



C. L. Brumback

**Primary Care Clinics**

Health Care District Palm Beach County

# **BOARD OF DIRECTORS**

**February 22, 2023**

**12:45 P.M.**

## **Meeting Location**

**1515 N. Flagler Drive, Suite 101**

**West Palm Beach, FL 33401**

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

**BOARD OF DIRECTORS MEETING  
AGENDA  
February 22, 2023  
1515 N. Flagler Drive, Suite 101  
West Palm Beach, FL 33401**

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

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

1. **Call to Order – Melissa Mastrangelo, Chair**
  - A. Roll Call
  - B. Affirmation of Mission: To provide compassionate, comprehensive health services to all Palm Beach County residents, through collaboration and partnership, in a culturally sensitive environment.
2. **Agenda Approval**
  - A. Additions/Deletions/Substitutions
  - B. Motion to Approve Agenda
3. **Awards, Introductions and Presentations**
4. **Disclosure of Voting Conflict**
5. **Public Comment**
6. **Meeting Minutes**
  - A. **Staff recommends a MOTION TO APPROVE:**  
Board Meeting Minutes of January 25, 2023 [Pages 1-15]
7. **Consent Agenda – Motion to Approve Consent Agenda Items**
  - A. **ADMINISTRATION**
    - 7A-1 **RECEIVE AND FILE:**  
February 2023 Internet Posting of District Public Meeting  
<https://www.hcdpbc.org/resources/public-meetings>
    - 7A-2 **RECEIVE AND FILE:**  
Attendance tracking [Page 16]
    - 7A-3 **RECEIVE AND FILE:**  
HRSA Digest  
(Andrea Steele) [Pages 17-29]

(Consent Agenda Cont.)

- 7A-4 **Staff recommends a MOTION TO APPROVE:**  
Revised After-Hours Policy  
(Alicia Ottmann) [Pages 30-33]

**B. FINANCE**

- 7B-1 **Staff recommends a MOTION TO APPROVE:**  
District Clinic Holdings, Inc. Financial Report December 2022  
(Candice Abbott) [Pages 34-50]

**8. Regular Agenda**

**A. FINANCE**

- 8A-1 **Staff Recommends a MOTION TO APPROVE:**  
Federal Poverty Guidelines/Updated Sliding Fee Scale  
(Annmarie Hankins) [Pages 51-55]

**B. EXECUTIVE**

- 8B-1 **RECEIVE AND FILE:**  
Executive Director Informational Update  
(Alicia Ottmann) [Pages 56-57]

**C. QUALITY**

- 8C-1 **Staff Recommends a MOTION TO APPROVE:**  
Quality Report  
(Dr. Charmaine Chibar) [Pages 58-93]

**D. OPERATIONS**

- 8D-1 **Staff Recommends a MOTION TO APPROVE:**  
Operations Report- December 2022  
(Marisol Miranda) [Pages 94-97]

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

**10. Board Member Comments**

**11. Establishment of Upcoming Meetings**

**March 29, 2023 (HCD Board Room)**

12:45 p.m. Board of Directors

**April 26, 2023 (HCD Board Room)**

12:45 p.m. Board of Directors

**May 24, 2023 (HCD Board Room)**

12:45 p.m. Board of Directors

**June 28, 2023 (HCD Board Room)**

12:45 p.m. Board of Directors

**July 26, 2023 (HCD Board Room)**

12:45 p.m. Board of Directors

**August 23, 2023 (HCD Board Room)**

12:45 p.m. Board of Directors

**September 27, 2023 (HCD Board Room)**

12:45 p.m. Board of Directors

**October 25, 2023 (HCD Board Room)**

12:45 p.m. Board of Directors

**November 28, 2023 (HCD Board Room)**

12:45 p.m. Board of Directors

**December 13, 2023 (HCD Board Room)**

12:45 p.m. Board of Directors

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

**13. Closed Meeting: [Under Separate Cover]**

**Closed Pursuant to Florida Statute Ch. 766.101 and 768.28**

**District Clinic Holdings, Inc.  
d.b.a. C.L. Brumback Primary Care Clinics  
Board of Directors Meeting  
Summary Minutes  
01/25/2023**

**Present:** Melissa Mastrangelo, Chair; Mike Smith, Vice-Chair; Julia Bullard, Secretary; Joseph Gibbons, Treasurer; Robert Glass (ZOOM); William Johnson (Note: John Casey Mullen joined after roll call)

**Excused:** Tammy Jackson-Moore

**Staff:** Darcy Davis; Dr. Belma Andric; Bernabe Icaza; Candice Abbott; Alicia Ottmann; Dr. Charmaine Chibar; Alexa Goodwin; David Speciale; Marisol Miranda; Shauniel Brown; Andrea Steele; Lisa Hogans; Macson Florvil; Luis Rodriguez; Annmarie Hankins; Maria Chamberlin; Dr. Ana Ferwerda; Dr. Sandra Warren; Jon Van Arnam

**Minutes Transcribed By:** Shannon Wynn

**The meeting is scheduled for** 12:45 p.m.

**Meeting Began at** 12:52 p.m.

AGENDA ITEM	DISCUSSION	ACTION
<b>1. Call to Order</b>  <b>1A. Roll Call</b>  <b>1B. Affirmation of Mission</b>	<p>Ms. Mastrangelo called the meeting to order.</p> <p>Roll call was taken.</p> <p>Ms. Mastrangelo read the affirmation of mission.</p>	<p><b>The meeting was called to order at 12:52 p.m.</b></p>

<b>2. Agenda Approval</b>		
<b>2A. Additions/Deletions/ Substitutions</b>  <b>2B. Motion to Approve Agenda Items</b>	None.	<b>VOTE TAKEN: Mr. Joseph Gibbons made a motion to approve the agenda. Mr. John Mullen duly seconded the motion. A vote was called and the motion passed unanimously.</b>
<b>3. Awards, Introductions and Presentations</b>	<p>Dr. Andric introduced Alicia Ottman to the Board of Directors. Alicia Ottmann comes from an FQHC organization. The C.L. Brumback is excited to welcome Alicia to the organization. Alicia is exceptionally passionate about her work. Alicia will supervise the clinics and pharmacies. Alicia gave the Board a quick background of her experience as a patient, as a provider at a health center in Phoenix, AZ and about herself as a leader of an FQHC now and how excited she is to collaborate with the Board.</p> <p>Ms. Mastrangelo welcomed her.</p> <p>Dr. Andric also introduced Regina All to the Board. Gina, as she goes by, is our CNO.</p> <p>Ms. All added that she is here to help support and make any improvements needed. She is available to help.</p> <p>Dr. Andric introduced Lisa Hogans, Director of Nursing, and Maria Chamberlin, Assistant Director of Nursing.</p>	<b>No action necessary.</b>

<b>4. Disclosure of Voting Conflict</b>	None.	<b>No action necessary.</b>
<b>5. Public Comment</b>	None.	<b>No action necessary.</b>
<b>6. Meeting Minutes</b>  <b>6A-1 staff Recommends a MOTION TO APPROVE:</b> Board meeting minutes of December 13, 2022	There were no changes or comments to the minutes dated December 13, 2022.	<b>VOTE TAKEN: As presented, Mr. Gibbons made a motion to approve the Board meeting minutes of December 13, 2022. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.</b>
<b>7. Consent Agenda – Motion to Approve Consent Agenda Items</b>		<b>VOTE TAKEN: Mr. Gibbons motioned to approve the consent agenda. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.</b>
<b>7A. ADMINISTRATION</b>		
<b>7A-1. Receive &amp; File:</b> January 2023 Internet Posting of District Public Meeting	The meeting notice was posted.	<b>Receive &amp; File. No further action is necessary.</b>
<b>7A-2. Receive &amp; File:</b> Attendance tracking	Attendance tracking was updated.	<b>Receive &amp; File. No further action is necessary.</b>

<b>7A-3. Receive &amp; File:</b> HRSA Digest	Per the request of the clinic board, we will include the latest HRSA Digest as available.	<b>Receive &amp; File. No further action is necessary.</b>
<b>7A-4. Staff recommends a MOTION TO APPROVE:</b> Board Member Reappointments	<p>This agenda item presents the Board with a recommendation to reappoint eligible Board members to a second term.</p> <p>The Bylaws of District Clinic Holdings, Inc. state Board membership will be for a period of four (4) years, starting on the date membership is approved and terminating four (4) years from the date of approval. No Board member shall serve more than two (2) consecutive terms. If at any time there is a question concerning the length of the term of office for any Board member, the Governing Board will decide through any appropriate means the term of the questioned incumbent. This agenda item includes the recommendation to reappoint the following members to the Board:</p> <p>Reappointments:</p> <p>Ms. Julia Bullard is a current Board member (2019-present).          Mr. Michael Smith is a current Board member (2019-present).</p>	<b>VOTE TAKEN: Mr. Gibbons motioned to approve the Board Member Reappointments agenda. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.</b>
<b>7B. FINANCE.</b>		
<b>7B-1. Recommends a MOTION TO APPROVE:</b> District Clinic Holdings, Inc. Financial Report November 2022	<p>The November financial statements represent the financial performance through the second month of the 2023 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, cash decreased by \$333k as a result of normal operations, and the shortfall will be subsidized in the upcoming months. Due from Other Governments increased \$1.1M as a result of grant and LIP revenue recognition. New financial line items are reflected for "Right of Use Assets" and "Lease Liability" following the fiscal year 2022 implementation of Governmental Accounting Standards Board (GASB) Statement No. 87, Leases (GASB 87) and GASB Statement No. 96, Subscription-Based Information Technology Arrangements (GASB 96).</p> <p>On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$18k) or (1.1%). Gross patient revenue YTD was unfavorable to budget by \$448k. Total YTD revenue was unfavorable to budget by (\$424k); this was partially due to a timing difference in PRF and grant funds recognized. Operational expenses before depreciation</p>	<b>VOTE TAKEN: Mr. Gibbons motioned to approve the District Clinic Holdings, Inc. Financial Report for November 2022. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.</b>



	<p>were favorable to budget by \$1.8M due mostly to positive variances in salaries, wages, and benefits of \$1.5M, purchased services of \$53k, other supplies of \$101k, repair and maintenance of \$85k, and lease and rental of \$136k. Total YTD net margin was (\$2.8M) compared to the budgeted loss of (\$4.5M) resulting in a favorable variance of \$1.7M or (38.3%).</p> <p>Net patient revenue YTD for the Medical clinics was marginally unfavorable to budget by (\$27k). The Medical clinic's YTD gross patient revenue was unfavorable to budget by (\$471k). The Medical clinic's total YTD revenue was unfavorable to budget by (\$425k). These unfavorable variances primarily resulted from a timing difference in revenue recognition for PRF and grant funds. Total operating expenses of \$4.2M were favorable to budget of \$5.7M by \$1.5M or 26.6%. The positive variance is mostly due to salaries, wages, and benefits of \$1.3M, other supplies of \$84k, repair and maintenance of \$87k, and lease and rental of \$125k. Staffing shortages, as well as expense timing, are driving these favorable variances. Total YTD net margin was favorable to budget by \$1.4M or (35.7%).</p> <p>Net patient revenue YTD for the Dental clinics was unfavorable to budget by (\$43k) or (10.1%). The Dental clinic's total YTD gross patient revenue was unfavorable to budget by (\$56k). Increased charity care and contractual allowances negatively impacted net patient revenue results. Total YTD operating expenses of \$750k were favorable to budget by \$272k. Total YTD net margin was (\$303k) compared to a budgeted loss of (\$577k) for a favorable variance of \$274k or (47.5%).</p>	
<b>8. REGULAR AGENDA</b>		
<b>A. ADMINISTRATION</b>		
<p><b>8A-1. Staff</b>  <b>Recommends a</b>  <b>MOTION TO APPROVE:</b>  Approve the Committee Appointment</p>	<p>This agenda item presents an interim Committee Appointment for the Membership/Nominating Committee.</p> <p>The Clinic Bylaws require current Committee Appointments. Committee appointments do not limit how long a Board Member can serve on a committee.</p> <p>The current Committee Appointments are:</p> <p><u>Membership / Nominating Committee:</u></p>	<p><b>VOTE TAKEN: Mr. Mullen motioned to approve the Committee Appointment. Mr. Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</b></p>

	<p>John Mullen Irene Figueroa</p> <p>The New Appointed Membership/Nominating Committee members are:</p> <p><u>Membership / Nominating Committee:</u></p> <p>Joseph Gibbons William Johns</p>	
<p><b>8A-2.Staff Recommends a MOTION TO APPROVE:</b> Nomination of New Clinic Board Members</p>	<p>This agenda item recommends the appointment of Boris Seymore and Alcolya St. Juste to the Clinic Board.</p> <p>Mr. Boris Seymore has submitted an application for consideration for appointment to the District Clinic Holdings, Inc. Board of Directors. Mr. Seymore can contribute experience, energy, and passion for his knowledge of food and nutrition to the Board.</p> <p>Ms. Alcolya St. Juste has submitted an application for consideration for appointment to the District Clinic Holdings, Inc. Board of Directors. Ms. Alcolya St. Juste can contribute knowledge of the law to the Board.</p> <p>A copy of Mr. Seymore’s and Ms. St. Juste’s applications is attached to this agenda.</p>	<p><b>VOTE TAKEN: Mr. Gibbons recommended the motion to approve the Nomination of the New Clinic Board Members. Mr. Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</b></p>
<p><b>8A-3.Staff Recommends a MOTION TO APPROVE:</b> FY2023 Ending HIV Epidemic Grant Abstract &amp; Budget</p>	<p>Total Funding for West Palm Beach, FL: \$350,000 per year for three years</p> <ul style="list-style-type: none"> <li>• Community Health Center (CHC) Amount: \$145,915</li> <li>• Migrant Health Care (MHC) Amount: \$167,055</li> <li>• Health Care for the Homeless (HCH) Amount: \$37,030</li> </ul> <p>HRSA uses a two-tier submission process for SAC applications via Grants.gov and HRSA Electronic Handbooks (EHB).</p> <ul style="list-style-type: none"> <li>• Phase 1 - Grants.gov submitted January 17, 2022: The Grants.gov application must be completed, submitted, and assigned an HRSA tracking number before the applicant is allowed to access the phase two application. Once phase one is successfully processed, applicants receive a series of emails confirming this and that they have been given</li> </ul>	<p><b>VOTE TAKEN: Mr. Gibbons recommended the motion to approve the FY23 Ending the HIV Epidemic. Mr. Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</b></p>

access to phase two. Typically, this takes a few hours, but it may take up to 48 hours during peak volumes. You will receive four emails from Grants.gov.

- Phase 2 - HRSA EHB due February 16, 2023: After phase one is successfully processed, the phase two application will show up as a new project in your EHB profile with the appropriate due date.

Total \$350,000 per year, CHC \$ 145,915, MCH \$167,055, HCH \$37,030

Since 1988, the Health Care District of Palm Beach County (the District) operates a dynamic health care network that is a local government, ad valorem tax supported safety net health care system. It includes a public hospital, skilled nursing facility, school health program, nationally recognized rapid air emergency transport & care unit & a vibrant Federally Qualified Health Center (FQHC) program. A 7-member governing board leads the District in managing its \$242.8 million budget in a fiscally responsible manner, with 73.2% allocated to the provision of direct health care services. Initial 330 (e)(g)(h) funding was secured in 2013 to support 4 FQHCs & was named the C. L. Brumback Clinics in honor of the county's first Health Department Director. District Clinic Holdings, Inc. was created as a wholly owned subsidiary to manage clinic operations to comply with governance requirements. This has since grown to include a robust system of 10 fixed & 3 mobile FQHC locations that provide a comprehensive range of primary and preventative care including adult, pediatric, women's health, dental, mental health, substance use disorder services & COVID testing. The target service area ID 031 West Palm Beach includes 46 Palm Beach County ZIP codes, 7 Health Professional Shortage Areas & 8 Medically Underserved Population areas. In 2021, 34,854 unduplicated patients were served over 104,194 clinic visits & 11,341 virtual visits comprising 29,786 medical, 9,033 dental, 3,951 mental health, 1,443 SUD patients. Of these, 5,953 were persons experiencing homelessness, 1,524 farmworkers & 153 veterans. The co-applicants plan to continue to provide vitally needed services targeting underserved individuals & families, and migrant/seasonal farmworkers & persons experiencing homelessness. The program outlined will provide access for those seeking care while targeting the unmet need in the community such as those with economic, cultural, social & linguistic barriers to care. The target population in the service area is 53% uninsured

	<p>with disproportionately high rates of diabetes, obesity, heart disease, asthma, TB, HIV, &amp; STDs. Our current HIV screening rate is 37% as of December 2022 and HIV Linkage to Care rates are at 82%. In 2021, 75% of patients reported incomes below 100% while 12% live between 101% &amp; 200% of the Federal Poverty Level. Approximately 48% of patients required services in a language (Spanish and Creole) other than English. All services are provided on a sliding fee discount basis, regardless of ability to pay, as well as, through various public &amp; private payors. The objective is to meet the needs of the community by providing a seamless integrated continuum of care across an established, trusted network of health centers. Services to be provided through our vast network of collaborative partners including infectious disease &amp; additional enabling/supportive services. We will continue to reduce health disparities while continuing to provide access to affordable, high quality health services, available to all, across Palm Beach County. The proposed \$350,000 per year “Ending HIV Epidemic” PCHP project monies will be used to increase the number of patients counseled and offer free testing for HIV and increase the percentage of patients newly diagnosed with HIV who are linked to care and treatment within 30 days of diagnosis through workforce development including training, testing, and outreach.</p>	
<p><b>8B. EXECUTIVE</b></p>		
<p><b>8B-1. Receive &amp; File:</b> Executive Director Informational Update</p>	<p>The Primary Care Clinics created dashboards to benchmark themselves against the State of Florida and the Nation.</p> <p><u>FY2023 Expanding COVID-19 Vaccination Grant</u></p> <p>On 12/2/2022, the clinics were awarded \$361,336 in funding for allowable vaccine-related activities. EHB application was submitted on 1/8/2023, and the Prior Approval to change the Project Director was submitted on 1/9/2023.</p>	<p><b>Receive &amp; File. No further action is necessary.</b></p>
<p><b>8B-2. Staff Recommends a MOTION TO APPROVE:</b> Health Care District recommendation for replacement of Executive Director</p>	<p>Dr. Belma Andric was appointed by the District Clinic Holdings, Inc., d/b/a C. L. Brumback Primary Clinics (“Clinics”) Board of Directors (“Board”) as the permanent Executive Director in August of 2022. Since that time, she has served the clinics diligently in her role. Alicia Ottmann was hired and began working on 1/17/2023. The clinic staff is recommending Alicia Ottmann be made the Executive Director of the Clinics (HRSA Project Director).</p>	<p><b>VOTE TAKEN: Mr. Mullens motioned to approve the Health Care District recommendation for replacing the Executive Director. Mr. Gibbons duly seconded the motion. A vote was called, and</b></p>

	<p>The Health Care District of Palm Beach County (“HCD”) and the Clinics entered into a co-applicant arrangement in 2012 to transition the responsibility for operating the four existing Federally Qualified Health Centers (“FQHC”) from the State of Florida Department of Health to the HCD. To maintain the FQHC status and to receive grant funding from the Health Resources and Services Administration (“HRSA”), certain authorities were delegated to the Board as requirements of the HRSA rules and regulations. Several of the key components of these responsibilities include:</p> <ul style="list-style-type: none"> <li>• Establishment of general policies for operating the FQHC’s</li> <li>• Approval for the selection and dismissal of the Executive Director</li> <li>• Evaluation of the clinic activities, including productivity, patient satisfaction, achievement of project objectives and services utilization patterns</li> <li>• Assuring that the clinics are operated in compliance with applicable federal, state and local laws and regulations</li> <li>• Maintaining infrastructure agreements and contracts regarding sites, services and outreach</li> <li>• Strive for the top quartile of Uniform Data System quality awards</li> </ul> <p>Also, there is an agreement between the HCD and the Clinics, which further outlines the role of each party in operating the clinics. The HCD has a robust infrastructure that provides necessary operational support and employs the Clinics’ personnel. Additionally, both parties have agreed to jointly review and approve a budget and financial plan each year.</p> <p>To maintain continuity and stability in these unprecedented times, as well as maintain transparency into any proposed changes to the delivery of care at the FQHCs, we believe that it would be in the best interest of the Clinics to allow Alicia Ottmann to step into this role. She can work with existing staff and leadership, as well as the Board and HCD Board, to develop suggestions to optimize care to patients of the FQHC’s in a cost-effective, sustainable manner.</p>	<p><b>the motion passed unanimously.</b></p>
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**8C. CREDENTIALING**

**8C-1. Staff Recommends a MOTION TO APPROVE:**  
 Licensed Independent Practitioner Credentialing and Privileging

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

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

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

Last Name	First Name	Degree	Specialty	Credentialing
Ottmann	Alicia	PA	Physician Assistant	Initial Credentialing
Fidler	Lisa	APRN	Nurse Practitioner	Initial Credentialing
Dessalines	Duclos	MD	Pediatrics	Recredentialing

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

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

**VOTE TAKEN: Ms. Bullard motioned to approve the initial credentialing and privileging of Alicia Ottmann and Lisa Fidler and the re-credentialing and privileging of Dessalines Duclos. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.**

	<p>Alicia Ottmann, PA, joined the West Palm Beach Clinic in 2023 as a Physician Assistant. She attended Midwestern University of Arizona and is certified as a Physician Assistant by the National Commission on Certification of Physician Assistants. She has been in practice for eight years and is fluent in Spanish.</p> <p>Lisa Fidler, APRN, joined the Lantana Clinic in 2023 as a Family Nurse Practitioner. She attended the West Virginia University School of Medicine and is certified as a Family Nurse Practitioner by the American Nurses Credentialing Center.</p> <p>Duclos Dessalines, MD, joined the Lantana Clinic in 2017, specializing in Pediatrics. He attended National Polytechnic University and completed his residency at Mount Sinai Hospital. Dr. Dessalines is certified in General Pediatrics by the American Board of Pediatrics. He has been practicing for twenty-five years and is fluent in Creole, French and Spanish.</p> <p>Mr. Smith asked with will Ms. Ottmann plan to practice in the clinics.</p> <p>Ms. Ottmann stated she would like to go out to the clinics and take some walk-in patients to see how the clinics run.</p>	
<b>8D. QUALITY</b>		
<p><b>8D-1. Staff Recommends a MOTION TO APPROVE:</b> Quality Reports</p>	<p>This agenda item presents the updated Quality Improvement &amp; Quality Updates:</p> <ul style="list-style-type: none"> <li>• Quality Council Meeting Minutes January 2023</li> <li>• UDS Report – YTD</li> <li>• Provider Productivity – December 2022</li> </ul> <p>PATIENT SAFETY &amp; ADVERSE EVENTS Patient safety and risk, including adverse events, peer review and chart review, are brought to the board "under separate cover" on a quarterly basis.</p> <p>PATIENT SATISFACTION AND GRIEVANCES Patient relations are to be presented as a separate agenda item.</p>	<p><b>VOTE TAKEN: Mr. Smith made a motion to approve the Quality Reports as presented. Mr. Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.</b></p>

	<p><b>QUALITY ASSURANCE &amp; IMPROVEMENT</b>  Cervical Cancer Screening: Robust cleanup effort was undertaken to improve our cervical cancer screening metric. Staff reviewed patients' charts, including our old EHRs, to search for pap results in the chart that were not being pulled into our UDS report. Due to this effort, we discovered an additional 544 patients so far who did complete their cervical cancer screening, which contributed to an increase in our cervical cancer screening metric from 53% to 58% completed.</p> <p><b>UTILIZATION OF HEALTH CENTER SERVICES</b>  Individual monthly provider productivity is stratified by the clinic.</p>	
<b>8E. OPERATIONS</b>		
<p><b>8E-1. Staff Recommends a MOTION TO APPROVE:</b>  Operations Reports- December 2022</p>	<p>This agenda item provides the following operations reports for December 2022:</p> <p>Clinic Productivity, Demographics and Payor Mix.</p> <p>In December, the clinics had 11,142 visits which was 7% higher than the month prior and 9% more than in December of 2021. 40% of patients were from adults Primary Care, 23% from Dental and 13% from Pediatrics. The Mangonia Clinic had the highest volume, with 1,755 visits, followed by Lantana, with 1,676 visits.</p> <p>Our payer mix for December was 53% uninsured, which was 1% less than the previous month. 41% of patients were Managed Care and 5% were Medicaid.</p> <p>60% of patients were female. 51% of patients reported as White and 40% as Black or African American. Of those patients, 40% reported as Hispanic. Our largest age group was those between 30-39 and 50-59.</p> <p>In December, the average English speaking was reported at 47%, 32% Spanish and 19% Creole. Patient population languages spoken vary between clinics.</p> <ul style="list-style-type: none"> <li>• In our Lantana Clinic, Spanish was the prominent language at 47%</li> </ul>	<p><b>VOTE TAKEN: Mr. Gibbons made a motion to approve the Operations Reports- December 2022 as presented. Mr. Johnson duly seconded the motion. A vote was called, and the motion passed unanimously.</b></p>



	<ul style="list-style-type: none"> <li>• The highest percentage of Creole-speaking patients were also in the Lantana Clinic at 30%</li> <li>• Jupiter, Boca and Mangonia had the lowest percentages of Creole-speaking</li> <li>• The Boca clinic had the highest percentage of Portuguese-speaking patients at 10%. Delray, Lake Worth and Lantana also have a small percentage of Portuguese-speaking patients at 1%.</li> <li>• 97% of the patients in Mangonia reported as English speaking, followed by Jupiter with 69% English speaking.</li> </ul> <p>Mr. Smith asked how the No-Show rate was doing.</p> <p>Ms. Miranda stated it is consistent and she can bring it back to the Board if needed.</p> <p>Ms. Mastrangelo asked if the clinics are still using the translator machines.</p> <p>Ms. Miranda stated that the translator machines are used on a daily basis at the clinics.</p>	
<b>8F. PATIENT OPERATIONS</b>		
<b>8F-1. Staff Recommends a MOTION TO APPROVE:</b> Patient Relations Dashboard Report - Q4 2022	This agenda item provides the following:  Quarterly Patient Relations Dashboard Q4 - 2022  For Quarter 4 2022, 42 Patient Relations Occurrences occurred between 7 Clinics and Clinic Administration. Of the 42 occurrences, there were 6 Grievances and 36 Complaints. The top 5 categories were Care & Treatment, Referral Related, Communication Related, Respect Related and Finance Related issues. The top subcategory was Poor Communication, with 6 occurrences.  There was also a total of 53 Compliments received across 7 Clinics and Clinic Administration. Of the 53 Compliments, 44 were patient compliments and 9 were employee-to-employee Thumbs-Up compliments.  Mr. Gibbons asked how one measures “lack of compassion?”	<b>VOTE TAKEN: MS. Bullard motioned to approve the Patient Relations Dashboard Report Q4 2022 as presented. Mr. Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.</b>

	<p>Mr. Speciale stated it's about perception.</p> <p>Dr. Andric stated the patient is always right.</p> <p>Ms. Mastrangelo asked for examples of refusal of treatment.</p> <p>In the example Mr. Speciale gave, a patient entered the clinic late in the day wanting a specific provider. The provider requested was not available, and the patient was triaged.</p>	
<b>9. AVP and Executive Director of Clinic Services Comments</b>	Dr. Andric apologized for the late start of the meeting due to the lack of quorum, but Ms. Bullard could come in person so we could have a quorum.	<b>No action necessary.</b>
<b>10. Board Member Comments</b>	<p>Mr. Johnson toured Mangonia Park and West Palm Beach Clinic and was greeted by Ingrid Barlett and Kim Bush. He hopes to tour other locations soon.</p> <p>Mr. Mullen praised Dr. Harberger for being a great provider.</p> <p>Mr. Smith thanked the staff for adding the HRSA Digest to the Consent agenda.</p>	<b>No action necessary.</b>
<b>11. Establishment of Upcoming Meetings</b>	<p><b><u>February 22, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p> <p><b><u>March 29, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p> <p><b><u>April 26, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p> <p><b><u>May 24, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p> <p><b><u>June 28, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p>	<b>No action necessary.</b>

	<p><b><u>July 26, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p> <p><b><u>August 23, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p> <p><b><u>September 27, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p> <p><b><u>October 25, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p> <p><b><u>November 28, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p> <p><b><u>December 13, 2023 (HCD Board Room)</u></b> 12:45 p.m. Board of Directors</p>	
<p><b>12. Motion to Adjourn</b></p>	<p>Ms. Mastrangelo motioned to adjourn the public meeting.</p> <p>There being no further business, the meeting was adjourned at 1:46 p.m.</p>	<p><b>VOTE TAKEN: Mr. Gibbons made a motion to adjourn. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.</b></p>

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

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

**Board of Directors**

**Attendance Tracking**

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

**X= Present**

**C= Cancel**

**E= Excused**

**A= Absent**

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

**1. Description: HRSA Digest**

**2. Summary:**

Per the request of the clinic board, we will include the latest HRSA Digest as available.

