

BOARD OF DIRECTORS

March 29, 2023 12:45 P.M.

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



BOARD OF DIRECTORS MEETING AGENDA March 29, 2023 1515 N. Flagler Drive, Suite 101 West Palm Beach, FL 33401

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

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

- 1. Call to Order Melissa Mastrangelo, Chair
 - A. Roll Call
 - B. Affirmation of Mission: To provide compassionate, comprehensive health services to all Palm Beach County residents, through collaboration and partnership, in a culturally sensitive environment.
- 2. Agenda Approval
 - A. Additions/Deletions/Substitutions
 - B. Motion to Approve Agenda
- 3. Awards, Introductions and Presentations
 - A. Presentation on Epic (Dr. Ana Ferwerda)
- 4. Disclosure of Voting Conflict
- 5. Public Comment
- 6. Meeting Minutes
 - A. Staff recommends a MOTION TO APPROVE:
 Board Meeting Minutes of February 22, 2023 [Pages 1-11]
- 7. Consent Agenda Motion to Approve Consent Agenda Items

A. <u>ADMINISTRATION</u>

7A-1 **RECEIVE AND FILE:**

March 2023 Internet Posting of District Public Meeting https://www.hcdpbc.org/resources/public-meetings

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

Attendance tracking [Page 12]

C. L. Brumback Primary Care Clinics Board of Directors Meeting Agenda March 29, 2023

(Consent Agenda Cont.)

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

HRSA Digest (Andrea Steele) [Pages 13-27]

7A-4 Staff recommends a MOTION TO APPROVE:

Change in April 2023 Board Meeting Date (Alicia Ottmann) [Pages 28-29]

B. FINANCE

7B-1 Staff recommends a MOTION TO APPROVE:

District Clinic Holdings, Inc. Financial Report January 2023 (Candice Abbott) [Pages 30-45]

8. Regular Agenda

A. <u>ADMINISTRATION</u>

8A-1 Staff recommends a MOTION TO APPROVE:

FY23 School-Based Service Expansion Grant (Alicia Ottmann) [Pages 46-49]

8A-2 Staff recommends a MOTION TO APPROVE:

Change In Scope – Form 5B: C. L. Brumback PCC – John F. Kennedy Middle School & Lake Worth Community High School (Alicia Ottmann) [Pages 50-51]

B. EXECUTIVE

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

Executive Director Informational Update (Alicia Ottmann) [Pages 52-53]

C. <u>CREDENTIALING</u>

8C-1 Staff Recommends a MOTION TO APPROVE:

Licensed Independent Practitioner Credentialing and Privileging (Dr. Charmaine Chibar) [Pages 54-55]

C. L. Brumback Primary Care Clinics Board of Directors Meeting Agenda March 29, 2023

(Regular Agenda Cont.)

D. QUALITY

8D-1 Staff Recommends a MOTION TO APPROVE:

Quality Report (Dr. Charmaine Chibar) [Pages 56-90]

E. OPERATIONS

8E-1 Staff Recommends a MOTION TO APPROVE:

Operations Report- January 2023 (Marisol Miranda) [Pages 91-95]

9. AVP and Executive Director of Clinic Services Comments

10. Board Member Comments

11. Establishment of Upcoming Meetings

April 27, 2023 (HCD Board Room)

12:45 p.m. Board of Directors

May 24, 2023 (HCD Board Room)

12:45 p.m. Board of Directors

June 28, 2023 (HCD Board Room)

12:45 p.m. Board of Directors

July 26, 2023 (HCD Board Room)

12:45 p.m. Board of Directors

August 23, 2023 (HCD Board Room)

12:45 p.m. Board of Directors

September 27, 2023 (HCD Board Room)

12:45 p.m. Board of Directors

October 25, 2023 (HCD Board Room)

12:45 p.m. Board of Directors

November 28, 2023 (HCD Board Room)

12:45 p.m. Board of Directors

December 13, 2023 (HCD Board Room)

12:45 p.m. Board of Directors

C. L. Brumback Primary Care Clinics Board of Directors Meeting Agenda March 29, 2023

12. Motion to Adjourn

District Clinic Holdings, Inc. d.b.a. C.L. Brumback Primary Care Clinics Board of Directors Meeting Summary Minutes 02/22/2023

Present: Melissa Mastrangelo, Chair; Mike Smith, Vice-Chair; Julia Bullard, Secretary; Joseph Gibbons, Treasurer; Robert

Glass; William Johnson; Boris Seymore

Absent: Tammy Jackson-Moore; Alcolya St. Juste

Staff: Darcy Davis; Dr. Belma Andric; Bernabe Icaza; Candice Abbott; Alicia Ottmann; Dr. Charmaine Chibar; Alexa Goodwin; David Speciale; Marisol Miranda; Shauniel Brown; Andrea Steele; Macson Florvil; Luis Rodriguez; Annmarie Hankins; Dr. Ana

Ferwerda; Jon Van Arnam; Daniel Scott; Heather Bokor

Minutes Transcribed By: Shannon Wynn

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

Meeting Began at 12:52 p.m.

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

2. Agenda Approval		
2A. Additions/Deletions/ Substitutions	None.	
2B. Motion to Approve Agenda Items		VOTE TAKEN: Mr. Joseph Gibbons made a motion to approve the agenda. Mr. William Johnson duly seconded the motion. A vote was called and the motion passed unanimously.
3. Awards, Introductions and Presentations	Ms. Ottmann welcomed Mr. Seymore to the Board and is thankful he is partnering with us on our mission, and we look forward to meeting Ms. St. Juste. Mission Moment from Ms. Ottmann: In the past month of being here, I've realized the cultural belief is to have a "better tomorrow." Lisa and Marisol were lucky to travel to Orlando to learn about health services. CHS is working on a program called Children's Partnerships School– The mission is to move children from their challenges and become contributing members of society. This may help break the cycle of poverty.	No action necessary.
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.

6. Meeting Minutes 6A-1 staff Recommends a MOTION TO APPROVE: Board meeting minutes of January 25, 2023	There were no changes or comments to the minutes dated January 25, 2023.	VOTE TAKEN: As presented, Mr. Smith made a motion to approve the Board meeting minutes of January 25, 2023. Mr. Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.		
7. Consent Agenda – Motio	VOTE TAKEN: Mr. Glass motioned to approve the consent agenda. Ms. Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.			
7A. ADMINISTRATION				
7A-1. Receive & File: February 2023 Internet Posting of District Public Meeting	The meeting notice was posted.	Receive & File. No further action is necessary.		
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Receive & File. No further action is necessary.		
7A-3. Receive & File: HRSA Digest	Per the request of the clinic board, we will include the latest HRSA Digest as available.	Receive & File. No further action is necessary.		
7A-4. Staff recommends a MOTION TO APPROVE: Revised After-Hours Policy	This agenda item presents updates to the After Hours Policy. HRSA requires an After-Hours Policy to be in place for the continuity of care of patients who need assistance after regular working hours. This updated policy reflects current PCMH and HRSA requirements.	VOTE TAKEN: Mr. Glass motioned to approve the Revised After-Hours Policy agenda. Ms. Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.		

7B. FINANCE.

7B-1. Recommends a MOTION TO APPROVE:

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

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

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

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

Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$377k). The Medical clinic's YTD gross patient revenue was unfavorable to budget by (\$807k). The Medical clinic's total YTD revenue was unfavorable to budget by (\$198k). Total operating expenses of \$6.6M were favorable to budget of \$8.3M by \$1.6M or 19.9%. The positive variance is mostly due to salaries, wages, and benefits of \$1.4M, other supplies of \$128k, repairs and maintenance of \$115k, and lease and

VOTE TAKEN: Mr. Glass motioned to approve the District Clinic Holdings, Inc. Financial Report for December 2022. Ms. Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.

rental of \$171k. Staffing shortages, as well as expense timing are driving these favorable variances. Total YTD net margin was favorable to budget by \$1.9M or (34.7%).

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

8. REGULAR AGENDA

A. FINANCE

8A-1.Staff Recommends a MOTION TO APPROVE:

Federal Poverty Guidelines /Updated Sliding Fee Scale

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

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

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

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

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

VOTE TAKEN: Mr. Gibbons motioned to approve the Federal Poverty Guidelines /Updated Sliding Fee Scale. Mr. Smith duly seconded the motion. A vote was called, and the motion passed unanimously.

	Federal Poverty Level 100% or below Between 100% to 150% Between 150% to 175% Between 175% to 200% Over 200% Based on 2023 Federal Poverty Cregister- January 19, 2023 *Discounted charges are per visit pharmacy	·		
8B. EXECUTIVE 8B-1. Receive & File: Executive Director Informational Update	HRSA-required submissions were were provided. CY2022 Uniform Data System (U The health center submitted its ar 2/15/2023. FY23 Ending HIV Epidemic Grant Submitted before the due date of Clinic Updates Delray Beach Clini Atlantis Clinic cons Jupiter Clinic expa conversations have Boca Clinic market	Receive & File. No further action is necessary.		

	scheduled for 4/10/23.	
	Ms. Mastrangelo asked if the Board members could attend the open house scheduled for 4/10/2023 in Boca.	
	Mr. Icaza stated that the Board members could attend but refrain from going together or speaking to other Board members. The gathering of two or more Board members constitutes a meeting.	
	Mr. Gibbons stated you could discuss anything, just not anything that would come before this committee.	
	Ms. Ottmann said it would be best to mingle with others at the open house beside the Board members just to be safe.	
8C. QUALITY		
8D-1. Staff Recommends a MOTION TO APPROVE: Quality Reports	This agenda item presents the updated Quality Improvement & Quality Updates: • Quality Council Meeting Minutes February 2023 • UDS Report – YTD • Provider Productivity –January 2023 PATIENT SAFETY & ADVERSE EVENTS Patient safety and risk, including adverse events, peer review and chart review, are brought to the board "under separate cover" on a quarterly basis. PATIENT SATISFACTION AND GRIEVANCES Patient relations are to be presented as a separate agenda item. QUALITY ASSURANCE & IMPROVEMENT American Heart Association (AHA) Target Type 2 Diabetes Quality Collective: Our health center was one of three FQHCs invited to participate in an exclusive diabetes quality improvement opportunity. This opportunity is a three-year project made possible by the Know Diabetes by HeartTM initiative. This AHA initiative is a national opportunity to	VOTE TAKEN: Mr. Gibbons made a motion to approve the Quality Reports as presented. Ms. Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.

engage FQHCs and health systems in identifying innovative ways to implement evidence-based guidelines for patients with diabetes and cardiovascular disease/risk factors. Our virtual kickoff meeting was held on 1/24/2023.

UTILIZATION OF HEALTH CENTER SERVICES

Individual monthly provider productivity is stratified by the clinic.

Mr. Johnson stated that our goals are higher than State and National average. He would like to know if our goal is unrealistic.

Dr. Chibar stated the goal is not unrealistic; pre-pandemic, the clinics were reaching those goal numbers or coming close to getting them.

Mr. Gibbons confirmed the goals are based on historical data.

Dr. Andric stated every three years, we renew our SACG grant. This is when we can reset our goal. HRSA doesn't tell us how to set up our goals. It's up to us to chase what goals we want to push for.

Ms. Mastrangelo asked if the depression screening was just for BH visits.

Dr. Chibar stated depression screening is for all visits, starting with children ages 12 and older.

8E. OPERATIONS

8E-1. Staff Recommends a MOTION TO APPROVE:

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

Clinic Productivity, Demographics, Payor Mix and Agricultural Status.

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

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

10. Board Member Comments	None.	No action necessary.
9. AVP and Executive Director of Clinic Services Comments	None.	No action necessary.
	Mr. Smith would like a breakdown of migrant and agricultural workers. Ms. Steele stated we could bring back a needs assessment to show a breakdown of the migrant and agricultural population.	
	Agricultural Status averaged 5.2% but varied between clinics. 34% of patients in Belle Glade reported as Agricultural workers. 1% of Mangonia, Lewis Center and Lantana patients reported as Agricultural Workers. Mobile and Boca clinics reported 0 Agricultural workers. All other clinics reported as 2%.	
	Our largest age group was those between 30-39 years old. In January, our Homeless population was 23.4% which is lower than the previous 7 months.	
	Our payer mix for January was 51% uninsured, which was 2% less than the previous month. 43% of patients were Managed Care and 4% were Medicaid. 61% of patients were female. 50% of patients reported as White and 41% as Black or African American. Of those patients, 39% reported as Hispanic.	

11. Establishment of		
Upcoming Meetings	March 29, 2023 (HCD Board Room)	No action necessary.
	12:45 p.m. Board of Directors	
	April 26, 2023 (HCD Board Room)	
	12:45 p.m. Board of Directors	
	May 24, 2023 (HCD Board Room)	
	12:45 p.m. Board of Directors	
	June 28, 2023 (HCD Board Room)	
	12:45 p.m. Board of Directors	
	July 26, 2023 (HCD Board Room)	
	12:45 p.m. Board of Directors	
	August 23, 2023 (HCD Board Room)	
	12:45 p.m. Board of Directors	
	September 27, 2023 (HCD Board Room)	
	12:45 p.m. Board of Directors	
	October 25, 2023 (HCD Board Room)	
	12:45 p.m. Board of Directors	
	November 28, 2023 (HCD Board Room)	
	12:45 p.m. Board of Directors	
	December 13, 2023 (HCD Board Room)	
	12:45 p.m. Board of Directors	

12. Motion to Adjourn	Ms. Mastrangelo motioned to adjourn the public meeting immediately following the conclusion of the Closed meeting.	VOTE TAKEN: Mr. Gibbons made a motion to adjourn. Mr. Smith duly seconded the motion. A vote was called, and the motion passed unanimously.
13. Closed Meeting: [Under Separate Cover]	There being no further business, the meeting was adjourned at 2:19 p.m.	No action necessary.

Minutes Submitted by: _		
	Signature	Date

C. L. Brumback Primary Care Clinics

Board of Directors

Attendance Tracking

	01/25/23	02/22/23	03/29/23	04/26/23	05/24/23	06/28/23	07/26/23	08/23/23	09/27/23	10/25/23	11/28/23	12/13/23
Mike Smith	Х	Х										
Melissa Mastrangelo	х	х										
Julia Bullard	х	х										
Joseph Gibbons	х	х										
John Casey Mullen	X											
James Elder	Α								1	-		
Irene Figueroa	Α											
Tammy Jackson-Moore	E	Α										
Robert Glass	X (ZOOM)	Х										
William Johnson	x	x										
Boris Seymore		х										
Alcolya St. Juste		Α										

X= Present

C= Cancel

E= Excused

A= Absent

1. Description: HRSA Dige	est	
2. Summary:		
Per the request of the clinic b	oard, we will include the	he latest HRSA Digest as available.
3. Substantive Analysis:		
The March HRSA Digest hig Prevention Week, and update		Compliance FAQs, National Poison -19 vaccines.
4. Fiscal Analysis & Econor	nic Impact Statem	ent:
	Amount	Budget
Capital Requirements		Yes No No
Annual Net Revenue		Yes 🗌 No 🔀
Annual Expenditures		Yes 🗌 No 🔀
Reviewed for financial accuracy and on N/A Candice Abbott VP & Chief Financial Officer		
5. Reviewed/Approved by C	Committee:	
Committee Name		Date Approved
6. Recommendation: Staff recommends Board Recommends Boa	eive and file the HRSA	Digest.
Bernabe Icaza VP & General Counsel		

Andrea Steele

andria Stuli

AVP, Corporate Quality

HRSA Primary Health Care Digest Andrea Steele From:

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

To: Subject:

P&I Wrap-up, Compliance FAQs, National Poison Prevention Week Tuesday, March 14, 2023 10:41:10 AM

Date:

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

A newsletter from the Bureau of Primary Health Care				
2				
March 14, 2023				
TODAY! HRSA Technical Assistance: Health Center Excellence in Family Planning	Computer			
Our webinar supports HRSA's recent release of the <u>Family Planning</u> and <u>Related Services in Health Centers Technical Assistance</u> <u>Resource</u> (PDF). Learn how colleagues built care delivery models tailored to community needs and fostered partnerships to support access to family planning services. We'll feature speakers from three health centers.	?			

Join the session

Join by phone: 833-568-8864 Webinar ID: 160 541 9036

Health Center Program Compliance FAQs

Our new <u>Health Center Program Compliance FAQs webpage</u> consolidates compliance-related FAQs that were previously published on six different pages. We also updated some of the FAQs and added new ones, in response to stakeholder feedback. We plan to refresh this page regularly and to improve the format so it is easy to use. These FAQs are one of your first stops for answers to your Health Center Program compliance questions. If you have additional questions, use the <u>BPHC Contact Form</u>.

New and Improved

National Poison Prevention Week

Next week (March 19-25) is National Poison Prevention Week (#NPPW). HRSA's Poison Help website includes to highlight the dangers of poisoning for people of all ages and promote community involvement in poisoning prevention.





Jump To: COVID-19 | Colorectal Cancer Awareness Month | Behavioral Health | HIV | Workforce | Additional Resources

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

What's New

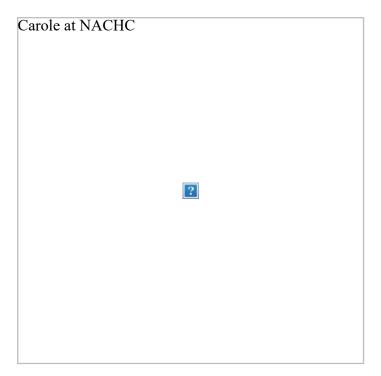
"We Went to You"

Speaking at the National Association of Community Health Centers (NACHC) Policy & Issues Forum last week, HRSA Administrator Carole Johnson reflected on how the federal government relied on health centers during the pandemic, "When we asked, what do we do to support the hardest hit people in the country? We went to you."

Training & Technical Assistance



Visit the training calendar to learn details or register for



HRSA Associate Administrator Jim Macrae participated in the opening session, describing the many successes of the Health Center Program. HRSA-funded health centers serve 30 million patients and have administered an impressive 500,000 COVID-19 vaccines since new funding became available in December (overall, HRSA-supported health centers have administered more than 23 million vaccines). But raw numbers give only a partial view of the program's impact.

"We need stories to make the data come alive," Jim said. He asked audience members to visit our <u>Health Center Stories</u> webpage for examples and to share their own success stories with BPHC to help publicize the innovative work they are doing across the country. (Email <u>HRSA Health Center Stories</u> for possible promotion on the webpage, in a HRSA newsletter, or on HRSA social media. Our webpage includes guidance on submitting photos, including release forms.)

Jim also spoke about the challenges health center staff have faced. BPHC's Health Center Workforce Well-being Survey had about 60,000 participants. Later this year, we will share the results – first with participating health centers, and then national data will be publicly available. We know the results will illustrate both positive developments and areas of strain. (The results will inform HRSA's – and others' – program and policy development and training and TA efforts. Visit HRSA's webpage for more about the timeline and data usage.)

In other developments, Jim highlighted the rollout of Uniform Data System Patient-Level Submission (UDS+) in partnership with health centers, which will improve data collection. BPHC will also pilot a new program in selected states to help health centers take advantage of new payment models incorporating

events.

Through March 21

COVID-19 Response Program Office Hours

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

HRSA TA: Health Center Excellence in Family Planning

Tuesday, March 14 2:00-3:00 p.m. ET Join the session

Join by phone: 833-568-

8864

Webinar ID: 160 541 9036

PCHP NCC Progress Report/EDM Instructions O&A

Tuesday, March 14 2:00-3:00 p.m. ET Join the session

Join by phone: 833-568-

8864

Webinar ID: 160 875 9124

Identification and Evidence-Based Interventions for Treating Anxiety and Depression

Tuesday, March 14 2:00-3:30 p.m. ET Registration page

Lessons Learned from the HRSA Patient-Centered Medical Home Coaching Pilot

Hosted by the National Committee for Quality Assurance Wednesday, March 15 11:00 a.m.-noon ET Registration page

HHS HIV Summit

Hosted by HHS Wednesday, March 15 Noon-3:00 p.m. ET Registration page

Data Discovery,

value-based care.

Updated Patient Targets Releasing Soon

This month, HRSA will begin a staggered release of updated patient targets for Health Center Program (H80) award recipients. We will email Authorizing Officials (AO) and Project Directors (PD), beginning with award recipients with January budget period start dates. The message will include a link to the updated patient target and a deadline for confirmations, questions, and adjustment requests. It will also communicate whether the health center will complete a fiscal year (FY) 2024 Service Area Competition (SAC) or Budget Period Progress Report (BPR).

Make sure AO and PD contact information is up-to-date in HRSA's Electronic Handbooks (EHBs) to ensure your health center receives the message in a timely manner.



Health centers that will complete an FY 2024 SAC should confirm or

request adjustment to their patient target by the deadline in their email to ensure that the SAC Service Area Announcement Table (SAAT) is accurate. Response is optional for health centers that will submit an FY 2024 BPR.

See our <u>Patient Target FAQs</u> for more information. Submit questions using the <u>BPHC Contact Form</u>. Under "Health Center Program," select "Patient Targets."

Introducción al Alcance del Proyecto del Programa para los Centros de Salud

We developed this <u>short video</u> as part of our effort to make Health Center Program resources more accessible for our Spanish-speaking audience. Health Center Scope of Project refers to the activities a health center carries out that are supported by their HRSA-approved budget. The video introduces and clarifies foundational elements of Health Center Scope of Project, including its five components and helpful resources. Find the video and the accompanying slide deck on the <u>Scope of Project Resources webpage</u>.

