



C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County

BOARD OF DIRECTORS

February 27, 2019

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 27, 2019
1515 N. Flagler Drive
West Palm Beach, FL 33401**

1. Call to Order – James Elder, Chair

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

2. Agenda Approval

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

3. Awards, Introductions and Presentations

- A. Behavioral Health Update.
(Dr. Courtney Rowling)

4. Disclosure of Voting Conflict

5. Public Comment

6. Meeting Minutes

- A. **Staff recommends a MOTION TO APPROVE:**
Board Meeting Minutes of January 31, 2019.
[Pages 1-6]

7. Consent Agenda – Motion to Approve Consent Agenda Items

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

A. ADMINISTRATION

- 7A-1 **RECEIVE AND FILE:**
February 2019 Internet Posting of District Public Meeting.
<http://www.hcdpbc.org/index.aspx?recordid=2597&page=15>

7. **Consent Agenda – Motion to Approve Consent Agenda Items (continued)**

7A-2 **RECEIVE AND FILE:**

Attendance tracking.

[Page 7]

B. FINANCE

7B-1 **Staff recommends a MOTION TO APPROVE:**

C. L. Brumback Primary Care Clinics Finance Report January 2019.

(Dawn Richards) [Pages 8-26]

7B-2 **RECEIVE AND FILE**

Sliding Fee Scale.

(Marcia Young) [Pages 27-32]

8. Regular Agenda

A. EXECUTIVE

8A-1 **RECEIVE AND FILE:**

Executive Director Informational Update.

(Belma Andric) [Pages 33-34]

B. CREDENTIALING AND PRIVILEGING

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

Licensed Independent Practitioner Credentialing and Privileging – Jennifer Casanova.

(Sarah Gonzalez) [Pages 35-36]

C. OPERATIONS

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

Operations Reports – January 2019.

(Terry Megiveron) [Pages 37-56]

D. QUALITY

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

Quality Council Reports.

(Dr. Noelle Stewart) [Pages 57-76]

9. VP and Executive Director of Clinic Services Comments

10. Board Member Comments

11. Establishment of Upcoming Meetings

March 26, 2019 (HCD Board Room)

2:00PM Joint Meeting with The Health Care District Board of Commissioners

March 27, 2019 (HCD Board Room)

12:15PM Board Strategic Planning

April 24, 2019 (HCD Board Room)

12:45pm Board of Directors

May 29, 2019 (HCD Board Room)

12:45pm Board of Directors

June 26, 2019 (HCD Board Room)

12:45pm Board of Directors

July 31, 2019 (HCD Board Room)

12:45pm Board of Directors

August 28, 2019 (HCD Board Room)

12:45pm Board of Directors

September 25, 2019 (HCD Board Room)

12:45pm Board of Directors

October 30, 2019 (HCD Board Room)

12:45pm Board of Directors

November 27, 2019 (HCD Board Room)

12:45pm Board of Directors

December 18, 2019 (HCD Board Room)

12:45pm Board of Directors

12. Motion to Adjourn

**District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
1/21/2019**

Present: James Elder, Chairperson; Joseph Morel, Vice Chairperson; John Casey Mullen, Secretary; Joan Roude, Treasurer; Cory Neering; Irene Figueroa

Excused: Shanti Howard; Valerie Shahriari, General Counsel

Staff: Darcy Davis, CEO; Dr. Belma Andric, CMO, VP & Executive Director of Clinical Services; Pamela Ryan, General Counsel; Dawn Richards, Chief Financial Officer; Thomas Cleare, VP of Strategy; Terry Megiveron, Director of Operations; Dr. Tamara-Kay Tibby, Dental Director; Dr. Noelle Stewart, Medical Director; Ellen Pentland, Chief Compliance & Privacy Officer; Cindy Yarborough, Chief Information Officer; Sarah Gonzalez, Director of Credentialing & Provider Services; Steven Hurwitz, VP of Human Resources & Communications

Minutes Transcribed By: Alena Ranucci

Meeting Scheduled For 12:48PM

Meeting Began at 2:09PM

| AGENDA ITEM | DISCUSSION | ACTION |
|--|--|--|
| 1. Call to Order | Mr. James Elder called the meeting to order. | The meeting was called to order at 12:48pm. |
| 1A. Roll Call | Roll call was taken. | |
| 1B. Affirmation of Mission | Mr. James Elder read the Affirmation of Mission | |
| 2. Agenda Approval | Mr. James Elder called for an approval of the meeting agenda. | VOTE TAKEN: Mr. Neering made a motion to approve the agenda. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously. |
| 2A. Additions/Deletions/ Substitutions | No additions/deletions/substitutions | |
| 2B. Motion to Approve Agenda Items | The agenda for the January 2019 meeting was approved as mailed in the board package. | |

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| <p>3. Awards, Introductions and Presentations</p> <p>3A. Compliance and Cultural Competency Board Training</p> <p>3B. Medical/Dental Integration</p> | <p>Ellen Pentland, Chief Compliance Officer, educated the Board Members on Cultural Competency for Florida Community Care, Annual Board Compliance & Privacy Education and Abuse, Neglect and Exploitation.</p> <p>Mr. Neering asked if we provide training on implicit bias and cultural competencies. Ms. Pentland replied that Victoria Pruitt, the Director, Corporate Risk Management, implements these mandatory trainings to all required individuals on a rotating basis.</p> <p>Dr. Duclos Dessalines, Pediatric Program Director and Dr. Tamara-Kay Tibby, Dental Program Director presented to the board their new program Medical and Dental Integration (MDI) for pediatric patients. The purpose of this implementation was to raise overall awareness of the importance of oral health, improve communication between departments and increase the number of pediatric medical and dental patients. The communications department assisted in creating a video highlighting the benefits of integrating these services.</p> | <p>No action necessary.</p> |
| <p>4. Disclosure of Voting Conflict</p> | <p>None.</p> | <p>No action necessary.</p> |
| <p>5. Public Comment</p> | <p>None.</p> | <p>No action necessary.</p> |
| <p>6. Meeting Minutes</p> <p>6A Staff Recommends a MOTION TO APPROVE: Board Meeting Minutes of December 12, 2018</p> | <p>There were no changes or comments to the minutes dated December 12, 2018.</p> | <p>VOTE TAKEN: Mr. Neering made a motion to approve the minutes of December 12, 2018 as presented. The motion was duly seconded by Mrs. Roude. A vote was called, and the motion passed unanimously.</p> |
| <p>7. Consent Agenda – Motion to Approve Consent Agenda Items</p> | | <p>VOTE TAKEN: Mr. Neering made a motion to approve the consent agenda as presented. The motion was duly seconded by Mrs.</p> |

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| | | Roude. vote was called, and the motion passed unanimously . |
| 7A. ADMINISTRATION | | |
| 7A-1. Receive & File: January 2019 Internet Posting of District Public Meeting | The meeting notice was posted. | Receive & File. No further action necessary. |
| 7A-2. Receive & File: Attendance tracking | Attendance tracking was updated. | Receive & File. No further action necessary. |
| 7A-3 Receive & File Summary of Board Member Self-Evaluations | The C.L. Brumback Primary Care Clinics Board completed an annual self-evaluation yearly. A tally was created and presented to the board summarizing the Board Members Evaluations to establish areas of improvement and relay feedback. | Receive & File. No further action necessary. |
| 7B. POLICIES | | |
| 7B-1. Staff recommends a MOTION TO APPROVE: Referral Tracking Policy | Dr. Noelle Stewart presented to the board the revised Referral Tracking Policy 831-14 that tracks referrals to specialists generated by all our service lines. | Motion referenced above, no further action necessary. |
| 7C. CREDENTIALING AND PRIVILEGING | | |
| 7C-1. Staff recommends a MOTION TO APPROVE: Modification of General Dentistry Privileges | Sarah Gonzalez, Director of Credentialing presented a practitioner recommended by the Dental Director for modification of their current General Dentistry privileges to include sectioning of bridge(s) to facilitate removal of teeth. | Motion referenced above, no further action necessary. |
| 8. Regular Agenda | | |
| A. ADMINISTRATION | | |
| 8A-1. RECEIVE AND FILE: Board Member Resignation-Joan Roude | Thomas Cleare presented to the board that Ms. Joan Roude has notified the C.L. Brumback Primary Care Clinics that she is resigning from her position on the Board as treasurer. He thanked for her time and dedication to the Clinics and the Health Care District. Michael Smith will take her place as the treasurer of the Clinic Board. | Receive & File. No further action necessary. |
| 8A-2. Staff Recommends a MOTION TO APPROVE: | The 3-year Board Membership term ended December 31, 2018. All Board Members eligible for re-appointment | VOTE TAKEN: Mr. Morel made a motion to approve the Board Member Re-Appointments as presented. The motion |

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| Board Member Re-Appointments | must be re-appointed to another 3-year term. All Board Members re-applied and were re-appointed. | was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously. |
| 8A-3. Staff Recommends a MOTION TO APPROVE: Appointment of Julia Bullard and Michael Smith to the Clinic Board | A Nominating Committee meeting was held on January 15 th , 2019 at 10:30am where Julia Bullard and Michael Smith were nominated to the C.L. Brumback Primary Care Clinic Board. The Nominating Committee recommends the Board to approve Mrs. Bullard and Mr. Smith to join the Clinic Board. | VOTE TAKEN: Mr. Neering made a motion to approve the Appointment of Julia Bullard and Michael Smith to the Clinic Board as presented. The motion was duly seconded by Mr. Morel. vote was called, and the motion passed unanimously. |
| 8A-4. Staff Recommends a MOTION TO APPROVE: Committee Assignments | Thomas Cleare discussed with the board that the recent term limits for 3 Board Members have created vacancies on some of the Clinic and District committees. James Elder, Michael Smith and Joseph Morel volunteered to join the Finance Committee. Julia Bullard volunteered to join the Quality Council. | VOTE TAKEN: Ms. Roude made a motion to approve Committee Assignments as presented. The motion was duly seconded by Mr. Morel. vote was called, and the motion passed unanimously. |
| 8B. FINANCE | | |
| 8B-1. Staff Recommends a MOTION TO APPROVE: C.L. Brumback Primary Care Clinics Finance Report December 2018 | Clinic volumes (medical, dental, and MAT combined), are below budget by 1,957 visits or 5.9%. MAT clinic visits of 872 were above budget of 824 by 48 or 5.8%. All other medical clinics combined (net of MAT) were below budgeted volume by 573 visits or 2.4%. Mobile van visits of 544 were above budget of 520 by 24 or 4.6%. Total revenues are below budget by \$196k or 4.3% due to less than anticipated grants revenue for the Belle Glade Construction and Quality Incentive. Total operating expenses are below budget by \$378k or 6.1%. Net operating margin is a loss of \$2.5M compared to a budgeted loss of \$2.8M. The Health Care District has subsidized the Primary Care Clinics with \$2.6M. | VOTE TAKEN: Ms. Roude made a motion to approve C.L. Brumback Primary Care Clinics Finance Report December 2018 as presented. The motion was duly seconded by Mr. Neering. A vote was called, and the motion passed unanimously. |
| C. EXECUTIVE | | |
| 8c-1. RECEIVE AND FILE: Executive Director Informational Update | Dr. Andric provided an Executive Director informational update: Lakeside Medical Center Clinic (Belle Glade) Mechanical, electrical and plumbing are well underway. There have been changes to the plans to maximize patient | Receive and file. No further action necessary. |

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| | <p>flow. Construction manager still expects to meet our completion timeline of 4/1/2019.</p> <p>Mangonia Park - Construction has begun at the new clinic with expectation that we will open within a few months.</p> <p>FY2019 Service Area Competition Grant - On 12/20/2018 we received our Notice of Award from HRSA confirming our grant continuation through 12/31/2021. Our current approved grant budget is \$7,617,174.00.</p> | |
| 8D. CREDENTIALING AND PRIVILEGING | | |
| <p>8D-1. Staff recommends a MOTION TO APPROVE: Licensed Independent Practitioner Credentialing and Privileging – Duclos Dessalines, MD</p> | <p>The FQHC Medical Director presented Dr. Duclos Dessalines, pediatrician and Pediatric Director for re-credentialing and privileging.</p> | <p>VOTE TAKEN: Ms. Roude made a motion to approve Licensed Independent Practitioner Credentialing and Privileging as presented. The motion was duly seconded by Mr. Morel. A vote was called, and the motion passed unanimously.</p> |
| 8E. OPERATIONS | | |
| <p>8E-1. Staff recommends a MOTION TO APPROVE: Operations Reports – November & December 2018</p> | <p>Terry Megiveron presented to the Board with operations reports for November & December 2018 as included in the board package.</p> | <p>VOTE TAKEN: Mr. Morel made a motion to approve the Operations Reports as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.</p> |
| 8F. QUALITY | | |
| <p>8F-1. Staff recommends a MOTION TO APPROVE: Quality Council Reports</p> | <p>Dr. Noelle Stewart presented to the board UDS dashboard for 2018 which was submitted for our annual UDS report. Our final report demonstrated that we had 9 metrics that exceeded our Goals, 1 that was at goal and 2 that were below goal. Immunization was below the goal that we set for this measurement year, however it is higher than National and States rates and because of this we have adjusted our goal for the 2019 measurement year. The new goal for immunization in children turning two will be 60%. In HIV we were also below goal at 60%. We have also adjusted this measure to align more with National and</p> | <p>VOTE TAKEN: Mr. Neering made a motion to approve the Quality Council Reports as presented. The motion was duly seconded by Mr. Morel. A vote was called, and the motion passed unanimously.</p> |

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| | State Rates and will have a goal of 85% for this measure in 2019. | |
| 9. CMO, VP and Executive Director of Clinical Services Comments | Dr. Andric had no additional comments. | No action necessary. |
| 10. Board Member Comments | Mr. Mullen wanted to know how many vacant clinic positions we have at the moment. Dr. Andric replied that our clinical recruiters are actively recruiting for 9 vacant positions. | No action necessary. |
| 11. Establishment of Upcoming Meetings | 2019 Board of Directors Meetings were approved at the November 28, 2018 Board meeting. All meetings start at 12:45 PM: <ul style="list-style-type: none"> • February 27, 2019 • March 26, 2019 (2:00 PM start) Joint with HCD • March 27, 2019 (12:15 PM) Strategic Planning • April 24, 2019 • May 29, 2019 • June 26, 2019 • July 31, 2019 • August 28, 2019 • September 25, 2019 • October 30, 2019 • November 27, 2019 • December 18, 2019 | No action necessary. |
| 12. Motion to Adjourn | There being no further business, the meeting was adjourned. | Mr. Mullen made a motion to adjourn and Mr. Morel seconded. The meeting was adjourned at 2:09 p.m. |

Minutes Submitted by: _____
Signature Date

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

Attendance Tracking

| | 7/25/18 | 8/22/18 | 9/26/18 | 10/24/18 | 11/28/18 | 12/12/18 | 1/30/19 | 2/27/19 | 3/26/19 | 4/24/19 | 5/29/19 | 6/26/19 |
|-------------------|---------|---------|---------|----------|----------|----------|---------|---------|---------|---------|---------|---------|
| James Elder | X | X | X | X | X | X | X | | | | | |
| Irene Figueroa | X | X | E | X | X | X | X | | | | | |
| John Casey Mullen | X | X | X | X | X | X | X | | | | | |
| Shanti Howard | E | | X | X | E | X | E | | | | | |
| Cory M. Neering | X | X | X | E | X | E | X | | | | | |
| Joan Roude | X | X | E | X | E | X | X | | | | | |
| Joseph Morel | X | | | X | X | E | X | | | | | |

X= Present

C= Cancel

E= Excused

A= Absent

X

DISTRICT CLINIC HOLDINGS, INC
BOARD OF DIRECTORS
February 27, 2019

1. **Description:** District Clinic Holding, Inc. Financial Report January 2019

2. Summary:

The YTD January 2019 financial statements for the District Clinic Holdings, Inc. are presented for your information.

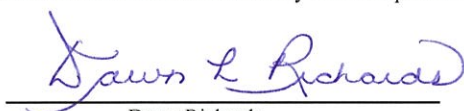
3. Substantive Analysis:

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:

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

Reviewed for financial accuracy and compliance with purchasing procedure:



Dawn Richards
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

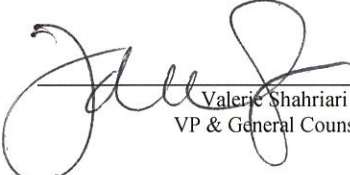
 Date Approved

DISTRICT CLINIC HOLDINGS, INC
BOARD OF DIRECTORS
February 27, 2019


6. Recommendation:

Staff recommends the Board receive and file the District Clinic Holdings, Inc. January 2019 YTD financial statements.


Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



Dawn Richards
VP & Chief Financial Officer



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

MEMO

To: Finance Committee

From: Dawn L. Richards
Chief Financial Officer

Date: February 18, 2019

Subject: Management Discussion and Analysis of January 2019 C.L. Brumback Primary Care Clinic Financial Statements

The January statements represent the financial performance for the first four months of the 2019 fiscal year for C.L. Brumback. Included below are explanations of volume, revenue, and expense variances.

Summary

Clinic volumes (medical, dental, and Suboxone combined) are under budget by 2,605 visits or 5.9%. Suboxone clinic visits of 1,173 are over the 1,106 budgeted visits by 67 or 6.1%. All other medical clinics combined (net of Suboxone) are under budget by 676 visits or 2.1%. Mobile van visits of 745 are over the 698 budgeted visits by 47 or 6.7%. Total revenues are over budget by \$1.6M or 25.8% due to unanticipated Low Income Pool (LIP) revenue and unbudgeted subsidy payments for District Cares medical and dental visits. Total operating expenses are under budget by \$526k or 6.3%. The Clinics' net operating loss of \$1.5M is under the budgeted loss of \$3.8M. The Health Care District subsidy to the Clinics is \$2.6M compared to the budget of \$4.4M.

Volume Analysis

Total medical clinic visits in all adult and pediatric clinics of 33,017 are under the 33,626 budgeted visits by 609 or 1.8% and are over the 32,769 prior year visits by 248 or 0.8%. Dental visits of 8,691 are under the 10,687 budgeted visits by 1,996 or 18.7% and under the 10,881 prior year visits by 2,190 or 20.1%. Suboxone clinic visits of 1,173 are over the 1,106 budgeted visits by 67 or 6.1%. Medical visits (net of Suboxone) of 31,844 are under the 32,520 budgeted visits by 676 or 2.1% and under the 31,871 prior year visits by 27 or 0.1%.

Net Revenue

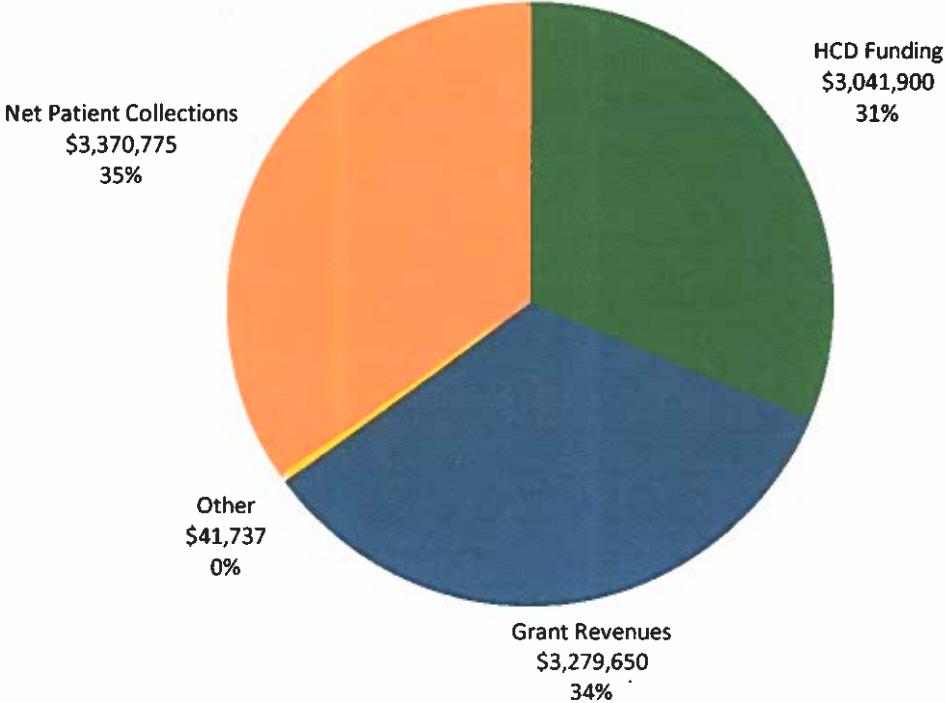
Clinic Medical net patient revenue of \$3.1M is \$787k (33.9%) over the budget of \$2.3M and \$306k (9.0%) under the prior year of \$3.4M. Medical net patient revenue per visit is \$94.13 compared to the budget of \$69.01 and prior year of \$104.18. Clinic Dental net patient revenue of \$1.1M is \$346k (46.9%) over the budget of \$737k and \$186k (14.7%) under the prior year of \$1.3M. Dental net patient revenue per visit is \$124.65 compared to the budget of \$69.00 and prior year of \$116.68. The significant variance in medical and dental net patient revenue relative to the budget is a direct result of the unanticipated LIP revenue and unbudgeted District Cares subsidy payments. LIP revenue is \$549,700 (\$16.65 per visit) over budget for the medical clinics, and \$321,380 (\$36.98 per visit) over

budget for the dental clinics. The unbudgeted District Cares subsidy payments are \$497,910 (\$15.08 per visit) for the medical clinics, and \$108,900 (\$12.53) for the dental clinics. Grant revenue of \$3.5M is \$468k (15.5%) over the budget of \$3.1M and \$1.0M (42.0%) over prior year of \$2.5M. The positive variance is attributable to a higher than budgeted drawdown of grant funds in January due to a change in our procedure to improve the process.