**3. Substantive Analysis:**

The January HRSA Digest highlights Health Center Program Updates and Updated Federal Poverty Guidelines.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
Candice Abbott  
VP & Chief Financial Officer

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

N/A

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

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

**6. Recommendation:**

Staff recommends Board receive and file the HRSA Digest.

Approved for Legal sufficiency:

*Bernabe Icaza*

\_\_\_\_\_  
Bernabe Icaza  
VP & General Counsel

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

*Andrea Steele*

---

Andrea Steele  
AVP, Corporate Quality

**From:** [HRSA Primary Health Care Digest](#)  
**To:** [Andrea Steele](#)  
**Subject:** Today with Macrae Today, Updated Federal Poverty Guidelines  
**Date:** Tuesday, January 24, 2023 9:30:12 AM

---

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

A newsletter from the Bureau of Primary Health Care



**January 24, 2023**

**TODAY: Today with Macrae: Health Center Program Updates**

Join Tonya for funding and program updates, plus hear from health center guests about Operational Site Visits.

3:00-4:00 p.m. ET

[Join the session](#)

If you prefer to join by phone: 833-568-8864

Webinar ID: 160 662 4477

Today with Macrae

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### **New HRSA and CDC Status Neutral Approach Framework Program Letter**

HRSA'S HIV/AIDS Bureau (HAB), BPHC, and CDC released a [program letter](#) (PDF) on Tuesday, January 17, to encourage public health partners and grant recipients to implement *status neutral* approaches to HIV care and prevention. Status neutral service provision is an example of a syndemic approach to public health, weaving together resources from across infectious disease areas and incorporating social determinants of health (SDOH) to deliver whole-person care, regardless of a person's HIV status.

White House Mpox Response Coordinator Dr. Demetre Daskalakis discussed the joint letter at the January 19 HAB You Heard webinar. The recording will be posted on HAB's [Technical Assistance \(TA\) Webinars webpage](#).

News



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### **TODAY: Updates to COVID-19 Testing and Treatment for the Current SARS-CoV-2 Variants**

At this CDC Clinician Outreach and Communication Activity (COCA) call, subject matter experts will provide an overview of COVID-19 epidemiology and the current variant landscape, address current CDC testing guidance and NIH and Infectious Disease Society of America COVID-19 treatment guidelines, and discuss risk assessment and considerations for treatment options.

2:00-3:00 p.m. ET  
[Join the session](#)

The [call webpage](#) contains additional resources. CDC typically adds the recording and slides on the page.

Computer



Jump To: [COVID-19](#) | [Workforce](#) | [Additional Resources](#)



## What's New

### Updated Federal Poverty Guidelines

Visit HHS's [Poverty Guidelines webpage](#) for the 2023 guidelines.

Updated



### Fiscal Year 2023 Health Center Controlled Network Non-Competing Continuation Progress Report

We recently released fiscal year (FY) 2023 Health Center Controlled Network (HCCN) non-competing continuation (NCC) progress report instructions. Progress reports are due by 5:00 p.m. ET on Monday, March 6. For resources, visit the [HCCN Cooperative Agreements TA webpage](#).

We have also rescheduled a Q&A for those completing HCCN NCC progress reports:

Thursday, February 2

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

[Join the day of the session](#)

If you prefer to join by phone: 833-568-8864

Webinar ID: 161 012 5001

To send questions in advance, use the [BPHC Contact Form](#).

### Health Center Participants Wanted!

Help us evaluate BPHC's website ([bphc.hrsa.gov](#)) by taking a [web usability survey](#). Staff working at health centers and TA organizations are eligible. The survey takes approximately 20-25 minutes to complete, and responses are confidential. The survey is open until Friday, February 3.

Feedback



### Deadline Extended: Present at Our Patient-Centered

## Training & Technical Assistance



Visit the [training calendar to learn details or register for events](#).

### Through January 31

#### Updates to COVID-19 Testing and Treatment for the Current SARS-CoV-2 Variants

Hosted by CDC

Tuesday, January 24

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

[Join the session](#)

The slides and recording are typically posted on the [call webpage](#)

#### 2023 Billing, Coding, Documentation & Quality Webinar Series

Hosted by NACHC, a HRSA-funded NTTAP

[Registration page](#)

2:00-3:30 p.m. ET on:

"Top 5 Documentation and Revenue Tips in Community Health"

Tuesday, January 24

"Treating Substance/Opioid Use Disorders via Medication-Assisted Treatment (MAT) in Community Health"

Tuesday, January 31

#### Today with Macrae: Health Center Program Updates

Tuesday, January 24

3:00-4:00 p.m. ET

[Join the session](#)

If you prefer to join by phone: 833-568-8864

Webinar ID: 160 662 4477

## Medical Home Health Equity TA Symposium

We're still looking for health centers to present at our second annual Patient-Centered Medical Home Health Equity TA Symposium. Complete the [presenter form](#) to submit your abstract by **Friday, February 10**.

The symposium will take place virtually from 11:00 a.m.-4:30 p.m. ET on Wednesday, March 29, and Thursday, March 30. Participants will hear about and discuss best practices and lessons learned from peers and experts in the fields of health equity, quality improvement, and accreditation/recognition. Get all the details in [our bulletin](#).

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## Health Centers and Value-Based Payment: A Framework for Health Center Payment Reform and Early Experiences in Medicaid Value-Based Payment in Seven States

A [recent HRSA-funded study](#) assessed health center value-based payment (VBP) participation in seven states and found increased participation over time as well as associations with improved health center financial outcomes. VBP participation grew from 35% to 58% between 2013 and 2017. During the same time, health centers increasingly participated in more advanced payment models, which allowed them to improve care coordination and quality and cost outcomes. To increase health center patient participation in VBP, research findings highlight the importance of financial incentives from Medicaid agencies and Medicaid managed plans as well as health center-Medicaid collaboration under strong Primary Care Association (PCA) and health center leadership.

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## National Practitioner Data Bank Administrator Training

Do you manage the National Practitioner Data Bank account for your organization? Join an upcoming webinar to learn how to determine who can serve as a Data Bank administrator and to apply time-saving best practices for common tasks that involve accounts and passwords.

Wednesday, February 22  
2:00-3:00 p.m. ET  
[Registration page](#)

Attend the live webinar and qualify to receive 1.0 NAMSS-approved CE credit. Certificates will be sent out 1-2 weeks after the webinar.

## Women's Preventive Services Initiative Overview

Hosted by HRSA in collaboration with the American College of Obstetricians and Gynecologists  
Tuesday, January 24  
3:00-4:30 p.m. ET  
[Registration page](#)

## Medicaid and CHIP Continuous Enrollment Unwinding: What to Know and How to Prepare, A Partner Education Monthly Series

Hosted by CMS  
Wednesday, January 25  
Noon-1:00 p.m. ET  
[Registration page](#)

## Using the Medical-Legal Partnership Approach to Help Health Center Patients with Long COVID

Hosted by the National Center for Medical-Legal Partnership (NCMLP), a HRSA-funded NTTAP  
Wednesday, January 25  
1:00-2:00 p.m. ET  
[Registration page](#)

## SDOH Screening & Referrals to Support Diabetes Control Webinar Series

Hosted by NNCC, a HRSA-funded NTTAP  
[Registration page](#)  
2:00-3:00 p.m. ET on:

Wednesday, January 25  
Wednesday, February 1

## Expanding Health Center Services to an Aging Population through PACE

Hosted by NCECE, a HRSA-funded NTTAP  
Thursday, January 26  
1:00-2:00 p.m. ET  
[Registration page](#)

## Addressing Diabetes Risk

## CDC Reports Emphasize the Importance of Routine Vaccination for Children, including Flu

- The National Immunization Survey (NIS)-Child identified no decline overall in routine vaccination coverage associated with the COVID-19 pandemic among children born during 2018–2019. They did observe declines among children living below the federal poverty level and in rural areas. See the [report](#).
- A separate [report](#) documents a more severe pediatric flu season than we've experienced in recent years. It underscores that it's not too late for flu vaccine.

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## Medicaid Eligibility Redeterminations May Begin as Early as Wednesday, February 1

The Consolidated Appropriations Act, 2023, delinks the Medicaid continuous coverage requirement from the COVID-19 public health emergency. States may initiate the first Medicaid renewals as early as Wednesday, February 1, and will be able to terminate enrollment for ineligible individuals enrolled in Medicaid, following a redetermination, beginning Saturday, April 1.

CMS is posting policy guidance for states online, for example this [information bulletin](#) (PDF). Find state-specific Medicaid enrollment links and eligibility helplines on the [Renew Your Medicaid or CHIP Coverage webpage](#). PCAs have been encouraged to engage with state Medicaid agencies and are available to support health centers in this effort.

CMS is hosting a partner webinar for any organization that serves or interfaces with people that have health insurance through Medicaid or the Children's Health Insurance Program (CHIP):

Wednesday, January 25  
Noon-1:00 p.m. ET  
[Registration page](#)

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## COVID-19

### Updates on COVID-19 Vaccine Availability

CDC advises health centers of the following changes to COVID-19 vaccine availability. These changes will take effect on Tuesday, January 31, for health centers ordering through states/jurisdiction, and on Wednesday, January 25, for those

### Factors in School-Aged Children: MEND+ at Denver Health

Hosted by School-Based Health Alliance, a HRSA-funded NTTAP  
Thursday, January 26  
1:00-2:00 p.m. ET  
[Registration page](#)

### Compassion Fatigue: Navigating the Unknown, Taking Time for Self-Compassion and Resilience

Hosted by NCHPH, a HRSA-funded NTTAP  
Thursday, January 26  
1:00-2:00 p.m. ET  
[Registration page](#)

### Special and Vulnerable Populations COVID-19 Forum

Hosted by several HRSA-funded NTTAPs  
Friday, January 27  
2:00-3:00 p.m. ET  
[Registration page](#)

### COVID-19 Response Program Office Hours

Tuesday, January 31  
1:00-2:00 p.m. ET  
[Registration page](#)

### Addressing Partner-Inflicted Brain Injuries with a Health Equity Lens

*(in English with live interpretation in Spanish)*  
Hosted by Health Partners on IPV+ Exploitation, a HRSA-funded NTTAP  
Tuesday, January 31  
1:00-2:30 p.m. ET  
[Registration page](#)

### Medical-Legal Partnerships in Health Centers Webinar Series: Developing a Framework to Sustain Your MLP

Hosted by NCMLP, a HRSA-funded NTTAP  
Tuesday, January 31  
1:00-2:30 p.m. ET

ordering through the Health Center COVID-19 Vaccine Program.

- The Emergency Use Authorization (EUA)-labeled Pfizer BioNTech adult (12+) monovalent vaccine (NDC 59267-1025-04) will no longer be available to order. The Biologics License Application (BLA)-labeled (COMIRNATY) product (NDC 00069-2025-10) will replace it. These are identical products, except for the labeling and the process they went through to be approved by FDA.
- Novavax will no longer be available. This product is set to expire on Tuesday, February 28, and will not receive a shelf-life extension.

Health Center COVID-19 Vaccine Program Participants:  
If you need more Novavax, include it in your order today or tomorrow.

---

### Expanding COVID-19 Vaccination Funding: Resources to Inform Your Work

These resources may be useful in informing your work, especially for health centers considering how best to use Expanding COVID-19 Vaccination (ECV) funding.

- [White House and HRSA Webinar: Building Partnerships to Promote COVID-19 Vaccination](#): If you missed last Tuesday's webinar, watch the recording to hear how experts foster key partnerships, including with community-based outreach providers and faith-based organizations.
- [Community Health Center ECV Funding Collaboration](#): If you missed last Friday's webinar, hosted by HRSA's Health Systems Bureau, watch the recording to learn about partnering with community-based outreach providers and faith-based organizations.
- [Reasons for Receiving or Not Receiving Bivalent COVID-19 Booster Vaccinations Among Adults](#): CDC's recent report includes this summary: *An online opt-in survey of 1,200 previously vaccinated U.S. residents found that the most common reasons for not getting a bivalent booster dose were lack of awareness about eligibility or availability and overconfidence in immunity; reasons varied by age group.*
- [COVID-19 Vaccine Community Features](#): CDC's website offers examples of how health departments partner to get people vaccinated.

[Registration page](#)

### Strike Out Cervical Cancer

Tuesday, January 31  
3:00-4:00 p.m. ET

[Join the day of the session](#)

If you prefer to join by phone: 833-568-8864  
Webinar ID: 161 389 1307

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### Upcoming

#### Reentry Recovery Services to Improve Health and Reduce Recidivism and Overdoses Among Formerly Incarcerated Individuals

Wednesday, February 1  
1:00-2:00 p.m. ET

[Registration page](#)

#### FY 2023 HCCN NCC Progress Report Q&A

Thursday, February 2  
1:00-2:30 p.m. ET

[Join the day of the session](#)

If you prefer to join by phone: 833-568-8864  
Webinar ID: 161 012 5001

#### Advancing Health Equity among Hispanic/Latino Populations Web Series | Getting to Know HRSA (in Spanish with live interpretation in English)

Tuesday, February 7  
1:00-2:15 p.m. ET

[Registration page](#)

[Registration page](#)

#### The Role of CHWs in Breast Cancer Screening Equity

Hosted by NNCC and NCHPH, both HRSA-funded NTTAPs  
Wednesday, February 8  
2:00-3:00 p.m. ET

[Registration page](#)

#### Building Trust to Achieve Better Outcomes in Diabetes Self-

Has your health center increased access to, confidence in, and demand for updated COVID-19 vaccines using ECV funding? Send your success stories to [HRSA Health Center Stories](#) for possible promotion in HRSA communications.



### Contact Pharmacies for N95 Masks for Your Community

If you missed it, see [our bulletin](#) from last week about how health centers can get N95 masks for distribution to their communities.

### Happy Anniversary to the Testing Supply and Therapeutics Programs!

Happy one-year anniversary to two COVID-19 Response Programs that launched in December 2021.



- The [HRSA COVID-19 Testing Supply Program](#) initially provided health centers with a direct supply of at-home testing supplies. In February 2022, it expanded to offer point-of-care testing supplies.
- The [HRSA Health Center COVID-19 Therapeutics Program](#) began incrementally to directly allocate a limited supply of oral antiviral treatments for the outpatient treatment of mild to moderate COVID-19 to select HRSA-supported health centers. It opened to all HRSA-supported health centers in March 2022.

Through these programs, health centers made significant and impressive strides in 2022:

- 1,126 health centers ordered more than 20 million testing supplies, including point-of-care testing supplies. 956 health centers distributed over 12 million test kits in their communities.
- 365 health centers ordered over 125,000 courses of therapeutics – 59% were administered to racial and ethnic minorities.

Health centers continue to play a critical role to keep communities healthy throughout the pandemic. As a reminder, any HRSA-supported health center is welcome to

### Management, Education, and Care

Hosted by the National Center for Farmworker Health, a HRSA-funded NTTAP

Wednesday, February 8  
2:00-3:00 p.m. ET

[Registration page](#)

### Introduction to NIDAMED and Words Matter

Thursday, February 9  
2:00-3:00 p.m. ET

[Join the day of the session](#)

If you prefer to join by phone: 833-568-8864  
Webinar ID: 160 502 7623

### UDS Mapper: Office Hours

Wednesday, February 15  
2:00-3:00 p.m. ET

[Registration page](#)

### National Practitioner Data Bank Administrator Training

Wednesday, February 22  
2:00-3:00 p.m. ET

[Registration page](#)

**\*\*1.0 CE available\*\***

### 2023 HRSA Patient Safety Awareness Week: The Role of Technology in Patient Safety and Patient Engagement

Co-hosted with other HHS agencies

Wednesday, March 15  
2:00-4:00 p.m. ET

[Registration page](#)

### Health Centers Serving Veterans - Learn about the New PACT Health Benefits

Hosted by NACHC, a HRSA-funded NTTAP

Wednesday, March 22  
2:00-3:00 p.m. ET

[Registration page](#)

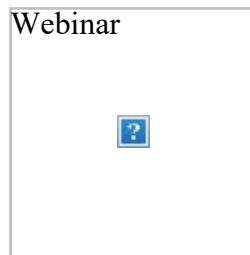
*Webinars are hosted by HRSA unless otherwise noted.*

join these programs. Submit a ticket via the [BPHC Contact Form](#) if you're interested.

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### **Special and Vulnerable Populations COVID-19 Forum**

Join HRSA-funded National Training and Technical Assistance Partners (NTTAPs) and their featured speaker from CDC's Post-COVID Conditions Team – Dr. Jennifer Cope – for a session focusing on long COVID and its status, challenges, and promising practices. You'll have the chance to provide feedback and identify health center needs relative to COVID-19 and preparedness for future outbreaks and other emergencies.



Friday, January 27  
2:00-3:00 p.m. ET  
[Registration page](#)

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## **Workforce**

### **BHW Footprint Map**

This [new tool](#) allows you to instantly visualize program, site, and participant data for all of the Bureau of Health Workforce's programs – all in one place. We update key data sets on participants, sites, and applications daily, so you get the most recent data available.

---

### **Financial Assessment for Provider Turnover Tool**

The Association of Clinicians for the Underserved's (ACU) STAR<sup>2</sup> Center has updated one of its bedrock resources, the [Financial Assessment for Provider Turnover Tool](#). Updates reflect current financial data to assist health center teams in calculating the tangible costs of provider turnover at their organizations. The tool is a customizable Excel document that allows users to work with their own data or select national estimates for the direct and indirect costs involved with turnover. ACU is a HRSA-funded NTTAP.

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## Participate on Health Center Workforce Summit National Advisory Group

The ACU's STAR<sup>2</sup> Center; Community Health Center, Inc.; and the National Association of Community Health Centers (NACHC) are excited to host the virtual 2023 Health Center Workforce Summit in May.

They seek 8-10 individuals with workforce expertise and experience from HRSA-supported health centers, HCCNs, PCAs, or external partners to serve on the Health Center Workforce Summit Advisory Group. Visit the [registration page](#) to apply by Wednesday, February 1.

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## NTTAP Opportunities

HRSA-funded NTTAPs invite health center staff to join these opportunities:

- **Intimate Partner Violence (IPV) and Maternal Health: Evidence-Based and Promising Interventions**

Learning collaborative participants will learn how to apply the evidence-based CUES (Confidentiality, Universal Education, Empowerment, and Support) intervention to prevent and respond to IPV and trauma within settings that serve pregnant and birthing people. Content will include frameworks and tools to better promote health equity, as well as strategies to help health center staff feel more present during patient encounters. Speakers will share adaptable protocols and resources to strengthen connections with domestic violence programs. Visit Health Partners on IPV + Exploitation's [registration page](#) by Wednesday, February 8.

- **2023 Diabetes ECHO** (*in Spanish exclusively*)

The Migrant Clinicians Network's annual series begins in March. The six-part series will address diverse topics within diabetes treatment and self-management, including social barriers, in-depth clinical education related to development of diabetes and complications associated with a diagnosis, accessibility to various treatments, and use of community resources. Space is limited to 35 participants. Visit the [registration page](#).

- **Promoting Age-friendly Environments: Critical Determinants of Health**

This National Center for Equitable Care for Elders (NCECE) opportunity will highlight the importance of accessibility and inclusion in supporting older adults to safely age in place. Participants will learn to identify and, if possible, address some of the physical and social barriers to healthy aging. Visit the [registration page](#) for

more information and to apply.

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## **Additional Resources**

### **Strike Out Cervical Cancer**

In recognition of Cervical Cancer Awareness Month, we're hosting a discussion of the pandemic's impact on screenings, and how health centers can recover and sustain screening rates moving forward. Experts in the field will discuss the benefits and limitations of screening modalities, HPV vaccine protection and safety, and best practice guidelines.

Tuesday, January 31

3:00-4:00 p.m. ET

[Join the day of the session](#)

If you prefer to join by phone: 833-568-8864

Webinar ID: 161 389 1307

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### **The Role of Community Health Workers in Breast Cancer Screening Equity**

Join the National Nurse-Led Care Consortium (NNCC) and the National Center for Health in Public Housing (NCHPH) to explore the intersections of SDOH, breast cancer screening interventions, and the use of Community Health Workers (CHWs) in public housing care settings. They will share best practices for increased patient and care team engagement to address SDOH affecting the reach and frequency of breast cancer screening for low-income women who are residents of public housing.

Wednesday, February 8

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

[Registration page](#)

NNCC and NCHPH are both HRSA-funded NTTAPs.

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### **No Cost CME on Lifestyle Medicine and Food Essentials**

Last fall, the White House held a [conference on Hunger, Nutrition and Health](#). Health centers may benefit from this FREE CME opportunity, highlighted at the conference.

The American College of Lifestyle Medicine's [Lifestyle Medicine & Food as Medicine Essentials course](#) educates health care providers to prescribe nutrition – using food as medicine –



and other lifestyle modalities, to address the unhealthy lifestyle behaviors causing many chronic diseases. The self-paced course has three parts:

- Introduction to Lifestyle Medicine (1 hour)
- Food as Medicine: Nutrition for Prevention and Longevity (3 hours)
- Food as Medicine: Nutrition for Treatment and Risk Reduction (1.5 hours)

---

### **Help Uninsured Children and Provide Bilingual Outreach**

Health center staff who want to help children and teenagers get insurance coverage can check CMS' [Insure Kids Now website](#) for information.

Millions of children and teens qualify for free or low-cost health and dental coverage through Medicaid and CHIP. The website includes a locator to help find local dentists who accept Medicaid and CHIP. It also features an [Outreach Tool Library](#) with materials in English and Spanish on public issues ranging from vaccinations to mental health.

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#### ***In case you missed it:***

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

#### ***Do you forward the Digest to others?***

Encourage them to [subscribe](#).



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5600 Fishers Lane | Rockville, MD 20857

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This email was sent to [asteele@hcdpbc.org](mailto:asteele@hcdpbc.org) using GovDelivery Communications Cloud on behalf of: HRSA · 5600 Fishers Lane · Rockville, MD 20857



**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

**1. Description: Revised After Hours Policy**

**2. Summary:**

This agenda item presents updates to the After Hours Policy.

**3. Substantive Analysis:**

HRSA requires an After Hours Policy be in place for continuity of care of patients who need assistance after normal working hours. This updated policy reflects current PCMH and HRSA requirements.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A  
 \_\_\_\_\_  
 Candice Abbott  
 VP & Chief Financial Officer

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

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

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

**6. Recommendation:**

Staff recommends the Board approve the revised After Hours Policy.

Approved for Legal sufficiency:

*Bernabe Icaza*  
 \_\_\_\_\_  
 Bernabe Icaza  
 VP & General Counsel

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

*Alicia Ottmann*

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Alicia Ottmann, PA-C  
AVP, Executive Director FQHC &  
Pharmacy Services

## After Hours On Call Policy

Policy #:	106-13.1	Effective Date:	3/18/2022
Business Unit:	Primary Care Clinics	Last Review Date:	7/28/2020
Approval Group:	PCC Administrative Policy	Document Owner(s):	Primary Care Clinics
Board Approval Date:			

### PURPOSE

To provide guidelines for after hours and emergency care.

### SCOPE

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

### POLICY

C.L. Brumback Primary Care Clinics will ensure that a client will have access to the clinic after-hours and in an emergency.

### EXCEPTIONS

N/A

### RELATED DOCUMENTS

Related Policy Document(s)	106-13-A.1
Related Forms	
Reference(s)	
Last Revision	
Revision Information/Changes	
Next Review Date	7/28/2023

### APPROVALS

Reviewer approval	Marisol Miranda;
Reviewer approval date	3/23/2022

Final approver	Darcy Davis; Hyla Fritsch;
Final approval date	3/29/2022

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

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**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

**1. Description:** District Clinic Holdings, Inc. Financial Report December 2022

**2. Summary:**

The December 2022 financial statements for the District Clinic Holdings, Inc. are presented for Board review.

**3. Substantive Analysis:**

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

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

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
 Candice Abbott  
 VP & Chief Financial Officer

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

N/A

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

\_\_\_\_\_  
 Date

**6. Recommendation:**

Staff recommends the Board approve the December 2022 District Clinic Holdings, Inc. financial statements.

Approved for Legal sufficiency:

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

*Bernabe Icaza*

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Bernabe Icaza  
VP & General Counsel

*Candice Abbott*

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Candice Abbott  
VP & Chief Financial Officer

*Alicia Ottmann*

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Alicia Ottmann, PA-C  
AVP, Executive Director FQHC  
& Pharmacy Services

## MEMO

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To: Finance Committee  
From: Candice Abbott  
Chief Financial Officer  
Date: February 22, 2023

Subject: Management Discussion and Analysis as of December 2022 C.L. Brumback Primary Care Clinic Financial Statements.

The December financial statements represent the financial performance through the third month of the 2023 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, cash increased \$1.7M as a result of the year to date subsidy. Due from Other Governments increased \$1.4M as a result of grant and LIP revenue recognition. New financial line items are reflected for “Right of Use Assets” and “Lease Liability” following the fiscal year 2022 implementation of Governmental Accounting Standards Board (GASB) Statement No. 87, Leases (GASB 87) and GASB Statement No. 96, Subscription-Based Information Technology Arrangements (GASB 96).

On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$525k) or (19.1%). Gross patient revenue YTD was unfavorable to budget by \$789k. Total YTD revenue was unfavorable to budget by (\$233k), this was partially due to a favorable timing difference in PRF and grant funds recognized offsetting net patient revenue. Operational expenses before depreciation were favorable to budget by \$1.9M due mostly to positive variances in salaries, wages, and benefits of \$1.6M, purchased services of \$107k, other supplies of \$151k, repairs and maintenance \$91k, and lease and rental of \$187k and an unfavorable variance in other expense (\$225k) related to employee incentives allocation. Total YTD net margin was (\$4.0M) compared to the budgeted loss of (\$6.2M) resulting in a favorable variance of \$2.2M or (35.2%).

Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$377k). The Medical clinics YTD gross patient revenue was unfavorable to budget by (\$807k). The Medical clinics total YTD revenue was unfavorable to budget by (\$198k). Total operating expenses of \$6.6M were favorable to budget of \$8.3M by \$1.6M or 19.9%. The positive variance is mostly due to salaries, wages, and benefits of \$1.4M, other supplies of \$128k, repairs and maintenance \$115k, and lease and rental of \$171k. Staffing shortages as well as expense timing are driving these favorable variances. Total YTD net margin was favorable to budget by \$1.9M or (34.7%).

Net patient revenue YTD for the Dental clinics was unfavorable to budget by (\$202k) or (30.3%). The Dental clinics total YTD gross patient revenue was unfavorable to budget by (\$145k). Increased charity care and contractual allowances negatively impacted net patient revenue results. Total YTD operating expenses of \$1.2M were favorable to budget by \$252k. Total YTD net margin was (\$534k) compared to a budgeted loss of (\$778k) for a favorable variance of \$244k or (31.3%).