TODAY! Primary Care HIV Prevention Non-Competing

Behavioral Health, and Public Housing Communities

Hosted by the National Center for Health in Public Housing (NCHPH) Wednesday, March 15 1:00-2:00 p.m. ET Registration page

Strengthening Resilience: Activating Sources that Restore Balance from

Stress (with live interpretation in Spanish) Hosted by the Migrant Clinicians Network Wednesday, March 15 1:00-2:00 p.m. ET Registration page

The Role of Technology in Patient Safety and Patient Engagement

Co-hosted with AHRQ, CDC, CMS, IHS, NIH, as well as the National Practitioner Data Bank Wednesday, March 15 2:00-4:00 p.m. ET Registration page

Using Bi-Directional Text Messaging to Engage Patients in Chronic Disease Management

Co-hosted by NACHC (through a cooperative agreement with CDC) and the American Medical Association Wednesday, March 15 3:00-3:45 p.m. ET Registration page **1.0 CME available **

UDS Mapper Advanced Topic: Using the UDS Mapper for Service Area

Mapping Thursday, March 16 2:00-3:00 p.m. ET

Registration page

Pharmacy Office Hours: Developing a Pharmacy Residency Program

Continuation Progress Report and Supplemental Funding

HRSA released a Non-Competing Continuation (NCC) progress report and an Electronic Document Management (EDM) submission for Primary Care HIV Prevention (PCHP) award recipients. Last week's Digest mentioned pre-recorded technical assistance (TA) webinars. Due to technical issues, we could not post the recordings as expected. Join today's webinar for an overview of the instructions, including how to request additional funding, followed by Q&A.

2:00-3:00 p.m. ET Join the session

Join by phone: 833-568-8864 Webinar ID: 160 875 9124

PCHP award recipients can access their NCC progress reports or EDM submissions in EHBs. Instructions and informational slides are available on the PCHP TA webpage.

HRSA Recognized with Sunshine Week Award for Streamlining Publication of UDS Information

Sunshine Week promotes and celebrates access to public information. The Department of Justice recognized HRSA with a 2023 Sunshine Week Award for our work to streamline the disclosure of information from the UDS. Our new process simplifies how we work with UDS submitters and conduct internal reviews. It allows us to post information in HRSA'sElectronic Reading Room in a timely manner.

HHS Announces the Availability of \$25 Million to Expand Primary Care – Including Mental Health – Services in Schools

See the <u>press release</u> for the FY 2023 School-Based Service Expansion (SBSE) notice of funding opportunity (NOFO, HRSA-23-097). HRSA will make \$25 million available for approximately 70 awards. Applicants can visit the <u>FY 2023 SBSE TA webpage</u> for resources.

Optimizing Virtual Care Journey Maps

Since March 2022, the Optimizing Virtual Care (OVC) award has allowed awardees to systematically design, implement, and evaluate ways to use innovative technologies and virtual

Hosted by NACHC Thursday, March 16 2:00-3:00 p.m. ET Registration page

Approaches to Address Social Determinants of Behavioral Health

Thursday, March 16 4:00-5:00 p.m. ET Registration page

Tracer Methodology in Accreditation Surveys

Hosted by The Joint Commission Monday, March 20 1:00-2:00 p.m. ET Registration page, use subscription key: *TJCEd*

Implementation of Timely and Effective Transitional Care Management Processes

Hosted by Community Health Center, Inc. Tuesday, March 21 3:00-4:00 p.m. ET Registration page

Upcoming

What You Need to Know About Managing Data in Value Based Care Contracts

Hosted by the Health Information Technology, Evaluation, and Quality Center Wednesday, March 22 2:00-3:00 p.m. ET Registration page

Health Centers Serving Veterans – Learn about the New PACT Health Benefits

Hosted by NACHC Wednesday, March 22 2:00-3:00 p.m. ET Registration page care models. Through collaborative learning, evaluation activities, and awardee feedback, HRSA created journey maps that describe issues patient populations experience in accessing, receiving, and engaging in virtual care. Journey maps provide innovative and actionable strategies for health centers to promote health equity in virtual care access and delivery. Access them on the OVC webpage and use them to promote equity in planning or implementing virtual care programs at your health center.

Quarterly 340B Program Registration

Quarterly 340B Program site registration is open from April 1 to 15. Health centers will be able to register a site that has been verified as implemented and with a site status reflected as "active" in EHBs Form 5B through Friday, May 26. After that date, the system will close to prepare for the July 1 start.

Email the 340B Prime Vendor Program or call 888-340-2787 (Monday-Friday, 9:00 a.m.-6:00 p.m. ET) to register a new site or ask questions. You will need to provide the following information when calling:

- Health center name.
- Site/clinic name.
- Site IDs for all sites.
- HRSA/BPHC grant number.
- Contact name and email address.
- Authorizing official name and email address.

The authorizing official will receive an email message that the account is unlocked and a registration may be submitted.

HRSA's Photo Contest for Black Maternal Health Week

Black Maternal Health Week is April 11-17. HRSA invites health centers to send photos that capture how you are improving health outcomes for Black women before, during, and after pregnancy. Get details, including on how to submit and how the photos may be used, on HRSA's webpage.

CMS COVID-19 PHE Overview Fact Sheet

Check out CMS' new fact sheet, <u>CMS Waivers</u>, <u>Flexibilities</u>, and the <u>Transition Forward from the COVID-19 Public Health Emergency</u> (PDF). It clarifies their policies on COVID-19-related topics, telehealth, and health care access. CMS will

Key Strategies for Change Management in Community and Migrant Health Centers

Hosted by the National Center Farmworker Health Wednesday, March 22 2:30-3:45 p.m. ET Registration page

Weight Stigma in the Health Care Setting

Tuesday, March 28 3:00-4:00 p.m. ET Registration page

Today with Macrae: Health Center Program Updates

Tuesday, March 28 3:00-4:00 p.m. ET Access information coming soon

Preparing the Health Center Workforce for the Post COVID-19 Era

Hosted by NCHPH Wednesday, March 29 1:00-2:00 p.m. ET Registration page

Navigating Ethics & Equity in a COVID Aware World

Hosted by the National Health Care for the Homeless Council (NHCHC) Wednesday, March 29 3:00-4:00 p.m. ET Registration page

Health Justice in Practice – Supporting Survivors of Intimate Partner Violence and Exploitation Who are Living with HIV (with live interpretation in ASL and

Spanish)
Hosted by Health Partners on
IPV + Exploitation
Thursday, March 30
Noon-1:30 p.m. ET
Registration page

Bridging the Medical Technology Gap: The Impact of New continue to provide updates on its <u>Current Emergencies</u> <u>webpage</u>.

COVID-19

TODAY! COVID-19 Response Program Office Hours

The CDC-funded National Resource Center for Refugees, Immigrants and Migrants translates COVID-19 information into 40+ languages. Join today's session to hear from their communication strategist about new toolkits. Though some information may be geared toward COVID-19 Response Program participants, we encourage *all* HRSA-supported health centers to attend.

1:00-2:00 p.m. ET Registration page

Colorectal Cancer Awareness Month

Cancer Moonshot Colorectal Cancer Forum

HRSA Associate Administrator Jim Macrae participated on a panel about health care disparities in last Friday's White House event. (His is the second of three panel discussions in the event.) Watch the recording if you missed it.

Technology on Diabetes Management

Hosted by NCHPH Thursday, March 30 1:00-2:00 p.m. ET Registration page

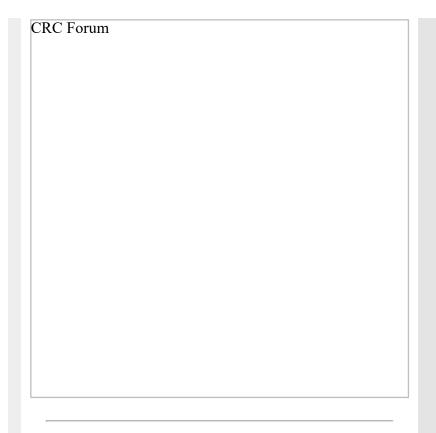
Addressing Diabetes Risk Factors in School-Aged Children: Bright Bodies + at Yale School of Medicine Hosted by the School-Based Health Alliance Thursday, March 30 2:00-3:00 p.m. ET Registration page

Community-Centered Approaches to Healthcare: Introduction to the Community-Centered Health Home Model Hosted by NHCHC Thursday, March 30 3:00-4:00 p.m. ET Registration page

Oral Health Access for Residents of Public Housing

Hosted by the National Network for Oral Health Access and the National Nurse-Led Care Consortium Wednesday, April 5 3:00-4:00 p.m. ET Registration page

Webinars are hosted by HRSA unless otherwise noted.



HRSA Award Recipients Recognized for Advancing Colorectal Cancer Screenings

Each March, the National Colorectal Cancer Roundtable (NCCRT) recognizes those who make significant progress in achieving colorectal cancer screening rates of 80% and higher in



their community. Congratulations to the two HRSA-funded health centers and one Primary Care Association included among the 2023 honorees:

- Central Texas Community Health Centers received the grand prize for its work with Dell Medical School to ensure that patients with abnormal test results got a follow-up colonoscopy in a timely manner.
- Honorees include Gaston Family Health Services (North Carolina) and the Ohio Association of Community Health Centers.

NCCRT will celebrate these and other national achievements in a webcast next week; access details and registration on the 2023 awardees webpage.

Next month, NCCRT will join us to demonstrate how health centers can use their updated guide, <u>STEPS for Increasing</u>

<u>Colorectal Cancer Screening Rates – A Manual for Primary</u> <u>Care Practices</u>. Our webinar will also feature a health center whose case study appears in the guide.

STEPing up Colorectal Cancer Screenings

Tuesday, April 4 3:00-4:00 p.m. ET Registration page

Behavioral Health

Identification and Evidence-Based Interventions for Treating Anxiety and Depression

These sessions are part of a practice-focused Community of Practice for behavioral health providers working in health centers. Today's focuses on functional analysis, mindfulness, and the importance of awareness. The next session (Tuesday, March 28) focuses on behavioral activation and practical applications for treating depression and anxiety. Join either or both, even if you did not attend previous sessions.

TODAY, and Tuesday, March 28 2:00-3:30 p.m. ET Registration page

Integrated Substance Use Disorder Training Program

This program will fund training that expands the number of clinicians who care for individuals in need of mental health and addiction prevention, treatment, and recovery services in underserved, community-based settings. Visit HRSA's NOFO webpage to apply by Tuesday, March 21.

HIV

HHS HIV Summit

Join a virtual summit focusing on federal efforts, clinical perspectives, and community efforts to address the HIV epidemic. It will align National Women and Girls HIV/AIDS Awareness Day, National Youth HIV/AIDS Awareness Day, and National Native HIV/AIDS Awareness Day in one conversation.

Wednesday, March 15 Noon-3:00 p.m. ET



Workforce

Health Center Onboarding Checklist

New to the Association of Clinicians for the Underserved's STAR² Center's resource library, the <u>Health Center</u> <u>Onboarding Checklist</u> provides a structure and process for welcoming and integrating new hires at health centers. The customizable tool includes a background on onboarding, key components of the onboarding process, an editable template, and a baseline list of documents required as part of the process.

Integrated Substance Use Disorder Training Program

See the announcement above.

NTTAP Learning Collaboratives

Visit the registration pages for dates, times, and more information:

• Structural Competency Learning Group for Health Center Operations

Health Partners on IPV + Exploitation and Health Outreach Partners joined together to present an opportunity for health center operations leaders to learn, analyze, and discuss structural factors that cause health inequities and lead to higher risk of harm, including intimate partner violence, exploitation, and human trafficking. The group will focus on creating a culture of care and change. Sessions will be held in English with Spanish interpretation. Registration page; apply by Friday, March 24.

Children and Adolescents and Social Determinants of Health (SDOH)

The School-Based Health Alliance announces two opportunities on SDOH screening: one for health centers interested in launching a screening program, the other for those interested in improving/expanding an SDOH screening program. Registration page; apply by Friday, March 17.

Additional Resources

31st Annual Midwest Stream Forum for Agricultural Worker Health

The National Center for Farmworker Health's annual conference provides agricultural worker-specific professional development experiences for individuals in all disciplines within migrant health. It offers a diverse program featuring sessions on clinical topics, lay health outreach, research, health equity, SDOH, and leadership development. Earn continuing education credits for attending. Visit the registration page for more information.

In case you missed it:

Visit the Primary Health Care Digest archive.

Do you forward the Digest to others?

Encourage them to subscribe.



Sign up for eNews

More HRSA email updates / Unsubscribe | Help Health Resources and Services Administration

5600 Fishers Lane | Rockville, MD 20857

This email was sent to a steele@hcdpbc.org using GovDelivery Communications Cloud on behalf of: HRSA \cdot 5600 Fishers Lane \cdot Rockville, MD 20857



From: Health Resources and Services Administration https://www.energy.com>

Sent: Friday, March 17, 2023 3:42 PM

To: Andrea Steele

Subject: BPHC Bulletin: Updated Guidance on COVID-19 Vaccines

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



Below we share two important, recent updates related to COVID-19 vaccines.

Bivalent Pfizer-BioNTech COVID-19 Vaccine as Booster Dose for Certain Children Ages 6 Months through 4 Years

On Thursday, March 16, CDC recommended the Pfizer-BioNTech COVID-19 bivalent vaccine as a booster for children ages 6 months-4 years. See the <u>CDC recommendation</u>.

These recommendations follows FDA's $\underline{\mathsf{March}\ 14\ \mathsf{amendment}}$ of the emergency use authorization (EUA) of the Pfizer-BioNTech COVID-19 bivalent vaccine.

Moderna Monovalent COVID-19 Vaccine Expiration

The Moderna *monovalent* COVID-19 vaccine for ages 6+ expires in early April. Consult <u>CDC's</u> <u>web content on interchangeability of COVID-19 vaccine products</u> for guidance on completing primary series vaccination for patients who have received an initial dose or doses of the Moderna *monovalent* vaccine.

CDC also offers guidance on disposing of expired vaccine product on its <u>Identifying</u>, <u>Disposing</u>, and <u>Reporting COVID-19 Vaccine Wastage website</u>.

COVID-19 Response Program Office Hours

If you have questions, bring them to our next Office Hours! Even if your health center does not order vaccines (or any COVID-19 supplies) through HRSA, you're welcome to attend.

Tuesday, March 28 1:00-2:00 p.m. ET Registration page NOTE: We've extended this webinar series. Even if you previously registered for past office hours, you need to register *again* for this new set of sessions.

Though some information may be geared toward COVID-19 Response Program participants, these office hours are open to *all* HRSA-supported health centers. We encourage all health centers to register.

You may also submit questions via the **BPHC Contact Form**.



Sign up for eNews

More HRSA email updates / Unsubscribe | Help Health Resources and Services Administration 5600 Fishers Lane | Rockville, MD 20857

This email was sent to asteele@hcdpbc.org using GovDelivery Communications Cloud on behalf of: HRSA \cdot 5600 Fishers Lane \cdot Rockville, MD 20857



1.	Description:	Change in A	pril Meeting	Date
----	---------------------	-------------	--------------	-------------

2. Summary:

We respectfully request that the Board agree to change the April meeting date from April 26, 2023, to April 27, 2023.

3. Substantive Analysis:

Per HRSA requirements, board meetings are required to be held once monthly. Due to the HCD strategic planning meeting being held on April 26, 2023, we are requesting to move the April meeting one day later.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements		Yes No No
Annual Net Revenue		Yes No No
Annual Expenditures		Yes No No

Reviewed for financial accuracy and compliance with	n purchasing procedure:
N/A	
Candice Abbott VP & Chief Financial Officer	
Reviewed/Approved by Commi	ittee:
N/A	
Committee Name	Date Approved

5. Recommendation:

Staff recommends the Board approve our request to change the April meeting from April 26, 2023, to April 27, 2023.

Approved for Legal sufficiency:

Bernabe Icaza

Bernabe Icaza VP & General Counsel

alicia Ottmann

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

1.	Description:	District	Clinic	Holdings,	Inc.]	Financial	Report	January

2. Summary:

The January 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 are incorporated into the financial statement presentation.

4. Fiscal Analysis & Economic Impact Statement:

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

^{*}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:

100	N/A	maning procedure.
	Candice Abbott VP & Chief Financial Officer	
5.	Reviewed/Approved by Comm	nittee:
	N/A	
	Committee Name	Date

6. Recommendation:

Staff recommends the Board approve the January 2023 District Clinic Holdings, Inc. financial statements.

Approved for Legal sufficiency:

Bernahe Icaza

VP & General Counsel

Candice Abbott VP & Chief Financial Officer

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



MEMO

To: Finance Committee

From: Candice Abbott

Chief Financial Officer

Date: March 29, 2023

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

The January financial statements represent the financial performance through the fourth month of the 2023 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, cash decreased \$1.0M as a result of normal operations, and the shortfall will be subsidized in the upcoming months. Due from Other Governments decreased \$753k as a result of grant funds received. New financial line items are reflected for "Right of Use Assets" and "Lease Liability" following the fiscal year 2022 implementation of Governmental Accounting Standards Board (GASB) Statement No. 87, Leases (GASB 87) and GASB Statement No. 96, Subscription-Based Information Technology Arrangements (GASB 96).

On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$682k) or (18.7%). Gross patient revenue YTD was favorable to budget by \$415k. Total YTD revenue was unfavorable to budget by (\$465k), this was partially due to a favorable timing difference in PRF revenue recognized offsetting net patient revenue. Operational expenses before depreciation were favorable to budget by \$2.6M due mostly to positive variances in salaries, wages, and benefits of \$2.0M, purchased services of \$146k, other supplies of \$171k, repairs and maintenance \$107k, and lease and rental of \$237k and an unfavorable variance in other expense (\$96k) related to employee incentives allocation. Total YTD net margin was a loss of (\$5.3M) compared to the budgeted loss of (\$8.2M) resulting in a favorable variance of \$2.9M or (35.0%).

Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$521k). The Medical clinics YTD gross patient revenue was favorable to budget by (\$8k). The Medical clinics total YTD revenue was unfavorable to budget by (\$364k). Total operating expenses of \$8.5M were favorable to budget of \$10.8M by \$2.3M or 21.2%. The positive variance is mostly due to salaries, wages, and benefits of \$1.8M, other supplies of \$142k, repairs and maintenance \$133k, and lease and rental of \$216k. Staffing shortages as well as expense timing are driving these favorable variances. Total YTD net margin was favorable to budget by \$2.6M or (35.5%).

Net patient revenue YTD for the Dental clinics was unfavorable to budget by (\$231k) or (26.3%). The Dental clinics total YTD gross patient revenue was favorable to budget by \$24k. Increased charity care and contractual allowances negatively impacted net patient revenue results. Total YTD operating expenses of \$1.6M were favorable to budget by \$301k. Total YTD net margin was (\$765k) compared to a budgeted loss of (\$1.0M) for a favorable variance of \$240k or (23.9%).

DISTRICT CLINIC HOLDINGS, INC. COMPARATIVE STATEMENT OF NET POSITION

			Increase
	Jan 31, 2023	Dec 31, 2022	(Decrease)
Assets			
Cash and Cash Equivalents	(3,028,008)	(1,980,785)	\$ (1,047,223)
Accounts Receivable, net	1,226,681	1,191,980	34,701
Due from Other Governments	4,564,666	5,317,981	(753,315)
Other Current Assets	194,944	141,923	53,020
Right of Use Assets	3,239,214	3,239,214	-
Net Investment in Capital Assets	2,691,883	2,621,993	69,890
Total Assets	\$ 8,889,379	\$ 10,532,306	\$ (1,642,927)
Liabilities			
Accounts Payable	329,027	323,303	5,724
Deferred Revenue	55,720	55,720	-
Other Current Liabilities	1,456,184	1,792,038	(335,854)
Lease Liability	3,475,476	3,475,476	-
Non-Current Liabilities	1,036,288	1,098,595	(62,307)
Total Liabilities	6,352,694	6,745,131	(392,437)
Deferred Inflows of Resources			
Deferred Inflows- Other Post Employment Benefits	\$ 33,656	\$ 33,656	\$ -
Net Position			
Net Investment in Capital Assets	2,691,883	2,621,993	69,890
Unrestricted	(188,854)	1,131,526	(1,320,379)
Total Net Position	2,503,029	3,753,518	(1,250,489)
Total Liabilities, Deferred Inflows of Resources			
and Net Position	\$ 8,889,379	\$ 10,532,306	\$ (1,642,927)

Note: Amounts may not foot due to rounding.

