

### **BOARD OF DIRECTORS**

February 28, 2024 12:30 P.M.

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



# BOARD OF DIRECTORS MEETING AGENDA February 28, 2024 1515 N. Flagler Drive Suite 101

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Remote Participation Link: https://zoom.us/j/5507895592?pwd=REZ4TWtYUXowQWNpWTBaVXRsZ1dDQT09

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

- 1. Call to Order Melissa Tascone, Chair
  - A. Roll Call
  - B. Affirmation of Mission: To provide compassionate, comprehensive health services to all Palm Beach County residents, through collaboration and partnership, in a culturally sensitive environment.
- 2. Agenda Approval
  - A. Additions/Deletions/Substitutions
  - B. Motion to Approve Agenda
- 3. Awards, Introductions and Presentations

None.

- 4. Disclosure of Voting Conflict
- 5. Public Comment
- 6. Meeting Minutes
  - A. **MOTION TO APPROVE:**

Board Meeting Minutes of January 24, 2024 [Pages 1-9]

- 7. Consent Agenda Motion to Approve Consent Agenda Items
  - A. <u>ADMINISTRATION</u>
    - 7A-1 **RECEIVE AND FILE:**

February 2024 Internet Posting of District Public Meeting https://www.hcdpbc.org/resources/public-meetings

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

Attendance Tracking [Page 10]

C. L. Brumback Primary Care Clinics Board of Directors Meeting Agenda February 28, 2024

### 7A-3 **RECEIVE AND FILE:**

HRSA Digest (Jesenia Montalvo) [Pages 10-17]

### **B. FINANCE**

### 7B-1 **MOTION TO APPROVE:**

District Clinic Holdings, Inc. Financial Report December 2023 (Jessica Cafarelli) [Pages 18-35]

### 8. Regular Agenda

### A. ADMINISTRATION

### 8A-1 **MOTION TO APPROVE:**

Medical and Dental Sliding Fee Scale 2024 (AnnMarie Hankins) [Pages 36-40]

### B. EXECUTIVE

None.

### C. CREDENTIALING

None.

### D. QUALITY

### 8D-1 MOTION TO APPROVE:

Quality Report (Dr. Charmaine Chibar) [Pages 41-70]

### E. OPERATIONS

### 8E-1 **MOTION TO APPROVE:**

Operations Report- January 2024 (Angela Santos) [Pages 71-79]

C. L. Brumback Primary Care Clinics Board of Directors Meeting Agenda February 28, 2024

### 9. Candice Abbott, Executive Director of FQHC Services Comments

### 10. Board Member Comments

### 11. Establishment of Upcoming Meetings

### March 27, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

### April 24, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

### May 22, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

### June 26, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

### July 24, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

### August 28, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

### September 25, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

### October 23, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

### November 20, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

### December 18, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

### 12. Motion to Adjourn Public Meeting

### District Clinic Holdings, Inc. d.b.a. C.L. Brumback Primary Care Clinics Board of Directors Meeting Summary Minutes 01/24/2024

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

Seymore (ZOOM); Tammy Jackson-Moore (ZOOM); Alcolya St. Juste (ZOOM);

Absent: None.

**Excused:** Joseph Gibbons

**Staff:** Bernabe Icaza; Candice Abbott; Jessica Cafarelli; Dr. Charmaine Chibar; Alexa Goodwin; Marisol Miranda; Macson Florvil; Heather Bokor; Maria Chamberlin; Andrea Steele; Angela Santos; Shauniel Brown; Alyssa Tartar; Lisa Hogans; Gina Kenyon; Monica Georgelis; David Speciale; Geoff Washburn; Dr. Adametz; Louis Bassi; Stephen Sadiku; HRSA Auditors;

Deborah Sheres (Public)

Minutes Transcribed By: Gina Kenyon

The meeting is scheduled for 12:30pm.

Meeting Began at 12:32pm.

AGENDA ITEM	DISCUSSION	ACTION
<ol> <li>Call to Order</li> <li>Roll Call</li> </ol>	Ms. Tascone called the meeting to order.  Roll call was taken and a quorum was established.	The meeting was called to order at 12:32 p.m.
1B. Affirmation of Mission	Ms. Tascone read the affirmation of mission.	

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<ul><li>2. Agenda Approval</li><li>2A. Additions/Deletions/ Substitutions</li><li>2B. Motion to Approve Agenda Items</li></ul>	None.	VOTE TAKEN: Mr. Robert Glass made a motion to approve the agenda. Mr. Mike Smith duly seconded the motion. A vote was called and the motion passed unanimously.
3. Awards, Introductions & Presentations	HRSA auditors introduced themselves to the board and provided information about their OSV and what to expect.	No action necessary.
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.
6. Meeting Minutes  A. MOTION TO APPROVE: Board meeting minutes of December 13, 2023	There were no changes or comments to the minutes dated December 13, 2023.	VOTE TAKEN: As presented, Mr. Mike Smith made a motion to approve the Board meeting minutes. Ms. Tammy Jackson-Moore duly seconded the motion. A vote was called, and the motion passed unanimously.
7. Consent Agenda – Mot	tion to Approve Consent Agenda Items	VOTE TAKEN: Mr. Bill Johnson motioned to approve the Consent Agenda. Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.

A. ADMINISTRATION		
<b>7A-1. Receive &amp; File:</b> January 24, 2024 Internet Posting of District Public Meeting	The meeting notice was posted.	Received & Filed. No further action is necessary.
<b>7A-2. Receive &amp; File:</b> Attendance tracking	Received & Filed. No further action is necessary.	
<b>7A-3. Receive &amp; File:</b> HRSA Digest	Per the request of the clinic Board, the latest HRSA Digest was provided.	Received & Filed. No further action is necessary.
B. FINANCE		
<b>7B-1. Motion To Approve:</b> DCH, Inc. Financial Report November 2023	This agenda item recommends the Board approve the November 2023 Financials which were provided in the Board packet.	Motion approved unanimously.
8. REGULAR AGENDA		
A. ADMINISTRATION:		
8A-1. Motion to Approve: Compliance with HRSA Monthly Meeting Requirement	Ms. Candice Abbott provided a reminder that in order to be in compliance with HRSA guidelines, the board is required to meet monthly where a quorum is present to ensure the board has the ability to exercise it's required authorities and functions.	VOTE TAKEN: Mr. Robert Glass motioned to approve the Compliance with HRSA Monthly Meeting Requirement & Ms. Julia Bullard duly seconded the motion. The motion passed unanimously.
8A-2. Motion to Approve: Nomination of New Clinic Board Member	The Nominating Committee was held prior to today's board meeting and nominated Ms. Crystal Gonzalez as a new member to the DCH BOD. This agenda item recommends the appointment of Crystal Gonzalez to the Clinic board.	VOTE TAKEN: Mr. Mike Smith motioned to approve Ms. Crystal Gonzalez & Mr. Bill Johnson duly seconded the motion. The motion passed unanimously.

B. EXECUTIVE		
8B-1 RECEIVE AND FILE: Executive Director Informational Update	Ms. Candice Abbott Everyone knows we have a family medicine resident program out in Belle Glade. They are our main providers in Belle Glade for Primary Care. They are going to begin their psychiatric rotation. Their rotation for their psych rotation will either begin the end of this month or beginning of February under the supervision of Dr. Courtney Phillips who is our VP of Behavioral Health. Dr. Phillips has also been a practicing psychiatrist in our organization as well. They will be alternating Wednesdays where they will provide psychiatric services in Belle Glade and also BH substance abuse disorder services in Mangonia.	No action necessary.
C.CREDENTIALING		
8C-1 MOTION TO APPROVE: Licensed Independent Practitioner Credentialing and Privileging.	The agenda item represents the licensed independent practitioners recommended for credentialing and privileging by the Vice President, Chief Medical Officer.  Dr. Chibar reviewed and The LIPs listed below satisfactorily completed the credentialing and privileges process and met the standards set forth within the approved Credentialing and Privileging Policy. The credentialing and privileging process ensures that all health center practitioners meet specific criteria and standards of professional qualifications. This criterion includes, but is not limited to:  > 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)  LIP(s):  Courtney Phillips, MD joined the West Palm Beach Clinic in 2024 specializing in Psychiatry. She attended Wayne State University School of Medicine and also completed her residency at University of Michigan Health System. Dr. Phillips is certified in Psychiatry by the American Board of Psychiatry and Neurology. She has been in practice for eight years.	VOTE TAKEN: Mr. Mike Smith motioned to approve the LIP & Ms. Julia Bullard duly seconded the motion. The motion passed unanimously.

D.QUALITY	Zaneshia Caple, LMHC joined the Belle Glade Clinic in 2024 as a Licensed Mental Health Counselor. She attended Nova Southeastern University and is a Certified Master's Level Addiction Professional by the Florida Certification Board. Ms. Caple has been in practice for eleven years.  JD Weidner, LMHC joined the West Palm Beach Clinic in 2024 as a Licensed Mental Health Counselor. He attended Nova Southeastern University and is certified as a National Certified Counselor by the National Board for Certified Counselors, Inc. Mr. Weidner has been in practice for sixteen years.  Ms. Candice Abbott stated that during our HRSA OSV, the LIP Credentialing and Privleging does not need to approve the credentialing or re-credentialing process, however it is in our current bylaws that we ask the board to do so. Before we could actually take it out, we would have to amend the bylaws to say that it doesn't have to be there.	
8D-1. MOTION TO APPROVE: Quality Reports	This agenda item presents the updated Quality Improvement & Quality Updates:  • Quality Council Meeting Minutes – January 2024 • UDS Report – YTD • Provider Productivity – December 2023  Dr. Chibar presented the above topics and reviewed the UDS Report	VOTE TAKEN: Mr. Bill Johnson made a motion to approve the Quality Reports as presented. Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.
E. OPERATIONS	Dashboard.	<u> </u>
8E-1. MOTION TO APPROVE: Operations Reports December 2023	In December, the Health Centers had a total of 8,289 unique patients. This is a 2% decrease over previous month. Our unique new patients totaled was 1,962 which was 23.6% of overall unique patients. In provider visits the Health Centers had a total of 11,742 visits. This was consistent with previous month and 7% higher than December 2022. 37% of patients were from adults Primary Care which is a 1% decrease, 23% from Dental which was consistent with previous month and 14% from Pediatrics which was also consistent with previous month. In	VOTE TAKEN: Mr. Bill Johnson made a motion to approve the Operations Reports- December 2023 as presented. Mr. Robert Glass duly seconded the motion. A vote was called, and the motion passed unanimously.

December the Lantana Primary Care Health Center had the highest volume with 1,839 visits followed by the West Palm Beach Primary Health Center with 1,654 visits.

Our payer mix for December reflected 54% uninsured which is a 2% increase over previous month. 39% of patients were Managed Care which was a 2% decrease over previous month. 5% was Medicaid which was consistent with previous month.

60% of patients continue to report as female. 50% of patients reported as White which was a 1% increase over previous month and 43% Black or African American. This was a 1% decrease over previous month. Consistent to previous month, 39% of patients reported as Hispanic. Our largest age group continue to be those between the ages of 30-39 years old with 18% of total patients.

In December our Homeless population averaged 33.4% with a total of 2,844 homeless patients between all Health Centers.

Agricultural Worker averaged 5.3% between all Health Centers in December with a total of 441 patients.

The no show rate in December between all service lines and health centers was 20% which is a 1% decrease. By service line, Dental is lower at 17%; Primary Care 21%; Women's Health 23% and the highest being Behavioral Health at 29%. Consistently only 1% of no shows are from Telehealth.

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

Women's Health and Behavioral Health departments show a higher percent of new patient no shows. For established patients, the highest no-show rates consistently are those from

	Mangonia Behavioral Health, Mobile Clinics West Palm Beach, Lake Worth and Lantana Primary Care departments.  Walk-in visits year to date remain consistent at 19% in medical and 15% in dental. We provided a total of 27,640 walk-in visits in 2023. In December the West Palm Beach Medical and Dental Health Center saw the highest number of walk-ins with a total of 591 walk-in visits.	
8F-1. MOTION TO APPROVE: Patient Relations Report December 2023 (Q4)	For Quarter 4 2023, there were a total of 20 Patient Relations Occurrences that occurred between 6 Clinics and Clinic Administration. This was a decrease from the previous quarter where we had 33 Complaints and Grievances. Of the 20 occurrences, there were 7 Grievances and 13 Complaints. The top 3 categories were Care & Treatment, Communication and Finance Related issues. The top subcategory was Competency of Staff with 3 occurrences.  There was also a total of 81 Compliments received across 7 Clinics and Clinic Administration. Of the 81 Compliments, 78 were patient compliments and 3 were employee-to-employee "Thumbs-Up" compliments.	VOTE TAKEN: Mr. Mike Smith made a motion to approve the Patient Relations Report- December 2023 (Q4) as presented. Mr. Bill Johnson duly seconded the motion. A vote was called, and the motion passed unanimously.
9. Executive Director of FQHC Services Comments	Ms. Candice Abbott stated that this is the second OSV that she has been through. The first one, she was only with HCD a couple of months in the role of CFO and had really only dealt with the fiscal auditor. The preparation that goes into this HRSA Audit is incredible how miuch information, and honestly Andrea and Jesenia left but David Speciale, Andrea and Jesenia did a rock star job. That's just putting in info and looking at the manual. But then you have operational folks that are not only doing their daily job, like Marisol, Angie Santos, Lisa and Nancy Gonzalez take their teams and they did everything they needed to in order to prepare for this Audit including looking at our policies and procedures making sure we are doing everything correct, including signage, etc. Jessica Cafarelli and Heather Bokor, took a huge role. Heather did all the conflicts of interest and Jessica with the fiscal responsibility. Dr. Chibar and Dr. Warren with the Quality portion. This was a Team effort but honestly, everyone pulled together, it meant something to everyone and they were very passionate about it. A huge thank you to everyone!	No action necessary.

10. Board Member Comments	Mr. Mike Smith commented that we spend millions of dollars to support this organization and to get a very favorable report from the auditors, how can we publicize this and show everyone in the community that this is a great alternative to healthcare services? Ms. Abbott stated that our communications department, will make sure this is communicated out through social media, maybe a press release, etc	No action necessary.
	Mr. Bill Johnson stated that speaking on behalf of the board, the staff of HCD are the "unsung heros" as this is an every day process, not just the recent time leading up to the Audit. My thanks to everyone for all their hard work. It shows that we are doing what we are supposed to be doing. It is a huge benefit to our community and I am very grateful and proud to be a part of that process.	
	Ms. Melissa Tascone stated that she recently went for a Women's Health appointment in December and had a wonderful experience, quick service, thorough provider, and as a result of the visit, she ended up getting her first mammogram ever. But she was happy that this provider referred her, as her previous OB did not go over that with her.	
11. Establishment of Upcoming Meetings	February 28, 2024 (HCD Board Room) 12:30 p.m. Board of Directors	No action necessary.
	March 27, 2024 (HCD Board Room) 12:30 p.m. Board of Directors	
	April 24, 2024 (HCD Board Room) 12:30 p.m. Board of Directors	
	May 22, 2024 (HCD Board Room) 12:30 p.m. Board of Directors	
	June 26, 2024 (HCD Board Room) 12:30 p.m. Board of Directors	
	July 24, 2024 (HCD Board Room) 12:30 p.m. Board of Directors	
	August 28, 2024 (HCD Board Room) 12:30 p.m. Board of Directors	

12. Motion to Adjourn	Ms. Tascone motioned to adjourn the public meeting immediately following the Closed Meeting at 1:35 pm.	VOTE TAKEN: Ms. Julia Bullard made a motion to adjourn. Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.
	<u>December 18, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors	
	November 20, 2024 (HCD Board Room) 12:30 p.m. Board of Directors	
	October 23, 2024 (HCD Board Room) 12:30 p.m. Board of Directors	
	September 25, 2024 (HCD Board Room) 12:30 p.m. Board of Directors	

Minutes Reviewed by: _		
	Signature	Date

### C. L. Brumback Primary Care Clinics

### **Board of Directors**

### **Attendance Tracking**

	01/24/24	02/28/24	03/27/24	04/24/24	05/22/24	06/26/24	07/24/24	08/28/24	09/25/24	10/23/24	11/20/24	12/18/24
Mike Smith	x											
Melissa Tascone	х											
Julia Bullard	х											
Joseph Gibbons	E											
Alcoyla St. Juste	X (Zoom)											
Robert Glass	х											
William (Bill) Johnson	х											
Boris Seymore	X (Zoom)											
Tammy Jackson- Moore	X (Zoom)											

X= Present

C= Cancel

E= Excused

A= Absent

Q= Quorum

### CL BRUMBACK PRIMARY CARE CLINICS BOARD OF DIRECTORS FEBRUARY 28, 2024

SA Digest upda
th Center Progr rning Series.
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Yes No [
Yes No [

### CL BRUMBACK PRIMARY CARE CLINICS BOARD OF DIRECTORS FEBRUARY 28, 2024

### 6. Recommendation:

Staff recommends the Board Receive and File the HRSA Digest.

Approved for Legal sufficiency:

DocuSigned by:

-0CF6F7DB67064**Bl**ernabe Icaz:

Bernabe Icasa

SVP & General Counsel

DocuSigned by:

Jesenia Montalno

-D31F5A902D3B4**J0**senia Montalvo Manager, Regulatory & Accreditation DocuSigned by:

andice abbott

F637D209DB52@mdice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

### Send Us Questions, Patient Safety Event, Population Health Learning Serielscribe to updates from HRSA

HRSA sent this bulletin at 02/13/2024 09:29 AM EST

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#### February 13, 2024



#### **Got Questions?**

Our upcoming Today with Macrae webcast is a Question-and-Answer session dedicated to getting you the information you need. Submit your questions by Tuesday, February 20, via the <a href="https://example.com/BPHC Contact Form">BPHC Contact Form</a> (General/Other HRSA > Today with Macrae: Health Center Program Updates). We'll do our best to answer as many questions as possible at the session.

Tuesday, February 27 3:00-4:00 p.m. ET loin the day of the session Join by phone: 833-568-8864 Webinar ID: 160 488 1173



## Cornerstones of Clinical Care: Empathy, Creativity, and Imagination as the Foundation for Effective Provider-Patient Communication

This year's Patient Safety Awareness Week program will explore how providers and staff can get to the heart of patient stories to improve clinical care and address disparities in provider-patient relationships. Guest speaker Jay Baruch, MD, is an emergency physician and award-winning author, lecturer, and medical educator. No matter your role, our presentation will provide tools and inspiration to rethink patient and family engagement. We are co-hosting this event with AHRQ, CDC, CMS, IHS, NIH, and the National Practitioner Data Bank.



Wednesday, March 13 2:00-4:00 p.m. ET Registration page

Submit questions in advance to Clinical RM Program@ecri.org

#### Population Health Management: A National Learning Series

More than a dozen HRSA-funded National Training and Technical Assistance Partners (NTTAPs) are collaborating on a webinar series throughout March. Each webinar will focus on strategies for developing, evaluating, and supporting effective health care delivery models. Coordinators will ensure that webinar materials are practical, enhancing skills directly related to the training recipients. Visit the <a href="Population Health Management Task Force's website">Population Health Management Task Force's website</a> for session details and registration.





Jump To: American Heart Month | Behavioral Health | Workforce | Training Calendar

HRSA-funded  $\underline{NTTAPs}$  host or developed many of these events and resources. For more from the  $\underline{NTTAPs}$ , visit the  $\underline{Health\ Center\ Resource\ Clearinghouse}$ .

#### What's New

Deadline Reminder: Service Area Competition — Additional Area Notice of Funding Opportunity for Las Vegas, Nevada, and Lordsburg, New Mexico

Fiscal year (FY) 2024 Service Area Competition — Additional Area (SAC-AA) applications for the Las Vegas, Nevada, and Lordsburg, New Mexico, (HRSA-24-104) service areas are due in:

- Grants gov: Tuesday, February 20, by 11:59 p.m. ET.
- HRSA's Electronic Handbooks (EHBs): Wednesday, March 20, by 5:00 p.m. ET.

Technical assistance (TA) materials are available on the <u>SAC-AA TA webpage</u>.

### FY 2023 School-Based Service Expansion NCC Progress Reporting Webinar

FY 2023 School-Based Service Expansion (SBSE) awardees are required to submit Non-Competing Continuation (NCC) progress reports by Friday, April 12. (This is the correct deadline. At time of publication, the deadline listed on the BPHC website is incorrect and we are working to update it.)

We are holding a TA webinar to help you prepare before the report becomes available in EHBs (Friday, March 1). We will be available, along with representatives from the School-Based Health Alliance, to answer questions and offer live TA.

Tuesday, February 27 1:00-2:00 p.m. ET Registration page

#### DUE THURSDAY: 2023 Uniform Data System Reports

All Health Center Program awardees and look-alikes are required to submit complete and accurate Uniform Data System (UDS) reports in two days (Thursday, February 15)



in two days (Thursday, February 15). No changes can be made to your UDS report after Sunday, March 31.

Visit the <u>UDS Training and TA website</u> for the <u>2023 UDS Manual</u> (PDF) and other resources. For additional assistance:

- UDS Help Desk: Assists with UDS measures and requirements.
   Call 866-837-4357 (866-UDS-HELP) or email
   udshelp330@bphcdata.net.
- BPHC Contact Form: Helps with completing UDS submissions.
  - For guidance on viewing UDS standard reports: Uniform Data System (UDS) > UDS Reporting > Accessing UDS Reports in EHBs
  - For technical issues with EHBs: Technical Support > EHBs Tasks/EHBs Technical Issues

#### Nuevos recursos en español

Editor's note: We follow this Spanish announcement with an English explanation.

- <u>Biblioteca de condiciones de acción progresiva</u> es la versión en español del <u>Progressive Action Conditions Library</u>. Este documento es una lista de condiciones que se aplican cuando un centro de salud no demuestra cumplimiento con los requisitos del Programa de los Centros de Salud. Por favor, compártala con cualquier persona que pueda beneficiarse de esta información.
- Glosario de términos en español del Programa de los Centros de Salud es una lista de términos comunes del Programa de los Centros de Salud en español. La intención de este recurso es promover la uniformidad y evitar malinterpretaciones de materiales en español publicados por la Officina de Cuidados Primarios de Salud o BPHC por sus siglas en inglés.

Comparta sus comentarios sobre estos recursos en español a través del formulario de contacto de la Oficina de Cuidados Primarios de Salud o BPHC por sus siglas en inglés (*Policy* > *Section 330 Changes*). Díganos si cree que estos recursos son útiles y qué otra información le gustaría ver traducida.

#### New Resources in Spanish

The announcement above introduces a Spanish translation of the <a href="Progressive Action Conditions Library">Progressive Action Conditions Library</a> and a Spanish glossary of common

#### **Training Calendar**



Visit our <u>online</u>
<u>calendar</u> for details on
these and all
scheduled events.

#### **Through February 20**

NURTURE: An Innovative Practice-Based Care Model: Addressing the Maternal and Infant Care Crisis

Wednesday, February 14 Noon-1:00 p.m. ET Registration page

\*\*1.0 CE available\*\*

Health Center MLP Planning, Implementation & Practice Webinar Series: Part 2: What Staff Do We Need to Meet the Need(s) We Identified and Accomplish Our Goals?

Hosted by the National Center for Medical Legal Partnership Thursday, February 15 1:00-2:30 p.m. ET Registration page

#### Leveraging Telehealth for Use in Tobacco and Nicotine Cessation

Hosted by the National Center for Health in Public Housing Monday, February 19 1:00-2:00 p.m. ET Registration page

Employee-Focused Career Pathways: Supporting the Full Scope of Talent in the Mental Health Workforce

Hosted by the Association of Clinicians for the Underserved's STAR<sup>2</sup> Center Tuesday, February 20 2:00-3:00 p.m. ET Registration page

#### Upcoming

### 2024 Western Forum for Migrant and Community Health

Posted by the Northwest Regional Primary Care Association Thursday, February 22, to Saturday, February 24 Seattle, Washington Registration page

#### Documentation, Coding, and Billing for Behavioral Health Integration in Community Health Series

Session 2: Thursday, February 22 1:30-2:00 p.m. ET Registration page

Session 3: Monday, February 26 1:00-1:30 p.m. ET Registration page

### \*\*0.5 CE available for each session \*\*

### Today with Macrae: Q&A Tuesday, February 27

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

Join the day of the session

Join by phone: 833-568-8864

Webinar ID: 160 488 1173

### Missed Opportunities for Preventing Congenital Syphilis

Co-hosted with CDC's National

Health Center Program terms. The latter promotes uniformity and avoids misinterpretation of our Spanish-language materials.

Share your thoughts (Are these resources helpful? What else should we translate?) via the BPHC Contact Form (Policy > Section 330 Changes).



#### New Health Center Program GeoCare Navigator

We introduced the <u>Health Center Program GeoCare Navigator</u> in <u>last week's Digest</u>. This mapping tool is tailored to Health Center Program needs and will replace the UDS Mapper. The UDS Mapper and related TA resources (on the <u>UDS Mapper Tutorials and Resources webpage</u>) II remain available through March.

#### New Research: Health Centers and Social Determinants of Health

Researchers found health centers that provided the most enabling services performed better on 90% of clinical quality process measures (e.g., cervical cancer screening, childhood immunization status). However, these health centers also saw more patients with uncontrolled high blood pressure and diabetes.

#### What are the implications for the Health Center Program?

Enabling services are intended to increase access to care and facilitate activities that are the first steps to achieving good health. While other socioeconomic and environmental factors contribute to final health outcomes, the study suggests that enabling services might help mitigate some effects of social determinants of health.

Read the published article and other articles about high-quality care in health centers in our Health Center Library.

### Call for Abstracts: Our 3rd Annual PCMH Health Equity TA Symposium

If you missed it, we published a <u>bulletin</u> yesterday inviting health center staff to submit abstracts for our 3rd annual Patient-Centered Medical Home (PCMH) Health Equity TA Symposium (Tuesday, July 16, and Wednesday, July 17). Abstracts are due by Tuesday, March 12.

#### TWO WEEKS LEFT: National Survey of FQHCs Closes February 28

If your health center has not yet participated in The Commonwealth Fund's (CWF) survey of FQHCs, you have just two weeks left. The deadline is Wednesday, February 28. CWF will share results with us, the National Association of Community Health Centers (NACHC), and federal and congressional policymakers. Read a previous Digest announcement for details on how to participate.

