorney

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

F837D209DB52427...
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

 N/A
 Committee Name

 N/A
 Date

6. Recommendation:

Staff recommends the Board approve the Legal Settlement.

HEALTH CARE DISTRICT BOARD

December 15, 2021

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza
0290C8C02014479...
VP & General Counsel

DocuSigned by:
Darcy Davis
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Chief Executive Officer

HEALTH CARE DISTRICT BOARD

December 15, 2021

1. Description: Compliance, Privacy, and Ethics Work Plan (FY22)

2. Summary:

This item presents for receive and file a summary of the Health Care District's ("HCD" or the "District") Compliance, Privacy, and Ethics Program ("Compliance" or "Program") Work Plan beginning in Fiscal Year 2022 ("FY22"). Information on the preparation for and development of the Work Plan was provided to the Quality, Patient Safety and Compliance Committee at the September 2021 meeting, and a formal request for approval was requested at the December 15, 2021 Quality, Patient Safety, and Compliance meeting. A summarized copy of the Work Plan is being provided to the Board as informational.

3. Substantive Analysis:

- Approval of the Compliance, Privacy, and Ethics Work Plan for FY22 was requested at the December 15, 2021 Quality, Patient Safety, and Compliance Committee meeting.
- A detailed summary copy of the Work Plan is provided in the attached document.
- Details of the Work Plan and its composition/development is included below.
- The goal for the FY22 Work Plan is to move to a more proactive, risk-based, and effective program – in addition to meeting or exceeding the recommendations described in the OIG's Compliance Program Guidance on Effectiveness ("7 elements").
- The FY22 Work Plan includes all items identified that are standing or are not yet complete from FY21, in addition to other items to be added based on internal assessment and to address the *Elements of an Effective Compliance Program*: (1) Governance and High-Level Oversight, (2) Policies and Standards of Conduct, (3) Open Communication and Reporting, (4) Training and Education, (5) Auditing and Monitoring, (6) Enforcing Standards, (7) Addressing Known or Potential Issues, and (8) Program Effectiveness.
- The Department considered and included the following in developing its annual Work Plan: Standing items for Seven Elements/OIG Compliance Program Guidance; Open or closed recommendations from Consultant and Internal Audit; Leadership/Management requests and input; OIG Monthly Work Plan; New or changed rules; Recent industry enforcement and Government report findings; Published guidance from Regulators and Authorities; High volume, high dollar, and high reimbursement areas; Data analytics and reporting trends; Known or potential areas of risk/concern; Past items requiring re-check or monitoring; New or changed business units; COVID-19 potential or known risk areas; and Compliance Program Effectiveness and Compliance Program Evaluation Guidelines from Government and Other Entities/Authorities.

HEALTH CARE DISTRICT BOARD December 15, 2021


4. Attachment: Compliance, Privacy, and Ethics Work Plan (FY22)
(Refer to attached PDF for a copy of the Work Plan).

5. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements	None	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Net Revenue	None	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Note: N/A – Changes for FY22 were approved by the Board as part of the overall District budget.

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

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 VP & Chief Financial Officer

6. Reviewed/Approved by Committee:

Patient Safety, Quality, and
Compliance Committee

 Committee Name

12/15/21

 Date

7. Recommendation:

Staff recommends the Board receive and file the District’s Compliance, Privacy, and Ethics FY22 Work Plan.

Approved for Legal sufficiency:

DocuSigned by:

 0290C6C02014479...
 VP & General Counsel

DocuSigned by:

 4768F813A13D48D...
 VP & Chief Compliance and Privacy Officer

DocuSigned by:

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 Chief Executive Officer

**HEALTH CARE DISTRICT OF PALM BEACH COUNTY
COMPLIANCE, PRIVACY, AND ETHICS WORK PLAN (FY22)**

Type	Work Plan Item	Description
1 - GOVERNANCE AND HIGH-LEVEL OVERSIGHT (COMMITTEES)		
Committees	Quality, Patient Safety and Compliance Committee of the Board; Finance and Audit Committee of the Board; Clinics Board; and HCD Board	Conduct periodic meetings to communicate and/or review of compliance activities, issues, and pertinent rules and information, per OIG for effectiveness. Increase reporting and metrics per recommendation/CCO. Regular reporting to Quality, Patient Safety and Compliance Committee of the Board.
Committees	HCD Compliance and Audit Committee (Internal Management)	Conduct periodic meetings to communicate and/or review of compliance activities, issues, and pertinent rules and information, per OIG for effectiveness. Allows for an internal group focused on risks/controls. Committee to replace Internal Controls Committee, in part. Begin reporting per recommendation/CCO.
Committees	HCD Compliance and Audit Workgroup (Compliance, Privacy, and Ethics, and Internal Audit Departments)	Conduct periodic meetings to communicate and/or review of compliance and audit activities, issues, and pertinent regulations. Allows for an internal group focused on risks/controls. Committee to replace Internal Controls Committee, in part.
Committees	Other Oversight Committee Development: Standing/Adhoc (e.g., Access Oversight Committee; Medical/Ethics Committee (LMC); HCD-MHS Privacy and Compliance Meetings)	AOC: Establish new Committee to conduct periodic meetings post-Epic implementation to review and approve access controls, Epic use requests, and research activities; MEC: Establish new Committee to conduct periodic meetings on medical/general ethics; MHS: Epic related meetings. Request/determined need.
Committees	Other Committee Participation: Standing/Adhoc (e.g., Vaccine and Accommodations Committee, Policy & Procedure Committee, Utilization Management Committee)	Conduct periodic meetings to communicate and/or review of compliance activities, issues, and pertinent regulations. Request/determined need.
2 - POLICIES AND STANDARDS OF CONDUCT		
Policies & Procedures Review	Review and Committee Participation (HCD, non-Compliance, Privacy, and Ethics)	Committee participation on newly established Policy and Procedure Committees. Review of HCD policies (non-CPE).
Policy & Standards of Conduct Revision	Standards of Conduct Policy and Booklet Revisions and Redeployment to HCD staff	Policy and Booklet Revisions and Redeployment of the HCD Standards of Conduct. Revisions consistent with recommendations and internal assessment for needed changes.
Policies & Procedures Review	Review and Gap Analysis: Compliance, Privacy, and Ethics Internal Policy and Procedure Review	Review of internal Compliance, Privacy, and Ethics Policies & Procedures to ensure policy awareness, alignment, and determine revisions or new policy development needs.
Policies & Procedures Revision	Revision and Redeployment: Compliance, Privacy, and Ethics Policies (as needed)	Identification, development, and redeployment (see training and education) of existing Compliance, Privacy, and Ethics policies.

**HEALTH CARE DISTRICT OF PALM BEACH COUNTY
COMPLIANCE, PRIVACY, AND ETHICS WORK PLAN (FY22)**

Policies & Procedures: New Policy Development	Development and Deployment of New Policies and/or Procedures (as needed, see below)	Involves the identification, development, and deployment (see training and education) of new Compliance, Privacy, and Ethics policies.
Policies & Procedures: Revision and Redeployment	Conflicts of Interest Policy, Process, and Questionnaire (as needed)	Comprehensive Revision of Conflicts of Interest Policy and Procedures, and Disclosures. Consistent with recommendations from Internal Audit, Consultant, and internal assessment based on industry activity.
Policies & Procedures: Revision and Redeployment	Exclusions/Sanctions Policy and Procedure, and Internal Processes	Comprehensive Revision of Exclusions/Sanctions policy, procedure, and processes as needed. Consistent with recommendations from Internal Audit, Consultant, and internal assessment based on review of practices.
Policies & Procedures: New Policy Development	Records Management / Record Retention and Destruction Policy (and Retention Schedule Appendix if necessary)	New policy development and deployment of the Records Management and Retention Schedule Policy to ensure awareness of retention standards and to assist in the proper identification, storage, retention, protection, and disposal of records.
Policies & Procedures: New Policy Development	Development and Deployment of New Vaccination Policy and Standards	New policy development and deployment related to COVID-19 vaccination requirements and processes. Completed for initial vaccine mandate with Committee (HR policy).
3 - OPEN / EFFECTIVE COMMUNICATION AND REPORTING		
Development / Communication / Dissemination of Information	Development / Communication / Dissemination of Information to HCD staff on Compliance, Privacy, and Ethics matters. Training and Education Topics and Other Information (e.g., FYI's, Updates, and Notifications) to HCD staff (as needed).	Development/dissemination of Compliance and Privacy topics in various formats (FYIs, alerts, action alerts) to Departments/areas as needed, also includes: Sharing of Webinars, Materials, and Information to HCD Departments and Staff. See also "OIG Monitoring" for FYI's.
Monitoring / Analysis / Communication / Dissemination of Information: Regulatory Guidance	Compliance and Privacy Regulatory Updates and Industry Enforcement Activity	Continuous monitoring, review, and communication/dissemination of regulatory updates and industry enforcement activity or audit reports related to peers, industry, and state, federal, and local authorities (to HCD staff/Board). Analysis of rules and potential impacts to HCD. Includes COVID-19 as significant number of rule changes and waivers since the onset of the Public Health Emergency. Publish information in a variety of ways, including posting to the regulatory dashboard.
Monitoring / Communication / Dissemination of Information	Various Government and Contractor Notifications and Monitoring for Approved Work, as needed	Continuous monitoring, review, and communication to HCD of various Government and Contractor Notifications and Activity (CMS Recovery Audit Contractor proposed and approved items, CMS publications and/or notices (CMS Quarterly Provider Compliance Newsletter, FCSO Connection Newsletter, MLN Matters), Outpatient NCD/LCD changes in rules for Medicare's National and/or Local Coverage Determinations).

**HEALTH CARE DISTRICT OF PALM BEACH COUNTY
COMPLIANCE, PRIVACY, AND ETHICS WORK PLAN (FY22)**

Survey / Questionnaire Development / Deployment	Compliance, Privacy, and Ethics (First) Annual Awareness Survey	Conduct Compliance, Privacy, and Ethics First Annual Awareness Survey.
Communication / Dissemination of Information	Compliance, Privacy, and Ethics Compliance Website(s) Enhancements / Development	Communication and maintenance of the Compliance, Privacy, and Ethics public-facing and internal website to ensure HCD staff have various resources, regulatory and industry enforcement activity updates, educational material, and open lines of communication and reporting for compliance related questions or concerns.
4 - TRAINING AND EDUCATION; COMPLIANCE AWARENESS		
Training and Education: Committee Members	HCD Board / Committee Training	Conduct training and education on Compliance/Privacy/Ethics-related matters at least annually to the HCD Quality Patient Safety and Compliance Committee and/or HCD Board.
Training and Education: Annual / New Hires	Annual and New Hire Compliance, Privacy, and Ethics: Mandatory Training Requirement (live/online)	Annual and New Hire Compliance and Privacy Training Mandatory Requirement. Update and revise as needed to include Fraud, Waste & Abuse and other information.
Training and Education: Staff Development	Compliance Services Internal Staff Learning and Development	Ongoing Compliance, Privacy, and Ethics Internal Team Development
Training and Education: Billing Compliance	Training and Education and/or Development / Communication / Dissemination of Information to HCD staff on Billing Compliance matters for Case Management / Utilization Review	Conduct training and education on Billing Compliance matters to HCD staff, such as: Observation and Condition Code 44, as needed or requested.
Training and Education: Privacy	Privacy Training and Education and/or Development and Communication / Dissemination of Information to HCD staff.	Conduct training and education on Privacy-related matters to HCD staff, as needed, such as: including FERPA, HIPAA (School Health), and FIPA, as needed or requested.
Privacy Guidance / Training	Authorization for Marketing/Patient Stories	Guidance on Communications' authorizations compliance with Privacy rules, required/afforded under HIPAA.
Privacy Guidance / Training	Release of Information	Guidance on Release of Information (ROI) compliance with Privacy rules and internal processes, required/afforded under HIPAA.
Training and Education: Compliance Awareness Events	Compliance Awareness Week	Annual week-long series of events, activities, and education to share information and focus on the importance of compliance and ethics.
Training and Education: Modules Development or Revision	Development and Review/Revision of Training and Education Modules and Materials, as needed	Training Modules - Development and Review for Compliance, Privacy, and Ethics, as needed (including and outside of Cornerstone).
Training and Education: Presentation	New Employee Orientation (NEO) Presentation and Participation for Compliance, Privacy, and Ethics	Continue Compliance, Privacy, and Ethics Orientation for employees, including but not limited to Clinic staff.