District Clinic Holdings, Inc. Statement of Revenues and Expenses FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

Current Month Actual

Fiscal Year To Date Fiscal Year To Date

Actual							FISCAI Y	ear 10 Date	?				
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
2,394,233	2,224,379	169,854	7.6%	2,081,642	312,591	15.0% Gross Patient Revenue	9,524,697	9,109,788	414,909	4.6%	8,285,079	1,239,618	15.0%
764,288	578,357	(185,931)	(32.1%)	628,878	(135,410)	(21.5%) Contractual Allowances	3,120,663	2,368,815	(751,848)	(31.7%)	2,312,735	(807,928)	(34.9%)
1,145,797	941,649	(204,148)	(21.7%)	865,037	(280,760)	(32.5%) Charity Care	4,041,699	3,858,980	(182,719)	(4.7%)	3,409,227	(632,472)	(18.6%)
95,985	319,123	223,139	69.9%	219,498	123,513	56.3% Bad Debt	784,916	1,305,548	520,632	39.9%	1,201,246	416,330	34.7%
2,006,069	1,839,129	(166,940)	(9.1%)	1,713,412	(292,657)	(17.1%) Total Contractuals and Bad Debts	7,947,278	7,533,343	(413,935)	(5.5%)	6,923,208	(1,024,070)	(14.8%)
345,863	505,545	(159,682)	(31.6%)	299,550	46,313	15.5% Other Patient Revenue	1,383,451	2,065,955	(682,504)	(33.0%)	1,633,614	(250,163)	-15%
734,027	890,795	(156,768)	(17.6%)	667,780	66,247	9.9% Net Patient Revenue	2,960,870	3,642,400	(681,530)	(18.7%)	2,995,485	(34,615)	(1.2%)
30.66%	40.05%			32.08%		Collection %	31.09%	39.98%			36.16%		
937,662	1,011,875	(74,213)	(7.3%)	1,329,092	(391,429)	(29.5%) Grant Funds	3,884,218	4,047,500	(163,282)	(4.0%)	4,565,104	(680,885)	(14.9%)
-	-	-	0.0%	-	-	0.0% Other Financial Assistance	738,416	381,143	357,273	93.7%	-	738,416	0.0%
1,648	2,460	(812)	(33.0%)	1,815	(166)	(9.2%) Other Revenue	32,803	9,840	22,963	233.4%	17,358	15,446	89.0%
939,311	1,014,335	(75,024)	(7.4%)	1,330,907	(391,596)	(29.4%) Total Other Revenues	4,655,438	4,438,483	216,955	4.9%	4,582,461	72,977	1.6%
1,673,338	1,905,130	(231,792)	(12.2%)	1,998,686	(325,349)	(16.3%) Total Revenues	7,616,308	8,080,883	(464,575)	(5.7%)	7,577,946	38,362	0.5%
						Direct Operational Expenses:							
1,498,332	1,856,685	358,353	19.3%	1,476,762	(21,570)	(1.5%) Salaries and Wages	6,403,290	8,163,840	1,760,550	21.6%	5,928,917	(474,373)	(8.0%)
459,199	484,176	24,976	5.2%	436,127	(23,072)	(5.3%) Benefits	1,698,780	1,936,702	237,923	12.3%	1,629,282	(69,497)	(4.3%)
24,018	63,786	39,769	62.3%	37,055	13,037	35.2% Purchased Services	108,381	255,145	146,764	57.5%	208,612	100,231	48.0%
60,778	103,083	42,305	41.0%	72,989	12,211	16.7% Medical Supplies	468,533	412,332	(56,201)	(13.6%)	241,829	(226,703)	(93.7%)
39,697	59,966	20,269	33.8%	23,292	(16,406)	(70.4%) Other Supplies	68,461	239,865	171,404	71.5%	52,939	(15,522)	(29.3%)
56,783	75,160	18,377	24.5%	41,584	(15,199)	(36.5%) Medical Services	234,116	300,639	66,523	22.1%	166,094	(68,021)	(41.0%)
45,378	48,958	3,580	7.3%	41,925	(3,453)	(8.2%) Drugs	178,116	195,832	17,717	9.0%	176,957	(1,158)	(0.7%)
37,415	53,684	16,269	30.3%	36,605	(810)	(2.2%) Repairs & Maintenance	107,314	214,736	107,422	50.0%	205,613	98,299	47.8%
115,290	165,334	50,044	30.3%	108,509	(6,781)	(6.2%) Lease & Rental	424,614	661,334	236,720	35.8%	420,108	(4,506)	(1.1%)
9,620	11,522	1,901	16.5%	7,354	(2,266)	(30.8%) Utilities	35,089	46,086	10,997	23.9%	29,141	(5,948)	(20.4%)
(53,654)	75,576	129,230	171.0%	14,842	68,496	461.5% Other Expense	398,176	302,303	(95,873)	(31.7%)	127,946	(270,230)	(211.2%)
4,622	4,083	(540)	(13.2%)	4,026	(596)	(14.8%) Insurance	20,020	16,330	(3,690)	(22.6%)	16,104	(3,916)	(24.3%)
2,297,479	3,002,011	704,532	23.5%	2,301,071	3,592	0.2% Total Operational Expenses	10,144,889	12,745,143	2,600,254	20.4%	9,203,544	(941,345)	(10.2%)

District Clinic Holdings, Inc. Statement of Revenues and Expenses FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

			rent Month							ear To Date			
			Actual						Fiscal Y	ear To Date			
						Net Performance before Depreciation							
(624,141)	(1,096,881)	472,740	(43.1%)	(302,385)	(321,757)	106.4% Overhead Allocations	(2,528,581)	(4,664,260)	2,135,679	(45.8%)	(1,625,598)	(902,983)	55.5%
25,656	33,250	7,594	22.8%	31,642	5,986	18.9% Depreciation	102,624	132,999	30,376	22.8%	126,569	23,945	18.9%
						Overhead Allocations:							
9,332	10,722	1,390	13.0%	7,813	(1,519)	(19.4%) Risk Mgt	37,703	42,889	5,186	12.1%	33,080	(4,623)	(14.0%)
73,183	109,939	36,756	33.4%	156,448	83,265	53.2% Rev Cycle	327,029	439,754	112,725	25.6%	626,016	298,987	47.8%
1,955	6,555	4,600	70.2%	2,520	565	22.4% Internal Audit	8,157	26,221	18,064	68.9%	5,628	(2,529)	(44.9%)
20,328	32,746	12,418	37.9%	37,890	17,562	46.3% Home Office Facilities	115,465	130,985	15,520	11.8%	123,381	7,916	6.4%
49,055	41,476	(7,579)	(18.3%)	42,646	(6,409)	(15.0%) Administration	193,108	165,906	(27,202)	(16.4%)	166,034	(27,074)	(16.3%)
41,032	99,947	58,915	58.9%	61,095	20,063	32.8% Human Resources	293,954	399,789	105,835	26.5%	199,222	(94,732)	(47.6%)
14,912	27,766	12,854	46.3%	15,869	957	6.0% Legal	43,483	111,063	67,580	60.8%	47,017	3,534	7.5%
3,403 6,995	4,171 11,059	768 4,064	18.4% 36.7%	3,556 7,487	153 492	4.3% Records 6.6% Compliance	13,608 26,665	16,684 44,236	3,076 17,571	18.4% 39.7%	12,987 25,546	(621) (1,119)	(4.8%) (4.4%)
1,238	4,143	2,905	70.1%		(1,238)	0.0% Reimburse	9,423	16,570	7,147	43.1%	23,340	(9,423)	0.0%
37,089	46,251	9,162	19.8%	72,644	35,555	48.9% IT Operations	159,483	185,006	25,523	13.8%	328,716	169,233	51.5%
	16,858	2,569	15.2%	9,731	(4,558)	(46.8%) IT Security	62,138	67,432	5,294	7.9%	48,693		
14,289	,		8.9%	38,470	(4,558) (177,974)	(462.6%) IT Applications	739,398	950,779	211,381	7.9% 22.2%	48,693 184,215	(13,445)	(27.6%)
216,444	237,695	21,251		,			,			30.4%	,	(555,183)	(301.4%)
38,519	57,288	18,769	32.8%	53,742	15,223	28.3% Security Services	159,438	229,151	69,713		215,399	55,961	26.0%
6,747	5,383	(1,364)	(25.3%)		(6,747)	0.0% Supply Chain	24,739	21,534	(3,205)	(14.9%)	-	(24,739)	0.0%
20,102	33,245	13,143	39.5%	32,359	12,257	37.9% Finance	91,419	132,981	41,562	31.3%	130,593	39,174	30.0%
11,419	16,960	5,541	32.7%	5,905	(5,514)	(93.4%) Public Relations	42,086	67,840	25,754	38.0%	23,636	(18,450)	(78.1%)
12,123	4,750	(7,373)	(155.2%)	9,382	(2,741)	(29.2%) Information Technology	47,011	19,000	(28,011)	(147.4%)	34,679	(12,332)	(35.6%)
7,118	8,052	934	11.6%	7,425	307	4.1% Corporate Quality	30,586	32,207	1,621	5.0%	30,302	(284)	(0.9%)
14,647	6,503	(8,144)	(125.2%)	11,317	(3,330)	(29.4%) Project MGMT Office	45,503	26,013	(19,490)	(74.9%)	46,882	1,379	2.9%
12,608	10,156	(2,452)	(24.1%)	-	(12,608)	0.0% HIM	60,321	40,626	(19,695)	(48.5%)	-	(60,321)	0.0%
17,566	21,541	3,975	18.5%	-	(17,566)	0.0% Coding	76,934	86,163	9,229	10.7%	-	(76,934)	0.0%
25,533	41,476	15,943	38.4%	-	(25,533)	0.0% IT Service Center	105,395	165,905	60,510	36.5%	-	(105,395)	0.0%
655,637	854,683	199,046	23.3%	576,298	(79,339)	(13.8%) Total Overhead Allocations	2,713,046	3,418,733	705,687	20.6%	2,282,025	(431,021)	(18.9%)
2,978,772	3,889,944	911,172	23.4%	2,909,011	(69,761)	(2.4%) Total Expenses	12,960,559	16,296,876	3,336,316	20.5%	11,612,138	(1,348,422)	(11.6%)
\$ (1,305,434)	\$ (1,984,814) \$	679,380	(34.2%) \$	(910,325) \$	(395,110)	43.4% Net Margin	\$ (5,344,251) \$	(8,215,993) \$	2,871,742	(35.0%)	(4,034,191)	\$ (1,310,060)	32.5%
(90,033)	153,690	243,723	158.6%	-	90,033	0.0% Capital	-	614,759	614,759	100.0%	100,000	100,000	100.0%
\$ - 5	\$ - \$	-	0.0% \$	- \$	-	0.0% General Fund Support/ Transfer In	\$ 4,128,850 \$	6,625,000 \$	2,496,150	37.7%	-	\$ (4,128,850)	0.0%

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

	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Year to Date
Gross Patient Revenue	2,421,964	2,173,673	2,534,826	2,394,233	-	-		-	-	-	-	-	9,524,697
Contractual Allowances	942,552	616,457	797,366	764,288	_	_	-	_	-	-	-	-	3,120,663
Charity Care	1,080,772	818,987	996,143	1,145,797	-	-	-	-	-	-	-	-	4,041,699
Bad Debt	49,730	353,288	285,914	95,985	-	-	-	-	-	-	-	-	784,916
Other Patient Revenue	474,943	474,943	87,703	345,863	-	-	-	-	-	-	-	-	1,383,451
Net Patient Revenue	823,853	859,885	543,106	734,027	-	-	-	-	-	-	-	-	2,960,870
Collections %	34.02%	39.56%	21.43%	30.66%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	31.09%
Grant Funds	831,658	951,673	1,163,225	937,662	_	_	_	_	-	-	-	-	3,884,218
Other Financial Assistance	12,477	51,355	674,585		-	-	-	-	-	-	-	-	738,416
Other Revenue	624	29,490	1,042	1,648	-	-	-	-	-	-	-	-	32,803
Total Other Revenues	844,758	1,032,517	1,838,851	939,311	-	-	-	_	-	-	_		4,655,438
Total Revenues	1,668,611	1,892,402	2,381,957	1,673,338								_	7,616,308
Total Revenues	1,000,011	1,092,402	2,361,337	1,073,336				<u> </u>	<u>-</u>				7,010,308
Direct Operational Expenses:													
Salaries and Wages	1,713,850	1,402,443	1,788,664	1,498,332	-	-	-	-	-	-	-	-	6,403,290
Benefits	427,827	405,732	406,022	459,199	-	-	-	-	-	-	-	-	1,698,780
Purchased Services	13,764	60,480	10,119	24,018	-	-	-	-	-	-	-	-	108,381
Medical Supplies	35,872	230,443	141,439	60,778	-	-	-	-	-	-	-	-	468,533
Other Supplies	12,383	6,147	10,233	39,697	-	-	-	-	-	-	-	-	68,461
Medical Services	55,581	60,482	61,270	56,783	-	-	-	-	-	-	-	-	234,116
Drugs	37,475	49,341	45,922	45,378	-	-	-	-	-	-	-	-	178,116
Repairs & Maintenance	10,726	11,441	47,732	37,415	-	-	-	-	-	-	-	-	107,314
Lease & Rental	107,496	87,434	114,395	115,290	-	-	-	-	-	-	-	-	424,614
Utilities Other Expense	8,438	8,881	8,149	9,620	-	-	-	-	-	-	-	-	35,089 398,176
Insurance	115,489 6,154	74,228 4,622	262,113 4,622	(53,654) 4,622	-	-	-	-	-	-	-	-	20,020
		,,,,,,	.,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
Total Operational Expenses	2,545,056	2,401,675	2,900,679	2,297,479	-	-	-	-	-	-	-	-	10,144,889
Net Performance before Depreciation &													
Overhead Allocations	(876,445)	(509,273)	(518,722)	(624,141)	-	-	-	-	-	-	-	-	(2,528,581)
Depreciation	25,462	25,462	26,045	25,656	-	-	-	-	-	-	-		102,624
Overhead Allocations:													
Risk Mgt	11,692	7,282	9,397	9,332	_	_	_	_	_	_	_	_	37,703
Rev Cycle	63,371	103,816	86,659	73,183	-	-	-	_	-	_	_	-	327,029
Internal Audit	2,627	1,796	1,779	1,955	-	-	-	-	-	-	-	-	8,157
Home Office Facilities	30,821	31,492	32,824	20,328	-	-	-	-	-	-	-	-	115,465
Administration	46,107	48,941	49,005	49,055	-	-	-	-	-	-	-	-	193,108
Human Resources	76,105	96,165	80,652	41,032	-	-	-	-	-	-	-	-	293,954
Legal	3,344	12,867	12,360	14,912	-	-	-	-	-	-	-	-	43,483
Records	4,206	2,926	3,073	3,403	-	-	-	-	-	-	-	-	13,608
Compliance	6,347	6,648	6,675	6,995	-	-	-	-	-	-	-	-	26,665
Reimburse	2,482	1,671	4,032	1,238	-	-	-	-	-	-	-	-	9,423
IT Operations	35,658	44,142	42,594	37,089	-	-	-	-	-	-	-	-	159,483
IT Security	9,905	21,768	16,176	14,289	-	-	-	-	-	-	-	-	62,138
IT Applications	81,636	278,939	162,379	216,444	-	-	-	-	-	-	-	-	739,398
Security Services Supply Chain	39,124 6,253	39,146 5,354	42,649 6,385	38,519 6,747	-	-	-	-	-	-	-	-	159,438 24,739
Finance	24,232	19,591	27,494	20,102									91,419
Public Relations	10,421	9,413	10,833	11,419	_	_	_	_	_	_	_		42,086
Information Technology	10,834	10,976	13,078	12,123	-	_	-	_	_	_	_	_	47,011
Corporate Quality	8,434	7,268	7,766	7,118				-					30,586
Project MGMT Office	6,591	12,194	12,071	14,647	-	-	-	-	-	-	-	-	45,503
нім	8,351	19,826	19,536	12,608	-	-	-	-	-	-	-	-	60,321
Coding	21,345	13,076	24,947	17,566	-	-	-	-	-	-	-	-	76,934
IT Service Center	25,999	28,022	25,841	25,533	-	-	-	-	-	-	-	-	105,395
Total Overhead Allocations	535,885	823,319	698,205	655,637	-	-	-	-	-	-	-	-	2,713,046
Total Expenses	3,106,403	3,250,455	3,624,929	2,978,772	-	-	-	-	-	-	-	-	12,960,559
Net Margin	\$ (1,437,791) \$	(1,358,053) \$	(1,242,972) \$	(1,305,434) \$	- \$	- \$	- \$	- \$	- \$	- \$	- \$		\$ (5,344,251)
Capital	36,782	-	53,251	(90,033)	-	-	-	-	-	-	-	-	-
General Fund Support/ Transfer In	-	-	4,128,850	-	-	-	-	-	-	-	-	-	\$ 4,128,850
		_	_	_	_	_	_	_	_	•	_	_	

District Clinic Holdings, Inc.- Medical Statement of Revenues and Expenses by Location FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

FOR THE FOURTH MONTH ENDED JANUARY	Clinic	West Palm	Lantana	Delray	Belle Glade	Lewis	Lake Worth	Jupiter	West Boca	Subxone	Mobile	Mobile	Mobile	T-1-1
Gross Patient Revenue	Administration -	Beach Clinic 949,379	1,554,461	Clinic 579,296	585,055	13,995	1,126,179	403,513	245,297	443,252	Warrior -	Van Scout	Van Hero 34,407	Total 5,934,834
Contractual Allowances	_	260,538	304,586	176,120	147,691	39,382	399,227	116,009	128,885	193,436	1,623	_	9,376	1,780,624
Charity Care	-	368,754	710,369	220,453	227,404	11,917	485,941	117,545	81,814	91,471	1,023	-	5,340	2,321,008
Bad Debt	-	79,222	243,287	39,223	41,317	35,224	3,951	44,839	(2,078)	85,926	(1,149)	-	(2,224)	574,728
Total Contractual Allowances and Bad Debt	-	708,513	1,258,242	435,797	416,412	86,524	889,119	278,392	208,621	370,833	474	-	12,492	4,676,361
Other Patient Revenue	•	227,095	227,127	102,311	86,696	19,364	130,667	45,326	71,374	43,859	11,693	-	1,259	982,651
Net Patient Revenue	-	467,960	523,346	245,810	255,339	(53,165)	367,727	170,447	108,050	116,278	11,218	-	23,174	2,241,125
Collection %	0.00%	49.29%	33.67%	42.43%	43.64%	0.00%	32.65%	42.24%	44.05%	0.00%	#DIV/0!	0.00%	0.00%	37.76%
Grant Funds	538,789	551,380	566,783	226,208	334,241	4,815	389,262	111,545	129,694	424,768	14,062	22	30,853	3,323,383
Other Financial Assistance	120,959	105,464	119,301	60,718	66,464	10,885	66,551	19,969	19,710	50,531	2,000	2,067	-	649,065
Other Revenue	30,225	70	160	-	1,918	-	-	-	21	-	-	-	-	32,393
Total Other Revenues	689,972	656,913	686,244	286,927	402,623	15,700	455,812	131,515	149,424	475,299	16,062	2,089	30,853	4,004,841
Total Revenues	689,972	1,124,873	1,209,591	532,736	657,962	(37,464)	823,539	301,961	257,474	591,577	27,280	2,089	54,027	6,245,966
Direct Operational Expenses:	4 202 50-	670.016	700 700	262.024	400.000	22 ***	642.400	404 740	222.570	co2 222	2 ***	(0)	45.04.0	F 202 F24
Salaries and Wages	1,262,603	679,246	789,788	362,831 107,455	400,993	22,448	643,189	184,740	223,678	683,990 197,536	3,418	(0)	45,816	5,308,521
Benefits Purchased Services	350,644 58,325	149,992 535	218,314 93	107,455 185	112,464 8,810	3,727 1,097	164,934 12,217	46,910 2,898	47,903 6,749	197,536 8,425	1,748	-	14,134	1,416,214 99,333
Medical Supplies	58,325	82,302	68,187	52,752	52,928	9,199	37,558	20,658	19,558	51,568	609	-	-	399,766
Other Supplies	3,541	2,392	1,895	4,666	3,564	140	22,571	8,726	934	10,803	481	185	1,869	61,767
Medical Services	-	28,990	34,510	20,434	45,398	578	66,180	14,188	8,716	14,796	-	-	-	234,116
Drugs	-	39,916	46,920	25,206	19,130	-	845	856	5,042	39,190	-	-	0	177,104
Repairs & Maintenance	11,667	18,833	943	2,058	18,727	1,152	9,101	943	1,190	4,873	387	2,265	945	73,084
Lease & Rental	-	43,003	51,463	29,612	29,306	60	87,312	28,096	55,011	10,302	20	10	40	334,275
Utilities	-	1,703	1,678	491	8,543	1,055	5,157	2,783	2,448	3,424	2 244	-	440	27,607
Other Expense Insurance	96,588	38,780 1,212	38,056 1,576	23,778 855	64,137 810	3,942 386	55,822 574	15,638 215	14,895 346	20,700 1,822	2,344 3,972	216 3,972	3,972	377,143 19,711
Total Operational Expenses	1,783,368	1,086,906	1,253,424	630,323	764,810	43,784	1,105,458	326,652	386,469	1,047,429	12,979	6,648	67,216	8,528,641
Net Performance before Depreciation &	, ,	, ,	, ,	•	,	,	, ,	,	,		•	,	,	
Overhead Allocations	(1,093,395)	37,967	(43,833)	(97,587)	(106,847)	(81,248)	(281,919)	(24,690)	(128,995)	(455,852)	14,301	(4,559)	(13,189)	(2,282,676)
Depreciation	1,736	4,313	4,359	68	23,811	109	1,675	656	2,926	7,338	-	4,628	27,842	79,462
Overhead Allocations:														
Risk Managment Allocation	31,828	-	-	-	-	-	-	-	-	-	-	-	-	31,828
Internal Audit Allocation Administration Allocation	6,886 163,021	-	-	-	-	-	-	-	-	-	-	-	-	6,886 163,021
Legal Allocation	36,708								-	-				36,708
Records Allocation	11,488	-	-	-	_	-	_	-	_	-	-	-	-	11,488
Compliance Allocation	22,510	-	-	-	-	-	-	-	-	-	-	-	-	22,510
PROJ MGMT ALLOC	38,413	-	-	-	-	-	-	-	-	-	-	-	-	38,413
Finance Allocation	77,176	-	-	-	-	-	-	-	-	-	-	-	-	77,176
IT Allocation	39,686	-	-	-	-	-	-	-	-	-	-	-	-	39,686
CORP COMMUN ALLOC Supply Chain Alloc	35,528 20,885	-	-	-	-	-		-	-	-	-	-	-	35,528 20,885
IT OPERATIONS ALLOCATION	134,634	-	-	-	-	-	-	-	-	-	-	-	-	134,634
IT SECURITY ALLOCATION	52,457	-	-	-	-	-	-	-	-	-	-	-	-	52,457
CORP QUAL ALLOC Reimburse Alloc	25,821 7,955	-	-		-	-			-	-		-	-	25,821 7,955
IT SERVICE CENTER ALLOC	88,974	-	-	-	-	-		-	-	-	-	-	-	88,974
HIM ALLOC	50,923	-	-	-	-	-	-	-	-	-	-	-	-	50,923
CODING ALLOC	64,947	-	-	-	-	-	-	-	-	-	-	-	-	64,947
IT APPLICATIONS ALLOC	624,197	-	-	-	-	-	-	-	-	-	-	-	-	624,197
Human Resources Allocation	251,049	-	-	-	-	-	-	-	-	-	-	-	-	251,049
SECURITY SERVICES ALLOC	131,601	-	-	-	-	-	-	-	-	-	-	-	-	131,601
Facilities Allocation Revenue Cycle Allocation	100,975 270,370	-	-	-	-	-	-	-	-	-	-	-	-	100,975 270,370
Total Overhead Allocations	2,288,032	-	-	-	-	-	-	-	-	-	-	-	-	2,288,032
Total Expenses	4,073,136	1,091,219	1,257,782	630,392	788,621	43,892	1,107,133	327,308	389,395	1,054,767	12,979	11,276	95,058	10,896,135
Net Margin	\$ (3,383,164)	\$ 33,654 \$	(48,191) \$	(97,655) \$	(130,659) \$	(81,357) \$	(283,594) \$	(25,346) \$	(131,921) \$	(463,191) \$	14,301	(9,187) \$	(41,031) \$	(4,650,170)
Capital	-	-	-	-	-	-	-	-	-	-	-		-	
General Fund Support/ Transfer In	\$ 3,542,921	\$ - \$	- \$	- \$	- \$	37- \$	- \$	- \$	- \$	- \$	- \$	- \$	- \$	3,542,921