#### HRSA Funding Opportunity: Licensure Portability Grant Program

This recently released <u>funding opportunity</u> supports innovative multistate collaborations that will enable licensed health care professionals to provide physical health and behavioral health services through telehealth technology across states. Read the <u>bulletin</u> announcing the funding or join the TA webinar:

Wednesday, February 21 3:00-4:00 p.m. ET loin the day of the session

Applications are due by Monday, April 8.

### Provider Relief Fund Reporting Period 6

The Provider Relief Fund (PRF) Reporting Portal will remain open until 11:59 p.m. ET on Sunday, March 31. Providers who received one or more PRF (General or Targeted) and/or American Rescue Plan Rural payments exceeding \$10,000, in the aggregate, from July 1 to December 31, 2022, must report on their use of funds during Reporting Period 6 to comply with PRF Reporting Requirements (PDF). See resources and more information on the PRF Reporting webpage.

Center for HIV, Viral Hepatitis, STD, and TB Prevention Wednesday, February 28 Noon-1:00 p.m. ET Registration page

#### Population Health Management: A National Learning Series

Hosted by multiple NTTAPs Registration page for all sessions 2:00-3:00 p.m. ET on:

Foundations of Population Health Management in Priority Populations Wednesday, March 6

Housing and HIV: Bridging the Gap between HIV and Housing in Special and Vulnerable Populations Wednesday, March 13

Diabetes Prevention Through the Lens of Food Sovereignty and Access to Ancestral, Cultural, and Healthful Foods Wednesday, March 20

Team-Based Approaches for Managing Complex Health Needs Wednesday, March 27

#### 2024 Patient Safety Awareness Week: Cornerstones of Clinical Care: Empathy, Creativity, and Imagination as the Foundation for Effective Provider-Patient Communication

Co-hosted with AHRQ, CDC, CMS, IHS, NIH, and the National Practitioner Data Bank Wednesday, March 13 2:00-4:00 p.m. ET Registration page Submit questions in advance to Clinical RM Program@ecri.org

#### Million Hearts SMBP Forum

Co-hosted by NACHC and CDC (with CDC funding) Thursday, March 14 1:00-2:00 p.m. ET Registration page

Webinars are hosted by HRSA unless otherwise noted.

#### DUIIUI Day

National Donor Day (Wednesday, February 14) is a celebration of those who make a difference for others through organ donation. Join us in spreading love!



Encourage patients to visit <u>HRSA's site</u> to sign up to be donors and read <u>inspiring stories</u> of transplant recipients, living donors, and donor families. The site is also available in <u>Spanish</u>.

### DUE FRIDAY: Comments on HSV Addendum to STI National Strategic Plan

HHS invites stakeholders to comment on the <u>draft Herpes Simplex Virus</u> (HSV) Addendum (PDF) to the <u>STI National Strategic Plan</u> (PDF) by 5:00 p.m. ET this Friday, February 16. Submit all written comments electronically to <u>HSVPlan@hhs.gov</u>. STI stands for "sexually transmitted infections."

#### CMS launches Value-Based Care Spotlight Website

In value-based care (VBC), doctors and other health care providers work together to manage a person's overall health while considering the person's health goals. The "value" in VBC refers to what an individual values most.

The <u>CMS website</u> provides information for providers and the general public. It illustrates how VBC is a cornerstone of transforming health care. The VBC spotlight features patient and provider voices sharing real-world stories that show the meaningful impact of this approach.

#### **American Heart Month**

#### Improving Blood Pressure Management

Join the last two sessions of NACHC's "Controlling Hypertension Learning Series" to hear how high-performing health centers achieved success. Visit the registration page for dates, times, and topics.



NACHC also invites you to the next Million Hearts Self-Measured Blood Pressure Monitoring (SMBP) Forum to learn how this monitoring can improve hypertension management.

Thursday, March 14 1:00-2:00 p.m. ET Registration page

They co-host this forum with CDC (with CDC funding).

#### **Behavioral Health**

### Documentation, Coding, and Billing for Behavioral Health Integration in Community Health Series

Yesterday was the first in our three-session series, which offers \*\*0.5 CE\*\* for each half-hour session. The second session is on Thursday, February 22; visit the registration page for time and details.

During the third session, we will dive into evaluation and management (E/M) services. Speakers will cover:

- E/M documentation protocols
- Telehealth and virtual communication services
- Care management services
- Principal/chronic/transitional care management
- Behavioral health integration
- Psychiatric collaborative care model services

Monday, February 26 1:00-1:30 p.m. ET Registration page

#### Recording Available: Changes in Federal Regulation Regarding Medical Providers Prescribing Buprenorphine

At a webinar in January, speakers reviewed the latest updates in DATA Waiver and Drug Enforcement Agency training prerequisites for prescribing medications for opioid use disorder (MOUD), such as buprenorphine. If you missed it, watch the recording or access the slides on our behavioral health TA website.

#### APPLICATIONS DUE FRIDAY: NIH-funded SUD Sprint: Tackling the **Drug Crisis with Entrepreneurial Leadership**

NIH's National Institute on Drug Abuse (NIDA) funds an opportunity for innovators tackling substance use disorders (SUDs). This program is consistent with and advances the mission of NIDA in supporting the development of research ideas in SUD and does not encourage applications in the areas of alcohol use disorder and pain.

"Babson's SUD Sprint" is a hybrid customized program in entrepreneurship for innovators. Learn to validate the market opportunity, refine the value proposition, build a business model, pitch to potential investors, and network with SUD innovators and stakeholders. The program offers full scholarships for all participants, including roundtrip travel to the Babson College campus from August 18-23. Visit Babson's site to learn more or apply by this Friday, February 16. Questions? Contact Michele Bernier or Dr. Jess Lukacs.

#### Workforce

#### Recording Available: Fostering Leaders that Support Workforce Well-being and Retention

At our February 1 webinar, speakers discussed the driving factors that make great leaders and ways these leaders can build and grow a culture of well-being. Watch the recording on our workforce well-being TA website.

#### Family Planning and Reproductive Health for People Experiencing Homelessness Learning Collaborative

Join the National Health Care for the Homeless Council to learn about providing voluntary family planning services to people experiencing homelessness. These discussions will inform adapted clinical guidelines on reproductive health for this group. We encourage health centers to invite care team members across disciplines to attend sessions relevant to their work. Visit the application page for dates, times, and more information, and apply by Friday, February 23.

In case you missed it:

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### CL BRUMBACK PRIMARY CARE CLINICS BOARD OF DIRECTORS February 28, 2024

1.	<b>Description:</b>	District	Clinic	Holdings,	Inc.	Financial	Report	Decembe	er
	2023								

### 2. Summary:

The December 2023 Financial Statements for the District Clinic Holdings, Inc. are presented for Board review.

### 3. Substantive Analysis:

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

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

	Current FY	Total Amounts (Current + Future)	Budget
	Amounts	,	
Capital Requirements	N/A		Yes No
Net Operating Impact	N/A		Yes No

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:
Jessica Cafarelli
CA6A21FF2E <b>bossi</b> ca Cafarelli
Interim VP & Chief Financial Officer

### 5. Reviewed/Approved by Committee:

N/A	N/A
Committee Name	Date

### CL BRUMBACK PRIMARY CARE CLINICS BOARD OF DIRECTORS February 28, 2024

### 6. Recommendation:

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

Approved for Legal sufficiency:

-DocuSigned by:

Bernahe Icaza

OCF6F7DB67064Bernabe Icaza

SVP & General Counsel

-- DocuSigned by:

Jessica Cafarelli

CA6A21FF2E09481 Jessica Cafarelli

Interim VP & Chief Financial Officer

-DocuSigned by:

andice abbott

F637D209DB5242Indice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services



### **MEMO**

To: Finance Committee

From: Jessica Cafarelli

Interim VP, Chief Financial Officer

Date: February 28, 2024

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

Financial Statements.

The December financial statements represent the financial performance through the third month of the 2024 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, cash increased \$2.5M as a result of grant funds received, as well as other claims paid. Due from Other Governments decreased \$1.2M as a result of grant receipts.

On the Statement of Revenues and Expenses, net patient revenue YTD was favorable to budget by \$1.1M or 48.3% primarily due to increased patient visits. Increased patient visits also contributed to Gross patient revenue YTD being favorable to budget by \$867k. Total YTD revenues were favorable to budget by \$435k or 9.6%. Operational expenses before depreciation were favorable to budget by \$2.2M due to expense timing and staffing vacancies. Positive variances YTD were in salaries, wages, and benefits of \$1.3M, purchased services of \$280k, medical supplies \$171k, other supplies of \$113k, repair and maintenance of \$59k, lease and rental of \$193k, and other expense of \$91k. Total YTD net margin was a loss of (\$5.3M) compared to the budgeted loss of (\$9.0M) resulting in a favorable variance of \$3.7M or (40.8%).

Net patient revenue YTD for the Medical clinics was unfavorable to budget by \$(242k). The Medical clinics YTD gross patient revenue was favorable to budget by \$674k due to increased patient volumes. The Medical clinics total YTD revenue was unfavorable to budget by (\$772k) primarily due to a timing difference in grant revenue recognition. Total operating expenses of \$6.8M were favorable to budget of \$8.7M by \$1.9M or 21.8%. The positive variance is mostly due to salaries, wages, and benefits of \$1.1M, purchased services of \$279k, medical supplies of \$149k, other supplies of \$93k, repairs and maintenance of \$60k, lease and rental of \$170k, and other expense \$78k. Expense timing and staffing vacancies are driving these favorable YTD variances. Total YTD net margin was favorable to budget by \$2.0M or (26.6%).

Net patient revenue YTD for the Dental clinics was favorable to budget by \$1.2M. The Dental clinics total YTD gross patient revenue was favorable to budget by \$120k. Total YTD operating expenses of \$1.4M were favorable to budget by \$269k, staffing vacancies primarily accounted for this favorable variance. Total YTD net margin was favorable to budget by \$1.6M or (107.0%).

# District Clinic Holdings, Inc. Comparative Statement of Net Position

	December 31, 2023	November 30, 2023	Increase (Decrease)
Assets			
Cash and Cash Equivalents	\$ 20,872,247	\$ 18,394,761	\$ 2,477,486
Accounts Receivable, net	2,371,623	2,193,865	177,759
Due From Other Governments	2,279,774	3,460,676	(1,180,902)
Other Current Assets	268,533	272,447	(3,915)
Net Investment in Capital Assets	3,551,915	3,583,300	(31,385)
Right Of Use Assets	4,581,200	4,764,044	(182,844)
Total Assets	\$ 33,925,292	\$ 32,669,093	\$ 1,256,198
Liabilities			
Accounts Payable	302,849	402,941	(100,091)
Deferred Revenue-	-	510	(510)
Accrued Interest	21,934	21,412	522
Other Current Liabilities	2,454,680	2,530,813	(76,133)
Lease Liability	4,241,504	4,392,336	(150,832)
Non-Current Liabilities	1,105,037	1,079,156	25,880
Total Liabilities	8,126,004	8,427,167	(301,163)
Deferred Inflows of Resources			
Deferred Inflows	\$ 30,757	\$ 30,757	\$ 0
Net Position			
Net Investment in Capital Assets	3,551,915	3,583,300	(31,385)
Unrestricted	22,216,616	20,627,869	1,588,746
Total Net Position	25,768,531	24,211,170	1,557,361
Total Liabilities, Deferred Inflows of Resources and Net Position	\$ 33,925,292	\$ 32,669,093	\$ 1,256,198

Note: Amounts may not foot due to rounding.

			Current Month							Fisc	cal Year To Date			
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 2,552,091	\$ 2,401,994	\$ 150,097	6.2%	\$ 2,534,826	\$ 17,266	0.7%	Gross Patient Revenue	\$ 8,292,120	\$ 7,425,617	\$ 866,503	11.7%	\$ 7,130,463	\$ 1,161,657	16.3%
795,450	770,753	24,696	3.2%	797,366	(1,916)	(0.2%)	Contractual Allowance	2,795,847	2,381,272	414,575	17.4%	2,356,375	439,472	18.7%
917,542	1,005,508	(87,966)	(8.7%)	996,143	(78,602)	(7.9%)	Charity Care	2,999,187	3,110,509	(111,322)	(3.6%)	2,895,902	103,284	3.6%
347,137	214,991	132,147	61.5%	285,914	61,224	21.4%	Bad Debt	876,954	663,139	213,816	32.2%	688,931	188,023	27.3%
2,060,129	1,991,252	68,877	3.5%	2,079,423	(19,294)	(0.9%)	Total Contractuals and Bad Debt	6,671,988	6,154,919	517,069	8.4%	5,941,209	730,779	12.3%
543,247	309,531	233,716	75.5%	87,703	455,544	519.4%	Other Patient Revenue	1,685,436	958,025	727,411	75.9%	1,037,588	647,848	62.4%
1,035,210	720,273	314,936	43.7%	543,106	492,104	90.6%	Net Patient Service Revenue	3,305,568	2,228,723	1,076,846	48.3%	2,226,843	1,078,725	48.4%
40.56%	29.99%			21.43%			Collection %	39.86%	30.01%			31.23%		
428,700	732,059	(303,359)	(41.4%)	1,163,225	(734,525)	(63.1%)	Grants	1,637,516	2,265,893	(628,377)	(27.7%)	2,946,556	(1,309,040)	(44.4%)
· -	_	-		_	-	-	Interest Earnings	1,943	_	1,943	-	_	1,943	-
-	-	-	_	674,585	(674,585)	-	Other Financial Assistance	· -	_		_	738,416	(738,416)	-
13,368	10,695	2,673	25.0%	1,042	12,326	1,182.9%	Other Revenue	17,330	33,103	(15,773)	(47.6%)	31,155	(13,825)	(44.4%)
\$ 1,477,278	\$ 1,463,027	\$ 14,250	1.0%	\$ 2,381,957	\$ (904,679)	(38.0%)	Total Revenues	\$ 4,962,357	\$ 4,527,719	\$ 434,639	9.6%	\$ 5,942,971	\$ (980,613)	(16.5%)
							Direct Operating Expenses:							
1,998,118	2,173,165	175,047	8.1%	1,788,664	(209,454)	(11.7%)	Salaries and Wages	5,382,718	6,449,488	1,066,770	16.5%	4,904,958	(477,761)	(9.7%)
475,086	544,436	69,350	12.7%	406,022	(69,064)	(17.0%)	Benefits	1,390,883	1,625,577	234,694	14.4%	1,239,580	(151,303)	(12.2%)
27,633	117,137	89,504	76.4%	10,119	(17,514)	(173.1%)	Purchased Services	71,254	351,411	280,157	79.7%	84,363	13,109	15.5%
74,918	116,203	41,285	35.5%	141,439	66,521	47.0%	Medical Supplies	177,767	348,610	170,843	49.0%	407,755	229,988	56.4%
7,603	45,513	37,910	83.3%	10,233	2,630	25.7%	Other Supplies	23,281	136,539	113,258	82.9%	28,763	5,483	19.1%
125,019	68,151	(56,868)	(83.4%)	61,270	(63,749)	(104.0%)	Medical Services	265,091	204,453	(60,638)	(29.7%)	177,333	(87,758)	(49.5%)
41,892	57,362	15,470	27.0%	45,922	4,030	8.8%	Drugs	162,776	172,086	9,310	5.4%	132,738	(30,038)	(22.6%)
36,325	58,246	21,921	37.6%	47,732	11,407	23.9%	Repairs and Maintenance	115,388	174,738	59,350	34.0%	69,899	(45,489)	(65.1%)
(54,422)	153,520	207,942	135.4%	114,395	168,817	147.6%	Lease and Rental	267,373	460,559	193,185	41.9%	309,324	41,951	13.6%
5,510	14,618	9,108	62.3%	8,149	2,639	32.4%	Utilities	24,299	43,854	19,555	44.6%	25,469	1,170	4.6%
93,788	116,459	22,671	19.5%	262,113	168,325	64.2%	Other Expense	258,122	349,377	91,255	26.1%	451,830	193,708	42.9%
56,288	9,965	(46,322)	(464.8%)	-	(56,288)	-	Interest Expense	56,288	30,016	(26,272)	(87.5%)	-	(56,288)	_
4,947	6,528	1,580	24.2%	4,622	(325)	(7.0%)	Insurance	14,842	19,583	4,740	24.2%	15,398	556	3.6%
2,892,703	3,481,302	588,599	16.9%	2,900,679	7,976	0.3%	Total Operating Expenses	8,210,081	10,366,290	2,156,209	20.8%	7,847,410	(362,671)	(4.6%)
\$ (1,415,425)	\$ (2,018,275)	\$ 602,850	(29.9%)	\$ (518,722)	\$ (896,704)	172.9%	Net Performance before Depreciation & Overhead Allocations	\$ (3,247,723)	\$ (5,838,572)	\$ 2,590,848	(44.4%)	\$ (1,904,440)	\$ (1,343,284)	70.5%
201,655	73,871	(127,784)	(173.0%)	26,045	(175,610)	(674.3%)	Depreciation	263,439	221,613	(41,826)	(18.9%)	76,968	(186,472)	(242.3%)
							Overhead Allocations:							
11,012	16,443	5,431	33.0%	9,397	(1,615)	(17.2%)	Risk Management	33,070	49,329	16,259	33.0%	28,371	(4,699)	(16.6%)
-	103,522	103,522	-	86,659	86,659	-	Revenue Cycle	156,377	310,566	154,189	49.6%	253,846	97,469	38.4%
3,008	3,182	174	5.5%	1,779	(1,229)	(69.1%)	Internal Audit	9,639	9,546	(93)	(1.0%)	6,202	(3,437)	(55.4%)
-	28,133	28,133	-	32,824	32,824	-	Home Office Facilities	51,540	84,399	32,859	38.9%	95,137	43,597	45.8%
12,453	14,511	2,058	14.2%	49,005	36,552	74.6%	Administration	33,523	43,533	10,010	23.0%	144,053	110,530	76.7%
134,987	99,173	(35,814)	(36.1%)	80,652	(54,335)	(67.4%)	Human Resources	288,586	297,519	8,933	3.0%	252,922	(35,664)	(14.1%)
22,316	38,033	15,717	41.3%	12,360	(9,956)	(80.6%)	Legal	69,158	114,099	44,941	39.4%	28,571	(40,587)	(142.1%)
3,789	4,523	734	16.2%	3,073	(716)	(23.3%)	Records	10,965	13,569	2,604	19.2%	10,205	(760)	(7.4%)
14,607	8,915	(5,692)	(63.8%)	6,675	(7,932)	(118.8%)	Compliance	40,096	26,745	(13,351)	(49.9%)	19,670	(20,426)	(103.8%)
5,820	58,201	52,381	90.0%	42,594	36,774	86.3%	IT Operations	96,379	174,603	78,224	44.8%	122,394	26,015	21.3%
11,257	19,491	8,234	42.2%	16,176	4,919	30.4%	IT Security	39,032	58,473	19,441	33.2%	47,849	8,817	18.4%
38,236	39,351	1,115	2.8%	27,494	(10,742)	(39.1%)	Finance	107,231	118,053	10,822	9.2%	71,317	(35,914)	(50.4%)
11,791	20,025	8,234	41.1%	10,833	(958)	(8.8%)	Corporate Communications	45,231	60,075	14,844	24.7%	30,667	(14,564)	(47.5%)
20,994	19,300	(1,694)	(8.8%)	13,078	(7,916)	(60.5%)	Information Technology	63,865	57,900	(5,965)	(10.3%)	34,888	(28,977)	(83.1%)
20,004	13,000	(1,004)	(0.070)	10,010	(1,010)	(30.570)	22	00,000	37,300	(5,505)	(10.070)	0-1,000	(20,511)	(50.170)

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### Primary Care Clinics Statement of Revenues and Expenses for The Third Month Ended December 31, 2023

		С	urrent Month							Fisc	al Year To Date	•		
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
-	242,579	242,579	-	162,379	162,379	-	IT Applications	177,308	727,737	550,429	75.6%	522,954	345,646	66.1%
35,825	45,852	10,027	21.9%	25,841	(9,984)	(38.6%)	IT Service Center	108,113	137,556	29,443	21.4%	79,862	(28,251)	(35.4%)
15,136	20,701	5,565	26.9%	12,071	(3,065)	(25.4%)	Performance Excellence	49,718	62,103	12,385	19.9%	30,856	(18,862)	(61.1%)
17,059	13,780	(3,279)	(23.8%)	7,766	(9,293)	(119.7%)	Corporate Quality	41,727	41,340	(387)	(0.9%)	23,468	(18,259)	(77.8%)
39,430	55,383	15,953	28.8%	42,649	3,219	7.5%	Security Services	112,609	166,149	53,540	32.2%	120,919	8,310	6.9%
17,733	21,357	3,624	17.0%	6,385	(11,348)	(177.7%)	Supply Chain	55,136	64,071	8,935	13.9%	17,992	(37,144)	(206.4%)
15,225	12,286	(2,939)	(23.9%)	19,536	4,311	22.1%	HIM Department	40,693	36,858	(3,835)	(10.4%)	47,713	7,020	14.7%
22,685	20,831	(1,854)	(8.9%)	24,947	2,262	9.1%	Coding	66,604	62,493	(4,111)	(6.6%)	59,368	(7,236)	(12.2%)
2,220	2,394	174	7.3%	4,032	1,812	44.9%	Reimbursement	6,574	7,182	608	8.5%	8,185	1,611	19.7%
7,201	29,523	22,322	75.6%	-	(7,201)	-	Clinical Labor Pool	11,831	88,570	76,739	86.6%	-	(11,831)	
15,230	22,557	7,327	32.5%	-	(15,230)	-	District Nursing Admin	45,615	67,670	22,055	32.6%	-	(45,615)	-
13,665	10,674	(2,991)	(28.0%)	-	(13,665)	-	District Operations Admin	32,031	32,021	(10)	-	-	(32,031)	
5,253	4,779	(474)	(9.9%)	-	(5,253)	-	Mail Room	13,411	14,336	924	6.4%	-	(13,411)	
496,932	975,498	478,566	49.1%	698,205	201,273	28.8%	Total Overhead Allocations-	1,806,061	2,926,495	1,120,434	38.3%	2,057,409	251,348	12.2%
3,591,290	4,530,672	939,381	20.7%	3,624,929	33,639	0.9%	Total Expenses	10,279,581	13,514,398	3,234,817	23.9%	9,981,787	(297,794)	(3.0%)
\$ (2,114,013)	\$ (3,067,644)	\$ 953,632	(31.1%)	\$ (1,242,972)	\$ (871,041)	70.1%	Net Margin	\$ (5,317,224)	\$ (8,986,679)	\$ 3,669,455	(40.8%)	\$ (4,038,817)	\$ (1,278,407)	31.7%
	-	-	-	53,251	53,251		Capital		-	-	-	90,033	90,033	
79,780	252,458	(172,678)	(68.4%)	-	79,780		Capital Contributions.	284,630	757,374	(472,744)	(62.4%)	-	284,630	
-	-	-	-	\$ 4,128,850	\$ 4,128,850	-	Transfer In/(Out)		\$ 9,250,000	\$ (9,250,000)	-	\$ 4,128,850	\$ 4,128,850	-

### nics Statement of Revenues and Expenses by Month

	Oct-23	Nov-23	Dec-23	Year to Date
Gross Patient Revenue	\$ 3,208,530	\$ 2,531,499	\$ 2,552,091	\$ 8,292,120
Contractual Allowance	1,059,426	940,971	795,450	2,795,847
Charity Care	1,188,343	893,302	917,542	2,999,187
Bad Debt	325,374	204,443	347,137	876,954
Total Contractuals and Bad Debt	2,573,143	2,038,717	2,060,129	6,671,988
Other Patient Revenue	566,684	575,505	543,247	1,685,436
Net Patient Service Revenue	1,202,071	1,068,287	1,035,210	3,305,568
Collection %	37.46%	42.20%	40.56%	39.86%
Non-Operating Revenues				
Grants	550,122	658,694	428,700	1,637,516
Interest Earnings	1,943	-	-	1,943
Other Revenue	1,437	2,526	13,368	17,330
Total Other Revenues	\$ 553,502	\$ 661,220	\$ 442,068	\$ 1,656,789
Total Non-Operating Revenues	\$ 1,755,573	\$ 1,729,507	\$ 1,477,278	\$ 4,962,357
Direct Operating Expenses:				
Salaries and Wages	1,872,309	1,512,292	1,998,118	5,382,718
Benefits	471,718	444,080	475,086	1,390,883
Purchased Services	3,780	39,841	27,633	71,254
Medical Supplies	31,086	71,763	74,918	177,767
Other Supplies	5,859	9,819	7,603	23,281
Medical Services	37,749	102,323	125,019	265,091
Drugs	74,182	46,702	41,892	162,776
Repairs and Maintenance	34,302	44,761	36,325	115,388

### linics Statement of Revenues and Expenses by Month

	Oct-23	Nov-23	Dec-23	Year to Date
Lease and Rental	191,910	129,886	(54,422)	267,373
Utilities	5,558	13,231	5,510	24,299
Other Expense	86,265	78,069	93,788	258,122
Interest Expense	-	-	56,288	56,288
Insurance	4,947	4,947	4,947	14,842
Total Operating Expenses	2,819,665	2,497,713	2,892,703	8,210,081
Net Performance before Depreciation & Overhead Allocations	\$ (1,064,092)	\$ (768,206)	\$ (1,415,425)	\$ (3,247,723)
Depreciation	30,892	30,892	201,655	263,439
Overhead Allocations:				
Risk Management	11,508	10,550	11,012	33,070
Revenue Cycle	81,046	75,330	-	156,377
Internal Audit	3,588	3,044	3,008	9,639
Home Office Facilities	26,450	25,091	-	51,540
Administration	2,283	18,787	12,453	33,523
Human Resources	85,592	68,007	134,987	288,586
Legal	22,394	24,447	22,316	69,158
Records	3,633	3,542	3,789	10,965
Compliance	13,667	11,822	14,607	40,096
IT Operations	42,187	48,371	5,820	96,379
IT Security	11,440	16,335	11,257	39,032
Finance	34,202	34,793	38,236	107,231
Corporate Communications	18,203	15,236	11,791	45,231
Information Technology	24,790	18,081	20,994	63,865