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

	<u>Dec 31, 2022</u>	<u>Nov 30, 2022</u>	<u>Increase (Decrease)</u>
<b>Assets</b>			
Cash and Cash Equivalents	(1,980,785)	(3,697,448)	\$ 1,716,663
Accounts Receivable, net	1,191,980	2,271,314	(1,079,334)
Due from Other Governments	5,317,981	3,961,416	1,356,565
Other Current Assets	141,923	152,961	(11,038)
Right of Use Assets	3,239,214	3,239,214	-
Net Investment in Capital Assets	2,621,993	2,648,038	(26,045)
<b>Total Assets</b>	<u>\$ 10,532,306</u>	<u>\$ 8,575,494</u>	<u>\$ 1,956,812</u>
<b>Liabilities</b>			
Accounts Payable	323,303	435,026	(111,724)
Deferred Revenue	55,720	722,805	(667,085)
Other Current Liabilities	1,792,038	1,400,746	391,292
Lease Liability	3,475,476	3,475,476	-
Non-Current Liabilities	1,098,595	1,092,376	6,219
<b>Total Liabilities</b>	<u>6,745,131</u>	<u>7,126,428</u>	<u>(381,297)</u>
<b>Deferred Inflows of Resources</b>			
Deferred Inflows- Other Post Employment Benefits	<u>\$ 33,656</u>	<u>\$ 33,656</u>	<u>\$ -</u>
<b>Net Position</b>			
Net Investment in Capital Assets	2,621,993	2,648,038	(26,045)
Unrestricted	1,131,525	(1,232,628)	2,364,154
<b>Total Net Position</b>	<u>3,753,518</u>	<u>1,415,409</u>	<u>2,338,109</u>
<b>Total Liabilities, Deferred Inflows of Resources and Net Position</b>	<u>\$ 10,532,306</u>	<u>\$ 8,575,494</u>	<u>\$ 1,956,812</u>

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



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

FOR THE THIRD MONTH ENDED DECEMBER 31, 2022

Current Month								Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
26,045	33,250	7,205	21.7%	31,642	5,597	17.7%	Depreciation	76,968	99,750	22,782	22.8%	94,927	17,959	18.9%
<i>Overhead Allocations:</i>														
9,397	10,722	1,325	12.4%	9,610	213	2.2%	Risk Mgt	28,371	32,167	3,796	11.8%	25,266	(3,105)	(12.3%)
86,659	109,939	23,280	21.2%	198,563	111,904	56.4%	Rev Cycle	253,846	329,816	75,970	23.0%	469,569	215,723	45.9%
1,779	6,555	4,776	72.9%	1,525	(254)	(16.7%)	Internal Audit	6,202	19,666	13,464	68.5%	3,108	(3,094)	(99.5%)
32,824	32,746	(78)	(0.2%)	28,452	(4,372)	(15.4%)	Home Office Facilities	95,137	98,239	3,102	3.2%	85,491	(9,646)	(11.3%)
49,005	41,476	(7,529)	(18.2%)	45,770	(3,235)	(7.1%)	Administration	144,053	124,429	(19,624)	(15.8%)	123,388	(20,665)	(16.7%)
80,652	99,947	19,295	19.3%	21,174	(59,478)	(280.9%)	Human Resources	252,922	299,842	46,920	15.6%	138,127	(114,795)	(83.1%)
12,360	27,766	15,406	55.5%	13,852	1,492	10.8%	Legal	28,571	83,297	54,726	65.7%	31,148	2,577	8.3%
3,073	4,171	1,098	26.3%	2,777	(296)	(10.7%)	Records	10,205	12,513	2,308	18.4%	9,431	(774)	(8.2%)
6,675	11,059	4,384	39.6%	6,338	(337)	(5.3%)	Compliance	19,670	33,177	13,507	40.7%	18,059	(1,611)	(8.9%)
4,032	4,143	111	2.7%	-	(4,032)	0.0%	Reimburse	8,185	12,428	4,243	34.1%	-	(8,185)	0.0%
42,594	46,251	3,657	7.9%	102,533	59,939	58.5%	IT Operations	122,394	138,754	16,360	11.8%	256,072	133,678	52.2%
16,176	16,858	682	4.0%	17,327	1,151	6.6%	IT Security	47,849	50,574	2,725	5.4%	38,962	(8,887)	(22.8%)
162,379	237,695	75,316	31.7%	55,800	(106,579)	(191.0%)	IT Applications	522,954	713,084	190,130	26.7%	145,745	(377,209)	(258.8%)
42,649	57,288	14,639	25.6%	59,855	17,206	28.7%	Security Services	120,919	171,863	50,944	29.6%	161,657	40,738	25.2%
6,385	5,383	(1,002)	(18.6%)	-	(6,385)	0.0%	Supply Chain	17,992	16,150	(1,842)	(11.4%)	-	(17,992)	0.0%
27,494	33,245	5,751	17.3%	34,870	7,376	21.2%	Finance	71,317	99,736	28,419	28.5%	98,233	26,916	27.4%
10,833	16,960	6,127	36.1%	5,041	(5,792)	(114.9%)	Public Relations	30,667	50,880	20,213	39.7%	17,731	(12,936)	(73.0%)
13,078	4,750	(8,328)	(175.3%)	8,455	(4,623)	(54.7%)	Information Technology	34,888	14,250	(20,638)	(144.8%)	25,297	(9,591)	(37.9%)
7,766	8,052	286	3.5%	7,104	(662)	(9.3%)	Corporate Quality	23,468	24,155	687	2.8%	22,877	(591)	(2.6%)
12,071	6,503	(5,568)	(85.6%)	11,412	(659)	(5.8%)	Project MGMT Office	30,856	19,510	(11,346)	(58.2%)	35,565	4,709	13.2%
19,536	10,156	(9,380)	(92.4%)	-	(19,536)	0.0%	HIM	47,713	30,469	(17,244)	(56.6%)	-	(47,713)	0.0%
24,947	21,541	(3,406)	(15.8%)	-	(24,947)	0.0%	Coding	59,368	64,622	5,254	8.1%	-	(59,368)	0.0%
25,841	41,476	15,635	37.7%	-	(25,841)	0.0%	IT Service Center	79,862	124,428	44,566	35.8%	-	(79,862)	0.0%
698,205	854,683	156,478	18.3%	630,458	(67,747)	(10.7%)	Total Overhead Allocations	2,057,409	2,564,050	506,641	19.8%	1,705,727	(351,682)	(20.6%)
<b>3,624,929</b>	<b>3,889,944</b>	<b>265,016</b>	<b>6.8%</b>	<b>3,144,446</b>	<b>(480,483)</b>	<b>(15.3%)</b>	<b>Total Expenses</b>	<b>9,981,787</b>	<b>12,406,931</b>	<b>2,425,144</b>	<b>19.5%</b>	<b>8,703,126</b>	<b>(1,278,661)</b>	<b>(14.7%)</b>
<b>\$ (1,242,972)</b>	<b>\$ (1,699,045)</b>	<b>\$ 456,074</b>	<b>(26.8%)</b>	<b>\$ (1,465,528)</b>	<b>\$ 222,557</b>	<b>(15.2%)</b>	<b>Net Margin</b>	<b>\$ (4,038,817)</b>	<b>\$ (6,231,178)</b>	<b>\$ 2,192,361</b>	<b>(35.2%)</b>	<b>\$ (3,123,867)</b>	<b>\$ (914,950)</b>	<b>29.3%</b>
53,251	153,690	100,438	65.4%	-	(53,251)	0.0%	Capital	90,033	461,069	371,036	80.5%	100,000	9,967	10.0%
<b>\$ 4,128,850</b>	<b>\$ 6,625,000</b>	<b>\$ 2,496,150</b>	<b>37.7%</b>	<b>\$ -</b>	<b>\$ (4,128,850)</b>	<b>0.0%</b>	<b>General Fund Support/ Transfer In</b>	<b>\$ 4,128,850</b>	<b>\$ 6,625,000</b>	<b>\$ 2,496,150</b>	<b>37.7%</b>	<b>\$ -</b>	<b>\$ (4,128,850)</b>	<b>0.0%</b>

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

	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Year to Date
<b>Gross Patient Revenue</b>	<b>1,895,746</b>	<b>1,938,643</b>	<b>2,261,816</b>	-	-	-	-	-	-	-	-	-	<b>6,096,204</b>
Contractual Allowances	416,333	381,427	524,355	-	-	-	-	-	-	-	-	-	1,322,116
Charity Care	1,080,772	818,987	996,143	-	-	-	-	-	-	-	-	-	2,895,902
Bad Debt	49,730	353,288	285,914	-	-	-	-	-	-	-	-	-	688,931
Other Patient Revenue	474,943	474,943	87,703	-	-	-	-	-	-	-	-	-	1,037,588
<b>Net Patient Revenue</b>	<b>823,853</b>	<b>859,885</b>	<b>543,106</b>	-	-	-	-	-	-	-	-	-	<b>2,226,843</b>
Collections %	43.46%	44.35%	24.01%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	36.53%
Grant Funds	831,658	951,673	1,163,225	-	-	-	-	-	-	-	-	-	2,946,556
Other Financial Assistance	12,477	51,355	674,585	-	-	-	-	-	-	-	-	-	738,416
Other Revenue	624	29,490	1,042	-	-	-	-	-	-	-	-	-	31,155
<b>Total Other Revenues</b>	<b>844,758</b>	<b>1,032,517</b>	<b>1,838,851</b>	-	-	-	-	-	-	-	-	-	<b>3,716,127</b>
<b>Total Revenues</b>	<b>1,668,611</b>	<b>1,892,402</b>	<b>2,381,957</b>	-	-	-	-	-	-	-	-	-	<b>5,942,971</b>
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,713,850	1,402,443	1,788,664	-	-	-	-	-	-	-	-	-	4,904,958
Benefits	427,827	405,732	406,022	-	-	-	-	-	-	-	-	-	1,239,580
Purchased Services	13,764	60,480	10,119	-	-	-	-	-	-	-	-	-	84,363
Medical Supplies	35,872	230,443	141,439	-	-	-	-	-	-	-	-	-	407,755
Other Supplies	12,383	6,147	10,233	-	-	-	-	-	-	-	-	-	28,763
Medical Services	55,581	60,482	61,270	-	-	-	-	-	-	-	-	-	177,333
Drugs	37,475	49,341	45,922	-	-	-	-	-	-	-	-	-	132,738
Repairs & Maintenance	10,726	11,441	47,732	-	-	-	-	-	-	-	-	-	69,899
Lease & Rental	107,496	87,434	114,395	-	-	-	-	-	-	-	-	-	309,324
Utilities	8,438	8,881	8,149	-	-	-	-	-	-	-	-	-	25,469
Other Expense	115,489	74,228	262,113	-	-	-	-	-	-	-	-	-	451,830
Insurance	6,154	4,622	4,622	-	-	-	-	-	-	-	-	-	15,398
<b>Total Operational Expenses</b>	<b>2,545,056</b>	<b>2,401,675</b>	<b>2,900,679</b>	-	-	-	-	-	-	-	-	-	<b>7,847,410</b>
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(876,445)</b>	<b>(509,273)</b>	<b>(518,722)</b>	-	-	-	-	-	-	-	-	-	<b>(1,904,440)</b>
Depreciation	25,462	25,462	26,045	-	-	-	-	-	-	-	-	-	76,968
<i>Overhead Allocations:</i>													
Risk Mgt	11,692	7,282	9,397	-	-	-	-	-	-	-	-	-	28,371
Rev Cycle	63,371	103,816	86,659	-	-	-	-	-	-	-	-	-	253,846
Internal Audit	2,627	1,796	1,779	-	-	-	-	-	-	-	-	-	6,202
Home Office Facilities	30,821	31,492	32,824	-	-	-	-	-	-	-	-	-	95,137
Administration	46,107	48,941	49,005	-	-	-	-	-	-	-	-	-	144,053
Human Resources	76,105	96,165	80,652	-	-	-	-	-	-	-	-	-	252,922
Legal	3,344	12,867	12,360	-	-	-	-	-	-	-	-	-	28,571
Records	4,206	2,926	3,073	-	-	-	-	-	-	-	-	-	10,205
Compliance	6,347	6,648	6,675	-	-	-	-	-	-	-	-	-	19,670
Reimburse	2,482	1,671	4,032	-	-	-	-	-	-	-	-	-	8,185
IT Operations	35,658	44,142	42,594	-	-	-	-	-	-	-	-	-	122,394
IT Security	9,905	21,768	16,176	-	-	-	-	-	-	-	-	-	47,849
IT Applications	81,636	278,939	162,379	-	-	-	-	-	-	-	-	-	522,954
Security Services	39,124	39,146	42,649	-	-	-	-	-	-	-	-	-	120,919
Supply Chain	6,253	5,354	6,385	-	-	-	-	-	-	-	-	-	17,992
Finance	24,232	19,591	27,494	-	-	-	-	-	-	-	-	-	71,317
Public Relations	10,421	9,413	10,833	-	-	-	-	-	-	-	-	-	30,667
Information Technology	10,834	10,976	13,078	-	-	-	-	-	-	-	-	-	34,888
Corporate Quality	8,434	7,268	7,766	-	-	-	-	-	-	-	-	-	23,468
Project MGMT Office	6,591	12,194	12,071	-	-	-	-	-	-	-	-	-	30,856
HIM	8,351	19,826	19,536	-	-	-	-	-	-	-	-	-	47,713
Coding	21,345	13,076	24,947	-	-	-	-	-	-	-	-	-	59,368
IT Service Center	25,999	28,022	25,841	-	-	-	-	-	-	-	-	-	79,862
<b>Total Overhead Allocations</b>	<b>535,885</b>	<b>823,319</b>	<b>698,205</b>	-	-	-	-	-	-	-	-	-	<b>2,057,409</b>
<b>Total Expenses</b>	<b>3,106,403</b>	<b>3,250,455</b>	<b>3,624,929</b>	-	-	-	-	-	-	-	-	-	<b>9,981,787</b>
<b>Net Margin</b>	<b>\$ (1,437,791)</b>	<b>\$ (1,358,053)</b>	<b>\$ (1,242,972)</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ (4,038,817)</b>
<b>Capital</b>	<b>36,782</b>	<b>-</b>	<b>53,251</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>90,033</b>
<b>General Fund Support/ Transfer In</b>	<b>-</b>	<b>-</b>	<b>4,128,850</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>\$ 4,128,850</b>



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

FOR THE THIRD MONTH ENDED DECEMBER 31, 2022

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
<b>1,403,211</b>	<b>1,739,455</b>	<b>(336,244)</b>	<b>(19.3%)</b>	<b>1,228,914</b>	<b>174,297</b>	<b>14.2%</b>	<b>Gross Patient Revenue</b>	<b>3,664,780</b>	<b>4,472,151</b>	<b>(807,371)</b>	<b>(18.1%)</b>	<b>3,724,485</b>	<b>(59,705)</b>	<b>(1.6%)</b>	
243,677	448,466	204,789	45.7%	(750,522)	(994,199)	132.5%	Contractual Allowances	528,762	1,153,017	624,255	54.1%	831,814	303,052	36.4%	
577,425	686,749	109,324	15.9%	1,413,921	836,496	59.2%	Charity Care	1,622,204	1,765,643	143,439	8.1%	1,416,058	(206,146)	(14.6%)	
189,530	277,407	87,877	31.7%	464,102	274,572	59.2%	Bad Debt	543,588	713,217	169,629	23.8%	754,484	210,897	28.0%	
1,010,633	1,412,622	401,989	28.5%	1,127,501	116,869	10.4%	Total Contractuals and Bad Debts	2,694,553	3,631,877	937,324	25.8%	3,002,356	307,803	10.3%	
67,714	483,945	(416,231)	(86.0%)	301,506	(233,791)	(77.5%)	Other Patient Revenue	736,989	1,244,235	(507,246)	(40.8%)	904,517	(167,528)	(18.5%)	
<b>460,293</b>	<b>810,778</b>	<b>(350,485)</b>	<b>(43.2%)</b>	<b>402,918</b>	<b>57,374</b>	<b>14.2%</b>	<b>Net Patient Revenue</b>	<b>1,707,216</b>	<b>2,084,509</b>	<b>(377,293)</b>	<b>(18.1%)</b>	<b>1,626,646</b>	<b>80,570</b>	<b>5.0%</b>	
32.80%	46.61%			32.79%			Collection %	46.58%	46.61%			43.67%			
984,475	864,001	120,474	13.9%	882,761	101,714	11.5%	Grant Funds	2,479,692	2,592,003	(112,311)	(4.3%)	2,746,653	(266,962)	(9.7%)	
586,039	127,047	458,992	361.3%	-	586,039	0.0%	Other Financial Assistance	649,065	381,143	267,922	70.3%	-	649,065	0.0%	
782	2,460	(1,678)	(68.2%)	12,516	(11,734)	(93.8%)	Other Revenue	30,905	7,380	23,525	318.8%	15,543	15,362	98.8%	
1,571,296	993,508	577,788	58.2%	895,277	676,019	75.5%	Total Other Revenues	3,159,661	2,980,526	179,135	6.0%	2,762,196	397,465	14.4%	
<b>2,031,588</b>	<b>1,804,286</b>	<b>227,302</b>	<b>12.6%</b>	<b>1,298,195</b>	<b>733,393</b>	<b>56.5%</b>	<b>Total Revenues</b>	<b>4,866,877</b>	<b>5,065,035</b>	<b>(198,158)</b>	<b>(3.9%)</b>	<b>4,388,843</b>	<b>478,035</b>	<b>10.9%</b>	
<i>Direct Operational Expenses:</i>															
1,472,805	1,570,136	97,331	6.2%	1,369,274	(103,532)	(7.6%)	Salaries and Wages	4,074,311	5,321,509	1,247,198	23.4%	3,779,290	(295,021)	(7.8%)	
340,238	411,085	70,847	17.2%	346,666	6,428	1.9%	Benefits	1,037,107	1,233,254	196,147	15.9%	1,004,266	(32,841)	(3.3%)	
3,850	57,496	53,646	93.3%	69,803	65,952	94.5%	Purchased Services	76,052	172,489	96,436	55.9%	164,008	87,956	53.6%	
127,524	83,646	(43,879)	(52.5%)	69,033	(58,491)	(84.7%)	Medical Supplies	359,135	250,936	(108,198)	(43.1%)	112,658	(246,477)	(218.8%)	
6,945	50,957	44,012	86.4%	8,194	1,249	15.2%	Other Supplies	24,810	152,871	128,061	83.8%	23,536	(1,274)	(5.4%)	
61,270	59,500	(1,770)	(3.0%)	44,092	(17,178)	(39.0%)	Medical Services	177,333	178,499	1,166	0.7%	124,510	(52,823)	(42.4%)	
44,911	48,958	4,048	8.3%	38,498	(6,413)	(16.7%)	Drugs	131,727	146,874	15,148	10.3%	135,032	3,306	2.4%	
24,310	51,615	27,305	52.9%	82,836	58,526	70.7%	Repairs & Maintenance	40,332	154,846	114,514	74.0%	161,626	121,295	75.0%	
91,822	137,465	45,643	33.2%	79,835	(11,987)	(15.0%)	Lease & Rental	241,547	412,396	170,849	41.4%	244,089	2,541	1.0%	
6,553	9,018	2,465	27.3%	5,367	(1,186)	(22.1%)	Utilities	20,309	27,054	6,745	24.9%	16,980	(3,329)	(19.6%)	
248,795	70,438	(178,358)	(253.2%)	28,069	(220,727)	(786.4%)	Other Expense	432,673	211,312	(221,361)	(104.8%)	107,959	(324,714)	(300.8%)	
4,545	3,993	(552)	(13.8%)	3,938	(606)	(15.4%)	Insurance	15,166	11,977	(3,189)	(26.6%)	11,815	(3,351)	(28.4%)	
2,433,568	2,554,307	120,738	4.7%	2,145,604	(287,964)	(13.4%)	Total Operational Expenses	6,630,501	8,274,018	1,643,516	19.9%	5,885,770	(744,732)	(12.7%)	
<b>(401,980)</b>	<b>(750,021)</b>	<b>348,041</b>	<b>(46.4%)</b>	<b>(847,410)</b>	<b>445,430</b>	<b>(52.6%)</b>	<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(1,763,624)</b>	<b>(3,208,983)</b>	<b>1,445,359</b>	<b>(45.0%)</b>	<b>(1,496,927)</b>	<b>(266,697)</b>	<b>17.8%</b>	

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

FOR THE THIRD MONTH ENDED DECEMBER 31, 2022

Current Month								Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
23,562	27,500	3,938	14.3%	24,070	509	2.1%	Depreciation	59,597	82,500	22,903	27.8%	72,211	12,615	17.5%
<i>Overhead Allocations:</i>														
7,933	9,052	1,119	12.4%	8,260	327	4.0%	Risk Mgt	23,950	27,155	3,205	11.8%	21,717	(2,233)	(10.3%)
71,645	90,891	19,246	21.2%	169,157	97,512	57.6%	Rev Cycle	209,866	272,673	62,807	23.0%	400,029	190,163	47.5%
1,502	5,534	4,032	72.9%	1,311	(191)	(14.6%)	Internal Audit	5,236	16,602	11,366	68.5%	2,672	(2,564)	(96.0%)
28,705	28,637	(68)	(0.2%)	25,730	(2,975)	(11.6%)	Home Office Facilities	83,198	85,910	2,712	3.2%	77,312	(5,886)	(7.6%)
41,370	35,014	(6,356)	(18.2%)	39,341	(2,029)	(5.2%)	Administration	121,609	105,043	(16,566)	(15.8%)	106,055	(15,554)	(14.7%)
68,880	85,359	16,479	19.3%	18,127	(50,753)	(280.0%)	Human Resources	216,006	256,077	40,071	15.6%	118,251	(97,755)	(82.7%)
10,434	23,440	13,006	55.5%	11,906	1,472	12.4%	Legal	24,119	70,319	46,200	65.7%	26,773	2,654	9.9%
2,594	3,521	927	26.3%	2,387	(207)	(8.7%)	Records	8,615	10,563	1,948	18.4%	8,107	(508)	(6.3%)
5,635	9,336	3,701	39.6%	5,448	(187)	(3.4%)	Compliance	16,605	28,008	11,403	40.7%	15,522	(1,083)	(7.0%)
3,404	3,497	93	2.7%	-	(3,404)	0.0%	Reimburse	6,910	10,491	3,581	34.1%	-	(6,910)	0.0%
35,958	39,045	3,087	7.9%	88,130	52,172	59.2%	IT Operations	103,324	117,136	13,812	11.8%	220,100	116,776	53.1%
13,656	14,232	576	4.0%	14,893	1,237	8.3%	IT Security	40,394	42,695	2,301	5.4%	33,489	(6,905)	(20.6%)
137,080	200,661	63,581	31.7%	47,961	(89,119)	(185.8%)	IT Applications	441,476	601,983	160,507	26.7%	125,272	(316,204)	(252.4%)
35,203	47,286	12,083	25.6%	50,948	15,745	30.9%	Security Services	99,807	141,857	42,050	29.6%	137,602	37,795	27.5%
5,390	4,545	(845)	(18.6%)	-	(5,390)	0.0%	Supply Chain	15,189	13,634	(1,555)	(11.4%)	-	(15,189)	0.0%
23,210	28,066	4,856	17.3%	29,972	6,762	22.6%	Finance	60,206	84,197	23,991	28.5%	84,434	24,228	28.7%
9,145	14,318	5,173	36.1%	4,333	(4,812)	(111.1%)	Public Relations	25,888	42,953	17,065	39.7%	15,240	(10,648)	(69.9%)
11,040	4,010	(7,030)	(175.3%)	7,267	(3,773)	(51.9%)	Information Technology	29,452	12,029	(17,423)	(144.8%)	21,743	(7,709)	(35.5%)
6,556	6,797	241	3.5%	6,106	(450)	(7.4%)	Corporate Quality	19,812	20,391	579	2.8%	19,664	(148)	(0.8%)
10,190	5,490	(4,700)	(85.6%)	9,809	(381)	(3.9%)	Project MGMT Office	26,048	16,470	(9,578)	(58.2%)	30,569	4,521	14.8%
16,492	8,574	(7,918)	(92.3%)	-	(16,492)	0.0%	HIM	40,279	25,722	(14,557)	(56.6%)	-	(40,279)	0.0%
21,060	18,185	(2,875)	(15.8%)	-	(21,060)	0.0%	Coding	50,118	54,554	4,436	8.1%	-	(50,118)	0.0%
21,815	35,014	13,199	37.7%	-	(21,815)	0.0%	IT Service Center	67,419	105,042	37,623	35.8%	-	(67,419)	0.0%
588,897	720,501	131,604	18.3%	541,086	(47,811)	(8.8%)	Total Overhead Allocations	1,735,526	2,161,504	425,978	19.7%	1,464,550	(270,976)	(18.5%)
<b>3,046,027</b>	<b>3,302,308</b>	<b>256,281</b>	<b>7.8%</b>	<b>2,710,761</b>	<b>(335,266)</b>	<b>(12.4%)</b>	<b>Total Expenses</b>	<b>8,425,624</b>	<b>10,518,022</b>	<b>2,092,398</b>	<b>19.9%</b>	<b>7,422,531</b>	<b>(1,003,093)</b>	<b>(13.5%)</b>
<b>\$ (1,014,439)</b>	<b>\$ (1,498,022)</b>	<b>\$ 483,583</b>	<b>(32.3%)</b>	<b>\$ (1,412,566)</b>	<b>\$ 398,127</b>	<b>(28.2%)</b>	<b>Net Margin</b>	<b>\$ (3,558,747)</b>	<b>\$ (5,452,987)</b>	<b>\$ 1,894,240</b>	<b>(34.7%)</b>	<b>\$ (3,033,689)</b>	<b>\$ (525,058)</b>	<b>17.3%</b>
14,685	116,559	101,874	87.4%	-	(14,685)	0.0%	Capital	38,566	349,678	311,111	89.0%	100,000	61,434	61.4%
<b>\$ 3,542,921</b>	<b>\$ 5,900,000</b>	<b>\$ 2,357,079</b>	<b>40.0%</b>	<b>\$ -</b>	<b>\$ (3,542,921)</b>	<b>0.0%</b>	<b>General Fund Support/ Transfer In</b>	<b>\$ 3,542,921</b>	<b>\$ 5,900,000</b>	<b>\$ 2,357,079</b>	<b>40.0%</b>	<b>\$ -</b>	<b>\$ (3,542,921)</b>	<b>0.0%</b>