Expenses

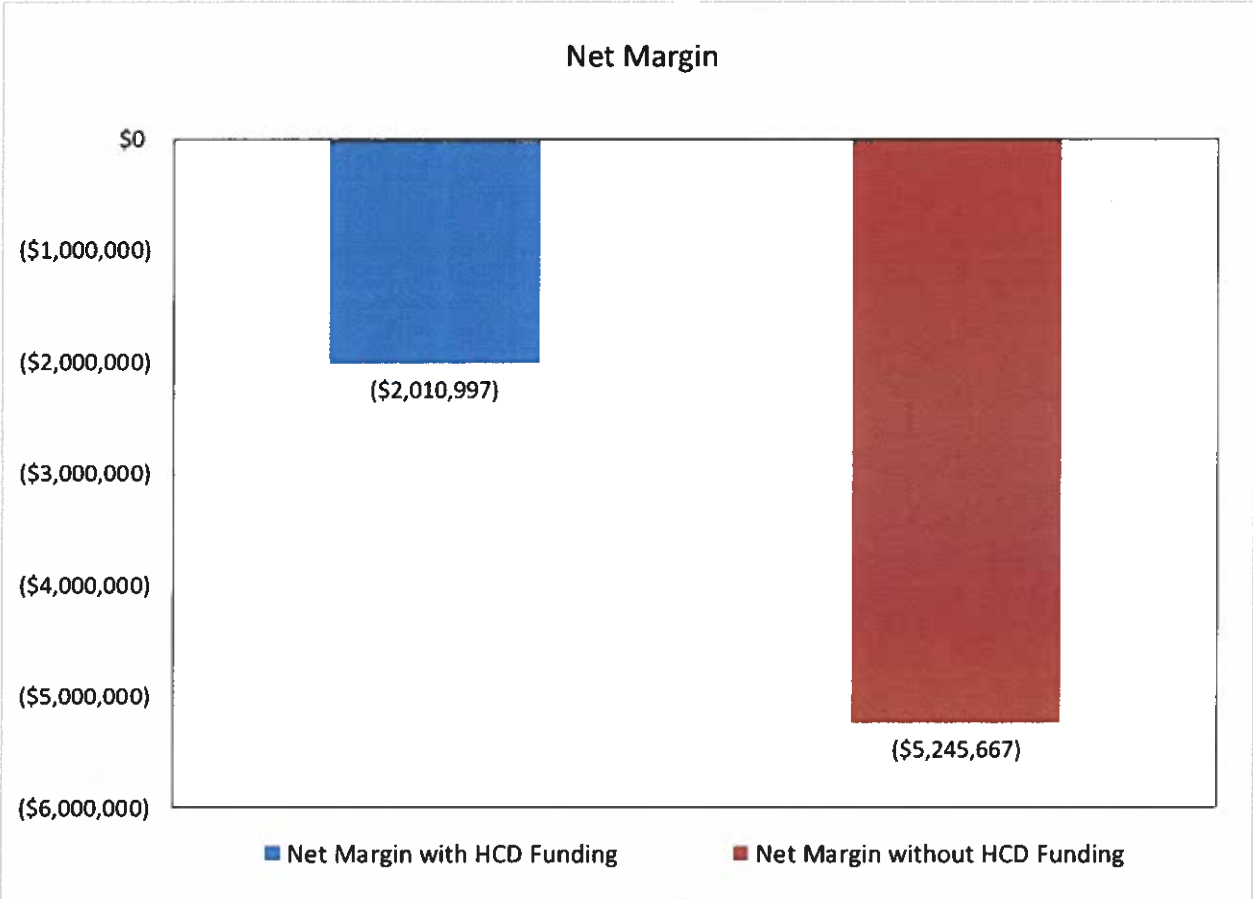
Savings in salaries (\$125k), benefits (\$143k), medical supplies (\$49k), other supplies (\$64k), and medical services (\$125k) account for nearly all of the \$526k favorable variance in total Clinic operating expense. Clinic Medical operating expenses of \$6.3M are \$406k (6.0%) under the budget of \$6.7M and \$521k (9.0%) over prior year of \$5.8M. Savings in salaries (\$101k), benefits (\$124k), and medical services (\$125k) are the main contributors to the favorable variance. Clinic Dental operating expenses of \$1.5M are \$121k (7.6%) under the budget of \$1.6M and \$81k (5.8%) over the prior year of \$1.4M. Savings in salaries (\$24k), benefits (\$18K), medical supplies (\$29k), and other supplies (\$16k) contribute to the favorable variance. The positive variances in salaries and benefits are attributable to vacant positions in the medical and dental clinics, as well as in clinic administration.

Primary Care Clinics Funding Sources

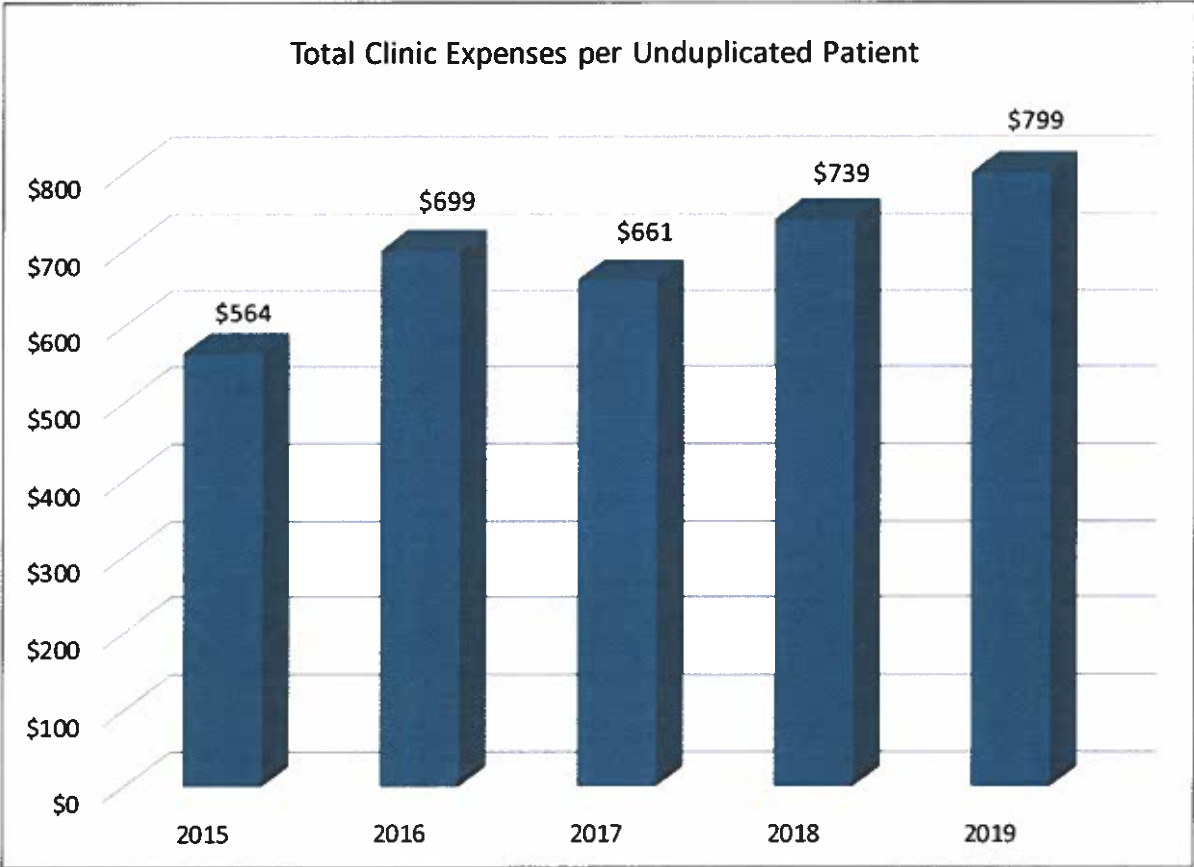


Fiscal YTD January 2019 Total Expenses \$9,734,062

*Total expenses include overhead allocations and capital, and exclude depreciation.

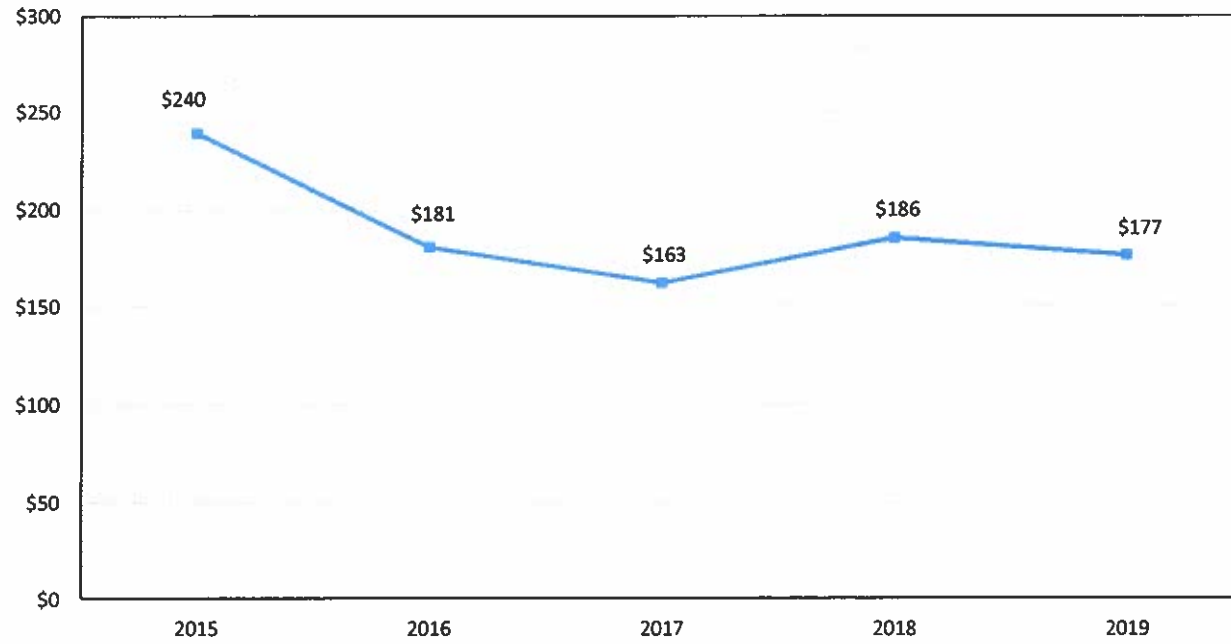


* Net Margin includes overhead allocations and capital, and excludes depreciation.



* 2019 data reflects fiscal year-to-date January expenses annualized.

Total Clinic Revenue per Visit



DISTRICT CLINIC HOLDINGS, INC.
COMPARATIVE STATEMENT OF NET POSITION

| | <u>Jan 31, 2019</u> | <u>Dec 31, 2018</u> | <u>Increase (Decrease)</u> |
|--|---------------------|---------------------|--------------------------------|
| Assets | | | |
| Cash and Cash Equivalents | 379,113 | 497,517 | \$ (118,404) |
| Accounts Receivable, net | 1,070,634 | 1,253,874 | (183,241) |
| Due From Other Funds | - | - | - |
| Due from Other Governments | 2,777,200 | 1,845,151 | 932,049 |
| Other Current Assets | 189,236 | 181,609 | 7,627 |
| Net Investment in Capital Assets | 1,167,157 | 642,903 | 524,254 |
| Total Assets | <u>\$ 5,583,339</u> | <u>\$ 4,421,054</u> | <u>\$ 1,162,285</u> |
| Liabilities | | | |
| Accounts Payable | 480,691 | 437,224 | 43,467 |
| Due To Other Governments | - | - | - |
| Deferred Revenue | 72,491 | 81,055 | (8,564) |
| Other Current Liabilities | 716,585 | 678,918 | 37,667 |
| Non-Current Liabilities | 797,053 | 743,848 | 53,205 |
| Total Liabilities | <u>2,066,821</u> | <u>1,941,045</u> | <u>125,776</u> |
| Deferred Inflows of Resources | | | |
| Deferred Inflows- Other Post Employment Benefits | <u>\$ 612</u> | <u>\$ 612</u> | <u>\$ -</u> |
| Net Position | | | |
| Net Investment in Capital Assets | 1,167,157 | 642,903 | 524,254 |
| Unrestricted | 2,348,749 | 1,836,493 | 512,256 |
| Total Net Position | <u>3,515,906</u> | <u>2,479,396</u> | <u>1,036,510</u> |
| Total Liabilities, Deferred Inflows of Resources and Net Position | <u>\$ 5,583,339</u> | <u>\$ 4,421,054</u> | <u>\$ 1,162,285</u> |

Note: Amounts may not foot due to rounding.

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

| | Oct-18 | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19 | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Year to Date |
|---|-----------------------|---------------------|---------------------|-------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-----------------------|
| Gross Patient Revenue | 1,946,640 | 1,491,722 | 2,006,898 | 1,645,818 | - | - | - | - | - | - | - | - | 7,091,078 |
| Contractual Allowances | 629,927 | 523,761 | 955,352 | 869,362 | - | - | - | - | - | - | - | - | 2,978,401 |
| Charity Care | 522,280 | 370,440 | 411,855 | 348,213 | - | - | - | - | - | - | - | - | 1,652,788 |
| Bad Debt | 209,421 | 136,222 | 187,946 | 107,004 | - | - | - | - | - | - | - | - | 640,594 |
| Other Patient Revenue | 185,546 | 460,636 | 346,606 | 1,379,115 | - | - | - | - | - | - | - | - | 2,371,902 |
| Net Patient Revenue | 770,557 | 921,934 | 798,350 | 1,700,355 | - | - | - | - | - | - | - | - | 4,191,196 |
| Collections % | 39.58% | 61.80% | 39.78% | 103.31% | - | - | - | - | - | - | - | - | 59.11% |
| Grant Funds | 574,778 | 606,454 | 690,034 | 1,616,221 | - | - | - | - | - | - | - | - | 3,487,486 |
| Other Revenue | 4,645 | 8,821 | 24,768 | 6,149 | - | - | - | - | - | - | - | - | 44,382 |
| Total Other Revenues | 579,423 | 615,275 | 714,802 | 1,622,369 | - | - | - | - | - | - | - | - | 3,531,869 |
| Total Revenues | 1,349,980 | 1,537,209 | 1,513,151 | 3,322,725 | - | - | - | - | - | - | - | - | 7,723,065 |
| <i>Direct Operational Expenses:</i> | | | | | | | | | | | | | |
| Salaries and Wages | 1,387,450 | 1,190,417 | 1,317,029 | 1,713,339 | - | - | - | - | - | - | - | - | 5,108,236 |
| Benefits | 339,645 | 322,045 | 314,881 | 366,759 | - | - | - | - | - | - | - | - | 1,343,330 |
| Purchased Services | 65,028 | 68,614 | 50,770 | 82,094 | - | - | - | - | - | - | - | - | 266,506 |
| Medical Supplies | 41,828 | 27,305 | 14,573 | 29,201 | - | - | - | - | - | - | - | - | 112,907 |
| Other Supplies | 34,148 | 3,947 | 2,672 | 28,292 | - | - | - | - | - | - | - | - | 69,060 |
| Contracted Physician Expense | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Medical Services | 58,809 | (461) | 19,144 | 25,930 | - | - | - | - | - | - | - | - | 103,422 |
| Drugs | 47,555 | 37,534 | 36,129 | 31,431 | - | - | - | - | - | - | - | - | 152,648 |
| Repairs & Maintenance | 29,881 | 36,555 | 32,150 | 30,986 | - | - | - | - | - | - | - | - | 129,573 |
| Lease & Rental | 109,171 | 104,594 | 104,526 | 114,021 | - | - | - | - | - | - | - | - | 432,312 |
| Utilities | 4,568 | 6,558 | 5,313 | 5,904 | - | - | - | - | - | - | - | - | 22,343 |
| Other Expense | 15,526 | (576) | 24,682 | 22,887 | - | - | - | - | - | - | - | - | 62,519 |
| Insurance | 2,425 | 2,170 | 2,170 | 2,170 | - | - | - | - | - | - | - | - | 8,934 |
| Total Operational Expenses | 2,116,034 | 1,798,702 | 1,924,039 | 1,953,014 | - | - | - | - | - | - | - | - | 7,811,788 |
| Net Performance before Depreciation & Overhead Allocations | (786,055) | (261,492) | (410,887) | 1,369,711 | - | - | - | - | - | - | - | - | (88,723) |
| Depreciation | 17,256 | 17,256 | 5,158 | 13,224 | - | - | - | - | - | - | - | - | 52,894 |
| <i>Overhead Allocations:</i> | | | | | | | | | | | | | |
| Risk Mgt | 9,302 | 16,111 | 8,746 | (15,331) | - | - | - | - | - | - | - | - | 18,329 |
| Rev Cycle | 86,904 | 98,059 | 124,187 | 100,095 | - | - | - | - | - | - | - | - | 409,246 |
| Internal Audit | 5,120 | 5,120 | 5,120 | 5,120 | - | - | - | - | - | - | - | - | 20,480 |
| Palm Springs Facility | 17,032 | 16,269 | 16,141 | 23,398 | - | - | - | - | - | - | - | - | 72,841 |
| Administration | 24,974 | 26,124 | 21,164 | 26,766 | - | - | - | - | - | - | - | - | 99,028 |
| Human Resources | 33,486 | 34,265 | 34,863 | 38,678 | - | - | - | - | - | - | - | - | 141,293 |
| Legal | 6,468 | 11,903 | 8,094 | 34,857 | - | - | - | - | - | - | - | - | 61,322 |
| Records | 6,520 | 6,452 | 6,067 | 6,656 | - | - | - | - | - | - | - | - | 25,695 |
| Compliance | 5,776 | 7,197 | 3,605 | 6,283 | - | - | - | - | - | - | - | - | 22,861 |
| Planning/Research | 1,340 | 1,281 | 1,209 | 1,325 | - | - | - | - | - | - | - | - | 5,155 |
| Finance | 24,095 | 32,875 | 22,630 | 39,695 | - | - | - | - | - | - | - | - | 119,296 |
| Public Relations | 6,478 | 6,365 | 8,336 | 7,466 | - | - | - | - | - | - | - | - | 28,645 |
| Information Technology | 80,379 | 69,273 | 97,329 | 86,977 | - | - | - | - | - | - | - | - | 333,958 |
| Budget & Decision Support | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Corporate Quality | 3,986 | 3,764 | 2,150 | 2,591 | - | - | - | - | - | - | - | - | 12,491 |
| Managed Care Contract | 3,421 | 4,019 | 3,039 | 3,676 | - | - | - | - | - | - | - | - | 14,155 |
| Total Overhead Allocations | 315,282 | 339,079 | 362,180 | 368,255 | - | - | - | - | - | - | - | - | 1,384,796 |
| Total Expenses | 2,468,573 | 2,155,037 | 2,291,377 | 2,334,492 | - | - | - | - | - | - | - | - | 9,249,479 |
| Net Margin | \$ (1,118,593) | \$ (617,827) | \$ (778,226) | \$ 988,232 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ (1,526,414) |
| Capital | - | - | (13,581) | 13,581 | - | - | - | - | - | - | - | - | - |
| General Fund Support/ Transfer In | 1,101,337 | 596,437 | 930,086 | - | - | - | - | - | - | - | - | - | \$ 2,627,860 |

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

FOR THE FOURTH MONTH ENDED JANUARY 31, 2019

| | Clinic Administration | West Palm Beach Clinic | Lantana Clinic | DeRay Clinic | Belle Glade Clinic | Jerome Golden Center | Lewis Center | Rams Clinic | Lake Worth Clinic | Jupiter Clinic | West Boca Clinic | Subzone Clinic | Mobile Van | Total |
|---|-----------------------|------------------------|---------------------|---------------------|--------------------|----------------------|--------------------|----------------|---------------------|--------------------|--------------------|---------------------|--------------------|-----------------------|
| Gross Patient Revenue | - | 1,058,482 | 1,159,915 | 875,526 | 622,975 | - | 262,887 | - | 876,391 | 305,308 | 583,415 | - | 114,764 | 5,859,664 |
| Contractual Allowances | - | 526,595 | 439,166 | 470,975 | 338,128 | (1,290) | 142,859 | 250 | 332,387 | 108,821 | 247,293 | - | 40,184 | 2,645,368 |
| Charity Care | - | 209,030 | 263,872 | 118,646 | 79,690 | - | 50,536 | - | 193,918 | 48,666 | 114,027 | - | 19,976 | 1,098,361 |
| Bad Debt | - | 104,914 | 170,169 | 101,115 | 88,241 | (2,539) | 45,968 | (184) | 48,243 | 7,631 | 30,615 | - | 26,952 | 621,126 |
| Total Contractual Allowances and Bad Debt | - | 840,539 | 873,206 | 690,736 | 506,059 | (3,829) | 239,364 | 66 | 574,548 | 165,117 | 391,935 | - | 87,112 | 4,364,854 |
| Other Patient Revenue | - | 334,644 | 298,557 | 239,337 | 166,327 | 2,103 | 62,466 | - | 278,252 | 71,720 | 131,849 | - | 27,820 | 1,613,074 |
| Net Patient Revenue | - | 552,587 | 585,266 | 424,127 | 283,243 | 5,932 | 85,990 | (66) | 580,095 | 211,911 | 323,329 | - | 55,472 | 3,107,884 |
| Collection % | 0.00% | 52.21% | 50.46% | 48.44% | 45.47% | 0.00% | 32.71% | 0.00% | 66.19% | 69.41% | 55.42% | 0.00% | 48.34% | 53.04% |
| Grant Funds | 337,771 | 367,330 | 353,096 | 318,881 | 670,297 | - | 89,526 | - | 379,226 | 120,091 | 177,201 | 66,317 | 36,105 | 2,915,839 |
| Other Revenue | 10,806 | 4,372 | 1,132 | 1,762 | 4,218 | - | 150 | - | 3,576 | 3,737 | 884 | 13,506 | 6 | 44,149 |
| Total Other Revenues | 348,577 | 371,702 | 354,228 | 320,643 | 674,514 | - | 89,676 | - | 382,801 | 123,828 | 178,086 | 79,823 | 36,111 | 2,959,989 |
| Total Revenues | 348,577 | 924,288 | 939,493 | 744,771 | 957,757 | 5,932 | 175,666 | (66) | 962,896 | 335,738 | 501,415 | 79,823 | 91,583 | 6,067,872 |
| <i>Direct Operational Expenses:</i> | | | | | | | | | | | | | | |
| Salaries and Wages | 566,640 | 636,694 | 608,826 | 527,781 | 345,211 | - | 150,741 | - | 633,323 | 207,089 | 294,533 | 115,637 | 79,869 | 4,166,343 |
| Benefits | 111,891 | 150,315 | 164,920 | 158,146 | 91,139 | - | 36,525 | - | 183,636 | 56,260 | 74,051 | 27,205 | 26,814 | 1,080,903 |
| Purchased Services | 30,536 | 31,395 | 27,482 | 20,294 | 21,759 | - | 3,225 | - | 37,481 | 28,362 | 27,739 | - | 1,870 | 230,144 |
| Medical Supplies | - | 6,281 | 18,932 | 4,680 | 5,499 | - | 1,708 | - | 7,446 | 1,005 | 2,747 | - | - | 48,299 |
| Other Supplies | 8,922 | 749 | 25,750 | (258) | 865 | - | 406 | - | 2,218 | 581 | 808 | - | 1,529 | 41,570 |
| Contracted Physician Expense | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Medical Services | - | 17,864 | 21,837 | - | 19,425 | - | 2,229 | - | 20,801 | 3,534 | 17,733 | - | - | 103,422 |
| Drugs | - | 34,292 | 52,888 | 29,570 | 13,530 | - | 916 | - | 6,769 | 6,713 | 952 | 6,404 | 0 | 152,034 |
| Repairs & Maintenance | - | 19,011 | 19,912 | 19,578 | 11,241 | - | 3,162 | - | 19,285 | 7,404 | 10,636 | 1,200 | 1,071 | 112,499 |
| Lease & Rental | 50 | 45,425 | 26,389 | 34,315 | 58,809 | 5,013 | 1,208 | - | 76,501 | 25,570 | 47,321 | - | - | 320,602 |
| Utilities | - | 290 | 1,318 | 363 | 6,058 | - | 725 | - | 4,623 | 3,178 | 2,259 | - | - | 18,814 |
| Other Expense | 43,591 | 966 | 1,335 | 1,995 | 1,727 | - | 2,345 | - | 2,435 | 454 | 2,657 | - | 108 | 57,614 |
| Insurance | - | 1,674 | 1,407 | 1,137 | 417 | 118 | - | - | 263 | 223 | 255 | - | 3,171 | 8,664 |
| Total Operational Expenses | 761,632 | 944,957 | 970,998 | 797,601 | 575,679 | 5,131 | 203,192 | - | 994,780 | 340,373 | 481,691 | 150,446 | 114,432 | 6,340,909 |
| Net Performance before Depreciation & Overhead Allocations | (413,054) | (20,668) | (31,504) | (52,831) | 382,078 | 800 | (27,526) | (66) | (31,883) | (4,634) | 19,724 | (70,623) | (22,849) | (273,037) |
| Depreciation | 2,975 | 1,773 | 1,524 | 599 | 836 | 186 | 429 | 28 | 2,420 | 1,709 | 1,598 | - | 25,000 | 39,077 |
| <i>Overhead Allocations:</i> | | | | | | | | | | | | | | |
| Risk Mgt | 1,879 | 2,020 | 2,018 | 1,783 | 1,146 | - | 424 | - | 2,354 | 806 | 1,210 | 755 | 340 | 14,736 |
| Rev Cycle | - | 50,968 | 50,926 | 45,005 | 28,919 | - | 10,700 | - | 59,402 | 20,351 | 30,529 | 19,058 | 8,580 | 324,438 |
| Internal Audit | 2,099 | 2,257 | 2,255 | 1,993 | 1,280 | - | 474 | - | 2,630 | 901 | 1,352 | 844 | 380 | 16,464 |
| Palm Springs Facility | 64,802 | - | - | - | - | - | - | - | - | - | - | - | - | 64,802 |
| Administration | 10,150 | 10,912 | 10,903 | 9,636 | 6,192 | - | 2,291 | - | 12,718 | 4,357 | 6,536 | 4,080 | 1,837 | 79,612 |
| Human Resources | 8,769 | 18,122 | 17,011 | 15,199 | 8,769 | - | 2,923 | - | 16,719 | 6,430 | 11,107 | 5,846 | 2,338 | 113,233 |
| Legal | 6,285 | 6,757 | 6,752 | 5,967 | 3,834 | - | 1,419 | - | 7,875 | 2,698 | 4,048 | 2,527 | 1,137 | 49,299 |
| Records | 2,634 | 2,831 | 2,829 | 2,500 | 1,607 | - | 594 | - | 3,300 | 1,131 | 1,696 | 1,059 | 477 | 20,657 |
| Compliance | 2,343 | 2,519 | 2,517 | 2,224 | 1,429 | - | 529 | - | 2,936 | 1,006 | 1,509 | 942 | 424 | 18,378 |
| Planning/Research | 528 | 568 | 568 | 502 | 322 | - | 119 | - | 662 | 227 | 340 | 212 | 96 | 4,145 |
| Finance | 12,227 | 13,146 | 13,135 | 11,608 | 7,459 | - | 2,760 | - | 15,321 | 5,249 | 7,874 | 4,915 | 2,213 | 95,906 |
| Public Relations | 2,936 | 3,157 | 3,154 | 2,787 | 1,791 | - | 663 | - | 3,679 | 1,260 | 1,891 | 1,180 | 531 | 23,029 |
| Information Technology | 34,228 | 36,800 | 36,770 | 32,495 | 20,880 | - | 7,726 | - | 42,890 | 14,694 | 22,043 | 13,760 | 6,195 | 268,480 |
| Budget & Decision Support | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Corporate Quality | 1,280 | 1,376 | 1,375 | 1,215 | 781 | - | 289 | - | 1,604 | 550 | 824 | 515 | 232 | 10,042 |
| Managed Care Contract | - | 1,763 | 1,761 | 1,557 | 1,000 | - | 370 | - | 2,055 | 704 | 1,056 | 659 | 297 | 11,222 |
| Total Overhead Allocations | 150,159 | 153,195 | 151,974 | 134,470 | 85,410 | - | 31,280 | - | 174,145 | 60,365 | 92,014 | 56,353 | 25,076 | 1,114,442 |
| Total Expenses | 914,766 | 1,099,925 | 1,124,496 | 932,671 | 661,924 | 5,317 | 234,901 | 28 | 1,171,344 | 402,446 | 575,303 | 206,799 | 164,508 | 7,494,428 |
| Net Margin | \$ (566,189) | \$ (175,637) | \$ (185,003) | \$ (187,900) | \$ 295,833 | \$ 614 | \$ (59,235) | \$ (94) | \$ (208,448) | \$ (66,708) | \$ (73,888) | \$ (126,976) | \$ (72,925) | \$ (1,426,555) |
| Capital | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| General Fund Support/ Transfer In | \$ 2,627,860 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 2,627,860 |