### linics Statement of Revenues and Expenses by Month

	Oct-23	Nov-23	Dec-23	Year to Date
IT Applications	111,456	65,852	-	177,308
IT Service Center	41,803	30,484	35,825	108,113
Performance Excellence	24,133	10,449	15,136	49,718
Corporate Quality	13,253	11,415	17,059	41,727
Security Services	40,055	33,123	39,430	112,609
Supply Chain	20,666	16,737	17,733	55,136
HIM Department	13,556	11,912	15,225	40,693
Coding	25,327	18,592	22,685	66,604
Reimbursement	1,908	2,445	2,220	6,574
Clinical Labor Pool	2,245	2,386	7,201	11,831
District Nursing Admin	20,342	10,043	15,230	45,615
District Operations Admin	11,946	6,420	13,665	32,031
Mail Room	3,893	4,266	5,253	13,411
Total Overhead Allocations	711,568	597,561	496,932	1,806,061
Total Expenses	3,562,125	3,126,166	3,591,290	10,279,581
Net Margin	\$ (1,806,552)	\$ (1,396,660)	\$ (2,114,013)	\$ (5,317,224)
Capital Contributions.	204,850	-	79,780	284,630

	Clinic Administration	Belle Glade Medical Clinic	Delray Medical Clinic	Lantana Medical Clinic	Mangonia Park Medical Clinic	West Palm Beach Medical Clinic	Jupiter Medical Clinic	Lake Worth Medical Clinic	Lewis Center Medical Clinic	West Boca Medical Clinic	St Ann Place Medical Clinic	Mobile Warrior	Mobile Van Scout	Mobile Van Hero	Atlantis Medical Clinic	Port Medical Clinic	Total
Gross Patient Revenue	\$ 2,669	\$ 585,069	\$ 500,222	\$ 1,503,338	\$ 260,620	\$ 1,085,110	\$ 319,995	\$ 769,825	\$ 24,007	\$ 224,338	\$ 9,784	\$ 19,817	\$ 2,162	\$ 25,757	-	\$ 39,276	\$ 5,371,987
Contractual Allowance	1,914,038	94,152	57,708	65,784	29,561	174,577	45,736	120,269	3,253	40,742	141	(638)	922	5,396	_	(60)	2,551,581
Charity Care	47,575	164,671	165,826	521,923		372,410	127,086	296,670		67,522			285	3,485		27,402	1,870,302
Bad Debt	229	42,300	56,353	124,096		82,481	30,081	65,067		9,932			29	3,410		693	515,266
Total Contractual Allowances and Bad Debt	1,961,841	301,123	279,886	711,803	174,992	629,468	202,903	482,006	12,311	118,197	4,538	16,518	1,236	12,291	-	28,036	4,937,150
Other Patient Revenue	-	115,625	72,491	281,028	42,077	235,517	75,266	180,024	17,848	83,437	2,479	9,439	586	1,757	10,301	820	1,128,694
Net Patient Revenue Collection %	(1,959,172) (73,402.26%)	<b>399,571</b> 68.29%	<b>292,826</b> 58.54%	<b>1,072,563</b> 71.35%	<b>127,706</b> 49.00%	<b>691,158</b> 63.69%	<b>192,358</b> 60.11%	<b>467,843</b> 60.77%		<b>189,578</b> 84.51%		<b>12,739</b> 64.28%	<b>1,511</b> 69.90%	<b>15,223</b> 59.10%		<b>12,060</b> 30.71%	<b>1,563,532</b> 29.11%
Grants	193,095	122,778	115,015	208,475	146,043	202,157	78,982	167,228	736	68,070	10,577	13,836		14,025			1,341,016
Interest Earnings	1,943		-	-	-		-	-		-			-	-	-		1,943
Other Revenue	14,804	1,451	-		-	-			-							•	16,255
Total Other Revenues	209,842	124,229	115,015	208,475	146,043	202,157	78,982	167,228	736	68,070	10,577	13,836	-	14,025	-	-	1,359,214
Total Revenues	\$ (1,749,330)	\$ 523,799	\$ 407,841	\$ 1,281,038	\$ 273,749	\$ 893,315	\$ 271,340	\$ 635,071	\$ 30,279	\$ 257,648	\$ 18,301	\$ 26,575	\$ 1,511	\$ 29,248	\$ 10,301	\$ 12,060	\$ 2,922,745
Direct Operational Expenses:																	
Salaries and Wages	879,367	333,652	336,112	717,036		632,629	234,810			194,177		47,033	-	40,443		-	4,390,129
Benefits	252,637	83,713	90,358	180,894	128,079	129,849	57,546	125,099		42,760		16,855	-	11,749	-	-	1,134,161
Purchased Services	21,088	2,603	6,087	1,847	8,223	2,213	4,523	166		5,186		-	-	-	-	-	54,393
Medical Supplies	-	12,823	18,036	24,795	28,173	20,724	2,010	10,645		3,280			-	612		-	122,585
Other Supplies Medical Services	1,360	889 36,490	3,884 22,253	2,440 33,476		(92) 42,762	2,457 40,344	1,368 59,160		1,665 14,516			220	245	-	-	19,129 265,091
Drugs	-	11,919	56,911	35,202		33,159	40,344	59,100	1,307	14,510	430	-	-	-	-	-	162,776
Repairs and Maintenance	80,298	1,502	4,153	1,243		2,463	1,380	3,832	1,003	1,614	305	1,875	5,261	305			107,191
Lease and Rental	,	22,475	43,245	41,935		37,733	40	27,375		12.245			5	20			192,192
Utilities		6,493	759	390		390	3,963	2,142		1,179			-		-		17,848
Other Expense	34,038	58,055	10,718	13,430		33,830	12,315			5,825			69	402	-	-	234,599
Interest Expense	1,022	-	19,553	-	9,002	-	3,878	5,194		9,880	-	-	-	-	-	-	48,529
Insurance		1,599	780	2,018	201	1,700	448	1,197	128	346	-	2,113	2,038	2,137			14,706
Total Operating Expenses	1,269,810	572,214	612,849	1,054,705	651,967	937,359	363,714	794,457	13,032	292,673	65,525	71,516	7,594	55,913	-	-	6,763,328
Net Performance before Depreciation & Overhead Allocations	(3,019,140)	(48,415)	(205,008)	226,333	(378,219)	(44,044)	(92,374)	(159,387)	17,247	(35,025)	(47,224)	(44,942)	(6,083)	(26,665)	10,301	12,060	(3,840,583)
Depreciation	1,302	23,038	8,439	3,266	5,504	4,868	388	1,059	-	2,119	-	-	3,471	20,882	-	-	74,336
Overhead Allocations:																	
Risk Management	27,593	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	27,593
Revenue Cycle	116,226	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	116,226
Internal Audit	8,043	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	8,043
Home Office Facilities	40,262	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	40,262
Administration	27,971	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	27,971
Human Resources Legal	237,351 57,704	-	-	-	-	-	-	-	-	-	_	-	-	-	-	-	237,351 57,704
Records	9,149			_													9,149
Compliance	33,456													-			33,456
IT Operations	80,417	-											-	-	-		80,417
IT Security	32,568	-	-	-	-	-	-	-	-		-	-	-	-	-	-	32,568
Finance	89,473	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	89,473
Corporate Communications	37,740	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	37,740
Information Technology	53,289	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	53,289
IT Applications	147,944	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	147,944
IT Service Center Performance Excellence	90,208 41,484	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	90,208 41,484
Corporate Quality	34,816	-	-	-		-	-	-		-	-	-	-	-	-	-	34,816
Security Services	75,072																75,072
Supply Chain	46,005													-			46,005
HIM Department	33,954	-											-	-	-		33,954
Coding	55,574	-	-	-		-	-	-		-	-	-	-	-			55,574
Reimbursement	5,485	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,485
Clinical Labor Pool	9,872	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9,872
District Nursing Admin	38,061	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	38,061
District Operations Admin	26,726	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	26,726
Mail Room	11,190	-	-	-	-	-	-		-		-		-	-	-	-	11,190
Total Overhead Allocations	1,467,634	-	-	-	-	-	-		-		_	-	-	-	-	-	1,467,634
Total Expenses	2,743,676	595,252	662,386	1,057,971	676,808	942,227	396,024	831,156	13,032	316,336	65,525	71,516	11,065	76,794			8,459,768
Net Margin	\$ (4,493,006)	\$ (71,453)	\$ (254,545)	\$ 223,068	\$ (403,059)	\$ (48,912)	\$ (124,684)	\$ (196,085)	\$ 17,247	\$ (58,688)	\$ (47,224)	\$ (44,942)	\$ (9,554)	\$ (47,547)	\$ 10,301	\$ 12,060	\$ (5,537,023)
Capital	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	
Transfer In/(Out)		-		-			2	.7			-		-			-	_

### Primary Care Medical Statement of Revenues and Expenses or The Third Month Ended December 31, 2023

		c	Current Month							Fisc	cal Year To Date	•		
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 1,621,438	\$ 1,517,783	\$ 103,655	6.8%	\$ 1,640,993	\$ (19,555)	(1.2%)	Gross Patient Revenue	\$ 5,371,987	\$ 4,697,909	\$ 674,078	14.3%	\$ 4,545,372	\$ 826,616	18.2%
825,918	434,316	391,602	90.2%	481,459	344,459	71.5%	Contractual Allowance	2,551,581	1,344,310	1,207,271	89.8%	1,409,353	1,142,228	81.0%
566,062	583,271	(17,209)	(3.0%)	577,425	(11,364)	(2.0%)	Charity Care	1,870,302	1,805,359	64,943	3.6%	1,622,204	248,098	15.3%
201,775	143,829	57,946	40.3%	189,530	12,244	6.5%	Bad Debt	515,266	445,185	70,081	15.7%	543,588	(28,321)	(5.2%)
1,593,754	1,161,416	432,338	37.2%	1,248,415	345,340	27.7%	Total Contractuals and Bad Debt	4,937,150	3,594,854	1,342,295	37.3%	3,575,144	1,362,005	38.1%
399,796	226,955	172,842	76.2%	67,714	332,082	490.4%	Other Patient Revenue	1,128,694	702,471	426,223	60.7%	736,989	391,705	53.1%
427,480	583,322	(155,841)	(26.7%)	460,293	(32,812)	(7.1%)	Net Patient Service Revenue	1,563,532	1,805,526	(241,994)	(13.4%)	1,707,216	(143,684)	(8.4%)
26.36%	38.43%	. , ,	, ,	28.05%	. , ,	. ,	Collection %	29.11%	38.43%	. , ,	, ,	37.56%	. , ,	` '
351,039	599,953	(248,914)	(41.5%)	984,475	(633,436)	(64.3%)	Grants	1,341,016	1,856,995	(515,979)	(27.8%)	2,479,692	(1,138,675)	(45.9%)
· -	-	-	-		-	-	Interest Earnings	1,943	_	1,943		_	1,943	
-	-	-	_	586,039	(586,039)	_	Other Financial Assistance	-	_	-		649,065	(649,065)	_
13,242	10,524	2,718	25.8%	782	12,461	1,593.5%	Other Revenue	16,255	32,574	(16,319)	(50.1%)	30,905	(14,650)	(47.4%)
\$ 791,762	\$ 1,193,799	\$ (402,037)	(33.7%)	\$ 2,031,588	\$ (1,239,826)	(61.0%)	Total Revenues	\$ 2,922,745	\$ 3,695,095	\$ (772,349)	(20.9%)	\$ 4,866,877	\$ (1,944,132)	(39.9%)
	, , , , , , ,	. ( . , ,	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. ( ) , - ,	<u> </u>			,,	. ( ),	, , ,	,,,,,,	. ( ,- , - ,	,
							Direct Operating Expenses:							
1,616,691	1,787,437	170,746	9.6%	1,472,805	(143,885)	(9.8%)	Salaries and Wages	4,390,129	5,304,733	914,604	17.2%	4,074,311	(315,818)	(7.8%)
389,123	443,735	54,613	12.3%	340,238	(48,885)	(14.4%)	Benefits	1,134,161	1,324,843	190,682	14.4%	1,037,107	(97,055)	(9.4%)
18,792	111,219	92,427	83.1%	3,850	(14,942)	(388.1%)	Purchased Services	54,393	333,657	279,264	83.7%	76,052	21,659	28.5%
63,643	90,537	26,894	29.7%	127,524	63,881	50.1%	Medical Supplies	122,585	271,612	149,027	54.9%	359,135	236,549	65.9%
6,624	37,540	30,916	82.4%	6,945	321	4.6%	Other Supplies	19,129	112,620	93,491	83.0%	24,810	5,681	22.9%
125,019	68,151	(56,868)	(83.4%)	61,270	(63,749)	(104.0%)	Medical Services	265,091	204,453	(60,638)	(29.7%)	177,333	(87,758)	(49.5%)
41,892	57,154	15,262	26.7%	44,911	3,019	6.7%	Drugs	162,776	171,462	8,686	5.1%	131,727	(31,049)	(23.6%)
35,244	55,755	20,511	36.8%	24,310	(10,934)	(45.0%)	Repairs and Maintenance	107,191	167,265	60,074	35.9%	40,332	(66,859)	(165.8%)
(65,960)	120,629	186,590	154.7%	91,822	157,783	171.8%	Lease and Rental	192,192	361,888	169,696	46.9%	241,547	49,356	20.4%
4,084	11,959	7,875	65.8%	6,553	2,469	37.7%	Utilities	17,848	35,877	18,029	50.3%	20,309	2,461	12.1%
86,644	104,091	17,447	16.8%	248,795	162,151	65.2%	Other Expense	234,599	312,273	77,674	24.9%	432,673	198,074	45.8%
48,529	9,965	(38,563)	(387.0%)	-	(48,529)		Interest Expense	48,529	30,016	(18,513)	(61.7%)	-	(48,529)	
4,902	6,479	1,577	24.3%	4,545	(357)	(7.9%)	Insurance	14,706	19,437	4,731	24.3%	15,166	461	3.0%
2,375,226	2,904,652	529,426	18.2%	2,433,568	58,342	2.4%	Total Operating Expenses	6,763,328	8,650,136	1,886,808	21.8%	6,630,501	(132,827)	(2.0%)
\$ (1,583,464)	\$ (1,710,853)	\$ 127,389	(7.4%)	\$ (401,980)	\$ (1,181,484)	293.9%	Net Performance before Depreciation &	\$ (3,840,583)	\$ (4,955,041)	\$ 1,114,459	(22.5%)	\$ (1,763,624)	\$ (2,076,959)	117.8%
. ( ), - ,	. ( , .,,	,	, ,	. ( . , ,	. (, - , - ,		Overhead Allocations	(-,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , ,	, , ,	, , , , , ,	. ( )	
179,248	69,165	(110,002)	(159.2%)	23,562	(1EE 606)	(660.00()	Depresiation	228,806	207,495	(21 211)	(10.20()	E0 E07	(169,209)	(283.9%)
179,246	09,105	(110,083)	(159.2%)	23,502	(155,686)	(660.8%)	Depreciation	220,000	207,495	(21,311)	(10.3%)	59,597	(169,209)	(203.9%)
							Overhead Allocations:							
9,188	13,720	4,532	33.0%	7,933	(1.255)	(15.8%)		27,593	41 160	13,567	33.0%	23,950	(2.642)	(15.2%)
9,100	76,942	76,942	33.0%	7,933	(1,255) 71,645	(15.6%)	Risk Management	116,226	41,160 230,826	114,600	49.6%	209,866	(3,643) 93,640	44.6%
						(67.10/)	Revenue Cycle							
2,510	2,655	145	5.5%	1,502	(1,008)	(67.1%)	Internal Audit Home Office Facilities	8,043	7,965	(78)	(1.0%) 38.9%	5,236	(2,807) 42,936	(53.6%)
10.001	21,977	21,977	14.00/	28,705	28,705	74.00/		40,262	65,931	25,669		83,198		51.6%
10,391	12,108	1,717	14.2%	41,370	30,979	74.9%	Administration	27,971	36,324	8,353	23.0%	121,609	93,638	77.0%
111,022	81,566	(29,456)	(36.1%)	68,880	(42,142)	(61.2%)	Human Resources	237,351	244,698	7,347	3.0%	216,006	(21,345)	(9.9%)
18,620	31,734	13,114	41.3%	10,434	(8,186)	(78.5%)	Legal	57,704	95,202	37,498	39.4%	24,119	(33,585)	(139.2%)
3,162	3,774	612	16.2%	2,594	(568)	(21.9%)	Records	9,149	11,322	2,173	19.2%	8,615	(534)	(6.2%)
12,188	7,439	(4,749)	(63.8%)	5,635	(6,553)	(116.3%)	Compliance	33,456	22,317	(11,139)	(49.9%)	16,605	(16,851)	(101.5%)
4,857	48,562	43,706	90.0%	35,958	31,102	86.5%	IT Operations	80,417	145,686	65,269	44.8%	103,324	22,907	22.2%
9,392	16,263	6,871	42.2%	13,656	4,264	31.2%	IT Security	32,568	48,789	16,221	33.2%	40,394	7,826	19.4%
31,904	32,834	930	2.8%	23,210	(8,694)	(37.5%)	Finance	89,473	98,502	9,029	9.2%	60,206	(29,267)	(48.6%)
9,839	16,709	6,870	41.1%	9,145	(694)	(7.6%)	Corporate Communications	37,740	50,127	12,387	24.7%	25,888	(11,852)	(45.8%)
17,517	16,104	(1,413)	(8.8%)	11,040	(6,477)	(58.7%)	Information Technology	53,289	48,312	(4,977)	(10.3%)	29,452	(23,837)	(80.9%)
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### Primary Care Medical Statement of Revenues and Expenses For The Third Month Ended December 31, 2023

		C	urrent Month					Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
-	202,405	202,405	-	137,080	137,080	-	IT Applications	147,944	607,215	459,271	75.6%	441,476	293,532	66.5%
29,892	38,258	8,366	21.9%	21,815	(8,077)	(37.0%)	IT Service Center	90,208	114,774	24,566	21.4%	67,419	(22,789)	(33.8%)
12,629	17,273	4,644	26.9%	10,190	(2,439)	(23.9%)	Performance Excellence	41,484	51,819	10,335	19.9%	26,048	(15,436)	(59.3%)
14,234	11,498	(2,736)	(23.8%)	6,556	(7,678)	(117.1%)	Corporate Quality	34,816	34,494	(322)	(0.9%)	19,812	(15,004)	(75.7%)
26,287	36,922	10,635	28.8%	35,203	8,916	25.3%	Security Services	75,072	110,766	35,694	32.2%	99,807	24,735	24.8%
14,796	17,820	3,024	17.0%	5,390	(9,406)	(174.5%)	Supply Chain	46,005	53,460	7,455	13.9%	15,189	(30,816)	(202.9%)
12,703	10,251	(2,452)	(23.9%)	16,492	3,789	23.0%	HIM Department	33,954	30,753	(3,201)	(10.4%)	40,279	6,325	15.7%
18,928	17,381	(1,547)	(8.9%)	21,060	2,132	10.1%	Coding	55,574	52,143	(3,431)	(6.6%)	50,118	(5,456)	(10.9%)
1,853	1,998	145	7.3%	3,404	1,551	45.6%	Reimbursement	5,485	5,994	509	8.5%	6,910	1,425	20.6%
6,008	24,634	18,626	75.6%	-	(6,008)	-	Clinical Labor Pool	9,872	73,902	64,030	86.6%	-	(9,872)	-
12,708	18,821	6,113	32.5%	-	(12,708)	-	District Nursing Admin	38,061	56,463	18,402	32.6%	-	(38,061)	
11,402	8,906	(2,496)	(28.0%)	-	(11,402)	-	District Operations Admin	26,726	26,718	(8)	-	-	(26,726)	-
4,383	3,987	(396)	(9.9%)	-	(4,383)	-	Mail Room	11,190	11,962	771	6.4%	-	(11,190)	-
406,412	792,541	386,129	48.7%	588,897	182,485	31.0%	Total Overhead Allocations-	1,467,634	2,377,624	909,989	38.3%	1,735,526	267,892	15.4%
2,960,886	3,766,358	805,472	21.4%	3,046,027	85,141	2.8%	Total Expenses	8,459,768	11,235,255	2,775,487	24.7%	8,425,624	(34,144)	(0.4%)
\$ (2,169,124)	\$ (2,572,559)	\$ 403,435	(15.7%)	\$ (1,014,439)	\$ (1,154,686)	113.8%	Net Margin	\$ (5,537,023)	\$ (7,540,160)	\$ 2,003,137	(26.6%)	\$ (3,558,747)	\$ (1,978,276)	55.6%
	-	-	-	14,685	14,685	<u>-</u>	Capital		-	-	-	38,566	38,566	<u>-</u>
79,780	198,183	(118,403)	(59.7%)	-	79,780		Capital Contributions.	233,418	594,549	(361,132)	(60.7%)	-	233,418	
-	-	-	-	\$ 3,542,921	\$ 3,542,921	-	Transfer In/(Out)	-	\$ 7,750,000	\$ (7,750,000)	-	\$ 3,542,921	\$ 3,542,921	-

	Dental Clinic Administration	Belle Glade Dental Clinic	Delray Dental Clinic	Lantana Dental Clinic	West Palm Beach Dental Clinic	Atlantis Dental Clinic	Port Dental Clinic	Total
Gross Patient Revenue	-	\$ 435,000	\$ 453,366	\$ 734,542	\$ 924,500		\$ 12,693	\$ 2,560,102
Contractual Allowance	-	50,826	13,799	26,738	87,165		-	178,528
Charity Care	-	148,058	196,844		406,144	-	12,805	1,047,998
Bad Debt Total Contractual Allowances and Bad Debt	-	24,410 223,295	63,265 273,909		84,475 577,783		(660) 12,145	260,896 1,487,422
Other Patient Revenue	-	111,464	99,890		198,174	_	117	552,292
Net Patient Revenue Collection %	-	<b>323,169</b> 74.29%	<b>279,348</b> 61.62%		<b>544,891</b> 58.94%	-	<b>665</b> 5.24%	<b>1,624,972</b> 63.47%
Grants	21,724	34,278	50,996	79,490	110,012	-	-	296,500
Other Revenue	1,075	-	-	-	-	-	-	1,075
Total Other Revenues	22,799	34,278	50,996	79,490	110,012	-	-	297,575
Total Revenues	\$ 22,799	\$ 357,447	\$ 330,344	\$ 556,389	\$ 654,903	-	\$ 665	\$ 1,922,547
Direct Operational Expenses:								
Salaries and Wages	116,028	108,763	114,887		415,478	-	-	992,589
Benefits	33,661	33,706	30,404		92,484	-	-	256,722
Purchased Services Medical Supplies	-	4,956 9,601	3,793 12,243		1,717 20.080	-	-	16,861 55,182
Other Supplies	75	395	1,788		708	_	_	4,152
Repairs and Maintenance		776	1,251		3,152	-	-	8,197
Lease and Rental	-	8,756	17,288		32,479	-	-	75,182
Utilities	-	2,615	391	390	390	2,665	-	6,451
Other Expense	3,570	2,343	5,103	6,564	5,943	-	-	23,522
Interest Expense Insurance	-	136	7,759	-	-			7,759 136
Total Operating Expenses	153,333	172,047	194,908	351,370	572,430	2,665	_	1,446,753
Net Performance before Depreciation &	(130,534)	185,400	135,436	205,019	82,473	(2,665)	665	475,795
Overhead Allocations	(===,== -,	,			,	(=,,		,
Depreciation	-	3,625	5,569	1,600	7,531	-	-	18,325
Overhead Allocations:	E 477							E 477
Risk Management	5,477 40,151	-	-	-	-	-	-	5,477 40,151
Revenue Cycle Internal Audit	1,596	-		-	-	-	-	1,596
Home Office Facilities	11,278				_	_	-	11,278
Administration	5,552	-	-	-	-	-	-	5,552
Human Resources	51,234	-	-	-	-	-	-	51,234
Legal	11,453	-	-	-	-	-	-	11,453
Records	1,816	-	-	-	-	-	-	1,816
Compliance	6,640	-	-	-	-	-	-	6,640
IT Operations IT Security	15,961 6,464	-	-	-	-	-	-	15,961 6,464
Finance	17,759				-	-		17,759
Corporate Communications	7,491	-	-		-			7,491
Information Technology	10,577	-	-	-	-	-	-	10,577
IT Applications	29,364	-	-	-	-	-	-	29,364
IT Service Center	17,905	-	-	-	-	-	-	17,905
Performance Excellence	8,234	-	-	-	-	-	-	8,234
Corporate Quality	6,910	-	-	-	-	-	-	6,910
Security Services Supply Chain	37,536 9,131	-	_	-	-	-	-	37,536 9,131
HIM Department	6,739				_			6,739
Coding	11,030	-	-		-			11,030
Reimbursement	1,089	-	-	-	-	-	-	1,089
Clinical Labor Pool	1,959	-	-	-	-	-	-	1,959
District Nursing Admin	7,554	-	-	-	-	-	-	7,554
District Operations Admin Mail Room	5,305 2,221	-	-	-	-	-	-	5,305 2,221
Total Overhead Allocations	338,427	-	-	-	-	-	-	338,427
Total Expenses	491,760	175,672	216,785	352,970	579,961	2,665		1,819,813
Net Margin	\$ (468,961)	\$ 181,775	\$ 113,558	\$ 203,419	\$ 74,942	\$ (2,665)	\$ 665	\$ 102,734
Capital	-	_	-	-		-	-	
Transfer In/(Out)		_	30 -					
			50					