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

FOR THE THIRD MONTH ENDED DECEMBER 31, 2022

	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Total
<b>Gross Patient Revenue</b>	-	893,143	597,139	470,470	294,667	2,268,524
Contractual Allowances	-	251,653	235,544	122,000	175,849	785,535
Charity Care	-	506,161	301,572	285,606	113,728	1,219,728
Bad Debt	-	50,316	14,258	5,363	27,133	95,162
<b>Total Contractual Allowances and Bad Debt</b>	-	808,130	551,373	412,970	316,710	2,100,425
Other Patient Revenue	-	104,189	77,131	66,667	48,914	297,137
<b>Net Patient Revenue</b>	-	189,201	122,897	124,167	26,870	465,235
Collection %	-	21.18%	20.58%	26.39%	9.12%	20.51%
Grant Funds	43,537	196,039	104,136	78,310	44,843	466,864
Other Financial Assistance	20,165	23,361	27,647	11,703	6,474	89,351
Other Revenue	260	-	(9)	-	-	251
<b>Total Other Revenues</b>	63,962	219,400	131,774	90,013	51,317	556,466
<b>Total Revenues</b>	<b>63,962</b>	<b>408,601</b>	<b>254,670</b>	<b>214,180</b>	<b>78,188</b>	<b>1,021,701</b>
<i>Direct Operational Expenses:</i>						
Salaries and Wages	92,024	305,343	194,222	162,022	77,036	907,683
Benefits	25,366	63,921	43,788	44,715	24,684	202,474
Purchased Services	-	2,542	1,298	1,647	2,824	8,311
Medical Supplies	-	19,925	10,866	9,388	8,442	48,620
Other Supplies	-	390	3,118	382	64	3,953
Drugs	-	213	325	237	237	1,011
Repairs & Maintenance	-	22,586	653	1,374	4,954	29,567
Lease & Rental	-	27,635	16,375	15,255	8,512	67,777
Utilities	-	1,132	1,113	312	2,603	5,160
Other Expense	2,442	5,145	4,589	4,848	2,133	19,157
Insurance	-	-	-	-	232	232
<b>Total Operational Expenses</b>	119,833	448,832	276,346	240,179	131,719	1,293,945
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(55,870)</b>	<b>(40,231)</b>	<b>(21,676)</b>	<b>(25,999)</b>	<b>(53,531)</b>	<b>(272,243)</b>
Depreciation	-	6,667	1,651	1,204	7,849	17,371
<i>Overhead Allocations:</i>						
Risk Management Allocation	4,421	-	-	-	-	-
Internal Audit Allocation	966	-	-	-	-	-
Administration Allocation	22,444	-	-	-	-	-
Legal Allocation	4,452	-	-	-	-	-
Records Allocation	1,590	-	-	-	-	-
Compliance Allocation	3,065	-	-	-	-	-
PROJ MGMT ALLOC	4,808	-	-	-	-	-
Finance Allocation	11,111	-	-	-	-	-
IT Allocation	5,436	-	-	-	-	-
CORP COMMUN ALLOC	4,779	-	-	-	-	-
Supply Chain Alloc	2,803	-	-	-	-	-
IT OPERATIONS ALLOCATION	19,070	-	-	-	-	-
IT SECURITY ALLOCATION	7,455	-	-	-	-	-
CORP QUAL ALLOC	3,656	-	-	-	-	-
Reimburse Alloc	1,275	-	-	-	-	-
IT SERVICE CENTER ALLOC	12,443	-	-	-	-	-
HIM ALLOC	7,434	-	-	-	-	-
CODING ALLOC	9,250	-	-	-	-	-
IT APPLICATIONS ALLOC	81,478	-	-	-	-	-
Human Resources Allocation	36,916	-	-	-	-	-
SECURITY SERVICES ALLOC	21,112	-	-	-	-	-
Facilities Allocation	11,939	-	-	-	-	-
Revenue Cycle Allocation	43,980	-	-	-	-	-
<b>Total Overhead Allocations</b>	321,883	-	-	-	-	-
<b>Total Expenses</b>	<b>441,716</b>	<b>455,499</b>	<b>277,997</b>	<b>241,383</b>	<b>139,568</b>	<b>1,556,163</b>
<b>Net Margin</b>	<b>\$ (377,753)</b>	<b>\$ (46,898)</b>	<b>\$ (23,327)</b>	<b>\$ (27,203)</b>	<b>\$ (61,381)</b>	<b>\$ (534,462)</b>
<b>Capital</b>	-	51,467	-	-	-	51,467
<b>General Fund Support/ Transfer In</b>	<b>\$ 585,929</b>	-	-	-	-	<b>585,929</b>





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

FOR THE THIRD MONTH ENDED DECEMBER 31, 2022

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
2,483	5,750	3,267	56.8%	7,572	5,089	67.2%	17,371	17,250	(122)	(0.7%)	22,715	5,344	23.5%
<i>Overhead Allocations:</i>													
1,464	1,671	207	12.4%	1,350	(114)	(8.4%)	4,421	5,012	591	11.8%	3,549	(872)	(24.6%)
15,014	19,047	4,033	21.2%	29,406	14,392	48.9%	43,980	57,142	13,162	23.0%	69,540	25,560	36.8%
277	1,021	744	72.9%	214	(63)	(29.3%)	966	3,064	2,098	68.5%	437	(529)	(121.2%)
4,119	4,110	(9)	(0.2%)	2,722	(1,397)	(51.3%)	11,939	12,329	390	3.2%	8,179	(3,760)	(46.0%)
7,635	6,462	(1,173)	(18.1%)	6,430	(1,205)	(18.7%)	22,444	19,387	(3,057)	(15.8%)	17,333	(5,111)	(29.5%)
11,772	14,588	2,816	19.3%	3,047	(8,725)	(286.4%)	36,916	43,765	6,849	15.6%	19,875	(17,041)	(85.7%)
1,926	4,326	2,400	55.5%	1,946	20	1.0%	4,452	12,978	8,526	65.7%	4,376	(76)	(1.7%)
479	650	171	26.3%	390	(89)	(22.8%)	1,590	1,950	360	18.4%	1,325	(265)	(20.0%)
1,040	1,723	683	39.6%	890	(150)	(16.8%)	3,065	5,169	2,104	40.7%	2,537	(528)	(20.8%)
628	645	17	2.7%	-	(628)	0.0%	1,275	1,936	661	34.2%	-	(1,275)	0.0%
6,636	7,206	570	7.9%	14,403	7,767	53.9%	19,070	21,618	2,548	11.8%	35,972	16,902	47.0%
2,520	2,627	107	4.1%	2,434	(86)	(3.5%)	7,455	7,880	425	5.4%	5,473	(1,982)	(36.2%)
25,299	37,034	11,735	31.7%	7,838	(17,461)	(222.8%)	81,478	111,102	29,624	26.7%	20,473	(61,005)	(298.0%)
7,446	10,002	2,556	25.6%	8,907	1,461	16.4%	21,112	30,006	8,894	29.6%	24,056	2,944	12.2%
995	839	(156)	(18.6%)	-	(995)	0.0%	2,803	2,516	(287)	(11.4%)	-	(2,803)	0.0%
4,284	5,180	896	17.3%	4,898	614	12.5%	11,111	15,539	4,428	28.5%	13,799	2,688	19.5%
1,688	2,642	954	36.1%	708	(980)	(138.4%)	4,779	7,927	3,148	39.7%	2,491	(2,288)	(91.9%)
2,038	740	(1,298)	(175.4%)	1,188	(850)	(71.6%)	5,436	2,220	(3,216)	(144.8%)	3,554	(1,882)	(53.0%)
1,210	1,254	44	3.5%	998	(212)	(21.3%)	3,656	3,764	108	2.9%	3,214	(442)	(13.8%)
1,881	1,013	(868)	(85.6%)	1,603	(278)	(17.3%)	4,808	3,040	(1,768)	(58.2%)	4,996	188	3.8%
3,044	1,582	(1,462)	(92.4%)	-	(3,044)	0.0%	7,434	4,747	(2,687)	(56.6%)	-	(7,434)	0.0%
3,887	3,356	(531)	(15.8%)	-	(3,887)	0.0%	9,250	10,068	818	8.1%	-	(9,250)	0.0%
4,026	6,462	2,436	37.7%	-	(4,026)	0.0%	12,443	19,386	6,943	35.8%	-	(12,443)	0.0%
109,308	134,182	24,874	18.5%	89,372	(19,936)	(22.3%)	321,883	402,545	80,662	20.0%	241,177	(80,706)	(33.5%)
<b>578,902</b>	<b>587,636</b>	<b>8,735</b>	<b>1.5%</b>	<b>433,685</b>	<b>(145,217)</b>	<b>(33.5%)</b>	<b>1,556,163</b>	<b>1,888,909</b>	<b>332,746</b>	<b>17.6%</b>	<b>1,280,595</b>	<b>(275,568)</b>	<b>(21.5%)</b>
<b>\$ (231,207)</b>	<b>\$ (201,023)</b>	<b>\$ (30,184)</b>	<b>15.0%</b>	<b>\$ (52,962)</b>	<b>\$ (178,245)</b>	<b>336.5%</b>	<b>\$ (534,462)</b>	<b>\$ (778,191)</b>	<b>\$ 243,729</b>	<b>(31.3%)</b>	<b>\$ (90,178)</b>	<b>\$ (444,284)</b>	<b>492.7%</b>
38,566	37,130	(1,436)	(3.9%)	-	(38,566)	0.0%	51,467	111,391	59,924	53.8%	-	(51,467)	0.0%
<b>\$ 585,929</b>	<b>\$ 725,000</b>	<b>\$ 139,071</b>	<b>19.2%</b>	<b>\$ -</b>	<b>\$ (585,929)</b>	<b>0.0%</b>	<b>\$ 585,929</b>	<b>\$ 725,000</b>	<b>\$ 139,071</b>	<b>19.2%</b>	<b>\$ -</b>	<b>\$ (585,929)</b>	<b>0.0%</b>

# Primary Care Clinics- Behavioral Health Statement of Revenues and Expenses by Location

FOR THE THIRD MONTH ENDED DECEMBER 31, 2022

	Portable Behavioral Health	West Palm Beach Behavioral Health	Lantana Behavioral Health	Delray Behavioral Health	Belle Glade Behavioral Health	Lewis Center Behavioral Health	West Boca Behavioral Health	Mangonia Behavioral Health	Jupiter Behavioral Health
<b>Gross Patient Revenue</b>	-	(62)	-	80	(1,110)	(31,326)	-	195,318	-
Contractual Allowances	-	374	-	-	1,031	62,281	-	(55,867)	-
Charity Care	-	9	-	21	31	3,675	-	50,216	19
Bad Debt	-	273	90	77	355	51,565	20	(2,263)	64
Total Contractual Allowances and Bad Debt	-	656	90	99	1,417	117,521	20	(7,914)	83
Other Patient Revenue	-	-	-	-	-	-	-	3,463	-
<b>Net Patient Revenue</b>	-	(718)	(90)	(18)	(2,528)	(148,846)	(20)	206,695	(83)
Collection %	-	1160.26%	0.00%	0.00%	227.61%	475.15%	0.00%	105.82%	0.00%
Grant Funds	-	-	-	-	-	-	-	-	-
Other Financial Assistance	-	-	-	-	-	-	-	-	-
Other Revenue	-	-	-	-	-	-	-	-	-
Total Other Revenues	-	-	-	-	-	-	-	-	-
<b>Total Revenues</b>	-	(718)	(90)	(18)	(2,528)	(148,846)	(20)	206,695	(83)
<i>Direct Operational Expenses:</i>									
Salaries and Wages	-	-	-	-	-	-	-	-	-
Benefits	-	-	-	-	-	-	-	-	-
Purchased Services	-	-	-	-	-	-	-	-	-
Medical Supplies	-	-	-	-	-	-	-	-	-
Other Supplies	-	-	-	-	-	-	-	-	-
Repairs & Maintenance	-	-	-	-	-	-	-	-	-
Lease & Rental	-	-	-	-	-	-	-	-	-
Utilities	-	-	-	-	-	-	-	-	-
Other Expense	-	-	-	-	-	-	-	-	-
Insurance	-	-	-	-	-	-	-	-	-
Total Operational Expenses	-	-	-	-	-	-	-	-	-
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	-	(718)	(90)	(18)	(2,528)	(148,846)	(20)	206,695	(83)
Depreciation	-	-	-	-	-	-	-	-	-
<i>Overhead Allocations:</i>									
Risk Mgt	-	-	-	-	-	-	-	-	-
Rev Cycle	-	-	-	-	-	-	-	-	-
Internal Audit	-	-	-	-	-	-	-	-	-
Home Office Facilities	-	-	-	-	-	-	-	-	-
Administration	-	-	-	-	-	-	-	-	-
Human Resources	-	-	-	-	-	-	-	-	-
Legal	-	-	-	-	-	-	-	-	-
Records	-	-	-	-	-	-	-	-	-
Compliance	-	-	-	-	-	-	-	-	-
Comm Engage Plan	-	-	-	-	-	-	-	-	-
IT Operations	-	-	-	-	-	-	-	-	-
IT Security	-	-	-	-	-	-	-	-	-
IT Applications	-	-	-	-	-	-	-	-	-
Security Services	-	-	-	-	-	-	-	-	-
IT EPIC	-	-	-	-	-	-	-	-	-
Finance	-	-	-	-	-	-	-	-	-
Public Relations	-	-	-	-	-	-	-	-	-
Information Technology	-	-	-	-	-	-	-	-	-
Corporate Quality	-	-	-	-	-	-	-	-	-
Project MGMT Office	-	-	-	-	-	-	-	-	-
Total Overhead Allocations	-	-	-	-	-	-	-	-	-
<b>Total Expenses</b>	-	-	-	-	-	-	-	-	-
<b>Net Margin</b>	\$ -	\$ (718)	\$ (90)	\$ (18)	\$ (2,528)	\$ (148,846)	\$ (20)	\$ 206,695	\$ (83)
<b>Capital</b>	-	-	-	-	-	-	-	-	-
<b>General Fund Support/ Transfer In</b>	\$ -	-	-	-	-	-	-	-	-



# Primary Care Clinics- Behavioral Health Statement of Revenues and Expenses

FOR THE THIRD MONTH ENDED DECEMBER 31, 2022

Current Month								Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
-	-	-	0.0%	-	-	0.0%	Depreciation	-	-	-	0.0%	-	-	0.0%
<i>Overhead Allocations:</i>														
-	-	-	0.0%	-	-	0.0%	Risk Mgt	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Rev Cycle	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Internal Audit	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Home Office Facilities	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Administration	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Human Resources	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Legal	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Records	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Compliance	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Comm Engage Plan	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT Operations	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT Security	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT Applications	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Security Services	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT EPIC	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Finance	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Public Relations	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Information Technology	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Corporate Quality	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Project MGMT Office	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Managed Care Contract	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Total Overhead Allocations	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Total Expenses	-	-	-	0.0%	-	-	0.0%
<b>\$ 2,674</b>	<b>\$ -</b>	<b>\$ 2,674</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ 2,674</b>	<b>0.0%</b>	<b>Net Margin</b>	<b>\$ 54,392</b>	<b>\$ -</b>	<b>\$ 54,392</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ 54,392</b>	<b>0.0%</b>
-	-	-	0.0%	-	-	0.0%	Capital	-	-	-	0.0%	-	-	0.0%
<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>General Fund Support/ Transfer In</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>

**District Clinic Holdings, Inc.**

Clinic Visits - Adults and Pediatrics	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Current Year	Current YTD	%Var to	Prior Year
													Total	Budget	Budget	Total
West Palm Beach	1,597	1,182	1,355										4,134	4,248	(2.7%)	3,699
Delray	832	663	857										2,352	1,581	48.8%	1,581
Lantana	2,017	1,613	1,604										5,234	4,825	8.5%	4,825
Belle Glade & Women's Health Care	920	775	839										2,534	1,989	27.4%	1,989
Lewis Center	57	22	44										123	1,427	(91.4%)	1,427
Lake Worth & Women's Health Care	1,408	1,009	1,126										3,543	3,633	(2.5%)	3,633
Jupiter	518	438	544										1,500	1,295	15.8%	1,295
West Boca & Women's Health Care	350	311	359										1,020	1,078	(5.4%)	1,078
St Ann Place	-	-	-										-	99	(100.0%)	44
Clb Mob 1 Warrior	-	-	-										-	54	(100.0%)	3,014
Clb Mob 2 Scout	-	-	-										-	-	#DIV/0!	1,537
Clb Mob 3 Hero	51	49	61										161	150	7.3%	2,976
Mangonia Park	923	844	956										2,723	597	356.1%	597
<b>Total Clinic Visits</b>	<b>8,673</b>	<b>6,906</b>	<b>7,745</b>	-	-	-	-	-	-	-	-	-	<b>23,324</b>	<b>20,976</b>	<b>11.2%</b>	<b>27,695</b>
<b>Dental Visits</b>																
West Palm Beach	1,101	824	977										2,902	2,329	24.6%	2,329
Lantana	769	529	653										1,951	2,631	(25.8%)	2,631
Delray	536	420	540										1,496	1,203	24.4%	1,203
Belle Glade	369	270	344										983	1,035	(5.0%)	1,035
Lake Worth	-	-	-										-	-	#DIV/0!	-
West Boca	-	-	-										-	-	#DIV/0!	-
<b>Total Dental Visits</b>	<b>2,775</b>	<b>2,043</b>	<b>2,514</b>	-	-	-	-	-	-	-	-	-	<b>7,332</b>	<b>7,198</b>	<b>1.9%</b>	<b>7,198</b>
<b>Total Medical and Dental Visits</b>	<b>11,448</b>	<b>8,949</b>	<b>10,259</b>	-	-	-	-	-	-	-	-	-	<b>30,656</b>	<b>28,174</b>	<b>8.8%</b>	<b>34,893</b>
<b>Mental Health Counselors (non-billable)</b>																
West Palm Beach	169	112	177										458	312	46.8%	312
Delray	158	127	140										425	318	33.6%	318
Lantana	80	131	192										403	317	27.1%	317
Belle Glade	148	58	16										222	238	(6.7%)	238
Mangonia Park	860	784	869										2,513	1,157	117.2%	1,157
Lewis Center	-	-	-										-	30	(100.0%)	2,498
Lake Worth	174	137	172										483	461	4.8%	461
Jupiter	-	-	37										37	-	#DIV/0!	-
West Boca	-	-	-										-	-	#DIV/0!	-
Mobile Van	-	-	-										-	-	#DIV/0!	-
<b>Total Mental Health Screenings</b>	<b>1,589</b>	<b>1,349</b>	<b>1,603</b>	-	-	-	-	-	-	-	-	-	<b>4,541</b>	<b>2,833</b>	<b>60.3%</b>	<b>5,301</b>
<b>GRAND TOTAL</b>	<b>13,037</b>	<b>10,298</b>	<b>11,862</b>	-	-	-	-	-	-	-	-	-	<b>35,197</b>			<b>40,194</b>

**DISTRICT CLINIC HOLDINGS, INC.  
BOARD OF DIRECTORS  
FEBRUARY 22, 2023**

**1. Description: Federal Poverty Guidelines/Medical and Dental Sliding Fee 2023**

**2. Summary:**

This agenda item provides the updated Federal Poverty Guidelines and C.L. Brumback Primary Care Clinics Medical and Dental Sliding Fee Scales.

**3. Substantive Analysis:**

The sliding fee scale is updated to reflect the 2023 Federal Poverty Guidelines published by the Federal Register/Vol. 88, No. 12/ January 19, 2023. The guidelines in this 2023 notice reflect the 8 percent price increase between calendar years 2021 and 2022. After this inflation adjustment, the guidelines are rounded and adjusted to standardize the differences between family sizes.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
Candice Abbott  
VP & Chief Financial Officer

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

N/A

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

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

**6. Recommendation:**

Staff recommends that the Board approve the Federal Poverty Guidelines/ Medical and Dental Sliding Fee Scale 2023.

Approved for Legal sufficiency:

*Bernabe Icaza*

\_\_\_\_\_  
Bernabe Icaza  
VP & General Counsel

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**FEBRUARY 22, 2023**

*AnnMarie Hankins*

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AnnMarie Hankins  
Director, Revenue Cycle

*Alicia Ottmann*

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Alicia Ottmann, PA-C  
AVP, Executive Director  
FQHC & Pharmacy Services



Opportunities to present oral comments to the Committee will be provided at a future meeting.

- *Online (preferred method):* Follow the instructions for submitting comments at [www.regulations.gov](http://www.regulations.gov). Comments submitted electronically, including attachments, will be posted to Docket OASH-2022-0021.

- *Mail:* Mail/courier to Janet M. de Jesus, MS, RD, HHS/OASH/ODPHP, 1101 Wootton Parkway, Suite 420, Rockville, MD 20852. For written/paper submissions, ODPHP will post your comment, as well as any attachments, to [www.regulations.gov](http://www.regulations.gov).

Meeting materials for each meeting will be accessible at [www.DietaryGuidelines.gov](http://www.DietaryGuidelines.gov). Materials may be requested by email at [dietaryguidelines@hhs.gov](mailto:dietaryguidelines@hhs.gov).

**Paul Reed,**

Deputy Assistant Secretary for Health, Office of Disease Prevention and Health Promotion.

[FR Doc. 2023-00921 Filed 1-18-23; 8:45 am]

BILLING CODE 4150-32-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Office of the Secretary**

**Annual Update of the HHS Poverty Guidelines**

**AGENCY:** Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** This notice provides an update of the Department of Health and Human Services (HHS) poverty guidelines to account for last calendar year’s increase in prices as measured by the Consumer Price Index.

**DATES:** January 12, 2023 unless an office administering a program using the guidelines specifies a different effective date for that particular program.

**ADDRESSES:** Office of the Assistant Secretary for Planning and Evaluation, Room 404E, Humphrey Building, Department of Health and Human Services, Washington, DC 20201.

**FOR FURTHER INFORMATION CONTACT:** For information about how the guidelines are used or how income is defined in a particular program, contact the federal, state, or local office that is responsible for that program. For information about poverty figures for immigration forms, the Hill-Burton Uncompensated Services Program, and the number of people in poverty, use the specific telephone numbers and addresses given below.

For general questions about the poverty guidelines themselves, contact

Kendall Swenson, Office of the Assistant Secretary for Planning and Evaluation, Room 404E.3, Humphrey Building, Department of Health and Human Services, Washington, DC 20201—telephone: (202) 795-7309—or visit <http://aspe.hhs.gov/poverty/>.

For information about the percentage multiple of the poverty guidelines to be used on immigration forms such as USCIS Form I-864, Affidavit of Support, contact U.S. Citizenship and Immigration Services at 1-800-375-5283. You also may visit <https://www.uscis.gov/i-864>.

For information about the Hill-Burton Uncompensated Services Program (free or reduced-fee health care services at certain hospitals and other facilities for persons meeting eligibility criteria involving the poverty guidelines), visit <https://www.hrsa.gov/get-health-care/affordable/hill-burton/index.html>.

For information about the number of people in poverty, visit the Poverty section of the Census Bureau’s website at <https://www.census.gov/topics/income-poverty/poverty.html> or contact the Census Bureau’s Customer Service Center at 1-800-923-8282 (toll-free) or visit <https://ask.census.gov> for further information.

**SUPPLEMENTARY INFORMATION:**

**Background**

Section 673(2) of the Omnibus Budget Reconciliation Act (OBRA) of 1981 (42 U.S.C. 9902(2)) requires the Secretary of the Department of Health and Human Services to update the poverty guidelines at least annually, adjusting them on the basis of the Consumer Price Index for All Urban Consumers (CPI-U). The poverty guidelines are used as an eligibility criterion by Medicaid and a number of other federal programs. The *poverty guidelines* issued here are a simplified version of the *poverty thresholds* that the Census Bureau uses to prepare its estimates of the number of individuals and families in poverty.

As required by law, this update is accomplished by increasing the latest published Census Bureau poverty thresholds by the relevant percentage change in the Consumer Price Index for All Urban Consumers (CPI-U). The guidelines in this 2023 notice reflect the 8.0 percent price increase between calendar years 2021 and 2022. After this inflation adjustment, the guidelines are rounded and adjusted to standardize the differences between family sizes. In rare circumstances, the rounding and standardizing adjustments in the formula result in small decreases in the poverty guidelines for some household sizes even when the inflation factor is

not negative. In cases where the year-to-year change in inflation is not negative and the rounding and standardizing adjustments in the formula result in reductions to the guidelines from the previous year for some household sizes, the guidelines for the affected household sizes are fixed at the prior year’s guidelines. As in prior years, these 2023 guidelines are roughly equal to the poverty thresholds for calendar year 2022 which the Census Bureau expects to publish in final form in September 2023.

The poverty guidelines continue to be derived from the Census Bureau’s current official poverty thresholds; they are not derived from the Census Bureau’s Supplemental Poverty Measure (SPM).

The following guideline figures represent annual income.

**2023 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA**

Persons in family/household	Poverty guideline
1 .....	\$14,580
2 .....	19,720
3 .....	24,860
4 .....	30,000
5 .....	35,140
6 .....	40,280
7 .....	45,420
8 .....	50,560

For families/households with more than 8 persons, add \$5,140 for each additional person.

**2023 POVERTY GUIDELINES FOR ALASKA**

Persons in family/household	Poverty guideline
1 .....	\$18,210
2 .....	24,640
3 .....	31,070
4 .....	37,500
5 .....	43,930
6 .....	50,360
7 .....	56,790
8 .....	63,220

For families/households with more than 8 persons, add \$6,430 for each additional person.

**2023 POVERTY GUIDELINES FOR HAWAII**

Persons in family/household	Poverty guideline
1 .....	\$16,770
2 .....	22,680
3 .....	28,590
4 .....	34,500

## 2023 POVERTY GUIDELINES FOR HAWAII—Continued

Persons in family/household	Poverty guideline
5 .....	40,410
6 .....	46,320
7 .....	52,230
8 .....	58,140

For families/households with more than 8 persons, add \$5,910 for each additional person.

Separate poverty guideline figures for Alaska and Hawaii reflect Office of Economic Opportunity administrative practice beginning in the 1966–1970 period. (Note that the Census Bureau poverty thresholds—the version of the poverty measure used for statistical purposes—have never had separate figures for Alaska and Hawaii.) The poverty guidelines are not defined for Puerto Rico or other outlying jurisdictions. In cases in which a federal program using the poverty guidelines serves any of those jurisdictions, the federal office that administers the program is generally responsible for deciding whether to use the contiguous-states-and-DC guidelines for those jurisdictions or to follow some other procedure.

Due to confusing legislative language dating back to 1972, the poverty guidelines sometimes have been mistakenly referred to as the “OMB” (Office of Management and Budget) poverty guidelines or poverty line. In fact, OMB has never issued the guidelines; the guidelines are issued each year by the Department of Health and Human Services. The poverty guidelines may be formally referenced as “the poverty guidelines updated periodically in the **Federal Register** by the U.S. Department of Health and Human Services under the authority of 42 U.S.C. 9902(2).”

Some federal programs use a percentage multiple of the guidelines (for example, 125 percent or 185 percent of the guidelines), as noted in relevant authorizing legislation or program regulations. Non-federal organizations that use the poverty guidelines under their own authority in non-federally-funded activities also may choose to use a percentage multiple of the guidelines.

The poverty guidelines do not make a distinction between farm and non-farm families, or between aged and non-aged units. (Only the Census Bureau poverty thresholds have separate figures for aged and non-aged one-person and two-person units.)

This notice does not provide definitions of such terms as “income” or

“family” as there is considerable variation of these terms among programs that use the poverty guidelines. The legislation or regulations governing each program define these terms and determine how the program applies the poverty guidelines. In cases where legislation or regulations do not establish these definitions, the entity that administers or funds the program is responsible to define such terms as “income” and “family.” Therefore questions such as net or gross income, counted or excluded income, or household size should be directed to the entity that administers or funds the program.

Dated: January 12, 2023.

**Xavier Becerra,**

*Secretary, Department of Health and Human Services.*

[FR Doc. 2023–00885 Filed 1–18–23; 8:45 am]

**BILLING CODE 4150–05–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****National Institutes of Health****National Center for Advancing Translational Sciences; Notice of Closed Meeting**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The contract proposals and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the contract proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* National Center for Advancing Translational Sciences Special Emphasis Panel; SBIR Phase I Topic 023 Contract Review.

*Date:* February 15, 2023.

*Time:* 9 a.m. to 1 p.m.

*Agenda:* To review and evaluate contract proposals.

*Place:* National Center for Advancing Translational Sciences, National Institutes of Health, 6701 Democracy Boulevard, Room 1037, Bethesda, MD 20892.

*Contact Person:* Rahat (Rani) Khan, Ph.D., Scientific Review Officer, Office of Scientific Review, National Center for Advancing Translational Sciences, National Institutes of Health, 6701 Democracy Boulevard, Room 1037, Bethesda, MD 20892, (301) 594–7319, [khanr2@csr.nih.gov](mailto:khanr2@csr.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.859, Pharmacology, Physiology, and Biological Chemistry Research; 93.350, B—Cooperative Agreements; 93.859, Biomedical Research and Research Training, National Institutes of Health, HHS)

Dated: January 13, 2023.