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

FOR THE FOURTH MONTH ENDED JANUARY 31, 2019

| Current Month | | | | | | | Fiscal Year To Date | | | | | | |
|---|-----------|-----------|----------|------------|-----------|----------|---------------------|-------------|-------------|----------|------------|-------------|----------|
| Actual | Budget | Variance | % | Prior Year | Variance | % | Actual | Budget | Variance | % | Prior Year | Variance | % |
| 1,340,332 | 1,565,163 | (224,831) | (14.4%) | 1,569,682 | (229,350) | (14.6%) | 5,859,664 | 6,159,888 | (300,224) | (4.9%) | 5,869,079 | (9,415) | (0.2%) |
| 781,708 | 384,343 | (397,365) | (103.4%) | 337,208 | (444,500) | (131.8%) | 2,645,368 | 1,522,167 | (1,123,201) | (73.8%) | 1,587,556 | (1,057,811) | (66.6%) |
| 217,527 | 568,653 | 351,126 | 61.7% | 159,785 | (57,742) | (36.1%) | 1,098,361 | 2,231,760 | 1,133,399 | 50.8% | 344,749 | (753,612) | (218.6%) |
| 101,589 | 172,737 | 71,148 | 41.2% | 148,118 | 46,529 | 31.4% | 621,126 | 677,930 | 56,804 | 8.4% | 676,063 | 54,937 | 8.1% |
| 1,100,824 | 1,125,733 | 24,909 | 2.2% | 645,111 | (455,713) | (70.6%) | 4,364,854 | 4,431,857 | 67,003 | 1.5% | 2,608,369 | (1,756,486) | (67.3%) |
| 941,579 | 148,099 | 793,480 | 535.8% | 153,027 | 788,553 | 515.3% | 1,613,074 | 592,396 | 1,020,678 | 172.3% | 153,027 | 1,460,048 | 954.1% |
| 1,181,087 | 587,529 | 593,558 | 101.0% | 1,077,598 | 103,489 | 9.6% | 3,107,884 | 2,320,427 | 787,457 | 33.9% | 3,413,737 | (305,853) | (9.0%) |
| 88.12% | 37.54% | | | 68.65% | | | 53.04% | 37.67% | | 58.16% | | | |
| 1,407,612 | 560,993 | 846,619 | 150.9% | 568,145 | 839,467 | 147.8% | 2,915,839 | 2,243,972 | 671,867 | 29.9% | 2,035,938 | 879,901 | 43.2% |
| 6,149 | 12,988 | (6,839) | (52.7%) | 3,012 | 3,136 | 104.1% | 44,149 | 51,952 | (7,803) | (15.0%) | 117,348 | (73,199) | (62.4%) |
| 1,413,760 | 573,981 | 839,779 | 146.3% | 571,157 | 842,603 | 147.5% | 2,959,989 | 2,295,924 | 664,065 | 28.9% | 2,153,287 | 806,702 | 37.5% |
| 2,594,848 | 1,161,510 | 1,433,338 | 123.4% | 1,648,755 | 946,092 | 57.4% | 6,067,872 | 4,616,351 | 1,451,521 | 31.4% | 5,567,023 | 500,849 | 9.0% |
| <i>Direct Operational Expenses:</i> | | | | | | | | | | | | | |
| 992,315 | 1,079,396 | 87,081 | 8.1% | 954,290 | (38,024) | (4.0%) | 4,166,343 | 4,266,941 | 100,598 | 2.4% | 3,803,383 | (362,961) | (9.5%) |
| 298,650 | 305,001 | 6,351 | 2.1% | 272,109 | (26,541) | (9.8%) | 1,080,903 | 1,205,479 | 124,576 | 10.3% | 1,001,446 | (79,458) | (7.9%) |
| 73,604 | 52,651 | (20,953) | (39.8%) | 48,897 | (24,706) | (50.5%) | 230,144 | 209,107 | (21,037) | (10.1%) | 148,491 | (81,652) | (55.0%) |
| 9,461 | 17,344 | 7,883 | 45.5% | 16,324 | 6,863 | 42.0% | 48,299 | 67,867 | 19,568 | 28.8% | 63,519 | 15,220 | 24.0% |
| 18,312 | 18,845 | 533 | 2.8% | 7,606 | (10,706) | (140.8%) | 41,570 | 88,820 | 47,250 | 53.2% | 24,479 | (17,091) | (69.8%) |
| - | - | - | 0.0% | - | - | 0.0% | - | - | - | 0.0% | 15,355 | 15,355 | 100.0% |
| 25,930 | 58,311 | 32,381 | 55.5% | - | (25,930) | 0.0% | 103,422 | 228,247 | 124,825 | 54.7% | - | (103,422) | 0.0% |
| 31,431 | 46,910 | 15,479 | 33.0% | 48,406 | 16,974 | 35.1% | 152,034 | 183,594 | 31,560 | 17.2% | 192,222 | 40,188 | 20.9% |
| 22,643 | 8,544 | (14,099) | (165.0%) | 10,624 | (12,019) | (113.1%) | 112,499 | 36,416 | (76,083) | (208.9%) | 131,832 | 19,333 | 14.7% |
| 87,287 | 80,509 | (6,778) | (8.4%) | 92,800 | 5,512 | 5.9% | 320,602 | 327,775 | 7,173 | 2.2% | 332,469 | 11,867 | 3.6% |
| 5,189 | 5,503 | 314 | 5.7% | 4,923 | (266) | (5.4%) | 18,814 | 22,012 | 3,198 | 14.5% | 21,370 | 2,556 | 12.0% |
| 21,786 | 23,977 | 2,191 | 9.1% | 20,090 | (1,697) | (8.4%) | 57,614 | 100,630 | 43,016 | 42.7% | 79,349 | 21,734 | 27.4% |
| 2,105 | 2,307 | 202 | 8.8% | 1,331 | (774) | (58.2%) | 8,664 | 9,537 | 873 | 9.1% | 6,001 | (2,663) | (44.4%) |
| 1,588,713 | 1,699,298 | 110,585 | 6.5% | 1,477,400 | (111,313) | (7.5%) | 6,340,909 | 6,746,425 | 405,516 | 6.0% | 5,819,915 | (520,994) | (9.0%) |
| Net Performance before Depreciation & Overhead Allocations | | | | | | | | | | | | | |
| 1,006,135 | (537,788) | 1,543,923 | (287.1%) | 171,355 | 834,780 | 487.2% | (273,037) | (2,130,074) | 1,857,037 | (87.2%) | (252,892) | (20,145) | 8.0% |

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

FOR THE FOURTH MONTH ENDED JANUARY 31, 2019

| Current Month | | | | | | | | Fiscal Year To Date | | | | | | | |
|------------------------------|--------------|--------------|----------|-------------|------------|------------|-----------------------------------|---------------------|----------------|--------------|---------|----------------|----------------|------------|--|
| Actual | Budget | Variance | % | Prior Year | Variance | % | | Actual | Budget | Variance | % | Prior Year | Variance | % | |
| 9,809 | 6,072 | (3,737) | (61.5%) | 4,517 | (5,292) | (117.1%) | Depreciation | 39,077 | 24,288 | (14,789) | (60.9%) | 18,069 | (21,008) | (116.3%) | |
| <i>Overhead Allocations:</i> | | | | | | | | | | | | | | | |
| (12,325) | 10,221 | 22,546 | 220.6% | 6,887 | 19,211 | 279.0% | Risk Mgt | 14,736 | 40,884 | 26,148 | 64.0% | 30,366 | 15,630 | 51.5% | |
| 79,353 | 72,195 | (7,158) | (9.9%) | 46,233 | (33,120) | (71.6%) | Rev Cycle | 324,438 | 288,780 | (35,658) | (12.3%) | 146,998 | (177,441) | (120.7%) | |
| 4,116 | 4,469 | 353 | 7.9% | 455 | (3,661) | (805.3%) | Internal Audit | 16,464 | 17,876 | 1,412 | 7.9% | 459 | (16,006) | (3,488.7%) | |
| 20,816 | 18,493 | (2,323) | (12.6%) | 17,361 | (3,455) | (19.9%) | Palm Springs Facility | 64,802 | 73,972 | 9,170 | 12.4% | 70,987 | 6,185 | 8.7% | |
| 21,518 | 20,036 | (1,482) | (7.4%) | 21,208 | (310) | (1.5%) | Administration | 79,612 | 80,144 | 532 | 0.7% | 81,705 | 2,093 | 2.6% | |
| 30,997 | 27,444 | (3,553) | (12.9%) | 15,902 | (15,095) | (94.9%) | Human Resources | 113,233 | 109,776 | (3,457) | (3.1%) | 73,908 | (39,324) | (53.2%) | |
| 28,023 | 10,236 | (17,787) | (173.8%) | 6,820 | (21,203) | (310.9%) | Legal | 49,299 | 40,944 | (8,355) | (20.4%) | 27,523 | (21,776) | (79.1%) | |
| 5,351 | 6,789 | 1,438 | 21.2% | 3,728 | (1,624) | (43.6%) | Records | 20,657 | 27,156 | 6,499 | 23.9% | 13,907 | (6,750) | (48.5%) | |
| 5,051 | 9,404 | 4,353 | 46.3% | 6,519 | 1,468 | 22.5% | Compliance | 18,378 | 37,616 | 19,238 | 51.1% | 20,860 | 2,482 | 11.9% | |
| 1,066 | 1,148 | 82 | 7.2% | 979 | (86) | (8.8%) | Planning/Research | 4,145 | 4,592 | 447 | 9.7% | 4,142 | (2) | (0.1%) | |
| 31,912 | 28,051 | (3,861) | (13.8%) | 19,393 | (12,519) | (64.6%) | Finance | 95,906 | 112,204 | 16,298 | 14.5% | 74,989 | (20,917) | (27.9%) | |
| 6,002 | 10,572 | 4,570 | 43.2% | 4,078 | (1,924) | (47.2%) | Public Relations | 23,029 | 42,288 | 19,259 | 45.5% | 20,418 | (2,611) | (12.8%) | |
| 69,924 | 80,135 | 10,211 | 12.7% | 29,394 | (40,530) | (137.9%) | Information Technology | 268,480 | 320,540 | 52,060 | 16.2% | 254,875 | (13,605) | (5.3%) | |
| - | - | - | 0.0% | 2,052 | 2,052 | 100.0% | Budget & Decision Support | - | - | - | 0.0% | 7,580 | 7,580 | 100.0% | |
| 2,083 | 2,181 | 98 | 4.5% | 2,797 | 714 | 25.5% | Corporate Quality | 10,042 | 8,724 | (1,318) | (15.1%) | 10,201 | 159 | 1.6% | |
| 2,915 | 4,569 | 1,654 | 36.2% | 4,265 | 1,350 | 31.7% | Managed Care Contract | 11,222 | 18,276 | 7,054 | 38.6% | 14,616 | 3,394 | 23.2% | |
| 296,801 | 305,943 | 9,142 | 3.0% | 188,070 | (108,731) | (57.8%) | Total Overhead Allocations | 1,114,442 | 1,223,772 | 109,330 | 8.9% | 853,534 | (260,908) | (30.6%) | |
| 1,895,323 | 2,011,313 | 115,990 | 5.8% | 1,669,988 | (225,335) | (13.5%) | Total Expenses | 7,494,428 | 7,994,485 | 500,057 | 6.3% | 6,691,518 | (802,909) | (12.0%) | |
| \$ 699,525 | \$ (849,803) | \$ 1,549,328 | (182.3%) | \$ (21,232) | \$ 720,757 | (3,394.6%) | Net Margin | \$ (1,426,555) | \$ (3,378,134) | \$ 1,951,579 | (57.8%) | \$ (1,124,495) | \$ (302,060) | 26.9% | |
| - | 75,000 | 75,000 | 100.0% | - | - | 0.0% | Capital | - | 300,000 | 300,000 | 100.0% | - | - | 0.0% | |
| \$ - | \$ 1,087,500 | \$ 1,087,500 | 100.0% | \$ - | \$ - | 0.0% | General Fund Support/ Transfer In | \$ 2,627,860 | \$ 4,350,000 | \$ 1,722,140 | 39.6% | \$ - | \$ (2,627,860) | 0.0% | |

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

FOR THE FOURTH MONTH ENDED JANUARY 31, 2019

| | Dental Clinic Administration | West Palm Beach Dental Clinic | Lantana Dental Clinic | Delray Dental Clinic | Belle Glade Dental Clinic | Lake Worth Dental Clinic | West Boca Dental Clinic | Total |
|--|---------------------------------|----------------------------------|--------------------------|-------------------------|------------------------------|-----------------------------|----------------------------|------------------|
| Gross Patient Revenue | - | 438,302 | 333,522 | 310,947 | 148,643 | - | - | 1,231,414 |
| Contractual Allowances | - | 127,766 | 74,844 | 87,697 | 42,726 | - | - | 333,033 |
| Charity Care | - | 167,284 | 171,837 | 156,395 | 58,913 | - | - | 554,427 |
| Bad Debt | - | 351 | 11,485 | 3,685 | 3,947 | - | - | 19,468 |
| Total Contractual Allowances and Bad Debt | - | 295,401 | 258,165 | 247,777 | 105,586 | - | - | 906,929 |
| Other Patient Revenue | - | 239,076 | 206,265 | 202,237 | 111,249 | - | - | 758,827 |
| Net Patient Revenue | - | 381,977 | 281,622 | 265,407 | 154,306 | - | - | 1,083,312 |
| Collection % | - | 87.15% | 84.44% | 85.35% | 103.81% | 0.00% | 0.00% | 87.97% |
| Grant Funds | 55,079 | 186,727 | 138,120 | 130,251 | 61,471 | - | - | 571,647 |
| Other Revenue | - | - | - | - | 233 | - | - | 233 |
| Total Other Revenues | 55,079 | 186,727 | 138,120 | 130,251 | 61,704 | - | - | 571,880 |
| Total Revenues | 55,079 | 568,704 | 419,742 | 395,658 | 216,010 | - | - | 1,655,192 |
| <i>Direct Operational Expenses:</i> | | | | | | | | |
| Salaries and Wages | 95,332 | 301,230 | 232,347 | 211,231 | 101,752 | - | - | 941,893 |
| Benefits | 18,741 | 91,259 | 57,968 | 64,231 | 30,228 | - | - | 262,426 |
| Purchased Services | - | 8,222 | 6,976 | 6,707 | 14,458 | - | - | 36,362 |
| Medical Supplies | - | 22,125 | 17,160 | 14,156 | 11,166 | - | - | 64,608 |
| Other Supplies | (12) | 13,158 | 4,071 | 6,823 | 3,449 | - | - | 27,489 |
| Contracted Physician Expense | - | - | - | - | - | - | - | - |
| Medical Services | - | - | - | - | - | - | - | - |
| Drugs | - | 39 | 300 | 35 | 240 | - | - | 614 |
| Repairs & Maintenance | - | 4,218 | 4,515 | 4,683 | 3,658 | - | - | 17,074 |
| Lease & Rental | - | 39,738 | 24,010 | 22,992 | 24,970 | - | - | 111,710 |
| Utilities | - | 498 | 1,526 | 571 | 933 | - | - | 3,529 |
| Other Expense | 1,212 | 1,953 | 2,417 | (1,530) | 852 | - | - | 4,905 |
| Insurance | - | - | - | - | 270 | - | - | 270 |
| Total Operational Expenses | 115,274 | 482,440 | 351,289 | 329,900 | 191,976 | - | - | 1,470,879 |
| Net Performance before Depreciation & Overhead Allocations | (60,195) | 86,264 | 68,453 | 65,758 | 24,033 | - | - | 184,313 |
| Depreciation | - | 4,986 | 2,177 | 3,405 | 3,249 | - | - | 13,817 |
| <i>Overhead Allocations:</i> | | | | | | | | |
| Risk Mgt | 233 | 1,131 | 993 | 767 | 470 | - | - | 3,594 |
| Rev Cycle | - | 28,543 | 25,056 | 19,352 | 11,857 | - | - | 84,807 |
| Internal Audit | 260 | 1,264 | 1,109 | 857 | 525 | - | - | 4,015 |
| Palm Springs Facility Administration | 8,039 | - | - | - | - | - | - | 8,039 |
| Human Resources | 1,259 | 6,111 | 5,365 | 4,143 | 2,539 | - | - | 19,416 |
| Legal | 1,169 | 8,769 | 8,184 | 6,430 | 3,507 | - | - | 28,060 |
| Records | 780 | 3,784 | 3,322 | 2,566 | 1,572 | - | - | 12,023 |
| Compliance | 327 | 1,586 | 1,392 | 1,075 | 659 | - | - | 5,038 |
| Planning/Research | 291 | 1,411 | 1,238 | 956 | 586 | - | - | 4,482 |
| Finance | 66 | 318 | 279 | 216 | 132 | - | - | 1,011 |
| Public Relations | 1,517 | 7,362 | 6,462 | 4,991 | 3,058 | - | - | 23,390 |
| Information Technology | 364 | 1,768 | 1,552 | 1,198 | 734 | - | - | 5,616 |
| Budget & Decision Support | 4,246 | 20,608 | 18,091 | 13,972 | 8,561 | - | - | 65,479 |
| Corporate Quality | - | - | - | - | - | - | - | - |
| Managed Care Contract | 159 | 771 | 677 | 523 | 320 | - | - | 2,449 |
| Total Overhead Allocations | 18,709 | 84,412 | 74,587 | 57,716 | 34,931 | - | - | 270,354 |
| Total Expenses | 133,983 | 571,838 | 428,053 | 391,021 | 230,156 | - | - | 1,755,051 |
| Net Margin | \$ (78,904) | \$ (3,134) | \$ (8,312) | \$ 4,637 | \$ (14,146) | \$ - | \$ - | \$ (99,859) |
| Capital | - | - | - | - | - | - | - | - |
| General Fund Support/ Transfer In | - | - | - | - | - | - | - | \$ - |