### Primary Care Dental Statement of Revenues and Expenses For The Third Month Ended December 31, 2023

	Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 794,860	\$ 788,278	\$ 6,582	0.8%	\$ 780,129	\$ 14,731	1.9%	Gross Patient Revenue	\$ 2,560,102	\$ 2,439,908	\$ 120,194	4.9%	\$ 2,304,722	\$ 255,380	11.1%
(29,012)	290,326	(319,338)	(110.0%)	266,364	(295,376)	(110.9%)	Contractual Allowance	178,528	898,628	(720,100)	(80.1%)	821,734	(643,206)	(78.3%)
319,135	403,607	(84,472)	(20.9%)	394,854	(75,719)	(19.2%)	Charity Care	1,047,998	1,249,261	(201,263)	(16.1%)	1,219,728	(171,729)	(14.1%)
103,280	46,946	56,334	120.0%	61,781	41,500	67.2%	Bad Debt	260,896	145,306	115,590	79.5%	95,162	165,734	174.2%
393,403	740,879	(347,477)	(46.9%)	722,998	(329,596)	(45.6%)	Total Contractuals and Bad Debt	1,487,422	2,293,195	(805,773)	(35.1%)	2,136,624	(649,201)	(30.4%)
143,698	82,159	61,539	74.9%	23,009	120,689	524.5%	Other Patient Revenue	552,292	254,304	297,988	117.2%	297,137	255,155	85.9%
545,155	129,558	415,597	320.8%	80,139	465,016	580.3%	Net Patient Service Revenue	1,624,972	401,017	1,223,955	305.2%	465,235	1,159,737	249.3%
68.59%	16.44%			10.27%			Collection %	63.47%	16.44%			20.19%		
77,661	132,106	(54,445)	(41.2%)	178,750	(101,089)	(56.6%)	Grants	296,500	408,898	(112,398)	(27.5%)	466,864	(170,364)	(36.5%)
-	-	-	-	88,545	(88,545)	-	Other Financial Assistance	-	-	-	-	89,351	(89,351)	-
125	171	(46)	(26.9%)	260	(135)	(51.9%)	Other Revenue	1,075	529	546	103.2%	251	825	328.7%
\$ 622,941	\$ 261,835	\$ 361,106	137.9%	\$ 347,695	\$ 275,247	79.2%	Total Revenues	\$ 1,922,547	\$ 810,444	\$ 1,112,104	137.2%	\$ 1,021,701	\$ 900,846	88.2%
							Direct Operating Expenses:							
381,427	385,728	4,301	1.1%	315,859	(65,568)	(20.8%)	Salaries and Wages	992,589	1,144,755	152,166	13.3%	830,647	(161,942)	(19.5%)
85,963	100,701	14,738	14.6%	65,784	(20,179)	(30.7%)	Benefits	256,722	300,734	44,012	14.6%	202,474	(54,248)	(26.8%)
8,840	5,918	(2,922)	(49.4%)	6,269	(2,572)	(41.0%)	Purchased Services	16,861	17,754	893	5.0%	8,311	(8,550)	(102.9%)
11,275	25,666	14,391	56.1%	13,915	2,640	19.0%	Medical Supplies	55,182	76,998	21,816	28.3%	48,620	(6,562)	(13.5%)
979	7,973	6,994	87.7%	3,288	2,309	70.2%	Other Supplies	4,152	23,919	19,767	82.6%	3,953	(199)	(5.0%)
-	208	208	-	1,011	1,011	-	Drugs	-	624	624	-	1,011	1,011	-
1,081	2,491	1,410	56.6%	23,421	22,341	95.4%	Repairs and Maintenance	8,197	7,473	(724)	(9.7%)	29,567	21,370	72.3%
11,538	32,890	21,352	64.9%	22,572	11,034	48.9%	Lease and Rental	75,182	98,671	23,489	23.8%	67,777	(7,405)	(10.9%)
1,426	2,659	1,233	46.4%	1,597	171	10.7%	Utilities	6,451	7,977	1,526	19.1%	5,160	(1,291)	(25.0%)
7,144	12,368	5,224	42.2%	13,317	6,174	46.4%	Other Expense	23,522	37,104	13,582	36.6%	19,157	(4,365)	(22.8%)
7,759	-	(7,759)	-	-	(7,759)	-	Interest Expense	7,759	-	(7,759)	-	-	(7,759)	-
45	49	3	6.1%	77	32	41.6%	Insurance	136	146	9	6.2%	232	95	40.9%
517,477	576,650	59,174	10.3%	467,111	(50,366)	(10.8%)	Total Operating Expenses	1,446,753	1,716,154	269,402	15.7%	1,216,909	(229,844)	(18.9%)
\$ 105,465	\$ (314,815)	\$ 420,280	(133.5%)	\$ (119,416)	\$ 224,881	(188.3%)	Net Performance before Depreciation & Overhead Allocations	\$ 475,795	\$ (905,710)	\$ 1,381,505	(152.5%)	\$ (195,208)	\$ 671,002	(343.7%)
22,407	4,706	(17,701)	(376.1%)	2,483	(19,924)	(802.4%)	Depreciation	34,634	14,118	(20,516)	(145.3%)	17,371	(17,262)	(99.4%)
							Overhead Allocations:							
1,824	2,723	899	33.0%	1,464	(360)	(24.6%)	Risk Management	5,477	8,169	2,692	33.0%	4,421	(1,056)	(23.9%)
-	26,580	26,580	-	15,014	15,014	-	Revenue Cycle	40,151	79,740	39,589	49.6%	43,980	3,829	8.7%
498	527	29	5.5%	277	(221)	(79.8%)	Internal Audit	1,596	1,581	(15)	(0.9%)	966	(630)	(65.2%)
-	6,156	6,156	-	4,119	4,119	-	Home Office Facilities	11,278	18,468	7,190	38.9%	11,939	661	5.5%
2,062	2,403	341	14.2%	7,635	5,573	73.0%	Administration	5,552	7,209	1,657	23.0%	22,444	16,892	75.3%
23,965	17,607	(6,358)	(36.1%)	11,772	(12,193)	(103.6%)	Human Resources	51,234	52,821	1,587	3.0%	36,916	(14,318)	(38.8%)
3,696	6,299	2,603	41.3%	1,926	(1,770)	(91.9%)	Legal	11,453	18,897	7,444	39.4%	4,452	(7,001)	(157.3%)
628	749	121	16.2%	479	(149)	(31.1%)	Records	1,816	2,247	431	19.2%	1,590	(226)	(14.2%)
2,419	1,476	(943)	(63.9%)	1,040	(1,379)	(132.6%)	Compliance	6,640	4,428	(2,212)	(50.0%)	3,065	(3,575)	(116.6%)
964	9,639	8,675	90.0%	6,636	5,672	85.5%	IT Operations	15,961	28,917	12,956	44.8%	19,070	3,109	16.3%
1,864	3,228	1,364	42.3%	2,520	656	26.0%	IT Security	6,464	9,684	3,220	33.3%	7,455	991	13.3%
6,332	6,517	185	2.8%	4,284	(2,048)	(47.8%)	Finance	17,759	19,551	1,792	9.2%	11,111	(6,648)	(59.8%)
1,953	3,316	1,363	41.1%	1,688	(265)	(15.7%)	Corporate Communications	7,491	9,948	2,457	24.7%	4,779	(2,712)	(56.7%)
3,477	3,196	(281)	(8.8%)	2,038	(1,439)	(70.6%)	Information Technology	10,577	9,588	(989)	(10.3%)	5,436	(5,141)	(94.6%)
-	40,174	40,174	-	25,299	25,299	-	IT Applications	29,364	120,522	91,158	75.6%	81,478	52,114	64.0%
5,933	7,594	1,661	21.9%	4,026	(1,907)	(47.4%)	IT Service Center	17,905	22,782	4,877	21.4%	12,443	(5,462)	(43.9%)
							0.4							

### Primary Care Dental Statement of Revenues and Expenses For The Third Month Ended December 31, 2023

Current Month								Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
2,507	3,428	921	26.9%	1,881	(626)	(33.3%)	Performance Excellence	8,234	10,284	2,050	19.9%	4,808	(3,426)	(71.3%)
2,825	2,282	(543)	(23.8%)	1,210	(1,615)	(133.5%)	Corporate Quality	6,910	6,846	(64)	(0.9%)	3,656	(3,254)	(89.0%)
13,143	18,461	5,318	28.8%	7,446	(5,697)	(76.5%)	Security Services	37,536	55,383	17,847	32.2%	21,112	(16,424)	(77.8%)
2,937	3,537	600	17.0%	995	(1,942)	(195.2%)	Supply Chain	9,131	10,611	1,480	13.9%	2,803	(6,328)	(225.8%)
2,521	2,035	(486)	(23.9%)	3,044	523	17.2%	HIM Department	6,739	6,105	(634)	(10.4%)	7,434	695	9.3%
3,757	3,450	(307)	(8.9%)	3,887	130	3.3%	Coding	11,030	10,350	(680)	(6.6%)	9,250	(1,780)	(19.2%)
368	396	28	7.1%	628	260	41.4%	Reimbursement	1,089	1,188	99	8.3%	1,275	186	14.6%
1,193	4,889	3,697	75.6%	-	(1,193)	-	Clinical Labor Pool	1,959	14,668	12,709	86.6%	-	(1,959)	-
2,522	3,736	1,213	32.5%	-	(2,522)	-	District Nursing Admin	7,554	11,207	3,652	32.6%	-	(7,554)	-
2,263	1,768	(495)	(28.0%)	-	(2,263)	-	District Operations Admin	5,305	5,303	(2)	-	-	(5,305)	-
870	791	(78)	(9.9%)	-	(870)	-	Mail Room	2,221	2,374	153	6.4%	-	(2,221)	-
90,520	182,957	92,437	50.5%	109,308	18,788	17.2%	Total Overhead Allocations-	338,427	548,871	210,444	38.3%	321,883	(16,544)	(5.1%)
630,404	764,314	133,909	17.5%	578,902	(51,502)	(8.9%)	Total Expenses	1,819,813	2,279,143	459,330	20.2%	1,556,163	(263,650)	(16.9%)
\$ (7,463)	\$ (502,478)	\$ 495,016	(98.5%)	\$ (231,207)	\$ 223,744	(96.8%)	Net Margin	\$ 102,734	\$ (1,468,700)	\$ 1,571,434	(107.0%)	\$ (534,462)	\$ 637,196	(119.2%)
_	-	-	-	38,566	38,566		Capital		-	-	-	51,467	51,467	-
-	54,275	(54,275)		-	-	-	Capital Contributions.	51,213	162,825	(111,613)	(68.5%)	-	51,213	-
	-	_	_	\$ 585,929	\$ 585,929	_	Transfer In/(Out)		\$ 1,500,000	\$ (1,500,000)	_	\$ 585,929	\$ 585,929	-

	Belle Glade Behavioral Health	St Ann Place Behavioral Health	Delray Behavioral Health	Lantana Behavioral Health	Mangonia Park Behavioral Health	West Palm Beach Behavioral Health	Lewis Center Behavioral Health	Total
Gross Patient Revenue	-	-	\$78,850	\$16,471	\$248,495	\$16,214	-	\$360,031
Contractual Allowance Charity Care	-	-	5,061 18,402	519 5,413		518 4,552	(25) 111	65,738 80,886
Bad Debt Total Contractual Allowances and Bad Debt	1 1	(9) (9)	9,960 33,423	2,195 8,127		1,852 6,922	617 702	100,792 247,416
Other Patient Revenue	-	-	-	-	4,450	-	-	4,450
Net Patient Revenue Collection %	(1)	9	<b>45,427</b> 57.61%	<b>8,344</b> 50.66%		<b>9,292</b> 57.31%	(702) -	<b>117,065</b> 32.52%
Ad Valorem Taxes Intergovernmental Revenue Grants			-	- - -		-	- - -	-
Interest Earnings Unrealized Gain/(Loss) On Investments Other Financial Assistance Other Revenue	- - -	- - -	- - -	- - -	- - -	- - -	- - -	- - -
Total Other Revenues	-			-	-	-	- -	
Total Revenues	\$ (1)	\$ 9	\$ 45,427	\$ 8,344	\$ 54,695	\$ 9,292	\$ (702)	\$ 117,065
Direct Operational Expenses:								
Total Operating Expenses	-	-	-	-	-	-	-	-
Net Performance before Depreciation & Overhead Allocations	(1)	9	45,427	8,344	54,695	9,292	(702)	117,065
Depreciation	-	-	-	-	-	-	-	-
Overhead Allocations:								
Total Overhead Allocations		-			-	-	-	
Total Expenses	-	-		-	-	-	-	<u>-</u>
Net Margin	\$ (1)	\$ 9	\$ 45,427	\$ 8,344	\$ 54,695	\$ 9,292	\$ (702)	\$ 117,065
Capital	-	-	-	-	-	-	-	
General Fund Support/Transfer In	<u>.</u>			<u>.</u>	-	-	-	

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		С	urrent Month							Fisc	al Year To Date			
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 135,794	\$ 95,933	\$ 39,860	41.5%	\$ 113,704	\$ 22,089	19.4%	Gross Patient Revenue	\$ 360,031	\$ 287,800	\$ 72,231	25.1%	\$ 280,370	\$ 79,661	28.4%
(1,456)	46,111	(47,567)	(103.2%)	49,543	(50,999)	(102.9%)	Contractual Allowance	65,738	138,334	(72,596)	(52.5%)	125,288	(59,550)	(47.5%)
32,345	18,630	13,716	73.6%	23,864	8,481	35.5%	Charity Care	80,886	55,889	24,998	44.7%	53,971	26,915	49.9%
42,083	24,216	17,867	73.8%	34,603	7,480	21.6%	Bad Debt	100,792	72,648	28,144	38.7%	50,182	50,610	100.9%
72,972	88,957	(15,985)	(18.0%)	108,010	(35,038)	(32.4%)	Total Contractuals and Bad Debt	247,416	266,870	(19,454)	(7.3%)	229,441	17,975	7.8%
(247)	417	(664)	(159.2%)	(3,020)	2,773	(91.8%)	Other Patient Revenue	4,450	1,250	3,200	256.0%	3,463	987	28.5%
62,574	7,393	55,181	746.4%	2,674	59,900	2,240.1%	Net Patient Service Revenue	117,065	22,180	94,884	427.8%	54,392	62,673	115.2%
46.08%	7.71%			2.35%			Collection %	32.52%	7.71%			19.40%		
\$ 62,574	\$ 7,393	\$ 55,181	746.4%	\$ 2,674	\$ 59,900	2,240.1%	Total Revenues	\$ 117,065	\$ 22,180	\$ 94,884	427.8%	\$ 54,392	\$ 62,673	115.2%
							Direct Operating Expenses:							
-	-	-	-	-	-	-	Total Operating Expenses	•	=	•	-	-	-	
\$ 62,574	\$ 7,393	\$ 55,181	746.4%	\$ 2,674	\$ 59,900	2,240.1%	Net Performance before Depreciation & Overhead Allocations	\$ 117,065	\$ 22,180	\$ 94,884	427.8%	\$ 54,392	\$ 62,673	115.2%
	-	-		-	-		Total Expenses		-	-	•	-	-	
\$ 62,574	\$ 7,393	\$ 55,181	746.4%	\$ 2,674	\$ 59,900	2,240.1%	Net Margin	\$ 117,065	\$ 22,180	\$ 94,884	427.8%	\$ 54,392	\$ 62,673	115.2%



District Clinic Holdings, Inc.

Clinic Visits - Adults and Pediatrics	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Current Year Total	Current YTD Budget	%Var to Budget	Prior Ye Total
West Palm Beach	1,749	1,462	1,453	3011 24	100 24	William Z-4	Apr 24	may 24	30H 24	Jul 2-4	Hug 24	Jep 24	4,674	3,717	25.7%	
Delray	728	760	735										2,223	-	#DIV/0!	
antana	1,894	1,716	1,658										5,268	4,880	8.0%	
Belle Glade & Women's Health Care	821	756	792										2,369	2,253	5.1%	
Lewis Center	22	44	27										93	75	24.0%	
ake Worth & Women's Health Care	1,205	1,023	1,063										3,291	3,339	(1.4%)	
lupiter & Women's Health Care	599	555	497										1,651	1,368	20.7%	
West Boca & Women's Health Care	388	324	304										1,016	946	7.4%	
St Ann Place	15	11	14										40	45	(11.1%)	
Clb Mob 1 Warrior	30	18	-										48	-	#DIV/0!	
Clb Mob 2 Scout	-	-	_										-	-	#DIV/0!	
Clb Mob 3 Hero	5	32	24										61	116	(47.4%)	
Portable Medical	88	33	47										168	81	107.4%	
Mangonia Park	623	625	609										1,857	2,602	(28.6%)	2,6
Total Clinic Visits	8,167	7,359	7,233	-	-	-	-	-	-	-	-	-	22,759	19,422	17.2%	21,3
Dental Visits																
West Palm Beach Dental	1,292	985	896										3,173	2,902	9.3%	9,4
Delray Dental	533	481	541										1,555	1,496	3.9%	1,4
Lantana Dental	921	718	783										2,422	1,951	24.1%	
Belle Glade Dental	543	462	477										1,482	983	50.8%	9
Portable Dental	15	16	10										41	35	17.1%	
Total Dental Visits	3,304	2,662	2,707	-	-	-	-	-	-	-	-	-	8,673	7,367	17.7%	13,8
Total Medical and Dental Visits	11,471	10,021	9,940	-	-	-	-	-	-	-	-	-	31,432	26,789	17.3%	35,2
Mental Health Counselors (non-billable)																
West Palm Beach BH	96	156	192										444	458	(3.1%)	4
Delray BH	436	394	391										1,221	424	188.0%	4
Lantana BH	144	180	191										515	403	27.8%	4
Belle Glade BH	-	-	-										-	-	#DIV/0!	2
Mangonia Park BH	1,110	798	839										2,747	2,497	10.0%	2,4
Lewis Center BH	-	-	-										-	-	#DIV/0!	
Lake Worth BH	143	131	114										388	483	(19.7%)	4
Jupiter BH	-	-	-										-	37	(100.0%)	
St Ann Place BH	82	65	75										222	275	(19.3%)	
West Boca BH	33	17	25										75	105	(28.6%)	
Mobile Van		-	-										-	-	#DIV/0!	
Total Mental Health Screenings	2,044	1,741	1,827		-	-	-	-	-	-	-	-	5,612	4,682	19.9%	4,5
-		12	- 5	-	_	_	-		_	-	_	_	1	1		
GRAND TOTAL	13.515	11,762	11,767		_	_	_	_	_	_	_		37,044	31,471		39.7

### CL BRUMBACK PRIMARY CARE CLINICS BOARD OF DIRECTORS February 28, 2024

1. Description: Medical and Dental Sli
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### 2. Summary:

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

### 3. Substantive Analysis:

Jessica Cafarelli

5.

The sliding fee scale is updated to reflect the 2024 Federal Poverty Guidelines published by the Federal Register/Vol. 89, No. 11/ January 17, 2024. The guidelines in this 2024 notice reflect the 4.1percent price increase between calendar years 2023 and 2024. After this inflation adjustment, the guidelines are rounded and adjusted to standardize the differences between family sizes.

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

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes 🗌 No 🖂
Net Operating Impact	N/A		Yes 🗌 No 🖂

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

Reviewed for financial accuracy and compliance with purchasing procedure:

Interim VP & Chief Financial Officer	
Reviewed/Approved by Committee:	

### CL BRUMBACK PRIMARY CARE CLINICS **BOARD OF DIRECTORS** February 28, 2024

#### **Recommendation:** 6.

Staff recommends the Board approve the Medical and Dental Updated Sliding Fee Scale 2024.

Approved for Legal sufficiency:

DocuSigned by:

Bernabe Icaza

-ocf6f7DB670643Bemabe Icaza SVP & General Counsel

DocuSigned by:

annmarie Hankins

-B3AD994983544 Annmarie Hankins AVP, Revenue Cycle DocuSigned by:

andice abbott

F637D209DB52427andice Abbott SVP & Chief Operating Officer

Executive Director of FQHC Services

eligible entities to promote rural health care services outreach by improving and expanding the delivery of health care services to include new and enhanced services in rural areas, through community engagement and evidencebased or innovative, evidence-informed models. HRSA currently collects information about Care Coordination Program grants using an OMB-approved set of performance measures and seeks to revise that approved collection. The proposed changes to the information collection are a result of award recipient feedback and information gathered from the previously approved Care Coordination Program measures.

Need and Proposed Use of the Information: This program needs measures that will enable HRSA to provide aggregate program data required by Congress under the Government Performance and Results Act of 1993. These measures cover the principal topic areas of interest to HRSA, including: (1) access to care, (2) population demographics and social determinants of health, (3) care coordination and network infrastructure, (4) sustainability, (5) leadership and workforce, (6) electronic health record, (7) telehealth, (8) utilization, and (9) clinical measures/ improved outcomes. All measures will evaluate HRSA's progress toward achieving its goals.

The proposed changes include additional components under "Access to Care" and "Population Demographic" sections that seek information about

target population, counties served, direct services, and social determinants of health such as transportation barriers, housing, and food insecurity. Questions about Health Information Technology and Telehealth have been modified to reflect an updated telehealth definition and to improve understanding of how these important technologies are affecting HRSA award recipients. Sections previously titled "Care Coordination" and "Quality Improvement" were consolidated into one section titled "Care Coordination and Network Infrastructure" to improve clarity and ease of reporting for respondents. Part of the previous "Care Coordination" section was revised to include a section titled "Utilization" to improve clarity of instructions for related measures. Previously titled "Staffing" section was revised to "Leadership and Workforce Composition" to improve measure clarity and reduce overall burden for respondents by consolidating measures from previously separate "Staffing," "Quality Improvement," and "Care Coordination" sections. Revised National Quality Forum and Centers for Medicare & Medicaid Services measures were also included to allow uniform collection efforts throughout the Federal Office of Rural Health Policy.

The total number of measures has increased from 40 to 48 measures since the previous information collection request. Of the 48 measures, 11 measures are designated as "optional" or "complete as applicable." The

measures within Section 6: "Electronic Health Record" are noted as optional to grantees. In Section 9: "Clinical Measures/Improved Health Outcomes," grantees are only required to respond to Clinical Measure 1: Care Coordination. Grantees can choose to provide data for Clinical Measures 2–10 if applicable to their projects. The total number of responses has remained at 10 since the previous information collection request. The new Care Coordination Program grant cycle maintained the same number of award recipients and number of respondents.

Likely Respondents: The respondents would be recipients of the Rural Health Care Coordination Program grants.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

### TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Rural Health Care Coordination Program Performance Improvement Measures	10	1	10	3.5	35
Total	10	1	10	3.5	35

HRSA specifically requests comments on: (1) the necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information

technology to minimize the information collection burden.

#### Maria G. Button.

Director, Executive Secretariat. [FR Doc. 2024–00818 Filed 1–16–24; 8:45 am]

BILLING CODE 4165-15-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, 2024 unless an office administering a program using the guidelines specifies a different applicable date for that particular program.

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

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

For general questions about the poverty guidelines themselves, contact Kendall Swenson, Office of the Assistant Secretary for Planning and Evaluation, Room 404E.3, Humphrey Building, Department of Health and Human Services, Washington, DC 20201—telephone: (202) 695–2107—or visit http://aspe.hhs.gov/poverty/.

For general questions about the poverty guidelines themselves, visit http://aspe.hhs.gov/poverty/.

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

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

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 2024 notice reflect the 4.1 percent price increase between calendar years 2022 and 2023. 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-tovear 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 2024 guidelines are roughly equal to the poverty thresholds for calendar year 2023 which the Census Bureau expects to publish in final form in September 2024.

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.

2024 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA

Persons in family/ household	Poverty guideline
1	\$15,060
2	20,440
3	25,820
4	31,200
5	36,580
6	41,960
7	47,340
8	52,720

For families/households with more than 8 persons, add \$5,380 for each additional person.

2024 POVERTY GUIDELINES FOR ALASKA

Persons in family/ household	Poverty guideline
1	\$18,810 25,540 32,270 39,000 45,730 52,460 59,190 65,920

For families/households with more than 8 persons, add \$6,730 for each additional person.

2024 POVERTY GUIDELINES FOR HAWAII

Persons in family/ household	Poverty guideline
1	\$17,310 23,500 29,690 35,880 42,070 48,260 54,450 60,640

For families/households with more than 8 persons, add \$6,190 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-federallyfunded 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 twoperson units.)

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

Dated: January 11, 2024.

#### Xavier Becerra,

Secretary, Department of Health and Human Services.

[FR Doc. 2024-00796 Filed 1-16-24; 8:45 am] BILLING CODE 4150-05-P

### **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **National Institutes of Health**

**Interagency Coordinating Committee** on the Validation of Alternative **Methods Communities of Practice** Webinar on Implementing **Computational Approaches for** Regulatory Safety Assessments; Notice of Public Webinar; Registration Information

**AGENCY:** National Institutes of Health, HHS.

**ACTION:** Notice.

**SUMMARY:** The Interagency Coordinating Committee on the Validation of Alternative Methods (ICCVAM) announces the public webinar "Implementing Computational Approaches for Regulatory Safety Assessments." The webinar is organized on behalf of ICCVAM by the National Toxicology Program Interagency Center for the Evaluation of Alternative Toxicological Methods (NICEATM). Interested persons may participate via the web meeting platform. Time will be allotted for questions from the audience. Information about the webinar and registration are available at https:// ntp.niehs.nih.gov/go/commprac-2024. DATES:

Webinar: January 29, 2024, 10 a.m. to approximately 12 noon EST.

Registration for Webinar: January 10, 2024, until 12:00 noon EST January 29, 2024. Registration to view the webinar is required.

ADDRESSES: Webinar web page: https:// ntp.niehs.nih.gov/go/commprac-2024.

FOR FURTHER INFORMATION CONTACT: Dr. Helena Hogberg, Staff Scientist, NICEATM, email: helena.hogbergdurdock@nih.gov, telephone: (984) 287-

#### SUPPLEMENTARY INFORMATION:

Background: ICCVAM promotes the development and validation of toxicity testing methods that protect human health and the environment while replacing, reducing, or refining animal use. ICCVAM also provides guidance to test method developers and facilitates collaborations that promote the development of new test methods. To address these goals, ICCVAM will hold a Communities of Practice webinar on "Implementing Computational Approaches for Regulatory Safety Assessments."

Computational toxicology methods can be useful for generating bioactivity predictions for chemicals for which limited toxicity data are available. They can also help users understand and interpret large, diverse bioactivity data sets, or predict how a chemical might behave in the body. However, users with limited experience with such methods may find it difficult to use them or interpret their outputs, or even understand how the methods could be applied in a specific context.

This webinar will discuss how to establish confidence in computational approaches for regulatory applications. Ongoing activities and key insights will be described in three presentations by speakers from the U.S. government and the private sector focusing on applications of tools such as structurebased models to predict chemical

bioactivity and pharmacokinetic models to support understanding of chemical metabolism and disposition. The preliminary agenda and additional information about presentations will be posted at https://ntp.niehs.nih.gov/go/ commprac-2024 as they become available.