**Melanie J. Pantoja,**

*Program Analyst, Office of Federal Advisory Committee Policy.*

[FR Doc. 2023–00993 Filed 1–18–23; 8:45 am]

**BILLING CODE 4140–01–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****National Institutes of Health****National Institute of Dental and Craniofacial Research; Notice of Closed Meeting**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* National Institute of Dental and Craniofacial Research Special Emphasis Panel; DSR Member Conflict Applications Meeting.

*Date:* February 17, 2023.

*Time:* 11 a.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* National Institute of Dental and Craniofacial Research, 6701 Democracy Boulevard, Bethesda, MD 20892 (Virtual Meeting).

*Contact Person:* Aiwu Cheng, Ph.D., MD, Scientific Review Officer, Scientific Review Branch, Division of Extramural Activities, National Institute of Dental and Craniofacial Research, 6701 Democracy Blvd., Bethesda, MD 20892, 301–594–4859, [Aiwu.cheng@nih.gov](mailto:Aiwu.cheng@nih.gov).

(Catalogue of Federal Domestic Assistance Program No. 93.121, Oral Diseases and Disorders Research, National Institutes of Health, HHS)

Dated: January 13, 2023.

**Melanie J. Pantoja,**

*Program Analyst, Office of Federal Advisory Committee Policy.*

[FR Doc. 2023–00995 Filed 1–18–23; 8:45 am]

**BILLING CODE 4140–01–P**

**C. L. Brumback Primary Care Clinic  
 2023 SLIDING FEE SCALE – DENTAL, MEDICAL, BEHAVIORAL HEALTH, & WOMEN’S HEALTH\***

Family Size	100%	101% to 150%	151% to 175%	176% to 200%	Over 200%
1	\$14,580.00	\$14,725.80 - \$21,870.00	\$22,015.00- \$25,515.00	\$25,660.80 - \$29,160.00	\$29,305.80
2	\$19720.00	\$19,917.20 - \$29,580.00	\$27,777.20 - \$34,510.00	\$34,707.20 - \$39,440.00	\$39,637.20
3	\$24,860.00	\$25,108.60 - \$37,290.00	\$37538.60 - \$43,505.00	\$43,753.60 - \$49720.00	\$49,968.60
4	\$30,000.00	\$30,300.00 - \$45,000.00	\$45,300.00 - \$52,500.00	\$52,800.00 - \$60,000.00	\$60,300.00
5	\$35,140.00	\$35,491.40 - \$52,710.00	\$53,061.40 - \$61,495.00	\$61,846.40 - \$70,280.00	\$70,631.40
6	\$40,280.00	\$40,682.80 - \$60,420.00	\$60,822.80 - \$70,490.00	\$70,892.80 - \$80,560.00	\$80,962.80
7	\$45,420.00	\$45,874.20 - \$68,130.00	\$68,584.20 - \$79,485.00	\$79,939.20 - \$90,840.00	\$91,294.20
8	\$50,560.00	\$51,065.60 - \$75,840.00	\$76,345.60 - \$88,480.00	\$88,985.60 - \$101,120.00	\$101,625.60
For families/households with more than 8 persons, add \$5,140 for each additional person					

Federal Poverty Level	Medical: Behavioral Health & Women’s Health Price	Dental Price
100% or below	\$20.00	\$30.00
Between 100% to 150%	\$40.00	\$50.00
Between 150% to 175%	\$60.00	\$70.00
Between 175% to 200%	\$80.00	\$90.00
Over 200%	No Discount	No Discount

Based on 2023 Federal Poverty Guidelines published in the Federal Register- January 19, 2023

\*Discounted charges are per visit and will include lab orders and pharmacy.

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

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

**2. Summary:**

HRSA required submissions were completed on time and clinic updates were provided.

**3. Substantive Analysis:**

CY2022 Uniform Data System (UDS)

The health center submitted its annual UDS prior to the due date of 2/15/2023.

FY23 Ending HIV Epidemic Grant

Submitted prior to the due date of 2/16/2023.

Clinic Updates

- Delray Beach Clinic construction is underway.
- Atlantis Clinic construction bid and permitting have begun.
- Jupiter Clinic expansion and community needs assessment conversations have begun.
- Boca Clinic marketing has begun for the Open House scheduled for 4/10/23.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
 Candice Abbott  
 VP & Chief Financial Officer

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

N/A

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

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

**6. Recommendation:**

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

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

Approved for Legal sufficiency:



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Bernabe Icaza  
VP & General Counsel



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Alicia Ottmann, PA-C  
AVP, Executive Director FQHC  
& Pharmacy Services

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

**1. Description: Quality Report**

**2. Summary:**

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

- Quality Council Meeting Minutes February 2023
- UDS Report – YTD
- Provider Productivity –January 2023

**3. Substantive Analysis:**

PATIENT SAFETY & ADVERSE EVENTS

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

PATIENT SATISFACTION AND GRIEVANCES

Patient relations are to be presented as a separate agenda item.

QUALITY ASSURANCE & IMPROVEMENT

**American Heart Association (AHA) Target Type 2 Diabetes Quality Collective:**

Our health center was one of three FQHCs invited to participate in an exclusive diabetes quality improvement opportunity. This opportunity is a three-year project made possible by the Know Diabetes by Heart™ initiative. This AHA initiative is a national opportunity to engage FQHCs and health systems in identifying innovative ways to implement evidence-based guidelines for patients with diabetes and cardiovascular disease/risk factors. Our virtual kickoff meeting was held on 1/24/2023.

UTILIZATION OF HEALTH CENTER SERVICES

Individual monthly provider productivity stratified by clinic.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

N/A

\_\_\_\_\_  
Candice Abbott  
VP & Chief Financial Officer

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

N/A

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

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

**6. Recommendation:**

Staff recommends that the Board approve the updated Quality Report.

Approved for Legal sufficiency:



\_\_\_\_\_  
Bernabe Icaza  
VP & General Counsel



\_\_\_\_\_  
Dr. Charmaine Chibar  
FQHC Medical Director



\_\_\_\_\_  
Alicia Ottmann, PA-C  
AVP, Executive Director FQHC  
& Pharmacy Services

**Quality Council Meeting Minutes**

**Date: February 7, 2023**

**Time: 3:00 PM – 5:00 PM**

**Attendees:** Alicia Ottmann – AVP of FQHC & Pharmacy Services; Andrea Steele – AVP of Corporate Quality; Maria Chamberlin – Nurse Manager, Shauniel Brown – Senior Risk Manager, Dr. Sandra Warren – Associate Medical Director, David Speciale – Patient Experience Director, Alexa Goodwin – Patient Relations Manager, Marisol Miranda – Director of Clinic Operations, Dr. Charmaine Chibar – FQHC Medical Director, Dr. Valena Grbic - Medical Director of District Cares, Carolina Foksinski- Operations Process Manager, Dr. Belma Andric – VP & Chief Medical Officer, Nancy Gonzalez – Dental Program Director; Irene Garcia – Dental Quality Coordinator, Ivonne Cohen- Corporate Quality Reporting Analyst, Jokebed Laurore- Nurse Educator, Erik Lalani – Dental Operations Manager  
**Excused:** N/A

**Minutes by:** Nicole Glasford – Executive Assistant

<u>AGENDA ITEM</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
<b>PATIENT SAFETY &amp; ADVERSE EVENTS</b>				
<b>OCCURRENCES</b>	<p><b><u>Report Summary</u></b></p> <p>The January 2023 Risk Management (Incident Reports) Tableau dashboard showed 61 reported events. 56 incidents and 5 good catches. Our highest-reported locations were West Palm Beach Medical (11), Mangonia Park (9), and Lantana Medical (7), which had a total of 44% of all reported events.</p> <p><b>Trends by Clinic: Incidents</b></p> <ol style="list-style-type: none"> <li>1. Belle Glade Dental – 2</li> <li>2. Belle Glade Medical- 3</li> <li>3. Delray Dental- 2</li> <li>4. Delray Medical-3</li> <li>5. Jupiter- 5</li> <li>6. Lake Worth Medical- 3</li> <li>7. Lantana dental- 7</li> </ol>			



	<p>8. Lantana Medical- 7 9. Mangonia- 9 10. Medical Clinic Administration- 4 11. West Boca- 4 12. West Palm Beach Dental- 3 13. West Palm Beach Medical -11</p> <p><b>(January Risk Report Summary presented with graphs.)</b></p>			
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**UTILIZATION**

<b>OPERATIONS</b>	<p><b>Productivity</b> The Clinics continue to see an increase in overall total billable visits since the start of the pandemic:</p> <table border="1"> <thead> <tr> <th colspan="6">Productivity January 2022</th> </tr> <tr> <th rowspan="2">Service Line</th> <th colspan="2">Target</th> <th colspan="2">Seen</th> <th rowspan="2">% of Goal</th> </tr> <tr> <th>In Person</th> <th>Tele</th> <th>In Person</th> <th>Tele</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Adult Care</td> <td>5396</td> <td></td> <td>4493</td> <td></td> <td>83%</td> </tr> <tr> <td>Pediatrics</td> <td>1275</td> <td></td> <td>1420</td> <td></td> <td>111%</td> </tr> <tr> <td>Women's Health</td> <td>726</td> <td></td> <td>549</td> <td></td> <td>76%</td> </tr> <tr> <td>Behavioral Health</td> <td>805</td> <td></td> <td>697</td> <td></td> <td>87%</td> </tr> <tr> <td>Substance Abuse</td> <td>845</td> <td></td> <td>906</td> <td></td> <td>107%</td> </tr> <tr> <td>Dental</td> <td>1741</td> <td></td> <td>1787</td> <td></td> <td>103%</td> </tr> <tr> <td>Dental Hygiene</td> <td>789</td> <td></td> <td>735</td> <td></td> <td>93%</td> </tr> <tr> <td>Residents</td> <td>718</td> <td></td> <td>573</td> <td></td> <td>80%</td> </tr> <tr> <td>Total</td> <td>12,294</td> <td></td> <td>11,160</td> <td></td> <td>91%</td> </tr> </tbody> </table>	Productivity January 2022						Service Line	Target		Seen		% of Goal	In Person	Tele	In Person	Tele	Total	Adult Care	5396		4493		83%	Pediatrics	1275		1420		111%	Women's Health	726		549		76%	Behavioral Health	805		697		87%	Substance Abuse	845		906		107%	Dental	1741		1787		103%	Dental Hygiene	789		735		93%	Residents	718		573		80%	Total	12,294		11,160		91%	<p>Ensure the frontline is continuously trained on registering agricultural and seasonal worker patients and their families correctly</p> <p>Separate Mangonia from the data dashboard of average Visits per patient</p> <p>Add the title of the provider to the Productivity list</p> <p>Start Productivity dashboard 6 months back</p>	<p>Carolina &amp; Erik</p> <p>Andrea or Grace</p> <p>Ivonne</p> <p>Ivonne</p>	
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	<p><b><i>(Clinic productivity report with graphs was presented.)</i></b></p> <p><b>Walk-ins</b>          Medical</p> <ul style="list-style-type: none"> <li>Scheduled: 7,097</li> <li>Walk-Ins: 1,541</li> </ul> <p>Dental:</p> <ul style="list-style-type: none"> <li>Scheduled: 2,125</li> <li>Walk-Ins: 397</li> </ul>			
	<p><b>No Show Rates</b>          No Show rates are trending downward and are at a rate of 19%, down 22% from this time last year.</p> <p><b>(Report with graph presented.)</b></p>			
<b>PATIENT RELATIONS</b>				
<b>GRIEVANCES, COMPLAINTS &amp; COMPLIMENTS</b>	<p><b><u>Patient Relations Dashboard</u></b>          For December 2022, there were a total of 13 Patient Relations Occurrences that occurred between 5 Clinics and Clinic Administration. Of the 13 occurrences, there were 2 Grievances and 11 Complaints. The top 5 categories were Respect Related, Care &amp; Treatment, Physician Related, Communication and Finance issues. The top subcategories were Refusal for Treatment, Physician Related All Aspects of Care, Bad Attitude/Rude and Privacy Issues, with 2 occurrences each. There was also a total of 12 compliments across 4 Clinics, of which 9 were</p>			

	<p>received from patients and 3 were from team member “thumbs-up”.</p> <p><b><i>(Patient Relations Report &amp; Patient Relations Dashboard with Graphs presented.)</i></b></p>			
<p><b>SURVEY RESULTS</b></p>	<p><b><u>Patient Satisfaction Survey –December 2022</u></b></p> <p>From January thru December 2022, the clinics sent 116,162 patient Satisfaction surveys patients, of which 20% of the surveys were opened and patients completed 4% of the surveys. For December 2022, 426 Patient Satisfaction Surveys were completed, which is a 34% increase from the previous month and represents 4% of total patient visits for the month. The top 5 and lowest 5 scored questions were presented. Of the 426 surveys, 64% were submitted by females and 36% by males; most patients prefer appointments on Tuesday mornings, and patients completed the most surveys after the first visit to the practice. Promoter scores increased by 2%, and detractor scores decreased by 2% compared to last month. The Net promoter Score increased from 59 to 67.</p> <p>Highest Promoters for December 2022 (bold = new to the 5 best questions and both related to customer service):</p> <ul style="list-style-type: none"> <li>• Care and concern of our nurses/medical assistants (85%)</li> <li>• Courtesy of the person who took your call (83%)</li> <li>• Our practice (83%)</li> <li>• Quality of Medical Care (83%)</li> <li>• Friendliness of the Receptionist upon your arrival (82%)</li> </ul>			

	<p>Highest Detractors for November 2022: (*= Improvements from prior month). Four of the top 5 detractors improved from last month.</p> <ul style="list-style-type: none"> <li>• Being informed about any delays during this visit (21%) *</li> <li>• Your ability to contact us after hours (19%) *</li> <li>• Your phone calls answered promptly (17%)</li> <li>• Waiting time in the reception area (17%) *</li> <li>• Waiting time in the exam room (15%) *</li> <li>• NOTE: Appointment available within a reasonable amount of time was not a detractor.</li> </ul> <p>The Boca Clinic had the greatest rate of return at 12% of all visits provided. December data presented by: rates of return by clinic, top promoter and detractor scores by clinic, patient comments by clinic. The Boca clinic had the highest rate of return and highest rate of Promoter scores. Trends over time presented as a clinic roll-up, by individual question and by clinic location. The Boca clinic had the highest average of Promoters and lowest average of Detractors for 2022. The West Palm Beach Clinic had the lowest average of Promoters and highest average of Detractors for 2022.  <b>(Patient Satisfaction Survey PowerPoint presented.)</b></p>			
<b>OUTBOUND CALL CAMPAIGNS</b>	<p><b><u>Provider Reschedules:</u></b>        In January 2023, The Clinic Service Center contacted 71 patients to reschedule their appointment. This</p>			

	<p>was due to the provider being on PTO, the provider being unavailable. This decreased by 16.47% from the previous month when we rescheduled 85 patients. This is the lowest rescheduling rate in over a year.</p> <p><b><u>Outbound Campaigns</u></b>  <i>Dental campaign in the process</i></p> <p><b><u>After Hours Call Return Summary Report – January 2023</u></b>        In January 2022, the Clinic Service Center returned 84 calls received from the After-Hours service. This was a 49% decrease from the previous month. After-hours calls by Type, by clinic, and by Department presented. Of the 84 after hours calls received 17 (20%) of the calls were paged out to the on-call provider for a clinical issue. There were 4 calls paged out to a recovery coach. All clinical issues were paged out. The majority of after-hours calls were for appointment requests. Trends over time reported.  <b><i>(Outbound Campaign PowerPoint presented.)</i></b></p>			
<p><b>NEXT THIRD AVAILABLE</b></p>	<p><b><u>Next Third Available</u></b>        The Next Third Available (NTA) report as of January 31, 2023, was presented by the Clinic location and included all associated departments. The report excludes “same day” appointment slots available each Monday through Friday. Monthly data and trends are presented for each clinic and service line over time. A “decrease” is an improvement in NTA, whereas an “increase” is a lengthening of days to wait for an appointment. Covering providers are excluded from the analysis. Trends over time presented. Next Third</p>	<p>Update the next third available monthly trend average days slide to the average of all clinic providers</p>	<p>David &amp; Monica</p>	

	<p>available is generally decreasing (improving across all clinics).</p> <p><b><u>Women’s Health:</u></b> Data under review as the report may be including “same day” appointments which would erroneously increase this metric.</p> <ul style="list-style-type: none"> <li>• LW: between 0 and 1day. Decreased from last month (0/9 days).</li> <li>• BG: between 15 and 31 days. Increased from last month (17/22 days)</li> </ul> <p><b><u>Primary Care</u></b></p> <p>Belle Glade PCC:</p> <ul style="list-style-type: none"> <li>• Providers: between 4 and 8 days wait. Decreased compared to last month (12/25 days wait)</li> <li>• Residents: between 0 and 46. Decreased short-term access from last month (9/15 days wait)</li> </ul> <p>Boca PCC: 0 days wait. Same compared to last month</p> <p>Delray Beach PCC: Between 0 and 17 days wait. Decreased compared to last month (1/39 days wait)</p> <p>Jupiter PCC: Between 2 and 7 days wait. Decreased compared to last month (3/29 days wait)</p> <p>Lake Worth PCC: Between 0 and 5 days wait. Decreased from last month (33/54 days wait)</p> <p>Lantana PCC:</p>			
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	<ul style="list-style-type: none"> <li>• Adults: Between 28 and 49 days wait. Increased from last month (6/73 days wait)</li> <li>• Peds: Between 8 and 22 days wait. Decreased from last month (35/58 days wait)</li> </ul> <p>Lewis Center PCC: Zero (0) day wait. Same from last month.</p> <p>Mangonia Park PCC: 3 days wait. Increased short-term access from last month (0/8 days wait)</p> <p>WPB PCC:</p> <ul style="list-style-type: none"> <li>• Adults: Between 0 and 39 days wait. Decreased compared to last month (0/63 days wait)</li> <li>• Peds: Between 6 and 9 days wait. Increased from last month (6/26 days wait)</li> </ul> <p><b><u>Behavioral Health:</u></b></p> <ul style="list-style-type: none"> <li>• Mangonia Park: Between 0 and 1 days wait. Decreased compared to last month</li> <li>• Other Locations:       <ul style="list-style-type: none"> <li>▪ BG: 2 days.</li> <li>▪ All other locations. Between 0 and 1 days</li> </ul> </li> </ul> <p><b><u>Dental</u></b></p> <p>New Adult (Comps):</p> <ul style="list-style-type: none"> <li>• BG: 2 days wait. Increased compared to last month (4 days)</li> <li>• DB: 18 days wait. Same as last month</li> <li>• WPB: NA</li> </ul> <p>New Peds (Comps):</p>			
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	<ul style="list-style-type: none"> <li>• BG: 0 day wait. Same as last month</li> <li>• LAN: 0 day wait. Decreased compared to last month (69/92 days)</li> <li>• WPB: 10 days wait. Increased compared to last month (7 days).</li> </ul> <p>Dental Procedures:</p> <ul style="list-style-type: none"> <li>• BG: Between 0 days wait. Decreased from last month (7 days)</li> <li>• DB: Between 0 days wait. Decreased from last month (3 days)</li> <li>• LAN: Between 0 and 52 days wait. Decreased from last month (0/79)</li> <li>• WPB: Between 0 and 20 days wait. Increased from last month (0/3)</li> </ul> <p>Hygiene:</p> <ul style="list-style-type: none"> <li>• BG: Between 0 and 28 days wait. Increased from last month</li> <li>• DB: Between 2 days wait. Increased short-term access from last month (1/3)</li> <li>• LAN: Zero (0) day wait. Same as last month</li> <li>• WPB: Zero (0) day wait. Decreased from last month (1/3 days)</li> </ul> <p><i>(Third Next Available PowerPoint presented.)</i></p>			
<b>QUALITY</b>				
<b>QUALITY AUDITS</b>				
<b>MEDICAL</b>	<p><b><u>Hemoglobin A1C/Point of Care Testing</u></b>          Shows:          The diabetes measure data for January-December 2022 shows that our patients are currently controlled at <u>72</u> %</p>			



	<p>while 25% are uncontrolled (from 3988 diabetic patients total) and 3% of patients need data. HRSA goal is to have 67% of patients with controlled diabetes. There were 3543 POC A1Cs done (88% of Diabetic Patients). The majority of controlled patients had 90% and uncontrolled 96% patients had the A1c done at POC vs. lab. The Belle Glade Clinic (91%). Jupiter Clinic (92%) and WPB Clinic (92%) have the highest percentage of A1c use among all the clinics in 2022. At the same time, Belle Glade _clinic (4%) and WPB clinic have highest percentage of untested patients as November, 2022. From 116 patients who did not have data, 29% had already a future appointment, 71% patients did not have a schedule future appointment.</p>			
	<p><b><u>Colorectal Cancer Screening</u></b></p> <p>Satisfied: 3802 (47%)          Needs Data: 4230 (53%)</p>			
	<p><b><u>FIT Test</u></b></p> <p>It appears that Fit tests are not being returned as expected. Our highest return rates were at Boca Clinic 334 (55%), Lake Worth Clinic 672 (52%), and 659 (51%).</p> <p>Belle Glade Clinic, Lantana Clinic and West Palm Beach Clinic are leading the charge in Point of Care FIT Tests.</p> <p><b>(Report with graph presented.)</b></p>			
	<p><b><u>Cervical Cancer Screening</u></b></p>			

	<p>Satisfied: 5316(53%)          Needs Data: 4740 (47%)</p>			
	<p><b><u>Breast Cancer Screening</u></b>          Satisfied screenings – 2394 (56%)          Unsatisfied Screenings – 1856 (44%)</p> <ul style="list-style-type: none"> <li>• Not Met with order –1477 (80%)</li> <li>• Not Met (Patient Missed) – 379(20%)</li> <li>•</li> </ul> <p>Jan-November: Satisfaction improved from 55%- 56% while the number of patients not met with order decreased from 45%-44%.</p>			
<b>DENTAL</b>	<p><b><u>Dental Sealants</u></b></p> <p>January – December 2022: <b>97% (594; n=612)</b></p> <p>December 2022: <b>99% (120; n=121)</b></p>			
	<p><b><u>Limited Exams</u></b></p> <p><b>December 2022: 358</b></p> <p>-Same Day Extractions: 182 (51% n=358)          -Antibiotics Given: Patients without a future extraction appointment type 94 (26% n=358)          -Ext. not needed(non-emergent): 69 (19%n=358)          -Returns (Follow-Up): Patients with a future extraction appointment type 13 (4% n=358)          -Returned within 21 days for ext.: 10 (77% n=13)</p>			

	<p><b><u>MDI/WHO</u></b></p> <p><b>December 2022</b></p> <p><b><u>Total Well Visit Pediatric Patients 155</u></b></p> <ul style="list-style-type: none"> <li>- Excluded from MDI <b>50 (32%; n=155)</b></li> <li>- Eligible MDI <b>105 (68%; n=155)</b></li> </ul> <p><b><u>Total Pediatrician KPI Patients (Pts who do not have a dental home): 105</u></b></p> <ul style="list-style-type: none"> <li>- No MDI <b>10 (10% n=105)</b></li> <li>- MDI <b>95 (90% n=105)</b></li> </ul> <p><b><u>Total of patients who had MDI visit: 95</u></b></p> <ul style="list-style-type: none"> <li>- No WHO <b>55 (57% n=95)</b></li> <li>- <u>WHO 40 (42% n=95)</u></li> </ul> <p><b><u>Total Dentist KPI Patients (Pts. who qualified for WHO): 40</u></b></p> <ul style="list-style-type: none"> <li>- WHO seen by Dentists <b>34 (85%; n=40)</b></li> <li>- WHO not seen by Dentists <b>6 (15%; n=40)</b></li> </ul>													
	<p><b>Dental Clinic Audit Summary</b></p> <table border="1" data-bbox="394 1138 1096 1414"> <tr> <td colspan="2"><b>Dental Clinic Audit - January 2023</b></td> </tr> <tr> <td><b>Belle Glade</b></td> <td><b>95%</b></td> </tr> <tr> <td><b>Delray</b></td> <td><b>95%</b></td> </tr> <tr> <td><b>Lantana</b></td> <td><b>95%</b></td> </tr> <tr> <td><b>West Palm Beach</b></td> <td><b>93%</b></td> </tr> </table>	<b>Dental Clinic Audit - January 2023</b>		<b>Belle Glade</b>	<b>95%</b>	<b>Delray</b>	<b>95%</b>	<b>Lantana</b>	<b>95%</b>	<b>West Palm Beach</b>	<b>93%</b>			
<b>Dental Clinic Audit - January 2023</b>														
<b>Belle Glade</b>	<b>95%</b>													
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<b>Lantana</b>	<b>95%</b>													
<b>West Palm Beach</b>	<b>93%</b>													

<p><b>NURSING</b></p>	<p><u>Higher Level of Care</u>          Higher Level of Care December          94 ER referrals/90 patients were sent to the ER in December. The breakdown of the referrals is:</p> <ul style="list-style-type: none"> <li>• WH- 13 (14%)</li> <li>• Peds- 20 (21%)</li> <li>• Adult- 60 (64 %)</li> <li>• Adult Crisis- 1 (1%)</li> <li>• Peds Crisis-0</li> </ul> <p>There were 4 patients with multiple orders in December-</p> <ol style="list-style-type: none"> <li>1. Patient was referred by telemedicine for SOB, urinary retention. Referral appropriate but <b>recommend patient to have in clinic visit if able (all visits tele since August 2022)</b>. Second referral was tele as well. UTI from culture on 12/8 during first ER referral. <b>Questions regarding process between first and second referrals.</b></li> <li>2. Patient was referred during after hours on call discussion with on call provider. Second referral was for same patient but for adult crisis stabilization, <b>not the same reason as first referral.</b></li> <li>3. Patient had 2 referrals ordered in same day- 1 by medical and 1 by dental. Both for chest</li> </ol>			

<p>pain following anesthesia in dental. <b>Education regarding 1 referral needed from 1 dept.</b></p> <p>4. Patient sent to ER during Nurse visit and then again on return follow up visit with provider. Both for noncompliance with dialysis schedule- symptomatic. <b>Both referrals appropriate.</b></p> <p>PEDS REFERRALS- highest producer was Dr. Clarke- having 8 (40%); Dr. Marzouca 5 (25%). (Both providers are in WPB)</p> <p>The incorrect referral type was used by Dr. Clarke for 2 of her 8 pediatric referrals and Dr. Lazaro was 1 of the 3 referrals. (AMB Pediatric Emergency Medicine referral should be used)</p> <p>ADULT REFERRALS- highest producer this month was Dr. Dabu with 6 (10%).</p> <p>The incorrect referral type was used by Maria Lara (November as well) and resident Milhenka Auguste. (AMB referral to Emergency Medicine should be used)</p> <p>Can we remove the Emergency Medicine Referrals for both adult and peds that DO NOT HAVE AMB?</p> <p>Inter-clinic transport referral is active but not being utilized. Retraining is scheduled.</p>			
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	<p><b><u>HIV Linkage To Care</u></b> 8 out of 12 were linked to care within 30 days.</p>			
<b>PEER REVIEW</b>	<p><b>Adult Medical:</b> <u>69</u> charts were peer-reviewed. <u>58</u> were evaluated as “within the standard of care,” <u>11</u> were evaluated as “Provider Self-identified Remediation,” <u>0</u> as “Provider Education Required,” and <u>0</u> charts were evaluated as “Inappropriate care.”</p>			
	<p><b>Dental:</b> <u>40</u> charts were peer-reviewed. <u>32</u> were evaluated as “within the standard of care,” <u>8</u> were evaluated as “Provider Self-identified Remediation,” <u>0</u> as “Provider Education Required,” and <u>0</u> charts were evaluated as “Inappropriate care.”</p>			
	<p><b>Hygiene:</b> <u>20</u> charts were peer-reviewed. <u>8</u> were evaluated as “within the standard of care,” <u>12</u> were evaluated as “Provider Self-identified Remediation,” <u>0</u> as “Provider Education Required,” and <u>0</u> charts were evaluated as “Inappropriate care.”</p>			
	<p><b>New Provider:</b> <u>10</u> charts were peer-reviewed. <u>5</u> were evaluated as “within the standard of care,” <u>1</u> was evaluated as “Provider Self-identified Remediation,” <u>4</u> as “Provider Education Required,” and <u>0</u> charts were evaluated as “Inappropriate care.”</p>			