**HEALTH CARE DISTRICT OF PALM BEACH COUNTY
COMPLIANCE, PRIVACY, AND ETHICS WORK PLAN (FY22)**

5 - AUDITING AND MONITORING	
Monitoring / Analysis / Communications Office of Inspector General (OIG) Monthly Work Plan	Office of Inspector General (OIG) Compliance Audit Notifications and Monitoring and Consideration for Work Plan placement. FYI's and other data mining to be performed, at a minimum on HDC-applicable OIG Work Plan items (e.g., Accuracy of Place of Service Codes on Claims for Medicare Part B Physician Services when Beneficiaries are Inpatients under Part A; Medicaid Applied Behavioral Analysis for Children Diagnosed with Autism; SAMHSA's Substance Abuse Prevention and Treatment Block Grant Funding; SAMHSA's Certified Community Behavioral Health Clinic Expansion Grants; Emergency Department Evaluation and Management (E/M) Services; Intimate Partner Violence Screening and Referral by PCP for Patients Enrolled in Medicaid; Nursing Home Reporting of COVID-19 Data to the National Health Care Safety Network; Adverse Events: Disparities Among Hospitalized Medicare Patients, and Toolkit for Identifying Adverse Events Through Medical Record Review; COVID-19 Pandemic Relief Funding and Its Effects on Nursing Homes Case Study)
Mandatory Monthly Reporting and Monitoring / Review	Exclusion Screening Monthly Reviews to ensure compliance with requirements under the Office of Inspector General (OIG) and other rules, where no excluded individual or entity can work for, be paid by, or do business with the HCD. New process and policy to be established, new contract/vendor secured.
Privacy Audits	FairWarning system monitoring/auditing of detected potential privacy violations via red flags by Epic Users
Compliance Audit	Referral Source Audits
Compliance Risk Assessment	EMTALA and Access to Emergency Services and Care Risk Assessment
Risk Assessment	Credentialing Risk Assessment
External Audits and Activity	External Agency Activity (General)
	FairWarning system monitoring/auditing of Epic User Access: High Access of Deceased Patients, High Access of Break-the-Glass, Person of Interest Snooping, High Access of Discharged Patients, and Coworker Snooping (when applicable). Ongoing review of referral sources and payments made to physicians as invoiced (pre-payment review and sign-off by CCO) Ensuring EMTALA (Emergency Medical Treatment and Labor Act) (federal law) and Access to Emergency Services and Care (state law, Florida) requirements are in place for compliance with Emergency Department Rules. Risk Assessment on controls and compliance with regulatory / accreditation requirements for credentialing and privileging. Monitoring of External Agency Activity (<i>general line item to address and document specific external agency reviews/audits/investigations/communications</i>)

**HEALTH CARE DISTRICT OF PALM BEACH COUNTY
COMPLIANCE, PRIVACY, AND ETHICS WORK PLAN (FY22)**

External Annual Attestation	Florida Medicaid - Deficit Reduction Act (DRA) of 2005	External Attestation on Compliance Programs and Fraud, Waste, and Abuse policies required for Deficit Reduction Act (DRA of 2005) to Florida Medicaid for entities that receive > \$5 Million in funds.
Risk Assessment	Human Resources Exit Processes, as needed	Risk assessment / review of Human Resources exit interview processes in place to assist in process improvement or revisions, if necessary.
Compliance Audit	Telehealth	Audit of Telehealth compliance with regulatory, billing and documentation requirements.
Mini-Risk Assessment	Industry Enforcement Activity (as needed) (<i>General entry item</i>)	Mini-Risk Assessment(s) based on Industry Enforcement Activity in lieu of audits (or in advance of audits) to communicate information to departments and staff and to test compliance or help direct future needs.
Mini-Risk Assessment	Observation Notices (Required by State/Federal Rules)	Mini-Risk Assessment of processes to ensure compliance with observation notice requirements (e.g., MOON, HOON/State Notice).
Mini-Risk Assessment	Observation Process Review for Billing	Mini-Risk assessment of hospital observation policy and procedures / processes to ensure accurate billing.
Survey	Privacy and Security Compliance Surveys for HCD Departments	Conduct onsite and/or electronic risk assessment for controls and compliance with Privacy and Security Rules (HIPAA/FERPA/FIPA) through Surveys to random/selected hospital departments.
Audit Follow-up	PYA / Compliance Prior Review(s) on Revenue Cycle Report and Recommendations	Follow-up on past PYA / Compliance Review(s) on Revenue Cycle Report and Recommendations
Evaluation and Assessment	Program for Evaluation Payment Patterns Electronic Report (PEPPER) Report Monitoring for Short Term Acute Care Hospitals (STACH: LMC)	Assessment of STACH quarterly reports for processes and data that reflects potential target areas for Medicare severity diagnosis related groups (“DRGs”) and discharges at high-risk for improper payment due to potential billing, coding and/or admission necessity issues.
Evaluation and Assessment	Program for Evaluation Payment Patterns Electronic Report (PEPPER) Report Monitoring for Skilled Nursing Facilities (SNF: Healy)	Assessment of SNF annual reports for processes and data that reflects potential target areas for Medicare discharges at high-risk for improper payment due to potential billing, coding and/or admission necessity issues.
Regulatory Analysis	Applicable rules, laws, and regulations to HCD for future activities and work plan setting.	To assess compliance for HCD entities with applicable regulatory requirements.
Data Risk Assessment	Medicare Payments for Inpatient Claims for Mechanical Ventilation >96 hours	Medicare Payments for Inpatient Claims for Mechanical Ventilation >96 hours, based on data/volume and OIG Work Plan focus area. To be evaluated.
Data Risk Assessment	Medicare Part B Opioid-Use Disorder Treatment Services Provided by Opioid Treatment Programs	Medicare Part B Opioid-Use Disorder Treatment Services Provided by Opioid Treatment Programs, based on data/applicability and OIG Work Plan focus area (Place of Service 58). To be evaluated.
Data Risk Assessment	Medicaid Inpatient Hospital Claims with Severe Malnutrition	Medicaid Inpatient Hospital Claims with Severe Malnutrition, based on data and applicability. To be evaluated.

**HEALTH CARE DISTRICT OF PALM BEACH COUNTY
COMPLIANCE, PRIVACY, AND ETHICS WORK PLAN (FY22)**

Evaluation and Assessment	Pharmacy Controls and Drug Diversion	Review Consultant findings and evaluate needs for future risk assessment on Pharmacy Controls and/or ongoing system/vendor monitoring efforts for routine monitoring.
Data Risk Assessment	High Dollar / High Volume / High Reimbursement Services Data Risk Assessment and Analysis	High Dollar / High Volume / High Reimbursement Services Data Review and Risk Assessment to determine future work plan items that may require review (FY23 forward, annually) or pose external audit risk to the organization based on volume and activity.
6 - ISSUING GUIDANCE / ENFORCING STANDARDS		
Mandatory Annual Event Reporting	Annual Breach Event Reporting to the Office for Civil Rights for < 500 individuals (Existing OCR Requirement, State Rules)	Annual Breach Reporting to HHS OCR (for events <500 individuals), required under HIPAA, for events that require patient notification of an unauthorized access, use, or disclosure of PHI.
Annual Review Process	Conflicts of Interest Disclosure and Review Process	Perform Annual Conflicts of Interest Disclosure and Review Process for HCD (Policy Requirement)
Sanctions	Development of Privacy Violations / Sanctions Grid	Development and implementation of Privacy Sanctions Grid to assist Human Resources in consistent and appropriate recommendations of sanctions for violations of privacy by HCD staff, as applicable.
Contract Reviews	Contract Reviews and Recommendations	Perform various contract reviews (Compliance360, other) as required or requested to assess issues such as patient information, HIPAA, Medicare billing provisions, fraud and abuse issues, and/or Stark and Anti-Kickback issues.
Evaluation and Mandatory Rule Implementation / Development and Monitoring	CMS Open Payments; Review and Dispute Reconciliation	Analysis of applicability of CMS' Open Payments Law (also known as the Physician Payment Sunshine Act) to HCD. Where applicable, ensure new / ongoing review of payments made to physicians and/or HCD to identify areas of risk and to dispute any payments reported in error.
Monitor and Issue Regulatory Guidance	Air Transportation Regulatory and Billing Requirements	Monitor and Issue Guidance on Air Transportation Regulatory and Billing Requirements to assess compliance for HCD entities with applicable regulatory requirements.
Monitor and Issue Regulatory Guidance	Ground Inter-facility Transports Regulatory and Billing Requirements (New Service)	Monitor and Issue Guidance on Ground ambulance to assess compliance for HCD entities with applicable regulatory requirements.
Mandatory Rule Implementation / Development and Monitoring	Price Transparency Requirements (New Rule)	Compliance with CY2020 OPPS Final Rule on Price Transparency. The Biden administration continues to pursue price transparency for healthcare costs. Requires hospitals to publish information related to charges with managed care payors the hospital contracted with. This includes publishing all charges that could occur at the hospital and to provide certain costs associated with 300 shoppable services in a machine readable format. Work with other departments.

**HEALTH CARE DISTRICT OF PALM BEACH COUNTY
COMPLIANCE, PRIVACY, AND ETHICS WORK PLAN (FY22)**

<p>Mandatory Rule Implementation / Development and Monitoring</p>	<p>No Surprises Act, Surprise Billing Act (New Rule)</p>	<p>Compliance with new "Surprise Billing Act", which aims to limit surprise medical bills, which are bills an in-network patient receives for out-of-network ("OON") care in emergency care settings OR from OON providers at in-network provides. Common examples include Anesthesiology and Radiology. These surprise medical bills result in balance billing, where the patient is sent the remaining balance for the OON care received. It is broad in scope and applies to hospitals, freestanding emergency departments, providers, and health plans.</p>
<p>Evaluation / Mandatory Rule Implementation / Development and Monitoring</p>	<p>ONC HIT Information Blocking Rule (New Rule)</p>	<p>Compliance with Information Blocking requirements focused on prohibition with Privacy. HCD Privacy to work with HCD departments to evaluate new rules, determine needs, and ensure compliance with the new rules.</p>
<p>7 - RESPONDING TO / ADDRESSING KNOWN OR POTENTIAL ISSUES</p>		
<p>Hotline Reporting</p>	<p>Hotline Call Response</p>	<p>Track, triage, investigate, and address calls made to the HCD Compliance Line.</p>
<p>Hotline Reporting</p>	<p>Hotline Investigating Processes</p>	<p>Develop and implement new process and form for assigning Hotlines to other core service departments (e.g., Human Resources, Risk Management / Quality) for referred cases, and ensuring proper communication, investigation, and closure.</p>
<p>Responsiveness</p>	<p>Response to issues/inquiries/investigations.</p>	<p>Respond to and address inquiries / issues communicated to Compliance, Privacy, and Ethics (Inquiries / Issues / Investigations)</p>
<p>Development and Monitoring of Action Plans</p>	<p>Monitoring of Recommendations / Action Items</p>	<p>Involves the development of recommended actions required as a result of various audits, risk assessments, and/or other identified areas of risk and monitoring to ensure completion and to prevent repeat occurrences.</p>
<p>8 - PROGRAM EFFECTIVENESS</p>		
<p>Implementation / Development</p>	<p>Compliance Program Development</p>	<p>Compliance Program Ongoing Implementation / Development for HCD</p>
<p>Self Assessment / Effectiveness Survey</p>	<p>Compliance Program Effectiveness</p>	<p>Compliance Program Effectiveness Continued Reviews (Internal, Government / Industry) and Addressing the External Effectiveness Assessment (Attac)</p>

HEALTH CARE DISTRICT BOARD

December 15, 2021

1. **Description: Medical Staff Appointment(s) for Lakeside Medical Center**

2. **Summary:**

The agenda item represents the practitioner(s) recommended for Medical Staff appointment by the Medical Executive Committee of Lakeside Medical Center.