Webinar and Registration: This webinar is open to the public with time scheduled for questions by participants following each presentation. Registration for the webinar is required. Registration will open on or before January 10, 2024, and remain open through 12 noon EST on January 29, 2024. Registration is available at https:// ntp.niehs.nih.gov/go/commprac-2024. Interested individuals are encouraged to visit this web page to stay abreast of the most current webinar information. Registrants will receive instructions on how to access and participate in the webinar in the email confirming their registration. TTY users should contact the Federal TTY Relay Service at 800– 877–8339. Requests should be made at least five business days in advance of

Background Information on ICCVAM and NICEATM: ICCVAM is an interagency committee composed of representatives from 17 Federal regulatory and research agencies that require, use, generate, or disseminate toxicological and safety testing information. ICCVAM conducts technical evaluations of new, revised, and alternative safety testing methods and integrated testing strategies with regulatory applicability. ICCVAM also promotes the scientific validation and regulatory acceptance of testing methods that more accurately assess the safety and hazards of chemicals and products and replace, reduce, or refine animal use.

The ICCVAM Authorization Act of 2000 (42 U.S.C. 285*l*-3) establishes ICCVAM as a permanent interagency committee of the National Institute of Environmental Health Sciences and provides the authority for ICCVAM involvement in activities relevant to the development of alternative test methods. Additional information about ICCVAM can be found at https:// ntp.niehs.nih.gov/go/iccvam.

NICEATM administers ICCVAM, provides support for ICCVAM-related activities, and conducts and publishes analyses and evaluations of data from new, revised, and alternative testing approaches. NICEATM and ICCVAM work collaboratively to evaluate new and improved testing approaches applicable to the needs of U.S. Federal agencies. NICEATM and ICCVAM welcome the public nomination of new,



# C. L. Brumback Primary Care Clinic 2024 SLIDING FEE SCALE – DENTAL, MEDICAL, BEHAVIORAL HEALTH, & WOMEN'S HEALTH\*

Family <b>Size</b>	100%	101% to 150%	151% to 175%	176% to 200%	Over 200%
1	\$15,060.00	\$15,210.60- \$22,590.00	\$22,700.60- \$26,355.00	\$26,505.60 - \$30,120.00	\$30,270.60
2	\$20,440.00	\$20644.40 - \$30,660.00	\$30,864.40 - \$35,770.00	\$35,974.40 - \$40,880.00	\$41,084.40
3	\$25,820.00	\$26,078.20 - \$38,730.00	\$38,988.20 - \$45,185.00	\$45,443.20 - \$51,640.00	\$51,898.20
4	\$31,200.00	\$31,512.00 - \$46,800.00	\$47,112.00 - \$54,600.00	\$54,912.00 - \$62,400.00	\$62,712.00
5	\$36,580.00	\$36,945.80 - \$54,870.00	\$55,235.80 - \$64,015.00	\$764,380.80 - \$73,160.00	\$73,525.80
6	\$41,960.00	\$42,379.60 - \$62,940.00	\$63,359.60 - \$73,430.00	\$73,849.60 - \$83,920.00	\$84,339.60
7	\$47,340.00	\$47,813.40- \$71,010.00	\$71,483.40 - \$82,845.00	\$83,318.40 - \$94,680.00	\$95,153.40
8	\$52,720.00	\$53,247.20 - \$79,080.00	\$79,607.20 - \$92,260.00	\$92,787.20 - \$105,440.00	\$105,967.20

For families/households with more than 8 persons, add \$6,190 for each additional person

Federal Poverty Level	Medical: Behavioral Health & Women's Health Price	Dental Price
100% or below	\$20.00	\$30.00
Between 101% to 150%	\$40.00	\$50.00
Between 151% to 175%	\$60.00	\$70.00
Between 176% to 200%	\$80.00	\$90.00
Over 200%	No Discount	No Discount

Based on 2024 Federal Poverty Guidelines published in the Federal Register- January 17, 2024

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

### CL BRUMBACK PRIMARY CARE CLINICS BOARD OF DIRECTORS February 28, 2024

### 1. Description: Quality Report

### 2. Summary:

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

- Quality Council Meeting Minutes February 2024
- Provider Productivity Report January 2024

### 3. Substantive Analysis:

### PATIENT SAFETY & ADVERSE EVENTS

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

### PATIENT SATISFACTION AND GRIEVANCES

Patient relations to be presented as separate agenda item.

### **QUALITY ASSURANCE & IMPROVEMENT**

HIV Initiative: In 2023 we were awarded Ending the HIV Epidemic – Primary Care HIV Prevention grant from HRSA. This is a 3yr grant which is intended to expand HIV prevention, testing, and treatment services. We are in the first phase of our initiative which is focused on increasing our HIV screening. As part of our efforts, we are focusing our efforts on screening and implementing point of care (POC) testing in our clinics and training our providers on identifying high-risk patients in whom we should consider increased HIV screenings. We are also creating a process in our EHR to identify patients we have newly diagnosed as HIV positive and automate linkage to care and treatment in a timely fashion.

### <u>UTILIZATION OF HEALTH CENTER SERVICES</u>

Individual monthly provider productivity stratified by clinic.

## **CL BRUMBACK PRIMARY CARE CLINICS BOARD OF DIRECTORS February 28, 2024**

4.	Fiscal Analysis	& Economic 1	<b>Impact Statement</b>

Current FY Total Amounts Budget Amounts (Current + Future)							
Capital Requirements N/A Yes No							
Net Operating Impact N/A Yes No							
*Non-budgeted expenditures in exces  Reviewed for financial accuracy and	. , 1		w and Board approval.				

Net Operating Impact	N/A		Yes N
*Non-hydroted armonditures in average	of\$250,000 magazina Fina	man and Audit Committee marries	v and Daard ammoval
*Non-budgeted expenditures in excess			v and Board approvai.
Reviewed for financial accuracy and	compliance with purchas	ing procedure:	
DocuSigned by:			
Jessica Cafarelli CA6A21FF2EØ088ica Cafarelli			
Interim VP & Chief Financial Of	fficer		
Reviewed/Approved	by Committe	e:	
N/A		Ν	J/A
Committee Name			Date
Recommendation:			
C4 - C5	1	1-4- 1 O1'4 D	4
Staff recommends the Bo	ard approve the t	ipdated Quality Repo	rt.
10 7 1 00			
Approved for Legal sufficiency:			
DocuSigned by:			
Bernabe Icaza			
OCF6F7DB67064Bernabe Icaza  SVP & General Couns	el		
—DocuSigned by: Charmains Chibar		DocuSigned by:	П
		Candia abbe	**
2349071A9734993. Charmaine Chiba FQHC Medical Directo			Operating Officer
		Executive Direc	tor of FQHC Services



### Quality Council Meeting Minutes Date: February 14, 2023

Time: 11:30am-1:30pm

Attendees: Steven Sadiku – Director of Corporate Quality; Maria Chamberlin – Assistant Director of Nursing; Shauniel Brown – Senior Risk Manager; Carolina Foksinski- Operations Process Manager; Erik Lalani – Dental Operations Manager; Alexa Goodwin – Patient Relations Manager; Dr. Sandra Warren – Associate Medical Director; Dr. Charmaine Chibar – FQHC Medical Director; Angela Santos – Director of Ops; Dr. Josh Adametz – Dental Director; Jessica Ramirez; Marisol Miranda – Director of Clinic Operations; Ivonne Cohen – Business Intelligence Developer; Miriam Meza – Patient Access Coordinator, Valena Gibric – Medical Director District Cares; Lisa Hogans – Director of Nursing; Nancy Gonzalez – Dental Program Director; Irene Garcia; Candice Abbot – SVP & Chief Operating Officer;

**Excused:** Belma Andric – SVP & Chief Medical Officer; Dr. Ana Ferwerda – Director of Clinic EHR Optimization & Women's Health, Courtney Phillips – Director of Behavioral Health;

Minutes by: Steven Sadiku - Director of Corporate Quality

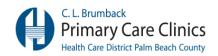
AGENDA ITEM	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSI	DATE
			BLE PARTY	
	PATIENT SAFETY & ADV	VERSE EVENTS		
OCCURRENCES	Per Compliance, discussion surrounding not recording			
	meetings.			
	Report Summary			
	The January 2024 Risk Management Tableau dashboard			
	was presented. Volumes were provided for the following			
	clinic areas and types: total reported events, incidents,			
	and good catches. Trends were also presented by volume			
	of reported entries and clinic location. The Risk Report			
	Summary and graphical data were reviewed with the			
	Committee for January 2024. Reports included the risk			
	severity - volume and category/type for incidents and			
	near misses entered in HCD's safety event reporting			
	system. Risk mitigation strategies were also shared with			
	the Committee.			
	( January 2024 Risk Report Summary presented with			
	graphs.)			



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OPERATIONS	Productivity					
		Producti	ivity Ja	nuary 202	4	
	Service Line	Targe	et	Seer	1	% of Goal
		In Person	Tele	In Person	Tele	Total
	Adult Care	6,146		5,411		88%
	Pediatrics	1,787		1,768		99%
	Primary Residents	766		744		97%
	Women's Health	706		629		89%
	Behavioral Health	720		637		88%
	Behavioral Health - Psych	435		309		71%
	Psych Residents	642		404		63%
	Substance Use	547		696		127%
	Dental	2,279		2,313		101%
	Dental Hygiene	748		677		91%
	Dental MDI	326		306		94%
	(Clinic product	tivity repo	rt with	graphs w	ere pre	sented.)
	<ul><li>Walk-I</li><li>Dental:</li><li>Schedu</li></ul>	uled: 7,824 ns: 2,061 uled: 2,706 ns: 590				

	No Show Rates No Show rate was 18% which is down 2% from previous month, of which 1% is from telehealth visits.			
	(Report with graph presented.)			
	Doximity Dialer Usage -January 2024			
	Users			
	<ul> <li>53 registered users (98.1% registration rate)</li> <li>20 active users (10 MD/DOs, 5 NP, PA, 5</li> </ul>			
	Care Team			
	Calls			
	142 total calls			
	o 99 voice calls			
	<ul> <li>89 successful calls (89.9%) success rate</li> </ul>			
	0 calls escalated to video			
	o 43 video calls			
	<ul><li>33 successful calls (76.7%) success</li></ul>			
	rate			
	<ul><li>2 secure text</li></ul>			
	(Report with breakdown by specialty and user)			
	PATIENT RELAT	TIONS		
GRIEVANCES,	Patient Relations Dashboard – January 2024	Discussion about bringing back ID that	Alexa/	
COMPLAINTS	For January 2024, there were a total of 11 Patient	has job's roles (RNs, APRN, MD,	Marisol	
& COMPLIMENTS	Relations Occurrences that occurred between 4 Clinics and	Dentist, etc) $\rightarrow$ to workgroup.		
COMPLIMENTS	Clinic Administration. Of the 11 occurrences, there was 4			
	Grievance and 7 Complaints. The top 3 categories were			
	Referrals, Physician Related and Communication related			
	issues. The top subcategories were Referral Authorization			

	and Poor Communication with 2 occurrences in each.	
	and Poor Communication with 2 occurrences in each.	
	There was also a total of 6 patient compliments and 2	
	employee to employee compliments (known as Thumbs-	
	Up) received across 3 Clinics and Clinic Administration.	
	(Patient Relations Report & Patient Relations Dashboard	
	with Graphs presented.)	
SURVEY	Patient Satisfaction Survey – January 2024	
RESULTS	For January 2024 there were 822 Patient Satisfaction	
	Surveys completed out of a total of 14,244 patient visits.	
	Steady increase from the previous month where we had	
	727 completed surveys. This is a 6% return rate out of the	
	total survey delivered for the month. West Palm Primary	
	had the highest return rate (135/1945). The top 5 and	
	lowest 5 scored-questions were presented for each area.	
	"Best Questions" for in person visits – January 2024:	
	Care and concern of our nurses/medical assistants	
	<ul><li>– 93% (increase by 2% from previous month)</li></ul>	
	Time taken to listen and answer your questions –	
	92% (new promoter)	
	<ul> <li>Quality of your medical care – 92% (decrease in</li> </ul>	
	1% from previous month)	
	Things explained in a way you could understand –	
	91% (decrease in 1% from previous month)	
	Instructions given regarding medication/follow-up	
	care - 91% (same as previous month)	
	"Worst Questions" for in person visits – January 2024:	
	<ul> <li>Your ability to contact us after hours - 10%</li> </ul>	
	(decrease by 1% from previous month)	
	Being informed about any delays during this visit –	
	8% (1% decrease from previous month)	



	<ul> <li>Waiting time in the reception area – 8% (new detractor)</li> <li>Each member of my care team identified themselves and their role in my care – 6%</li> </ul>		
	<ul> <li>(decrease by 3% from previous month)</li> <li>Waiting time in the exam room – 6% (new detractor)</li> </ul>		
	Of the surveys received for January, 42% of patients perceived wait time between 6 to 15 minutes, 36% of responses were from patients that this was their first visit to the practice, 23% was between 1 and 3 years. 72% of surveys completed were by females and most patients preferred to be seen on Monday, Tuesday and Wednesday mornings. 87% of responses in December were promoters, 9% of responses were neutrals and 4% of responses were detractors. This is a steady increase in promoters since January 2022.  Top promoters, detractors, and patient comments presented by clinic and service line. Clinic trends over time to be shared with Clinic Supervisors and Coordinators.  (Patient Satisfaction Survey PowerPoint presented.)		
OUTBOUND	Afterhours Report – Jan 2024		
CALL	In Jan 2024, the Clinic Service Center returned 220 after		
CAMPAIGNS	hours calls. This was a 23% increase from the previous month. We saw our highest volume in Medical related/ Appt request calls with 82% of the calls returned.		
	Our WPB Location remains at our highest volume clinics 28% of calls for Jan 24.		
	Outreach Call Campaigns		

The call center assisted the care coordination team with a Humana Medicaid Call Campaign in Jan 24. The list was received from the payer and included all patients assigned to our clinics that have either not been seen in 6 months OR have not established with one of our providers. The focus of this campaign was to assist the clinics in filling our lower volume clinics. The list included 206 unique Humana Medicaid patients. The CSC team successfully schedule 36 Appts or 17% of the patients on the list. (Outbound Campaign PowerPoint presented.)  IEXT THIRD VAILABLE  Primary Care VAILABLE Belle Glade – 10 days out Mobile school buses – 4 -14 days out Delray – 15 days out
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Mobile school buses – 4 -14 days out
Dolray, 15 days out
Dellay – 13 days out
Jupiter – 5 day out
Lake Worth – 14 days out
Lantana – 9 days out
Lewis – 45 days out
Mangonia – 1 days out
WPB – 15 days out
Womens Health
Belle Glade – 7 days out
Jupiter- 8 days out
LW – 4 days out
<u>BH</u>
Delray – 3 days out

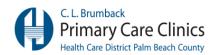


	Lantana – 1 days out  Mangonia – 5 days out  WPB – 3 days out  Dental  Belle Glade – 1 Day out  Delray – 35 days out  Lantana – 22 days out  West Palm Beach – 34 days out		
	QUALITY	1	
	QUALITY		
MEDICAL	Quality Measures are deferred to the following month as data is not available.		
DENTAL	Dental Sealants		
	N/A		
	<u>Limited Exams</u>		
	January 2024: 360 -Same Day Extractions: 156 (43%, n=360)		
	-Antibiotics Given: Patients without a future extraction		
	appointment type <b>117 (33%, n=360)</b>		
	-Ext. not needed(non-emergent): 58 (16%, n=360)		
	-Returns (Follow-Up): Patients with a future extraction		
	appointment type <b>29 (8%, n=360)</b> Returned within 31 days for out : <b>33 (76%, n=30)</b>		
	-Returned within 21 days for ext.: <b>22 (76%, n=29)</b>		



MDI/WHO		
January 2024		
Total Well Visit Pediatric Patient	:s: <b>269</b>	
<ul><li>Excluded from MDI KPI 9</li><li>Eligible MDI 172 (64%;</li></ul>		
Total Pediatrician KPI Patients (F	Pts who do not have a	
- No MDI 105 (61% n=172 - MDI 67 (39% n=172)	2)	
Total of patients who had MDI v	<u>risit:</u> <b>67</b>	
<ul><li>Declined WHO 39 (58%</li><li>Interested in WHO 28 (4</li></ul>		
Total Dentist KPI Patients (Pts. In	nterested in WHO): 28	
<ul><li>WHO not seen by Dentists</li><li>WHO seen by Dentists</li></ul>		
Dental Audit S	Gummary	
Dental Clinical Audit	– January 2023	
Belle Glade	97%	
Delray	95.6%	
Lantana	95.6%	
West Palm Beach	95.7%	
Dental Clinic Aud	lit Summary	
Dental Non-Clinical Au	<u>-</u>	
Belle Glade	98.2%	

	Delray	99.1%	
	Lantana	94.5%	
	West Palm Beach	96.3%	
NURSING	Higher Level of Care		
	Higher Level of Care <b>January 2</b>	024	
	98 ER referrals/ 92 patients w	ere sent to th	o the
	ER in January. The breakdowr	of the referi	ferrals
	is:		
	• WH- 17 (17.5%)		
	• Peds- 13 (13.5%)		
	• Adult- 65 (66%) (this co	ombines urge	rgent
	care and emergency medicine	referrals)	
	<ul> <li>Life Trans to LMC- 0</li> </ul>		
	Adult Crisis- 2 (2%)		
	• Peds Crisis- 1 (1%)		
	PEDS REFERRALS- highest prod	ducer was Dr.	Dr.
	Clarke 6 (46%)		
	ADULT REFERRALS- highest pr	oducers this	nis
	month were Dr. Zhang in Jupit	er 7 (11%)	)
	Top diagnosis:		
	PEDS-Fever, unspecified fever	· ·	38%)
	ADULT- Hypertensive urgency	• •	
	Chest pain, unspecified type 4	(6%)	

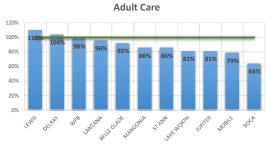


Tachycardia 3 (5%)		
There were 5 patients that received multiple referrals in January. One patient was referred for chart review the Medical Director		
Meeting Adjourned: 12:30pm		

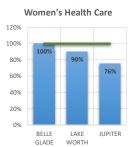
	ADULT	CARE				
Provider	Daily Target	Days Worked	Target for the Month		arget Achieved	Daily Average
ALFONSO PUENTES, RAMIRO, MD	18	17.5	Total 315	282	90%	16.1
CASTIGLIA, SARAH, MD DABU, DARNEL, MD	18 when no precepting	20.5	369 33	233	63% 88%	9.7
FERNANDEZ SANCHEZ, MARCO, NP	18 16	14.0 17.5	270 280	227	84% 73%	16.2 11.7
FIDLER, LISA, APRN FLOREZ, GLORIA MATILDE, MD	16	17.5	351	343	98%	17.6
JEAN-JACQUES, FERNIQUE, NP KOOPMAN, REBECCA SUE, PA	16 18	19.0 19.5	304 351	309 341	102% 97%	16.3 17.5
LAM, MINH DAI, NP	16	13.0	208	259	125%	19.9
LANGLEY, TAMARA, NP LARA SUAREZ, MARIA, NP	16 16	12.5 20.0	200 320	154 309	77% 97%	12.3 15.5
MILLIEN, ELEONORE, APRN	8	17.5	140	104	74%	5.9
NOUKELAK, GERMAINE, MD PEREZ, DANIEL JESUS, MD	18 18 when no precepting	17.5 5.0	333 35	365 32	110% 91%	6.4
PHILISTIN, KETELY, NP	16	20.0	320	244	76%	12.2
PIERRE LOUIS, JOANN, NP REGAN, PATRICK, DO	16	19.0 2.0	304 4	249 4	82% 100%	13.1 2.0
ST. VIL, CARLINE, NP STANEK, EWELINA, PA	16 16	15.5 16.5	248 264	247	100% 89%	15.9 14.2
TAHERI, NERGESS, DO	18 when no precepting	3.0	45	43	96%	14.3
TUCKER, CHELSEA, PA TUSSEY, CLAUDIA, MD	16/18 SUD 18	20.0	358 378	271 351	76% 93%	13.6 16.7
WARREN, SANDRA, MD	18	9.5	171	155	91%	16.3
WILMOT, ALTHEA, NP ZHANG, MICHAEL, MD	18 / 6 Mobile, St Ann, Lewis 18	18.5 20.5	146 369	117 305	80% 83%	6.3
ADULT CARE TOTALS	10	381.5	6116	5,411	88%	14.5
PGY-1	RESIDENCY 5	PROGRAM 28.5	143	178	125%	6.2
PGY-2	11	31.0	341	317	93%	10.2
PGY-3 RESIDENTS TOTAL	14	21.0 <b>80.5</b>	282 766	249 744	88% 97%	11.9
		<u>'</u>	100			
CLARKE AARON NOTHA AAR		RIC CARE	200	201	049/	40.7
CLARKE-AARON, NOELLA, MD DESSALINES, DUCLOS, MD	20	15.0 16.0	300 320	281 310	94% 97%	18.7 19.4
NORMIL-SMITH, SHERLOUNE, MD HERNANDEZ GARCIA, JOSE, MD	20	19.5 8.0	390 127	383 119	98% 94%	19.6 14.9
LAZARO RIVERA, NANCY, MD	20	15.0	300	324	108%	21.6
MARZOUCA, KISHA F., MD PEDIATRIC CARE TOTALS	20	17.5 91.0	350 1787	351 1,768	100% 99%	20.1
TEDITING CARE TO THE		32.0	1707	2,700	3370	
550,0500		IEALTH CARE	427	454	4430/	14.0
FERWERDA, ANA, MD PROPHETE, JOYCE, MD	18 when no precepting 18 when no precepting	11.0 20.5	137 329	154 275	112% 84%	13.4
FINLEY, NICOLE, NP	18 when no precepting	15.0	240 706	200 629	83% 89%	13.3
WOMEN'S HEALTH CARE TOTALS		46.5	706	629	89%	
	BEHAVIORAL HEA					
CALDERON, NYLSA, LMHC HIRSCH, KAREN, LCSW	10 8	8.5 14.5	85 104	75 102	88% 98%	8.8 7.0
BROWN, JEREMY, LCSW	10	19.5	195	166	85%	8.5
HART, SHAKIYLA, LCSW CAPLE, ZANESHIA, LCSW	10 New Provider	18.5 11.0	185 36	145 36	78% 100%	7.8
JONES, KIARA, LCSW	10	15.5	115	113	98%	7.3
BH INTEGRATION TOTALS		87.5	720	637	88%	
	BEHAVIORAL HEA	ALTH PSYCHIATR				
BURROWES, SHARON, NP DEMNER, ADAM, MD	12	18.5	222	178 2	80% 100%	9.6
PHILLIPS, COURTNEY, MD	12	1.0	1	1	100%	<b>1.0</b>
PETER, AMANDA, NP BEHAVIORAL HEALTH PSYCHIATRY	12	17.5 39.0	210 435	128 309	61% 71%	7.3
		1 22.0	100			
MENEFEE, STEPHEN, MD		SYCHIATRY	84	43	F10/	6.1
BEAMAN, DAVID, MD	12 12	7.0 4.0	48	38	51% 79%	9.5
DHALIWAL, AMAREEN, MD HOGUE, KRISTIAN, MD	12	7.5 7.5	90 90	73 44	81% 49%	9.7 5.9
MAXWELL, CHRISTIAN, MD	12	7.5	90	57	63%	7.6
NGUYEN, ANH-VU, MD SANCHEZ, GRETEL, MD	12	8.0 6.0	96 72	76 32	79% 44%	9.5 5.3
TORRES, MICHAEL, MD	12	6.0	72	41	57%	6.8
RESIDENTS PSYCHIATRY TOTAL		53.5	642	404	63%	
	BEHAVIORAL HE	ALTH ADDICTION	N			
MILETA, SNJEZANA, LMHC WEIDNER, JD, LCSW	10 New Provider	20.0	200 17	331 17	166% 100%	16.6 8.5
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW	10	19.0	190	118	62%	6.2
MITCHELL, ANGELA DENISE, LCSW  BH ADDICTION TOTALS	8	17.5 <b>58.5</b>	140 547	230 696	164% 127%	13.1
BH ADDICTION TOTALS		36.3	347	090	12/70	
		ITAL				
ABREU, MARIANA, DDS BERNARD, ANA, DDS	16 16	18.5 18.5	296 296	306 299	103% 101%	16.5 16.2
ADAMETZ, JOSHUA, DMD	16	9.5	135	162	120%	17.1
ALWEHAIB, ARWA, DDS BOWEN, BEVERLY, DMD	16 16	17.0 20.5	272 328	286 327	105% 100%	16.8 16.0
SEMINARIO, ADA, DDS	16	20.0	320	312	98%	15.6
SOFIANOS, MICHAEL, DMD ZANGENEH, YASMINE, DMD	16 16	20.0 19.5	320 312	306 315	96% 101%	15.3 16.2
DENTAL TOTALS		143.5	2279	2,313	101%	
	DENTAL	HYGIENE				
MOZER NASCIMENTO, ARIANNE MILENA	8	18.5	148	149	101%	8.1
GONZALEZ, NANCY HARDCASTLE, CORINA	8 8	3.0 19.0	24 152	23 131	96% 86%	7.7 6.9
FEOLA, LEYDA	8	14.5	116	102	88%	7.0
MASON, SHERRY PETERSEN, PATRICE	8 8	19.5 15.5	156 152	143 129	92% 85%	7.3 8.3
DENTAL HYGIENE TOTALS		90.0	748	677	91%	
		NI MADI				
BROWN, TANYA	16 MDI	10.0	142	140	99%	14.0
DUCHARME, RHONDA	16	12.0	184	166	90%	13.8
DENTAL MDI TOTALS		22.0	326	306	94%	
		_				

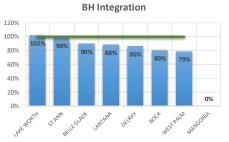
#### **PRODUCTIVITY REPORT JANUARY 2024**

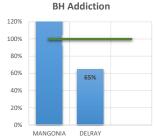
ALL CLINICS	AS 01/31/2	024 Based oi	n Completed	Appointments			
Category	Targ	get for the M	onth	To	tal for the Month	Seen	% Monthly Target
AS 01/31/2024	AM	PM	Total	АМ	PM	Total	Achieved
ADULT CARE	3,169	2,947	6,116	3,170	2,241	5,411	88%
PEDIATRIC CARE	903	884	1,787	1,082	686	1,768	99%
WOMEN'S HEALTH CARE	378	328	706	425	204	629	89%
BH INTEGRATION	395	325	720	351	286	637	88%
BH ADDICTION	280	267	547	434	262	696	127%
DENTAL HEALTH	1,175	1,104	2,279	1,553	760	2,313	101%
DENTAL HYGIENE	388	360	748	400	277	677	91%
DENTAL MDI	164	162	326	113	193	306	94%
BH PSYCHIATRY	222	213	435	182	127	309	71%
RESIDENCY PSYCHIATRY	330	312	642	226	178	404	63%
RESIDENCY PROGRAM	407	359	766	492	252	744	97%
Grand Total	7,811	7,261	15,072	8,428	5,466	13,894	92%