District Clinic Holdings, Inc.- Medical Statement of Revenue and Expenses FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

		Curi	rent Month						Fiscal Ye	ear To Date	:		
Actual	Budget	Variance	%	Prior Year	Variance	<u>%</u>	Actual	Budget	Variance	%	Prior Year	Variance	%
1,389,463	1,454,604	(65,141)	(4.5%)	1,311,030	78,433	6.0% Gross Patient Revenue	5,934,834	5,926,755	8,079	0.1%	5,035,515	899,319	17.9%
371,271	375,027	3,756	1.0%	295,644	(75,628)	(25.6%) Contractual Allowances	1,780,624	1,528,044	(252,580)	(16.5%)	1,127,458	(653,166)	(57.9%)
698,804	574,286	(124,518)	(21.7%)	509,705	(189,100)	(37.1%) Charity Care	2,321,008	2,339,929	18,921	0.8%	1,925,763	(395,246)	(20.5%)
31,141	231,977	200,836	86.6%	220,382	189,241	85.9% Bad Debt	574,728	945,194	370,466	39.2%	974,866	400,138	41.0%
1,101,216	1,181,290	80,074	6.8%	1,025,730	(75,486)	(7.4%) Total Contractuals and Bad Debts	4,676,361	4,813,167	136,806	2.8%	4,028,086	(648,274)	(16.1%)
245,663	404,693	(159,030)	(39.3%)	256,823	(11,160)	(4.3%) Other Patient Revenue	982,651	1,648,928	(666,277)	(40.4%)	1,161,340	(178,689)	(15.4%)
533,909	678,007	(144,098)	(21.3%)	542,123	(8,214)	(1.5%) Net Patient Revenue	2,241,125	2,762,516	(521,391)	(18.9%)	2,168,769	72,356	3.3%
38.43%	46.61%			41.35%		Collection %	37.76%	46.61%			43.07%		
843,691	864,001	(20,310)	(2.4%)	1,148,679	(304,988)	(26.6%) Grant Funds	3,323,383	3,456,004	(132,621)	(3.8%)	3,895,332	(571,950)	(14.7%)
-	-	-	0.0%	-	-	0.0% Other Financial Assistance	649,065	381,143	267,922	70.3%	-	649,065	0.0%
1,488	2,460	(972)	(39.5%)	1,615	(126)	(7.8%) Other Revenue	32,393	9,840	22,553	229.2%	17,158	15,235	88.8%
845,179	866,461	(21,282)	(2.5%)	1,150,294	(305,114)	(26.5%) Total Other Revenues	4,004,841	3,846,987	157,854	4.1%	3,912,490	92,351	2.4%
1,379,088	1,544,468	(165,380)	(10.7%)	1,692,417	(313,328)	(18.5%) Total Revenues	6,245,966	6,609,503	(363,537)	(5.5%)	6,081,259	164,707	2.7%
						Direct Operational Expenses:							
1,234,210	1,570,136	335,926	21.4%	1,225,984	(8,226)	(0.7%) Salaries and Wages	5,308,521	6,891,645	1,583,124	23.0%	5,005,273	(303,247)	(6.1%)
379,107	411,085	31,977	7.8%	357,877	(21,230)	(5.9%) Benefits	1,416,214	1,644,338	228,125	13.9%	1,362,143	(54,071)	(4.0%)
23,281	57,496	34,215	59.5%	35,829	12,548	35.0% Purchased Services	99,333	229,985	130,652	56.8%	199,837	100,504	50.3%
40,631	83,646	43,014	51.4%	61,292	20,660	33.7% Medical Supplies	399,766	334,582	(65,184)	(19.5%)	173,949	(225,817)	(129.8%)
36,957	50,957	14,000	27.5%	22,975	(13,982)	(60.9%) Other Supplies	61,767	203,829	142,061	69.7%	46,511	(15,257)	(32.8%)
56,783	59,500	2,717	4.6%	41,584	(15,199)	(36.5%) Medical Services	234,116	237,999	3,883	1.6%	166,094	(68,021)	(41.0%)
45,378	48,958	3,580	7.3%	41,925	(3,453)	(8.2%) Drugs	177,104	195,832	18,728	9.6%	176,957	(147)	(0.1%)
32,753	51,615	18,862	36.5%	36,428	3,675	10.1% Repairs & Maintenance	73,084	206,461	133,377	64.6%	198,054	124,970	63.1%
92,727	137,465	44,738	32.5%	86,019	(6,708)	(7.8%) Lease & Rental	334,275	549,861	215,587	39.2%	330,108	(4,167)	(1.3%)
7,298	9,018	1,720	19.1%	5,703	(1,595)	(28.0%) Utilities	27,607	36,073	8,466	23.5%	22,683	(4,924)	(21.7%)
(55,530)	70,438	125,968	178.8%	15,222	70,753	464.8% Other Expense	377,143	281,750	(95,393)	(33.9%)	123,181	(253,962)	(206.2%)
4,545	3,993	(552)	(13.8%)	3,938	(606)	(15.4%) Insurance	19,711	15,970	(3,741)	(23.4%)	15,754	(3,957)	(25.1%)
1,898,140	2,554,307	656,167	25.7%	1,934,776	36,636	1.9% Total Operational Expenses	8,528,641	10,828,324	2,299,683	21.2%	7,820,546	(708,096)	(9.1%)
						Net Performance before Depreciation							
(519,051)	(1,009,839)	490,787	(48.6%)	(242,359)	(276,692)	114.2% & Overhead Allocations	(2,282,676)	(4,218,821)	1,936,146	(45.9%)	(1,739,287)	(543,389)	31.2%

District Clinic Holdings, Inc.- Medical Statement of Revenue and Expenses FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

	Current Month								Fiscal Y	ear To Date	•		
Actual	Budget	Variance	%	Prior Year	Variance	<u>%</u>	Actual	Budget	Variance	%	Prior Year	Variance	%
19,866	27,500	7,634	27.8%	24,070	4,205	17.5% Depreciation	79,462	110,000	30,538	27.8%	96,282	16,820	17.5%
						Overhead Allocations:							
7,878	9,052	1,174	13.0%	6,716	(1,162)	(17.3%) Risk Mgt	31,828	36,207	4,379	12.1%	28,433	(3,395)	(11.9%)
60,504	90,891	30,387	33.4%	133,279	72,775	54.6% Rev Cycle	270,370	363,565	93,195	25.6%	533,308	262,938	49.3%
1,650	5,534	3,884	70.2%	2,166	516	23.8% Internal Audit	6,886	22,136	15,250	68.9%	4,838	(2,048)	(42.3%)
17,777	28,637	10,860	37.9%	34,265	16,488	48.1% Home Office Facilities	100,975	114,547	13,572	11.8%	111,576	10,601	9.5%
41,412	35,014	(6,398)	(18.3%)	36,655	(4,757)	(13.0%) Administration	163,021	140,057	(22,964)	(16.4%)	142,710	(20,311)	(14.2%)
35,043	85,359	50,316	58.9%	52,304	17,261	33.0% Human Resources	251,049	341,436	90,387	26.5%	170,556	(80,493)	(47.2%)
12,589	23,440	10,851	46.3%	13,640	1,051	7.7% Legal	36,708	93,759	57,051	60.8%	40,412	3,704	9.2%
2,873	3,521	648	18.4%	3,056	183	6.0% Records	11,488	14,085	2,597	18.4%	11,163	(325)	(2.9%)
5,905	9,336	3,431	36.7%	6,435	530	8.2% Compliance	22,510	37,344	14,834	39.7%	21,958	(552)	(2.5%)
1,045	3,497	2,452	70.1%	=	(1,045)	0.0% Reimburse	7,955	13,989	6,034	43.1%	-	(7,955)	0.0%
31,310	39,045	7,735	19.8%	62,440	31,130	49.9% IT Operations	134,634	156,181	21,547	13.8%	282,540	147,906	52.3%
12,063	14,232	2,169	15.2%	8,364	(3,699)	(44.2%) IT Security	52,457	56,926	4,469	7.9%	41,852	(10,605)	(25.3%)
182,721	200,661	17,940	8.9%	33,066	(149,655)	(452.6%) IT Applications	624,197	802,644	178,447	22.2%	158,338	(465,859)	(294.2%)
31,794	47,286	15,492	32.8%	45,745	13,951	30.5% Security Services	131,601	189,143	57,542	30.4%	183,346	51,745	28.2%
5,696	4,545	(1,151)	(25.3%)	· -	(5,696)	0.0% Supply Chain	20,885	18,179	(2,706)	(14.9%)	, -	(20,885)	0.0%
16,970	28,066	11,096	39.5%	27,814	10,844	39.0% Finance	77,176	112,263	35,087	31.3%	112,248	35,072	31.2%
9,640	14,318	4,678	32.7%	5,076	(4,564)	(89.9%) Public Relations	35,528	57,270	21,742	38.0%	20,316	(15,212)	(74.9%)
10,234	4,010	(6,224)	(155.2%)	8,064	(2,170)	(26.9%) Information Technology	39,686	16,039	(23,647)	(147.4%)	29,808	(9,878)	(33.1%)
6,009	6,797	788	11.6%	6,382	373	5.8% Corporate Quality	25,821	27,189	1,368	5.0%	26,045	224	0.9%
12,365	5,490	(6,875)	(125.2%)	9,727	(2,638)	(27.1%) Project MGMT Office	38,413	21,960	(16,453)	(74.9%)	40,296	1,883	4.7%
10,644	8,574	(2,070)	(24.1%)	-,	(10,644)	0.0% HIM	50,923	34,296	(16,627)	(48.5%)	-	(50,923)	0.0%
14,829	18,185	3,356	18.5%	_	(14,829)	0.0% Coding	64,947	72,738	7,791	10.7%	_	(64,947)	0.0%
21,555	35,014	13,459	38.4%	-	(21,555)	0.0% IT Service Center	88,974	140,056	51,082	36.5%	-	(88,974)	0.0%
552,506	720,501	167,995	23.3%	495,192	(57,314)	(11.6%) Total Overhead Allocations	2,288,032	2,882,006	593,974	20.6%	1,959,742	(328,290)	(16.8%)
2,470,511	3,302,308	831,797	25.2%	2,454,039	(16,473)	(0.7%) Total Expenses	10,896,135	13,820,330	2,924,194	21.2%	9,876,570	(1,019,566)	(10.3%)
\$ (1,091,423) \$	(1,757,840) \$	666,417	(37.9%) \$	(761,622) \$	(329,801)	43.3% Net Margin	\$ (4,650,170) \$	(7,210,827) \$	2,560,657	(35.5%)	\$ (3,795,311)	\$ (854,859)	22.5%
(38,566)	116,559	155,126	133.1%	-	38,566	0.0% Capital	-	466,237	466,237	100.0%	100,000	100,000	100.0%
\$ - \$	- \$	-	0.0% \$	- \$	-	0.0% General Fund Support/ Transfer In	\$ 3,542,921 \$	5,900,000 \$	2,357,079	40.0%	\$ -	\$ (3,542,921)	0.0%

District Clinic Holdings, Inc.- Dental Statement of Revenues and Expenses by Location FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Total
Gross Patient Revenue	-	1,302,662	830,615	638,490	417,782	3,206,701
Contractual Allowances		397,929	326,593	184,013	265,077	1,174,101
Charity Care	_	702,637	423,243	360,139	146,068	1,648,796
Bad Debt	_	65,871	20,959	10,426	36,300	131,123
Total Contractual Allowances and Bad Debt	-	1,166,438	770,795	554,578	447,445	2,954,021
Other Patient Revenue	-	138,918	102,841	88,889	65,219	396,183
Net Patient Revenue	-	275,143	162,661	172,802	35,556	648,864
Collection %	-	21.12%	19.58%	27.06%	8.51%	20.23%
Grant Funds	54,529	228,737	122,662	101,848	53,059	560,835
Other Financial Assistance	20,165	23,361	27,647	11,703	6,474	89,351
Other Revenue	420	•	(9)	-	-	411
Total Other Revenues	75,114	252,098	150,300	113,551	59,533	650,597
Total Revenues	75,114	527,241	312,961	286,353	95,089	1,299,461
Direct Operational Expenses:						
Salaries and Wages	122,469	394,644	251,923	226,520	99,212	1,193,982
Benefits	35,875	88,307	62,368	63,278	32,738	282,566
Purchased Services	-	2,542	1,298	1,647	3,560	9,048
Medical Supplies	-	27,701	14,234	16,323	10,510	68,767
Other Supplies	-	2,897	3,118	606	73	6,693
Drugs	-	213	325	237	237	1,011
Repairs & Maintenance	-	26,175	1,629	1,427	4,998	34,230
Lease & Rental	-	36,827	21,823	20,340	11,349	90,339
Utilities	-	1,706	1,678	491	3,607	7,482
Other Expense	2,442	5,982	4,784	5,669	2,155	21,033
Insurance Total Operational Expenses	160,786	586,995	363,181	336,538	309 168,749	309 1,715,461
	100,700	300,333	565,151	330,330	100,713	1,713,101
Net Performance before Depreciation & Overhead Allocations	(85,672)	(59,754)	(50,220)	(50,185)	(73,660)	(416,000)
	(00)072/					
Depreciation	-	8,889	2,202	1,606	10,466	23,162
Overhead Allocations:	F 07F					
Risk Managment Allocation	5,875	-	-	-	-	-
Internal Audit Allocation	1,271	-	-	-	-	-
Administration Allocation	30,087	-	-	-	-	-
Legal Allocation	6,775	-	-	-	-	-
Records Allocation	2,120	-	-	-	-	-
Compliance Allocation PROJ MGMT ALLOC	4,155	•	•	-	-	-
Finance Allocation	7,090	•	•	-	-	-
IT Allocation	14,243	-	-	-	•	-
	7,325	-	-	-	•	-
CORP COMMUN ALLOC	6,558	-	-	-	•	-
Supply Chain Alloc IT OPERATIONS ALLOCATION	3,854 24,849	-	-	-	-	-
IT SECURITY ALLOCATION		•	-	-	•	-
	9,681	-	-	-	-	-
CORP QUAL ALLOC	4,765	-	-	-	-	-
Reimburse Alloc	1,468		-	-	-	-
IT SERVICE CENTER ALLOC	16,421		-	-	-	-
HIM ALLOC	9,398		-	-	-	-
CODING ALLOC	11,987	-	-	-	-	-
IT APPLICATIONS ALLOC	115,201	-	-	-	-	-
Human Resources Allocation	42,905	-	-	-	-	-
SECURITY SERVICES ALLOC	27,837	-	-	-	-	-
Facilities Allocation	14,490	-	-	-	-	-
Revenue Cycle Allocation Total Overhead Allocations	56,659					
	425,014		-			
Total Expenses	585,800	595,884	365,382	338,143	179,214	2,064,424
Net Margin	\$ (510,686)	\$ (68,643) \$	5 (52,421) \$	(51,790) \$	(84,125) \$	(764,963)
Capital		-	-	-	-	-
General Fund Support/ Transfer In	\$ 585,929					585,929
		40				

District Clinic Holdings, Inc.- Dental Statement of Revenues and Expenses FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

Current Month

Fiscal Year To Date

Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 901,979 \$	769,775	\$ 132,204	17.2% \$	770,612	131,367	17.0% Outpatient Revenue	\$ 3,206,701 \$	3,183,033 \$	23,668	0.7%	\$ 3,249,563	\$ (42,862)	(1.3%)
 -	-	-	0.0%	-	-	0.0% HCD Capitated Claims		=	-	0.0%	-	=	0.0%
901,979	769,775	132,204	17.2%	770,612	131,367	17.0% Gross Patient Revenue	3,206,701	3,183,033	23,668	0.7%	3,249,563	(42,862)	(1.3%)
352,367	203,330	(149,037)	(73.3%)	333,234	(19,134)	(5.7%) Contractual Allowances	1,174,101	840,771	(333,330)	(39.6%)	1,185,277	11,176	0.9%
429,069	367,363	(61,706)	(16.8%)	355,332	(73,737)	(20.8%) Charity Care	1,648,796	1,519,051	(129,745)	(8.5%)	1,483,465	(165,332)	(11.1%)
35,961	87,146	51,185	58.7%	(884)	(36,845)	4,168.2% Bad Debt	131,123	360,354	229,231	63.6%	226,380	95,256	42.1%
 817,397	657,839	(159,558)	(24.3%)	687,682	(129,715)	(18.9%) Total Contractuals and Bad Debts	2,954,021	2,720,176	(233,845)	(8.6%)	2,895,121	(58,899)	(2.0%)
99,046	100,852	(1,806)	(1.8%)	42,727	56,319	131.8% Other Patient Revenue	396,183	417,027	(20,844)	(5.0%)	472,274	(76,091)	(16.1%)
183,628	212,788	(29,160)	(13.7%)	125,657	57,971	46.1% Net Patient Revenue	648,864	879,884	(231,020)	(26.3%)	826,716	(177,852)	(21.5%)
20.36%	27.64%	. , ,	, ,	16.31%	,	Collection %	20.23%	27.64%	. , ,	. ,	25.44%	. , ,	, ,
93,971	147,874	(53,903)	(36.5%)	180,413	(86,442)	(47.9%) Grant Funds	560,835	591,496	(30,661)	(5.2%)	669,771	(108,936)	(16.3%)
-	, -		0.0%	-		0.0% Other Financial Assistance	89,351	-	89,351	0.0%	, -	89,351	0.0%
 160	-	160	0.0%	200	(40)	(20.0%) Other Revenue	411	-	411	0.0%	200	211	105.3%
94,131	147,874	(53,743)	(36.3%)	180,613	(86,482)	(47.9%) Total Other Revenues	650,597	591,496	59,101	10.0%	669,971	(19,374)	(2.9%)
277,759	360,662	(82,903)	(23.0%)	306,270	(28,511)	(9.3%) Total Revenues	1,299,461	1,471,380	(171,919)	(11.7%)	1,496,687	(197,227)	(13.2%)
						Direct Operational Expenses:							
264,122	286,549	22,426	7.8%	250,779	(13,344)	(5.3%) Salaries and Wages	1,094,769	1,272,195	177,426	13.9%	923,644	(171,125)	(18.5%)
80,092	73,091	(7,001)	(9.6%)	78,250	(13,344)	(2.4%) Benefits	282,566	292,364	9,798	3.4%	267,139	(171,123)	(5.8%)
737	6,290	5,553	88.3%	1,226	490	39.9% Purchased Services	9,048	25,160	16,112	64.0%	8,775	(273)	(3.1%)
20,147	19,437	(710)	(3.7%)	11,698	(8,450)	(72.2%) Medical Supplies	68,767	77,750	8,982	11.6%	67,880	(887)	(1.3%)
2,740	9,009	6,269	69.6%	317	(2,423)	(764.3%) Other Supplies	6,693	36,036	29,343	81.4%	6,428	(265)	(4.1%)
2,740	15,660	15,660	47,454.3%	-	(2,423)	0.0% Medical Services	-	62,640	62,640	100.0%	-	(203)	0.0%
4,662	2,069	(2,594)	(125.4%)	178	(4,485)	(2,524.9%) Repairs & Maintenance	34,230	8,275	(25,955)	(313.7%)	7,559	(26,671)	(352.8%)
22,562	27,868	5,306	19.0%	22,490	(72)	(0.3%) Lease & Rental	90,339	111,473	21,134	19.0%	90,000	(339)	(0.4%)
2,302	2,503	181	7.2%	1,651	(671)	(40.6%) Utilities	7,482	10,013	2,531	25.3%	6,458	(1,024)	(15.9%)
1,876	5,138	3,262	63.5%	(381)	(2,257)	593.0% Other Expense	21,033	20,553	(480)	(2.3%)	4,765	(16,268)	(341.4%)
77	90	13	14.2%	88	10	11.9% Insurance	309	360	51	14.2%	351	42	11.9%
 .,	30		17.2/0		10	22.575		300		17.2/0	331	72	11.5/0
399,339	447,705	48,366	10.8%	366,295	(33,044)	(9.0%) Total Operational Expenses	1,616,248	1,916,819	300,571	15.7%	1,382,998	(233,250)	(16.9%)
						Net Performance before							
(121,580)	(87,043)	(34,537)	39.7%	(60,025)	(61,555)	102.5% Depreciation & Overhead Allocations	(316,788)	(445,439)	128,652	(28.9%)	113,689	(430,476)	(378.6%)