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

FOR THE FOURTH MONTH ENDED JANUARY 31, 2019

| Current Month | | | | | | | Fiscal Year To Date | | | | | | |
|-------------------------------------|----------|----------|------------|------------|-----------|------------|---------------------|-----------|-----------|----------|------------|-----------|------------|
| Actual | Budget | Variance | % | Prior Year | Variance | % | Actual | Budget | Variance | % | Prior Year | Variance | % |
| 305,487 | 342,923 | (37,437) | (10.9%) | 317,501 | (12,015) | (3.8%) | 1,231,414 | 1,345,860 | (114,446) | (8.5%) | 1,290,873 | (59,459) | (4.6%) |
| 87,653 | 71,594 | (16,059) | (22.4%) | (58,679) | (146,332) | 249.4% | 333,033 | 280,982 | (52,051) | (18.5%) | (124,572) | (457,605) | 367.3% |
| 130,686 | 159,378 | 28,693 | 18.0% | 58,927 | (71,759) | (121.8%) | 554,427 | 625,506 | 71,079 | 11.4% | 99,176 | (455,251) | (459.0%) |
| 5,415 | 15,005 | 9,590 | 63.9% | 4,982 | (433) | (8.7%) | 19,468 | 58,890 | 39,422 | 66.9% | 46,679 | 27,211 | 58.3% |
| 223,754 | 245,977 | 22,223 | 9.0% | 5,230 | (218,524) | (4,178.3%) | 906,929 | 965,378 | 58,449 | 6.1% | 21,283 | (885,646) | (4,161.2%) |
| 437,536 | 89,241 | 348,295 | 390.3% | - | 437,536 | 0.0% | 758,827 | 356,964 | 401,863 | 112.6% | - | 758,827 | 0.0% |
| 519,268 | 186,187 | 333,081 | 178.9% | 312,271 | 206,997 | 66.3% | 1,083,312 | 737,446 | 345,866 | 46.9% | 1,269,590 | (186,278) | (14.7%) |
| 169.98% | 54.29% | | | 98.35% | | | 87.97% | 54.79% | | 98.35% | | | |
| 208,609 | 193,821 | 14,788 | 7.6% | 126,279 | 82,330 | 65.2% | 571,647 | 775,308 | (203,661) | (26.3%) | 420,663 | 150,984 | 35.9% |
| - | 2,833 | (2,833) | (100.0%) | - | - | 0.0% | 233 | 11,332 | (11,099) | (97.9%) | - | 233 | 0.0% |
| 208,609 | 196,654 | 11,955 | 6.1% | 126,279 | 82,330 | 65.2% | 571,880 | 786,640 | (214,760) | (27.3%) | 420,663 | 151,217 | 35.9% |
| 727,877 | 382,841 | 345,036 | 90.1% | 438,550 | 289,327 | 66.0% | 1,655,192 | 1,524,086 | 131,106 | 8.6% | 1,690,253 | (35,061) | (2.1%) |
| <i>Direct Operational Expenses:</i> | | | | | | | | | | | | | |
| 221,025 | 244,332 | 23,307 | 9.5% | 202,749 | (18,275) | (9.0%) | 941,893 | 965,859 | 23,966 | 2.5% | 874,341 | (67,552) | (7.7%) |
| 68,109 | 71,028 | 2,919 | 4.1% | 66,960 | (1,149) | (1.7%) | 262,426 | 280,723 | 18,297 | 6.5% | 253,831 | (8,595) | (3.4%) |
| 8,490 | 12,038 | 3,548 | 29.5% | 7,110 | (1,380) | (19.4%) | 36,362 | 51,003 | 14,641 | 28.7% | 31,243 | (5,119) | (16.4%) |
| 19,740 | 24,137 | 4,397 | 18.2% | 29,059 | 9,319 | 32.1% | 64,608 | 94,048 | 29,440 | 31.3% | 83,023 | 18,415 | 22.2% |
| 9,980 | 10,751 | 771 | 7.2% | 439 | (9,542) | (2,175.7%) | 27,489 | 43,972 | 16,483 | 37.5% | 2,139 | (25,350) | (1,185.0%) |
| - | - | - | 0.0% | - | - | 0.0% | - | - | - | 0.0% | - | - | 0.0% |
| - | - | - | 0.0% | - | - | 0.0% | - | - | - | 0.0% | - | - | 0.0% |
| - | 1,685 | 1,685 | 100.0% | 1,776 | 1,776 | 100.0% | 614 | 6,567 | 5,953 | 90.7% | 5,980 | 5,366 | 89.7% |
| 8,344 | 5,985 | (2,359) | (39.4%) | 2,311 | (6,033) | (261.1%) | 17,074 | 22,042 | 4,968 | 22.5% | 18,141 | 1,066 | 5.9% |
| 26,733 | 27,444 | 711 | 2.6% | 36,297 | 9,563 | 26.3% | 111,710 | 109,776 | (1,934) | (1.8%) | 107,280 | (4,430) | (4.1%) |
| 715 | 748 | 33 | 4.5% | 666 | (49) | (7.4%) | 3,529 | 2,992 | (537) | (17.9%) | 3,021 | (508) | (16.8%) |
| 1,101 | 3,963 | 2,862 | 72.2% | 340 | (760) | (223.5%) | 4,905 | 14,183 | 9,279 | 65.4% | 10,859 | 5,955 | 54.8% |
| 65 | 59 | (6) | (10.0%) | 86 | 21 | 24.4% | 270 | 236 | (34) | (14.3%) | 387 | 117 | 30.3% |
| 364,301 | 402,170 | 37,869 | 9.4% | 347,792 | (16,509) | (4.7%) | 1,470,879 | 1,591,401 | 120,522 | 7.6% | 1,390,246 | (80,634) | (5.8%) |
| Net Performance before | | | | | | | | | | | | | |
| 363,576 | (19,329) | 382,905 | (1,981.0%) | 90,758 | 272,818 | 300.6% | 184,313 | (67,315) | 251,628 | (373.8%) | 300,008 | (115,695) | (38.6%) |

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

FOR THE FOURTH MONTH ENDED JANUARY 31, 2019

| Current Month | | | | | | | Fiscal Year To Date | | | | | | |
|------------------------------|--------------|------------|----------|------------|------------|----------|---------------------|--------------|------------|---------|------------|--------------|------------|
| Actual | Budget | Variance | % | Prior Year | Variance | % | Actual | Budget | Variance | % | Prior Year | Variance | % |
| 3,414 | 15,028 | 11,614 | 77.3% | 12,475 | 9,060 | 72.6% | 13,817 | 59,396 | 45,579 | 76.7% | 49,898 | 36,081 | 72.3% |
| <i>Overhead Allocations:</i> | | | | | | | | | | | | | |
| (3,006) | 2,494 | 5,500 | 220.5% | 1,891 | 4,897 | 259.0% | 3,594 | 9,976 | 6,382 | 64.0% | 8,342 | 4,748 | 56.9% |
| 20,743 | 18,872 | (1,871) | (9.9%) | 13,419 | (7,324) | (54.6%) | 84,807 | 75,488 | (9,319) | (12.3%) | 42,664 | (42,144) | (98.8%) |
| 1,004 | 1,090 | 86 | 7.9% | 125 | (879) | (703.8%) | 4,015 | 4,360 | 345 | 7.9% | 126 | (3,889) | (3,086.4%) |
| 2,582 | 2,294 | (288) | (12.6%) | 2,920 | 338 | 11.6% | 8,039 | 9,176 | 1,137 | 12.4% | 11,939 | 3,901 | 32.7% |
| 5,248 | 4,887 | (361) | (7.4%) | 5,825 | 577 | 9.9% | 19,416 | 19,548 | 132 | 0.7% | 22,443 | 3,026 | 13.5% |
| 7,681 | 6,801 | (880) | (12.9%) | 5,170 | (2,511) | (48.6%) | 28,060 | 27,204 | (856) | (3.1%) | 24,027 | (4,033) | (16.8%) |
| 6,834 | 2,497 | (4,337) | (173.7%) | 1,873 | (4,961) | (264.9%) | 12,023 | 9,988 | (2,035) | (20.4%) | 7,560 | (4,463) | (59.0%) |
| 1,305 | 1,655 | 350 | 21.1% | 1,024 | (281) | (27.5%) | 5,038 | 6,620 | 1,582 | 23.9% | 3,820 | (1,218) | (31.9%) |
| 1,232 | 2,294 | 1,062 | 46.3% | 1,791 | 559 | 31.2% | 4,482 | 9,176 | 4,694 | 51.2% | 5,730 | 1,248 | 21.8% |
| 260 | 280 | 20 | 7.2% | 269 | 9 | 3.4% | 1,011 | 1,120 | 109 | 9.8% | 1,138 | 127 | 11.2% |
| 7,783 | 6,842 | (941) | (13.8%) | 5,327 | (2,456) | (46.1%) | 23,390 | 27,368 | 3,978 | 14.5% | 20,597 | (2,793) | (13.6%) |
| 1,464 | 2,577 | 1,113 | 43.2% | 1,120 | (344) | (30.7%) | 5,616 | 10,308 | 4,692 | 45.5% | 5,608 | (8) | (0.1%) |
| 17,054 | 19,544 | 2,490 | 12.7% | 8,073 | (8,980) | (111.2%) | 65,479 | 78,176 | 12,697 | 16.2% | 70,008 | 4,529 | 6.5% |
| - | - | - | 0.0% | 564 | 564 | 100.0% | - | - | - | 0.0% | 2,082 | 2,082 | 100.0% |
| 508 | 533 | 25 | 4.7% | 768 | 260 | 33.9% | 2,449 | 2,132 | (317) | (14.9%) | 2,802 | 353 | 12.6% |
| 762 | 1,195 | 433 | 36.2% | 1,238 | 476 | 38.4% | 2,933 | 4,780 | 1,847 | 38.6% | 4,242 | 1,309 | 30.8% |
| 71,454 | 73,855 | 2,401 | 3.3% | 51,396 | (20,058) | (39.0%) | 270,354 | 295,420 | 25,066 | 8.5% | 233,127 | (37,227) | (16.0%) |
| 439,169 | 491,053 | 51,884 | 10.6% | 411,662 | (27,507) | (6.7%) | 1,755,051 | 1,946,217 | 191,166 | 9.8% | 1,673,271 | (81,780) | (4.9%) |
| \$ 288,707 | \$ (108,212) | \$ 396,919 | (366.8%) | \$ 26,887 | \$ 261,820 | 973.8% | \$ (99,859) | \$ (422,131) | \$ 322,272 | (76.3%) | \$ 16,982 | \$ (116,841) | (688.0%) |
| 13,581 | 128,615 | 115,034 | 89.4% | - | (13,581) | 0.0% | - | 514,460 | 514,460 | 100.0% | - | - | 0.0% |
| \$ - | \$ - | \$ - | 0.0% | \$ - | \$ - | 0.0% | \$ - | \$ - | \$ - | 0.0% | \$ - | \$ - | 0.0% |

| Clinic Visits - Adults and Pediatrics | Oct-18 | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19 | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Current Year | Current YTD | %Var to | Prior Year |
|--|---------------|--------------|--------------|---------------|--------|--------|--------|--------|--------|--------|--------|--------|---------------|---------------|----------------|---------------|
| | | | | | | | | | | | | | Total | Budget | Budget | Total |
| West Palm Beach | 1,661 | 1,289 | 1,312 | 1,734 | | | | | | | | | 5,996 | 5,980 | 0.3% | 6,342 |
| Delray | 1,355 | 1,162 | 1,134 | 1,180 | | | | | | | | | 4,831 | 5,534 | (12.7%) | 5,693 |
| Lantana | 1,411 | 1,309 | 1,261 | 1,314 | | | | | | | | | 5,295 | 5,756 | (8.0%) | 5,178 |
| Belle Glade | 1,030 | 790 | 839 | 934 | | | | | | | | | 3,593 | 3,010 | 19.4% | 3,401 |
| Jerome Golden Center | - | - | - | - | | | | | | | | | - | - | 0.0% | 952 |
| Lewis Center | 267 | 233 | 229 | 239 | | | | | | | | | 968 | 837 | 15.7% | 737 |
| Lake Worth & Women's Health Care | 1,608 | 1,153 | 1,104 | 1,214 | | | | | | | | | 5,079 | 6,032 | (15.8%) | 5,995 |
| Jupiter Clinic | 421 | 457 | 418 | 467 | | | | | | | | | 1,763 | 2,016 | (12.5%) | 1,865 |
| West Boca & Women's Health Care | 1,009 | 861 | 781 | 923 | | | | | | | | | 3,574 | 2,657 | 34.5% | 1,708 |
| Mobile Van | 239 | 186 | 119 | 201 | | | | | | | | | 745 | 698 | 6.7% | - |
| Suboxone | 361 | 289 | 222 | 301 | | | | | | | | | 1,173 | 1,106 | 6.1% | 898 |
| Total Clinic Visits | 9,362 | 7,729 | 7,419 | 8,507 | | | | | | | | | 33,017 | 33,626 | (1.8%) | 32,769 |
| Dental Visits | | | | | | | | | | | | | | | | |
| West Palm Beach | 918 | 722 | 704 | 800 | | | | | | | | | 3,144 | 3,415 | (7.9%) | 3,697 |
| Lantana | 653 | 508 | 468 | 616 | | | | | | | | | 2,245 | 3,255 | (31.0%) | 2,940 |
| Delray | 676 | 522 | 446 | 503 | | | | | | | | | 2,147 | 2,611 | (17.8%) | 2,751 |
| Belle Glade | 406 | 260 | 230 | 259 | | | | | | | | | 1,155 | 1,406 | (17.9%) | 1,493 |
| Total Dental Visits | 2,653 | 2,012 | 1,848 | 2,178 | | | | | | | | | 8,691 | 10,687 | (18.7%) | 10,881 |
| Total Medical and Dental Visits | 12,015 | 9,741 | 9,267 | 10,685 | | | | | | | | | 41,708 | 44,313 | (5.9%) | 43,650 |
| Mental Health Counselors (non-billable) | | | | | | | | | | | | | | | | |
| West Palm Beach | 124 | 100 | 103 | 135 | | | | | | | | | 462 | 320 | 44.4% | 298 |
| Delray | 137 | 118 | 102 | 117 | | | | | | | | | 474 | 317 | 49.5% | 359 |
| Lantana | 467 | 414 | 368 | 433 | | | | | | | | | 1,682 | 875 | 92.2% | 573 |
| Belle Glade | 17 | 21 | 22 | 26 | | | | | | | | | 86 | 55 | 56.4% | 52 |
| Lewis Center | 268 | 219 | 192 | 235 | | | | | | | | | 914 | 362 | 152.5% | 289 |
| Lake Worth | 173 | 99 | 73 | 190 | | | | | | | | | 535 | 471 | 13.6% | 396 |
| Jupiter | - | - | - | - | | | | | | | | | - | 110 | (100.0%) | 102 |
| West Boca | - | - | - | - | | | | | | | | | - | 75 | (100.0%) | 68 |
| Mobile Van | - | - | - | 16 | | | | | | | | | 16 | - | 4.6% | - |
| Total Mental Health Screenings | 1,186 | 971 | 860 | 1,152 | | | | | | | | | 4,169 | 2,585 | 61.3% | 2,137 |

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
February 27th, 2019

1. Description: Medical and Dental Sliding Fee Scales 2019

2. Summary:

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

3. Substantive Analysis:

The sliding fee scale is updated to reflect the 2019 Federal Poverty Guidelines published by the Federal Register/Vol. 84, No. 22/ Friday, February 1, 2019. The guidelines in this 2019 notice reflect the 2.4 percent price increase between calendar years 2017 and 2018. After this inflation adjustment, the guidelines are rounded and adjusted to standardize the differences between family sizes.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Dawn Richards
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

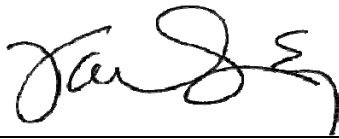
Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
February 27th, 2019

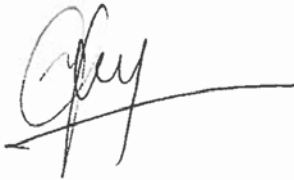
6. Recommendation:

Staff recommends the Board Approve the Sliding Fee Scales 2019.

Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



Marcia Young
Director of Revenue Cycle



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



DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Committee on Vital and Health Statistics: Meeting

Pursuant to the Federal Advisory Committee Act, the Department of Health and Human Services (HHS) announces the following advisory committee meeting:

Name: National Committee on Vital and Health Statistics (NCVHS), Subcommittee on Privacy, Confidentiality and Security,

Date and Times: Thursday, March 21, 2019: 9:00 a.m.–5:30 p.m. (EDT), Friday, March 22, 2019: 8:30 a.m.–3:00 p.m. (EDT).

Place: Centers for Disease Control and Prevention, National Center for Health Statistics, 3311 Toledo Road, Auditorium, Hyattsville, Maryland 20782.

Status: Open. There will be an opportunity for public comment at the end of the first day of the meeting.

Purpose: NCVHS is charged with studying and identifying privacy and security and access measures to protect individually identifiable health information in an environment of electronic networking and multiple uses of data. Further, the Committee advises the Secretary and is mandated to report to Congress on the status of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), which establishes the regulatory framework for personally identifiable health information by covered entities and business associates.

Through the Subcommittee on Privacy, Confidentiality and Security, the Committee undertook a “Beyond HIPAA” initiative to examine emerging health information privacy and security issues that are beyond the scope of HIPAA to consider a health data privacy and security framework for the 21st century. The goals for the Beyond HIPAA initiative are to:

1. Identify and describe the changing environment and the risks to privacy and security of confidential health information; highlight promising policies, practices and technology;
2. Lay out integrative models for how best to protect individuals’ privacy and secure health data uses outside of HIPAA protections while enabling useful uses, services and research;
3. Formulate recommendations for the Secretary on actions that HHS and other federal Departments might take; and
4. Prepare a report for data stewardship.

The objective of this meeting is to develop recommendations to define a

contemporary framework of data stewardship for the HHS Secretary, including a pathway for improving private and public sector governance of health information over the next decade. To accomplish this, the Subcommittee plans to:

(a) Outline key principles for stewardship of health data in the environment described in a recent NCVHS environmental scan report and the essential public and private levers to ensure appropriate governance;

(b) Reach consensus on actions to update NCVHS’ 2008 report, “Enhanced Protections for Uses of Health Data: A Stewardship Framework for “Secondary Uses” of Electronically Collected and Transmitted Health Data—Summary for Policy Makers.”

Through this work, the Subcommittee also plans to identify key themes for communications with individuals, policymakers, and stakeholders in the private sector. The times and topics for this meeting are subject to change. Please refer to the posted agenda for any updates.

Contact Persons for More Information: Substantive program information may be obtained from Rebecca Hines, MHS, Executive Secretary, NCVHS, National Center for Health Statistics, Centers for Disease Control and Prevention, 3311 Toledo Road, Hyattsville, Maryland 20782, telephone (301) 458–4715.

Information pertaining to meeting content may be obtained from Rachel Seeger, MA, MPA, Office of the Secretary/Office of Civil Rights, Room 509E, Department of Health and Human Services, 200 Independence Avenue SW, Washington, DC 20201, telephone: (202) 260–7106. Summaries of meetings and a roster of Committee members are available on the NCVHS website: www.ncvhs.hhs.gov, where further information including a meeting agenda and instructions to access the live broadcast of the meeting will be posted. Should you require reasonable accommodation, please contact the CDC Office of Equal Employment Opportunity on (770) 488–3210 as soon as possible.

Dated: January 28, 2019.

Sharon Arnold,

Associate Deputy Assistant Secretary for Planning and Evaluation, Science and Data Policy, Office of the Assistant Secretary for Planning and Evaluation.

(FR Doc. 2019–00706 Filed 1–31–19; 8:45 am)
BILLING CODE 4151–05–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: *Applicable Date:* January 11, 2019 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 422F.5, Humphrey Building, Department of Health and Human Services, Washington, DC 20201—telephone: (202) 690–7409—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.

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), contact the Health Resources and Services Administration Information Center at 1–800–638–0742. You also may 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 2019 notice reflect the 2.4 percent price increase between calendar years 2017 and 2018. 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 2019 guidelines are roughly equal to the poverty thresholds for calendar year 2018 which the Census Bureau expects to publish in final form in September 2019.

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.

2019 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA

| Persons in family/household | Poverty guideline |
|-----------------------------|-------------------|
| 1 | \$12,490 |
| 2 | 16,910 |
| 3 | 21,330 |
| 4 | 25,750 |
| 5 | 30,170 |
| 6 | 34,590 |
| 7 | 39,010 |
| 8 | 43,430 |

For families/households with more than 8 persons, add \$4,420 for each additional person.

2019 POVERTY GUIDELINES FOR ALASKA

| Persons in family/household | Poverty guideline |
|-----------------------------|-------------------|
| 1 | \$15,600 |
| 2 | 21,130 |
| 3 | 26,660 |
| 4 | 32,190 |
| 5 | 37,720 |
| 6 | 43,250 |
| 7 | 48,780 |
| 8 | 54,310 |

For families/households with more than 8 persons, add \$5,530 for each additional person.

2019 POVERTY GUIDELINES FOR HAWAII

| Persons in family/household | Poverty guideline |
|-----------------------------|-------------------|
| 1 | \$14,380 |
| 2 | 19,460 |
| 3 | 24,540 |
| 4 | 29,620 |
| 5 | 34,700 |
| 6 | 39,780 |
| 7 | 44,860 |
| 8 | 49,940 |

For families/households with more than 8 persons, add \$5,080 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.)

Note that this notice does not provide definitions of such terms as "income" or "family," because there is considerable variation in defining these terms among the different programs that use the guidelines. These variations are traceable to the different laws and regulations that govern the various programs. This means that questions such as "Is income counted before or after taxes?", "Should a particular type of income be counted?", and "Should a particular person be counted as a member of the family/household?" are actually questions about how a specific program applies the poverty guidelines. All such questions about how a specific program applies the guidelines should be directed to the entity that administers or funds the program, since that entity has the responsibility for defining such terms as "income" or "family," to the extent that these terms are not already defined for the program in legislation or regulations.

Alex M. Azar,
Secretary of Health and Human Services.
[FR Doc. 2019-00621 Filed 1-31-19; 8:45 am]

BILLING CODE 4150-05-P

**C.L. Brumback Primary Care Clinic
 2019 SLIDING FEE SCALE - MEDICAL**

| Family Size | ≤ 100% | >100% to 150% | >150% to 175% | >175% to 200% | Over 200% |
|---|-------------|-------------------------|-------------------------|-------------------------|-------------|
| 1 | \$12,490.00 | \$12490.01 - \$18735.00 | \$18735.01 - \$21858.00 | \$21858.01 - \$24980.00 | \$24,980.01 |
| 2 | \$16,910.00 | \$16910.01 - \$25365.00 | \$25365.01 - \$29593.00 | \$29593.01 - \$33820.00 | \$33,820.01 |
| 3 | \$21,330.00 | \$21330.01 - \$31995.00 | \$31995.01 - \$37328.00 | \$37328.01 - \$42660.00 | \$42,660.01 |
| 4 | \$25,750.00 | \$25750.01 - \$38625.00 | \$38625.01 - \$45063.00 | \$45063.01 - \$51500.00 | \$51,500.01 |
| 5 | \$30,170.00 | \$30170.01 - \$45255.00 | \$45255.01 - \$52798.00 | \$52798.01 - \$60340.00 | \$60,340.01 |
| 6 | \$34,590.00 | \$34590.01 - \$51885.00 | \$51885.01 - \$60533.00 | \$60533.01 - \$69180.00 | \$69,180.01 |
| 7 | \$39,010.00 | \$39010.01 - \$58515.00 | \$58515.01 - \$68268.00 | \$68268.01 - \$78020.00 | \$78,020.01 |
| 8 | \$43,430.00 | \$43430.01 - \$65145.00 | \$65145.01 - \$76003.00 | \$76003.01 - \$86860.00 | \$86,860.01 |
| For families/households with more than 8 persons, add \$4420 for each additional person | | | | | |

| Federal Poverty Level | Price |
|-----------------------|-------------|
| 100% or below | \$20.00 |
| Between 100% to 150% | \$40.00 |
| Between 150% to 175% | \$60.00 |
| Between 175% to 200% | \$80.00 |
| Over 200% | No Discount |

*Patients who are at or below 100% FPLG will pay only the nominal \$20.00.

**C.L. Brumback Primary Care Clinic
 2019 SLIDING FEE SCALE - DENTAL**

| Family Size | ≤ 100% | >100% to 150% | >150% to 175% | >175% to 200% | Over 200% |
|---|-------------|-------------------------|-------------------------|-------------------------|-------------|
| 1 | \$12,490.00 | \$12490.01 - \$18735.00 | \$18735.01 - \$21858.00 | \$21858.01 - \$24980.00 | \$24,980.01 |
| 2 | \$16,910.00 | \$16910.01 - \$25365.00 | \$25365.01 - \$29593.00 | \$29593.01 - \$33820.00 | \$33,820.01 |
| 3 | \$21,330.00 | \$21330.01 - \$31995.00 | \$31995.01 - \$37328.00 | \$37328.01 - \$42660.00 | \$42,660.01 |
| 4 | \$25,750.00 | \$25750.01 - \$38625.00 | \$38625.01 - \$45063.00 | \$45063.01 - \$51500.00 | \$51,500.01 |
| 5 | \$30,170.00 | \$30170.01 - \$45255.00 | \$45255.01 - \$52798.00 | \$52798.01 - \$60340.00 | \$60,340.01 |
| 6 | \$34,590.00 | \$34590.01 - \$51885.00 | \$51885.01 - \$60533.00 | \$60533.01 - \$69180.00 | \$69,180.01 |
| 7 | \$39,010.00 | \$39010.01 - \$58515.00 | \$58515.01 - \$68268.00 | \$68268.01 - \$78020.00 | \$78,020.01 |
| 8 | \$43,430.00 | \$43430.01 - \$65145.00 | \$65145.01 - \$76003.00 | \$76003.01 - \$86860.00 | \$86,860.01 |
| For families/households with more than 8 persons, add \$4420 for each additional person | | | | | |

| Federal Poverty Level | Price |
|-----------------------|-------------|
| 100% or below | \$30.00 |
| Between 100% to 150% | \$50.00 |
| Between 150% to 175% | \$70.00 |
| Between 175% to 200% | \$90.00 |
| Over 200% | No Discount |

*Patients who are at or below 100% FPLG will pay only the nominal \$30.00.