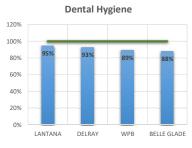


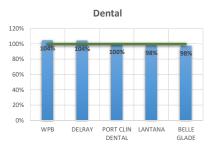


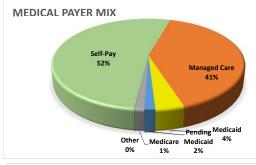




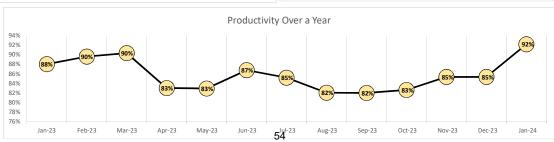












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ALFONSO PUENTES, RAMIRO, MD	102%	85%	87%	85%	89%	84%	83%	78%	76%	83%	77%	90%
	90/88	261/308	321/369	300/351	265/297	303/360	344/414	233/297	274/360	217/261	201/261	282/315
CASTIGLIA, SARAH, MD	47%	65%	61%			54%	49%	63%	57%	64%	58%	63%
	153/325	226/350	203/333			184/342	196/396	211/333	226/396	185/288	161/279	233/369
						_						
DABU, DARNEL, MD	71%	94%	83%	87%	100%	88%	100%	83%	97%	80%	88%	88%
	21/29	30/32	33/40	21/24	10/10	35/40	29/29	15/18	28/29	28/35	23/26	29/33
DODGE MED ADD JENNIJEED AND	700/	040/	750/	C70/	030/	740/	740/	740/	740/		670/	1
DORCE-MEDARD, JENNIFER, MD	<b>78%</b> 7/9	<b>94%</b> 17/18	<b>75%</b> 18/24	<b>67%</b> 6/9	<b>92%</b> 24/26	<b>74%</b> 225/306	<b>74%</b> 225/306	<b>74%</b> 225/306	<b>74%</b> 225/306		<b>67%</b> 6/9	
	1,75	17/10	10/24	0/3	24/20	223/300	223/300	223/300	223/300		0/3	
FERNIANDEZ CANCUEZ MARCO ND	94%	98%	79%	77%	72%	71%	93%	101%	79%	82%	75%	84%
FERNANDEZ SANCHEZ, MARCO, NP	241/257	229/234	286/360	347/450	286/400	270/380	448/480	395/390	339/430	286/350	286/380	227/270
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FIDLER, LISA, APRN	100%	69%	50%	64%	74%	47%	44%	59%	61%	76%	63%	73%
HIDLER, LISA, AFRIN	135/135	214/309	168/278	229/300	265/300	141/248	187/423	187/315	198/326	231/304	161/256	204/280
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FLOREZ, GLORIA MATILDE, MD	87%	86%	79%	89%	110%	88%	89%	84%	80%	83%	94%	98%
	252/289	310/359	262/333	321/360	407/369	260/297	232/261	264/315	266/333	208/252	212/225	343/351
JEAN-JACQUES, FERNIQUE, NP	95%	90%	85%	86%	98%	105%	103%	93%	117%	92%	95%	102%
	244/257	314/349	237/234	332/323	291/248	332/316	349/338	254/272	291/248	258/280	242/256	309/304
				_								
KOOPMAN, REBECCA SUE, PA	103%	108%	80%	83%	88%	83%	81%	85%	74%	75%	62%	97%
,,	296/287	375/347	271/340	371/440	388/440	299/360	350/430	341/400	283/380	233/310	180/290	341/351
LAM, MINH DAI, NP	107%	104%	92%	101%	108%	102%	101%	103%	116%	117%	116%	125%
,	267/250	260/250	348/317	283/233	302/233	295/241	328/324	372/360	363/312	271/232	270/232	259/208
LANGLEY, TAMARA, NP	69%	73%	68%	74%	65%	67%	60%	56%	59%	55%	62%	77%
	151/219	247/339	177/218	239/270	245/315	210/263	199/333	177/315	183/312	153/280	183/296	154/200
LARA SUAREZ, MARIA, NP	75%	75%	72%	77%	59%	65%	58%	53%	58%	57%	50%	97%
	215/287	250/332	246/286	202/218	214/300	239/308	142/243	189/360	195/336	170/296	119/240	309/320
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NAVARRO, ELSY, NP	99%	91%	83%	83%	83%	81%	83%	77%	85%	90%	93%	
	263/266	304/335	270/271	305/308	210/211	270/278	194/234	269/351	212/248	209/232	230/248	
NOUKELAK, GERMAINE, MD	92%	84%	75%	84%	107%	104%	105%	104%	94%	96%	98%	110%
	306/334	311/368	278/369	342/405	375/351	328/315	311/297	376/360	362/387	311/324	282/288	365/333
MILLIEN, ELEONORE, APRN									66%	49%	64%	74%
									109/164	69/140	67/104	104/140
									_			
PEREZ, DANIEL JESUS, MD	80%	79%	83%	86%	95%	91%	77%	94%	69%	92%	74%	91%
	26/33	34/43	45/54	50/58	42/44	31/34	23/30	29/31	27/39	57/62	29/39	32/35
PHILISTIN, KETELY, NP	77%	84%	70%	73%	72%	76%	75%	70%	83%	81%	80%	76%
	232/302	254/302	260/309	294/338	278/323	172/188	291/387	252/360	278/336	246/304	192/240	244/320
PIERRE LOUIS, JOANN, NP	91%	90%	72%	75%	74%	79%	73%	64%	80%	80%	83%	82%
	200/219	271/302	214/249	276/308	259/293	213/226	250/342	203/315	250/312	210/264	198/240	249/304
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TUCKER, CHELSEA, PA	-	I	1	029/		070/	93%	910/	GEO/	61%	58%	760/
TOCKER, CHELDEA, FA				<b>93%</b> 35/38		<b>97%</b> 64/66	160/172	<b>81%</b> 136/168	<b>65%</b> 129/197	175/288	<b>58%</b> 172/296	<b>76%</b> 271/358
		l	I	33/30		04/00	1 100/1/2	130/100	123/13/	1/3/200	1/2/290	2/1/338
			1			1		_				
TUSSEY, CLAUDIA, MD									100%	80%	85%	93%
		<u> </u>	ļ				<u> </u>	<u> </u>	62/62	266/333	274/324	351/378

DocuSign Envelope ID: 3EBC14A2-0717-466   <b>ADULT CARE</b>		Mar-23		May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
ST. VIL, CARLINE, NP	85%	82%	71%	78%	91%	75%	78%	96%	99%	88%	87%	100%
	187/219	247/302	211/248	253/270	221/204	217/240	183/234	338/351	300/304	203/232	216/248	247/248
STANEK, EWELINA, PA	72%	75%	65%	70%	70%	72%	76%	72%	78%	84%	86%	89%
	120/167	181/240	176/226	269/323	260/308	267/308	299/396	219/306	275/352	195/232	249/288	234/264
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TAHERI, NERGESS, DO	97%	100%	96%	100%	100%	92%	95%	114%	87%	92%	93%	96%
	33/34	32/32	53/55	50/50	50/50	34/37	61/64	56/49	68/78	44/48	37/40	43/45
	_											
WARREN, SANDRA, MD	78%	82%	71%	70%	80%	84%	75%	74%	82%	82%	86%	91%
	147/189	190/232	140/198	133/189	166/207	196/234	168/225	133/180	155/189	126/153	147/171	155/171
	_											
WILMOT, ALTHEA, NP	56%	39%	71%	69%	79%	81%	86%	63%	61%	85%	69%	80%
	125/222	107/273	77/108	149/195	85/99	107/126	176/204	95/150	90/147	92/108	111/160	117/146
	_											
ZHANG, MICHAEL, MD									46%	56%	57%	83%
									165/360	185/333	199/351	305/369
RESIDENTS	96%	83%	67%	68%	82%	82%	89%	95%	87%	90%	94%	97%
	658/687	692/833	508/759	650/951	630/773	612/746	681/761	642/678	638/735	547/607	620/663	744/766
PEDIATRIC CARE	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
CLARKE-AARON, NOELLA, MD	101%	109%	87%	81%	82%	88%	78%	79%	88%	87%	88%	94%
	303/299	382/350	322/370	244/300	345/420	229/260	328/420	278/350	238/270	322/370	256/290	281/300
	_											
CHIBAR, CHARMAINE, MD		I		53%	100%							I
CHIDAN, CHANIVIAINE, IVID												
			<u> </u>	16/30	10/10		<u> </u>		<u> </u>			
DESSALINES, DUCLOS, MD	110%	117%	92%	97%	104%	95%	90%	86%	97%	93%	99%	97%
	291/265	311/265	249/270	348/360	354/340	267/280	358/400	302/350	300/310	252/270	306/310	310/320
HERNANDEZ GARCIA, JOSE, MD									75%	81%	95%	94%
									222/297	129/159	113/119	119/127
LAZARO RIVERA, NANCY, MD	109%	128%	104%	106%	105%	106%	100%	92%	101%	103%	105%	108%
	309/282	339/265	323/310	444/420	377/360	255/240	380/380	358/390	416/410	360/350	295/280	324/300
MARZOUCA, KISHA F., MD	105%	109%	91%	83%	82%	88%	79%	85%	86%	89%	96%	100%
	333/316	419/384	353/390	348/420	212/260	193/220	365/460	316/370	354/410	312/350	357/370	351/350
		120,001	<u> </u>									
		10,000										
NORMIL-SMITH, SHERLOUNE, MD	104%	122%	98%	99%	101%	100%	88%	84%	81%	92%	91%	98%
NORMIL-SMITH, SHERLOUNE, MD				<b>99%</b> 357/360	<b>101%</b> 182/180	<b>100%</b> 341/340	<b>88%</b> 370/420	<b>84%</b> 295/350	<b>81%</b> 234/290	<b>92%</b> 267/290	<b>91%</b> 263/290	<b>98%</b> 383/390
NORMIL-SMITH, SHERLOUNE, MD	104%	122%	98%									
	<b>104%</b> 311/299	<b>122%</b> 353/289	<b>98%</b> 372/380	357/360	182/180	341/340	370/420	295/350	234/290	267/290	263/290	383/390
WOMEN'S HEALTH CARE	104% 311/299 Feb-23	122% 353/289 Mar-23	98% 372/380 Apr-23	357/360 May-23			370/420 Aug-23	295/350 Sep-23	234/290 Oct-23	267/290 Nov-23	263/290 Dec-23	383/390 Jan-24
	104% 311/299 Feb-23 67%	122% 353/289 Mar-23 89%	98% 372/380 Apr-23 78%	357/360 May-23 53%	182/180	341/340	370/420 Aug-23 62%	295/350 Sep-23 72%	234/290 Oct-23 77%	267/290 Nov-23 84%	263/290  Dec-23  90%	383/390 Jan-24 112%
WOMEN'S HEALTH CARE	104% 311/299 Feb-23	122% 353/289 Mar-23	98% 372/380 Apr-23	357/360 May-23	182/180	341/340	370/420 Aug-23	295/350 Sep-23	234/290 Oct-23	267/290 Nov-23	263/290 Dec-23	383/390 Jan-24
WOMEN'S HEALTH CARE FERWERDA, ANA, MD	104% 311/299 Feb-23 67% 107/159	122% 353/289 Mar-23 89% 214/239	98% 372/380 Apr-23 78% 151/193	357/360 May-23 53% 19/36	182/180 Jun-23	341/340 Jul-23	Aug-23 62% 110/177	295/350  Sep-23  72%  121/168	234/290 Oct-23 77% 134/175	Nov-23 84% 132/157	263/290  Dec-23  90%  71/79	Jan-24 112% 154/137
WOMEN'S HEALTH CARE	104% 311/299 Feb-23 67% 107/159	122% 353/289 Mar-23 89% 214/239	98% 372/380 Apr-23 78% 151/193	357/360 May-23 53% 19/36	182/180  Jun-23  87%	341/340 Jul-23	370/420  Aug-23 62% 110/177 78%	295/350  Sep-23  72%  121/168	234/290 Oct-23 77% 134/175	Nov-23 84% 132/157	263/290  Dec-23  90%  71/79  84%	Jan-24 112% 154/137
WOMEN'S HEALTH CARE FERWERDA, ANA, MD	104% 311/299 Feb-23 67% 107/159	122% 353/289 Mar-23 89% 214/239	98% 372/380 Apr-23 78% 151/193	357/360 May-23 53% 19/36	182/180 Jun-23	341/340 Jul-23	Aug-23 62% 110/177	295/350  Sep-23  72%  121/168	234/290 Oct-23 77% 134/175	Nov-23 84% 132/157	263/290  Dec-23  90%  71/79	Jan-24 112% 154/137
WOMEN'S HEALTH CARE FERWERDA, ANA, MD	104% 311/299 Feb-23 67% 107/159	122% 353/289 Mar-23 89% 214/239	98% 372/380 Apr-23 78% 151/193	357/360 May-23 53% 19/36	182/180  Jun-23  87%	341/340 Jul-23	370/420  Aug-23 62% 110/177 78%	295/350  Sep-23  72%  121/168	234/290 Oct-23 77% 134/175	Nov-23 84% 132/157	263/290  Dec-23  90%  71/79  84%	Jan-24 112% 154/137
WOMEN'S HEALTH CARE FERWERDA, ANA, MD	104% 311/299 Feb-23 67% 107/159	122% 353/289 Mar-23 89% 214/239	98% 372/380 Apr-23 78% 151/193	357/360 May-23 53% 19/36	182/180  Jun-23  87%	341/340 Jul-23 85%	370/420  Aug-23 62% 110/177 78%	295/350  Sep-23  72%  121/168	234/290 Oct-23 77% 134/175	Nov-23 84% 132/157	263/290  Dec-23  90%  71/79  84%	Jan-24 112% 154/137

BEHAVIORAL HEALTH INTEGRATION	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
CALDERON, NYLSA, LMHC	103%	100%	96%	91%	84%	88%	86%	90%	87%	83%	84%	88%
	140/136	205/206	159/165	127/140	160/190	159/180	190/220	103/115	143/165	121/145	138/165	75/85
JONES, KIARA, LCSW	112%	111%	105%	104%	100%	98%	101%	97%	107%	94%	95%	98%
,	182/162	228/206	184/175	197/190	200/200	192/195	167/165	150/155	188/175	123/131	114/120	113/11
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SILVER, DAWN, PhD		l	100%	92%	79%	95%	95%	77%	72%			
SIEVER, DAVVIN, I IID			87/87	202/220	166/210	124/130	180/190	151/195	36/50			
		l	-	1			100,200		23,22	Į.	I	
BROWN, JEREMY, LCSW	103%	94%	92%	93%	87%	97%	92%	79%	87%	79%	82%	85%
BROWN, JEREWIT, ECSW	170/165	213/226	180/195	204/220	179/205	175/180	202/220	154/195	188/215	99/125	144/175	166/19
			1,					,,				,
BURROWES, SHARON, NP	51%	58%	58%	56%	61%	69%	68%	62%	58%	66%	80%	80%
BUNNOWES, SHANON, NP	114/223	158/271	104/180	148/264	142/234	150/216	146/216	138/222	143/246	139/210	120/150	178/22
	114/223	130/2/1	104/100	140/204	142/234	130/210	140/210	130/222	143/240	133/210	120/130	170/22
HIDCOLL MADEN LCCM	4070/	4040/	4040/	4000/	070/	040/	020/	000/	700/	000/	050/	000/
HIRSCH, KAREN, LCSW	107%	101%	104%	102%	97%	91%	92%	90%	79%	98%	85%	98%
	58/54	98/97	109/105	86/84	116/120	87/96	94/102	86/96	82/104	65/66	75/88	102/10
LADDAD LAMOTE DE COLONON ANDRE CONT		I	1	7001	0451	700/	cac:	7001	Fact		FOC!	
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW			-	<b>76%</b>	<b>81%</b>	<b>78%</b>	145/220	145/195	115/215	<b>64%</b> 115/180	<b>53%</b>	119/10
		L	L	81/107	170/210	156/200	145/230	145/185	115/215	115/180	66/125	118/19
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MILETA, SNJEZANA, LMHC	117%	115%	139%	95%		130%	81%	93%	101%	162%	155%	166%
	211/180	253/220	195/140	95/100		104/80	114/140	172/185	218/215	292/180	294/190	331/20
MITCHELL, ANGELA DENISE, LCSW	117%	119%	96%	87%	93%	109%	75%	104%	116%	145%	186%	164%
	202/172	204/172	89/93	182/210	186/200	163/150	142/190	125/120	191/164	209/144	201/108	230/14
	-											
PETER, AMANDA, NP	50%	73%	76%	72%	70%	42%	43%	F00/	69%	48%	41%	61%
PETER, AIVIANDA, INP	30%	13/0	7070	12/0	7070	72/0	73/0	58%	0370	70/0	7270	
reien, Aivianda, Nr	105/211	171/235	179/234	172/240	163/234	86/204	107/246	128/222	170/246	96/198	91/222	128/21
PETEN, AIVIANDA, NP												
REXACH, CLAUDIA, LMHC												
	105/211	171/235	179/234	172/240	163/234	86/204	107/246	128/222	170/246			
	105/211 123%	171/235 110%	179/234 122%	172/240 104%	163/234 123%	86/204 99%	107/246	128/222	170/246			
REXACH, CLAUDIA, LMHC	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160	90% 208/230	83% 146/175	170/246 104% 161/155	96/198	91/222	128/21
RESIDENT PSYCHIATRY	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104%	163/234 123% 221/180	99% 158/160 Jul-23	90% 208/230 Aug-23	83% 146/175 Sep-23	170/246 104% 161/155 Oct-23	96/198 Nov-23	91/222 Dec-23	128/21
REXACH, CLAUDIA, LMHC	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23 100%	90% 208/230 Aug-23 84%	128/222 83% 146/175 Sep-23 81%	170/246 104% 161/155 Oct-23 67%	96/198 Nov-23 69%	91/222 Dec-23 87%	Jan-2
RESIDENT PSYCHIATRY	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23	90% 208/230 Aug-23	83% 146/175 Sep-23	170/246 104% 161/155 Oct-23	96/198 Nov-23	91/222 Dec-23	Jan-2
RESIDENT PSYCHIATRY MENEFEE, STEPHEN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23 100% 33/33	90% 208/230 Aug-23 84% 67/80	83% 146/175 Sep-23 81% 68/84	170/246 104% 161/155 Oct-23 67% 64/96	96/198 Nov-23 69% 50/72	91/222  Dec-23  87%  73/84	Jan-2 51% 43/84
RESIDENT PSYCHIATRY	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23 100% 33/33	90% 208/230 Aug-23 84% 67/80	83% 146/175 Sep-23 81% 68/84	170/246  104% 161/155  Oct-23 67% 64/96	96/198  Nov-23  69%  50/72	91/222  Dec-23  87%  73/84  41%	Jan-2 51% 43/84
RESIDENT PSYCHIATRY MENEFEE, STEPHEN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23 100% 33/33	90% 208/230 Aug-23 84% 67/80	83% 146/175 Sep-23 81% 68/84	170/246 104% 161/155 Oct-23 67% 64/96	96/198 Nov-23 69% 50/72	91/222  Dec-23  87%  73/84	
RESIDENT PSYCHIATRY MENEFEE, STEPHEN, MD BEAMAN, DAVID, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23 100% 33/33 100% 35/35	90% 208/230 Aug-23 84% 67/80 52% 32/61	83% 146/175 Sep-23 81% 68/84 21/78	170/246  104% 161/155  Oct-23 67% 64/96  53% 41/78	96/198 Nov-23 69% 50/72 55% 33/60	91/222  Dec-23  87%  73/84  41%  32/78	Jan-2 51% 43/84 79% 38/48
RESIDENT PSYCHIATRY MENEFEE, STEPHEN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23 100% 33/33 100% 35/35	90% 208/230 Aug-23 84% 67/80 52% 32/61	83% 146/175 Sep-23 81% 68/84 21/78	170/246  104% 161/155  Oct-23 67% 64/96  53% 41/78	96/198  Nov-23 69% 50/72  55% 33/60	91/222  Dec-23  87%  73/84  41%  32/78	Jan-2 51% 43/84 79% 38/48
RESIDENT PSYCHIATRY MENEFEE, STEPHEN, MD BEAMAN, DAVID, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23 100% 33/33 100% 35/35	90% 208/230 Aug-23 84% 67/80 52% 32/61	83% 146/175 Sep-23 81% 68/84 21/78	170/246  104% 161/155  Oct-23 67% 64/96  53% 41/78	96/198 Nov-23 69% 50/72 55% 33/60	91/222  Dec-23  87%  73/84  41%  32/78	Jan-2 51% 43/84 38/48
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23 100% 33/33 100% 35/35 104% 29/28	90% 208/230 Aug-23 84% 67/80 52% 32/61 92% 59/64	83% 146/175 Sep-23 81% 68/84 27% 21/78 72% 56/78	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66	96/198  Nov-23  69%  50/72  55%  33/60  107%  58/54	91/222  Dec-23  87%  73/84  41%  32/78  84%  76/90	Jan-2 51% 43/84 79% 38/48 81% 73/90
RESIDENT PSYCHIATRY MENEFEE, STEPHEN, MD BEAMAN, DAVID, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23 100% 33/33 100% 35/35 104% 29/28	90% 208/230 Aug-23 84% 67/80 52% 32/61 92% 59/64	83% 146/175 Sep-23 81% 68/84 27% 21/78 72% 56/78	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66	96/198  Nov-23  69%  50/72  55%  33/60  107%  58/54	91/222  Dec-23  87%  73/84  41%  32/78  84%  76/90	Jan-2 51% 43/84 79% 38/48 81% 73/90
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160 Jul-23 100% 33/33 100% 35/35 104% 29/28	90% 208/230 Aug-23 84% 67/80 52% 32/61 92% 59/64	83% 146/175 Sep-23 81% 68/84 27% 21/78 72% 56/78	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66	96/198  Nov-23  69%  50/72  55%  33/60  107%  58/54	91/222  Dec-23  87%  73/84  41%  32/78  84%  76/90	Jan-2 51% 43/84 79% 38/48 81% 73/90
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 35/35  104% 29/28  100%	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 59/64	83% 146/175 Sep-23 81% 68/84 21/78 72% 56/78	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66  47% 28/60	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66	91/222  Dec-23  87%  73/84  41%  32/78  84%  76/90  40%  31/78	Jan-2 51% 43/84 79% 38/48 81% 73/90 44/90
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 35/35  104% 29/28  100% 19/19	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 40/72	83% 146/175 Sep-23 81% 68/84 27% 21/78 72% 56/78 30% 29/96	170/246  104% 161/155  Oct-23 67% 64/96  53% 41/78  74% 49/66  28/60	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66	91/222  Dec-23  87%  73/84  41%  32/78  84%  76/90  40%  31/78	Jan-2 51% 43/84 79% 38/48 81% 73/90 44/90
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 35/35  104% 29/28  100%	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 59/64	83% 146/175 Sep-23 81% 68/84 21/78 72% 56/78	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66  47% 28/60	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66	91/222  Dec-23  87%  73/84  41%  32/78  84%  76/90  40%  31/78	Jan-2 51% 43/84 79% 38/48 81% 73/90 44/90
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 35/35  104% 29/28  100% 19/19	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 40/72	83% 146/175 Sep-23 81% 68/84 27% 21/78 72% 56/78 30% 29/96	170/246  104% 161/155  Oct-23 67% 64/96  53% 41/78  74% 49/66  28/60	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66	91/222  Dec-23  87%  73/84  41%  32/78  84%  76/90  40%  31/78	Jan-2 51% 43/84 79% 38/48 81% 73/90 44/90
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 29/28  100% 19/19  100% 33/33	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 59/64  56% 40/72  92% 25/23	83% 146/175 Sep-23 81% 68/84 27% 27/8 56/78 30% 29/96 50/60	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66  47% 28/60  104% 56/54	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66  83% 55/66	91/222  Dec-23 87% 73/84  41% 32/78  84% 76/90  40% 31/78  86% 88/102	Jan-2 51% 43/84 38/48 81% 73/90 49% 57/90
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 29/28  100% 19/19  100% 33/33	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 59/64  40/72  92% 25/23	83% 146/175 Sep-23 81% 68/84 27% 21/78 72% 56/78 30% 29/96	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66  47% 28/60  104% 56/54	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66  83% 55/66	91/222  Dec-23 87% 73/84  41% 32/78  84% 76/90  40% 31/78  86% 88/102	Jan-2 51% 43/84 79% 38/48 81% 73/90 49% 57/90
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 29/28  100% 19/19  100% 33/33	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 59/64  56% 40/72  92% 25/23	83% 146/175 Sep-23 81% 68/84 27% 27/8 56/78 30% 29/96 50/60	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66  47% 28/60  104% 56/54	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66  83% 55/66	91/222  Dec-23 87% 73/84  41% 32/78  84% 76/90  40% 31/78  86% 88/102	Jan-2 51% 43/84 79% 38/48 81% 73/90 49% 57/90
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 29/28  100% 19/19  100% 33/33	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 59/64  56% 40/72  92% 25/23	83% 146/175 Sep-23 81% 68/84 27% 27/8 56/78 30% 29/96 50/60	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66  47% 28/60  104% 56/54	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66  83% 55/66	91/222  Dec-23 87% 73/84  41% 32/78  84% 76/90  40% 31/78  86% 88/102	Jan-2 51% 43/84 79% 38/48 81% 73/90 44/90 63% 76/90
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD  MAXWELL, CHRISTIAN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 35/35  104% 29/28  100% 19/19  100% 33/33  100%	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 40/72  92% 25/23  50% 31/62	83% 146/175 Sep-23 81% 68/84 27% 21/78 72% 56/78 30% 29/96 83% 50/60	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66  28/60  104% 56/54  60% 29/48	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66  83% 55/66	91/222  Dec-23 87% 73/84  41% 32/78  84% 76/90  40% 31/78  86% 88/102	128/23  Jan-2  51%  43/84  79%  38/48  81%  73/90  44/90  63%  57/90  76/96
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD  MAXWELL, CHRISTIAN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 35/35  104% 29/28  100% 19/19  100% 33/33  100% 100%	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 59/64  56% 40/72  92% 25/23  50% 31/62	83% 146/175  Sep-23 81% 68/84  27% 21/78  72% 56/78  30% 29/96  83% 50/60  33% 24/72	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66  28/60  104% 56/54  60% 29/48	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66  79% 38/48	91/222  Dec-23 87% 73/84  41% 32/78  84% 76/90  40% 31/78  86% 88/102  79% 38/48	128/21  Jan-2  51%  43/84  79%  38/48  81%  73/90  44/90  63%  57/90  76/96
RESIDENT PSYCHIATRY  MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD  MAXWELL, CHRISTIAN, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 35/35  104% 29/28  100% 33/33  100% 36/36  100% 23/23	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 40/72  92% 25/23  50% 31/62  29% 17/58	83% 146/175 Sep-23 81% 68/84 21/78 72% 56/78 30% 29/96 33% 50/60 33% 24/72	170/246  104% 161/155  Oct-23 67% 64/96  53% 41/78  74% 49/66  28/60  104% 56/54  60% 29/48  57/96	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66  79% 38/48	91/222  Dec-23 87% 73/84  41% 32/78  84% 76/90  40% 31/78  86% 88/102  79% 38/48  63% 53/84	128/21  Jan-2  51%  43/84  79%  38/48  81%  73/90  49%  57/90  79%  44/90  44%  32/72
RESIDENT PSYCHIATRY MENEFEE, STEPHEN, MD  BEAMAN, DAVID, MD  DHALIWAL, AMAREEN, MD  HOGUE, KRISTIAN, MD  MAXWELL, CHRISTIAN, MD  NGUYEN, ANH-VU, MD	105/211 123% 199/162	171/235 110% 232/210	179/234 122% 237/195	172/240 104% 207/200	163/234 123% 221/180	99% 158/160  Jul-23 100% 33/33  100% 35/35  104% 29/28  100% 19/19  100% 33/33  100% 100%	90% 208/230  Aug-23 84% 67/80  52% 32/61  92% 59/64  56% 40/72  92% 25/23  50% 31/62	83% 146/175  Sep-23 81% 68/84  27% 21/78  72% 56/78  30% 29/96  83% 50/60  33% 24/72	170/246  104% 161/155  Oct-23 67% 64/96  41/78  74% 49/66  28/60  104% 56/54  60% 29/48	96/198  Nov-23 69% 50/72  55% 33/60  107% 58/54  55% 36/66  79% 38/48	91/222  Dec-23 87% 73/84  41% 32/78  84% 76/90  40% 31/78  86% 88/102  79% 38/48	Jan-2 51% 43/84 79% 38/48 81% 73/90 49% 57/90 76/96