District Clinic Holdings, Inc.- Dental Statement of Revenues and Expenses FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

Current Month

Fiscal Year To Date

 Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
5,790	5,750	(41)	(0.7%)	7,572	1,781	23.5% Depreciation	23,162	23,000	(162)	(0.7%)	30,287	7,125	23.5%
						Overhead Allocations:							
1,454	1,671	217	13.0%	1,098	(356)	(32.5%) Risk Mgt	5,875	6,682	807	12.1%	4,647	(1,228)	(26.4%)
12,679	19,047	6,368	33.4%	23,169	10,490	45.3% Rev Cycle	56,659	76,190	19,531	25.6%	92,708	36,049	38.9%
305	1,021	716	70.1%	354	49	13.8% Internal Audit	1,271	4,085	2,814	68.9%	791	(480)	(60.8%)
2,551	4,110	1,559	37.9%	3,625	1,074	29.6% Home Office Facilities	14,490	16,438	1,948	11.9%	11,804	(2,686)	(22.8%)
7,643	6,462	(1,181)	(18.3%)	5,991	(1,652)	(27.6%) Administration	30,087	25,849	(4,238)	(16.4%)	23,324	(6,763)	(29.0%)
5,989	14,588	8,599	58.9%	8,791	2,802	31.9% Human Resources	42,905	58,353	15,448	26.5%	28,666	(14,239)	(49.7%)
2,323	4,326	2,003	46.3%	2,229	(94)	(4.2%) Legal	6,775	17,304	10,529	60.8%	6,605	(170)	(2.6%)
530	650	120	18.4%	499	(31)	(6.1%) Records	2,120	2,599	479	18.4%	1,824	(296)	(16.2%)
1,090	1,723	633	36.7%	1,052	(38)	(3.6%) Compliance	4,155	6,892	2,737	39.7%	3,589	(566)	(15.8%)
193	645	452	70.1%	-	(193)	0.0% Reimburse	1,468	2,582	1,114	43.1%	-	(1,468)	0.0%
5,779	7,206	1,427	19.8%	10,205	4,426	43.4% IT Operations	24,849	28,825	3,976	13.8%	46,176	21,327	46.2%
2,226	2,627	401	15.3%	1,367	(859)	(62.9%) IT Security	9,681	10,506	825	7.9%	6,840	(2,841)	(41.5%)
33,723	37,034	3,311	8.9%	5,404	(28,319)	(524.0%) IT Applications	115,201	148,135	32,934	22.2%	25,878	(89,323)	(345.2%)
6,725	10,002	3,277	32.8%	7,997	1,272	15.9% Security Services	27,837	40,008	12,171	30.4%	32,053	4,216	13.2%
1,051	839	(212)	(25.3%)	-	(1,051)	0.0% Supply Chain	3,854	3,355	(499)	(14.9%)	-	(3,854)	0.0%
3,132	5,180	2,048	39.5%	4,546	1,414	31.1% Finance	14,243	20,719	6,476	31.3%	18,345	4,102	22.4%
1,779	2,642	863	32.7%	830	(949)	(114.5%) Public Relations	6,558	10,570	4,012	38.0%	3,320	(3,238)	(97.5%)
1,889	740	(1,149)	(155.2%)	1,318	(571)	(43.3%) Information Technology	7,325	2,960	(4,365)	(147.4%)	4,872	(2,453)	(50.4%)
1,109	1,254	145	11.6%	1,043	(66)	(6.3%) Corporate Quality	4,765	5,018	253	5.0%	4,257	(508)	(11.9%)
2,282	1,013	(1,269)	(125.2%)	1,590	(692)	(43.5%) Project MGMT Office	7,090	4,053	(3,037)	(74.9%)	6,586	(504)	(7.7%)
1,964	1,582	(382)	(24.1%)	-	(1,964)	0.0% HIM	9,398	6,330	(3,068)	(48.5%)	-	(9,398)	0.0%
2,737	3,356	619	18.4%	-	(2,737)	0.0% Coding	11,987	13,425	1,438	10.7%	-	(11,987)	0.0%
3,978	6,462	2,484	38.4%	-	(3,978)	0.0% IT Service Center	16,421	25,849	9,428	36.5%	-	(16,421)	0.0%
103,131	134,182	31,051	23.1%	81,106	(22,025)	(27.2%) Total Overhead Allocations	425,014	536,727	111,713	20.8%	322,283	(102,731)	(31.9%)
 508,261	587,636	79,376	13.5%	454,973	(53,288)	(11.7%) Total Expenses	2,064,424	2,476,546	412,122	16.6%	1,735,568	(328,856)	(18.9%)
\$ (230,501) \$	(226,974) \$	(3,527)	1.6% \$	(148,703) \$	(81,799)	55.0% Net Margin	\$ (764,963) \$	(1,005,166) \$	240,203	(23.9%)	\$ (238,881)	\$ (526,083)	220.2%
(51,467)	37,130	88,597	238.6%	-	51,467	0.0% Capital	_	148,522	148,522	100.0%	-	-	0.0%
\$ - \$	- \$	-	0.0% \$	- \$	i -	0.0% General Fund Support/ Transfer In	\$ 585,929 \$	725,000 \$	139,071	19.2%	\$ -	\$ (585,929)	0.0%

District Clinic Holdings, Inc- Behavioral Health Statement of Revenues and Expenses by Location FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

FOR THE FOURTH MONTH ENDED JANUARY	31, 2023								
	Portable	West Palm Beach	Lantana	Delray	Belle Glade	Lewis Center	West Boca	Mangonia	Jupiter
	Behavioral Health								
Corres Bettient Bernanne		44		20	44	2.642		200 445	
Gross Patient Revenue	-	11	-	80	41	2,613	-	380,415	-
Contractual Allowances	-	441	-	-	2,145	102,369	-	60,982	-
Charity Care	-	9	-	40	69	5,833	-	65,925	19
Bad Debt	-	362	150	58	611	53,326	20	24,473	64
Total Contractual Allowances and Bad Debt	-	812	150	99	2,825	161,528	20	151,380	83
Other Patient Revenue	-	-	-	-	-	-	-	4,617	-
Net Patient Revenue	-	(801)	(150)	(18)	(2,784)	(158,914)	(20)	233,653	(83)
Collection %	-	-7325.05%	0.00%	0.00%	-6722.07%	-6081.41%	0.00%	61.42%	0.00%
Grant Funds	-	-	-	-	-	-	-	-	-
Other Financial Assistance	-	-	-	-	-	-	-	-	-
Other Revenue		-	-	-	-	-	-	-	-
Total Other Revenues	-	-	-	-	-	-	-	-	-
Total Revenues	-	(801)	(150)	(18)	(2,784)	(158,914)	(20)	233,653	(83)
Direct Operational Expenses:									
Salaries and Wages		-	-	-	-	-	-	-	-
Benefits	_	-	_	_	_	_	_	_	-
Purchased Services				-			-		
Medical Supplies	-	-	-	-	-	-	-	-	-
Other Supplies	-	-	-	-	-	-	-	-	-
Repairs & Maintenance	-	-	-	-	-	-	-	-	-
Lease & Rental	-	-	-	-	-	-	-	-	-
Utilities	-	-	-	-	-	-	-	-	-
Other Expense	-	-	-	-	-	-	-	-	-
Insurance		-	-	-	-	-	-	-	-
Total Operational Expenses	-	-	-	-	-	-	-	-	-
Net Performance before Depreciation & Overhead Allocations	-	(801)	(150)	(18)	(2,784)	(158,914)	(20)	233,653	(83)
Depreciation	-	-			-		-	-	-
Overally and Allegarities							-	-	-
Overhead Allocations:							-	-	-
Risk Mgt Rev Cycle	-	-	-	-	-	-	-	-	-
Internal Audit							-		
Home Office Facilities									
Administration									
Human Resources	_	_	_	_	_	_	_	_	_
Legal	_	-	_	_	_	_	_	_	_
Records				-			-		-
Compliance				-			-		
Comm Engage Plan	-	-	-	-	-	-	-	-	-
IT Operations	-	-	-	-	-	-	-	-	-
IT Security	-	-	-	-	-	-	-	-	-
IT Applications	-	-	-	-	-	-	-	-	-
Security Services	-	-	-	-	-	-	-	-	-
IT EPIC	-	-	-	-	-	-	-	-	-
Finance	-	-	-	-	-	-	-	-	-
Public Relations	-	-	-	-	-	-	-	-	-
Information Technology	-	-	-	-	-	-	-	-	-
Corporate Quality	-	-	-	-	-	-	-	-	-
Project MGMT Office	-	-	-	-	-	-	-	-	-
Total Overhead Allocations		-	-	-	-	-	-	-	<u> </u>
Total Expenses	-	-	-	-	-	-	-	-	-
Net Margin	\$ -	\$ (801)	\$ (150)	\$ (18)	\$ (2,784)	\$ (158,914)	\$ (20)	\$ 233,653	\$ (83)
	<u> </u>	. (002)		. (23)	. (=)10.1	. (/52-/	. (23)		. ,,,,,,
Capital	-	-	-	-	-	-	-		-
General Fund Support/ Transfer In	\$	-	-		-	-	-		
				12					

District Clinic Holdings, Inc- Behavioral Health Statement of Revenues and Expenses FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

Current Month

Fiscal Year To Date

Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
102,791	-	102,791	0.0%	-	102,791	0.0% Gross Patient Revenue	383,161	-	383,161	0.0%	-	383,161	0.0%
40,649	-	(40,649)	0.0%	-	(40,649)	0.0% Contractual Allowances	165,937	-	(165,937)	0.0%	_	(165,937)	0.0%
17,924	-	(17,924)	0.0%	-	(17,924)	0.0% Charity Care	71,895	-	(71,895)	0.0%	-	(71,895)	0.0%
28,883	-	(28,883)	0.0%	-	(28,883)	0.0% Bad Debt	79,064	-	(79,064)	0.0%	-	(79,064)	0.0%
87,456	-	(87,456)	0.0%	-	(87,456)	0.0% Total Contractuals and Bad Debts	316,896	-	(316,896)	0.0%	-	(316,896)	0.0%
1,154	-	1,154	0.0%	-	1,154	0.0% Other Patient Revenue	4,617	=	4,617	0.0%	=	4,617	0.0%
16,490	-	16,490	0.0%	-	16,490	0.0% Net Patient Revenue	70,882	-	70,882	0.0%	-	70,882	0.0%
16.04%	0.00%			0.00%		Collection %	18.50%	0.00%			0.00%		
-	-	-	0.0%	=	_	0.0% Grant Funds	_	=	-	0.0%	_	_	0.0%
_	_	=	0.0%	-	-	0.0% Other Financial Assistance	=	=	_	0.0%	-	-	0.0%
	-	-	0.0%	=	-	0.0% Other Revenue	=	=	=	0.0%	=	-	0.0%
-	-	-	0.0%	-	-	0.0% Total Other Revenues	-	-	-	0.0%	-	-	0.0%
16,490	-	16,490	0.0%	-	16,490	0.0% Total Revenues	70,882	-	70,882	0.0%	-	70,882	0.0%
						Direct Operational Expenses:							
_	_	_	0.0%	_	_	0.0% Salaries and Wages	_	_	_	0.0%	_	_	0.0%
_	_	_	0.0%		_	0.0% Salaries and Wages 0.0% Benefits	_	_	_	0.0%		- -	0.0%
_	_	_	0.0%	_	_	0.0% Purchased Services	_	_	_	0.0%	_	_	0.0%
_	_	_	0.0%	_	_	0.0% Medical Supplies	_	_	_	0.0%	_	_	0.0%
_	_	-	0.0%	_	-	0.0% Other Supplies	_	_	_	0.0%	_	_	0.0%
_	_	_	0.0%	_	_	0.0% Repairs & Maintenance	-	_	_	0.0%	_	_	0.0%
_	_	_	0.0%	_	_	0.0% Lease & Rental	-	_	_	0.0%	_	_	0.0%
-	_	_	0.0%	_	_	0.0% Utilities	_	_	_	0.0%	_	_	0.0%
-	_	_	0.0%	_	_	0.0% Other Expense	_	_	_	0.0%	_	_	0.0%
	-	-	0.0%	=	-	0.0% Insurance	-	=	-	0.0%	-	=	0.0%
-	=	-	0.0%	-	-	0.0% Total Operational Expenses	=	=	-	0.0%	-	-	0.0%
						Net Performance before							
16,490	-	16,490	0.0%	-	16,490	0.0% Depreciation & Overhead Allocations	70,882	-	70,882	0.0%	-	70,882	0.0%

District Clinic Holdings, Inc- Behavioral Health Statement of Revenues and Expenses FOR THE FOURTH MONTH ENDED JANUARY 31, 2023

Current Month

Fiscal Year To Date

 Actual	Budget	Varian	ce %	Prio	r Year	Variance	<u>%</u>	Actual	l	Budget	Variance	%	Prior Year	Variance	%
-	-		- 0	0%	-	-	0.0% Depreciation	-	-	-	-	0.0%	-	-	0.0%
							Overhead Allocations:								
-	_		- 0.	0%	-	-	0.0% Risk Mgt	-		-	-	0.0%	-	_	0.0%
-	_		- 0.	0%	-	-	0.0% Rev Cycle	-		-	-	0.0%	-	_	0.0%
-	-		- 0.	0%	-	-	0.0% Internal Audit	-		-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% Home Office Facilities	-		-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% Administration	-		-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% Human Resources	-		-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% Legal	-		-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% Records	-		-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% Compliance	-	,	-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% Comm Engage Plan	-		-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% IT Operations	-	-	-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% IT Security	-		-	-	0.0%	-	-	0.0%
-	-			0%	-	-	0.0% IT Applications	-		-	-	0.0%	-	-	0.0%
-	-			0%	-	-	0.0% Security Services	-		-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% IT EPIC	-		-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% Finance	-		-	-	0.0%	-	-	0.0%
-	-		- 0.	0%	-	-	0.0% Public Relations	-		-	-	0.0%	-	-	0.0%
-	_		- 0.	0%	-	-	0.0% Information Technology	-		-	-	0.0%	-	_	0.0%
-	_		- 0.	0%	-	-	0.0% Corporate Quality	-		-	-	0.0%	-	_	0.0%
-	-		- 0.	0%	_	-	0.0% Project MGMT Office	-		_	-	0.0%	_	-	0.0%
-	_			0%	_	-	0.0% Managed Care Contract	-		-	-	0.0%	-	_	0.0%
 -	-				-			-		-			-		
 -	-		- 0.	0%	-	-	0.0% Total Overhead Allocations			-	-	0.0%	-	-	0.0%
 -	_		- 0.	0%	-	-	0.0% Total Expenses			-	-	0.0%	-	-	0.0%
\$ 16,490 \$	-	\$ 10	5,490 0.	0% \$	-	\$ 16,490	0.0% Net Margin	\$ 70,8	82 \$	_	\$ 70,882	0.0%	\$ -	\$ 70,882	0.0%
				00/			O ON Country			•		0.624			0.634
 -	-		- 0.	0%	-	-	0.0% Capital		•	-	-	0.0%	-	-	0.0%
\$ - \$	-	\$	- 0.	0% \$	-	\$ -	0.0% General Fund Support/ Transfer In	\$ -	· \$	-	\$ -	0.0%	\$ -	\$ -	0.0%

1. Description: FY23 School Based Service Expansion Grant

2. Summary:

SBSE (School-Based Service Expansion) Grant opportunity provides up to \$350,000 annually for a 2-year performance period for new school-based service sites.

3. Substantive Analysis:

This grant opportunity ties in nicely with our new 25-year collaborative agreement with Children's Partnership Schools (CPS), FAU and the School Board to provide healthcare services at Lake Worth High School and JFK Middle school, with a start date of August 2023. This grant requires that we also submit an HRSA change-in-scope to include school-based clinics as a new site of service.

See the supporting abstract and budget attached.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements		Yes No No
Annual Net Revenue	\$350,000	Yes No 🗌
Annual Expenditures		Yes No No

Reviewed for financial accuracy and compliance with purchasing procedure:

Condies Abbott
Candice Abbott
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A		
Committee Name	_	Date Approved

6. Recommendation:

Staff recommends that the Board approve the FY23 SBSE Grant Application.

Approved for Legal sufficiency:

Bernabe Icaza

Bernabe Icaza VP & General Counsel

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

Health Care District of Palm Beach County 1515 N. Flagler Dr, Ste 101, WPB, FL 33401 Alicia Ottmann - Project Director 561-804-5764 aottmann@hcdpbc.org www.hcdpbc.org

Total \$350,000 per year

Since 1988, the Health Care District of Palm Beach County (the District) has operated a dynamic health care network that is a local government, ad valorem tax-supported safety net health care system. It includes a public hospital, skilled nursing facility, school health program. nationally recognized rapid air emergency transport & care unit & a vibrant Federally Qualified Health Center (FQHC) program. A 7-member governing board leads the District in managing its \$242.8 million budget in a fiscally responsible manner, with 73.2% allocated to the provision of direct health care services. Initial 330 (e)(g)(h) funding was secured in 2013 to support 4 FQHCs & was named the C. L. Brumback Clinics in honor of the county's first Health Department Director. District Clinic Holdings, Inc. was created as a wholly-owned subsidiary to manage clinic operations to comply with governance requirements. This has since grown to include a robust system of 10 fixed & 3 mobile FQHC locations that provide a comprehensive range of primary and preventative care, including adult, pediatric, women's health, dental, mental health, substance use disorder services & COVID testing. The target service area ID 031 West Palm Beach includes 46 Palm Beach County ZIP codes, 7 Health Professional Shortage Areas & 8 Medically Underserved Population areas. In 2021, 34,854 unduplicated patients were served over 104,194 clinic visits & 11,341 virtual visits comprising 29,786 medical, 9,033 dental, 3,951 mental health, and 1,443 SUD patients. Of these, 5,953 were persons experiencing homelessness, 1,524 farmworkers & 153 veterans. The co-applicants plan to continue to provide vitally needed services targeting underserved individuals & families and migrant/seasonal farmworkers & persons experiencing homelessness. The program outlined will provide access for those seeking care while targeting the unmet need in the community, such as those with economic, cultural, social & linguistic barriers to care. The target population in the service area is 53% uninsured, with disproportionately high rates of diabetes, obesity, heart disease, asthma, TB, HIV, & STDs. In 2021, 75% of patients reported incomes below 100%, while 12% live between 101% & 200% of the Federal Poverty Level. Approximately 48% of patients required services in a language (Spanish and Creole) other than English. All services are provided on a sliding fee discount basis, regardless of ability to pay, as well as through various public & private payors. The objective is to meet the community's needs by providing a seamlessly integrated continuum of care across an established, trusted network of health centers. Services to be provided through our vast network of collaborative partners, including infectious disease & additional enabling/supportive services. We will continue to reduce health disparities while continuing to provide access to affordable, high-quality health services available to all, across Palm Beach County. The proposed \$350,000 per year "School Based Service Expansion" SBSE project monies will be used to increase the number of patients counseled and offered care by working collaboratively to establish two community schools in Palm Beach County utilizing the principles and standards promoted by the Center for Community Schools as guidance for community school development. The two schools identified as having the greatest need in Palm Beach County are John F. Kennedy Middle School and Lake Worth Community High School.

HRSA Funding: SBSE (2023-2025) Budget Period September 1, 2023 - August 31, 2025

Budget Narrative SF 424	Year 1 Federal Grant
	Request
REVENUE	
Grant Request	350,000.00
TOTAL REVENUE	350,000.00
EXPENSES: Object class totals should be consistent with those of the SF 424-A.	presented in Section B
PERSONNEL	
APRN at 1.0 FTE	125,000.00
MA at 1.0 FTE	45,760.00
Driver/Registrar at 1.0 FTE	39,520.00
TOTAL PERSONNEL	210,280.00
FRINGE BENEFITS	
FICA @ 7.30% of salary cost up to \$132,900 per employee	15,350.00
Health Insurance @ 13.64%	28,682.00
Dental @ 0.35%	736.00
Retirement @ 4.49%	9,442.00
Workers Compensation @ 0.46%	967.00
TOTAL FRINGE @26.24%	55,177.00
SUPPLIES	
Welch Allen Vision Spot screeners	8579.00
Welch Allen Spirometers x 2	2760.00
Office Supplies (\$330 * 12 months)	3960.00
Medical/ Surgical Supplies (\$2.25/enc * 1320 yr 1)& (\$2.25/enc * 2500 yr2)	8595.00
Computers/Laptops/ IT Hardware & Software	10000.00
Drugs- Vaccines, 340B program and other drug purchases	
(\$14.03/enc * 1320 Yr1) & (\$7/enc * 2500 Yr2) Uniforms (\$75 * 3 FTEs)	36019.60 225.00
Officiality (47.5 3.1 TES)	225.00
TOTAL SUPPLIES	70,138.60
CONTRACTUAL	
Language Line iPad/COW	9,974.00
Doximity - Behavioral Telehealth	4,430.40
TOTAL CONTRACTUAL	14,404.40
OTHER	. 1, 10 11 10
TOTAL OTHER	
TOTAL DIRECT CHARGES (Sum of TOTAL Expenses)	350,000.00
INDIRECT CHARGES	•
Indirect Cost: N/A	
TOTALS EXPENSES	350,000.00

1. Description: Change In Scope – Form 5B: C. L. Brumback Primary Care Clinics – John F. Kennedy Middle School & Lake Worth Community High School

2. Summary:

Changes in scopes are required for our two new school-based clinics starting in August of 2023.