## QUALITY METRICS

### UDS YTD 2022

Of the 16 UDS Measures: 10 Exceeded the HRSA Goal and 6 were short of the HRSA Goal (*Clinic Score/ HRSA Goal / Healthy People Goal*)

<b>Medical UDS Report</b>	<b>Adult Weight screening and follow-up:</b> ( <u>76</u> % / 90%)			
	<b>Breast Cancer Screening:</b> ( <u>56</u> %/60%)			
	<b>Cervical Cancer Screening:</b> ( <u>59</u> % /65%)			
	<b>Childhood immunization:</b> ( <u>21</u> %/ 60%)			
	<b>Colorectal Cancer Screening:</b> ( <u>50</u> % / 82%)			
	<b>Coronary Artery Disease CAD:</b> ( <u>83</u> % / 81%)			
	<b>Dental Sealants:</b> ( <u>97</u> % / 75% )			
	<b>Depression Remission:</b> ( <u>25</u> % / 14% )			
	<b>Diabetes:</b> ( <u>72</u> % / 67% )			
	<b>HIV Screening:</b> ( <u>36</u> % / 32%)			
	<b>Hypertension:</b> ( <u>69</u> % / 80% )			
	<b>Ischemic Vascular Disease (IVD):</b> ( <u>79</u> % / 86%)			
	<b>Depression screening:</b> ( <u>92</u> % / 83% )			
	<b>Depression screening (Homeless):</b> ( <u>  </u> % / 83% )			
	<b>Tobacco use screening &amp; cessation:</b> ( <u>94</u> % / 93%)			
<b>Weight assessment, Children &amp; Adolescents:</b> ( <u>93</u> % /90%)				

**Meeting Adjourned: 5:00 PM**

# UDS PROVIDER LEVEL QUALITY MEASURES 2023

## NATIONAL QUALITY LEADER METRICS

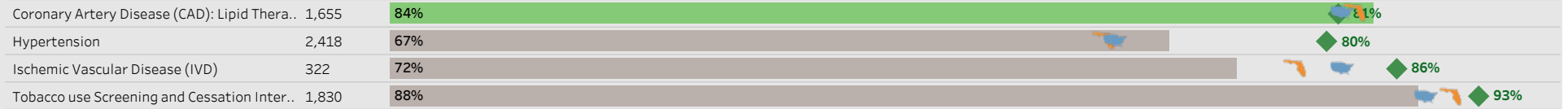
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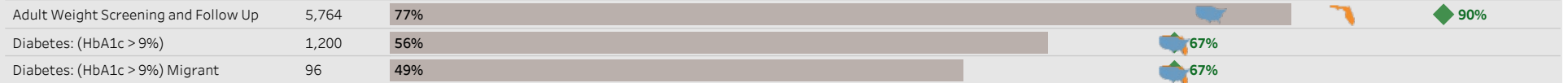
### HEART HEALTH

Universe

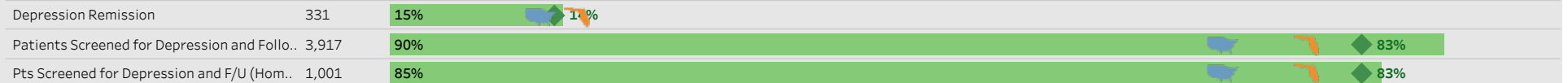
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 ■ Not Met   
 ◆ HRSA Goal   
 🇺🇸 National Average   
 🇺🇸 State Average



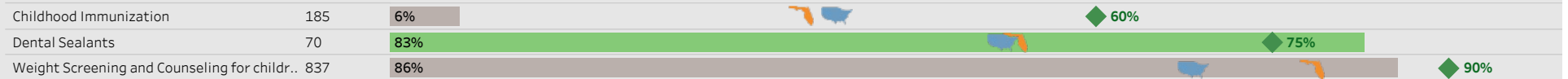
### DIABETES



### BEHAVIORAL HEALTH



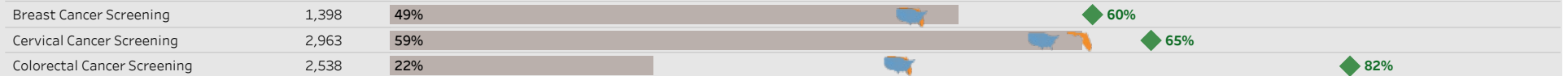
### CHILDHOOD MEASURES



### HIV PREVENTION AND CARE



### CANCER PREVENTION





**PRODUCTIVITY REPORT JANUARY 2023**

**ALL PROVIDERS**

AS 01/31/2023 Based on Completed Appointments

<5%

>=51% and < 80%

>= 80% and <100%

>= 100%

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen		% Monthly Target Achieved		Daily Average
			AM	PM	Total	AM	PM	Total		
ALFONSO PUENTES, RAMIRO	17	15.5	162	102	264	149	76	225	85%	14.5
BUI, THY	17	8.5	92	54	146	84	71	155	106%	18.2
CASTIGLIA, SARAH	17	18.5	194	122	316	97	47	144	46%	7.8
DABU, DARNEL	*** 7 / 17	6.0	20	17	36	14	15	29	80%	4.8
DONNELL, MASON	15	19.5	180	114	294	156	77	233	79%	11.9
FERNANDEZ SANCHEZ, MARCO	15	9.5	89	54	143	115	28	143	100%	15.1
FLOREZ, GLORIA	17	18.0	193	116	308	164	101	265	86%	14.7
HARBERGER, SENECA	17	19.0	194	116	309	153	81	234	76%	12.3
JEAN-JACQUES, FERNIQUE	15	20.0	188	114	302	202	84	286	95%	14.3
KOOPMAN, REBECCA	15	21.0	204	114	318	271	120	391	123%	18.6
LAM, MINH DAI	15	9.5	89	54	143	102	52	154	108%	16.2
LANGLEY, TAMARA	15	17.5	162	102	264	146	90	236	89%	13.5
LARA SUAREZ, MARIA	15	12.5	117	72	189	100	66	166	88%	13.3
NAVARRO, ELSY	15	15.0	143	84	227	141	63	204	90%	13.6
NOUKELAK, GERMAINE	17	19.0	203	122	325	166	86	252	77%	13.3
PEREZ, DANIEL JESUS	***8 / 17	5.5	23	20	43	17	17	34	78%	6.2
PHILISTIN, KETELY	15	20.0	188	114	302	153	79	232	77%	11.6
PIERRE LOUIS, JOANN	15	18.0	170	102	272	156	69	225	83%	12.5
ST. VIL, CARLINE	15	15.5	143	90	233	128	62	190	82%	12.3
STANEK, EWELINA	15	19.0	179	108	287	155	75	230	80%	12.1
TAHERI, NERGESS	17	2.0	19	12	31	19	12	31	100%	15.5
WARREN, SANDRA	17	8.0	91	48	138	70	30	100	72%	12.5
WILKINSON, SARAH	15	19.5	180	114	294	134	56	190	65%	9.7
WILMOT, ALTHEA	15	12.0	92	62	154	45	30	75	49%	6.3
<b>ADULT CARE TOTALS</b>		<b>348.5</b>	<b>3,312</b>	<b>2,028</b>	<b>5,340</b>	<b>2,937</b>	<b>1,487</b>	<b>4,424</b>	<b>83%</b>	

\*\*\* Avg Target Precepting

RESIDENCY PROGRAM										
PY1	6	19.5	68	35	104	68	38	106	102%	5.4
PY2	10	30.0	205	100	305	178	90	268	88%	8.9
PY3	14	29.0	261	141	402	181	110	291	72%	10.0
<b>RESIDENTS TOTAL</b>		<b>78.5</b>	<b>535</b>	<b>276</b>	<b>811</b>	<b>427</b>	<b>238</b>	<b>665</b>	<b>82%</b>	

PEDIATRIC CARE										
CLARKE-AARON, NOELLA	17	16.0	163	109	272	180	110	290	107%	18.1
DESSALINES, DUCLOS	17	15.5	163	102	265	178	98	276	104%	17.8
LAZARO RIVERA, NANCY	17	16.0	163	109	272	211	97	308	113%	19.3
MARZOUCA, KISHA F.	17	17.5	184	116	299	215	131	346	116%	19.8
NORMIL-SMITH, SHERLOUNE	17	16.5	173	109	282	208	102	310	110%	18.8
<b>PEDIATRIC CARE TOTALS</b>		<b>81.5</b>	<b>847</b>	<b>544</b>	<b>1,391</b>	<b>992</b>	<b>538</b>	<b>1,530</b>	<b>110%</b>	

WOMEN'S HEALTH CARE										
FERWERDA, ANA	*** 17 / 14 BG	10.0	115	51	166	92	44	136	82%	13.6
FINLEY, NICOLE	15	18.5	171	108	279	158	88	246	88%	13.3
PROPHETE, JOYCE	*** 17 / 14 BG	19.5	197	124	321	144	80	224	70%	11.5
<b>WOMEN'S HEALTH CARE TOTALS</b>		<b>48</b>	<b>483</b>	<b>283</b>	<b>766</b>	<b>394</b>	<b>212</b>	<b>606</b>	<b>79%</b>	

BEHAVIORAL HEALTH INTEGRATION										
CALDERON, NYLSA	10	16.5	102	64	166	73	85	158	95%	9.6
BROWN, JEREMY	**6	7.0	24	16	40	19	21	40	100%	5.7
JONES, KIARA	*** 9	18.5	104	65	169	100	87	187	111%	10.1
LUCCHESI, KAREN	10	16.5	102	64	166	69	72	141	85%	8.5
CUSIMANO, ANGELA	12	6.5	50	29	79	25	20	45	57%	6.9
<b>BH INTEGRATION TOTALS</b>		<b>65</b>	<b>382</b>	<b>238</b>	<b>620</b>	<b>286</b>	<b>285</b>	<b>571</b>	<b>92%</b>	

\*\* Avg New provider \*\*\* Avg Training Provider

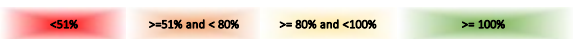
BEHAVIORAL HEALTH ADDICTION										
PETER, AMANDA	12	19.5	144	91	235	89	62	151	64%	7.7
BURROWES, SHARON	12	16.0	115	77	192	48	41	89	46%	5.6
HIRSCH, KAREN	6	8.0	29	19	48	21	23	44	92%	5.5
MILETA, SNEJZANA	10	19.0	120	72	192	167	79	246	128%	12.9
MITCHELL, ANGELA	10	18.0	108	72	180	125	65	190	106%	10.6
REXACH, CLAUDIA	10	16.0	96	64	160	144	79	223	139%	13.9
<b>BH ADDICTION TOTALS</b>		<b>96.5</b>	<b>612</b>	<b>395</b>	<b>1007</b>	<b>594</b>	<b>349</b>	<b>943</b>	<b>94%</b>	

DENTAL										
ABREU, MARIANA	16	20.5	208	122	330	172	61	233	71%	11.4
ALI, BUSHRA	16	19.5	192	122	314	167	96	263	84%	13.5
ALWEHAIB, ARWA	16	19.5	192	122	314	179	91	270	86%	13.8
BOWEN, BEVERLY	16	19.5	192	122	314	154	99	253	81%	13.0
CUCURAS, JOHN N	16	11.0	103	69	172	119	34	153	89%	13.9
SEMINARIO, ADA	16	19.5	192	122	314	168	94	262	84%	13.4
SOFIANOS, MICHAEL	16	17.0	173	102	275	173	78	251	91%	14.8
WILLIAMS, RICHARD	16	20.0	200	122	322	168	101	269	84%	13.5
<b>DENTAL TOTALS</b>		<b>146.5</b>	<b>1,452</b>	<b>901</b>	<b>2,353</b>	<b>1,300</b>	<b>654</b>	<b>1,954</b>	<b>83%</b>	

DENTAL HYGIENE										
MOZER NASCIMENTO, ARIANNE	8	19.5	96	61	157	85	66	151	96%	7.7
GONZALEZ, NANCY	8	1.0	5	3	8	2	4	6	75%	6.0
HARDCASTLE, CORINA	8	18.5	91	58	149	71	72	143	96%	7.7
DUCHARME, RHONDA	8 / 16 MDI	15.5	154	96	250	50	187	237	95%	15.3
PETERSEN, PATRICE	8 / 16 MDI	17.5	171	109	281	108	178	286	102%	16.3
<b>DENTAL HYGIENE TOTALS</b>		<b>72.0</b>	<b>517</b>	<b>327</b>	<b>844</b>	<b>316</b>	<b>507</b>	<b>823</b>	<b>98%</b>	

<b>GRAND TOTAL</b>		<b>936.5</b>	<b>8,140</b>	<b>4,992</b>	<b>13,132</b>	<b>7,246</b>	<b>4,270</b>	<b>11,516</b>	<b>88%</b>	
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# PRODUCTIVITY REPORT JANUARY 2023

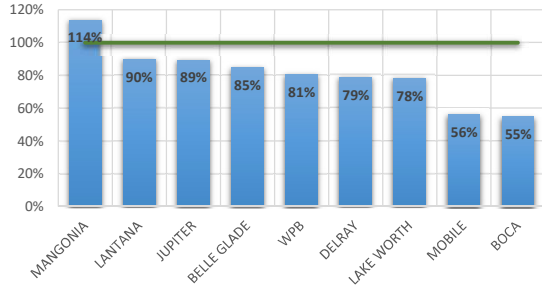


ALL CLINICS

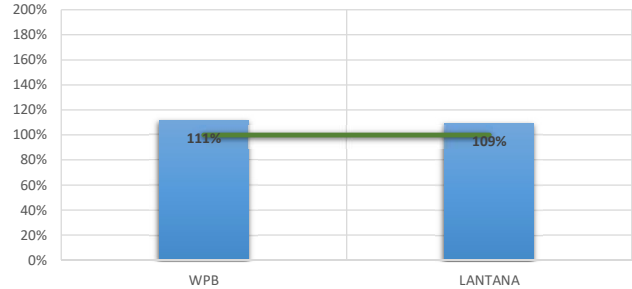
AS 01/31/2023 Based on Completed Appointments

Category	Target for the Month			Total for the Month Seen			% Monthly Target Achieved
	AM	PM	Total	AM	PM	Total	
AS 01/31/2023							
ADULT CARE	3,312	2,028	5,340	2,937	1,487	4,424	83%
PEDIATRIC CARE	847	544	1,391	992	538	1,530	110%
WOMEN'S HEALTH CARE	483	283	766	394	212	606	79%
BH INTEGRATION	382	238	620	286	285	571	92%
BH ADDICTION	612	395	1,007	594	349	943	94%
DENTAL HEALTH	1,452	901	2,353	1,300	654	1,954	83%
DENTAL HYGIENE	517	327	844	316	507	823	98%
RESIDENCY PROGRAM	535	276	811	427	238	665	82%
<b>Grand Total</b>	<b>8,140</b>	<b>4,992</b>	<b>13,132</b>	<b>7,246</b>	<b>4,270</b>	<b>11,516</b>	<b>88%</b>

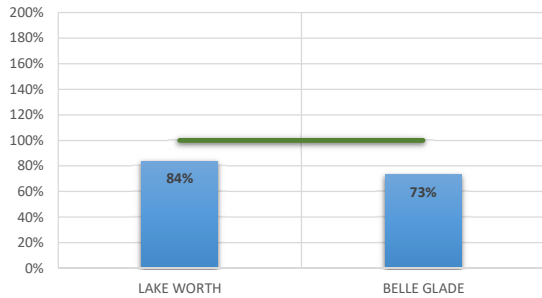
Adult Care



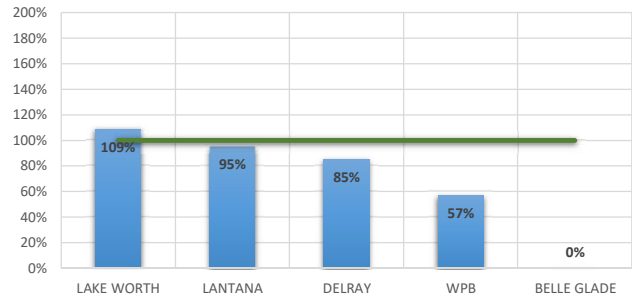
Pediatric Care



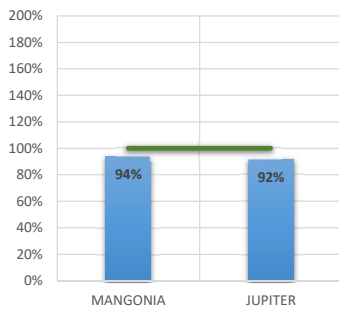
Women's Health Care



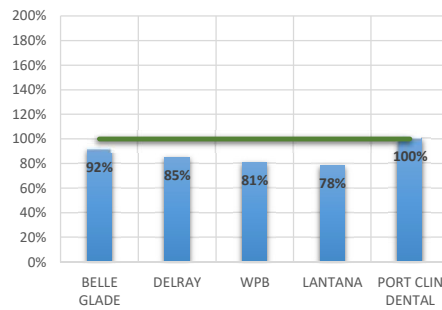
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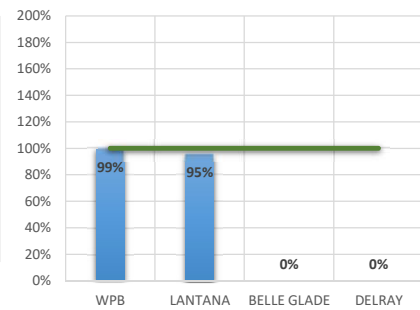
BH Addiction



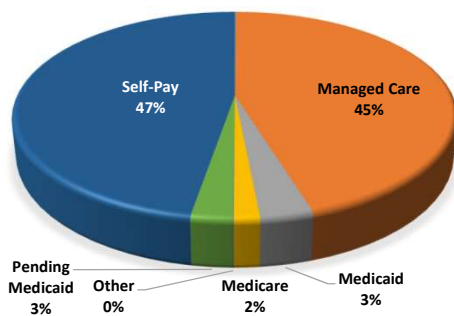
Dental



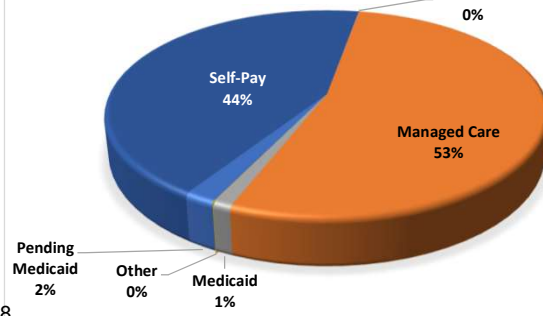
Dental Hygiene



MEDICAL PAYER MIX



DENTAL PAYER MIX



	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
<b>ADULT CARE</b>												
ALFONSO PUENTES, RAMIRO	82%	88%	88%	85%								
	288/352	249/283	212/240	225/264								
BUI, THY	87%	94%	96%	106%								
	328/377	223/237	344/359	155/146								
CASTIGLIA, SARAH	45%	60%	50%	46%								
	115/255	165/274	164/330	144/316								
DABU, DARNEL	64%	100%	92%	80%								
	130/204	62/62	41/45	29/36								
DONNELL, MASON	100%	100%	100%	79%								
	19/19	109/109	132/132	233/294								
DORCE-MEDARD, JENNIFER	120%											
	12/10											
FERNANDEZ SANCHEZ, MARCO	91%	90%	96%	100%								
	296/325	150/135	282/294	143/143								
FLOREZ, GLORIA	86%	66%	82%	86%								
	264/306	189/124	167/204	265/308								
HARBERGER, SENECA	86%	70%	100%	76%								
	177/206	247/172	154/154	234/309								
JEAN-JACQUES, FERNIQUE	98%	95%	97%	95%								
	319/325	135/150	234/242	286/302								
KOOPMAN, REBECCA	108%	130%	98%	123%								
	261/242	348/267	238/242	391/318								
LAM, MINH DAI	100%	97%	107%	108%								
	325/326	243/250	307/288	154/143								
LANGLEY, TAMARA	75%	85%	89%	89%								
	207/275	206/242	276/309	236/264								
LARA SUAREZ, MARIA	98%	68%	78%	88%								
	141/144	163/240	242/189	189/166								
NAVARRO, ELSY	91%	90%	96%	90%								
	275/302	219/242	240/251	204/227								
NOUKELAK, GERMAINE	87%	74%	73%	77%								
	280/320	198/266	126/172	252/325								
PEREZ, DANIEL JESUS	94%	102%	90%	78%								
	119/126	42/41	33/37	34/43								
PHILISTIN, KETELY	85%	90%	85%	77%								
	283/333	218/243	276/325	232/302								

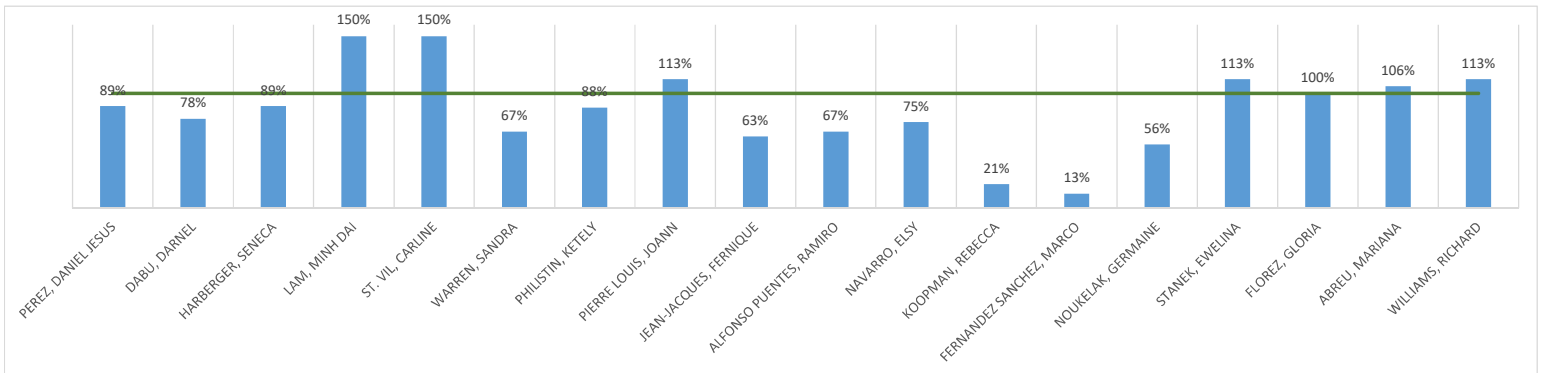
	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
PIERRE LOUIS, JOANN	83%	88%	83%	83%								
	246/295	187/212	236/196	272/225								
ST. VIL, CARLINE	88%	79%	79%	82%								
	219/249	167/212	186/234	190/233								
STANEK, EWELINA	90%	68%	76%	80%								
	186/208	171/250	240/317	230/287								
TAHERI, NERGESS	94%	100%	100%	100%								
	65/69	33/33	50/50	31/31								
WARREN, SANDRA	83%	75%	75%	72%								
	50/60	129/172	148/197	100/138								
WILKINSON, SARAH	67%	70%	63%	65%								
	212/317	128/182	190/303	190/294								
WILMOT, ALTHEA	82%	29%	35%	49%								
	132/161	66/231	68/192	75/154								
RESIDENTS	85%	92%	80%	82%								
	570/673	519/563	573/718	665/811								
<b>PEDIATRIC CARE</b>												
CLARKE-AARON, NOELLA	104%	111%	100%	107%								
	348/333	275/247	264/265	290/272								
CHIBAR, CHARMAINE		100%										
		5/5										
DESSALINES, DUCLOS	112%	112%	110%	104%								
	355/316	212/189	235/214	276/265								
LAZARO RIVERA, NANCY	129%	129%	127%	113%								
	421/326	310/241	316/248	308/272								
MARZOUCA, KISHA F.	108%	109%	106%	116%								
	354/326	284/261	372/350	346/299								
NORMIL-SMITH, SHERLOUNE	115%	116%	118%	110%								
	336/293	279/240	233/197	310/282								

	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
<b>WOMEN'S HEALTH CARE</b>												
FERWERDA, ANA	70%	62%	83%	82%								
	117/166	60/97	106/128	136/166								
FINLEY, NICOLE	72%	86%	80%	88%								
	89/123	207/240	210/264	246/279								
PROPHETE, JOYCE	69%	80%	70%	70%								
	194/282	218/272	233/334	224/321								
<b>BEHAVIORAL HEALTH INTEGRATION</b>												
CALDERON, NYLSA	93%	87%	93%	95%								
	80/86	131/150	191/206	158/166								
CUSIMANO, ANGELA	72%	62%	76%	57%								
	170/235	113/183	178/235	45/79								
JONES, KIARA	101%	96%	104%	111%								
	174/172	137/142	172/166	187/169								
BROWN, JEREMY				100%								
				40/40								
LUCCHESI, KAREN	85%	85%	80%	85%								
	158/186	127/150	140/176	141/166								
<b>BEHAVIORAL HEALTH ADDICTION</b>												
BURROWES, SHARON		100%	54%	46%								
		12/12	73/136	89/192								
HIRSCH, KAREN	100%	92%	67%	92%								
	12/12	48/52	44/66	44/48								
MILETA, SNJEZANA	124%	112%	179%	128%								
	174/140	181/162	226/126	246/192								
MITCHELL, ANGELA	114%	154%	120%	106%								
	208/182	205/133	235/196	190/180								
PETER, AMANDA	100%	99%	68%	64%								
	19/19	93/94	105/154	151/235								
PHILLIPS, COURTNEY	75%	100%	100%									
	54/72	5/5	1/1									
REXACH, CLAUDIA	120%	173%	134%	139%								
	196/236	232/134	222/166	223/160								

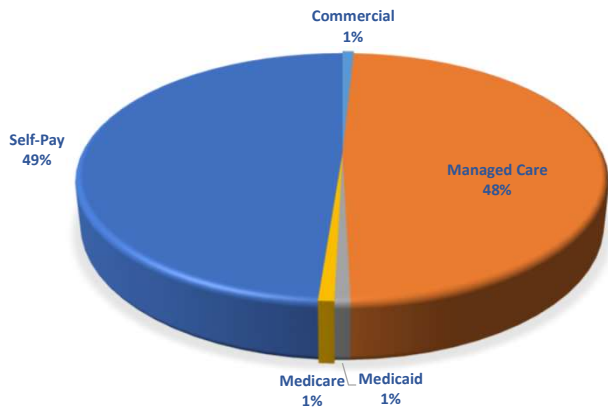
	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
<b>DENTAL</b>												
ABREU, MARIANA	100%	106%	107%	71%								
	28/28	189/178	226/211	233/330								
ALI, BUSHRA	144%	106%	99%	84%								
	176/254	138/130	204/206	263/314								
ALWEHAIB, ARWA	106%	115%	107%	86%								
	279/264	224/194	273/254	270/314								
BOWEN, BEVERLY	94%	120%	114%	81%								
	316/338	233/194	241/211	253/314								
CUCURAS, JOHN N	104%	115%	93%	89%								
	150/144	71/62	52/56	153/172								
SEMINARIO, ADA	94%	101%	95%	84%								
	215/228	99/98	223/235	262/314								
SOFIANOS, MICHAEL	94%	123%	111%	91%								
	243/258	246/200	247/274	275/251								
WILLIAMS, RICHARD	100%	102%	88%	84%								
	257/257	159/156	208/235	269/322								
ZANGENEH, YASMINE	99%	103%	102%									
	250/252	126/122	86/84									
GARCIA, IRENE S.	92%											
	11/12											
GONZALEZ, NANCY				75%								
				6/8								
HARDCASTLE, CORINA	101%	101%	98%	96%								
	159/157	130/129	138/141	143/149								
MASON, SHERRY	93%	94%	91%									
	153/165	91/97	139/152									
MOZER NASCIMENTO, ARIANNE	105%	102%	89%	96%								
	165/173	123/121	147/165	151/157								
DUCHARME, RHONDA				95%								
				237/250								
PETERSEN, PATRICE	121%	104%	94%	102%								
	297/246	231/222	309/330	286/281								