DENTAL	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
ABREU, MARIANA, DDS	75%	80%	91%	98%	101%	105%	87%	96%	96%	91%	95%	103%
	205/274	303/379	285/312	313/320	355/352	377/360	195/224	284/296	338/351	261/288	280/296	306/296
ADAMETZ, JOSHUA, DMD								86%	100%	108%	115%	120%
								100/116	99/99	95/88	184/160	162/135
ALWEHAIB, ARWA, DDS	115%	119%	114%	118%	114%	121%	126%	122%	114%	111%	104%	105%
	334/290	430/362	373/328	395/336	310/273	348/288	468/371	342/280	392/344	275/247	239/229	286/272
BOWEN, BEVERLY, DMD	81%	77%	86%	83%	96%	92%	96%	86%	97%	91%	91%	100%
JOWEIN, BEVERET, BINIB	240/298	243/314	261/304	264/320	262/272	266/288	339/352	200/232	310/321	255/280	211/232	327/328
	240/250	243/314	201/304	204/320	202/272	200/200	333/332	200/232	310/321	233/200	211/252	327/320
SEMINARIO, ADA, DDS	98%	104%	87%	91%	94%	95%	98%	95%	81%	88%	87%	98%
	277/282	259/250	180/208	276/304	286/304	228/240	88/90	235/248	280/344	247/280	201/232	312/320
COFIANOS MICHAEL DAD	070/	000/	1120/	000/	1040/	1010/	1049/	1100/	4440/	1070/	1000/	000/
SOFIANOS, MICHAEL, DMD	<b>97%</b> 296/306	88%	113%	96%	<b>104%</b> 309/296	101%	104%	110%	111%	107%	108%	96%
	290/300	247/282	343/304	293/304	309/296	308/304	359/344	325/296	356/320	326/304	310/288	306/320
ILLIAMS, RICHARD, DMD	84%	94%	83%	91%	85%	89%	84%	83%	83%	83%	77%	
	249/298	265/282	233/280	262/288	285/336	272/304	309/368	245/296	245/296	233/280	190/248	
			<u></u>								-	
ZANGENEH, YASMINE, DMD		91%	95%	83%	92%	91%	94%	87%	82%	86%	88%	101%
	+	219/240	281/296	238/288	294/320	219/240	317/336	243/280	282/344	254/296	212/240	315/312
HARDCASTLE, CORINA	102%	91%	93%	95%	96%	102%	I	90%	94%	99%	92%	86%
HARDCASTEL, CORINA	127/125	150/165	138/148	144/152	107/112	122/120		112/124	146/156	139/140	93/101	131/152
	127/125	130/103	130/140	144/132	107/112	122/120	<u> </u>		140/150	133/140	33/101	131/132
MASON, SHERRY	97%	95%	90%	88%	92%	89%	83%	81%	88%	88%	96%	92%
	137/141	165/173	119/132	147/168	140/152	143/160	133/160	88/108	144/164	130/148	142/148	143/156
MOZER NASCIMENTO, ARIANNE	95%	106%	106%	96%	109%	98%	95%	103%	99%	98%	97%	101%
	142/149	191/181	165/156	138/144	165/152	141/144	168/176	123/120	154/156	106/108	144/148	149/148
FEOLA, LEYDA		92%	99%	92%	99%	91%	96%	97%	90%	91%	88%	88%
- '		159/173	154/156	154/168	158/160	146/160	176/184	105/108	154/172	113/124	138/156	102/110
						<u></u>						
DUCHARME, RHONDA	98%	96%	100%	95%	99%	90%	88%	90%	91%	91%	94%	90%
	293/298	256/266	264/264	311/328	316/320	218/241	275/312	206/228	196/216	102/112	146/156	166/184
						_						
PETERSEN, PATRICE	97%	96%	96%	92%	95%	82%	106%	102%	104%	94%	76%	85%

### **SATURDAY**

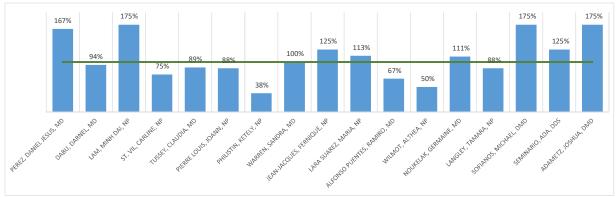
### **PRODUCTIVITY REPORT JANUARY 2024**

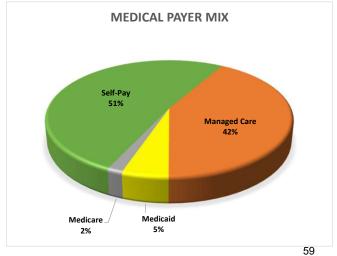
AS 01/31/2024 Based on Completed Appointments

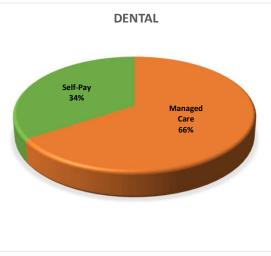
SATURDAY	<51%	>=51% and < 80%	>= 80% and <100%
DDODLICTIVITY DEDORT LANGUARY 2024			

		ADULT CA	RE							
Provider	Daily Target ( 1/2 Day)	# Saturdays Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average				
		BELLE GLAD	DE							
PEREZ, DANIEL JESUS, MD	9	1	3	5	167%	5.0				
DABU, DARNEL, MD	9	2	18	17	94%	8.5				
DELRAY										
LAM, MINH DAI, NP	8	1	8	14	175%	14.0				
ST. VIL, CARLINE, NP	8	1	8	6	75%	6.0				
TUSSEY, CLAUDIA, MD	9	1	9	8	89%	8.0				
		LAKE WOR	TH							
PIERRE LOUIS, JOANN, NP	8	1	8	7	88%	7.0				
PHILISTIN, KETELY, NP	8	1	8	3	38%	3.0				
WARREN, SANDRA, MD	9	1	9	9	100%	9.0				
		LANTANA	\							
JEAN-JACQUES, FERNIQUE, NP	8	1	8	10	125%	10.0				
LARA SUAREZ, MARIA, NP	8	1	8	9	113%	9.0				
ALFONSO PUENTES, RAMIRO, MD	9	1	9	6	67%	6.0				
		WEST PALM B	EACH							
WILMOT, ALTHEA, NP	8	1	8	4	50%	4.0				
NOUKELAK, GERMAINE, MD	9	1	9	10	111%	10.0				
LANGLEY, TAMARA, NP	8	1	8	7	88%	7.0				
ADULT CARE TOTALS			121	115	95%					

		BELLE GLADE D	ENTAL								
SOFIANOS, MICHAEL, DMD	IANOS, MICHAEL, DMD 8 1 <b>8 14 175%</b>										
LANTANA DENTAL											
SEMINARIO, ADA, DDS	8	1	8	10	125%	10.0					
	WE	ST PALM BEACH	I DENTAL								
ADAMETZ, JOSHUA, DMD	8	1	8	14	175%	14.0					
DENTAL TOTALS			24	38	158%						
GRAND TOTAL			145	153	106%						







### BELLE GLADE

### PRODUCTIVITY REPORT JANUARY 2024

RESIDENTS TOTALS

AS 01/31/2024 Based on Comp	leted Appointments					
		ADUL	T CARE			
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
TAHERI, NERGESS, DO	18 when no precepting	3.0	45	43	96%	14.3
DABU, DARNEL, MD	18 when no precepting	3.0	33	29	88%	9.7
PEREZ, DANIEL JESUS, MD	18 when no precepting	5.0	35	32	91%	6.4
REGAN, PATRICK, DO		2.0	4	4	100%	2.0
ADULT CARE TOTALS		13.0	117	108	92%	
		RESIDENCY	PROGRAM	Л		
PGY-1	6	28.5	143	178	125%	6.2
PGY-2	10	31	341	317	93%	10.2
PGY-3	14	21.0	282	249	88%	11.9

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

WOMEN'S HEALTH CARE									
FERWERDA, ANA, MD	18 when no precepting	4.0	28	28	100%	7.0			
PROPHETE, JOYCE, MD	18 when no precepting	4.0	32	32	100%	8.0			
WOMEN'S HEALTH CARE TOTALS		8.0	60	60	100%				

766

744

97%

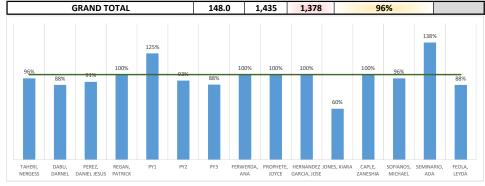
80.5

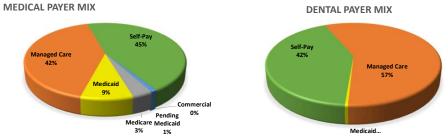
PEDIATRIC CARE								
HERNANDEZ GARCIA, JOSE, MD 1.0 1 1 100% 1.0								
PEDIATRIC CARE TOTALS		1.0	1	1	100%			

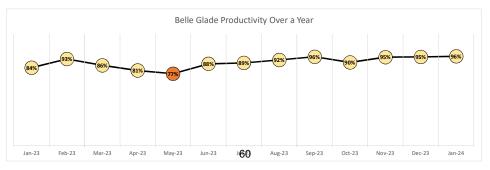
BEHAVIORAL HEALTH INTEGRATION									
JONES, KIARA, LCSW 10 2.0 10 6 60% 3.0									
CAPLE, ZANESHIA, LCSW	10	8.0	29	29	100%	3.6			
BH INTEGRATION TOTALS		10.0	39	35	90%				

DENTAL									
SOFIANOS, MICHAEL, DMD	16	20.0	320	306	96%	15.3			
SEMINARIO, ADA, DDS	16	1.0	16	22	138%	22.0			
DENTAL TOTALS		21.0	336	328	98%				

DENTAL HYGIENE									
FEOLA, LEYDA	8	14.5	116	102	88%	7.0			
DENTAL HYGIENE TOTALS		14.5	116	102	88%				







**BOCA** 

<51%

>=51% and < 80%

>= 80% and <100%

>= 100%

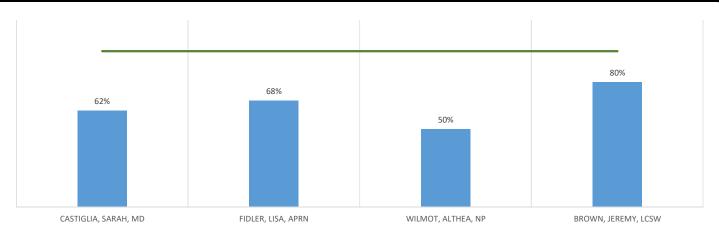
### **PRODUCTIVITY REPORT JANUARY 2024**

### AS 01/31/2024 Based on Completed Appointments

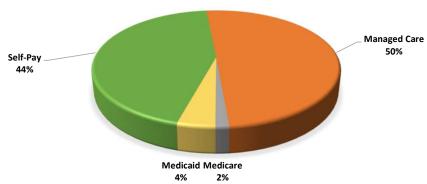
10 0-1, 0-1 : 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0										
ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average				
CASTIGLIA, SARAH, MD	18	19.5	351	217	62%	11.1				
FIDLER, LISA, APRN	16	14.5	232	158	68%	10.9				
WILMOT, ALTHEA, NP	16	1.0	16	8	50%	8.0				
ADULT CARE TOTALS		35.0	599	383	64%					

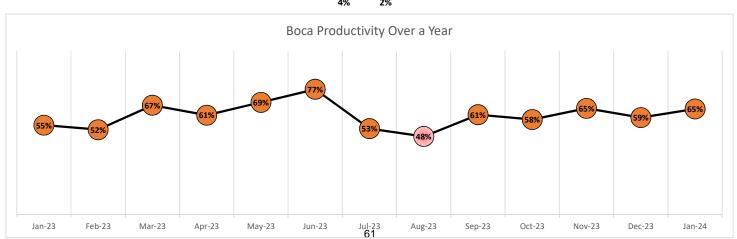
BEHAVIORAL HEALTH INTEGRATION									
BROWN, JEREMY, LCSW 10 3.0 <b>30 24 80% 8.0</b>									
BH INTEGRATION TOTALS 3.0 30 24 80%									

GRAND TOTAL	38.0	629	407	65%	



### **MEDICAL PAYER MIX**





#### **PRODUCTIVITY REPORT JANUARY 2024**

AS 01/31/2024 Based on Completed Appointments									
ADULT CARE									
Provider	Daily Target	Days Worked	Target for	Total for the	% Monthly Target Achieved	Daily Average			
			the Month	Month Seen	,				
LAM, MINH DAI, NP	16	13.0	208	259	125%	19.9			
TUSSEY, CLAUDIA, MD	18	20.0	360	340	94%	17.0			
ST. VIL, CARLINE, NP	16	15.5	248	247	100%	15.9			
ADULT CARE TOTALS		48.5	816	846	104%				

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

BEHAVIORAL HEALTH INTEGRATION							
BROWN, JEREMY, LCSW	10	16.5	164	141	86%	8.5	
HINTEGRATION TOTALS 16.5 164 141 86%							

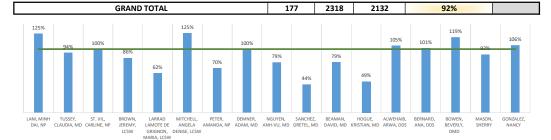
BEHAVIORAL HEALTH ADDICTION							
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW	10	19.0	190	118	62%	6.2	
MITCHELL, ANGELA DENISE, LCSW	8	1.0	8	10	125%	10.0	
BH ADDICTION TOTALS		20.0	198	128	65%		

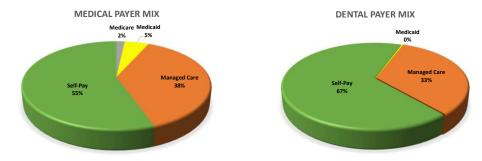
BEHAVIORAL HEALTH PSYCHIATRY							
PETER, AMANDA, NP	12	5.0	60	42	70%	8.4	
DEMNER, ADAM, MD	12	2.0	2	2	100%	1.0	
REHAVIORAL HEALTH PSYCHIATRY TOTALS 7.0 62 44 71%							

RESIDENT PSYCHIATRY								
NGUYEN, ANH-VU, MD	12	8.0	96	76	79%	9.5		
SANCHEZ, GRETEL, MD	12	6.0	72	32	44%	5.3		
BEAMAN, DAVID, MD	12	4.0	48	38	79%	9.5		
HOGUE, KRISTIAN, MD	12	7.5	90	44	49%	5.9		
RESIDENT PSYCHIATRY TOTAL		25.5	306	190	62%			

	DENTAL						
ALWEHAIB, ARWA, DDS	16	17	272	286	105%	16.8	
BERNARD, ANA, DDS	16	18.5	296	299	101%	16.2	
BOWEN, BEVERLY, DMD	16	2	32	38	119%	19.0	
DENTAL TOTALS		37.5	600	623	104%		

DENTAL HYGIENE							
MASON, SHERRY	8	19.5	156	143	92%	7.3	
GONZALEZ, NANCY	8	2	16	17	106%	8.5	
DENTAL HYGIENE TOTALS		21.5	172	160	93%		







**JUPITER** 

<51%

>=51% and < 80%

>= 80% and <100%

80%

PROPHETE, JOYCE, MD

>= 100%

### **PRODUCTIVITY REPORT JANUARY 2024**

### AS 01/31/2024 Based on Completed Appointments

**GRAND TOTAL** 

ZHANG, MICHAEL, MD

LANGLEY, TAMARA, NP 16 12.0 <b>192 147 77%</b>		ADULT CARE										
LANGLEY, TAMARA, NP       16       12.0       192       147       77%         FIDLER, LISA, APRN       16       2.0       32       29       91%         ADULT CARE TOTALS       34.5       593       481       81%	Provider	Provider   Daily Target   Days Worked   5     % Monthly Target Achieved   Days										
FIDLER, LISA, APRN 16 2.0 32 29 91%  ADULT CARE TOTALS 34.5 593 481 81%	ZHANG, MICHAEL, MD	18	20.5	369	305	83%	14.9					
ADULT CARE TOTALS 34.5 593 481 81%	LANGLEY, TAMARA, NP	16	12.0	192	147	77%	12.3					
	FIDLER, LISA, APRN	FIDLER, LISA, APRN         16         2.0         32         29         91%         14										
WOMENS HEALTH CARE	ADULT CARE TOTALS 34.5 593 481 81%											
WOMENS HEALTH CARE												
WOMEN HEALTH CARE			WOME	NS HEALTH CA	RE							

PROPHETE, JOYCE, MD	18	5.0	90	68	76%	13.6
WOMENS HEALTH CARE TOTALS		5	90	68	76%	
						•

683

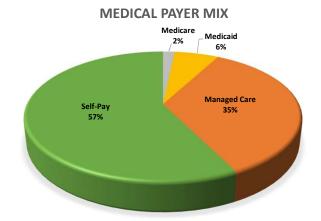
39.5

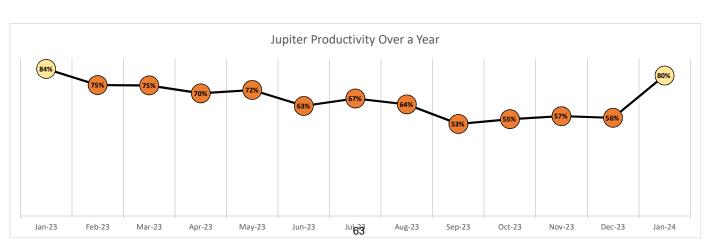
LANGLEY, TAMARA, NP

83%		91%	
	77%		76%

FIDLER, LISA, APRN

549





### **LAKE WORTH**

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

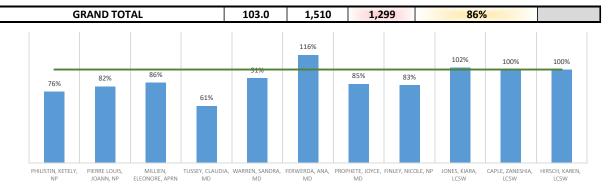
### **PRODUCTIVITY REPORT JANUARY 2024**

AS 01/31/2024 Based on Completed Appointments

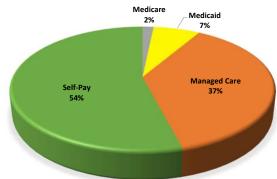
	ADULT CARE									
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average				
PHILISTIN, KETELY, NP	16	20.0	320	244	76%	12.2				
PIERRE LOUIS, JOANN, NP	16	19.0	304	249	82%	13.1				
MILLIEN, ELEONORE, APRN	8	3.5	28	24	86%	6.9				
TUSSEY, CLAUDIA, MD	18	1.0	18	11	61%	11.0				
WARREN, SANDRA, MD	18	9.5	171	155	91%	16.3				
				•						
ADULT CARE TOTALS		53.0	841	683	81%					

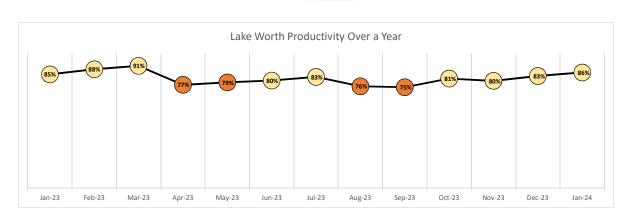
WOMEN'S HEALTH CARE								
FERWERDA, ANA, MD	18	7	109	126	116%	18.0		
PROPHETE, JOYCE, MD	18	11.5	207	175	85%	15.2		
FINLEY, NICOLE, NP	16	15	240	200	83%	13.3		
WOMEN'S HEALTH CARE TOTALS		33.5	556	501	90%			

	BEHAVIORAL HEALTH INTEGRATION							
JONES, KIARA, LCSW 10 13.5 105 107 102% 7.9								
CAPLE, ZANESHIA, LCSW	10	3	7	7	100%	2.3		
HIRSCH, KAREN, LCSW	8	0	1	1	100%			
BH INTEGRATION TOTALS		16.5	113	115	102%			



### **MEDICAL PAYER MIX**





### **LANTANA**

### **PRODUCTIVITY REPORT JANUARY 2024**

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

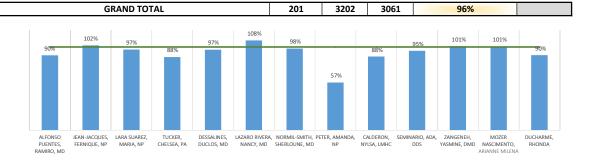
	ADULT CARE									
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average				
ALFONSO PUENTES, RAMIRO, MD	18	17.5	315	282	90%	16.1				
JEAN-JACQUES, FERNIQUE, NP	16	19.0	304	309	102%	16.3				
LARA SUAREZ, MARIA, NP	16	20.0	320	309	97%	15.5				
TUCKER, CHELSEA, PA	16	1.0	16	14	88%	14.0				
ADULT CARE TOTALS		57.5	955	914	96%					
	PED	IATRIC CARE								
DESSALINES, DUCLOS, MD	20	16	320	310	97%	19.4				
LAZARO RIVERA, NANCY, MD	20	15	300	324	108%	21.6				
NORMIL-SMITH, SHERLOUNE, MD	20	19.5	390	383	98%	19.6				
HERNANDEZ GARCIA, JOSE, MD	20	3	54	49	91%	16.3				
PEDIATRIC CARE TOTALS		53.5	1,064	1,066	100%					

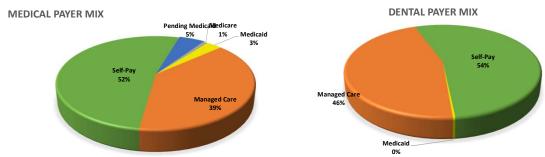
BEHAVIORAL HEALTH PSYCHIATRY							
PETER, AMANDA, NP 12 12.5 <b>150 86 57% 6.9</b>							
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		12.5	150	86	57%		

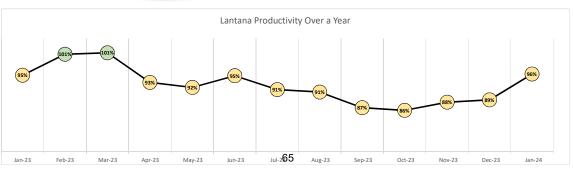
BEHAVIORAL HEALTH INTEGRATION						
CALDERON, NYLSA, LMHC	10	8.5	85	75	88%	8.8
BH INTEGRATION TOTALS		8.5	85	75	88%	

DENTAL						
SEMINARIO, ADA, DDS	16	19.0	304	290	95%	15.3
ZANGENEH, YASMINE, DMD	16	19.5	312	315	101%	16.2
DENTAL TOTALS		38.5	616	605	98%	

DENTAL HYGIENE									
MOZER NASCIMENTO, ARIANNE MILENA	8	18.5	148	149	101%	8.1			
DUCHARME, RHONDA	16	12.0	184	166	90%	13.8			
DENTAL HYGIENE TOTALS		30.5	332	315	95%				







**LEWIS** 

<51%

>=51% and < 80%

>= 80% and <100%

>= 100%

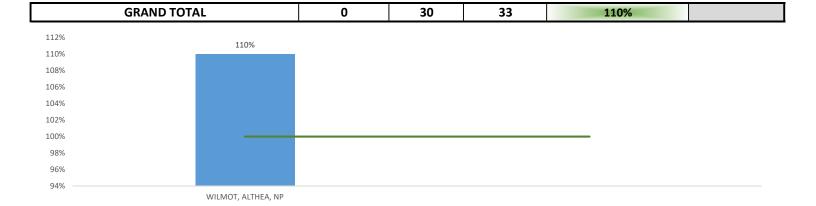
### **PRODUCTIVITY REPORT JANUARY 2024**