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
February 27th, 2019

1. Description: Executive Director Informational Update

2. Summary:

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

- Lakeside Medical Center Clinic (Belle Glade)
- Mangonia Park
- HRSA New Access Point (NAP) Grant

3. Substantive Analysis:

Lakeside Medical Center Clinic (Belle Glade)

We are more than fifty-percent complete with renovations. Chandler still expects to meet our substantial completion timeline of 4/1/2019.

Mangonia Park

Construction is underway at the new clinic with expectation that we will open in the Fall.

HRSA New Access Point (NAP) Grant

HRSA-19-080 - New Access Points (NAP) is a new funding opportunity for new sites. Applicants can apply for up to \$650,000 per year for up to 2 years. Funding and new site are then integrated into base funding.

4. Fiscal Analysis & Economic Impact Statement:

| | Amount | Budget |
|----------------------|------------------|---|
| Capital Requirements | N/A | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Annual Net Revenue | \$650,000 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Annual Expenditures | N/A | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |

Reviewed for financial accuracy and compliance with purchasing procedure:

Dawn Richards
 VP & Chief Financial Officer

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
February 27th, 2019


5. Reviewed/Approved by Committee:

| | |
|----------------|---------------|
| N/A | |
| Committee Name | Date Approved |


6. Recommendation:

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


Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



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



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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
February 27, 2019

1. Description: Licensed Independent Practitioner Credentialing and Privileging

2. Summary:

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

3. Substantive Analysis:

The LIP(s) 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 |
|-----------|------------|--------|--------------------|-----------------------|
| Casanova | Jennifer | APRN | Nurse Practitioner | Initial Credentialing |

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

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

4. Fiscal Analysis & Economic Impact Statement:

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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
February 27, 2019

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Dawn Richards
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

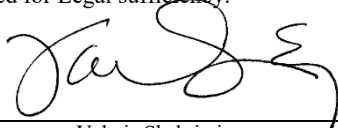
Committee Name

Date Approved

6. Recommendation:

Staff recommends the Board approve the initial credentialing and privileging of Ms. Jennifer Casanova, Nurse Practitioner.

Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



Sarah Gonzalez, CPMSM, CPC
Director, Credentialing & Provider Services

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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
February 27th, 2019

1. Description: Operations Reports – January 2019

2. Summary:

This agenda item provides the following operations reports for January 2019:

- Productivity Summary Report

3. Substantive Analysis:

See attached reports. A verbal update on patient targets and vacancies will be provided.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Dawn Richards
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
February 27th, 2019

6. Recommendation:

Staff recommends the Board Approve the Operations Reports January 2019.

Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



Terry Megiveron
Director of Practice Operations

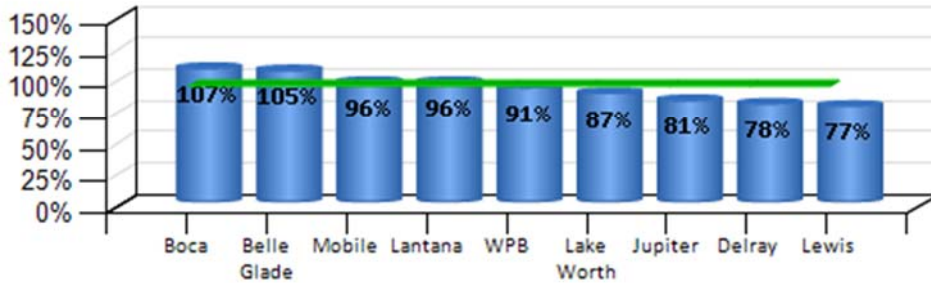


Dr. Belma Andric
Chief Medical Officer, VP & Executive Director
of Clinic Services

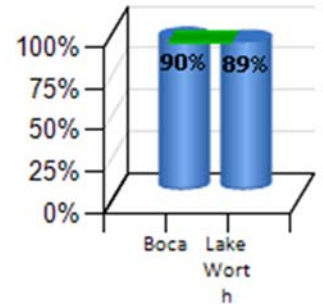
ALL CLINICS PRODUCTIVITY JANUARY 2019

| | Target | Total seen | % Monthly Target |
|---------------------|--------|------------|------------------|
| PEDIATRIC CARE | 1914 | 1527 | 80% |
| ADULT CARE | 6888 | 6254 | 91% |
| MENTAL HEALTH | 1279 | 1099 | 86% |
| SUBSTANCE ABUSE | 322 | 357 | 111% |
| WOMEN'S HEALTH CARE | 477 | 425 | 89% |
| DENTAL | 2472 | 1873 | 76% |
| DENTAL HYGIENE | 364 | 297 | 82% |

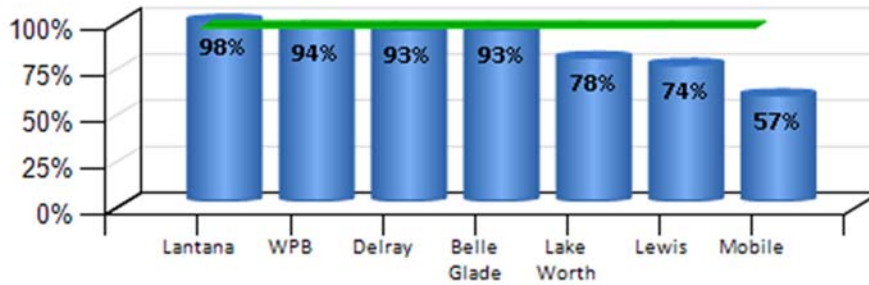
Adult care



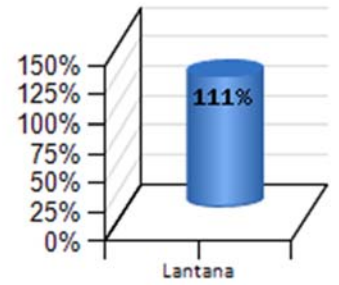
Women's Health



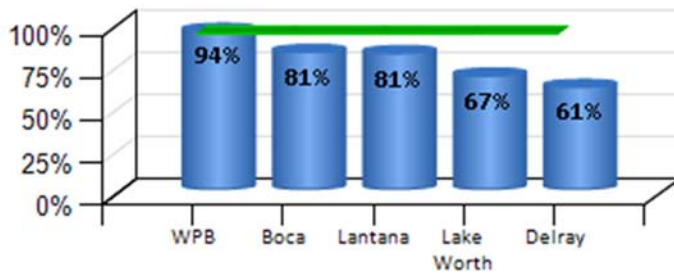
Mental Health



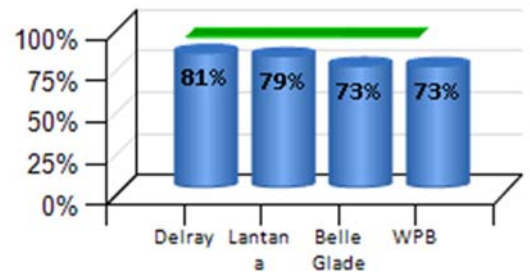
Substance Abuse



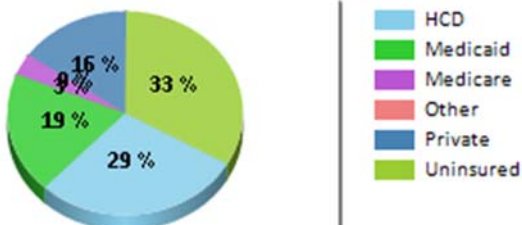
Pediatric Care



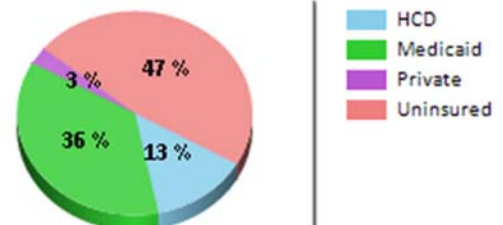
Dental & Dental Hygiene



Medical Payer Mix YTD



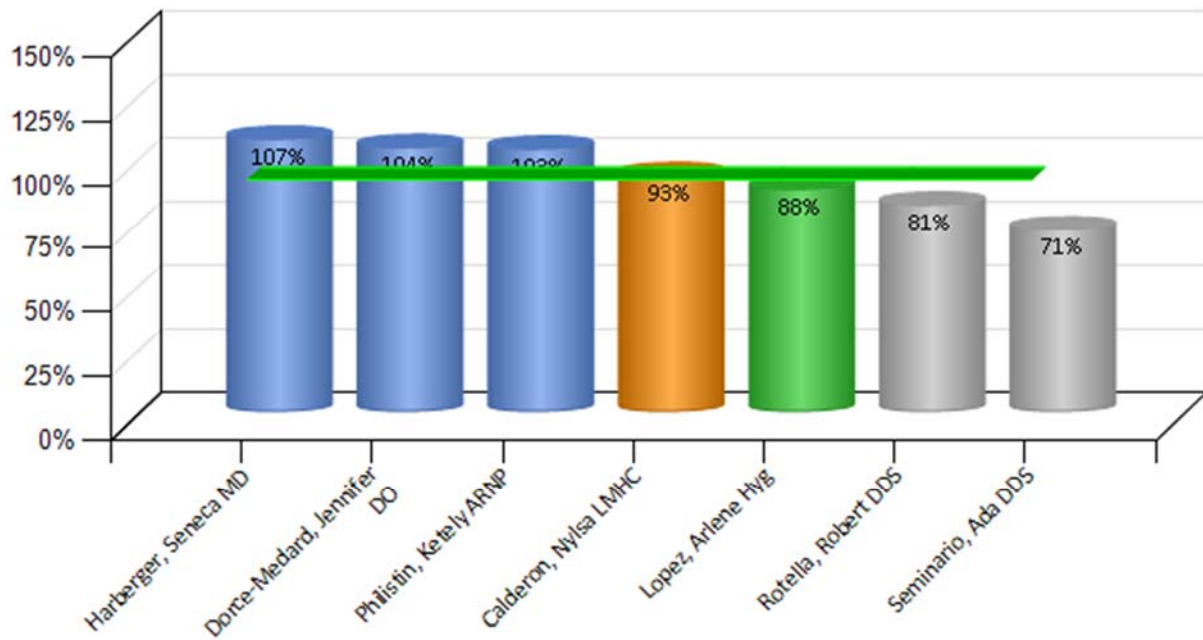
Dental Payer Mix YTD



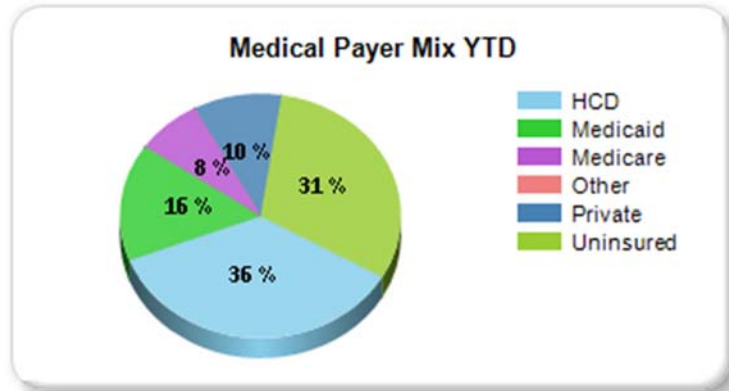
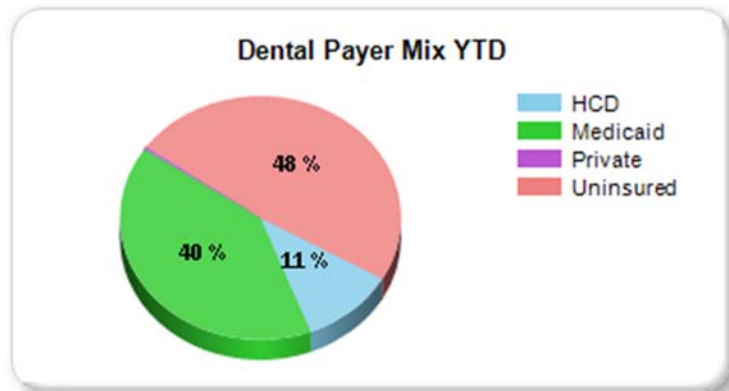
BELLE GLADE TOTALS FOR JANUARY 2019

| | Daily Target | Days Worked | Target for the month | Total for month seen | % Monthly Target Achieved | Daily Average |
|--|--------------|-------------|----------------------|----------------------|---------------------------|---------------|
| ADULT CARE | | | | | | |
| Harberger, Seneca MD | 18 | 21.0 | 378 | 405 | 107% | 19.3 |
| Dorce-Medard, Jennifer DO | 18 | 11.5 | 207 | 215 | 104% | 18.7 |
| Philistin, Ketely ARNP | 16 | 19.0 | 304 | 314 | 103% | 16.5 |
| BELLE GLADE ADULT CARE TOTALS | | 51.5 | 889 | 934 | 105% | |
| MENTAL HEALTH | | | | | | |
| Calderon, Nylsa LMHC | 7 | 4.0 | 28 | 26 | 93% | 6.5 |
| BELLE GLADE MENTAL HEALTH TOTALS | | 4.0 | 28 | 26 | 93% | |
| DENTAL | | | | | | |
| Rotella, Robert DDS | 16 | 1.0 | 16 | 13 | 81% | 13.0 |
| Seminario, Ada DDS | 16 | 19.0 | 304 | 217 | 71% | 11.4 |
| BELLE GLADE DENTAL TOTALS | | 20.0 | 320 | 230 | 72% | |
| DENTAL HYGIENE | | | | | | |
| Lopez, Arlene Hyg | 8 | 4.0 | 32 | 28 | 88% | 7.0 |
| BELLE GLADE DENTAL HYGIENE TOTALS | | 4.0 | 32 | 28 | 88% | |
| BELLE GLADE TOTALS | | 79.5 | 1269 | 1218 | 96% | |

BELLE GLADE PROVIDER PRODUCTIVITY JANUARY 2019



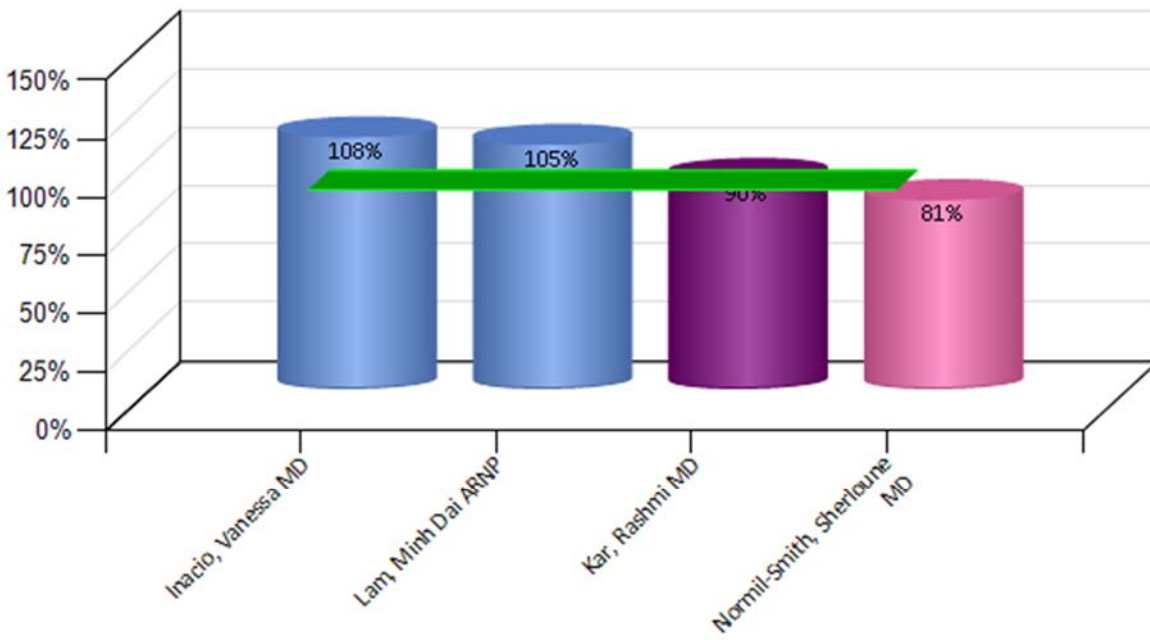
■ Mental Health
 ■ Pediatrics
 ■ Adult Care
 ■ Dental
 ■ Dental Hyg.



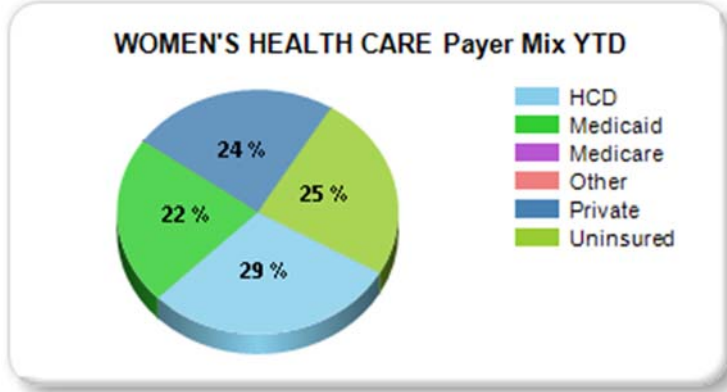
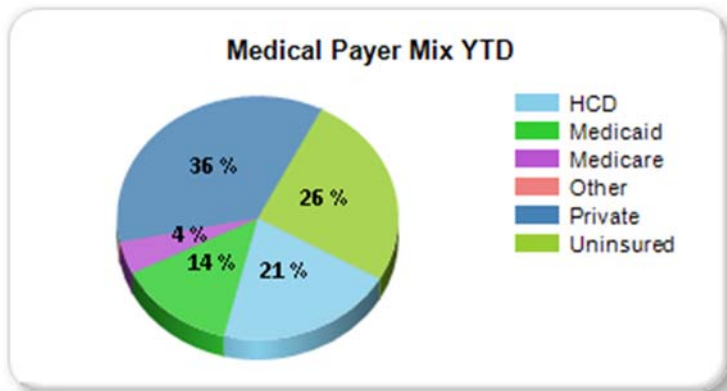
BOCA TOTALS FOR JANUARY 2019

| | Daily Target | Days Worked | Target for the month | Total for month seen | % Monthly Target Achieved | Daily Average |
|--|--------------|-------------|----------------------|----------------------|---------------------------|---------------|
| ADULT CARE | | | | | | |
| Inacio, Vanessa MD | 18 | 20.5 | 369 | 399 | 108% | 19.5 |
| Lam, Minh Dai ARNP | 16 | 16.5 | 264 | 277 | 105% | 16.8 |
| BOCA ADULT CARE TOTALS | | 37.0 | 633 | 676 | 107% | |
| PEDIATRIC CARE | | | | | | |
| Normil-Smith, Sherloun MD | 18 | 8.0 | 144 | 117 | 81% | 14.6 |
| BOCA PEDIATRIC CARE TOTALS | | 8.0 | 144 | 117 | 81% | |
| WOMEN'S HEALTH CARE | | | | | | |
| Kar, Rashmi MD | 18 | 8.0 | 144 | 130 | 90% | 16.3 |
| BOCA WOMEN'S HEALTH CARE TOTALS | | 8.0 | 144 | 130 | 90% | |
| BOCA TOTALS | | 53.0 | 921 | 923 | 100% | |

BOCA PROVIDER PRODUCTIVITY JANUARY 2019



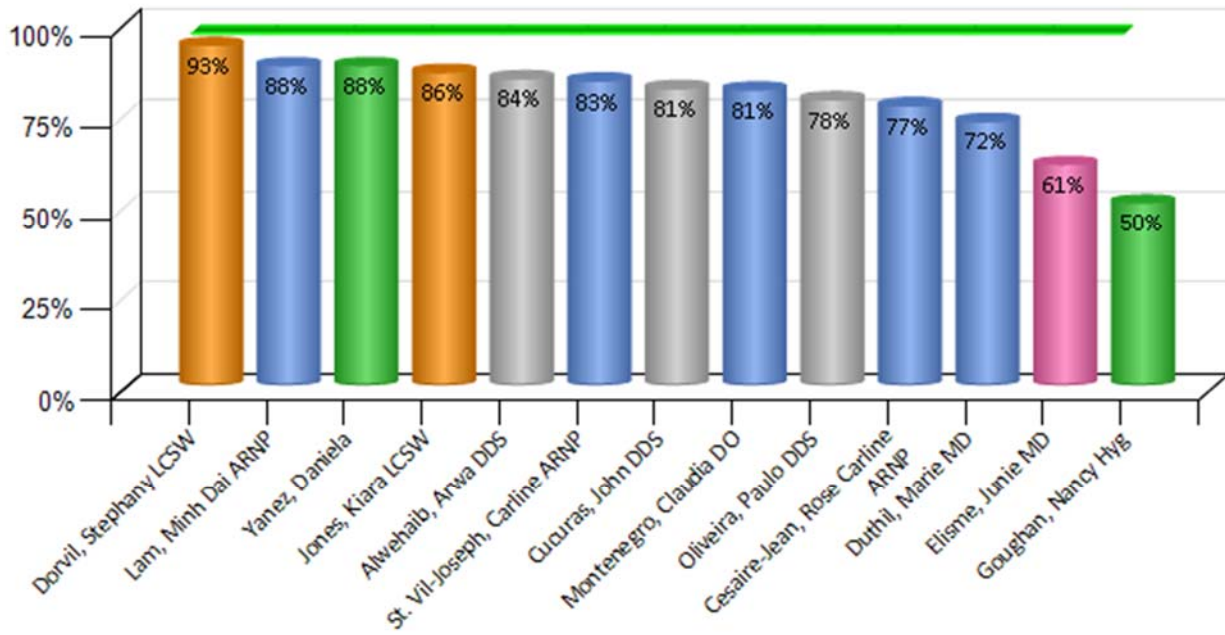
■ Pediatrics
 ■ Adult Care
 ■ Women's Health