3. Substantive Analysis:

Per the HRSA Compliance Manual, these changes require prior approval from HRSA and must be submitted by the health center as a formal change in scope request.

Staff respectfully requesting a permanent Change In Scope to add two new school-based clinics located at John F. Kennedy Middle School located at 1901 Avenue S, Riviera Beach, FL 33404 & Lake Worth Community High School located at 1701 Lake Worth Rd, Lake Worth, FL 33460.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements		Yes No No
Annual Net Revenue		Yes No No
Annual Expenditures		Yes No No

	Timiaai Enpenaitares		
Rev	riewed for financial accuracy and	I compliance with purchasing procedu	re:
	N/A		
	Candice Abbott VP & Chief Financial Officer		
5. Revi	lewed/Approved by	Committee:	
	N/A		
_	Committee Name		Date Approved

6. Recommendation:

Staff recommends that the Board approve the HRSA Change in Scopes to include two new school-based clinics.

Approved for Legal sufficiency:

Bernabe Icaza

Bernabe Icaza VP & General Counsel

Alicia Ottmann, PA-C

AVP, Executive Director FQHC & Pharmacy Services

1. Description: Executive Director Informational Update

2. Summary:

A new partnership with FAU's ACGME-Accredited Psychiatry Residency Program will provide increased access to psychiatric care.

3. Substantive Analysis:

Expansion of mental health care is a priority across the Health Care District due to identified community needs. A 3-year contract was signed with FAU to integrate their resident physicians into our health centers, thus providing a resource of expertise in the field of psychiatry and increased access to care. The financial agreement includes \$750,000 annually for four resident physicians and one psychiatric attending physician 5 days per week. Initial appointment availability is planned at Mangonia Park and Delray Beach Health Centers in mid-July, with a contract start date of 07/03/23.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements		Yes 🗌 No 🔀
Annual Net Revenue		Yes No No
Annual Expenditures	FY 2023 187,500; Annually \$750,000	Yes No 🗌

Candice Abbott
VP & Chief Financial Officer

Reviewed for financial accuracy and compliance with purchasing procedure:

5. Reviewed/Approved by Committee:

N/A	
Committee Name	Date Approved

6. Recommendation:

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

Approved for Legal sufficiency:

Bernahe Icaza
VP & General Counsel

Alicia Ottmann

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

1. Description: Licensed Independent Practitioner Credentialing and Privileging

2. Summary:

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

3. Substantive Analysis:

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

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

Last Name	First Name	Degree	Specialty	Credentialing
Dabu	Darnel	MD	Family Medicine	Recredentialing
Hirsch	Karen	LCSW	Licensed Clinical Social Worker	Recredentialing

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

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

Darnel Dabu, MD, joined the Jupiter Clinic in 2017, specializing in Family Medicine. He attended The University of Santo Tomas and completed his Residency at the University of Arkansas College of Medicine. Dr. Dabu is certified in Family Medicine by The American Board of Family Medicine. He has been in practice for thirteen years and is fluent in Tagalog.

Karen Hirsch, LCSW, joined the West Palm Beach Clinic in 2019 as a Licensed Clinical Social Worker. She attended Florida Atlantic University. She has been in practice for seven years and is fluent in Spanish.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements		Yes No No
Annual Net Revenue		Yes 🗌 No 🔀
Annual Expenditures		Yes No No

Annual Expenditures	Yes No No
Reviewed for financial accuracy and compliance with purchase	sing procedure:
N/A Candice Abbott	
VP & Chief Financial Officer	
5. Reviewed/Approved by Committe	e:
N/A	
Committee Name	Date Approved
Staff recommends the Board approve the F Dabu, MD, Family Medicine. Staff recommends the Board approve the F Hirsch, LCSW, Licensed Clinical Social V	Recredentialing and privileging of Karen
Approved for Legal sufficiency:	
Bernahi laza	
VP & General Counsel	
lh Ino	Alicia Ottmann
Dr. Charmaine Chibar FQHC Medical Director	Alicia Ottmann, PA-C AVP, Executive Director FQHC & Pharmacy Services

1. Description: Quality Report

2. Summary:

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

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

3. Substantive Analysis:

PATIENT SAFETY & ADVERSE EVENTS

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

PATIENT SATISFACTION AND GRIEVANCES

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

QUALITY ASSURANCE & IMPROVEMENT

Colorectal Cancer Screening Initiative: We have partnered with Exact Sciences Laboratories to offer Cologuard to our eligible clinic patients. Cologuard is a colorectal cancer screening test that tests for both DNA changes and blood in the stool. It is indicated to screen adults 45 years or older at average risk for colorectal cancer. The recommended testing frequency is every 3 years, and it can be done in the privacy of the patient's home. We collaborated with the Cologuard representatives to create a standard operating procedure (SOP) for the clinics to order the test and receive the test results back in a timely manner. In-service training was provided to clinic providers and nursing staff in February with the help of the Cologuard representatives.

UTILIZATION OF HEALTH CENTER SERVICES

Individual monthly provider productivity stratified by clinic.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements		Yes No No
Annual Net Revenue		Yes No
Annual Expenditures		Yes No

Reviewed for financial accuracy and compliance	with purchasing procedure:
N/A	
Candice Abbott VP & Chief Financial Officer	
. Reviewed/Approved by Committe	ee:
N/A	
Committee Name	Date Approved
Recommendation:	
Staff recommends that the Board approve	e the Quality Report presented.
Approved for Legal sufficiency:	
Bernabe Icaza	
Bernabe Icaza VP & General Counsel	
lh Ino	alicia Ottmann
Dr. Charmaine Chibar	Alicia Ottmann, PA-C

AVP, Executive Director FQHC & Pharmacy Services

FQHC Medical Director



Quality Council Meeting Minutes Date: March 7, 2023

Time: 10:00AM - 12:00PM

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

Excused: N/A

Minutes by: Nicole Glasford – Executive Assistant

AGENDA ITEM	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSI	DATE
			BLE PARTY	
	PATIENT SAFETY & AD	VERSE EVENTS		
OCCURRENCES	Report Summary			
	The February 2023 Risk Management (Incident Reports) Tableau dashboard showed 29 reported events. 28 incidents and 1 good catch. Mangonia Park (7) was our highest-reported location, with 24% of all reported events. Trends by Clinic: Incidents			
	 Belle Glade Dental – 1 Belle Glade Medical- 2 Delray Dental- 0 Delray Medical-2 Jupiter- 0 Lake Worth Medical- 3 Lantana dental- 1 			



- 8. Lantana Medical- 3
- 9. Mangonia- 7
- 10. Medical Clinic Administration- 2
- 11. West Boca- 2
- 12. West Palm Beach Dental- 2
- 13. West Palm Beach Medical -2

(<u>February</u> Risk Report Summary presented with graphs.)

UTILIZATION

OPERATIONS

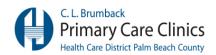
Productivity

The Clinics continue to see an increase in overall total billable visits since the start of the pandemic:

Productivity February 2023					
Target		Seen		% of Goal	
In Person	Tele	In Person	Tele	Total	
5326		4337		81%	
1462		1547		106%	
668		544		81%	
555		549		99%	
1003		890		89%	
2085		1966		94%	
954		922		97%	
687		658		96%	
12,739		11,413		90%	
	In Person 5326 1462 668 555 1003 2085 954 687	In Person Tele 5326	In Person Tele In Person 5326 4337 1462 1547 668 544 555 549 1003 890 2085 1966 954 922 687 658	In Person Tele In Person Tele 5326 4337	



	(Clinic productivity report with graphs was presented.)		
	Walk-ins		
	Medical		
	Scheduled: 7,045		
	• Walk-Ins: 1,480		
	Dental:		
	• Scheduled: 2,494		
	• Walk-Ins: 394		
	No Show Rates		
	No Show rates are trending downward at 18.8%, down		
	from 19.3% the previous month.		
	(Report with graph presented.)		
	(Report with graph presented.)		
	PATIENT RELA	TIONS	
GRIEVANCES,	Patient Relations Dashboard		
COMPLAINTS	For January 2023, there were a total of 21 Patient		
&	Relations Occurrences that occurred between 6 Clinics		
COMPLIMEN	and Clinic Administration. Of the 21 occurrences, there		
TS	were 7 Grievances and 14 Complaints. The top 5		
	categories were Care & Treatment, Respect Related,		
	Finance, Physician Related and Nursing Related Issues.		
	The top subcategory was Inappropriate Care with 3		
	occurrences, followed by Refusal of Treatment, Wait		
	Time, Billing Issues and Bad attitude/rude with 2		
	occurrences in each. There were 11 compliments received		
	across 5 Clinics and Clinic Administration. Of the 11		



	compliments, 8 were patient compliments and 3 were	
	employee-to-employee "Thumbs-Up" compliments.	
	Breakdown of each clinic presented.	
	(Patient Relations Report & Patient Relations Dashboard	
	with Graphs presented.)	
SURVEY	Patient Satisfaction Survey – January 2023	
RESULTS	From January thru January 2023, the clinics sent 126,494	
	patient Satisfaction surveys to patients, of which 20% of	
	the surveys were opened and patients completed 4% of	
	the surveys. For January 2023, there were 430 Patient	
	Satisfaction Surveys completed, which is a 1% increase	
	from the previous month and represents 4% of total	
	patient visits for the month. The top 5 and lowest 5 scored	
	questions were presented. Of the 430 surveys, 75% were	
	submitted by females and 25% by males; most patients	
	prefer appointments on Tuesday mornings, and patients	
	completed most surveys after the first visit to the practice.	
	Promoter scores increased by 3%, and detractor scores	
	decreased by 2% compared to last month. The Net	
	promoter Score increased from 67 to 71.	
	Highest Promoters for January 2023 (bold = new to the 5	
	best questions):	
	 Quality of Medical Care – 88% (increased from 	
	83%)	
	 Care and concern of our nurses/medical assistants 	
	- 85% (Same as last month)	
	Maintaining patient privacy throughout this visit	
	- 85%	
	 Our practice – 85% (increased from 83%) 	



	Courtesy of the person who took your call – 84%	
	(increased from 83%)	
	Highest Detractors for November 2022: Four of the top 5 detractors improved from last month. • Being informed about any delays during this visit – 15% (decreased from 21%) • Your ability to contact us after hours - 14% (decreased from 19%) • Waiting time in the reception area – 14% (decreased from 17%) • Waiting time in the exam room – 12% (decreased from 15%) • Appointment available within a reasonable	
	amount of time - 11% NOTE: "Your phone calls answered promptly" was improved from last month and is not a top 5 detractor.	
	January data presented: rates of return by clinic, top promoter and detractor scores by clinic, patient comments by clinic. The Boca Clinic had the greatest rate of return at 10% of all visits provided. Trends over time presented by clinic location.	
	(Patient Satisfaction Survey PowerPoint presented.)	
OUTBOUND	Provider Reschedules	
CALL	In February 2023, The Clinic Service Center contacted 160	
CAMPAIGNS	patients to reschedule their appointment. This was due to	
	the provider being on PTO, the provider's resignation and	
	the provider is unavailable. This was a 125.35% increase	



	from the previous month when we rescheduled 71		
	patients.		
	patients.		
	Outbound Campaigns		
	In February 2023, The Clinic Service Center contacted the		
	Dental patients who had missed or were a no-show and		
	canceled their appointment from August 2022-January		
	2023. Of the 838, the CSC scheduled 138 patients, and 402		
	already had an appointment.		
	After Hours Call Return Summary Report – February 2023		
	In February 2023, the Clinic Service Center returned 76		
	calls received from the After-Hours service. This was a		
	10% decrease from the previous month. After-hours calls		
	by Type, by clinic, and by Department presented. Of the 76 after hours calls received 19 (25%) of the calls were		
	paged out to the on-call provider for a clinical issue. There		
	were 5 calls paged out to a recovery coach. All clinical		
	issues were paged out. The majority of after-hours calls		
	were for clinical issues, followed by appointment		
	requests. Trends over time reported.		
	(Outbound Campaign PowerPoint presented.)		
NEXT THIRD	Next Third Available		
AVAILABLE	The Next Third Available (NTA) report as of February 28,		
	2023, was presented by the service line for each Clinic		
	location. The report excludes "same day" appointment		
	slots. Monthly data and Trends over time data presented		
	for each clinic and service line. Report data revised to		
	reflect the <u>average number of days</u> for each provider per		
	month.		
		ı	



February 2023 data:

Women's Health:

BG: between 16 and 25 daysLW: between 0 and 9 days

Belle Glade PCC:

Providers: between 4 and 8 daysResidents: between 2 and 34 days

Boca PCC: Between 0 and 1 day

Delray Beach PCC: Between 2 and 18 days

<u>Jupiter PCC</u>: Between 0 and 1 day <u>Lake Worth PCC</u>: Between 1 and 3 days <u>Lantana PCC</u>:

Adults: Between 0 and 36 daysPeds: Between 14 and 25 days

<u>Lewis Center PCC</u>: Between 0 and 2 days <u>Mangonia Park PCC</u>: Between 3 and 6 days WPB PCC:

Adults: Between 2 and 31 daysPeds: Between 4 and 5 days

Behavioral Health:

• Mangonia Park: Between 0 and 1 day

• Other Locations:

■ Boca: 4 days.

■ All other locations. Between 0 days

Dental New Adult (Comps):

• BG: 1 day wait

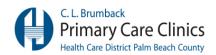
• DB: 27 days

Dental New Peds (Comps):

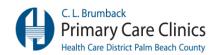
• BG: 0 days



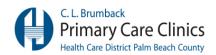
	 LAN: Between 9 and 17 days WPB: 33 days Dental Procedures: BG: Between 0 and 31 days DB: 0 days LAN: Between 0 and 31 days WPB: Between 0 and 14 days Hygiene: BG: Between 0 and 16 days wait 			
	 DB: Between 0 and 64 days LAN: Zero (0) days WPB: Zero (0) days (Third Next Available PowerPoint presented.)			
	QUALITY			
	QUALITY AUD		<u> </u>	
MEDICAL	Hemoglobin A1C/Point of Care Testing Shows: The diabetes measure data for January 2023 shows that our patients are currently controlled at _53_ %, while 19% are uncontrolled (of 1116 diabetic patients total) and 28% of patients need data. HRSAs goal is to have 67% of patients with controlled diabetes. There were 772 POC A1Cs done (69% of Diabetic Patients). The majority of controlled patients (96%) and uncontrolled patients (97%) had the A1c done at POC vs. lab. The Lantana Clinic (80%). Boca Clinic (78%) and Jupiter Clinic (77%) have the highest percentage of A1c use among the clinics in Jan 2023.	Connect with Luis about controlled diabetic patients, what can the pharmacy team do to review data for that population & medication management	Dr. Chibar	3/7/23



Colorectal Cancer Screening Jan 2023 Satisfied: 534 (26%) Needs Data: 1549 (74%)	Follow-up with Dr. Warren regarding Colorectal Cancer Screening data and reasons behind some metrics not being met compared to last year Follow-up with Medical Assistants at the clinics with the highest missed orders for Colorectal Cancer Screening and	Dr. Chibar Angela	3/7/23
FIT Test Jan 2023 It appears that Fit tests are not being returned as expected. Our highest return rates were at Boca Clinic 47 (36%), Belle Glade Clinic 91 (30%), and West Palm 99 (31%). Belle Glade Clinic and Boca Clinic are leading the charge in Point of Care FIT Tests. (Report with graph presented.)	orders not being dropped		
Cervical Cancer Screening Jan 2023 Satisfied: 1467 (61%) Needs Data: 950 (40%) Breast Cancer Screening Jan 2023			
Satisfied screenings – 580 (48%) Unsatisfied Screenings – 620 (52%) Not Met with order –487 (79%) Not Met (Patient Missed) – 133 (21%)			



DENTAL	<u>Dental Sealants</u>			
	January – December 2023: 84% (49; n=58)			
	January 2023: 84% (49; n=58)			
	<u>Limited Exams</u>	include trend of rolling 12 months for the "Dental Measures" dashboard	Nancy	3/7/23
	January 2023: 425	the Bental Weasares aushbourd		
	-Same Day Extractions: 222 (52% n=425)			
	-Antibiotics Given: Patients without a future extraction			
	appointment type 75 (18% n=425)			
	-Ext. not needed(non-emergent): 77 (18%n=425)			
	-Returns (Follow-Up): Patients with a future extraction			
	appointment type 51 (12% n=425)			
	-Returned within 21 days for ext.: 36 (71% n=51)			
	MDI/WHO	Kickoff including the trend of rolling 12	Nancy	3/7/23
	January 2023	months for the "Medical Dental Integration and Warm Hand Off"		
	Total Well Visit Pediatric Patients 223	dashboard.		
	 Excluded from MDI KPI 101 (45%; n=223) Eligible MDI 122 (55%; n=223) 	Set up a meeting with Epic and MHS with Alicia and Ferwerda to inquire about a feature of not having to	Andrea	3/7/23
	Total Pediatrician KPI Patients (Pts who do not have a dental home): 122	manually order medication separately but dropping it to other fields.		
	 No MDI 18 (15% n=122) MDI 104 (85% n=122) 			



	Total of patients who had MDI visits: 1	.04	
	- Declined WHO 60 (58% n=10 4	1)	
	- <u>Interested in WHO 44 (42% n</u> =	104)	
	Total Dentist KPI Patients (Pts. Interes	ted in WHO): 44	
	- WHO not seen by Dentists 10		
	- WHO seen by Dentists 34 (77 9		
	Dental Clinic Audit Summary		
	Jonas Gillio Additi Gallinia,		
	Dental Clinic Audit - January 2023		
	Belle Glade	92%	
	Delray	93%	
	Lantana	97%	
	West Palm Beach	94%	
		3470	
NURSING	Higher Level of Care		
	Higher Level of Care December 94 ER referrals/90 patients were se	ant to the ER in	
	December. The breakdown of the r		
	follows:	21211413 13 43	
	• WH- 13 (14%)		
	• Peds- 20 (21%)		
	• Adult- 60 (64 %)		
	• Adult Crisis- 1 (1%)		
	 Peds Crisis-0 		
	There were 4 patients with multiple	e orders in	
	December-		



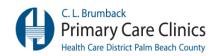
	Health Care District Pa	aim beach County
1.	The patient was referred by telemedicine for	
	SOB, and urinary retention. Referral	
	appropriate, but recommend patient to have	
	in clinic visit if able (all visits tele since	
	August 2022). The second referral was tele as	
	well. UTI from culture on 12/8 during first ER	
	referral. Questions regarding the process	
	between first and second referrals.	
2.	The patient was referred during an after-	
	hours discussion with the on-call provider.	
	The second referral was for the same patient	
	but for adult crisis stabilization, not for the	
	same reason as the first referral.	
3.	The patient had 2 referrals ordered on the	
	same day- 1 by medical and 1 by dental. Both	
	are for chest pain following anesthesia in	
	dental. Education regarding 1 referral	
	needed from 1 dept.	

Both for noncompliance with dialysis schedule-symptomatic. **Both referrals** appropriate.