AS 01/31/2024 Based on Completed Appointments

ADULT CARE												
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average						
WILMOT, ALTHEA, NP	6	5.0	30	33	110%	6.6						
ADULT CARE TOTALS			30	33	110%							
		DELLAN/JOBAL I	ICALTII INITEC	DATION								

BEHAVIORAL HEALTH INTEGRATION											
BH INTEGRATION TOTALS		0	0	0							

BEHAVIORAL HEALTH ADDICTION										
BH ADDICTION TOTALS										



### **MEDICAL PAYER MIX**





### MANGONIA

### **PRODUCTIVITY REPORT JANUARY 2024**

AS 01	/31	/2024	Based	on	Com	oleted	Αp	point	tments

S 01/31/2024 Based on Completed Appointments										
ADULT CARE										
Provider	Daily Target	Days Worked	Target for	Total for the	% Monthly Target Achieved	Daily Average				
riovidei	the Mo	the Month	Month Seen	70 WOILTHY Target Achieved	Duny Average					
KOOPMAN, REBECCA SUE, PA	18	19.5	351	341	97%	17.5				
TUCKER, CHELSEA, PA	18	19.0	342	257	75%	13.5				
FERNANDEZ SANCHEZ, MARCO, NP	18	14.0	270	227	84%	16.2				
ADULT CARE TOTALS		52.5	963	825	86%					

<51% >=51% and < 80%

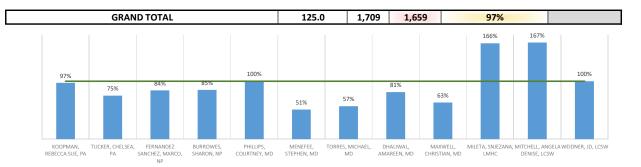
>= 80% and <100% >= 100%

	BEHAVIORAL HEALTH PSYCHIATRY									
BURROWES, SHARON, NP	12	5.0	60	51	85%	10.2				
PHILLIPS, COURTNEY, MD	12	1.0	1	1	100%	1.0				
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		6.0	61	52	85%					

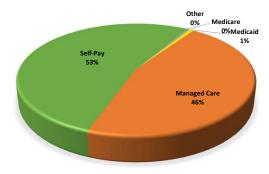
RESIDENT PSYCHIATRY									
MENEFEE, STEPHEN, MD	12	7.0	84	43	51%	6.1			
TORRES, MICHAEL, MD	12	6.0	72	41	57%	6.8			
DHALIWAL, AMAREEN, MD	12	7.5	90	73	81%	9.7			
MAXWELL, CHRISTIAN, MD	12	7.5	90	57	63%	7.6			
RESIDENT PSYCHIATRY TOTAL		28.0	336	214	64%				

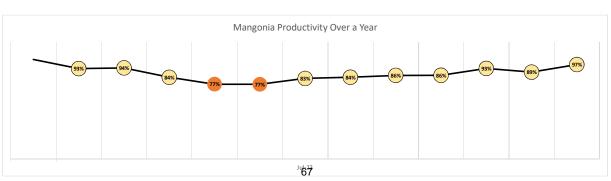
BEHAVIORAL HEALTH INTEGRATION									
BH INTEGRATION TOTALS		0.0	0	0					

BEHAVIORAL HEALTH ADDICTION									
MILETA, SNJEZANA, LMHC	10	20.0	200	331	166%	16.6			
MITCHELL, ANGELA DENISE, LCSW	8	16.5	132	220	167%	13.3			
WEIDNER, JD, LCSW	10	2.0	17	17	100%	8.5			
BH ADDICTION TOTALS		38.5	349	568	163%				



### **MEDICAL PAYER MIX**



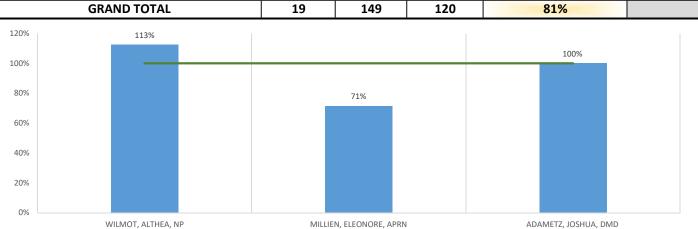


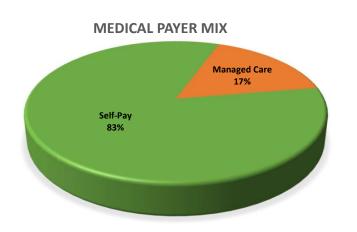
## MOBILE, PORT CLIN, JFK MIDDLE & LAKE WORH HIGH

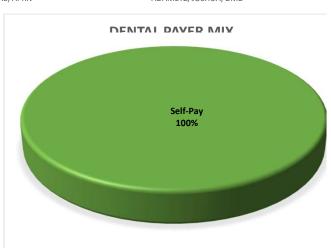
#### **PRODUCTIVITY REPORT JANUARY 2024**

AS 01/31/2024 Based on Complet	tea Appointments								
ADULT CARE									
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average			
WILMOT, ALTHEA, NP	6	4.0	24	27	113%	6.8			
MILLIEN, ELEONORE, APRN	8	14.0	112	80	71%	5.7			
ADULT CARE TOTALS		18	136	107	79%				

		D	ENTAL			
ADAMETZ, JOSHUA, DMD	6	1.0	13	13	100%	13.0
DENTAL TOTALS		1.0	13	13	100%	

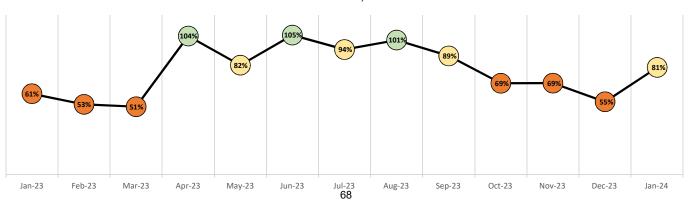






>= 80% and <100%

## Mobile Productivity Over a Year



### St ANN

### **PRODUCTIVITY REPORT JANUARY 2024**

ADULT CARE TOTALS

<51% >=51% and < 80% >= 8

18

>= 80% and <100%

50%

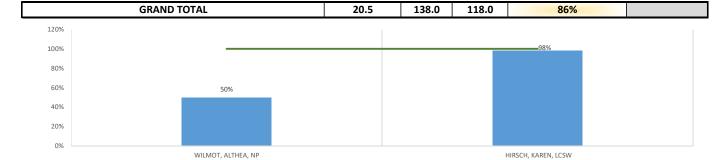
>= 100%

AS 01/31/2024 Based on Completed Appointments						
		ADULT CARE				
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
WILMOT, ALTHEA, NP	6	6.0	36	18	50%	3.0

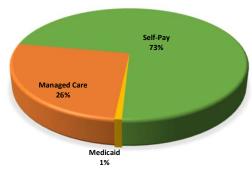
BEHAVIORAL HEALTH INTEGRATION								
HIRSCH, KAREN, LCSW	8	14.5	102	100	98%	6.9		
BH INTEGRATION TOTALS		14.5	102	100	98%			

6.0

	BEHAVIORAL HEALTH PSYCHIATRY								
BH PSYCHIATRY TOTALS		0.0	0	0					



## **MEDICAL PAYER MIX**





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

### PRODUCTIVITY REPORT JANUARY 2024

AS 01/31/2024 Based on Completed Appointment
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ADULT CARE									
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average			
CASTIGLIA, SARAH, MD	18	1.0	18	16	89%	16.0			
FIDLER, LISA, APRN	16	1.0	16	17	106%	17.0			
FLOREZ, GLORIA MATILDE, MD	18	19.5	351	343	98%	17.6			
LANGLEY, TAMARA, NP	16	0.5	8	7	88%	14.0			
NOUKELAK, GERMAINE, MD	18	17.5	333	365	110%	20.9			
STANEK, EWELINA, PA	16	16.5	264	234	89%	14.2			
WILMOT, ALTHEA, NP	16	2.5	40	31	78%	12.4			
ADULT CARE TOTALS		58.5	1,030	1,013	98%				

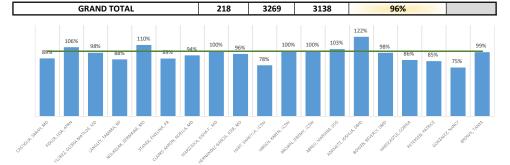
		PEDIA	TRIC CARE			
CLARKE-AARON, NOELLA, MD	20	15	300	281	94%	18.7
MARZOUCA, KISHA F., MD	20	17.5	350	351	100%	20.1
HERNANDEZ GARCIA, JOSE, MD	20	4	72	69	96%	17.3
PEDIATRIC CARE TOTALS		36.5	722	701	97%	

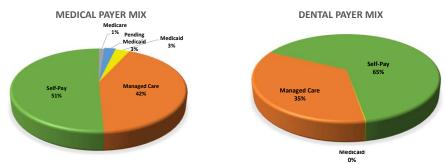
BEHAVIORAL HEALTH PSYCHIATRY							
BURROWES, SHARON, NP	12	13.5	162	127	78%	9.4	
BEHAVIORAL HEALTH PSYCHIATRY TOTALS 13.5 162 127 78%							

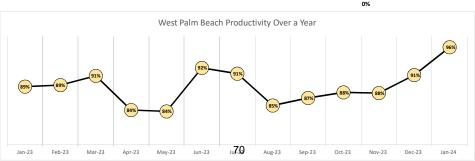
BEHAVIORAL HEALTH INTEGRATION						
HART, SHAKIYLA, LCSW	10	18.5	185	145	78%	7.8
HIRSCH, KAREN, LCSW	8	0.0	1	1	100%	
BROWN, JEREMY, LCSW	10	0.0	1	1	100%	
BH INTEGRATION TOTALS		18.5	187	147	79%	

DENTAL							
ABREU, MARIANA, DDS	16	18.5	296	306	103%	16.5	
ADAMETZ, JOSHUA, DMD	16	8.5	122	149	122%	17.5	
BOWEN, BEVERLY, DMD	16	18.5	296	289	98%	15.6	
DENTAL TOTALS		45.5	714	744	104%		

DENTAL HYGIENE								
HARDCASTLE, CORINA	8	19.0	152	131	86%	6.9		
PETERSEN, PATRICE	8 / 16 MDI	15.5	152	129	85%	8.3		
GONZALEZ, NANCY	8	1.0	8	6	75%	6.0		
BROWN, TANYA	New Provider 16 MDI	10.0	142	140	99%	14.0		
DENTAL HYGIENE TOTALS		45.5	454	406	89%			







## CL BRUMBACK PRIMARY CARE CLINICS BOARD OF DIRECTORS February 28, 2024

## 1. Description: Operations Report – January 2024

## 2. Summary:

This agenda item provides the following operations report for January 2024

- Clinic Productivity, Demographics, Payor Mix, Walk-In Dashboard, No-Show Dashboard and How Did you Hear About Us Dashboard.

## 3. Substantive Analysis:

In January, the Health Centers had a total of 9,594 unique patients and 13,861 visits across clinics, which is up 16% from last month. 39% of patients were from adult Primary Care, up 2% from last month, 24% from Dental, up 1% from last month, 13% of patients were Pediatric, down 1% from last month. In January, Lantana had the highest volume of patients, followed by West Palm Beach, then Mangonia. This is consistent with last month's volumes.

Our payer mix for January reflected 54% uninsured, consistent with previous month, 41% of patients were insured with a Managed Care plan and 4% insured by Medicaid, also consistent with last month.

60% of patients report as female and 40% male; 50% reported as white and 43% reported as Black or African American. The remaining 7% reported their race as Asian, multi-racial or other. 40% of patients report as Hispanic and 58% as non-Hispanic. And our largest age group continues to be those between the ages of 30-39 years old, representing 17% of total patients.

The language distribution by health center shows that English is the primary spoken language for most clinics, except for in Lantana where Spanish and Creole speaking patients more than double English-speaking patients. Delray has a growing population of Creole-speaking patients at 31%. Boca continues to lead the rest of the centers with a population of Portuguese speaking patients at 11%.

There were 2,651 walk-in visits in January; 21% in Medical, up 1% over prior month and 18% in Dental, also up 1% from prior month.

The health center with the highest number of walk-ins for Medical was the West Palm Beach center with 430 visits, or 23%. The center with the highest number of Dental walk-ins was Delray with 198 visits, or 25%.

The No-Show rate averaged 18% which was a 2% decrease over previous month. The No-Show rate decreased for both new patients as well as established patients. Together all departments had higher No-Shows between 10:40 AM to 3:20 PM. The

## CL BRUMBACK PRIMARY CARE CLINICS BOARD OF DIRECTORS February 28, 2024

Behavioral Health departments continue to have a higher percent of no-shows at 30% for January. Behavioral Health also had the highest percent of New Patient No-Shows. The dental departments had the lowest No-Show rates at 13%. For Dental the highest times for No-Shows was 10:00 AM – 2:00 PM.

In 2023 75% of patients selected Word of Mouth as how they heard about the health centers. That was followed their insurance company or the hospital both at 8%. 3% were from the maternity department at DOH and 2% came from the Lewis Center. This year to date, Word of Mouth, Insurance and Hospitals are still the highest percent.

## 4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes No
Net Operating Impact	N/A		Yes No

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

Reviewed for financial accuracy and compliance with purchasing procedure:

Jussica Cafarelli
— CA6A21FF2E**0048**ica Cafarelli
Interim VP & Chief Financial Officer

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J.	Reviewed/A <sub>1</sub>	pproveu	Dy C	սшшицее:

N/A	N/A
Committee Name	Date

## 6. Recommendation:

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

 Health Care District Palm Beach County

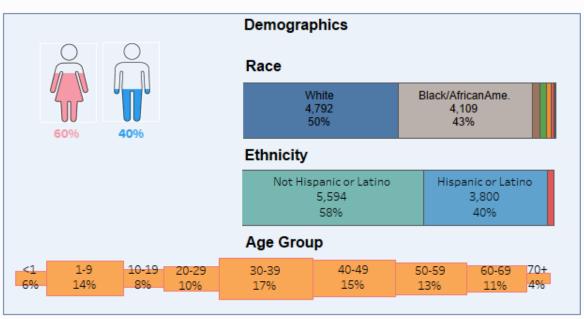
**Patients** 9,594

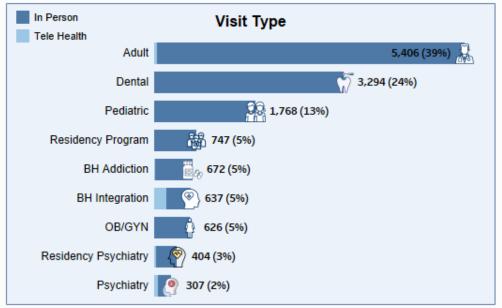
Patient **Visits** 13,861

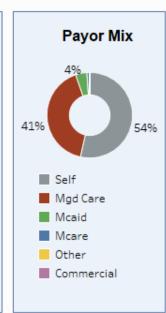
New **Patients** 2,525

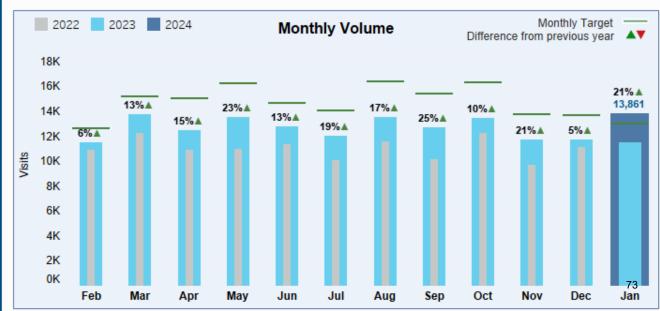
# **Monthly Productivity January 2024**

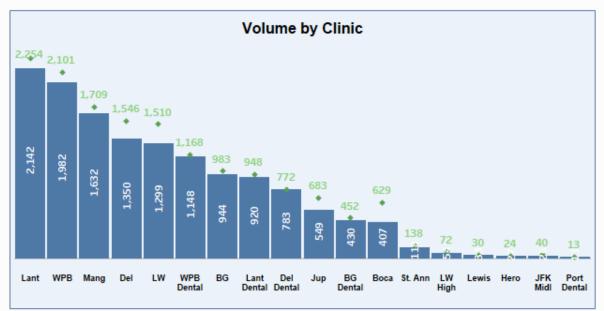


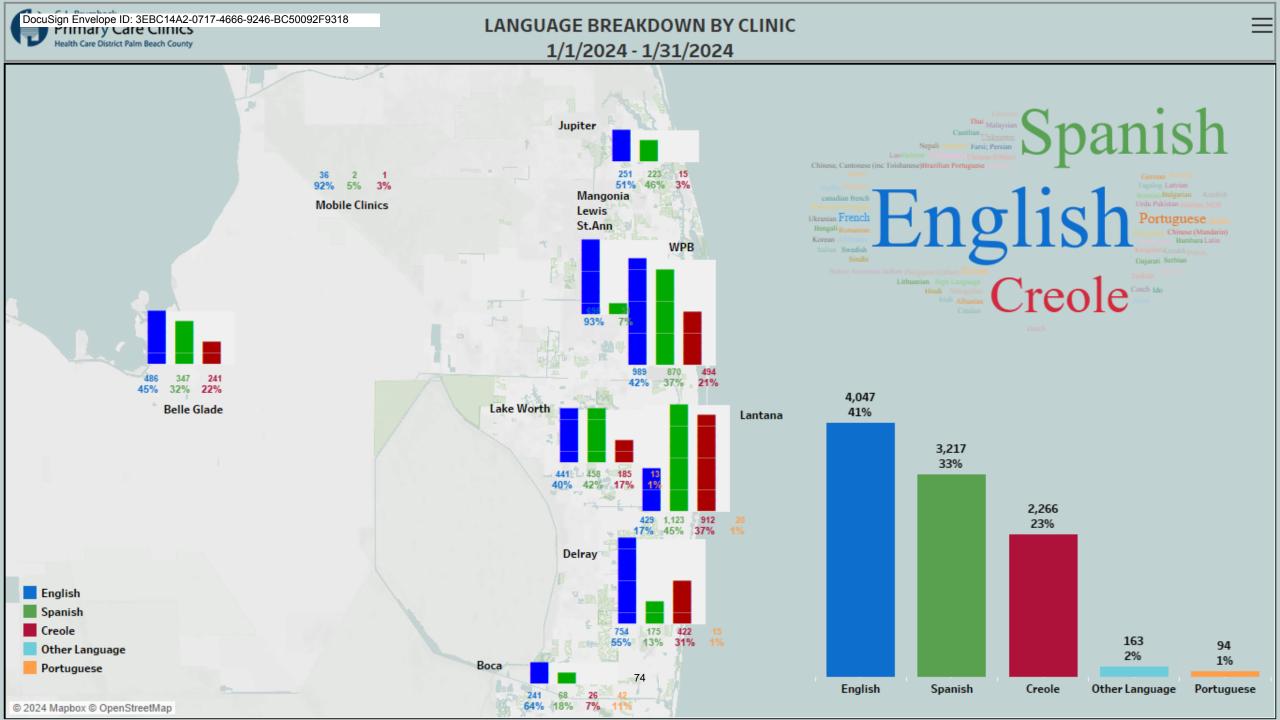






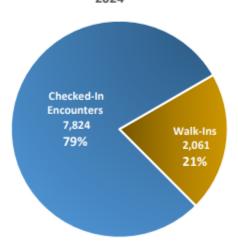






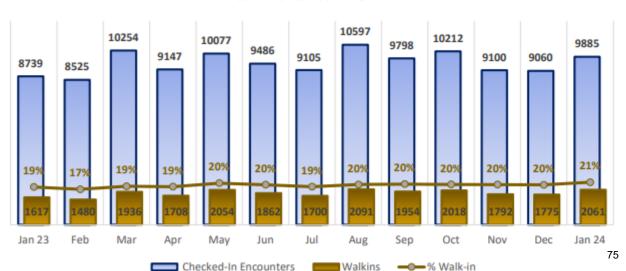
# Number and percentage of Walk-Ins seen during YTD 2024 at C. L. Brumback Primary Care Clinics

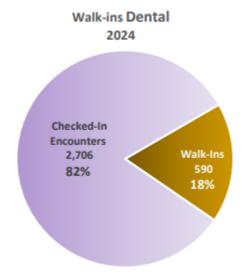
Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA 2024



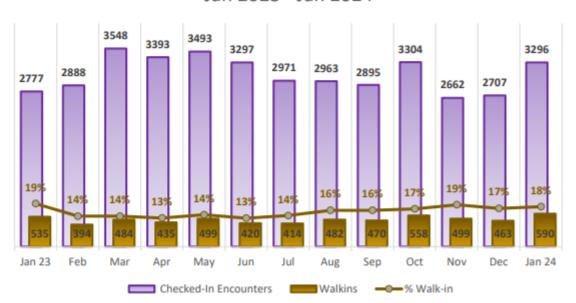
Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA by Clinic

Jan 2023 - Jan 2024

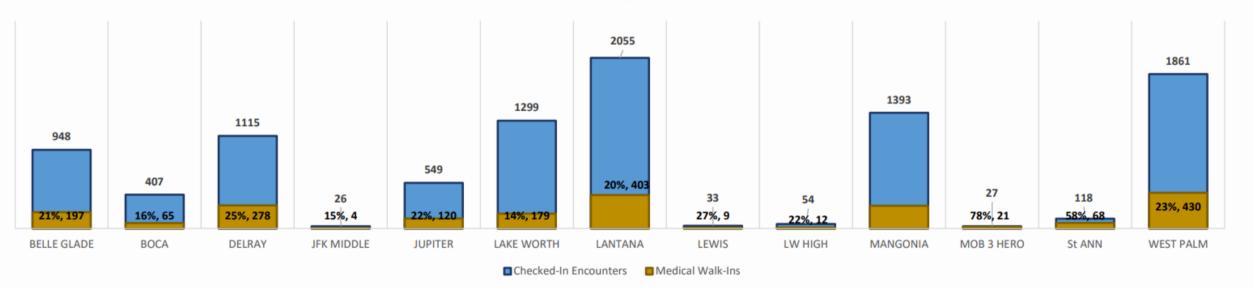




Walk-ins Dental Jan 2023 - Jan 2024

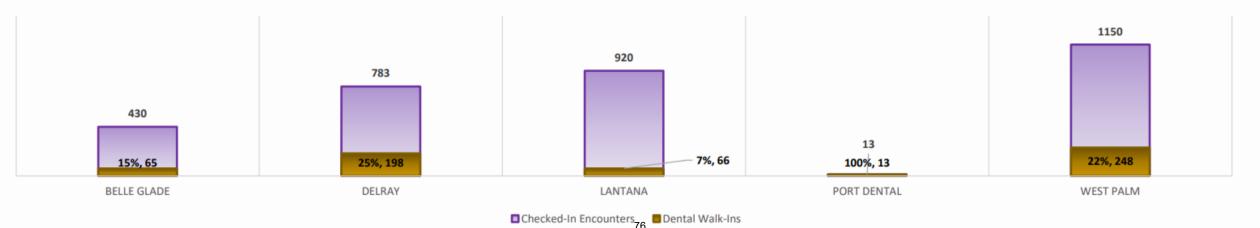


Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA by Clinic
Jan 2024



# Walk-ins Dental by Clinic

Jan 2024

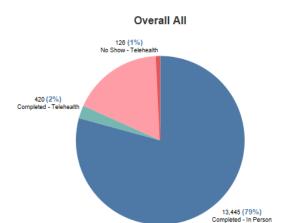




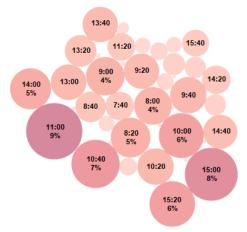
Filters

No Show Appointments Overall

Adult Care, Pediatric Care, Women's Health, Dental, BH Integration and BH Addiction (including resource schedules, excluding nurses) 1/1/2024 - 1/31/2024

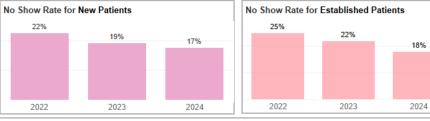


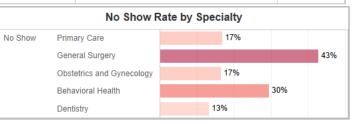
## Distribution of No Shows by Appointment Time (hour:min)







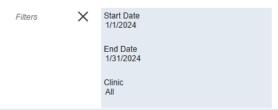




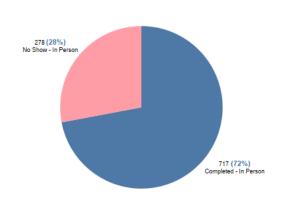


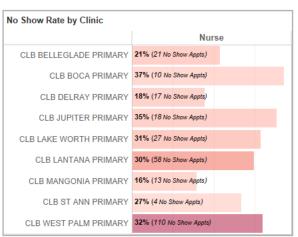


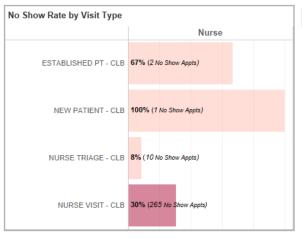
#### No Show Appointments Overall NURSES ONLY (including resource schedules) 1/1/2024 - 1/31/2024

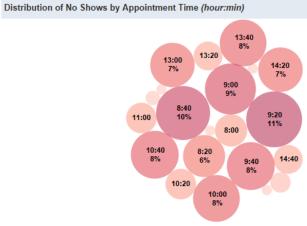


#### **Overall Nurses**









#### No Show Appointments by Provider

Nurse										
NURSE PEDIATRICS, LANTANA PRIMARY	NURSE PEDIATRICS, WEST PALM PRIMARY	NURSE, BELLEGLADE PRIMARY	NURSE, BOCA PRIMARY	NURSE, DELRAY PRIMARY	NURSE, JUPITER PRIMARY	NURSE, LAKE WORTH PRIMARY	NURSE, LANTANA PRIMARY	NURSE, MANGONIA PRIMARY	NURSE, ST ANN PRIMARY	NURSE, WEST PALM PRIMARY
18	24	21	10	17	18	27	40	13	4	86