3. **Substantive Analysis:**

The practitioner(s) listed below satisfactorily completed the credentialing and privileging process and met the standards set forth within the approved Medical Staff Bylaws. The credentialing and privileging process ensures that all Medical Staff meet specific criteria and standards of professional qualifications; this criterion includes, but is not limited to:

- Current licensure
- Relevant education, training and experience
- Current clinical and professional competence
- Health fitness and ability to perform requested privileges
- Malpractice history and liability insurance coverage
- Immunization status; and
- Applicable life support training


Last Name	First Name	Degree	Specialty	Appointment	Privileges
Cano	Daila	PA	Physician Assistant	Initial Appointment	Allied Health Professional
Lugo	Roberto	PA	Physician Assistant	Initial Appointment	Allied Health Professional
Louis	Willine	APRN	Nurse Practitioner	Initial Appointment	Allied Health Professional
Oliscat	Gesie	APRN	Nurse Practitioner	Initial Appointment	Allied Health Professional
Prendergast	Suzette	APRN	Nurse Practitioner	Initial Appointment	Allied Health Professional
Eby	Marcus	MD	General Surgery	Initial Appointment	Provisional
Chan	Roxanne	MD	Radiology	Reappointment	Active
Crandall	Blane	MD	Obstetrics & Gynecology	Reappointment	Active
Dawkins	Bryan	MD	Family Medicine	Reappointment	Active
Magloire	Christ-Ann	MD	Obstetrics & Gynecology	Reappointment	Active
Samuel	Maritza	MD	Pediatrics	Reappointment	Active
Tano	Alberto	MD	Pediatrics	Reappointment	Active
Teagarden	Dana	DO	Obstetrics & Gynecology	Reappointment	Active
Townsend	Dwight	MD	Radiology	Reappointment	Active

HEALTH CARE DISTRICT BOARD December 15, 2021

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

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 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name


N/A


 Date Approved

6. Recommendation:

Staff recommends the Board approve the Medical Staff Appointment(s) for Lakeside Medical Center.

Approved for Legal sufficiency:

DocuSigned by:

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 VP & General Counsel

DocuSigned by:

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 Chief Medical Officer

DocuSigned by:

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 Chief Executive Officer

HEALTH CARE DISTRICT BOARD December 15, 2021

1. Description: Proposed Revisions to the Lakeside Medical Center’s Medical Executive Committee Bylaws, Rules and Regulations

2. Summary:

This agenda item provides the proposed revisions to the Lakeside Medical Center’s Medical Executive Committee Bylaws, Rules and Regulations

3. Substantive Analysis:

See attached recommendations

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

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 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

Lakeside Medical Center’s Medical
 Executive Committee

 Committee Name

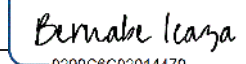
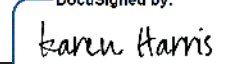
10/4/21

 Date

6. Recommendation:

Staff recommends the Board approve the revisions to the Medical Executive Committee Bylaws, Rules and Regulations.

Approved for Legal sufficiency:

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 VP of Operations

DocuSigned by:

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 Chief Executive Officer



Medical Staff Bylaws, Rules & Regulations December 15, 2021 Recommended Revisions

Basis for Change	Recommended Change/Addition	Deleted items (Outlined in red)
<p>Addition: Addition of section 13.8 made to meet Joint Commission requirements (Page 64 in MEC Bylaws)</p>	<p>Addition: <u>13.8 (a) Conflicts between The Medical Executive Committee and Medical Staff</u></p> <p>The Medical Executive Committee, as representatives of the Medical Staff, will make best efforts to address and resolve all conflicting recommendations in the best interests of patients, the Hospital, and the members of the Medical Staff. When the Medical Executive Committee plans to act or is considering acting in a manner contrary to the wishes of the voting members of the Medical Staff, the Medical Staff shall present their recommendations to the Medical Executive Committee with a written petition signed by at least ten percent (10%) of the voting members of the Medical Staff. The Medical Staff officers shall meet with members of the Medical Staff representing the Medical Staff's recommendations as set forth in the petition and seek to resolve the conflict through informal discussions. If these informal discussions fail to resolve the conflict, the Chief of Staff, the representatives of the Medical Staff or the Chairperson of the Board may request initiation of a formal conflict resolution process. The formal conflict resolution process will begin with a meeting of the Joint Conference Committee within thirty (30) days of the initiation of the formal conflict resolution process.</p> <p>To address Medical Executive Committee-Medical Staff conflicts, the Joint Conference Committee shall be composed of:</p>	<p>N/A</p>



Medical Staff Bylaws, Rules & Regulations December 15, 2021 Recommended Revisions

	<ul style="list-style-type: none"> • Two members of the Medical Staff • One other Medical Executive Committee member • A designee of the Board • The Chief Executive Officer or designee <p>If the Joint Conference Committee cannot produce a resolution to the conflict that is acceptable to the Medical Executive Committee and the Medical Staff within 30 days of the initial meeting, the Medical Executive Committee and the Medical Staff shall enter into mediation facilitated by an outside party.</p> <p>The Medical Executive Committee and the three voting members of the Medical Staff representing the recommendations in the written petition shall together select the third-party mediator, the costs for which shall be paid in total by the Medical Staff. The Medical Executive Committee and Medical Staff shall make best efforts to collaborate together and with the third-party mediator to resolve the conflict.</p> <p>The Medical Executive Committee and the Medical Staff shall each designate at least three people to participate in the mediation. Any resolution arrived at during such meeting shall be subject to the approval of the Medical Executive Committee and the Board, in accordance with the provisions of Medical Staff Bylaws and the policies of the Hospital. If, after 90 days from the date of the initial request for mediation from an outside party, the Medical Executive Committee and Medical Staff cannot resolve the conflict in a manner agreeable to all parties, the Board shall have the authority to act unilaterally on the issue that gave rise to the conflict.</p> <p>If the Board determines, in its sole discretion, that action must be taken related to a conflict in a shorter time period than that allowed through this conflict resolution process in an</p>	
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Medical Staff Bylaws, Rules & Regulations December 15, 2021 Recommended Revisions

	<p>attempt to address an issue of quality, patient safety, liability, regulatory compliance, legal compliance, or other critical obligations of the Hospital, the Board may take provisional action that will remain in effect until the conflict resolution process is completed.</p> <p>In addition to the formal conflict resolution process herein described, the Chairperson of the Board or the Chief of Staff may call for a meeting of the Joint Conference Committee at any time and for any reason to seek direct input from the Joint Conference Committee members, clarify any issue, or relay information directly to Medical Staff leaders, the Board, or Administration.</p>	
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HEALTH CARE DISTRICT BOARD

December 15, 2021

1. Description: Sponsored Programs Award Recommendations

2. Summary:

This agenda item presents the award recommendations from the Sponsored Programs Funding Request Selection Committee. In summary, the Committee chose to recommend funding 24 proposed initiatives with a total funding amount of \$1,151,500.

3. Substantive Analysis:

Committee Members

Thomas Cleare, AVP, Communications, Community Engagement & Corporate Security
Hyla Fritsch, AVP & Executive Director of Clinics & Pharmacy Services
Lisa Hogans, Director of Nursing
Adriana Ziemba, PsyD, Licensed Psychologist FL, Behavioral Integration Manager
Joe-Ann Hyppolite, LMC Community Liaison Manager
Belma Andrić, MD, MPH, Chief Medical Officer, VP and ED of Clinical Services
Steven Hurwitz, Vice President, Chief HR & Administrative Officer
Debbie Robinson, Manager, Sponsored Programs

Funding Request Requirements

To help the District fulfill its mission to be the health care safety-net for Palm Beach County, the District sought Funding Requests from organizations to provide health care services and health care support services to uninsured, underinsured and/or other vulnerable Palm Beach County residents. To select programs for this funding initiative, the District decided to partner with organizations that provide services that address Social Determinants of Health (SDOH) and that align with the priority areas, objectives, and strategies identified in the Community Health Improvement Plan (CHIP) for Palm Beach County. Additionally, a focus was placed on services that do not duplicate services provided by the C.L. Brumback Primary Care Clinics, or other District operated initiatives.

Proposals

For this funding cycle, the District received requests for 29 proposed initiatives requesting \$2,872,676 in funding. The following table summarizes the requests.

HEALTH CARE DISTRICT BOARD

December 15, 2021

Organization Name	Proposed Services	2022 Request
211	Staffing National Suicide Prevention Lifeline	\$40,000
Cancer Alliance of Help & Hope	SDOH - transportation, nutrition cancer patients	\$80,000
Caridad Center	Access to specialty services and SDOH support	\$150,000
Center for Child Counseling	Wraparound care coordination, navigation, & educ	\$130,000
Center for Family Services	Outreach, suicide prev, sub abuse, psy education	\$70,000
Center for Trauma Counseling	Supportive services, psy education, training	\$130,000
Clinics Can Help	Durable medical equipment, wheelchairs, crutches	\$80,000
Community Health Center WPB	Remote patient monitoring, chronic dis mgmt, vision	\$109,500
Diabetes Coalition of PBC	Risk screenings, care coordination, referral, educ	\$51,500
Families First of PBC	Outreach pregnant women, educ, support services	\$77,394
Feed the Hungry Pantry of PBC	SDOH - food pantry, delivery of food seniors, disabled	\$66,000
Fresh Rx	Farm to Patient food as medicine program	\$50,000
Harm Reduction Center	MAT, individual/group therapies	\$232,000
Healthy Mothers Healthy Babies	Centering Program & Circle of Moms – prenatal care and perinatal anxiety disorders	\$115,000
Legal Aid Society	Legal assistance to remove barriers to care	\$100,000
Living Hungry	Control diabetes using food as medicine	\$100,000
Mental Health America of PBC	MH clubhouses-educ, job, housing asst, peer support	\$50,000
Monarch Health Services	Nutrition, food as medicine, travel asst, ins prem asst	\$210,500
MyClinic	SDOH health hub, screening, navigation	\$50,000
Nat'l Alliance Mental Illness	Peer mentoring individuals living w/ mental illness	\$70,000
PBC Behavioral Health Coalition	One Recovery Community Center, 2 drop in RCC's	\$250,000
PBC Food Bank	Farmers Markets to deliver healthy food to seniors	\$35,000
PBC Medical Society Services	Project Access support, screening, navigation	\$100,000
Promise Fund	Navigation through partner organizations to raise awareness of early detection breast & cervical cancer	\$100,000
Sickle Cell Foundation	Outreach/education prenatal care, safe sleep, breastfeeding, domestic violence and stress	\$121,025
The Glades Initiative	Navigation, food pantry, nutrition educ, medical interpreter train	\$99,800
The Arc of the Glades	Navigation, health and wellness training, nutrition, physical activity, and transportation to medical appts	\$55,760

HEALTH CARE DISTRICT BOARD

December 15, 2021

The Lord's Place	Integrated care to meet needs of homeless, navigation, peer mentoring, basic needs, transportation	\$100,620
Vita Nova	Navigation, health support to homeless youth during 90 waiting period for Medicaid	\$48,000
Total		\$2,872,676

Committee Recommendation

The Sponsored Programs Selection Committee, made up of interdisciplinary members of the Health Care District staff, met on December 3, 2021. The Selection Committee reviewed all proposals and evaluated each proposal's approach to addressing SDOH and their alignment with the CHIP priority areas.