4. Patient sent to ER during Nurse visit and then again on return follow up visit with provider.

PEDS REFERRALS- highest producer was Dr. Clarke-having 8 (40%); Dr. Marzouca, 5 (25%). (Both providers are in WPB)

The incorrect referral type was used by Dr. Clarke for 2 of her 8 pediatric referrals and Dr. Lazaro was 1 of



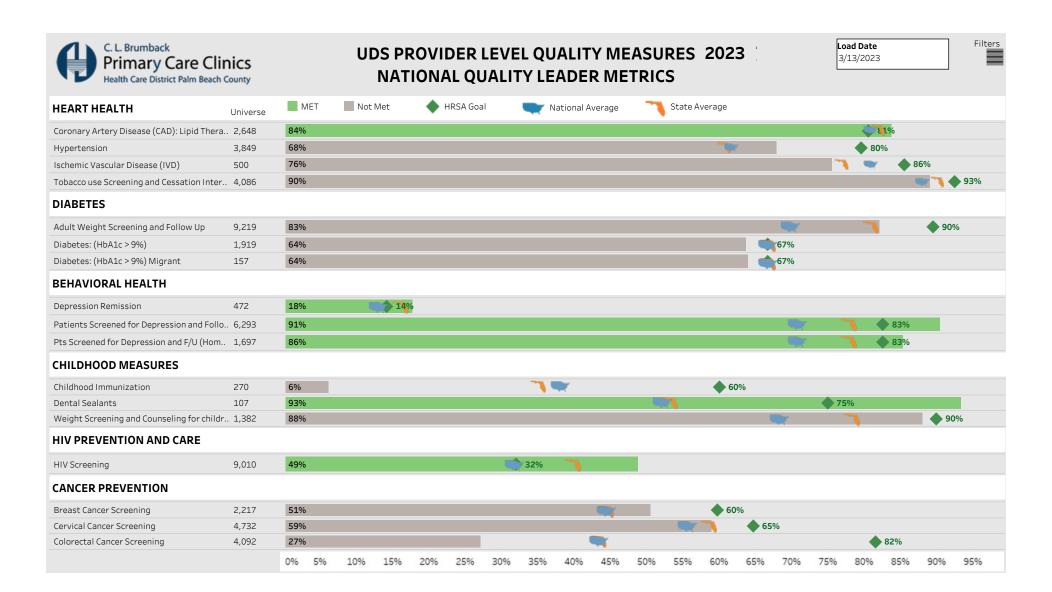
	the 3 referrals. (AMB Pediatric Emergency Medicine			
	referral should be used)			
	ADULT REFERRALS- highest producer this month was Dr. Dabu, with 6 (10%).			
	The incorrect referral type was used by Maria Lara (November as well) and resident Milhenka Auguste. (AMB referral to Emergency Medicine should be used)			
	Can we remove the Emergency Medicine Referrals for both adult and peds that DO NOT HAVE AMB?			
	Inter-clinic transport referral is active but not being utilized. Retraining is scheduled.			
	HIV Linkage To Care 8 out of 12 were linked to care within 30 days.			
	QUALITY ME	TRICS		
Of the <u>16</u> U	UDS YTD 202 DS Measures: <u>6</u> Exceeded the HRSA Goal and <u>10</u> were short of		lealthy People	e Goal)
Medical UDS	Adult Weight screening and follow-up: (_80_% / 90%)			
Report	Breast Cancer Screening: (_50_%/60%)			



Cervical Cancer Screening: (_59_%/65%)			
Childhood immunization: (_6_%/60%)			
Colorectal Cancer Screening: (_27_% / 82%)			
Coronary Artery Disease CAD: (_84_% / 81%)			
Dental Sealants: (_91_% / 75%)			
Depression Remission: (_18_% / 14%)			
Diabetes: (_63_%/67%)			
HIV Screening: (_49_% / 32%)			
Hypertension: (_68_% / 80%)			
Ischemic Vascular Disease (IVD): (_74_% / 86%)			
Depression screening: (_90_% / 83%)			
Depression screening (Homeless): (_85_% / 83%)			
Tobacco use screening & cessation: (_89_% / 93%)			
Weight assessment, Children & Adolescents: (_87_% /90%)			
	Follow-up with Cologuard about retrieving a list of prior positive results and invalid test results, as well as confirm if denatured due to temperature results can be pushed out.	Dr. Chibar	3/7/23
	Confirm with Cologuard representatives for the opportunity to do mass orders for Cologuard.	Dr. Chibar	3/7/23
	Work with Monica and Cologuard representatives to see if we can generate year to date dashboard.	Dr. Chibar	3/7/23
	Work with Monica to update the format of the "UDF Provider Level Quality		



		Measures Dashboard" for side-by-side comparison.	Andrea	3/7/23
Meeting Ad	ljourned: 12:29 PM			



GRAND TOTAL

907.0

7,946 4,793 12,739

7,163

4,250

11,413

90%

RODUCTIVITY REPORT FEBR L PROVIDERS AS	UARY 2023 S 02/28/2023 Based on Co	ompleted Appointmen	ts	< 5:	1%	>=51% a	and < 80%	>= 805	% and <100%	>= 100%
,	0 02, 20, 2020 20300 011 01		ADULT	CARE						
Provider	Daily Target	Days Worked	T			Takal far sh	Manth Care	% Monthly	Target Achieved	Daily Ave
Provider	Daily Target	Days Worked	AM	et for the Mo	Total	AM	Month Seen PM	·	Total	Daily Ave
ALFONSO PUENTES, RAMIRO, MD	17	5.0	61	27	88	63	27	90	102%	18.0
BUI, THY, DO	17	18.5	194	122	316	114	134	248	78%	13.4
CASTIGLIA, SARAH, MD	17	19.0	203	122	325	107	46	153	47%	8.1
DABU, DARNEL, MD	***9	3.5	9	20	29	6	15	21	71%	6.0
DONNELL, MASON, PA	15	18.5	171	108	279	161	80	241	86%	13.0
OORCE-MEDARD, JENNIFER, MD	17	0.5	9	0	9	7	0	7	78%	14.0
ERNANDEZ SANCHEZ, MARCO, NP	15	17.0	161	96	257	178	63	241	94%	14.2
LOREZ, GLORIA, MD	17	17.0	173	116	289	151	101	252	87%	14.8
HARBERGER, SENECA, MD	17	15.0	163	95	258	105	47	152	59%	10.:
EAN-JACQUES, FERNIQUE, NP	15	17.0	161	96	257	168	76	244	95%	14.4
COOPMAN, REBECCA, PA	15	19.0	179	108	287	204	92	296	103%	15.0
AM, MINH DAI, NP	15	16.5	160	90	250	187	80	267	107%	16.7
ANGLEY, TAMARA, NP	15	14.5	135	84	219	102	49	151	69%	10.4
ARA SUAREZ, MARIA, NP	15	19.0	179	108	287	136	79	215	75%	11.
NAVARRO, ELSY, NP	15	17.5	170	96	266	176	87	263	99%	15.0
OUKELAK, GERMAINE, MD	17	19.5	212	122	334	204	102	306	92%	15.
PEREZ, DANIEL JESUS, MD	*** 5	5.5	12	21	33	11	15	26	80%	4.7
PHILISTIN, KETELY, NP	15	16.0	152	90	242	143	69	212	88%	13.
			135				73	200		13.3
PIERRE LOUIS, JOANN, NP	15	14.5		84	219	127			91%	
T. VIL, CARLINE, NP	15	14.5	135	84	219	113	74	187	85%	12.
TANEK, EWELINA, PA	15	11.0	107	60	167	82	38	120	72%	10.
AHERI, NERGESS, DO	*** 11	3.0	20	14	34	25	8	33	97%	11.0
VARREN, SANDRA, MD	17	11.0	121	68	189	102	45	147	78%	13.
VILKINSON, SARAH, PA	15	16.5	153	96	249	95	45	140	56%	8.5
VILMOT, ALTHEA, NP	15	16.5	137	85	222	78	47	125	56%	7.6
ADULT CARE TOTALS		345.5	3,313	2,013	5,326	2,845	1,492	4,337	81%	
vg Target Precepting										
PY1	c			PROGRAM	_	C/I	20	102	152%	0.5
	6	12.0	45	23	67	64	38	102		8.5 11.
PY2	10	20.0	132	72	204	142	79	221	108%	
PY3	14	29.0	287	129	415	228	107	335	81%	11.0
RESIDENTS TOTAL		61.0	463	223	687	434	224	658	96%	
			PEDIATR	IC CARE						
CLARKE-AARON, NOELLA, MD	17	17.5	184	116	299	194	109	303	101%	17.3
DESSALINES, DUCLOS, MD	17	15.5	163	102	265	185	106	291	110%	18.3
	17	16.5	173	109	282	202	107	309	109%	18.
AZARO RIVERA, NANCY, MD				i			127			
MARZOUCA, KISHA F., MD	17	18.5	194	122	316	206	<u> </u>	333	105%	18.0
NORMIL-SMITH, SHERLOUNE, MD	17	17.5	184	116	299	191	120	311	104%	17.8
PEDIATRIC CARE TOTALS		85.5	898	564	1,462	978	569	1,547	106%	
		W	OMEN'S H	EALTH CAI	RF					
FERWERDA, ANA, MD	*** 17 / 14 BG	9.5	115	44	159	72	35	107	67%	11.3
FINLEY, NICOLE, NP	15	18.0	171	102	273	169	88	257	94%	14.3
PROPHETE, JOYCE, MD	*** 17 / 14 BG	14.0	149	86	235	120	60	180	76%	12.
MEN'S HEALTH CARE TOTALS		41.5	436	232	668	361	183	544	81%	
				LTH INTEG						
CALDERON, NYLSA, LMHC	10	13.5	84	52	136	60	80	140	103%	10.
BROWN, JEREMY, LCSW	*** 9	19.5	100	65	165	90	80	170	103%	8.7
ONES, KIARA, LCSW	***9	17.5	99	63	162	96	86	182	112%	10.
UCCHESI, KAREN, Counselor	10	9.0	60	32	92	34	23	57	62%	6.3
NTEGRATION TOTALS		59.5	343	212	555	280	269	549	99%	
vg New provider *** Avg Training Provider										
				ALTH ADDI	1			_		
HILLIPS, COURTNEY, MD	8	0.5	1	0	1	1	0	1	100%	2.0
PETER, AMANDA, NP	12	17.5	130	82	211	67	38	105	50%	6.0
BURROWES, SHARON, NP	12	18.5	137	86	223	69	45	114	51%	6.2
HIRSCH, KAREN, LCSW	*** 5	10.5	34	20	54	34	24	58	107%	5.5
MILETA, SNJEZANA, LMHC	10	18.0	108	72	180	141	70	211	117%	11.
MITCHELL, ANGELA, LCSW	10	17.0	106	66	172	133	69	202	117%	11.
REXACH, CLAUDIA, LMHC	10	16.0	102	60	162	135	64	199	123%	12.
ADDICTION TOTALS		98	617	387	1003	580	310	890	89%	
Modifed Target - Admin time										
			DEN							
ABREU, MARIANA, DDS	16	17.0	171	102	274	161	44	205	75%	12.
ALI, BUSHRA, DMD	16	17.5	173	109	282	201	111	312	111%	17.
ALWEHAIB, ARWA, DDS	16	18.0	181	109	290	217	117	334	115%	18.0
SOWEN, BEVERLY, DMD	16	18.5	182	115	298	148	92	240	81%	13.0
CUCURAS, JOHN N, DDS	16	3.5	38	19	58	42	11	53	92%	15.
	16	17.5	173	109	282	186	91	277	98%	15.
		19.0	190	115	306	204	92	296	97%	15.0
EMINARIO, ADA, DDS	16		182	115	298	154	95	249	84%	13.
SEMINARIO, ADA, DDS SOFIANOS, MICHAEL, DMD	16	18.5			2,085	1,313	-	1,966	94%	
SEMINARIO, ADA, DDS SOFIANOS, MICHAEL, DMD WILLIAMS, RICHARD, DMD		18.5 129.5	1,291	794	_,	1,515	653	1,500	5 .70	
SEMINARIO, ADA, DDS SOFIANOS, MICHAEL, DMD WILLIAMS, RICHARD, DMD			1,291	/94		1,313	653	1,500	3.70	
SEMINARIO, ADA, DDS SOFIANOS, MICHAEL, DMD WILLIAMS, RICHARD, DMD ITAL TOTALS		129.5	1,291 DENTAL I							
SEMINARIO, ADA, DDS SOFIANOS, MICHAEL, DMD WILLIAMS, RICHARD, DMD ITTAL TOTALS MOZER NASCIMENTO, ARIANNE	16	129.5	DENTAL I		149	90	52	142	95%	
SEMINARIO, ADA, DDS SOFIANOS, MICHAEL, DMD WILLIAMS, RICHARD, DMD ITTAL TOTALS MOZER NASCIMENTO, ARIANNE	16	18.5 3.0	91 14	HYGIENE	149 24				95% 54%	4.3
SEMINARIO, ADA, DDS SOFIANOS, MICHAEL, DMD WILLIAMS, RICHARD, DMD	16	129.5	DENTAL I	HYGIENE 58	149	90	52	142	95%	4.3
EMINARIO, ADA, DDS OFIANOS, MICHAEL, DMD VILLIAMS, RICHARD, DMD TAL TOTALS MOZER NASCIMENTO, ARIANNE GONZALEZ, NANCY	16 8 8	18.5 3.0	91 14	HYGIENE 58 10	149 24	90	52 8	142	95% 54%	4.3 7.8
EMINARIO, ADA, DDS OFIANOS, MICHAEL, DMD VILLIAMS, RICHARD, DMD TAL TOTALS MOZER NASCIMENTO, ARIANNE SONZALEZ, NANCY MASON, SHERRY	8 8 8	18.5 3.0 17.5	91 14 86	58 10 54	149 24 141 125 298	90 5 69	52 8 68	142 13 137	95% 54% 97%	7.7 4.3 7.8 8.2
EMINARIO, ADA, DDS OFIANOS, MICHAEL, DMD VILLIAMS, RICHARD, DMD TAL TOTALS MOZER NASCIMENTO, ARIANNE SONZALEZ, NANCY MASON, SHERRY HARDCASTLE, CORINA	16 8 8 8 8	18.5 3.0 17.5 15.5	91 14 86 77	58 10 54 48	149 24 141 125	90 5 69 65	52 8 68 62	142 13 137 127	95% 54% 97% 102%	7.8 8.2

ALL CLINICS AS 02/28/2023 Based on Completed Appointments Category Target for the Month **Total for the Month Seen** % Monthly Target Achieved AS 02/28/2023 AM PM Total AM PM Total ADULT CARE 3,313 2,013 5,326 2,845 1,492 4,337 81% PEDIATRIC CARE 898 1,462 978 1,547 106% 564 569 WOMEN'S HEALTH CARE 668 436 232 361 183 544 81% BH INTEGRATION 549 343 212 555 280 269 99% BH ADDICTION 617 387 1,003 580 310 890 89% DENTAL HEALTH 1,291 2,085 1,966 94% 794 1,313 653 DENTAL HYGIENE 97% 586 368 954 372 550 922 RESIDENCY PROGRAM 463 223 687 434 224 658 96% **Grand Total** 12,739 7,163 4,250 11,413 90% 7,946 4,793 **Adult Care Pediatric Care** 200% 120% 180% 100% 160% 80% 140% 60% 120% 100% 40% 80% 60% 40% 20% 0% LANTANA WPB Women's Health Care **BH** Integration 200% 200% 180% 180% 160% 160% 140% 140% 120% 120% 100% 100% 80% 80% 82% 60% 60% 40% 40% 20% 20% 0% LAKE WORTH BELLE GLADE JUPITER LAKE WORTH LANTANA DELRAY **BH Addiction Dental Hygiene** Dental 200% 200% 200% 180% 180% 180% 160% 160% 160% 140% 140% 140% 120% 120% 120% 100% 100% 100% 80% 80% 80% 60% 60% 60% 40% 40% 40% 20% 20% 20% 0% 0% 0% PORT CLIN 0% DELRAY BELLE LANTANA WPB JUPITER MANGONIA DELRAY LANTANA WPB BELLE GLADE Pending **MEDICAL PAYER MIX DENTAL PAYER MIX** Medicaid Medicaid 2% Self-Pay 48% Managed Care Self Pay Managed Care 55% Pending 3% Medicare Medicaid 2% 2% Productivity over a year 100% 98% 95% 94% 92% 90% 88% (88%) 86%

>=51% and < 80%

>= 80% and <100%

PRODUCTIVITY REPORT FEBRUARY 2023

84%

Mar-22

Apr-22

May-22

Jun-22

Jul-22

Aug-22**75** Sep-22

Oct-22

Nov-22

Dec-22

Jan-23

Feb-23

	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23
ADULT CARE												
ALFONSO PUENTES, RAMIRO, MD	87%	96%	94%	90%	92%	92%	94%	82%	88%	88%	85%	102%
	313/359	231/240	282/301	316/350	263/287	324/352	198/210	288/352	249/283	212/240	225/264	90/88
DILL THY DO			1	ı	105%	104%	86%	87%	94%	96%	106%	78%
BUI, THY, DO					77/73	400/386	288/334	328/377	223/237	344/359	155/146	248/316
			1					, .				
CASTIGLIA, SARAH, MD			1	I	100%	56%	63%	45%	60%	50%	46%	47%
CASTIGLIA, SAIGAII, IVID					30/30	113/201	194/309	115/255	165/274	164/330	144/316	153/325
					•							
DABU, DARNEL, MD	91%	102%	102%	97%	93%	95%	78%	64%	100%	92%	80%	71%
	279/307	286/281	347/341	232/238	300/323	341/359	149/190	130/204	62/62	41/45	29/36	21/29
		•										
DONNELL, MASON, PA								100%	100%	100%	79%	86%
								19/19	109/109	132/132	233/294	241/279
DORCE-MEDARD, JENNIFER, MD	67%	83%	133%	83%	100%	106%	44%	120%				78%
	6/9	15/18	12/9	15/18	67/67	19/18	4/9	12/10				7/9
				$\overline{}$								
FERNANDEZ SANCHEZ, MARCO, NP	83%	83%	95%	111%	109%	117%	104%	91%	90%	96%	100%	94%
	219/264	263/317	300/317	378/340	263/242	392/334	196/189	296/325	150/135	282/294	143/143	241/257
FLOREZ, GLORIA, MD	95%	87%	90%	94%	93%	91%	106%	86%	66%	82%	86%	87%
	323/340	200/230	290/323	295/315	158/170	318/350	227/213	264/306	189/124	167/204	265/308	252/289
HARBERGER, SENECA, MD	100%	100%	100%	95%	83%	92%	90%	86%	70%	100%	76%	59%
	14/14	24/24	75/75	38/40	196/236	282/308	199/221	177/206	247/172	154/154	234/309	152/258
												<u> </u>
JEAN-JACQUES, FERNIQUE, NP	87%	100% 295/295	102%	105%	101%	102%	95%	98%	95%	97%	95%	95%
	275/317	295/295	253/249	317/301	305/301	355/349	102/107	319/325	135/150	234/242	286/302	244/257
	973/		000/	4440/	4400/	4050/	1010/					
KOOPMAN, REBECCA, PA	87% 308/354	86% 273/316	99% 306/308	111% 318/286	112% 312/278	105% 264/251	124% 326/262	108% 261/242	130% 348/267	98% 238/242	123% 391/318	103% 296/287
	300/354	273/310	300/308	310/200	312/270	204/251	320/202	201/242	340/207	230/242	331/310	230/207
	1040/	1000/	1070/	1120/	1150/	1110/	1000/	1000/	070/	4070/	4000/	4070/
LAM, MINH DAI, NP	104% 330/318	106% 304/287	107% 292/272	113% 308/272	115% 252/220	111% 197/177	100% 237/236	100% 325/326	97% 243/250	107% 307/288	108% 154/143	107% 267/250
	533,722	00 1, 201						1 020,020	1 = 10, = 00			
LANGLEY, TAMARA, NP			1	ı	100%	88%	99%	75%	85%	89%	89%	69%
LANGLET, TAWARA, NP					7/7	99/112	201/204	207/275	206/242	276/309	236/264	151/219
					•							
LARA SUAREZ, MARIA, NP			ī	1	1	I	100%	98%	68%	78%	88%	75%
LAKA JOAKEZ, WAKIA, W							16/16	141/144	163/240	242/189	189/166	215/287
			•	•	•	•						
NAVARRO, ELSY, NP	97%	97%	99%	101%	99%	94%	99%	91%	90%	96%	90%	99%
TWW/ units, EEST, IN	306/317	270/279	283/287	160/159	275/279		273/275	275/302	219/242	240/251	204/227	263/266
				-								
NOUKELAK, GERMAINE, MD			1	1	1	l	103%	87%	74%	73%	77%	92%
,,							199/194	280/320	198/266	126/172	252/325	306/334
							•		_			
PEREZ, DANIEL JESUS, MD	97%	88%	86%	100%	91%	100%	98%	94%	102%	90%	78%	80%
,	186/192	171/194	195/228	254/254	180/198	131/131	100/102	119/126	42/41	33/37	34/43	26/33
											_	
PHILISTIN, KETELY, NP	90%	92%	88%	99%	99%	87%	81%	85%	90%	85%	77%	88%
	271/302	293/318	238/272	322/325	239/242	167/191	208/256	283/333	218/243	276/325	232/302	212/242