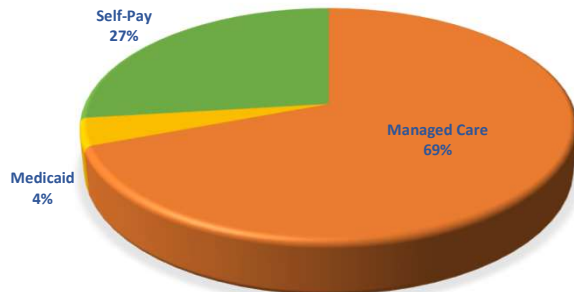
ADULT CARE										
Provider	Daily Target	# Saturdays Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
BELLE GLADE										
PEREZ, DANIEL JESUS	17	2	18		18	16		16	89%	8.0
DABU, DARNEL	17	1	9		9	7		7	78%	7.0
DELRAY										
HARBERGER, SENECA	17	1	9		9	8		8	89%	8.0
LAM, MINH DAI	15	1	8		8	12		12	150%	12.0
ST. VIL, CARLINE	15	1	8		8	12		12	150%	12.0
LAKE WORTH										
WARREN, SANDRA	17	1	9		9	6		6	67%	6.0
PHILISTIN, KETELY	15	1	8		8	7		7	88%	7.0
PIERRE LOUIS, JOANN	15	1	8		8	9		9	113%	9.0
LANTANA										
JEAN-JACQUES, FERNIQUE	15	1	8		8	5		5	63%	5.0
ALFONSO PUNTES, RAMIRO	17	1	9		9	6		6	67%	6.0
NAVARRO, ELSY	15	1	8		8	6		6	75%	6.0
MANGONIA										
KOOPMAN, REBECCA	15	3	24		24	5		5	21%	1.7
FERNANDEZ SANCHEZ, MARCO	15	1	8		8	1		1	13%	1.0
WEST PALM BEACH										
NOUKELAK, GERMAINE	17	1	9		9	5		5	56%	5.0
STANEK, EWELINA	15	1	8		8	9		9	113%	9.0
FLOREZ, GLORIA	17	1	9		9	9		9	100%	9.0
<b>ADULT CARE TOTALS</b>			<b>160</b>	<b>0</b>	<b>160</b>	<b>123</b>	<b>0</b>	<b>123</b>	<b>77%</b>	
DENTAL										
WEST PALM BEACH										
ABREU, MARIANA	16	2	16		16	17		17	106%	8.5
LANTANA										
WILLIAMS, RICHARD	16	1	8		8	9		9	113%	9.0
<b>DENTAL</b>			<b>24</b>	<b>0</b>	<b>24</b>	<b>26</b>	<b>0</b>	<b>26</b>	<b>108%</b>	
<b>GRAND TOTAL</b>			<b>184</b>	<b>0</b>	<b>184</b>	<b>149</b>	<b>0</b>	<b>149</b>	<b>81%</b>	



MEDICAL PAYER MIX



DENTAL





ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
PEREZ, DANIEL JESUS	***8	5.5	23	20	43	17	17	34	78%	6.2
DABU, DARNEL	***7	6.0	20	17	36	14	15	29	80%	4.8
TAHERI, NERGESS	17	2.0	19	12	31	19	12	31	100%	15.5
<b>ADULT CARE TOTALS</b>		<b>13.5</b>	<b>61</b>	<b>49</b>	<b>111</b>	<b>50</b>	<b>44</b>	<b>94</b>	<b>85%</b>	

\*\*\* Avg Target Precepting

RESIDENCY PROGRAM										
PY1	6	19.5	68	35	104	68	38	106	102%	5.4
PY2	10	30	205	100	305	178	90	268	88%	8.9
PY3	14	29	261	141	402	181	110	291	72%	10.0
<b>RESIDENTS TOTALS</b>		<b>78.5</b>	<b>535</b>	<b>276</b>	<b>811</b>	<b>427</b>	<b>238</b>	<b>665</b>	<b>82%</b>	

WOMEN'S HEALTH CARE										
FERWERDA, ANA	14	3.5	34	17	50	21	16	37	73%	10.6
PROPHETE, JOYCE	14	4	34	22	56	28	13	41	73%	10.3
<b>WOMEN'S HEALTH CARE TOTALS</b>		<b>7.5</b>	<b>67.2</b>	<b>39.2</b>	<b>106.4</b>	<b>49.0</b>	<b>29.0</b>	<b>78.0</b>	<b>73%</b>	

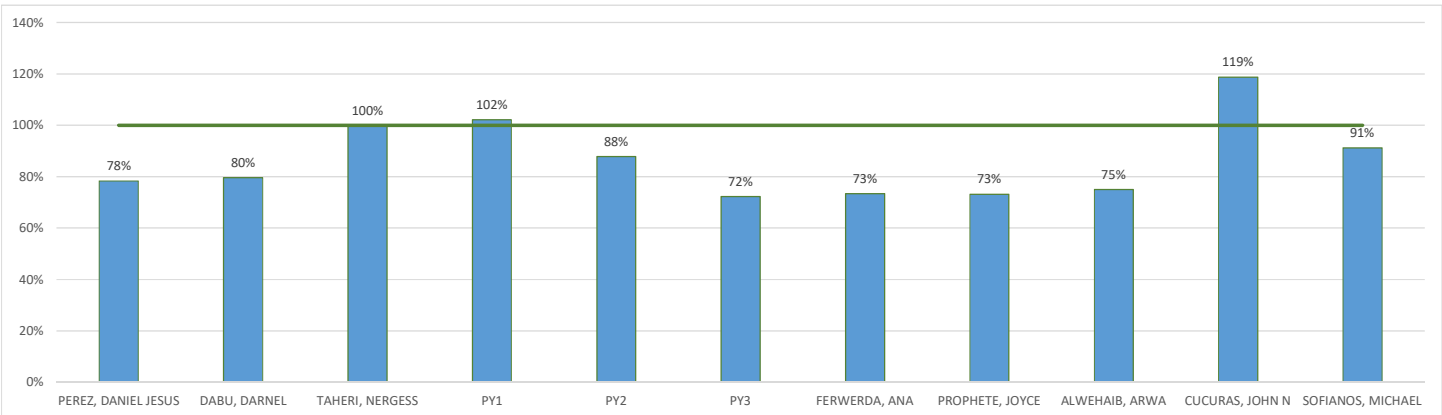
BEHAVIORAL HEALTH INTEGRATION										
<b>BH INTEGRATION TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

BEHAVIORAL HEALTH ADDICTION										
<b>BH ADDICTION TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

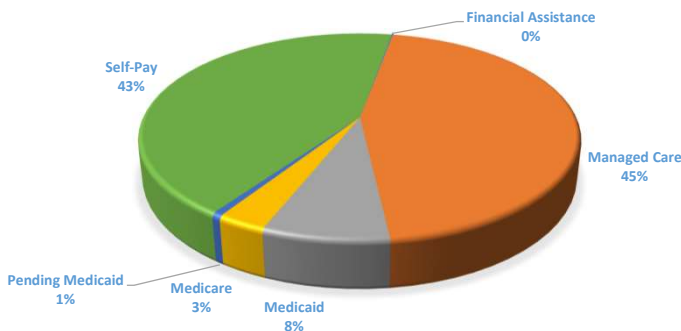
DENTAL										
ALWEHAIB, ARWA	16	1.0	10	6	16	9	3	12	75%	12.0
CUCURAS, JOHN N	16	1.0	10	6	16	12	7	19	119%	19.0
SOFIANOS, MICHAEL	16	17.0	173	102	275	173	78	251	91%	14.8
<b>DENTAL TOTALS</b>		<b>19.0</b>	<b>192</b>	<b>115</b>	<b>307</b>	<b>194</b>	<b>88</b>	<b>282</b>	<b>92%</b>	

DENTAL HYGIENE										
<b>DENTAL HYGIENE TOTALS</b>		<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

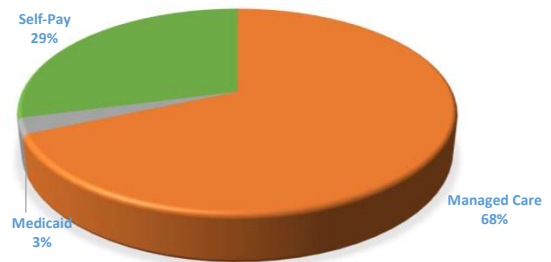
<b>GRAND TOTAL</b>		<b>118.5</b>	<b>855</b>	<b>480</b>	<b>1,336</b>	<b>720</b>	<b>399</b>	<b>1,119</b>	<b>84%</b>	
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**MEDICAL PAYER MIX**



**DENTAL PAYER MIX**

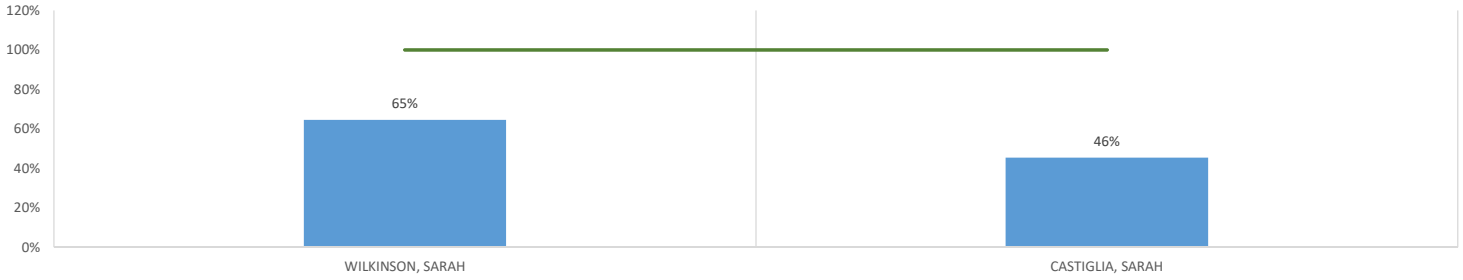




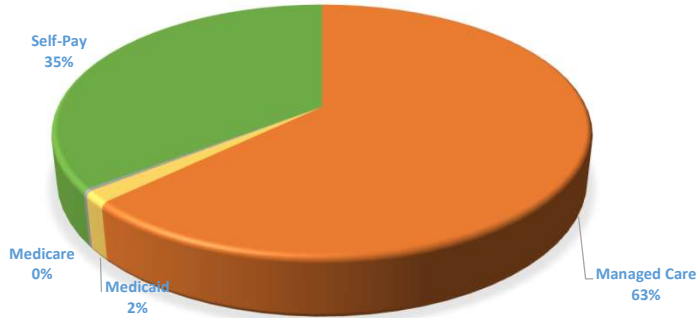
ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
WILKINSON, SARAH	15	19.5	180	114	294	134	56	190	65%	9.7
CASTIGLIA, SARAH	17	18.5	194	122	316	97	47	144	46%	7.8
<b>ADULT CARE TOTALS</b>		<b>38.0</b>	<b>374</b>	<b>236</b>	<b>610</b>	<b>231</b>	<b>103</b>	<b>334</b>	<b>55%</b>	

BEHAVIORAL HEALTH ADDICTION										
<b>BH ADDICTION TOTALS</b>		<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

<b>GRAND TOTAL</b>		<b>38.0</b>	<b>374</b>	<b>236</b>	<b>610</b>	<b>231</b>	<b>103</b>	<b>334</b>	<b>55%</b>	
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MEDICAL PAYER MIX



AS 01/31/2023 Based on Completed Appointments

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
HARBERGER, SENECA	17	19	194	116	309	153	81	234	76%	12.3
DONNELL, MASON	15	13	117	72	189	71	40	111	59%	8.9
LAM, MINH DAI	15	10	89	54	143	102	52	154	108%	16.2
ST. VIL, CARLINE	45	16	143	90	233	128	62	190	82%	12.3
<b>ADULT CARE TOTALS</b>		<b>56.5</b>	<b>543</b>	<b>332</b>	<b>874</b>	<b>454</b>	<b>235</b>	<b>689</b>	<b>79%</b>	

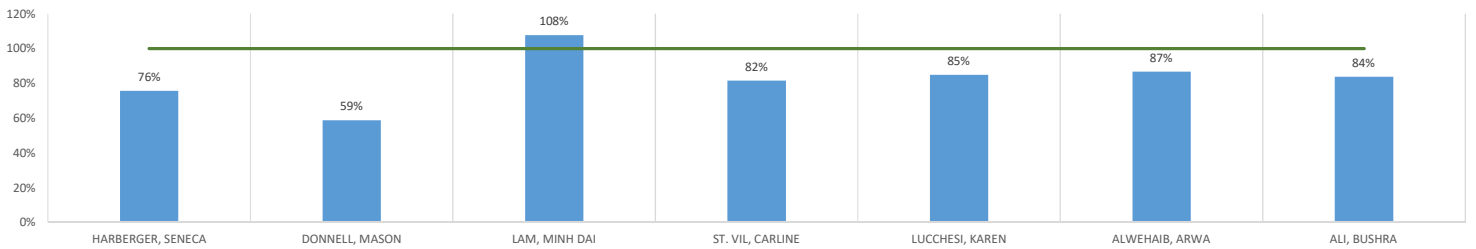
BEHAVIORAL HEALTH INTEGRATION										
LUCCHESI, KAREN	10	16.5	102	64	166	69	72	141	85%	8.5
<b>BH INTEGRATION TOTALS</b>		<b>16.5</b>	<b>102</b>	<b>64</b>	<b>166</b>	<b>69</b>	<b>72</b>	<b>141</b>	<b>85%</b>	

BEHAVIORAL HEALTH ADDICTION										
<b>BH ADDICTION TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

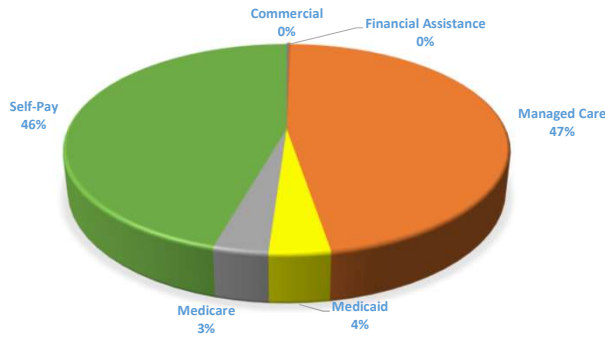
DENTAL										
ALWEHAIB, ARWA	16	18.5	182	115	298	170	88	258	87%	13.9
ALI, BUSHRA	16	19.5	192	122	314	167	96	263	84%	13.5
<b>DENTAL TOTALS</b>		<b>38</b>	<b>374</b>	<b>237</b>	<b>611</b>	<b>337</b>	<b>184</b>	<b>521</b>	<b>85%</b>	

DENTAL HYGIENE										
<b>DENTAL HYGIENE TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

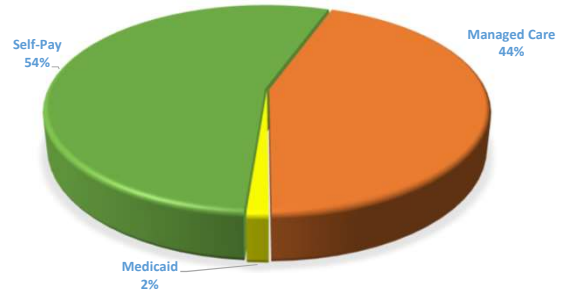
GRAND TOTAL										
		<b>111</b>	<b>1,019</b>	<b>632</b>	<b>1,651</b>	<b>860</b>	<b>491</b>	<b>1,351</b>	<b>82%</b>	



MEDICAL PAYER MIX



DENTAL PAYER MIX



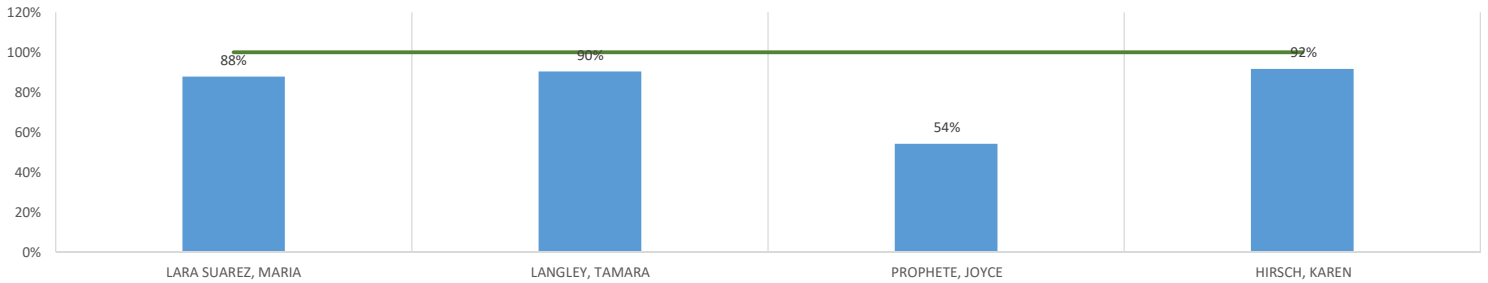


ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
LARA SUAREZ, MARIA	15	12.5	117	72	189	100	66	166	88%	13.3
LANGLEY, TAMARA	15	16.0	144	96	240	131	86	217	90%	13.6
<b>ADULT CARE TOTALS</b>		<b>28.5</b>	<b>261</b>	<b>168</b>	<b>429</b>	<b>231</b>	<b>152</b>	<b>383</b>	<b>89%</b>	

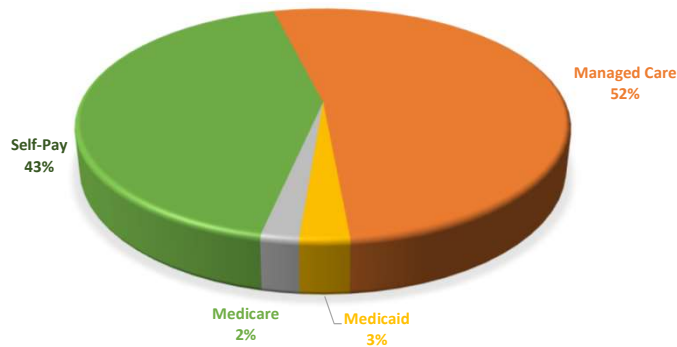
WOMENS HEALTH CARE										
PROPHETE, JOYCE	17	5.0	51	34	85	33	13	46	54%	9.2
<b>WOMENS HEALTH CARE TOTALS</b>		<b>5</b>	<b>51</b>	<b>34</b>	<b>85</b>	<b>33</b>	<b>13</b>	<b>46</b>	<b>54%</b>	

BEHAVIORAL HEALTH ADDICTION										
HIRSCH, KAREN	6	8.0	29	19	48	21	23	44	92%	5.5
<b>BH ADDICTION TOTALS</b>		<b>8</b>	<b>29</b>	<b>19</b>	<b>48</b>	<b>21</b>	<b>23</b>	<b>44</b>	<b>92%</b>	

<b>GRAND TOTAL</b>		<b>41.5</b>	<b>341</b>	<b>221</b>	<b>562</b>	<b>285</b>	<b>188</b>	<b>473</b>	<b>84%</b>	
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MEDICAL PAYER MIX



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
WARREN, SANDRA	17	8.0	91	48	138	70	30	100	72%	12.5
PHILISTIN, KETELY	15	20.0	188	114	302	153	79	232	77%	11.6
PIERRE LOUIS, JOANN	15	18.0	170	102	272	156	69	225	83%	12.5
<b>ADULT CARE TOTALS</b>		<b>46.0</b>	<b>449</b>	<b>264</b>	<b>712</b>	<b>379</b>	<b>178</b>	<b>557</b>	<b>78%</b>	

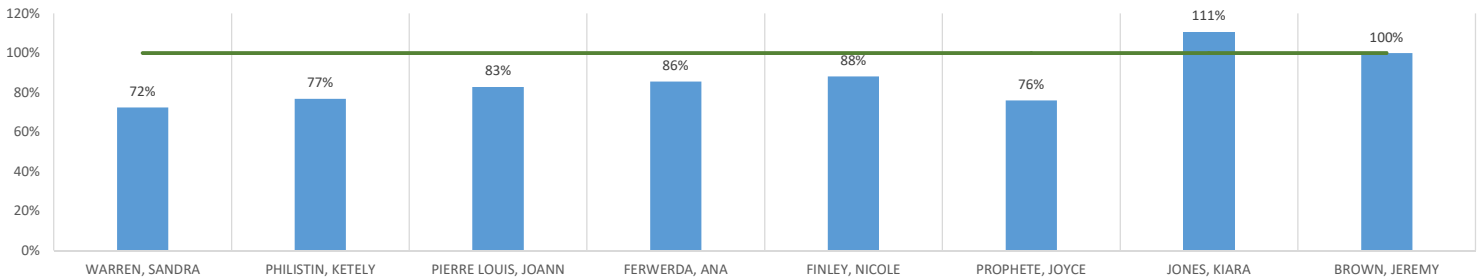
WOMEN'S HEALTH CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
FERWERDA, ANA	17	6.5	82	34	116	71	28	99	86%	15.2
FINLEY, NICOLE	15	18.5	171	108	279	158	88	246	88%	13.3
PROPHETE, JOYCE	17	10.5	112	68	180	83	54	137	76%	13.0
<b>WOMEN'S HEALTH CARE TOTALS</b>		<b>35.5</b>	<b>365</b>	<b>210</b>	<b>575</b>	<b>312</b>	<b>170</b>	<b>482</b>	<b>84%</b>	

BEHAVIORAL HEALTH INTEGRATION										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
JONES, KIARA	***9	18.5	103.8	65.2	169	100	87	187	111%	10.1
BROWN, JEREMY	**6	7	24	16	40	19	21	40	100%	5.7
<b>BH INTEGRATION TOTALS</b>		<b>25.5</b>	<b>128</b>	<b>81</b>	<b>209</b>	<b>119</b>	<b>108</b>	<b>227</b>	<b>109%</b>	

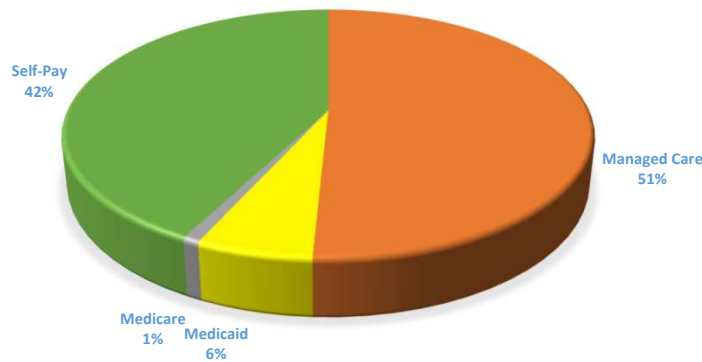
\*\* Avg New provider \*\*\* Avg Training Provider

BEHAVIORAL HEALTH ADDICTION										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
<b>BH ADDICTION TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

GRAND TOTAL										
		<b>107.0</b>	<b>941</b>	<b>555</b>	<b>1,496</b>	<b>810</b>	<b>456</b>	<b>1,266</b>	<b>85%</b>	



MEDICAL PAYER MIX



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
ALFONSO PUENTES, RAMIRO	17	15.5	162	102	264	149	76	225	85%	14.5
JEAN-JACQUES, FERNIQUE	15	20.0	188	114	302	202	84	286	95%	14.3
LANGLEY, TAMARA	15	1.5	18	6	24	15	4	19	79%	12.7
NAVARRO, ELSY	15	15.0	143	84	227	141	63	204	90%	13.6
<b>ADULT CARE TOTALS</b>		<b>52</b>	<b>511</b>	<b>306</b>	<b>817</b>	<b>507</b>	<b>227</b>	<b>734</b>	<b>90%</b>	

PEDIATRIC CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
DESSALINES, DUCLOS	17	15.5	163	102	265	178	98	276	104%	17.8
LAZARO RIVERA, NANCY	17	16	163	109	272	211	97	308	113%	19.3
NORMIL-SMITH, SHERLOUNE	17	16.5	173	109	282	208	102	310	110%	18.8
<b>PEDIATRIC CARE TOTALS</b>		<b>48</b>	<b>500</b>	<b>320</b>	<b>819</b>	<b>597</b>	<b>297</b>	<b>894</b>	<b>109%</b>	

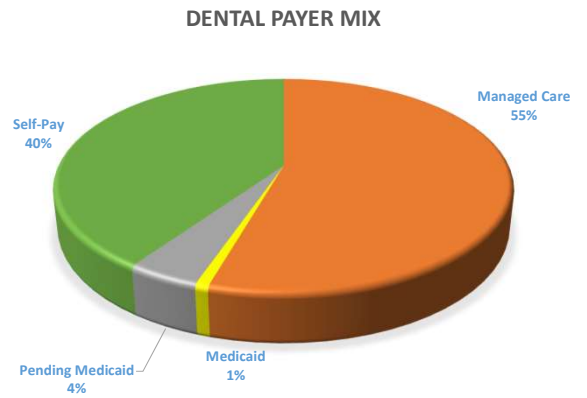
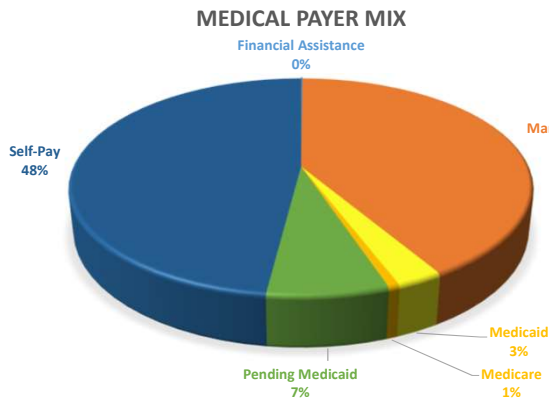
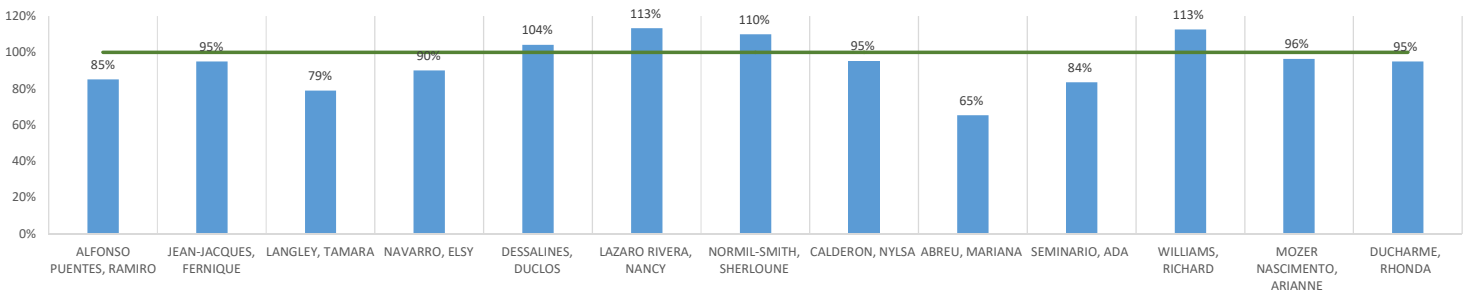
BEHAVIORAL HEALTH INTEGRATION										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
CALDERON, NYLSA	10	16.5	102	64	166	73	85	158	95%	9.6
<b>BH INTEGRATION TOTALS</b>		<b>16.5</b>	<b>102</b>	<b>64</b>	<b>166</b>	<b>73</b>	<b>85</b>	<b>158</b>	<b>95%</b>	