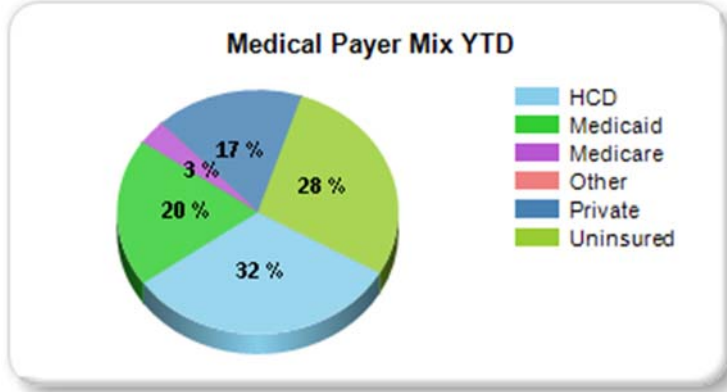
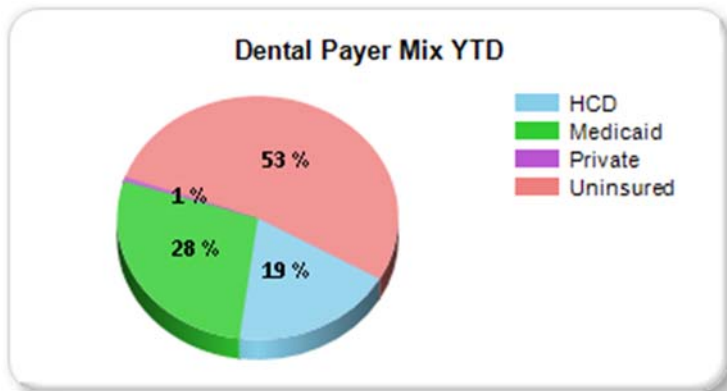
DELRAY BEACH TOTALS FOR JANUARY 2019

| | Daily Target | Days Worked | Target for the month | Total for month seen | % Monthly Target Achieved | Daily Average |
|---|--------------|--------------|----------------------|----------------------|---------------------------|---------------|
| ADULT CARE | | | | | | |
| Lam, Minh Dai ARNP | 16 | 0.5 | 8 | 7 | 88% | 14.0 |
| St. Vil-Joseph, Carline ARNP | 16 | 18.0 | 288 | 240 | 83% | 13.3 |
| Montenegro, Claudia DO | 18 | 20.0 | 360 | 291 | 81% | 14.6 |
| Cesaire-Jean, Rose Carline ARNP | 16 | 16.0 | 256 | 196 | 77% | 12.3 |
| Duthil, Marie MD | 18 | 17.5 | 315 | 228 | 72% | 13.0 |
| DELRAY BEACH ADULT CARE TOTALS | | 72.0 | 1227 | 962 | 78% | |
| PEDIATRIC CARE | | | | | | |
| Elisme, Junie MD | 18 | 20.0 | 360 | 218 | 61% | 10.9 |
| DELRAY BEACH PEDIATRIC CARE TOTALS | | 20.0 | 360 | 218 | 61% | |
| MENTAL HEALTH | | | | | | |
| Dorvil, Stephany LCSW | 7 | 17.5 | 123 | 114 | 93% | 6.5 |
| Jones, Kiara LCSW | 7 | 0.5 | 4 | 3 | 86% | 6.0 |
| DELRAY BEACH MENTAL HEALTH TOTALS | | 18.0 | 126 | 117 | 93% | |
| DENTAL | | | | | | |
| Alwehaib, Arwa DDS | 16 | 19.5 | 312 | 262 | 84% | 13.4 |
| Cucuras, John DDS | 16 | 1.0 | 16 | 13 | 81% | 13.0 |
| Oliveira, Paulo DDS | 14 | 19.0 | 266 | 208 | 78% | 10.9 |
| DELRAY BEACH DENTAL TOTALS | | 39.5 | 594 | 483 | 81% | |
| DENTAL HYGIENE | | | | | | |
| Yanez, Daniela | 8 | 2.0 | 16 | 14 | 88% | 7.0 |
| Goughan, Nancy Hyg | 8 | 1.0 | 8 | 4 | 50% | 4.0 |
| DELRAY BEACH DENTAL HYGIENE TOTALS | | 3.0 | 24 | 18 | 75% | |
| DELRAY BEACH TOTALS | | 152.5 | 2331 | 1798 | 77% | |

DELRAY BEACH PROVIDER PRODUCTIVITY JANUARY 2019



■ Mental Health
 ■ Pediatrics
 ■ Adult Care
 ■ Dental
 ■ Dental Hyg.

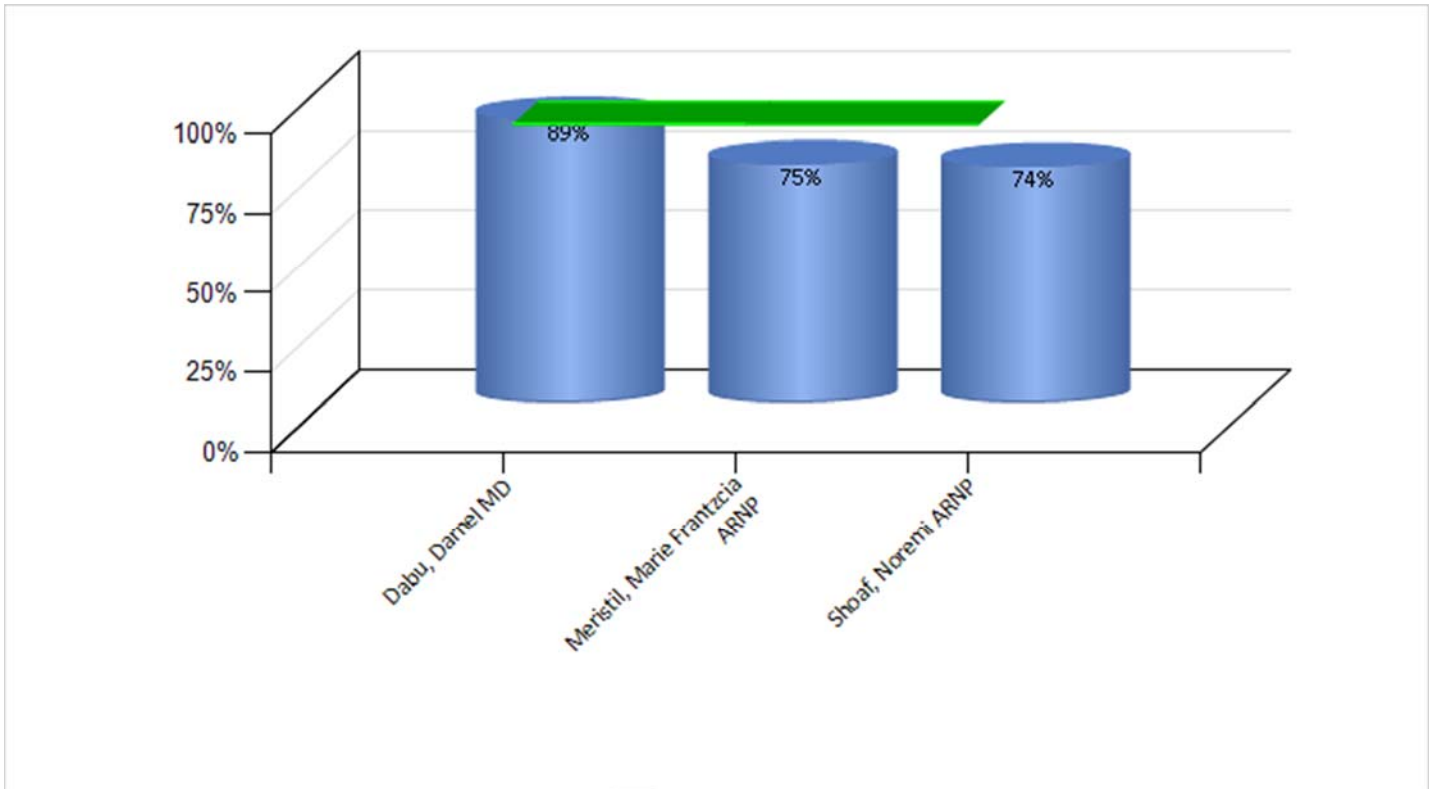


JUPITER TOTALS FOR JANUARY 2019

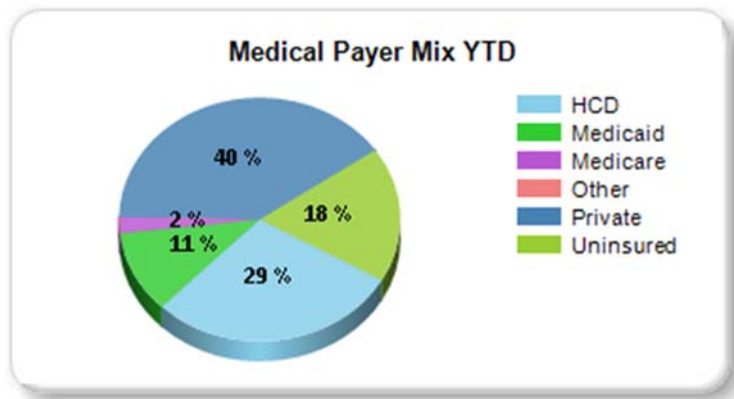
| | Daily Target | Days Worked | Target for the month | Total for month seen | % Monthly Target Achieved | Daily Average |
|----------------------------------|--------------|-------------|----------------------|----------------------|---------------------------|---------------|
| ADULT CARE | | | | | | |
| Dabu, Darnel MD | 18 | 15.5 | 279 | 247 | 89% | 15.9 |
| Meristil, Marie Frantzcia ARNP | 12 | 2.0 | 24 | 18 | 75% | 9.0 |
| Shoaf, Noremi ARNP | 16 | 17.0 | 272 | 202 | 74% | 11.9 |
| JUPITER ADULT CARE TOTALS | | 34.5 | 575 | 467 | 81% | |

| | | | | | | |
|-----------------------|--|-------------|------------|------------|------------|--|
| JUPITER TOTALS | | 34.5 | 575 | 467 | 81% | |
|-----------------------|--|-------------|------------|------------|------------|--|

JUPITER PROVIDER PRODUCTIVITY JANUARY 2019



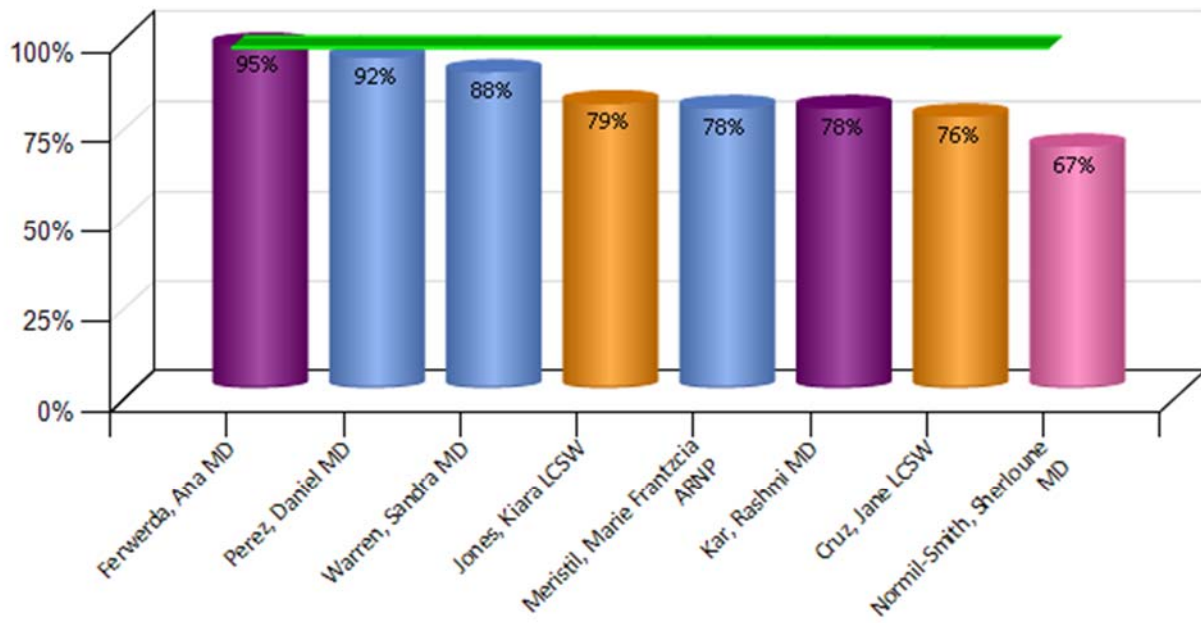
■ Adult Care



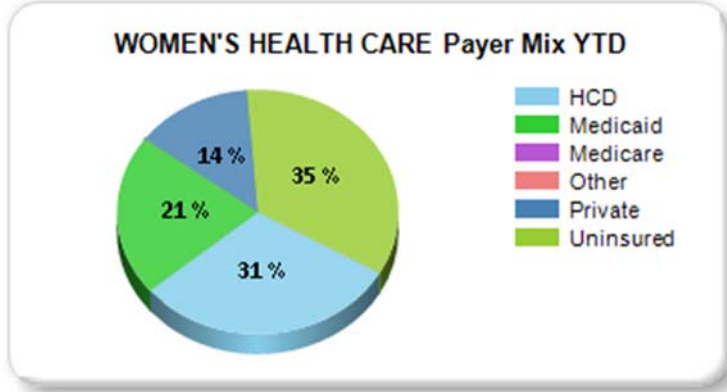
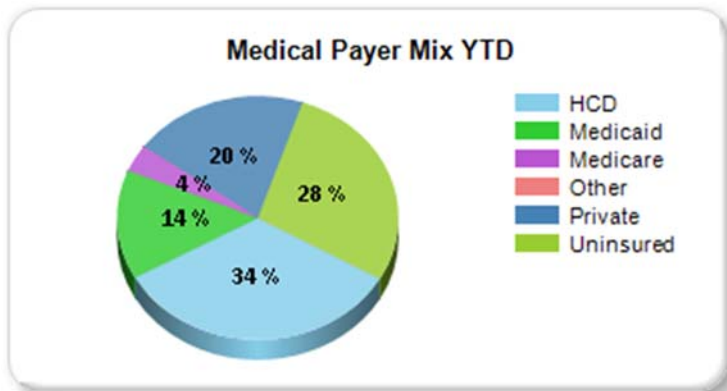
LAKE WORTH TOTALS FOR JANUARY 2019

| | Daily Target | Days Worked | Target for the month | Total for month seen | % Monthly Target Achieved | Daily Average |
|--|--------------|--------------|----------------------|----------------------|---------------------------|---------------|
| ADULT CARE | | | | | | |
| Perez, Daniel MD | 18 | 20.0 | 360 | 330 | 92% | 16.5 |
| Warren, Sandra MD | 18 | 19.0 | 342 | 300 | 88% | 15.8 |
| Meristil, Marie Frantzcia ARNP | 12 | 18.0 | 216 | 168 | 78% | 9.3 |
| LAKE WORTH ADULT CARE TOTALS | | 57.0 | 918 | 798 | 87% | |
| PEDIATRIC CARE | | | | | | |
| Normil-Smith, Sherlounne MD | 18 | 10.0 | 180 | 121 | 67% | 12.1 |
| LAKE WORTH PEDIATRIC CARE TOTALS | | 10.0 | 180 | 121 | 67% | |
| WOMEN'S HEALTH CARE | | | | | | |
| Ferwerda, Ana MD | 18 | 11.5 | 207 | 197 | 95% | 17.1 |
| Kar, Rashmi MD | 18 | 7.0 | 126 | 98 | 78% | 14.0 |
| LAKE WORTH WOMEN'S HEALTH CARE TOTALS | | 18.5 | 333 | 295 | 89% | |
| MENTAL HEALTH | | | | | | |
| Jones, Kiara LCSW | 7 | 19.5 | 137 | 108 | 79% | 5.5 |
| Cruz, Jane LCSW | 7 | 15.5 | 109 | 82 | 76% | 5.3 |
| LAKE WORTH MENTAL HEALTH TOTALS | | 35.0 | 245 | 190 | 78% | |
| LAKE WORTH TOTALS | | 120.5 | 1676 | 1404 | 84% | |

LAKE WORTH PROVIDER PRODUCTIVITY JANUARY 2019



Mental Health
 Pediatrics
 Adult Care
 Women's Health



LANTANA TOTALS FOR JANUARY 2019

| | Daily Target | Days Worked | Target for the month | Total for month seen | % Monthly Target Achieved | Daily Average |
|----------------------------------|--------------|-------------|----------------------|----------------------|---------------------------|---------------|
| ADULT CARE | | | | | | |
| Meristil, Marie Frantzcia ARNP | 12 | 1.0 | 12 | 13 | 108% | 13.0 |
| Presendieu, Heden ARNP | 16 | 19.0 | 304 | 303 | 100% | 15.9 |
| Navarro, Elsy ARNP | 16 | 12.0 | 192 | 185 | 96% | 15.4 |
| Alfonso-Puentes, Ramiro MD | 18 | 18.5 | 333 | 305 | 92% | 16.5 |
| Dorce-Medard, Jennifer DO | 18 | 0.5 | 9 | 7 | 78% | 14.0 |
| LANTANA ADULT CARE TOTALS | | 51.0 | 850 | 813 | 96% | |

| | | | | | | |
|--------------------------------------|----|-------------|------------|------------|------------|------|
| PEDIATRIC CARE | | | | | | |
| Lazaro, Nancy MD | 18 | 18.5 | 333 | 294 | 88% | 15.9 |
| Dessalines, Duclos MD | 18 | 12.5 | 225 | 169 | 75% | 13.5 |
| Buchholz, Ellen ARNP | 16 | 4.0 | 64 | 38 | 59% | 9.5 |
| LANTANA PEDIATRIC CARE TOTALS | | 35.0 | 622 | 501 | 81% | |

| | | | | | | |
|-------------------------------------|----|-------------|------------|------------|------------|------|
| MENTAL HEALTH | | | | | | |
| Alvarez, Franco MD | 13 | 3.0 | 39 | 50 | 128% | 16.7 |
| Rowling, Courtney MD | 18 | 14.0 | 252 | 257 | 102% | 18.4 |
| Calderon, Nylsa LMHC | 7 | 14.0 | 98 | 73 | 74% | 5.2 |
| LANTANA MENTAL HEALTH TOTALS | | 31.0 | 389 | 380 | 98% | |

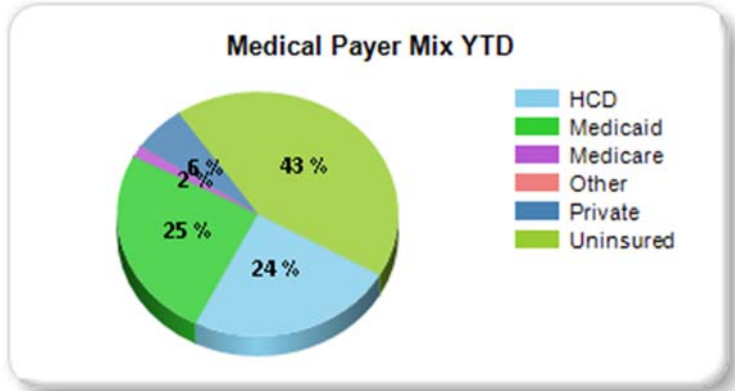
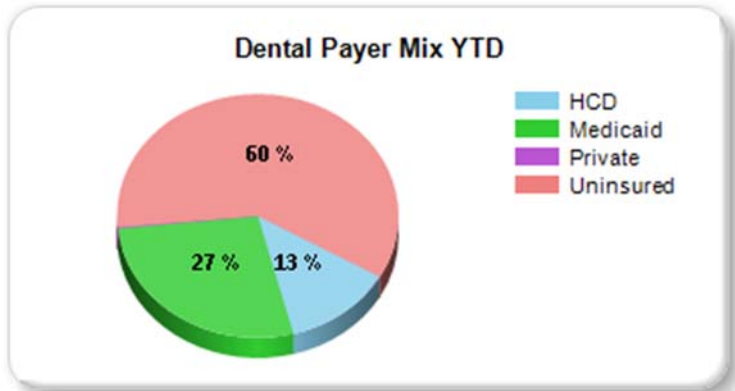
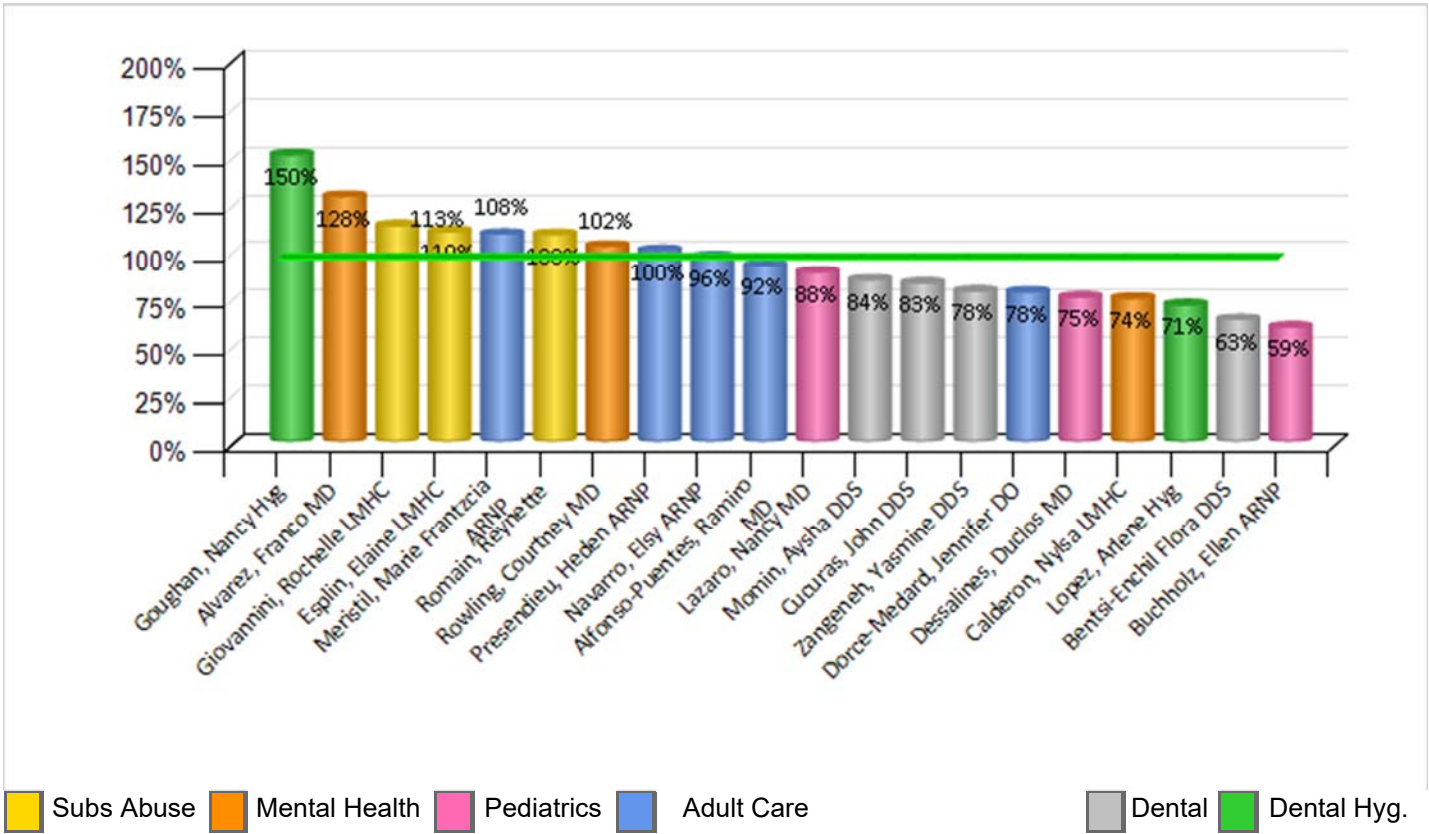
| | | | | | | |
|---------------------------------------|---|-------------|------------|------------|-------------|-----|
| SUBSTANCE ABUSE | | | | | | |
| Giovannini, Rochelle LMHC | 7 | 20.0 | 140 | 158 | 113% | 7.9 |
| Esplin, Elaine LMHC | 7 | 19.0 | 133 | 146 | 110% | 7.7 |
| Romain, Reynette | 7 | 7.0 | 49 | 53 | 108% | 7.6 |
| LANTANA SUBSTANCE ABUSE TOTALS | | 46.0 | 322 | 357 | 111% | |

| | | | | | | |
|------------------------------|----|-------------|------------|------------|------------|------|
| DENTAL | | | | | | |
| Momin, Aysha DDS | 16 | 18.5 | 296 | 249 | 84% | 13.5 |
| Cucuras, John DDS | 16 | 2.5 | 40 | 33 | 83% | 13.2 |
| Zangeneh, Yasmine DDS | 13 | 11.5 | 150 | 117 | 78% | 10.2 |
| Bentsi-Enchil Flora DDS | 16 | 8.5 | 136 | 86 | 63% | 10.1 |
| LANTANA DENTAL TOTALS | | 41.0 | 622 | 485 | 78% | |

| | | | | | | |
|--------------------------------------|---|-------------|------------|------------|------------|------|
| DENTAL HYGIENE | | | | | | |
| Goughan, Nancy Hyg | 8 | 3.0 | 24 | 36 | 150% | 12.0 |
| Lopez, Arlene Hyg | 8 | 16.0 | 128 | 91 | 71% | 5.7 |
| LANTANA DENTAL HYGIENE TOTALS | | 19.0 | 152 | 127 | 84% | |

| | | | | | | |
|-----------------------|--|--------------|-------------|-------------|------------|--|
| LANTANA TOTALS | | 223.0 | 2957 | 2663 | 90% | |
|-----------------------|--|--------------|-------------|-------------|------------|--|