The Selection Committee balanced the variety of services proposed, with the available budget, recommending funding for 24 organizations for a total funding amount of \$1,151,500.

The recommendation includes 5 new organizations:

- 211
- Fresh Rx
- PBC Food Bank
- The Arc of the Glades
- Vita Nova

The Selection Committee focused on a balance between medical, behavioral health, and services that address Social Determinants of Health. The service type categories include:

- Behavioral Health Support – 7 organizations
- Food/Nutrition Support – 9 organizations
- Health Care Navigation – 11 organizations
- Transportation – 3 organizations
- Homeless Support – 2 organizations
- Medical Support – 11 organizations
- Legal Assistance to Remove Barriers to Medical Services – 1 organization

HEALTH CARE DISTRICT BOARD

December 15, 2021

The table that follows presents the Selection Committee's award recommendations for CY2022:

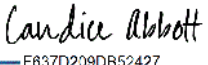
Organization Name	Category	CY 2021 Funding Award	2022 Funding Request	CY2022 Funding Award
211 Palm Beach	Beh Health	N/A	40,000	\$40,000
Cancer Alliance of Help & Hope	SDOH	\$40,000	\$80,000	\$40,000
Caridad Center	SDOH, Spec Svcs	\$130,000	\$150,000	\$120,000
Center for Child Counseling	Beh Health	\$52,000	\$130,000	\$45,000
Center for Family Services	Beh Health	\$78,000	\$70,000	\$20,000
Center for Trauma Counseling	Beh Health	\$110,000	\$130,000	\$85,000
Clinics Can Help	DME	\$50,000	\$80,000	\$50,000
Community Health Center WPB	SDOH, Spec Svcs	\$40,000	\$109,500	\$40,000
Diabetes Coalition of PBC	Diabetes Support	\$40,000	\$51,500	\$20,000
Families First of PBC	BH and Pregnancy	\$72,000	\$77,394	\$62,000
Feed the Hungry Pantry of PBC	SDOH	\$45,500	\$66,000	\$44,500
Fresh Rx	Food is Medicine	N/A	\$50,000	\$20,000
Healthy Mothers Healthy Babies	Beh Health / Prenatal	\$115,000	\$125,000	\$100,000
Legal Aid Society	SDOH	\$65,000	\$100,000	\$65,000
Living Hungry	SDOH	\$60,000	\$100,000	\$20,000
MyClinic	SDOH	\$40,000	\$50,000	\$20,000
Nat'l Alliance Mental Illness	Beh Health	\$66,000	\$70,000	\$50,000
PBC Food Bank	SDOH	\$0	\$35,000	\$30,000
PBC Medical Society Services	Medical, Navigation	\$95,000	\$100,000	\$95,000
Sickle Cell Foundation	Educ, prenatal	\$40,000	\$121,602	\$30,000
The Arc of the Glades	SDOH	N/A	\$55,760	\$40,000
The Glades Initiative	SDOH	\$40,000	\$99,800	\$50,000
The Lord's Place	SDOH	\$52,000	\$100,620	\$45,000
Vita Nova	SDOH	N/A	48,000	\$20,000
Total		\$1,230,500	\$2,040,176	\$1,151,500

HEALTH CARE DISTRICT BOARD December 15, 2021

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	\$1,500,000	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

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 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

Finance and Audit Committee

 Committee Name


12/15/2021

 Date Approved

6. Recommendation:

Staff recommends the Board approve the Sponsored Programs Selection Committee funding recommendation and award funding to 24 proposed initiatives for a total \$1,151,500.

Approved for Legal sufficiency:

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 VP & General Counsel

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 AVP, Communications, Community
 Engagement and Corporate Security

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 Chief Executive Officer

HEALTH CARE DISTRICT BOARD

December 15, 2021

1. **Description: Recent Regulatory Updates and Industry Enforcement Activity**

2. **Summary:**

This item presents recent regulatory updates and industry enforcement activity in the health care industry which may impact HCD. An overall summary and supplemental information is provided to the Board for discussion, including: (1) COVID-19 Vaccine Mandates and Court Challenges; (2) The Top 10 Trends in Health Care (2021); and (3) Recent Regulatory Updates and Industry Enforcement Activity from the past quarter (FY22 Q1). *Refer to attached documents.*

3. **Substantive Analysis:**

HCD Compliance, Privacy, and Ethics (“CPE”) consistently reviews regulatory updates and industry enforcement activity to keep abreast of the changes and potential impacts to HCD, communicate information to necessary parties, and to help shape the Departmental Work Plan. Information is searched, tracked, reviewed, analyzed, and monitored (at a minimum). HCD CPE determines the information necessary to communicate to HCD staff, physicians, and leadership, as well as if additional action (e.g., audit, policy, training) is necessary. Beginning in 2020, regulatory and industry activity focused largely on COVID-19. These updates are presented to the Quality, Patient Safety, and Compliance Committee by the HCD VP/Chief Compliance and Privacy Officer, quarterly. Additionally, education and information on recent COVID-19 Vaccine Mandates and Court Challenges, and the remaining Top 10 Healthcare Trends, is being provided to the HCD Board for discussion. Current as of 12/7/2021. *Refer to attached documents.*

4. **COVID-19 Vaccine Mandates and Court Challenges ***

- U.S. Court Temporarily Halts Biden’s Vaccine Mandate for Federal Contractors Nationwide
- CMS Halts Vaccination Mandate Following Court Decisions
- District Court Issues Injunction Temporarily Blocking Healthcare Vaccination Mandate
- Biden Administration Recommends Federal Employers Delay COVID-19 Vaccination Mandate Enforcement
- Judge Refuses to Block Health Care Vaccination Rule
- Court Grants Order to Stay OSHA’s COVID-19 Vaccination and Testing Emergency Temporary Standard
- CMS Issues Interim Final Rule Requiring Healthcare Workers to Receive COVID-19 Vaccination

5. **Top 10 Trends in Health Care (CY 2021)**

- COVID-19 Vaccine Mandates and Court Challenges *
- OIG Changes After New Administration
- Collaboration between Law Enforcement Agencies
- Price Transparency
- Hospital Mergers and Acquisitions
- OIG and RACs Focus on Upcoding
- Cybersecurity Threat Remains High
- False Claims Act (FCA) Settlements and Cases

HEALTH CARE DISTRICT BOARD

December 15, 2021

- Navigating the Opioid Crisis
- OCR Continues Enforcement of Patient Right of Access Cases

6. Recent Regulatory Updates (FY22 Q1)

- U.S. Court Temporarily Halts Biden's Vaccine Mandate for Federal Contractors Nationwide
- The Centers for Medicare and Medicaid Services (“CMS”) Halts Vaccination Mandate Following Court Decisions
- The Office of Inspector General (“OIG”) Issues Semiannual Report to Congress
- District Court Issues Injunction Temporarily Blocking COVID-19 Healthcare Vaccination Mandate
- President Biden Administration Recommends Federal Employers Delay COVID-19 Vaccination Mandate Enforcement
- Federal Judge Refuses to Block COVID-19 Health Care Vaccination Rule
- Florida Implements Laws Governing COVID-19 Vaccination Mandates for Employers
- CMS Issues Interim Final Rule Requiring Healthcare Workers to Receive COVID-19 Vaccination
- FDA Expands EUA for Specific Monoclonal Antibody Treatments for Children
- Former FDA Commissioner Expects “Fully Vaccinated” Definition will include Booster
- CMS Issues FY22 OPSS Final Rule
- OIG Revises Provider Self-Disclosure Protocol
- The Department of Health and Human Services (“DHHS” or “HHS”) Issues Warning on Zero Day Cyber Attacks
- CMS Issues Long-Awaited Guidance on Co-Location
- CMS Issues Surprise Billing Act
- CMS Issues FY2022 IPSS Final Rule
- National Health Care Fraud Enforcement Action Results in Charges Involving Nearly \$1.5 Billion in Losses

7. Recent Industry Enforcement Activity (FY22 Q1)

- First Case of the Omicron COVID-19 Variant Identified in Florida (Tampa, FL)
- Recent COVID-19 Enforcement Actions
- South Florida Addiction Treatment Facility Operators Convicted in \$112 Million Fraud Scheme
- Incentives Boosted Hospital Staff Vaccination Rates in South Florida
- Florida Physician Sentenced to 7 Years in Prison for Performing Unnecessary Procedures
- Hospice Company Agrees to pay \$5.5 Million to Resolve FCA Claims
- Home Health Agency Agrees to Pay Over \$4 Million to Resolve FCA Allegations
- Idaho Physician Agrees to Pay \$110,000 to Resolve Allegations of Overprescribing Opioids
- California Physician Guilty on Charges of Illegally Prescribing Opioids
- Three Anesthesia Providers and Numerous Georgia Outpatient Surgery Centers Agree to pay Approximately \$28 million to Resolve Kickback and False Claims Allegations
- Two Ophthalmologists and Eye Clinics Face \$170 Million Penalties for Fraud
- Physician Fined and Sentenced to Prison for Overprescribing Opioids
- Geisinger Community Health Services Self-Discloses Violations, Pays \$18 Million

HEALTH CARE DISTRICT BOARD

December 15, 2021

- Individual Excluded for Providing Free Gifts to Beneficiaries
- Private Equity Firm and South Bay Mental Health Center Agree to \$25 Million Fraud Settlement
- Three Pharmaceutical Companies Agree to \$447 Million Price Fixing Settlement
- Former Chief of Prosthetics at Walter Reed Medical Center Sentenced to Prison for Accepting Cash and Other Gratuities

8. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements	None	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Net Revenue	None	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

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 VP & Chief Financial Officer

9. Reviewed/Approved by Committee:

Patient Safety, Quality, and
 Compliance Committee


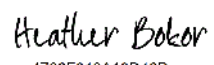
 Committee Name


12/15/21

 Date

10. Recommendation:

Staff recommends the Board receive and file the District’s Compliance, Privacy, and Ethics’ Quarterly Report of Recent Regulatory Updates and Industry Enforcement Activity (FY22 Q1).