BEHAVIORAL HEALTH ADDICTION										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
<b>BH ADDICTION TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

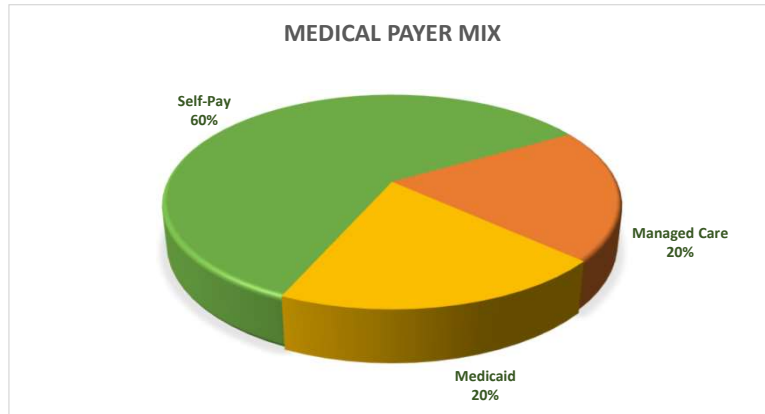
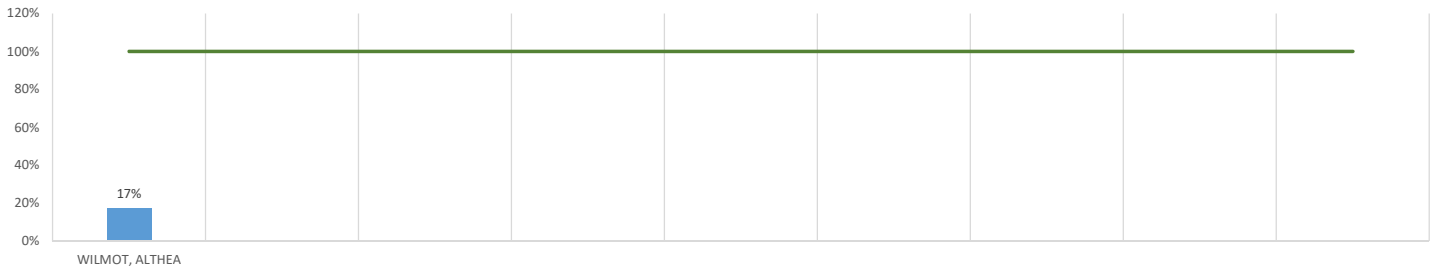
DENTAL										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
ABREU, MARIANA	16	9	86	58	144	64	30	94	65%	10.4
SEMINARIO, ADA	16	19.5	192	122	314	168	94	262	84%	13.4
WILLIAMS, RICHARD	16	0.5	8	0	8	9	0	9	113%	18.0
<b>DENTAL TOTALS</b>		<b>29</b>	<b>286</b>	<b>179</b>	<b>466</b>	<b>241</b>	<b>124</b>	<b>365</b>	<b>78%</b>	

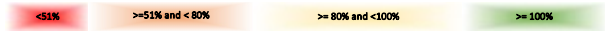
DENTAL HYGIENE										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
MOZER NASCIMENTO, ARIANNE	8	19.5	96	61	157	85	66	151	96%	7.7
DUCHARME, RHONDA	16	15.5	154	96	250	50	187	237	95%	15.3
<b>DENTAL HYGIENE TOTALS</b>		<b>35</b>	<b>250</b>	<b>157</b>	<b>406</b>	<b>135</b>	<b>253</b>	<b>388</b>	<b>95%</b>	

GRAND TOTAL										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
<b>GRAND TOTAL</b>		<b>180.5</b>	<b>1,649</b>	<b>1,026</b>	<b>2,674</b>	<b>1,553</b>	<b>986</b>	<b>2,539</b>	<b>95%</b>	



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
WILMOT, ALTHEA	15	2.0	18	12	30	3	2	5	17%	2.5
<b>ADULT CARE TOTALS</b>		<b>2</b>	<b>18</b>	<b>12</b>	<b>30</b>	<b>3</b>	<b>2</b>	<b>5</b>	<b>17%</b>	
BEHAVIORAL HEALTH INTEGRATION										
<b>BH INTEGRATION TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		
BEHAVIORAL HEALTH ADDICTION										
<b>BH ADDICTION TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		
<b>GRAND TOTAL</b>		<b>2</b>	<b>18</b>	<b>12</b>	<b>30</b>	<b>3</b>	<b>2</b>	<b>5</b>	<b>17%</b>	





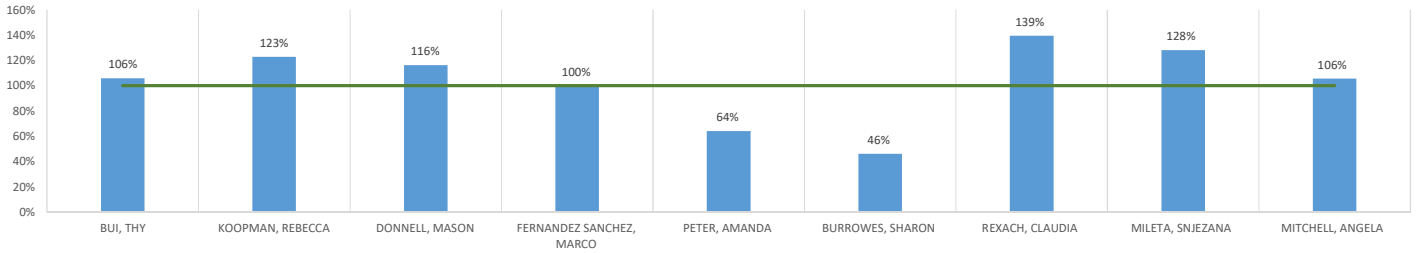
AS 01/31/2023 Based on Completed Appointments

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
BUI, THY	17	8.5	92	54	146	84	71	155	106%	18.2
KOOPMAN, REBECCA	15	21.0	204	114	318	271	120	391	123%	18.6
DONNELL, MASON	15	7.0	63	42	105	85	37	122	116%	17.4
FERNANDEZ SANCHEZ, MARCO	15	9.5	89	54	143	115	28	143	100%	15.1
<b>ADULT CARE TOTALS</b>		<b>46.0</b>	<b>448</b>	<b>264</b>	<b>712</b>	<b>555</b>	<b>256</b>	<b>811</b>	<b>114%</b>	

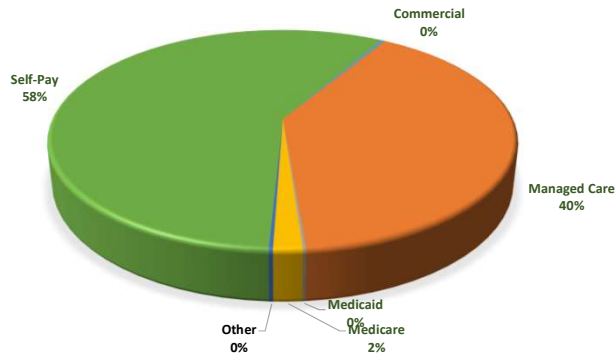
BEHAVIORAL HEALTH INTEGRATION										
<b>BH INTEGRATION TOTALS</b>										
		<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

BEHAVIORAL HEALTH ADDICTION										
PETER, AMANDA	12	19.5	144	91	235	89	62	151	64%	7.7
BURROWES, SHARON	12	16.0	115	77	192	48	41	89	46%	5.6
REXACH, CLAUDIA	10	16.0	96	64	160	144	79	223	139%	13.9
MILETA, SNJEZANA	10	19.0	120	72	192	167	79	246	128%	12.9
MITCHELL, ANGELA	10	18.0	108	72	180	125	65	190	106%	10.6
<b>BH ADDICTION TOTALS</b>		<b>88.5</b>	<b>583</b>	<b>376</b>	<b>959</b>	<b>573</b>	<b>326</b>	<b>899</b>	<b>94%</b>	

<b>GRAND TOTAL</b>		<b>134.5</b>	<b>1,031</b>	<b>640</b>	<b>1,671</b>	<b>1,128</b>	<b>582</b>	<b>1,710</b>	<b>102%</b>	
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MEDICAL PAYER MIX



**WEST PALM BEACH PRODUCTIVITY REPORT JANUARY 2023**

AS 01/31/2023 Based on Completed Appointments



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
FLOREZ, GLORIA	17	18.0	193	116	308	164	101	265	86%	14.7
NOUKELAK, GERMAINE	17	19.0	203	122	325	166	86	252	77%	13.3
WILMOT, ALTHEA	15	1.5	9	12	21	6	6	12	57%	8.0
STANEK, EWELINA	15	19.0	179	108	287	155	75	230	80%	12.1
<b>ADULT CARE TOTALS</b>		<b>57.5</b>	<b>583</b>	<b>358</b>	<b>941</b>	<b>491</b>	<b>268</b>	<b>759</b>	<b>81%</b>	

PEDIATRIC CARE										
CLARKE-AARON, NOELLA	17	16	163	109	272	180	110	290	107%	18.1
MARZOUCA, KISHA F.	17	17.5	184	116	299	215	131	346	120%	19.8
<b>PEDIATRIC CARE TOTALS</b>		<b>33.5</b>	<b>347</b>	<b>224</b>	<b>571</b>	<b>395</b>	<b>241</b>	<b>636</b>	<b>111%</b>	

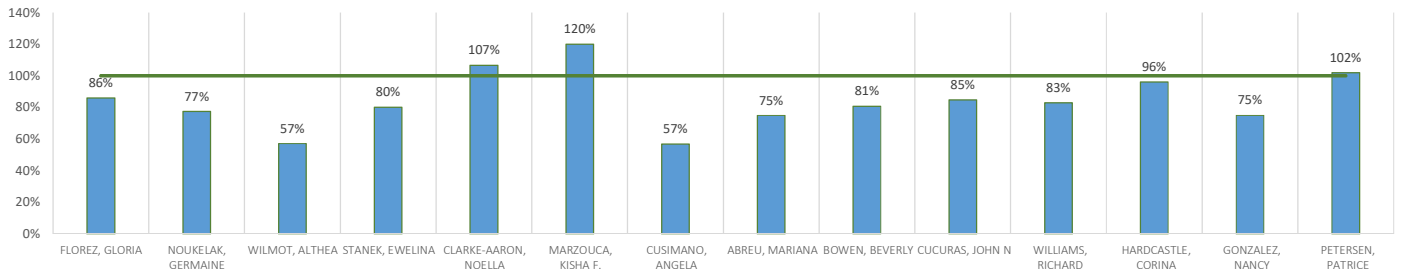
BEHAVIORAL HEALTH INTEGRATION										
CUSIMANO, ANGELA	12	6.5	50	29	79	25	20	45	57%	6.9
<b>BH INTEGRATION TOTALS</b>		<b>6.5</b>	<b>50</b>	<b>29</b>	<b>79</b>	<b>25</b>	<b>20</b>	<b>45</b>	<b>57%</b>	

BEHAVIORAL HEALTH ADDICTION										
<b>BH ADDICTION TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

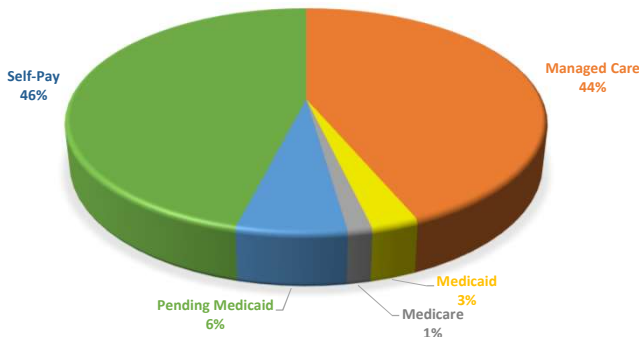
DENTAL										
ABREU, MARIANA	16	11.5	122	64	186	108	31	139	75%	12.1
BOWEN, BEVERLY	16	19.5	192	122	314	154	99	253	81%	13.0
CUCURAS, JOHN N	16	9.0	86	58	144	96	26	122	85%	13.6
WILLIAMS, RICHARD	16	19.5	192	122	314	159	101	260	83%	13.3
<b>DENTAL TOTALS</b>		<b>59.5</b>	<b>592</b>	<b>365</b>	<b>957</b>	<b>517</b>	<b>257</b>	<b>774</b>	<b>81%</b>	

DENTAL HYGIENE										
HARDCASTLE, CORINA	8	18.5	91	58	149	71	72	143	96%	7.7
GONZALEZ, NANCY	8	1.0	5	3	8	2	4	6	75%	6.0
PETERSEN, PATRICE	8 / 16 MDI	17.5	171	109	281	108	178	286	102%	16.3
<b>DENTAL HYGIENE TOTALS</b>		<b>37.0</b>	<b>267</b>	<b>170</b>	<b>437</b>	<b>181</b>	<b>254</b>	<b>435</b>	<b>99%</b>	

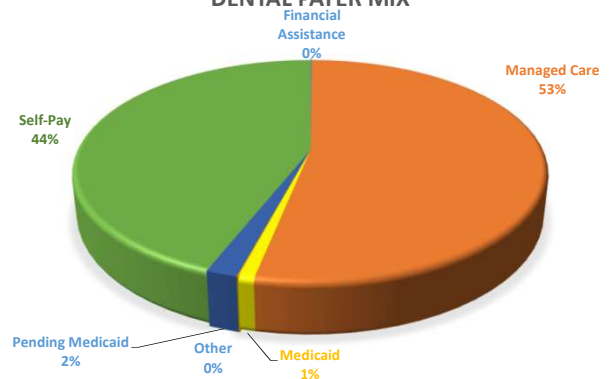
GRAND TOTAL										
		<b>194.0</b>	<b>1,840</b>	<b>1,146</b>	<b>2,986</b>	<b>1,609</b>	<b>1,040</b>	<b>2,649</b>	<b>89%</b>	



**MEDICAL PAYER MIX**



**DENTAL PAYER MIX**







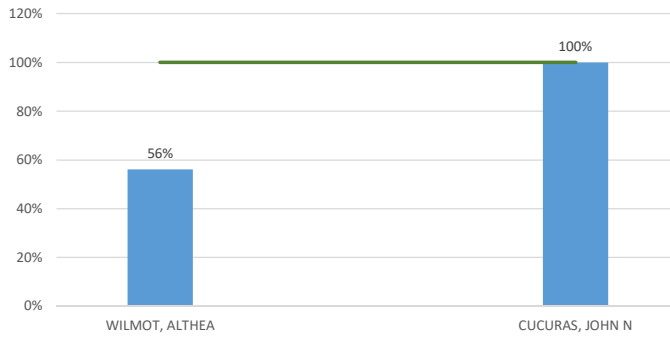
ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
WILMOT, ALTHEA	12	8.5	65	38	103	36	22	58	56%	6.8
<b>ADULT CARE TOTALS</b>		<b>9</b>	<b>65</b>	<b>38</b>	<b>103</b>	<b>36</b>	<b>22</b>	<b>58</b>	<b>56%</b>	

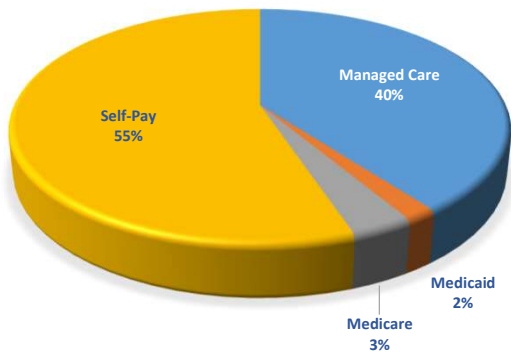
DENTAL										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
CUCURAS, JOHN N	12	1.0	7	5	12	11	1	12	100%	12.0
<b>DENTAL TOTALS</b>		<b>1.0</b>	<b>7</b>	<b>5</b>	<b>12</b>	<b>11</b>	<b>1</b>	<b>12</b>	<b>100%</b>	

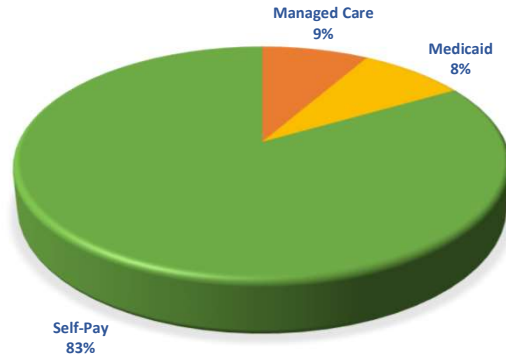
GRAND TOTAL										
		<b>10</b>	<b>72</b>	<b>43</b>	<b>115</b>	<b>47</b>	<b>23</b>	<b>70</b>	<b>61%</b>	



MEDICAL PAYER MIX



DENTAL PAYER MIX



**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

**1. Description: Operations Reports – January 2023**

**2. Summary:**

This agenda item provides the following operations reports for January 2023:

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

**3. Substantive Analysis:**

In January, the clinics had 11,480 visits, which was 3% higher than the prior month and 15% higher than January 2022. 39% of patients were from adults Primary Care, 24% from Dental and 13% Pediatrics. The Lantana Medical Clinic had the highest volume, with 1,783 visits, followed by Mangonia, with 1,708 visits.

Our payer mix for January was 51% uninsured, which was 2% less than the previous month. 43% of patients were Managed Care and 4% were Medicaid.

61% of patients were female. 50% of patients reported as White and 41% as Black or African American. Of those patients, 39% reported as Hispanic. Our largest age group was those between 30-39 years old.

In January, our Homeless population was 23.4% which is lower than the previous 7 months.

Agricultural Status averaged 5.2% but varied between clinics. 34% of patients in Belle Glade reported as Agricultural workers. 1% of Mangonia, Lewis Center and Lantana patients reported as Agricultural Workers. Mobile and Boca clinics reported 0 Agricultural workers. All other clinics reported as 2%.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
 Candice Abbott  
 VP & Chief Financial Officer

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**February 22, 2023**

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

<p>N/A</p> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/>	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/>
<p>Committee Name</p>	<p>Date Approved</p>


**6. Recommendation:**

Staff recommends that the Board approve the Operations Reports for January 2023.

Approved for Legal sufficiency:



\_\_\_\_\_  
Bernabe Icaza  
VP & General Counsel



\_\_\_\_\_  
Marisol Miranda  
Director of Clinic Operations

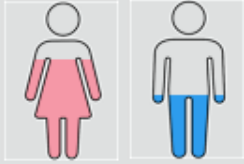


\_\_\_\_\_  
Alicia Ottmann, PA-C  
AVP, Executive Director FQHC  
& Pharmacy Services

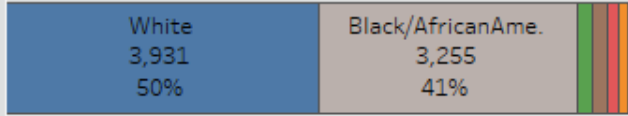
# Monthly Productivity January 2023



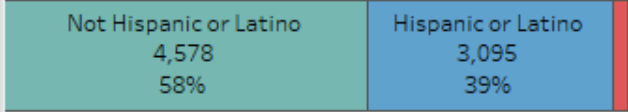
## DEMOGRAPHICS



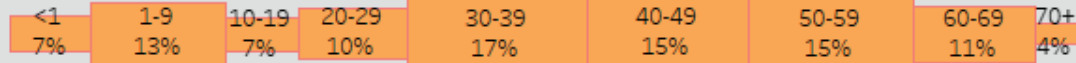
### RACE



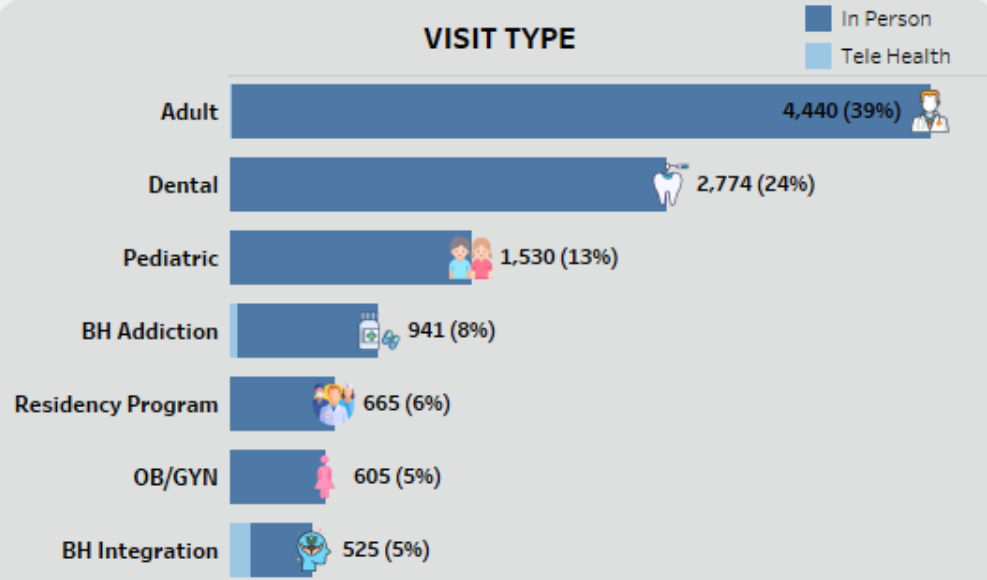
### ETHNICITY



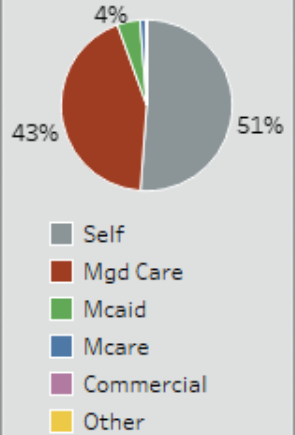
### AGE GROUP



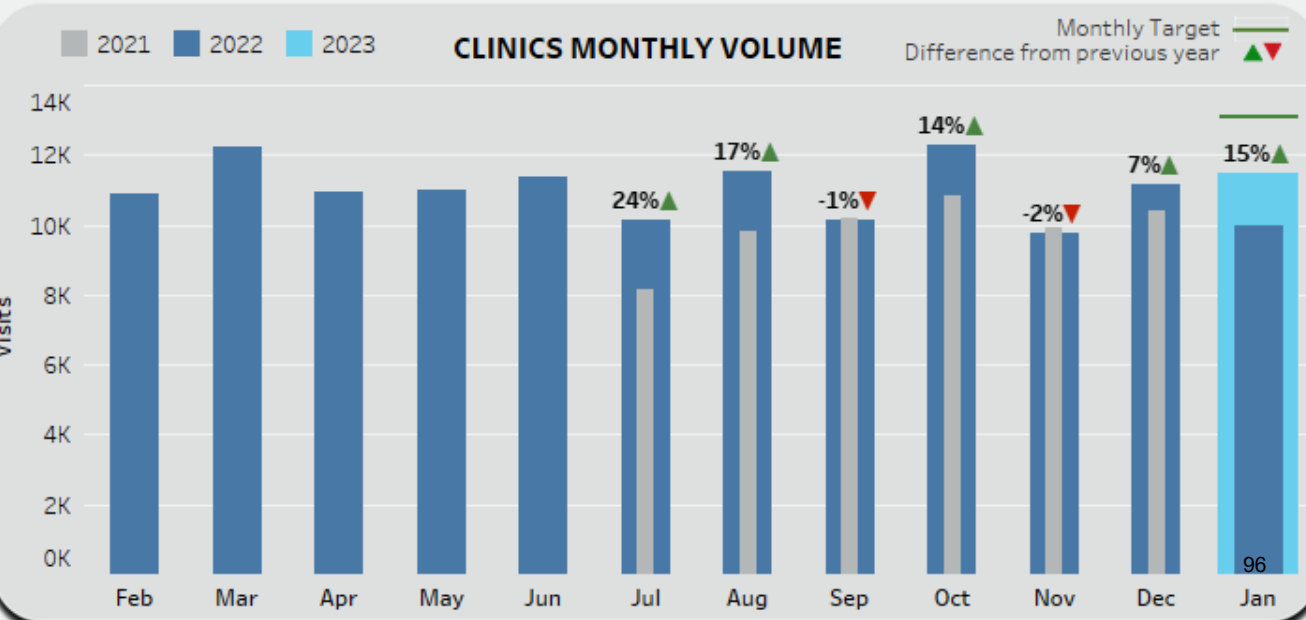
## VISIT TYPE



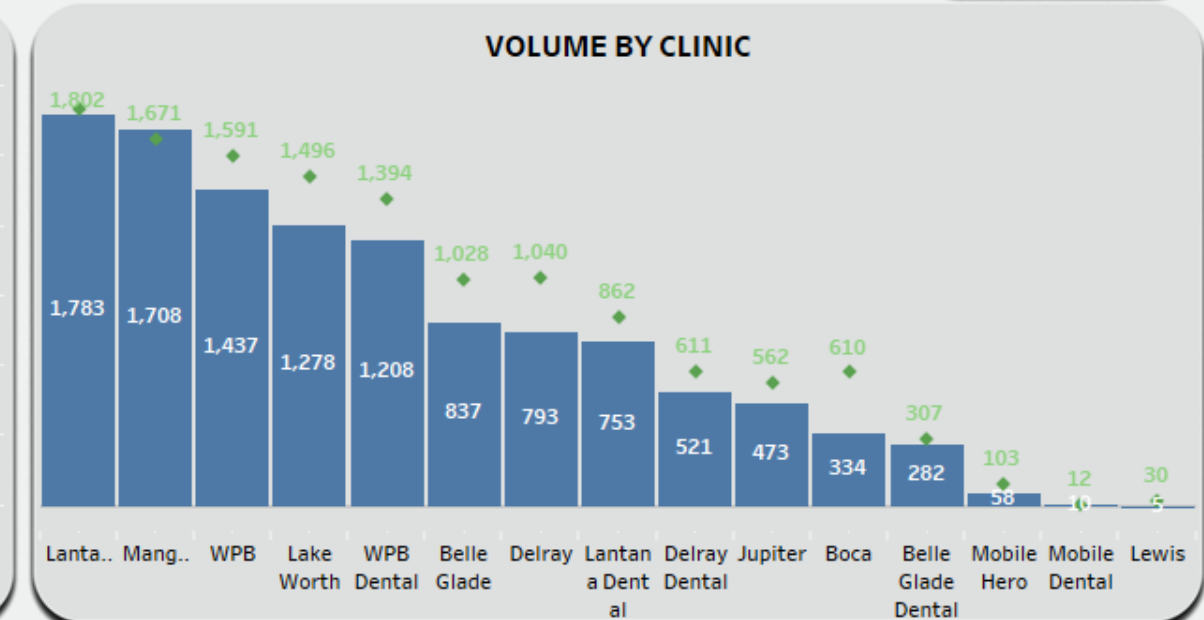
## PAYOR MIX



## CLINICS MONTHLY VOLUME



## VOLUME BY CLINIC



# AGRICULTURAL WORKERS BREAKDOWN BY CLINIC

1/1/2023 - 1/31/2023



5.2%