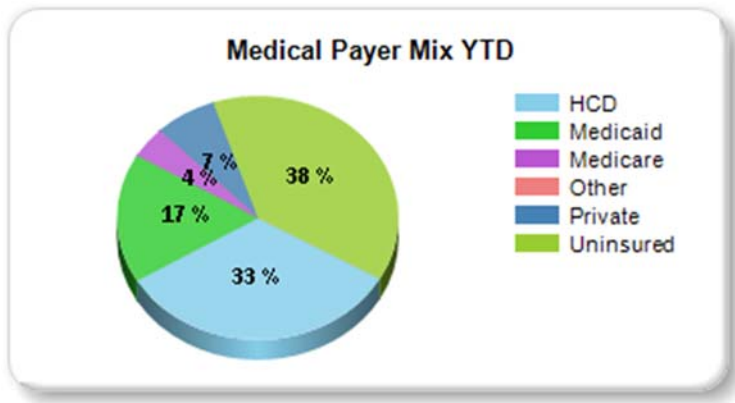
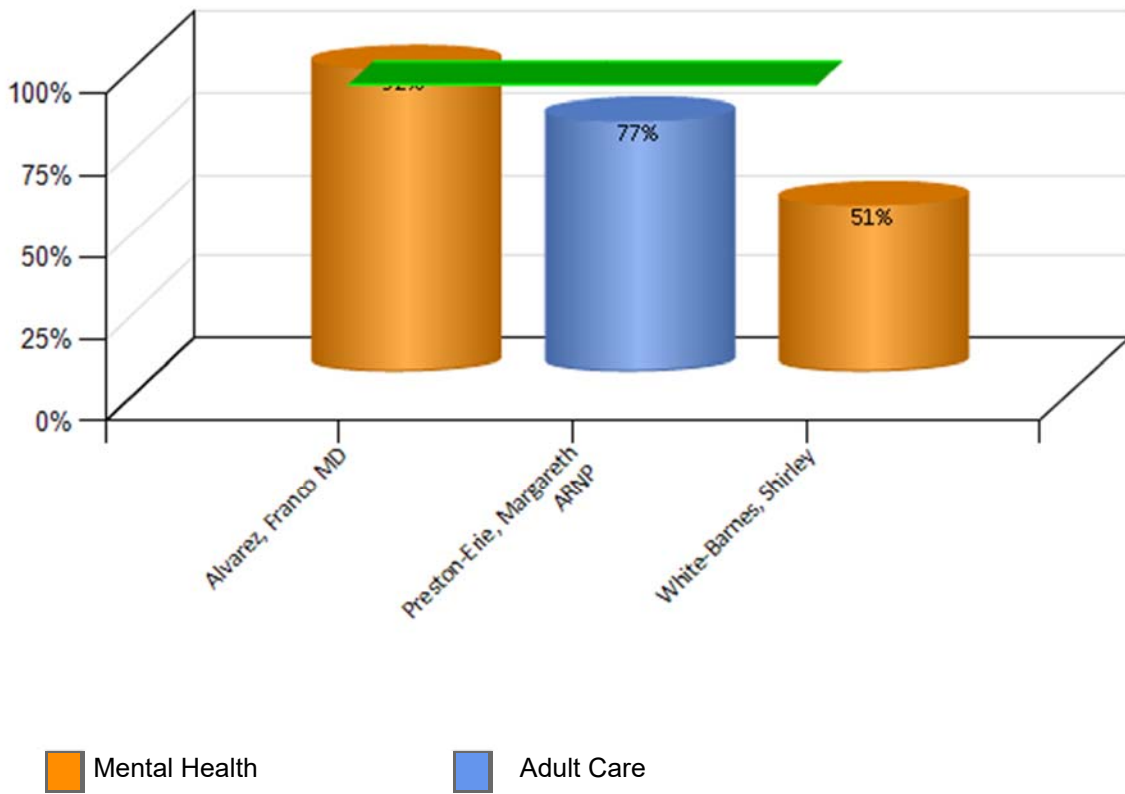
LANTANA PROVIDER PRODUCTIVITY JANUARY 2019



LEWIS CENTER TOTALS FOR JANUARY 2019

| | Daily Target | Days Worked | Target for the month | Total for month seen | % Monthly Target Achieved | Daily Average |
|--|--------------|-------------|----------------------|----------------------|---------------------------|---------------|
| ADULT CARE | | | | | | |
| Preston-Erie, Margareth ARNP | 16 | 19.5 | 312 | 239 | 77% | 12.3 |
| LEWIS CENTER ADULT CARE TOTALS | | 19.5 | 312 | 239 | 77% | |
| MENTAL HEALTH | | | | | | |
| Alvarez, Franco MD | 13 | 13.5 | 176 | 162 | 92% | 12.0 |
| White-Barnes, Shirley | 7 | 20.5 | 144 | 73 | 51% | 3.6 |
| LEWIS CENTER MENTAL HEALTH TOTALS | | 34.0 | 319 | 235 | 74% | |
| LEWIS CENTER TOTALS | | | 53.5 | 631 | 75% | |

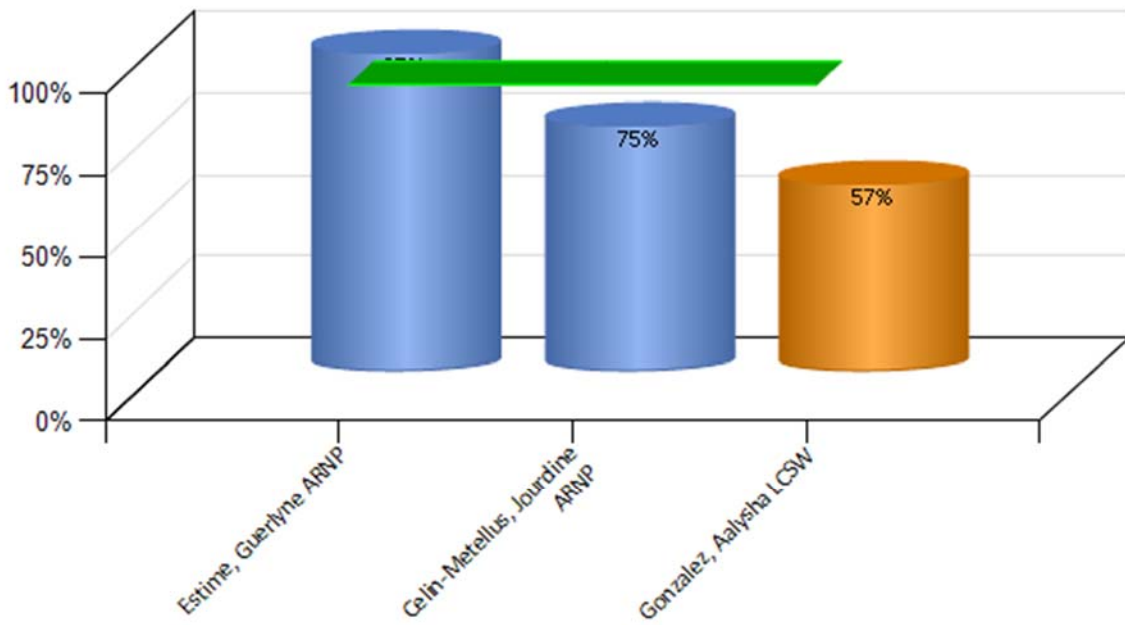
LEWIS CENTER PROVIDER PRODUCTIVITY JANUARY 2019



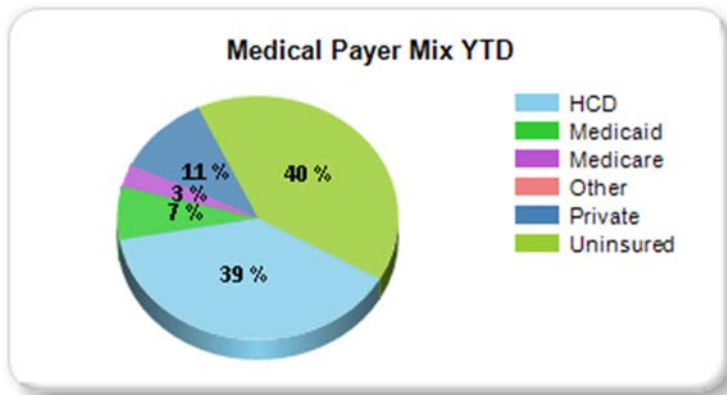
MOBILE CLINIC TOTALS FOR JANUARY 2019

| | Daily Target | Days Worked | Target for the month | Total for month seen | % Monthly Target Achieved | Daily Average |
|---|--------------|-------------|----------------------|----------------------|---------------------------|---------------|
| ADULT CARE | | | | | | |
| Estime, Guerlyne ARNP | 12 | 16.5 | 198 | 192 | 97% | 11.6 |
| Celin-Metellus, Jourdine ARNP | 12 | 1.0 | 12 | 9 | 75% | 9.0 |
| MOBILE CLINIC ADULT CARE TOTALS | | 17.5 | 210 | 201 | 96% | |
| MENTAL HEALTH | | | | | | |
| Gonzalez, Aalysha LCSW | 4 | 7.0 | 28 | 16 | 57% | 2.3 |
| MOBILE CLINIC MENTAL HEALTH TOTALS | | 7.0 | 28 | 16 | 57% | |
| MOBILE CLINIC TOTALS | | 24.5 | 238 | 217 | 91% | |

MOBILE CLINIC PROVIDER PRODUCTIVITY JANUARY 2019



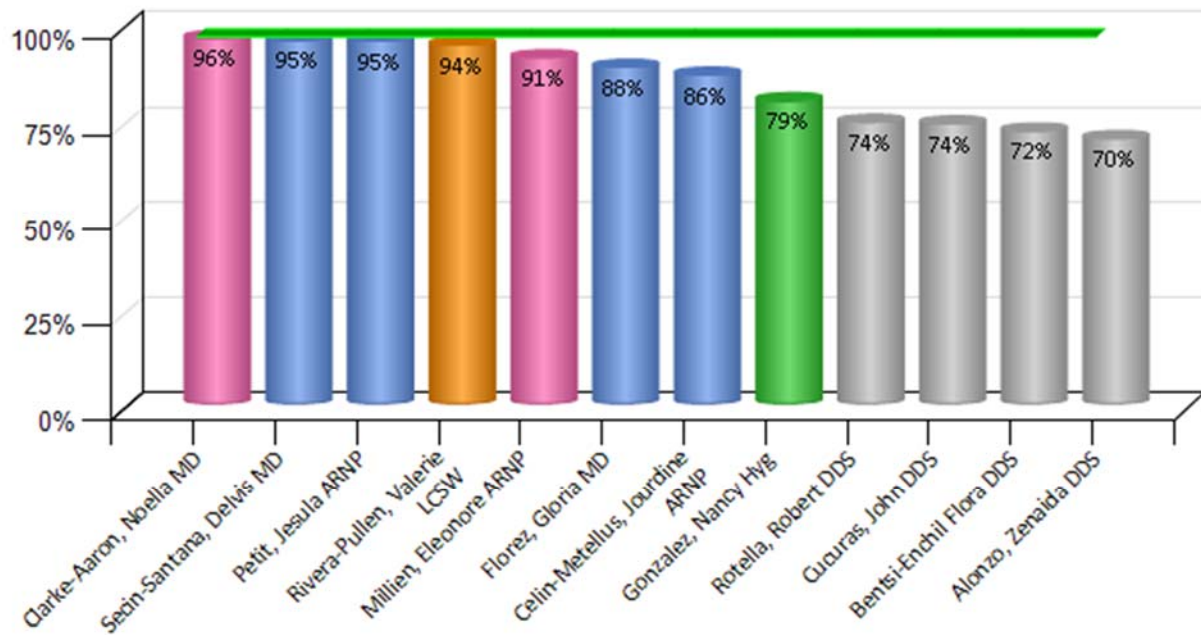
■ Adult Care



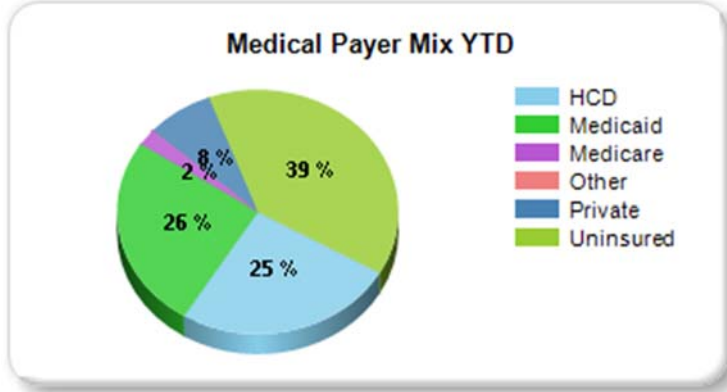
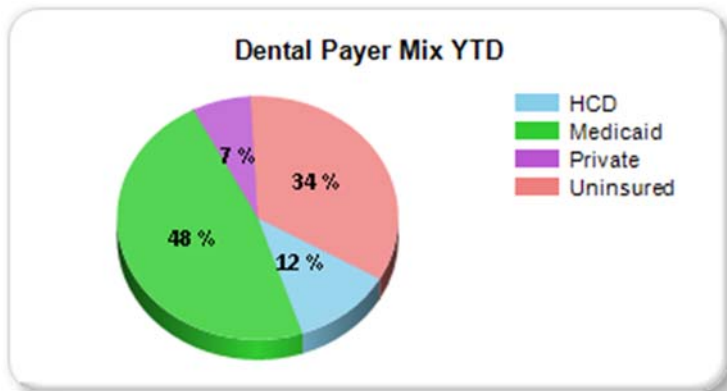
WEST PALM BEACH TOTALS FOR JANUARY 2019

| | Daily Target | Days Worked | Target for the month | Total for month seen | % Monthly Target Achieved | Daily Average |
|--|--------------|--------------|----------------------|----------------------|---------------------------|---------------|
| ADULT CARE | | | | | | |
| Secin-Santana, Delvis MD | 16 | 21.0 | 336 | 320 | 95% | 15.2 |
| Petit, Jesula ARNP | 16 | 20.5 | 328 | 312 | 95% | 15.2 |
| Florez, Gloria MD | 18 | 17.0 | 306 | 270 | 88% | 15.9 |
| Celin-Metellus, Jourdine ARNP | 16 | 19.0 | 304 | 262 | 86% | 13.8 |
| WEST PALM BEACH ADULT CARE TOTALS | | 77.5 | 1274 | 1164 | 91% | |
| PEDIATRIC CARE | | | | | | |
| Clarke-Aaron, Noella MD | 18 | 20.0 | 360 | 345 | 96% | 17.3 |
| Millien, Eleonore ARNP | 16 | 15.5 | 248 | 225 | 91% | 14.5 |
| WEST PALM BEACH PEDIATRIC CARE TOTALS | | 35.5 | 608 | 570 | 94% | |
| MENTAL HEALTH | | | | | | |
| Rivera-Pullen, Valerie LCSW | 7 | 20.5 | 144 | 135 | 94% | 6.6 |
| WEST PALM BEACH MENTAL HEALTH TOTALS | | 20.5 | 144 | 135 | 94% | |
| DENTAL | | | | | | |
| Rotella, Robert DDS | 16 | 18.0 | 288 | 213 | 74% | 11.8 |
| Cucuras, John DDS | 16 | 13.0 | 208 | 153 | 74% | 11.8 |
| Bentsi-Enchil Flora DDS | 16 | 7.5 | 120 | 86 | 72% | 11.5 |
| Alonzo, Zenaida DDS | 16 | 20.0 | 320 | 223 | 70% | 11.2 |
| WEST PALM BEACH DENTAL TOTALS | | 58.5 | 936 | 675 | 72% | |
| DENTAL HYGIENE | | | | | | |
| Gonzalez, Nancy Hyg | 8 | 19.5 | 156 | 124 | 79% | 6.4 |
| WEST PALM BEACH DENTAL HYGIENE TOTALS | | 19.5 | 156 | 124 | 79% | |
| WEST PALM BEACH TOTALS | | 211.5 | 3118 | 2668 | 86% | |

WEST PALM BEACH PROVIDER PRODUCTIVITY JANUARY 2019



■ Mental Health
 ■ Pediatrics
 ■ Adult Care
 ■ Dental
 ■ Dental Hyg.



DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
February 27th, 2019

1. Description: Quality Council Reports

2. Summary:

This agenda item provides the following:

- Quality Council Minutes – February 2019
- UDS Report – YTD December 2018

3. Substantive Analysis:

See attached minutes and UDS report.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Dawn Richards
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name


Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
February 27th, 2019

6. Recommendation:

Staff recommends the Board Approve the Quality Council Minutes and UDS Report.

Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



Dr. Noelle Stewart
FQHC Medical Director



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

Quality Council Meeting Minutes

Date: February 8th, 2019

Time: 1:09pm – 3:00 pm

Attendees: Dr. Belma Andric – Chief Medical Officer/Executive Director, Dr. Noelle Stewart – FQHC Medical Director (via WebEx), Dr. Duclos Dessalines – Director of Pediatrics, Dr. Tamara-Kay Tibby - Dental Director, David Speciale – Quality Manager, Dr. Ana Ferwerda – FQHC Director of Women’s Health, Dr. Courtney Rowling - Director of Behavioral Health, Lisa Hogans – Director of Nursing, Luis Rodriguez, Quality & Compliance Pharmacists, Kristine Macaya – Assistant Director of Pharmacy, Amy Walker – Director of Patient Access, Julia Bullard – FQHC Board Member, Nancy Fox-Goughan, Dental Quality Coordinator, Terry Megiveron - Director of Practice Operations, Maria Chamberlin – Nurse Manager, Jane Cruz - Director of Social Services; Andrea Steele – Corporate Quality Director (via WebEx), Victoria Pruitt (via WebEx)

Minutes by: Alena Ranucci / David Speciale

| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|------------------------|---|---|--|---------------------------------|
| QUALITY | | | | |
| 48-HOUR METRICS | | | | |
| Medical Metrics | <p><u>Open Documents, & Lab Results – Non-Compliance Rates of Providers:</u></p> <p>January 2019 - There were 13 providers who will receive additional education on document compliance</p> <ul style="list-style-type: none"> • Adult MD/DO – 64% • Pediatric MD – 60% • Adult ARNP – 75% • Pediatric ARNP – 50% • OB / GYN – 50% • Residents – 75% • Nurses – 82% • Nurse Buckets – 78% • Patient Navigator – 88% • Psychiatry – 100% • Social Work – 100% | <p>Chart auditor will investigate what open items are populating the EMR buckets. Once identified, staff will be retrained.</p> <p>Determine if additional time is needed for providers to review buckets. Provider additional training to Providers. Report this moving forward as a non-compliance rate</p> | <p>Sherri Colon</p> <p>Dr. Stewart</p> | <p>3/9/2019</p> <p>3/9/2019</p> |

| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|-----------------------|---|--|--------------------------|-------------|
| QUALITY | | | | |
| | <p><u>Encounters Closed Rate</u> January 2019 - Three Providers exceeded the 48-hour benchmark for closing encounters. 1 - Psychiatrist – 4.51 Days 1 - ARNP - Pediatric Medicine – 3.63 Days 1 - Social Worker – 4.48 days</p> | The three providers will be retrained and coached on closing encounters in accordance with the 48-hour metric. | Dr. Stewart | ASAP |
| Dental Metrics | <p>Closing Encounters (previous month items closed/reviewed w/in 48 hours) Closing Encounters - Total of 35 Unlocked Notes. Reported for Q4 2018: (Oct/Nov/Dec) We identified the need to train providers on running a report to find their unlocked charts. Staff were retrained at the 2/7/2019 Boot Camp on identifying unlocked notes.</p> | | | |
| | <p><u>Imaging Reports/ Dexis Image Bucket</u> None for the month of January</p> | | | |
| UDS REPORT | | | | |
| Medical | <p>Final 2018 UDS Report (Jan-Dec) Of the 14 UDS Measures: 11 Exceeded the HRSA Goal, 1 met the goal, and 2 were short of HRSA Goals. <i>(Clinic Score/ HRSA Goal)</i></p> <ul style="list-style-type: none"> Childhood immunization: (41% /70 %) During boot camp we re-iterated this to all providers. One immunization that keeps us down. During boot camp, we re-iterated the importance of the second flu vaccine. We would like to start making robust reminders through phone calls to | Update the clinic UDS Table with U.S.A. and FL goals for 2017 and include Healthy People 2020 data. | David Speciale | ASAP |

| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|------------------------|---|--|---|-----------------|
| QUALITY | | | | |
| | <p>have patients that are almost due or overdue to have an appointment made through our patient access center.</p> <ul style="list-style-type: none"> • Cervical Cancer Screening: (61% /60 %) <p>Dr. Stewart reviewed the cervical cancer screening with each provider at the clinic sites. Results indicated that most providers are comfortable performing the procedure; only 2 ARNP requested to shadow Dr. Ferwerda for additional training; providers were advised to leaving the room while patients undress and to have appropriate Medical Assistants be chaperones during the exam. All providers were educated on the appropriate language to use when describing their findings during the pap procedure. Providers were educated on the pap-app.</p> • Weight assessment, Children & Adolescent: (79% /60 %) • Adult Weight screening and follow up: (94%/ 60%) • Tobacco use screening & cessation: (95% / 90%) • Asthma Pharmacologic Therapy: (99% / 97%) • Coronary Artery Disease CAD: (89% / 75%) • Ischemic Vascular Disease (IVD): (85% / 75%) • Colorectal Cancer Screening: (60% /60%) • HIV linkage: (60% / 100%) <p>We have a low-denominator of diagnosing HIV patients which yields a low percentage. We have met with DOH, again, to solidify our procedure so that their team can come along side our</p> | <p>Provider training to all RN's on the HIV linkage to care measure.</p> | <p>Lisa Hogans, Angela Chamberlin</p> | <p>3/9/2019</p> |

| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|--------------------------|---|--|------------------------------|-------------|
| QUALITY | | | | |
| | <p>providers when delivering the patients diagnosis of HIV. By doing this, we can ensure that the patient has met with DOH, a follow-up appointment will be made that day, and they will be familiar with the individuals that will be assisting patients with their treatment.</p> <ul style="list-style-type: none"> • Depression screening: (92% / 80%) • Dental Sealant: (87% / 70%) • Hypertension: (71% / 65%) • Diabetes: (73% / 65%) | | | |
| Dental | Complication Rates — No Update. Earliest deliverable will be May 2019 | Develop and report Dental Complication Rates | Dr. Tibby | 5/10/2019 |
| Behavioral Health | <p>January 2019</p> <ul style="list-style-type: none"> • MAT Program Census – 110 Patients <p>We grew our census due to hiring a 3rd therapist that allows us, according to state guidelines, to see over 100 patients. Our goal is to see 150 patients.</p> <ul style="list-style-type: none"> • New Patient Intakes – 12 Patients <p>We also just hired our 4th therapist that will give us the capacity to see up to 200 patients, giving us the ability to meet the demands of the community.</p> <ul style="list-style-type: none"> • Patient Discharges – 3 Patients • Patient Readmits – 4 Patients <p>We have now implemented a new measure of tracking re-admitted patients as it was our suspicion that when we discharge, we re-admit a large percentage of these discharges.</p> | | | |

| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|---|--|--|--------------------------|-------------|
| QUALITY | | | | |
| | Treatment Phase Phase 1 - 54 Phase 2 – 33 Phase 3 – 11 Phase 4 – 4 Three (3) patients have been tapered off in this phase. Naltrexone Patients – 2 Vivitrol Patients – 6 | Explore the effectiveness of a Program “Alumni” group and use of Peer Counselors. | Dr. Rowling | 3/9/2019 |
| Women’s Health UDS & Quality Metrics | UDS – in process Quality Metrics – in process | Create a UDS spreadsheet for Jan & Feb to ensure that match what is in Athena. Once this is completed we can pull from EHR in the forward months | Dr. Ferwerda & Andrea | 3/9/2019 |
| | | Dr. Ferwerda will work with Leigh-Ann in IT to create an EMR dummy code for “Entry of Care” and “Low Birth Weight”. | Dr. Ferwerda | 3/9/2019 |
| | | Report maternity indicators quarterly moving forward. Next report will be in April 2019 | Dr. Ferwerda | 3/9/2019 |
| Human Resources Quality Metrics | January 2019 New hires = 6 Termination = 4 - 3 Voluntary - 1 Involuntary Workers Comp = 0 | | | |

| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|-------------------------------------|---|--|------------------------------|-------------|
| QUALITY | | | | |
| GRANT UPDATE | | | | |
| | <p>American Cancer Society: We met with our ACS liaison and have taken inventory of our current practices to improve HPV vaccines rates and brainstormed on tactics to use this year to improve rates. We are also working with our patient access team by providing them with a monthly report of patients that need a follow-up appointment</p> <p>Delta Dental Grant 2018-2019 Working on finalized report. Due date is February 28th, 2019. Funds will be used towards new dental chair.</p> <p>Children’s Services Council Q4 94 visits of which 85 were billed to this grant. We are requesting additional funding in the amount of \$53,000 to purchase major dental equipment at the Children’s Service Council Board Meeting on February 28th, 2019.</p> <p>Partnership for Aging Awarded \$700 which will be spent on the care for patients 65+ mainly to take care of any bad debt that will be allocating equally throughout all of our clinics.</p> | <p>We will implement incentives to staff in the clinics to increase our HPV rates We will then look at the magnets that we provide patients to determine if we need to make changes</p> | Dr. Stewart | 3/9/2019 |
| CHART REVIEW | | | | |
| Medical Chart Review | <p>Morbidity & Mortality Review</p> <ul style="list-style-type: none"> - No report for this month | | | |
| Dental Chart Review: | <p>New Chart auditor will soon begin to review Dental Charts. Nancy will continue to audit dental components including radiographs, treatment plans</p> | | | |

| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|--|---|--|--------------------------------|---------------------------------|
| QUALITY | | | | |
| | <p>ER Referral Chart Reviews</p> <p>The one chart that was referred to the ER was reviewed and the provider rendered appropriate care and proper documentation was in the chart.</p> | | | |
| Behavioral Health Chart Review: | Program Staff (Ingrid) has been reviewing charts with frontline staff. | Train the Chart Auditor to review Substance Abuse services | Lisa Hogans, David Speciale | 3/9/2019 |
| QUALITY ITEMS | | | | |
| Dental Quality QSV Report | <p>Procedure Mentoring: 4 providers have shadowed and observed a Pediatric Provider for additional training on pulpotomies and stainless steel crowns. Once they have shadowed 8, and performed 4, they will be approved.</p> <p>Training provided to all team members on the new isolation system, Zirc.</p> <p>Providers received training on anesthesia pain management and pain control, stainless steel crowns, and antibiotics during the February Boot Camp.</p> <p>Infection Control: (Jan 2019) 25% compliance, staff received training.</p> <p>Operatory Equipment: 50% compliance , staff received training</p> <p>PPE: 100% compliance. Utility gloves and PPE.</p> | <p>Continue to monitor and retrain staff on Infection control procedures including proper discarding of expired supplies</p> <p>Data tracking to be defined.</p> | Nancy Fox-Goughan | <p>3/9/2019</p> <p>3/9/2019</p> |

| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|---|---|--|---|-------------|
| QUALITY | | | | |
| Medical / Dental Pediatric Integration (MDI) | Pilot began on Jan 8 th in Lantana. January 2019 – 31 patients seen in Lantana Clinic in Pediatric medicine for MDI as follows: Age 0-5: 13 Age 6-9: 8 Age 10-14: 4 Ages 15+: 6 Long Term Goal - Identify types of service(s) provided by Dental Hygienist during the MDI | <ol style="list-style-type: none"> NUM: # of patients seen by dental hygienist in peds office DEN: # of patients seen for well child pediatrician visit (all ages) NUM: # of patients that had a WHO to from Medical provider to Dental provider DEN: # of patients seen by hygienist in peds office. NUM: # of patients seen by a peds dentist same day DEN: # of patients that had a WHO to from Medical provider to Dental provider. # of patients seen in Dental Clinic as a result of an MDI service. Did patient establish a Dental Medical Home? | Dr. Dessalines, Dr. Tibby, David Speciale | |
| Medical - Quality QSV Report | Site Visits scheduled for February and March 2019 | | | |
| Women's Health – Quality QSV Report | Site Visits scheduled for February and March 2019 | | | |
| Behavioral Health - Quality QSV Report – | Site Visits scheduled for February and March 2019 | | | |

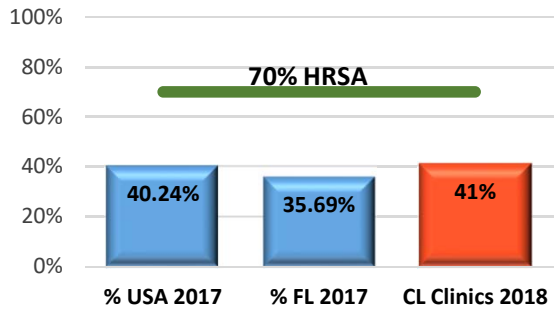
| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|---------------------------------|--|--|--------------------------------------|-------------|
| QUALITY | | | | |
| POLICY & PROCEDURE | | | | |
| | Staff were trained on the updated Higher Level of Care Tracking procedure, which now includes Baker Acts and referrals to the emergency room from dental. | Present findings on the Higher Level of Care tracking | Angela Chamberlin, David Speciale | 3/9/2019 |
| DIRECTOR UPDATES | | | | |
| Medical Updates: | <u>Labs:</u> Investigating high cost labs in order to develop a reduce cost lab shortlist for providers to use as guidance when ordering test | | | |
| New Employee Orientation | The following new employees attended New employee orientation: <ul style="list-style-type: none"> • Edrice Jean Baptiste - MA - Lantana Clinic • Massiel Perez, LMHC - Addiction Counselor – Suboxone Clinic (Lantana) • Deon Robinson - LPN - Belle Glade • Maritza Maletto - Registration Specialist - Jupiter | | | |
| Dental Updates: | No additional updates | | | |
| Nursing Updates: | <u>Goals for RN/MA Program:</u> Our new Clinical Nurse Educator, Karen started on February 4 th Improved response of Critical Labs through installing RN lines that go directly to portable phone that RN can easily access | Phone lines scheduled to be tested in 2 weeks at WPB Clinic to improve clinical response time. If it success, additional phones will be ordered for the remaining clinics. Project ticket has been created | Lisa Hogans, Angela Chamberlin | 3/9/2019 |

| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|-----------------------------------|---|--------------------------|--------------------------|-------------|
| QUALITY | | | | |
| Behavioral Health Updates: | Jane and Dr. Rowling discussed with team to capture warm hand offs and to identify where we are missing some of the warm hand offs. Staff being reorganized to optimize efficiency. | | | |
| Pediatric Updates: | Clinic Leadership visited the Immokalee Health Center specifically to observe their best practices for pediatric – behavioral health integration. Feedback and ideas to be discussed at workgroups. | | | |
| Women’s Health Updates: | A new Nurse Practitioner will be starting February 18 th . The provider will receive a 2-week training. | | | |
| Operations Updates: | Operations Workgroup has been scheduled for the first week of February, and will re-occur on a weekly basis until the end of this month. June Shipek has recently been promoted to be our new Practice Manager in the Lake Worth Clinic. Jeanne Rizzio, former Practice Manager at Lake Worth, is the Practice Manager of Jupiter Clinic. Marguerite Lynch is now our Support Services Manager for clinic administration. | | | |
| UTILIZATION | | | | |
| Productivity | Report to be reviewed at operations workgroup | | | |
| Cycle Time | Development of these reports have been put on hold due to staffing changes along with priority of the UDS reports. Once these reports are finalized, we will bring forth Cycle Time, No Shows, 3 rd Next Available and Walk-ins. | | | |
| No Shows | No report at this time | | | |

| <u>AGENDA ITEM</u> | <u>DISCUSSION / RECOMMENDATIONS</u> | <u>ACTION ITEMS (AI)</u> | <u>RESPONSIBLE PARTY</u> | <u>DATE</u> |
|--------------------------------------|---|--|--------------------------|-------------|
| QUALITY | | | | |
| | | | | |
| 3rd Next Available | No report at this time | | | |
| Walk-Ins | <u>Dental Walk-Ins (Jan 2019)</u> Number of patients triaged – 373 Same Day Appointment - 357 Scheduled for Future – unable to report at this time | | | |
| | <u>Dental Adult Appointments</u> Received feedback from the community that adults cannot make appointments through the Call Center. A script will be created for the Call Center for staff to screen patients who are qualified for level 1 & 2 services that we offer for adults and pediatric patients. Items to include: <ol style="list-style-type: none"> 1. Are you in pain? 2. Do you have swelling? 3. Are you pregnant or recently had a baby? 4. Do you have any special health care needs? 5. Are you already an established patient with Dental Clinic? If yes If all of the above are no: <ol style="list-style-type: none"> 6. Do you use C.L. Brumback as your PCP? If so, are you diabetic, have history of stroke, history of heart disease, transplant, or patient of addiction clinic? | Develop script and train the Call Center staff on how to screen and appoint patients | Dr. Tibby | 3/9/2019 |
| Meeting Adjourned – 2:23 pm | | | | |

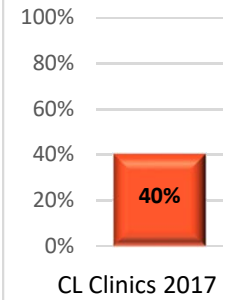
C. L. BRUMBACK PRIMARY CARE CLINICS
YTD December 2018

CHILDHOOD IMMUNIZATION

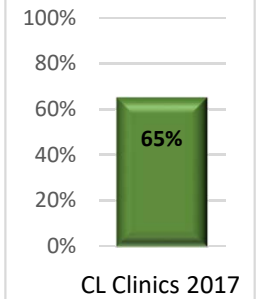
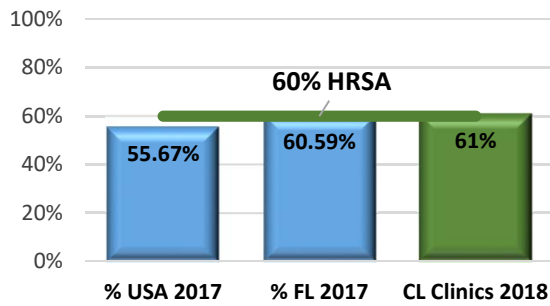


Findings: 1. Many children did not receive their second dose of flu which is part of the measure requirements

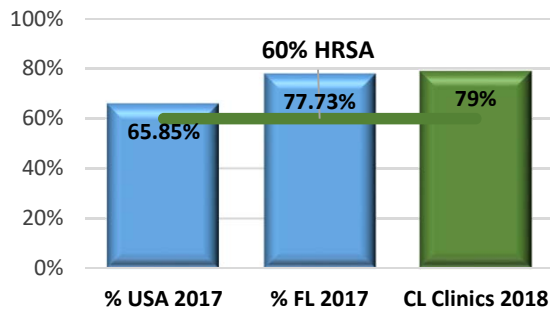
Interventions: 1. Robust reminders through phone calls to have patients that are almost due or overdue for vaccines schedule the appointment for vaccine administration.



CERVICAL CANCER SCREENING



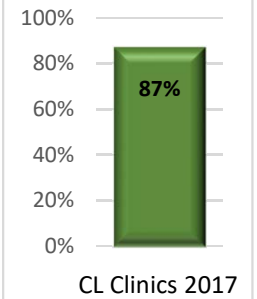
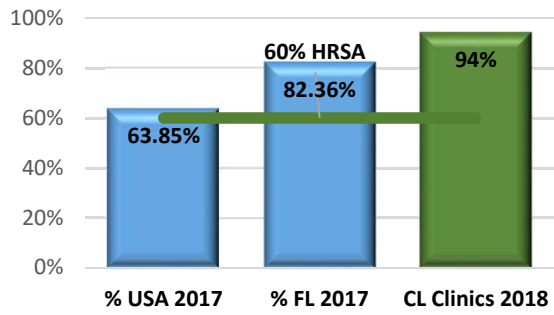
WEIGHT SCREENING AND COUNSELING FOR CHILDREN AND ADOLESCENTS



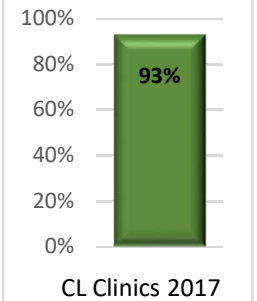
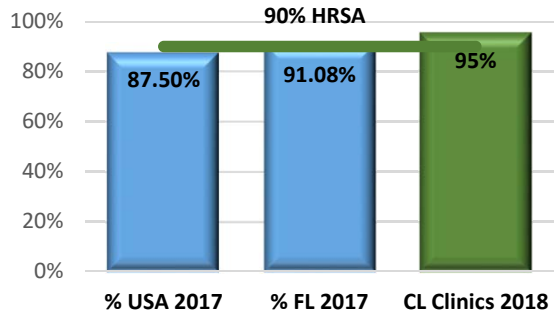
Not Available

C. L. BRUMBACK PRIMARY CARE CLINICS
YTD December 2018

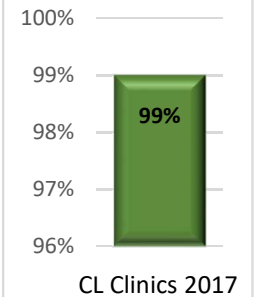
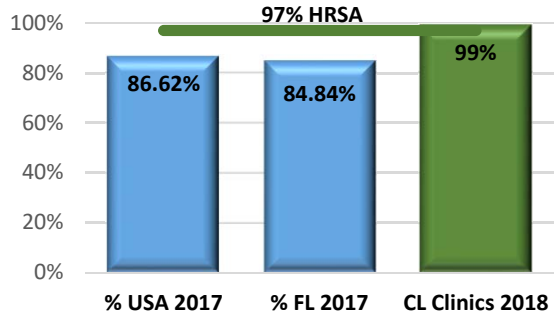
ADULT WEIGHT SCREENING AND FOLLOW UP



TOBACCO USE SCREENING AND CESSATION INTERVENTION

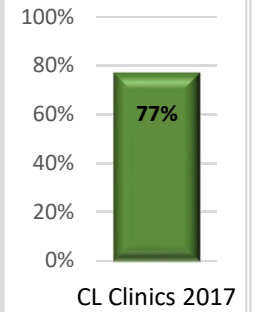
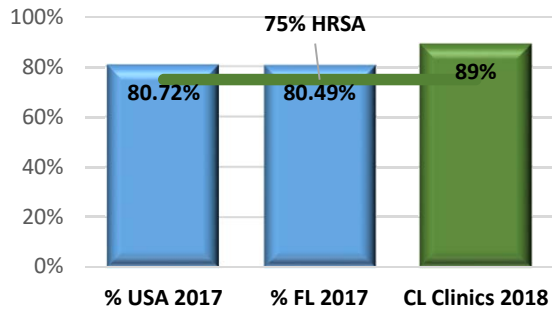


ASTHMA PHARMACOLOGIC THERAPY

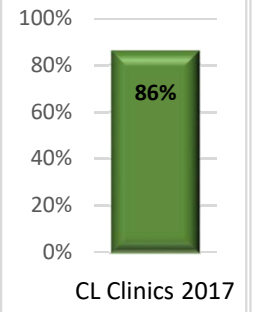
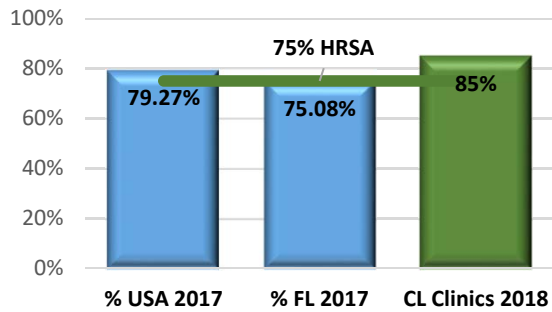


C. L. BRUMBACK PRIMARY CARE CLINICS
YTD December 2018

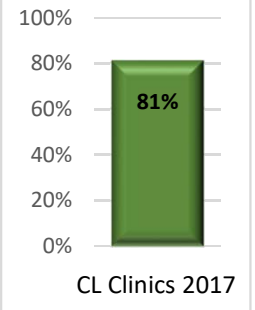
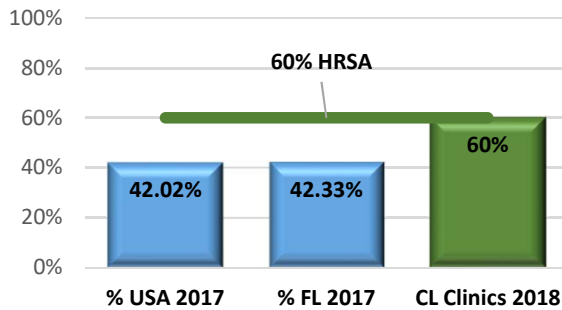
CORONARY ARTERY DISEASE (CAD): LIPID THERAPY



ISCHEMIC VASCULAR DISEASE (IVD): Antiplatelet Therapy

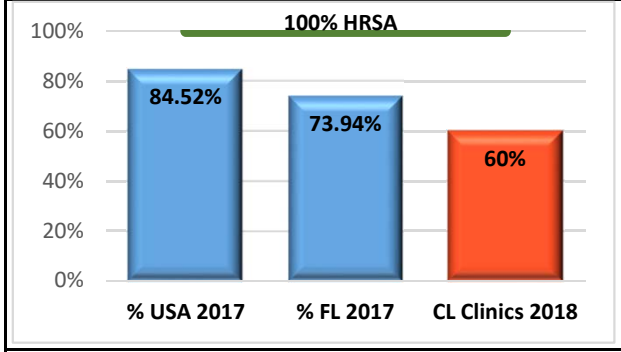


COLORECTAL CANCER SCREENING

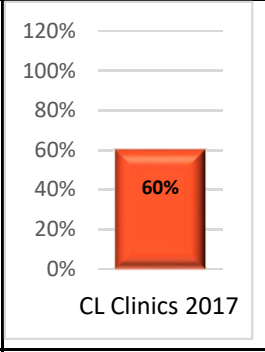


C. L. BRUMBACK PRIMARY CARE CLINICS
YTD December 2018

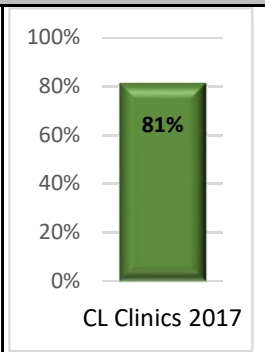
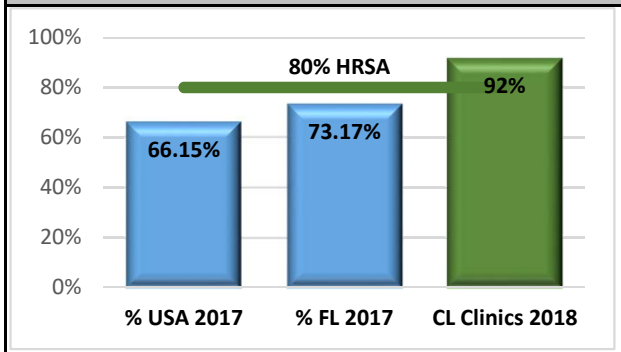
HIV LINKAGE TO CARE



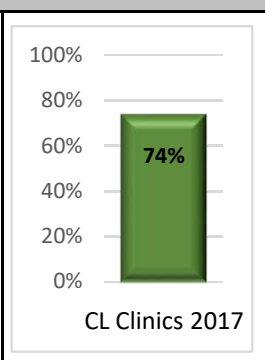
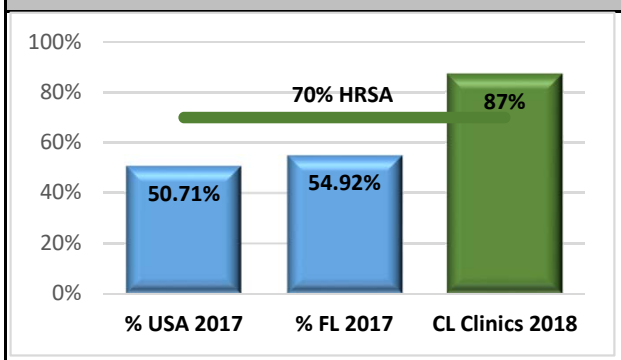
Findings: 1. Low denominator of just 5 newly diagnosed HIV patients for the 2018 reporting year yields low percent with just two non-compliant patients. 2. DOH has made several failed attempts to connect to patients
Interventions: 1. DOH and CLBPCC will continue to follow-up.



PATIENTS SCREENED FOR DEPRESSION AND FOLLOW-UP



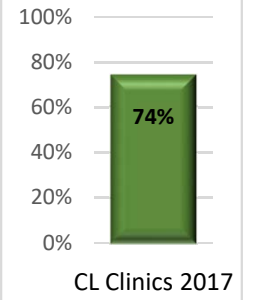
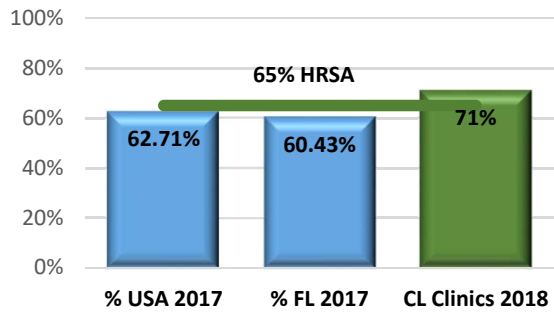
DENTAL SEALANTS





C. L. BRUMBACK PRIMARY CARE CLINICS YTD December 2018

HYPERTENSION



DIABETES