Approved for Legal sufficiency:
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 VP & Chief Compliance and Privacy Officer

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 Chief Executive Officer

HEALTH CARE DISTRICT BOARD

December 15, 2021

COVID-19 Vaccine Mandates and Court Challenges

Recently, there have been significant regulatory changes (new rules and court challenges) at the state and federal level related to COVID-19 and vaccine mandates – with a major focus on health care. Much like the pandemic itself, health policy surrounding COVID-19 – through new and changed rules – have dominated the regulatory landscape impacting many industries. Health care organizations, including the Health Care District, have been closely following these changes, many of which that have occurred during the past month. This education and information presentation will cover the current top issue in health care, and provide a detailed report on the many changes that have occurred.

Major recent takeaways (current as of 12/7/2021):

- Federal employees are being granted some leniency, with the Biden administration urging departments to provide employees “education” and other steps before terminating an employee. This is despite the deadline having occurred in late November.
- The COVID-19 vaccine mandate for healthcare workers is also temporarily suspended following the issuance of an injunction on November 30th. Note these are all separate rules, which could lead to separate outcomes. Florida issued laws that were purposefully contradictory of this requirement.

a. U.S. Court Temporarily Halts Biden's Vaccine Mandate for Federal Contractors Nationwide (12/2021)

- The U.S. District Court for the Southern District of Georgia told the Biden administration to halt enforcement “in all covered contracts in any state or territory of the United States of America.”
- The court's decision to issue a nationwide injunction comes a week after a federal district court in Kentucky halted enforcement in Kentucky, Ohio and Tennessee.
- The court said President Biden likely exceeded his authority under the Procurement Act when he issued the mandate. The requirements cover millions of workers across the U.S. economy.
- The Biden administration was forced to halt enforcement of its vaccine and testing requirements for businesses with 100 or more employees last month. The U.S. Court of Appeals for the 5th Circuit in New Orleans ordered the administration to refrain from enforcing the requirements until further notice, citing “serious constitutional concerns.”
- The federal contractor mandate is stricter than the business requirements issued by the Occupational Safety and Health Administration (“OSHA”). However, it allows companies to put in place additional safety measures for unvaccinated employees who have religious or medical exemptions, including mask requirements or regular testing for COVID-19.

b. CMS Halts Vaccination Mandate Following Court Decisions (12/2021)

- Following two recently issued injunctions, CMS has temporarily suspended the COVID-19 vaccination mandate for healthcare workers.
- CMS noted the following, “On November 29, 2021, the United States District Court for the Eastern District of Missouri issued a preliminary injunction against the implementation and enforcement in ten states of Medicare and Medicaid Programs;

HEALTH CARE DISTRICT BOARD

December 15, 2021

Omnibus COVID-19 Health Care Staff Vaccination, 86 Fed. Reg. 61,555, 61,556 (Nov. 5, 2021). On November 30, 2021, the United States District Court for the Western District of Louisiana issued a nationwide preliminary injunction against the implementation and enforcement of the same rule, with the exception of the ten states covered under the first preliminary injunction. CMS has appealed both of these decisions, and has filed motions for stays of these orders. While CMS remains confident in its authority to protect the health and safety of patients in facilities funded by the Medicare and Medicaid programs, it has suspended activities related to the implementation and enforcement of this rule pending future developments in the litigation. Please note that the comment period is separate from the litigation.”

c. District Court Issues Injunction Temporarily Blocking Healthcare Vaccination Mandate (11/2021)

- A District Court in Louisiana has issued a preliminary injunction enjoining and restraining the implementation of the CMS vaccine mandate.
- The scope of the injunction is nationwide except for the 13 states in the Midwest that had already prevailed in obtaining a preliminary injunction.
- The preliminary injunction will remain in place until the Supreme Court, the Court of Appeals, or the District Court in Louisiana make a different ruling.
- The Judge cited the recent issuance of an injunction temporarily preventing the enforcement of the OSHA vaccination or test requirement for large employers with over 100 employees.

d. Biden Administration Recommends Federal Employers Delay COVID-19 Vaccination Mandate Enforcement (11/2021) *(additional details copied in the report below)*

- The White House Safer Federal Workforce Taskforce issued updated guidelines for the enforcement of the COVID-19 for federal employees.
- This references the requirement that federal employees receive the COVID-19 vaccination by November 22, 2021.
- “The White House advised agencies that they should deal with noncompliant employees by providing a week of counseling to encourage them to get vaccinated, followed by suspensions and, eventually, more severe adverse personnel actions, including removal.”
- However, a later email from the Office of Personnel Management indicated that federal agencies should wait until January to begin suspending employees. The email did indicate there can be circumstances where employers should move more quickly when issuing adverse personnel actions.
- The White House updated the [FAQ](#), which outlines which federal employees are covered by this specific mandate.

e. A Florida Judge Refuses to Block Health Care Vaccination Rule (11/2021)

- A Florida judge blocked a request for a Temporary Restraining Order or Preliminary Injunction that would prohibit the COVID-19 vaccine requirement for hospitals, healthcare workers, and nursing home workers.

HEALTH CARE DISTRICT BOARD

December 15, 2021

f. Florida Implements Laws Governing COVID-19 Vaccination Mandates for Employers (11/2021)

- On November, Florida held a special session of the legislature to discuss potential laws related to the COVID-19 vaccine mandates issued by the federal government.
- Concluding the meeting, four bills were signed into law governing COVID-19 vaccine requirements.
- The new laws prohibit public and governmental employers in Florida from mandating the COVID-19 vaccine, which is at odds with the CMS requirements for healthcare workers.
- For private employers, they are allowed to mandate the COVID-19 vaccine, provided they provide the ability to opt out of the requirement based on any of the following:
 - Religious exemption;
 - Medical exemption,
 - COVID-19 immunity based on previous infection;
 - Periodic employer testing of the employee;
 - Employer provided PPE.
- Penalties for violating the law will result in \$10,000 fines for employers with fewer than 100 employees, while employers with more than 100 employees face a \$50,000 fine per violation. Employers have the ability to reinstate terminated employees and provide full back pay.

g. Court Grants Order to Stay OSHA's COVID-19 Vaccination and Testing Emergency Temporary Standard (11/2021)

- On November 12, 2021, the United States Court of Appeals of the Fifth Circuit granted a motion that temporarily blocks OSHA's COVID-19 Vaccination and Testing Emergency Temporary Standard ("ETS").
- The order prevents OSHA from taking any steps or actions to implement or enforce the ETS until a further court order is issued.
- After the issuance of the temporary order, jurisdiction was changed to the U.S. Court of Appeals for the Sixth Circuit, who will rule on the challenges to the ETS.
- The Department of Labor has filed a motion to have the motion reversed.
- OSHA believes it will prove it acted within its authority in issuing the ETS, but intends to comply and will not enforce the ETS until litigation is complete.

h. CMS Issues Interim Final Rule ("IFR") Requiring Healthcare Workers to Receive COVID-19 Vaccination (11/2021)

- CMS issued an Interim Final Rule on November 4, 2021 that requires healthcare staff to receive the COVID-19 vaccine for staff at Medicare participating organizations. The rule became effective November 5, 2021.
- CMS recently held a Stakeholder Call to provide clarity on the Interim Final Rule issued November 4th. An FAQ was also issued.
- Medicare participating organizations must do the below by December 6th, 2021:
 - Have a process or plan for vaccinating all eligible staff that notes the below:
 1. Staff must receive their first vaccine by December 6, 2021.

HEALTH CARE DISTRICT BOARD

December 15, 2021

2. Staff must receive their second dose/full dose of the vaccine, where applicable, by January 4, 2022.
 3. Exception for 100 percent remote employees. The FAQ provides further clarification on this. “Individuals who provide services 100 percent remotely and who do not have any direct contact with patients and other staff, such as fully remote telehealth or payroll services, are not subject to the vaccination requirements outlined in this regulation.”
- Have a process or plan for providing exemptions and accommodations for those who are exempt, in accordance with federal law; and
 - Have a process or plan for tracking or documenting staff vaccinations.
 - This applies to both current and new employees. The mandate also includes volunteers, students, and trainees.
 - Boosters are NOT currently included within the requirements, though CMS urges facilities to review the considerations for the booster dose.
 - Per the final rule, a staff member is “fully vaccinated” when it has been two weeks or more since the staff member completed a primary vaccination series for COVID-19. For Johnson & Johnson vaccine, the single dose is sufficient.
 - Previously having a COVID-19 infection and antibodies is NOT sufficient to receive an exemption from the vaccination requirement.
 - Health care organizations must have a process for medical exemptions for recognized medical conditions for which the vaccine is contraindicated AND for religious beliefs, observances, or practices, in accordance with federal law.
 - Medical exemptions:
 1. Facilities must develop a process for permitting staff to request a medical exemption
 2. Facilities must ensure all documentation is signed and dated by a licensed practitioner
 3. Documentation must contain all information specifying why the COVID-19 vaccines are clinically contraindicated for the staff member
 4. Documentation must include a statement by the authenticating practitioner recommending the staff member be exempted
 - Religious exemptions:
 1. Facilities must develop a process for permitting staff to request a religious exemption
 2. Facilities must ensure all requests for religious exemptions are documented and evaluated in accordance with applicable federal law and as a part of the facility’s policies and procedures
 - Accommodations: When an exemption is approved, accommodations must be made. These can include testing, physical distancing, and source control. Regardless of the method selected, health care organizations must ensure the risk of COVID-19 transmission is minimized.
 - Enforcement: CMS will work with State Survey Agencies to review compliance with the requirements. Onsite compliance reviews will be conducted for the requirements during Recertification Surveys and Complaint Surveys. Surveyors will check if the organization has a process or plan for vaccinating all eligible staff, a process or plan for providing exemptions/accommodations for those deemed exempt, and a process or

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plan for tracking and documenting staff vaccines (all previously listed in this summary).

- Accreditation organizations will also review for compliance.
- Failure to comply will result in a citation and organizations will be provided a chance to remedy the errors.
- If the errors are not corrected, CMS may levy Civil Monetary Penalties, denial of payment, and potentially termination from the Medicare program.
- The regulation preempts any state law (Supremacy Clause). Stakeholders have 60 days to comment on the IRF.

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Top 10 Trends in Health Care Regulations and Industry in 2021

A. COVID-19 Vaccine Mandates and Court Challenges *(Refer to report, copied above)*

B. OIG Changes after New Administration

- The OIG has made some notable changes recently. For instance, the Self-Disclosure Protocol was recently altered, in some ways substantially. This includes removing OIG cooperation with the self-disclosing party in criminal proceedings. Additionally, the OIG has begun releasing an increased amount of Advisory Opinions, with several opinions being issued monthly. In some years, only a couple of Advisory Opinions would be issued. Following the success of the Advisory Opinion process when responding to the COVID-19 pandemic, the OIG had aimed to continue to produce more Advisory Opinions. Note Advisory Opinions are useful, but are only binding to the party to whom it is issued.

C. Collaboration between Law Enforcement Agencies

- Law enforcement agencies continue to share resources and collaborate to resolve cases in healthcare cases. It is now common for the HHS-OIG, DEA, state health care fraud units, State Attorney Office, and specialized units investigating the fraud at issue. This collaboration has been rising in recent years and appears certain to continue.

D. Price Transparency

- The Biden administration is continuing to pursue price transparency for healthcare costs. These initiatives began prior to the current administration, when the Price Transparency requirement mandated that hospitals publish certain information related to charges with managed care payors the hospital contracted with. This includes publishing all charges that could occur at the hospital (generally found in a chargemaster) and to provide certain costs associated with 300 shoppable services. This took effect in January 2020. Now, fines are increased from a maximum of \$300 a day to a maximum yearly penalty of over \$2 million for large hospitals with many beds. Further price transparency efforts are also being enacted, including the Surprise Billing Act, which aims to limit surprise medical bills, which are bills an in-network patient receives for out-of-network (“OON) care in emergency care settings OR from OON providers at in-network provides. Common examples include Anesthesiology and Radiology. These surprise medical bills result in balance billing, where the patient is sent the remaining balance for the OON care received. It is broad in scope and applies to hospitals, freestanding emergency departments, providers, and health plans.

E. Hospital Mergers and Acquisitions

- Health organizations continue to participate in a large number of mergers and acquisitions, limiting the number of options available to potential consumers. The Federal Trade Commission (FTC) indicated it plans to provide more oversight of these arrangements.

F. OIG and RACs Focus on Upcoding

- Two reports were recently issued by the Office of Inspector General and a Medicare and Medicaid Recovery Audit Contractor, Cotiviti. These reports indicate that the OIG and other RACs will resume focusing on hospital and physician billing practices, particularly as it relates to upcoding. This came after the OIG found a substantial increase in the number of

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patients billed at the highest MS-DRG level, which potentially indicates fraud. Cotiviti evaluated Evaluation and Management services by physicians and their practices and noted similar upcoding may be taking place.

G. Cybersecurity Threat Remains High

- There continue to be ransomware threats to hospitals, with the OIG releasing additional guidance on “Zero-day” attacks. These cybersecurity breaches can result in substantial financial losses, as well the loss of potential patient data.

H. False Claims Act (FCA) Settlements and Cases

- There were several notable settlements for Hospitals and Health systems resolving False Claims Act (FCA) allegations. The False Claims Act (FCA) continues to be the government’s primary civil enforcement tool for imposing liability on healthcare providers that defraud federal programs. There continue to be a number of legal developments involving the FCA that will significantly impact the government’s enforcement efforts. Additional details on these developments were provided in the materials.

I. Navigating the Opioid Crisis

- The government has created various strike and task forces, substantially increased the number of investigations, and enacted numerous pieces of legislation to curb the impact of the opioid crisis over the past few years. We are likely to continue to see the enactment of additional legislation and increased investigations against key players in the opioid distribution chain focusing on marketing activities of pharmaceutical manufacturers, along with civil enforcement and private actions.
- CVS, Walgreens, and Wal-Mart pharmacies were also found to have recklessly distributed large quantities of opioids in two Ohio counties, per a federal jury. The two counties argued that these three pharmacies failed to properly stop the issuance of these opioids, which led to the deaths of hundreds of people and cost the counties approximately \$1 billion. Damages the counties will receive be determined by a judge next year.

J. OCR Continues Enforcement of Patient Right of Access Cases

- The Office for Civil Rights announced five separate settlements for violations of HIPAA Privacy Rules’ right of access standard. These five providers were all subjected to Civil Monetary Penalties for failing to meet the standard, which requires providers to timely provide health records to patients who request them. Since the initiative began, 25 providers have now faced penalties for failing to meet the HIPAA requirements.
 1. Advance Spine and Pain Management agreed to pay \$32,150 in Civil Monetary Penalties and agreed to be monitored for two years as part of a Corrective Action Plan. The group failed to timely provide access, taking five months to provide records. As part of the CAP, the group must revise access policies and procedures to ensure prompt response to these requests.
 2. Denver Retina Center agreed to \$30,000 Civil Monetary Penalties, one year of monitoring and corrective actions. They failed to provide records over a 6-month period. As part of the corrective actions, the center must revise policies and procedures to comply with federal standards and requirements.
 3. Dr. Robert Glaser agreed to pay \$100,000 Civil Monetary Penalties for failure to respond to an OCR investigation and OCR’s data requests. Dr. Glaser did not

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respond to numerous requests over a multi-year period, failed to timely request a hearing, and did not contest OCR's Notice of Proposed Determination.

4. Rainrock Treatment Center agreed to pay \$160,000 in Civil Monetary Penalties and corrective actions. The center failed to timely provide a patient with their records after multiple requests, as the patient had to file three complaints with HHS before ultimately receiving their records. They are subject to a Corrective Action Plan, including requirements to revise right of access policies.
5. Wake Health Medical Group- Agreed to pay \$10,000 Civil Monetary Penalties for failure to respond to patient's request after two years and having already required the patient to pay \$25 for the records. Agreed to a Corrective Action Plan, including the requirement to revise right of access policies.

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Recent Regulatory Updates and Industry Enforcement Activity (FY22 Q1)

Regulatory Updates:

1. **U.S. Court Temporarily Halts Biden's Vaccine Mandate for Federal Contractors Nationwide** (*Summary copied above*)
2. **CMS Halts Vaccination Mandate Following Court Decisions (12/2021)** (*Summary copied above*)
3. **OIG Issues Semiannual Report to Congress (12/2021)**
 - The HHS-OIG issued its Fall 2021 Semiannual Report to Congress. The report discusses the approximate \$4 billion in expected recoveries due to audits and investigations conducted by the HHS-OIG during fiscal year 2021.
 - It also highlights recent enforcement actions taken by the agency.
 - The OIG expects to recover nearly \$787 million due to audit findings and an additional \$3 billion is expected to be recovered based on investigations.
 - 532 criminal enforcement actions were brought against individuals and/or entities engaged in illegal activity that impacts federal healthcare programs.
 - This is on top of the 689 civil actions, such as claims brought pursuant to the False Claims Act and other civil related matters, such as Civil Monetary Penalties.
 - 1689 individuals and/or entities were excluded by the OIG, limiting their ability to participate in Medicare, Medicaid, and TRICARE.
 - Other findings include that COVID-19 devastated Medicare beneficiaries in nursing homes, as 40 percent of beneficiaries had or likely had COVID-19 in 2020.
 - An analysis of CMS's Medicare protocols revealed a lack of consistent oversight for medical devices in hospitals.
 - Further, telehealth was an area of concern, as was COVID-19 related fraud, such as orders for medically unnecessary testing and DME.
4. **District Court Issues Injunction Temporarily Blocking Healthcare Vaccination Mandate (11/2021)** (*Summary copied above*)
5. **Biden Administration Recommends Federal Employers Delay COVID-19 Vaccination Mandate Enforcement (11/2021)**
 - (*Summary copied above, additional details provided below*)
 - The White House updated the [FAQ](#), outlining which federal employees are covered by this specific mandate. More importantly, they updated their guidance on enforcement of the rule:
 - **Q: What steps may an agency take if a Federal employee refuses to be vaccinated or provide proof of vaccination?** A: Employees covered by Executive Order 14043 who fail to comply with a requirement to be fully vaccinated or provide proof of vaccination and have neither received an exception or extension nor have an exception or extension request under consideration, are in violation of a lawful order. Employees who violate lawful orders are subject to discipline, up to and including termination or removal. Consistent with the Administration's policy, agencies should initiate an enforcement process to work with employees to achieve their compliance. Accordingly, agencies should initiate the enforcement process with an appropriate period of education and counseling, including

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providing employees with information regarding [the benefits of vaccination](#) and [ways to obtain the vaccine](#). If the employee does not demonstrate progress toward becoming fully vaccinated through completion of a required vaccination dose or provision of required documentation by the end of the counseling and education period, agencies may issue a letter of reprimand, followed by a short suspension (generally, 14 days or less). Continued noncompliance during the suspension can be followed by proposing removal. Operational needs of agencies and the circumstances affecting a particular employee may warrant departure from these guidelines if necessary, including whether to expedite or extend the enforcement process. For example, agencies may consider the length of the education and counseling period or following an initial brief suspension (14 days or less) with a longer second suspension (15 days or more), rather than moving from a first suspension to proposal of removal. That said, consistency across Government in enforcement of this Government-wide vaccine policy is desired, and the Executive Order does not permit exceptions from the vaccination requirement except as required by law.

- Agencies may initiate the enforcement process for employees who fail to submit documentation to show that they have completed receiving required vaccination dose(s), as long as those employees have not received an exception or extension, or the agency is not considering an exception or extension request from the employee.
- If an employee responds at any phase of the enforcement process by submitting proof of progress toward full vaccination (i.e., completed vaccination dose), the agency should hold the discipline in abeyance to afford a reasonable period of time to become fully vaccinated.
- In pursuing any adverse action, the agency must provide the required procedural rights to an employee and follow normal processes, including any agency policies or collective bargaining agreement requirements concerning disciplinary matters. Employees should not be placed on administrative leave while agencies are pursuing an adverse action for refusal to be vaccinated, but those employees will be required to follow safety protocols for employees who are not fully vaccinated when reporting to agency worksites.
- If the employee claims a legally required exception, or a medical circumstance that necessitates delay of vaccination, as the reason for not being vaccinated, an agency should follow its ordinary process to review and consider what, if any, accommodation it must offer. All agency personnel designated to receive and review requests for accommodations should know how to handle requests consistent with applicable Federal law. If the employee's request for an exception or extension is denied, and the employee does not comply with the vaccination requirement in a timely manner, the agency may pursue disciplinary action, up to and including removal from Federal service.
- OPM has issued [additional guidance](#) to further assist agencies with enforcing the vaccination requirement for Federal employees.

6. A Florida [Judge Refuses to Block Health Care Vaccination Rule](#) (11/2021)
(Summary copied above)

7. Florida Implements Laws Governing COVID-19 Vaccination Mandates for Employers (11/2021) (Summary copied above)

8. CMS Issues Interim Final Rule (“IFR”) Requiring Healthcare Workers to Receive COVID-19 Vaccination (11/2021) (Summary copied above)

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9. **United States Plans to Expedite COVID-19 Vaccines for Omicron Variant (11/2021)**

- Per a report in the Wall Street Journal, the United States plans to expedite review and approval of a modified vaccine used to treat the Omicron variant.

10. **FDA Expands EUA for Specific Monoclonal Antibody Treatments for Children (11/2021)**

- The FDA expanded the Emergency Use Authorization (“EUA”) for specific monoclonal antibody treatments for children, including newborns. Bamlanivimab and Etesivimab are included in the EUA. All pediatric patients who tested positive for COVID-19 or and are at high risk to move to severe COVID-19 are eligible to receive the antibodies under the terms of the EUA. It also allows at-risk pediatric patients to receive them post-exposure.

11. **Former FDA Commissioner Expects “Fully Vaccinated” Definition will include Booster Dose (11/2021)**

- Former FDA Commissioner Gottlieb expects that the CDC will require the additional COVID-19 booster dose for an employee to be considered “fully vaccinated.”
- Gottlieb does not expect this to be passed until at least 2022.

12. **CMS Issues FY22 OPPS Final Rule (11/2021)**

- CMS issued its FY22 Outpatient Prospective Payment System (“OPPS”) final rule.
- OPSS payment rates for hospitals by two percent, provided quality reporting metrics are met.
- Ambulatory Surgery Center payment rates will also increase by two percent.
- The rule substantially increases penalties related to noncompliance with the Price Transparency requirements that were implemented on January 1, 2021.
- For large hospitals with many beds, the penalties for noncompliance can now reach over \$2 million per year. Additionally, hospitals must take steps to ensure the machine-readable files are easily available by searches and available for download.
- CMS did not change the payment rate for 340B drugs, which will continue to be paid at Average Sales Price minus 22.5 percent.
- CMS ultimately reversed course on the decision to eliminate the Inpatient Only list, which will continue to be utilized.
- The Radiation Oncology model was not delayed and is to be implemented on January 1, 2022.

13. **OIG Revises Provider Self-Disclosure Protocol (11/2021)**

- The Department of Health and Human Services Office of Inspector General recently changed the Provider Self-Disclosure Protocol. Changes include renaming the guidance document, which is now entitled “OIG’s Health Care Fraud Self-Disclosure Protocol.”
- Under the revisions, the minimum dollar threshold for self-disclosures increased from \$50,000 to \$100,000 for potential settlements related to kickbacks.
- For other issues, the minimum dollar threshold was increased from \$10,000 to \$20,000.
- Further, the OIG indicated that it will now only support parties self-disclosing in civil matters, as opposed to civil and criminal matters. The removal of criminal matters is a significant change.
- When submitting information in the SDP, a party is now required to provide itemized damages for each impacted health care program, meaning charges for Medicare and Medicaid must be separated, as well as any other affected program.

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- If a party submitting to the SDP is under a Corporate Integrity Agreement, they must note such in the submission and note the self-disclosure to the CIA monitor.

14. HHS Issues Warning on Zero Day Cyber Attacks (11/2021)

- The Department of Health and Human Services [issued](#) a cybersecurity warning to healthcare systems about the dangers of so called zero-day attacks.
- A zero-day attack occurs when hackers exploit system vulnerabilities before program creators have had a chance to identify any issues in the first place.
- In some instances, hackers will then sell information related to the exploit to other hackers.
- DHHS has warned that the lack of vigilance and cybersecurity can result in huge financial losses and the potential loss of patient data.

15. CMS Issues Long-Awaited Guidance on Co-Location (11/2021)

- CMS recently [issued guidance](#) to hospitals on the sharing of space with other facilities. The guidance had been pending since May 2019, when CMS initially released the proposal related to shared space arrangements.
- The guidance focuses us on how each hospital must demonstrate independent guidance with the hospital Conditions of Participation.
- Shared Spaces: Spaces should be separate and distinct, though areas such as a closet can be shared provided they are sufficiently clear for supplies. Considerations include patient rights, infection prevent and control, and governance.
- Contracted Services: Services may be offered directly or under contract or arrangement. (i.e., lab, dietary, pharmacy, maintenance, and housekeeping).
- Personnel: Must have adequate personnel to meet staffing requirements, whether provided by the hospital or under arrangement. If under arrangement, the governing body must ensure adequate staffing levels, appropriate oversight, training and education to contracted staff, quality and safety, and accountability to practice standards.
- When co-locating, hospitals should “consider the risk to compliance through any shared space or shared service arrangements.” Additionally, the State Operations Manual Appendix A will be modified to provide guidance to surveyors. The guidance is effective 11/12/2021.

16. CMS Issues No Surprise Billing Act (09/2021)

- CMS recently issued the No Surprise Act, which aims to reduce surprise bills that patients unexpectedly receive. The law takes effect January 1, 2022.
- The Act aims to limit surprise medical bills, which are bills an in-network patient receives for out-of-network (“OON”) care in emergency care settings or from OON providers at in-network settings. Common examples: Anesthesiology, Radiology.
- These surprise medical bills result in balance billing, where the patient is sent the remaining balance for the OON care received.
- Applies to hospitals, freestanding emergency departments, providers, and health plans.
- This Applies to the following categories:
 - Emergency Services, which include post-stabilization services and items providers as an observation patient or an inpatient/outpatient stay related to an emergency visit.
 - For non-emergency services, Prohibits OON provider from balance billing patient for services provided at in-network facility. (i.e., Anesthesiology, Radiology).

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1. There is a waiver for non-emergency services with strict timing requirements and consent that must be signed by the patient in advance. Waivers DO NOT apply to ancillary services, including emergency medicine, anesthesiology, pathology, radiology, and neonatology; items and services provided by assistant surgeons, hospitalists, and intensivists; diagnostic services; and nonparticipating providers if there is no participating provider option.
2. Patients cannot waive treatment received by OON provider while at an in-network facility.
 - Air Ambulance Services: prohibits balance billing for OON air ambulance transports.
 - This is NOT applicable to ground ambulance at this time, but be on the lookout for changes, as ground ambulance will likely come next.
 - The Act also mandates Independent Dispute Resolution process for OON providers, facilities, providers of air ambulance services, plan and issuers. This acts as a baseball style arbitration, where both sides submit their suggested payment and rationale. The arbitrator would pick one number or the other.
- The Surprise Billing Act also mandates certain requirements for health systems. Hospitals must post public disclosure related to The No Surprise Act on their main website. This provides the public and patients with pertinent health plans notice of the rule. The notice must be clear and easy to read.
- Hospitals must enact process to ensure they are not balance billing OON patients. First step: Determine which plans are in-network vs. OON. Would then negotiate OON payments with patient's health plan.
- Violations result in Civil Monetary Penalties of up to \$10,000.00 per occurrence:
 - Mens rea: Knowingly.
 - Can still withdraw the bill within 30 days if realize the mistake and reimburse the payment plus applicable interest.
- Organizations should begin developing waivers for non-emergency services, if desired.

17. CMS Issues FY2022 IPPS Final Rule (09/2021)

- CMS recently issued the fiscal year 2022 Inpatient Prospective Payment System ("IPPS") and Long-Term Care Hospital Prospective Payment System.
- Payment rates will increase by approximately 2.5 percent for acute care hospitals that participate in the Hospital Inpatient Quality Reporting Program and are EHR users.
- Hospitals may face payment adjustments for excess readmissions, payment reduction for the worst performing hospitals in the Hospital-Acquired Condition Reduction Program, and an increase or decrease depending on the Hospital Value-Based Purchasing Program.
- CMS is extending the New COVID-19 Treatment Add-on Payment ("NCTAP") for eligible COVID-19 products through the fiscal year.
- CMS approved 19 New Technology Add-on Payments.
- Under the final rule, CMS will distribute approximately \$7.2 billion in uncompensated care payments, which is a decrease of \$1.1 billion from last year.
- CMS is repealing the market-based MS-DRG disclosure policy, which required hospitals to report median payer-specific negotiated charges with all Medicare Advantage payers on its Cost Report.
- Additionally, CMS is repealing the market-based MS-DRG relative weight methodology that was adopted for 2024. CMS will continue to use its existing methodology.

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18. National Health Care Fraud Enforcement Action Results in Charges Involving Nearly \$1.5 Billion in Losses (09/2021)

- The DOJ announced criminal charges against 138 defendants. These include 42 doctors, nurses, and other licensed medical professionals all over the United States.
- These fraud schemes caused nearly \$1.5 billion in losses. Of that, approximately \$1.1 billion resulted from fraud related to telemedicine, \$29 million from COVID-19 fraud, \$133 million related to substance abuse treatment facilities, and \$160 million from other fraud and illegal opioid distribution.
- The telemedicine case involved 43 criminal defendants and include conduct such as executives paying doctors and nurse practitioners to order medically unnecessary DME equipment, genetic laboratory tests, and other diagnostic tests. This included fake telehealth visits that never occurred.
- The case was investigated by the Health Care Fraud Unit of the Criminal Division's Fraud Section, the Health Care Fraud and Appalachian Regional Prescription Opioid Strike Force, the DHHS OIG Attorney General, and the DEA.

Industry Enforcement Activity:

1. First Case of the COVID-19 Omicron Variant Identified in Tampa, Florida (12/2021)

- The first confirmed case of the omicron variant in Florida has been detected in Tampa.
- A spokesperson with the James A. Haley Veterans' Hospital in Tampa, confirms one of its patients tested positive for the variant, adding the patient has mild symptoms and recently returned from international travel.

2. Recent COVID-19 Enforcement Actions (11-12/2021)

- There have been numerous recent COVID-19 enforcement actions for various illegal conduct related to the pandemic from September to November. These encompass a number of different activities, across many industries, a few of which are included below:
 - Seattle physician was found guilty of fraudulently obtained millions from COVID-19 relief programs, specifically the Paycheck Protection Program (PPP) and the Economic Injury Disaster Loan relief funds. Dr. Eric Shibley submitted several false applications, which resulted in him receiving nearly \$3 million in fraudulent relief funds. Due to this conduct, he faces several charges of wire fraud, bank fraud, money laundering. He faces 20 years for each count of wire fraud, 30 years for each count of banking fraud, and 10 years for money laundering.
 - Lab owner sentenced to 82 months for COVID-19 kickback scheme.
 - Arkansas man charged in \$100 COVID-19 fraud scheme.
 - Two defendants charged over providing fraudulent COVID-19 vaccination cards.
 - Pharmacy owner pleads guilty to charges for vaccinating minors under 12.
 - Man facing federal charges for the selling and distribution of fraudulent COVID-19 vaccination cards and mail fraud due to the use of a federal mail service. This individual purchased 600 false COVID-19 vaccination cards through a foreign seller. He would sell the cards for \$75 and advertised on social media. He faces 20 years for each count of mail fraud and obstruction of justice.

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- Nursing director faces charges for producing fraudulent COVID-19 vaccination cards. Tammy McDonald faces two counts of producing fraudulent COVID-19 vaccination cards and one count of lying to federal investigators. McDonald falsely filled out COVID-19 vaccination cards for individuals she knew had not received the COVID-19 vaccine.

3. **South Florida Addiction Treatment Facility Operators Convicted in \$112 Million Fraud Scheme (11/2021)**

- A federal jury in Florida recently convicted two operators, Johnathan and Daniel Markovich, of two addiction treatment facilities for illegally billing over \$110 million for services that were not rendered, were not medically necessary, and for paying and receiving kickbacks.
- Ultimately, they were convicted of conspiracy to commit health care fraud and wire fraud. Johnathan was convicted of eight counts of health care fraud, while Daniel was convicted of two counts of health care fraud. This is in addition to the convictions both received for conspiracy to pay and receive kickbacks and two counts of paying and receiving kickbacks.
- One of the defendants was also sentenced for money laundering and a separate bank fraud charge for illicit actions related to the Paycheck Protection Program (“PPP”).
- Jonathan and Daniel Markovich paid recruiters kickbacks and received kickbacks from laboratories in exchange for the referral of patients.
- They paid recruiters to obtain patients for their clinic. The recruiters offered illicit kickbacks to patients, which took the form of free airline tickets, illegal drugs, and cash payments.
- These patient recruiters would provide illegal drugs to the recruited patients to ensure they were admitted for detox treatment, which was the highest charge available at the facility.
- Further, the facility allegedly billed for therapy sessions that were not provided or attended and ordered excessive laboratory tests.
- Patients were also provided with a “Comfort Drink” that would keep them sedated and to ensure they kept coming back to the facility. These drinks contained large doses of controlled substances aiming to keep patients docile. Patients cycled through the facility frequently.
- Jonathan Markovich was ultimately convicted of bank fraud after completing the PPP application, which requires individuals to assert that they are not engaged in illicit conduct.

4. **Incentives Boosted Hospital Staff Vaccination Rates in South Florida (11/2021)**

- Providing increased incentives to staff increased the vaccination rate from approximately 60% in August to 80% or higher in south Florida hospitals.

5. **Florida Physician Sentenced to Seven Years in Prison for Performing Unnecessary Procedures (11/2021)**

- Dr. Moses de-Graft Johnson was sentenced to seven years in prison for health care fraud, conspiracy to commit healthcare fraud, and identity theft.
- From 2016-2020, de-Graft Johnson performed medical unnecessary procedures on patients.
- These patients were located using relationships with churches, nursing homes, and hospitals.
- de-Graft Johnson falsified medical records indicating he performed surgeries that did not occur.
- de-Graft Johnson was also ordered to pay over \$28 million in restitution and forfeit other assets, including homes, vehicles, and jewelry.

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6. Hospice Company Agrees to pay \$5.5 Million to Resolve FCA Claims (11/2021)

- Carrefour Associates, Crossroads Hospice of Cincinnati, and several Crossroads Hospices operating in Ohio and Tennessee agreed to pay \$5.5 million to resolve False Claims Act (“FCA”) allegations.
- The alleged violations occurred due to these providers submitting non-covered hospice services for reimbursement to Medicare.
- Per the settlement agreement, Crossroads knowingly submitted these false claims to Medicare for patients who were not terminally ill.
- To qualify for hospice, patients must be considered terminally ill. Instead, Crossroads billed for hospice care who were diagnosed with dementia or Alzheimer’s from January 2012-December 2014.
- The case was raised pursuant to the qui tam provisions of the False Claims Act. The claims were raised by former employees of Crossroads and a home health physician.

7. Home Health Agency Agrees to Pay Over \$4 Million to Resolve FCA Allegations (11/2021)

- PruittHealth, Inc. and several related entities agreed to pay over \$4 million to resolve False Claims Act (“FCA”) allegations. The case was raised under the FCA qui tam provision.
- PruittHealth allegedly submitted claims for home health services that were for services not covered by Medicare or Medicaid.
- Additionally, PruittHealth failed to timely refund overpayments to Medicare and Medicaid. The conduct in question occurred from January 2011-June 2012, during which PruittHealth knowingly submitted claims for home health services that did meet certain requirements, such as having a face-to-face certification from the referring physician, plans of care, and failed to document the patients’ homebound status or need for home health services.
- Once PruittHealth discovered the overpayments, it did disclose this information to the government nor did they timely refund the programs.
- When agreeing to the settlement agreement, the government factored in documents produced by PruittHealth that indicated it had improved its compliance with home health requirements and conducted audits later, such as a pre-bill review of home health claims. These were produced to the government during the investigation.

8. Idaho Physician Agrees to Pay \$110,000 to Resolve Allegations of Overprescribing Opioids (11/2021)

- Dr. Eric Benson, a physician in Idaho, agreed to pay over \$100,000 to resolve allegations that he illegally prescribed controlled substances, including opioids, to patients from 2014-2021.
- These prescriptions were issued despite having no legitimate medical purpose and were issued outside the normal course and scope of practice.
- These prescriptions caused the submission of false claims for prescriptions. One factor in the amount of the settlement was Dr. Benson’s ability to pay.
- Dr. Benson is limited in his ability to accept new patients already being prescribed opioids.
- This case was investigated by the U.S. Attorney’s Office and U.S. Department of Health and Human Services OIG, with additional assistance provided by the DEA and Idaho Board of Pharmacy. This continues a recent trend of law enforcement collaboration in investigating these types of issues.

9. California Physician Guilty on Charges of Illegally Prescribing Opioids (11/2021)

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- California physician Edmund Kemprud was found guilty of 14 counts of illegally prescribing opioids and additional controlled substances to patients.
- From September 2018-March 2019, Dr. Kemprud allegedly prescribed opioids without accounting for patients' medical and prescription history.
- He also failed to perform proper medical examinations of the patients, did not verify the legitimacy of the patients' complaints and symptoms, and failed to review the potential risk of drug abuse for patients who would receive these commonly abused drugs.
- Dr. Kemprud would frequently prescribe Hydrocodone, Alprazolam, and Oxycodone.
- It was found that Dr. Kemprud knowingly operated outside the scope of practice, as he expected patients to return for more prescriptions. Kemprud was arrested in December 2019.
- The case demonstrates another instance of law enforcement collaboration, as this case was investigated by the California Department of Justice's Division Medi-Cal Fraud and Elder Abuse, the Office of Inspector General (OIG), and the Drug Enforcement Agency (DEA).

10. Three Anesthesia Providers and Numerous Georgia Outpatient Surgery Centers Agree to pay Approximately \$28 million to Resolve Kickback and False Claims Allegations (11/2021)

- Three anesthesia providers and numerous Georgia outpatient surgery centers [agreed to pay over \\$28 million](#) to resolve allegations that they violated the False Claims Act.
- The providers entered into kickback schemes that involved paying and receiving compensation in exchange for items such as medications, supplies, equipment, and labor, as well as providing staffing services in exchange for the referral of patients.
- From 2005-2015, several anesthesia companies engaged in the above activity in order to become the sole provider of anesthesia services at the outpatient surgery centers.
- Due to this conduct, these agreements violated the Anti-Kickback Statute, which then caused all claims submitted pursuant to such AKS violations to be subject to the False Claims Act.

11. Two Ophthalmologists and Eye Clinics Face \$170 Million Penalties for Fraud (11/2020)

- Drs. Kibirige and Agomo and their eye clinic, Outreach Diagnostic Clinic, to pay over \$170 million for their conduct in fraudulently billing Medicare for the evaluation and treatment of glaucoma.
- The allegations include that the doctors fraudulently billed Medicare for performing single eye pressure measurement tests used to assess and treat glaucoma. They instead used a different reimbursement code that indicated more treatment was provided, which resulted in higher payment for the physicians, a practice known as "upcoding."
- The ultimate determination of the fines occurred after the court found treble damages, which is allowable under the FCA. In total, the pair and practice must pay \$170,553,350.
- The case was raised pursuant to the qui tam provisions of the False Claims Act. The relator was a former employee of the Outreach Diagnostic Center.

12. Physician Fined and Sentenced to Prison for Overprescribing Opioids (11/2021)

- A Virginia physician was ordered to [serve three years in prison](#), fined \$10,000, and ordered to pay a forfeiture judgment of \$500,000 for distributing controlled substances outside of the normal course and scope of practice.
- Further, the medications were not prescribed for a legitimate medical practice.
- The substances in question include higher than usual amounts of morphine, oxycodone, and hydromorphone, which are classified as opioids and are Schedule II drugs.

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- Per evidence presented in court, patients were often continuously prescribed the same dose without ever tapering and in some instances increased the dosage.
- Prescriptions were often issued without a medical examination or diagnostic study.

13. Geisinger Community Health Services Self-Discloses Violations, Pays \$18 Million (11/2021)

- Geisinger Community Health Services agreed to pay approximately \$18.5 million to resolve allegations that it submitted home health and hospice claims to Medicare that failed to comply with Medicare requirements.
- The settlement took place after Geisinger voluntarily disclosed the violations.
- Per the disclosures, from January 2012-December 2017, Geisinger and affiliated companies submitted claims for home health and hospice that did not meet requirements related to physician certifications of terminal illness, patient elections of hospice care, and face-to-face encounters with home health patients.

14. Individual Excluded for Providing Free Gifts to Beneficiaries (10/2021)

- Afrooz Javanford [agreed to be excluded](#) from participation in federal healthcare programs for 20 years due to his role in providing free items or services to Tricare patients.
- Specifically, the OIG alleged that Javanford illegally offered and paid remuneration to bariatric patients, which included free nutritional shakes.
- The remuneration was provided to improperly induce patients to purchase or order certain drugs, particularly scar creams and metabolic substances.

15. Private Equity Firm and South Bay Mental Health Center (“SBMHC”) Agree to \$25 Million Fraud Settlement (10/2021)

- In a unique [settlement agreement](#), a privacy equity firm and executives from SBMHC agreed to pay \$25 million to resolve fraud accusations related to mental health services provided by staff who were unlicensed and improperly supervised in various clinics.
- The Attorney General’s Office intervened in the case in 2018, at which time it discovered rampant issues with credentialing of providers and proper supervision of personnel.
- Claims were issued to federal health care programs for care provided to patients by these providers, resulting in violations of the Massachusetts False Claims Act. The case was raised pursuant to the qui tam provisions of the False Claims Act by a former employee of SBMHC.

16. Three Pharmaceutical Companies Agree to \$447 Million Price Fixing Settlement (10/2021)

- Taro Pharmaceuticals, Sandoz Inc., and Apotex Corporation [have agreed](#) to pay a combined \$447.2 million to resolve False Claims Act allegations.
- Allegations involved price fixing of several generic prescription drugs, causing beneficiaries and federal health care programs to pay higher costs for these medicines than they otherwise would have.
- These payments come after a criminal deferred prosecution agreement for all three companies, which required the companies to pay a combined \$424.7 million, totaling nearly \$900 million.
- The conduct in question took place from 2013-2015, where the companies agreed to arrangements on price, quantity, and supply of the prescriptions.
- Of note, Taro Pharmaceuticals agreed to pay \$213.2 million, Sandoz Inc. agreed to pay \$185 million, and Apotex Corporation agreed to pay \$49 million.

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17. Former Chief of Prosthetics, David Laufer, at Walter Reed Medical Center Sentenced to Prison for Accepting Cash and Other Gratuities (09/2021)

- Laufer, former Chief of the Prosthetics and Orthotics Department at Walter Reed Medical Center, [was sentenced](#) to eight months in federal prison for accepting gratuities as a public official.
- Following eight months in prison, Laufer will be required to be under supervised release, four months of which will be in home confinement.
- He must also pay nearly \$8,000.00 in restitution. Per the plea agreement, from 2009-2019, a vendor named Pinnacle Orthopedic Services provided medical equipment to the facility in exchange for payment from the federal government.
- In exchange for the thousands of dollars paid to Laufer, the government ended up purchasing millions of dollars' worth of equipment from Pinnacle. The purchases were performed through a blanket purchasing agreement, which means a credit card or contract were not required to be utilized for each purchase.
- During this time, Laufer and his wife also received airline tickets, hotel stays, tickets to entertainment events, and cash. Laufer admitted he entered into the purchases with Pinnacle in part because of the gifts. He also admitted to limiting the number of companies Walter Reed could purchase materials from, thereby providing Pinnacle with a further advantage.
- Federal agents interviewed Laufer about some of these payments from 2017-2019, at which time he lied about the payments.

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1. Description: Critical Care On-Call Services Agreement

2. Summary:

District Hospital Holdings, Inc., d/b/a Lakeside Medical Center (“Hospital”) needs physicians to provide critical care services to Hospital’s patients.

3. Substantive Analysis:

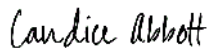
Hospital is currently in negotiations with Southeast University Physicians, PLLC, a physician group comprised of Board-Certified Critical Care physicians, to provide eight (8) hours of restricted coverage (i.e. physically present at the Hospital) and 16 hours of unrestricted coverage (i.e. available by telephone) per day. The Hospital has obtained an independent fair market value analysis of the compensation and the projected annual expenditures referenced herein are consistent with the fair market value analysis. (There is also a separate proposed agreement for Medical Directorship services which is in addition to the on-call agreement with the group for an additional \$47,000 not included in the below projected expenditures).

While this item is not in the FY 2022 budget, it is anticipated that the onboarding of these highly skilled practitioners will result in high quality patient care, as well as the ability to retain some patient conditions which would otherwise be transferred to another facility. By reducing the number of transfers from LMC, more revenue will be generated to help offset the additional expense. Also, other proposed budget expenditures will be adjusted to help mitigate any annual budget overages.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	\$600,000.00	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

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 VP & Chief Financial Officer

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5. Reviewed/Approved by Committee:

N/A
Committee Name

N/A
Date

6. Recommendation:

Staff recommends the Board approve an amount not to exceed \$600,000 and provide the CEO with the necessary authority to execute the agreement related to the on-call services.

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza

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VP & General Counsel

DocuSigned by:
Karen Harris

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VP of Field Operations

DocuSigned by:
Darcy Davis

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Chief Executive Officer