	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23
PIERRE LOUIS, JOANN, NP	95%	105%	97%	97%	89%	97%	87%	83%	88%	83%	83%	91%
	258/273	285/272	271/280	278/286	229/256	231/238	190/219	246/295	187/212	236/196	272/225	200/219
				_								
ST. VIL, CARLINE, NP	84%	92%	95%	101%	85%	102%	90%	88%	79%	79%	82%	85%
on the or internet, the	261/310	242/264	191/201	296/294	83/98	202/198	232/257	219/249	167/212	186/234	190/233	187/219
STANEK, EWELINA, PA			I	I		59%	77%	90%	68%	76%	80%	72%
STAINER, EWELINA, PA						12/20	102/132	186/208	171/250	240/317	230/287	120/167
		1	T	0.00/	740/	1020/	000/	0.40/	1000/	4000/	4000/	070/
TAHERI, NERGESS, DO				86% 104/121	74%	102% 103/101	86%	94% 65/69	100% 33/33	100% 50/50	100% 31/31	97%
				104/121	75/101	103/101	25/29	05/09	33/33	50/50	31/31	33/34
				_								
WARREN, SANDRA, MD	85%	100%	68%	74%	89%	63%	52%	83%	75%	75%	72%	78%
	76/89	23/23	23/34	28/38	54/61	19/30	11/21	50/60	129/172	148/197	100/138	147/189
		_										
WILKINSON, SARAH, PA			55%	79%	76%	87%	69%	67%	70%	63%	65%	56%
			92/168	249/316	207/271	257/296	168/242	212/317	128/182	190/303	190/294	140/249
WILMOT, ALTHEA, NP							100%	82%	29%	35%	49%	56%
Them of the state							2/2	132/161	66/231	68/192	75/154	125/222
			•	•		•	-			•	•	<u> </u>
DECIDENTS			1					85%	92%	80%	82%	96%
RESIDENTS								570/673	519/563	573/718	665/811	658/687
						I	l	370,073	313/303	373/710	003/011	030/00/
												1
DEDIATRIC CARE						۱	Can 22	l . . 	l			
PEDIATRIC CARE	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	I Seb-zz	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23
PEDIATRIC CARE CLARKE-AARON, NOELLA, MD	Mar-22 98%	Apr-22 104%	May-22 102%	Jun-22 111%	Jul-22 118%	Aug-22 107%	Sep-22 106%	Oct-22 104%	Nov-22 111%	Dec-22 100%	Jan-23 107%	Feb-23 101%
CLARKE-AARON, NOELLA, MD											Jan-23 107% 290/272	101% 303/299
	98%	104%	102%	111%	118%	107%	106%	104%	111%	100%	107%	101%
CLARKE-AARON, NOELLA, MD	98%	104%	102% 298/292	111% 396/357	118% 141/119	107% 387/360	106%	104%	111% 275/247	100%	107%	101%
	98%	104%	102% 298/292 100%	111% 396/357	118% 141/119 100%	107% 387/360 103%	106%	104%	111% 275/247 100%	100%	107%	101%
CLARKE-AARON, NOELLA, MD	98%	104%	102% 298/292	111% 396/357	118% 141/119	107% 387/360	106%	104%	111% 275/247	100%	107%	101%
CHIBAR, CHARMAINE, MD	98% 276/281	104% 330/317	102% 298/292 100% 7/7	111% 396/357 108% 14/13	118% 141/119 100% 3/3	107% 387/360 103% 21/20	106% 316/299	104% 348/333	111% 275/247 100% 5/5	100% 264/265	107% 290/272	101% 303/299
CLARKE-AARON, NOELLA, MD	98% 276/281	104% 330/317 113%	102% 298/292 100% 7/7	111% 396/357 108% 14/13	118% 141/119 100% 3/3 119%	107% 387/360 103% 21/20 114%	106% 316/299	104% 348/333 112%	111% 275/247 100% 5/5	100% 264/265	107% 290/272	101% 303/299
CHIBAR, CHARMAINE, MD	98% 276/281	104% 330/317	102% 298/292 100% 7/7	111% 396/357 108% 14/13	118% 141/119 100% 3/3	107% 387/360 103% 21/20	106% 316/299	104% 348/333	111% 275/247 100% 5/5	100% 264/265	107% 290/272	101% 303/299
CHIBAR, CHARMAINE, MD	98% 276/281 	104% 330/317 113% 299/264	102% 298/292 100% 7/7 121% 344/285	111% 396/357 108% 14/13 109% 323/297	118% 141/119 100% 3/3 119% 352/297	107% 387/360 103% 21/20 114% 332/292	106% 316/299 111% 257/231	104% 348/333 112% 355/316	111% 275/247 100% 5/5 112% 212/189	100% 264/265 110% 235/214	107% 290/272 104% 276/265	101% 303/299 110% 291/265
CHIBAR, CHARMAINE, MD	98% 276/281 119% 377/316	104% 330/317 113% 299/264	102% 298/292 100% 7/7 121% 344/285	111% 396/357 108% 14/13 109% 323/297	118% 141/119 100% 3/3 119% 352/297	107% 387/360 103% 21/20 114% 332/292	106% 316/299 111% 257/231	104% 348/333 112% 355/316	111% 275/247 100% 5/5 112% 212/189	100% 264/265 110% 235/214	107% 290/272 104% 276/265	101% 303/299 110% 291/265
CLARKE-AARON, NOELLA, MD CHIBAR, CHARMAINE, MD DESSALINES, DUCLOS, MD	98% 276/281 	104% 330/317 113% 299/264	102% 298/292 100% 7/7 121% 344/285	111% 396/357 108% 14/13 109% 323/297	118% 141/119 100% 3/3 119% 352/297	107% 387/360 103% 21/20 114% 332/292	106% 316/299 111% 257/231	104% 348/333 112% 355/316	111% 275/247 100% 5/5 112% 212/189	100% 264/265 110% 235/214	107% 290/272 104% 276/265	101% 303/299 110% 291/265
CLARKE-AARON, NOELLA, MD CHIBAR, CHARMAINE, MD DESSALINES, DUCLOS, MD	98% 276/281 119% 377/316	104% 330/317 113% 299/264	102% 298/292 100% 7/7 121% 344/285	111% 396/357 108% 14/13 109% 323/297	118% 141/119 100% 3/3 119% 352/297	107% 387/360 103% 21/20 114% 332/292	106% 316/299 111% 257/231	104% 348/333 112% 355/316	111% 275/247 100% 5/5 112% 212/189	100% 264/265 110% 235/214	107% 290/272 104% 276/265	101% 303/299 110% 291/265
CLARKE-AARON, NOELLA, MD CHIBAR, CHARMAINE, MD DESSALINES, DUCLOS, MD	98% 276/281 119% 377/316	104% 330/317 113% 299/264	102% 298/292 100% 7/7 121% 344/285	111% 396/357 108% 14/13 109% 323/297	118% 141/119 100% 3/3 119% 352/297	107% 387/360 103% 21/20 114% 332/292	106% 316/299 111% 257/231	104% 348/333 112% 355/316	111% 275/247 100% 5/5 112% 212/189	100% 264/265 110% 235/214	107% 290/272 104% 276/265	101% 303/299 110% 291/265
CLARKE-AARON, NOELLA, MD CHIBAR, CHARMAINE, MD DESSALINES, DUCLOS, MD LAZARO RIVERA, NANCY, MD	98% 276/281 119% 377/316 128% 284/222	104% 330/317 113% 299/264 120% 338/281	102% 298/292 100% 7/7 121% 344/285 126% 376/299	111% 396/357 108% 14/13 109% 323/297 117% 367/314	118% 141/119 100% 3/3 119% 352/297 119% 344/289	107% 387/360 103% 21/20 114% 332/292 122% 348/285	111% 257/231 126% 316/252	104% 348/333 112% 355/316 129% 421/326	111% 275/247 100% 5/5 112% 212/189 129% 310/241	110% 264/265 110% 235/214 127% 316/248	107% 290/272 104% 276/265 113% 308/272	101% 303/299 110% 291/265 109% 309/282
CLARKE-AARON, NOELLA, MD CHIBAR, CHARMAINE, MD DESSALINES, DUCLOS, MD LAZARO RIVERA, NANCY, MD	98% 276/281 119% 377/316 128% 284/222	104% 330/317 113% 299/264 120% 338/281	102% 298/292 100% 7/7 121% 344/285 126% 376/299	111% 396/357 108% 14/13 109% 323/297 117% 367/314	118% 141/119 100% 3/3 119% 352/297 119% 344/289	107% 387/360 103% 21/20 114% 332/292 122% 348/285	111% 257/231 126% 316/252	104% 348/333 112% 355/316 129% 421/326	111% 275/247 100% 5/5 112% 212/189 129% 310/241	110% 264/265 110% 235/214 127% 316/248	107% 290/272 104% 276/265 113% 308/272	101% 303/299 110% 291/265 109% 309/282
CLARKE-AARON, NOELLA, MD CHIBAR, CHARMAINE, MD DESSALINES, DUCLOS, MD LAZARO RIVERA, NANCY, MD MARZOUCA, KISHA F., MD	98% 276/281 119% 377/316 128% 284/222 101% 351/349	104% 330/317 113% 299/264 120% 338/281	102% 298/292 100% 7/7 121% 344/285 126% 376/299	111% 396/357 108% 14/13 109% 323/297 117% 367/314	118% 141/119 100% 3/3 119% 352/297 119% 344/289	107% 387/360 103% 21/20 114% 332/292 122% 348/285	111% 257/231 126% 316/252	104% 348/333 112% 355/316 129% 421/326	111% 275/247 100% 5/5 112% 212/189 129% 310/241	110% 264/265 110% 235/214 127% 316/248	107% 290/272 104% 276/265 113% 308/272	101% 303/299 110% 291/265 109% 309/282
CLARKE-AARON, NOELLA, MD CHIBAR, CHARMAINE, MD DESSALINES, DUCLOS, MD LAZARO RIVERA, NANCY, MD	98% 276/281 119% 377/316 128% 284/222	104% 330/317 113% 299/264 120% 338/281 100% 331/332	102% 298/292 100% 7/7 121% 344/285 126% 376/299 110% 362/340	108% 14/13 109% 323/297 117% 367/314 110% 223/195	118% 141/119 100% 3/3 119% 352/297 119% 344/289 130% 225/178	107% 387/360 21/20 114% 332/292 122% 348/285 110% 272/258	111% 257/231 126% 316/252 110% 306/290	104% 348/333 112% 355/316 129% 421/326 108% 354/326	111% 275/247 100% 5/5 112% 212/189 129% 310/241 109% 284/261	110% 264/265 110% 235/214 127% 316/248 106% 372/350	107% 290/272 104% 276/265 113% 308/272 116% 346/299	101% 303/299 110% 291/265 109% 309/282 105% 333/316

	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23
WOMEN'S HEALTH CARE		·					·					
FERWERDA, ANA, MD	106%	99%	103%	122%	91%	94%	93%	70%	62%	83%	82%	67%
	217/205	156/157	171/166	158/129	126/139	36/38	65/70	117/166	60/97	106/128	136/166	107/159
			1									
FINLEY, NICOLE, NP								72% 89/123	86% 207/240	80% 210/264	88% 246/279	94% 257/273
					l		l	09/123	207/240	210/264	240/2/9	237/2/3
PROPHETE, JOYCE, MD			1		100%	73%	70%	69%	80%	70%	70%	76%
					33/33	209/288	210/299	194/282	218/272	233/334	224/321	180/235
BEHAVIORAL HEALTH INTEGRATION												
CALDERON, NYLSA, LMHC	91%	91%	93%	99%	89%	87%	86%	93%	87%	93%	95%	103%
CALDERON, NTESA, ENTITE	178/195	187/205	135/145	193/195	174/195	173/200	152/176	80/86	131/150	191/206	158/166	140/136
	170,133	107/203	2007210	155,155		173,200	102,170	00,00	101,100	101/200	150,100	110/200
JONES, KIARA, LCSW	100%	99%	98%	104%	97%	98%	95%	101%	96%	104%	111%	112%
JOHES, MAIN, LOSW	229/230	179/180	192/195	203/195	174/180	190/193	178/187	174/172	137/142	172/166	187/169	182/162
												•
BROWN, JEREMY, LCSW											100%	103%
											40/40	170/165
											•	
LUCCHESI, KAREN, Counselor	86%	95%	83%	92%	83%	83%	88%	85%	85%	80%	85%	62%
	151/175	161/170	162/195	120/130	171/205	142/172	133/151	158/186	127/150	140/176	141/166	57/92
		1	1			1					_	
BEHAVIORAL HEALTH ADDICTION												
BURROWES, SHARON, NP									100%	54%	46%	51%
					ļ				12/12	73/136	89/192	114/223
	4470/	1050/	4450/	4000/	0.50/	000/			-			
HIRSCH, KAREN, LCSW	117%	105% 117/111	115% 117/102	122% 93/76	86% 77/90	90% 82/92		100% 12/12	92% 48/52	67% 44/66	92% 44/48	107% 58/54
	142/121	11//111	117/102	93/76		82/92		12/12	48/52	44/00	44/48	58/54
ANUSTA CAUSTANIA LANGO	96%	86%	109%	010/	000/	900/	1220/	1340/	1120/	1700/	1300/	1170/
MILETA, SNJEZANA, LMHC	215/225	177/205	186/170	81% 162/200	98% 191/195	89% 201/227	123% 179/146	124% 174/140	112% 181/162	179% 226/126	128% 246/192	117% 211/180
	213,223	1777203	100,170	102,200	131,133	1 202/22/	173/110	17 1,7 1.0	101/102	220/220	2.10/102	
MITCHELL, ANGELA, LCSW	97%	85%	114%	106%	106%	106%	104%	114%	154%	120%	106%	117%
IMITCHELL, ANGELA, LCSW	209/215	169/200	227/200	218/205	186/175	192/181	194/186	208/182	205/133	235/196	190/180	202/172
						· · · · · · · · · · · · · · · · · · ·						
PETER, AMANDA, NP			1		l	1	l	100%	99%	68%	64%	50%
								19/19	93/94	105/154	151/235	105/211
PHILLIPS, COURTNEY, MD	132%	100%	94%	109%	116%	103%	82%	75%	100%	100%		100%
	58/44	3/3	29/31	98/90	99/85	88/86	67/82	54/72	5/5	1/1		1/1
REXACH, CLAUDIA, LMHC	109%	76%				112%	112%	120%	173%	134%	139%	123%
	217/200	145/190				236/211	210/187	196/236	232/134	222/166	223/160	199/162
	_											

	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23
DENTAL		·	,			J	·					
ABREU, MARIANA, DDS								100%	106%	107%	71%	75%
, -								28/28	189/178	226/211	233/330	205/274
ALI, BUSHRA, DMD						88%	80%	144%	106%	99%	84%	111%
						31/35	165/206	176/254	138/130	204/206	263/314	312/282
								/ \				
ALWEHAIB, ARWA, DDS	104%	99%	99%	113%	108%	109%	104%	106%	115%	107%	86%	115%
	374/360	292/296	326/328	361/320	164/152	298/274	265/255	279/264	224/194	273/254	270/314	334/290
BOWEN, BEVERLY, DMD			110%	74%	87%	89%	96%	94%	120%	114%	81%	81%
			189/172	255/344	270/312	274/307	269/282	316/338	233/194	241/211	253/314	240/298
	94%	1020/	1000/	1020/	1000/	1000/	050/	1040/	4450/	020/	000/	020/
CUCURAS, JOHN N, DDS	140/149	103% 68/66	106% 104/98	103% 150/146	100%	100% 76/76	95% 121/128	104% 150/144	115% 71/62	93% 52/56	89% 153/172	92% 53/58
	1.0/1.5	00,00	10.750	130,110	3,3	1 70,70	121/120	130/111	72/02		100,172	33,30
SEMINARIO, ADA, DDS	90%	90%	78%	87%	87%	76%	76%	94%	101%	95%	84%	98%
SEMINARIO, ADA, DDS	282/312	238/264	119/152	181/208	205/236	238/313	170/223	215/228	99/98	223/235	262/314	277/282
SOFIANOS, MICHAEL, DMD								94%	123%	111%	91%	97%
								243/258	246/200	247/274	275/251	296/306
											_	
WILLIAMS, RICHARD, DMD	101%	106%	96%	85%	100%	103%	88%	100%	102%	88%	84%	84%
	121/120	348/328	301/312	258/304	328/328	307/299	233/266	257/257	159/156	208/235	269/322	249/298
GARCIA, IRENE S.	91%	92%	98%					92%				
	144/159	88/96	55/56					11/12				
GONZALEZ, NANCY	98%	106%	150%								75%	54%
	48/49	17/16	3/2								6/8	13/24
												_
HARDCASTLE, CORINA	92%	94%	96%	98%	100%	86%	104%	101%	101%	98%	96%	102%
	158/172	102/108	150/156	130/132	116/116	87/101	146/141	159/157	130/129	138/141	143/149	127/125
MASON, SHERRY	89%	84%	89%	76%	87%	93%	86%	93%	94%	91%		97%
	161/180	138/164	139/156	127/168	135/156	165/178	114/133	153/165	91/97	139/152		137/141
MOZER NASCIMENTO, ARIANNE		98%	101%	105%	100%	100%	87%	105%	102%	89%	96%	95%
		137/140	165/164	180/172	156/156	169/170	130/149	165/173	123/121	147/165	151/157	142/149
DUCHARME, RHONDA											99%	98%
											237/240	293/298
												_
PETERSEN, PATRICE	100%	102%	108%	101%	96%	109%	123%	121%	104%	94%	102%	97%
·	160/160	175/172	243/224	314/312	284/296	238/218	229/186	297/246	231/222	309/330	286/281	210/218
									_			

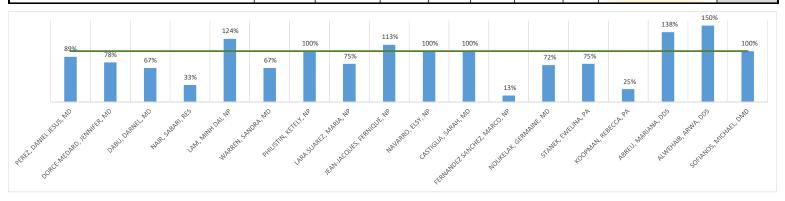
PRODUCTIVITY REPORT FEBRUARY 2023

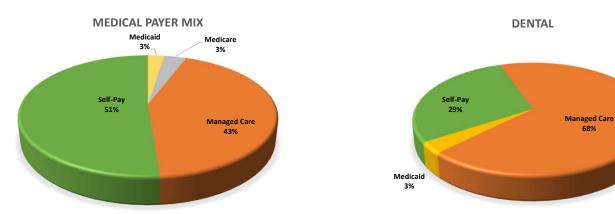
>= 80% and <100%

68%

			AD	ULT CARE							
Provider	Daily Target	# Saturdays	Target	for the Mont	h	Total fo	or the Month	Seen	% Monthly Target Achieved	Daily Averag	
Flovidei	Daily Target	Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average	
			BE	LLE GLADE							
PEREZ, DANIEL JESUS, MD	17	1	9		9	8		8	89%	8.0	
DORCE-MEDARD, JENNIFER, MD	17	1	9		9	7		7	78%	7.0	
DABU, DARNEL, MD	17	1	9		9	6		6	67%	6.0	
NAIR, SABARI, RES	6	1	3		3	1		1	33%	1.0	
DELRAY											
LAM, MINH DAI, NP	15	3	25		25	31		31	124%	10.3	
LAKE WORTH											
WARREN, SANDRA, MD	17	1	9		9	6		6	67%	6.0	
PHILISTIN, KETELY, NP	15	1	8		8	8		8	100%	8.0	
LARA SUAREZ, MARIA, NP	15	1	8		8	6		6	75%	6.0	
			L	ANTANA							
JEAN-JACQUES, FERNIQUE, NP	15	1	8		8	9		9	113%	9.0	
NAVARRO, ELSY, NP	15	1	8		8	8		8	100%	8.0	
CASTIGLIA, SARAH, MD	17	1	9		9	9		9	100%	9.0	
			M	ANGONIA							
FERNANDEZ SANCHEZ, MARCO, NP	15	1	8		8	1		1	13%	1.0	
			WEST	PALM BEAC	Н						
NOUKELAK, GERMAINE, MD	17	2	18		18	13		13	72%	6.5	
STANEK, EWELINA, PA	15	1	8		8	6		6	75%	6.0	
KOOPMAN, REBECCA, PA	15	1	8		8	2		2	25%	2.0	
ADULT CARE TOTALS			147	0	147	121	0	121	82%		

DENTAL											
BELLE GLADE											
ABREU, MARIANA, DDS 16 1 8 8 11 11 138% 11.0											
LANTANA											
ALWEHAIB, ARWA, DDS	ALWEHAIB, ARWA, DDS 16 1 8 8 12 12 150% 12.0										
			WEST	PALM BEAC	H						
SOFIANOS, MICHAEL, DMD	16	1	8		8	8		8	100%	8.0	
DENTAL 24 0 24 31 0 31 129%											
GRAND TOTAL 171 0 171 152 0 152 89%											





AS 02/28/2023 Based on Complete	ed Appointments									
			-	ADULT CAF	E					
Provider	Daily Target	Days Worked	Target	for the Mont	h	Total fo	or the Month	Seen	% Monthly Target Achieved	Daily Average
Piovidei	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
PEREZ, DANIEL JESUS, MD	***9	5.5	12	21	33	11	15	26	80%	4.7
DABU, DARNEL, MD	17	3.5	9	20	29	6	15	21	71%	6.0
DORCE-MEDARD, JENNIFER, MD	17	0.5	9	0	9	7	0	7	78%	14.0
TAHERI, NERGESS, DO	*** 13	3.0	20	14	34	25	8	33	97%	11.0
ADULT CARE TOTALS		12.5	50	55	105	49	38	87	83%	

*** Avg Target Precepting										
			RESID	ENCY PRO	GRAM					
PY1	6	12	45	23	67	64	38	102	152%	8.5
PY2	10	20	132	72	204	142	79	221	108%	11.1
PY3	14	29.0	287	129	415	228	107	335	81%	11.6
RESIDENTS TOTALS		61	463	223	687	434	224	658	96%	

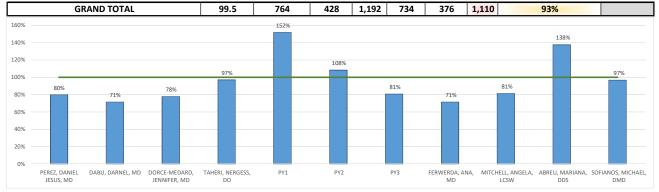
	WOMEN'S HEALTH CARE												
FERWERDA, ANA, MD	14	3.5	34	17	50	25	11	36	71%	10.3			
PROPHETE, JOYCE, MD	14	2	17	11	28	10	7	17	61%	8.5			
WOMEN'S HEALTH CARE TOTALS		5.5	50	28	78	35	18	53	68%				

BEHAVIORAL HEALTH INTEGRATION											
BH INTEGRATION TOTALS		0	0	0	0	0	0	0			

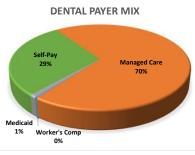
BEHAVIORAL HEALTH ADDICTION												
MITCHELL, ANGELA, LCSW 10 1.5 10 6 16 9 4 13 81% 8.7												
BH ADDICTION TOTALS		1.5	10	6	16	9	4	13	81%			

				DENTAL						
ABREU, MARIANA, DDS	16	0.5	8	0	8	11	0	11	138%	22.0
SOFIANOS, MICHAEL, DMD	16	18.5	182	115	298	196	92	288	97%	15.6
DENTAL TOTALS		19.0	190	115	306	207	92	299	98%	

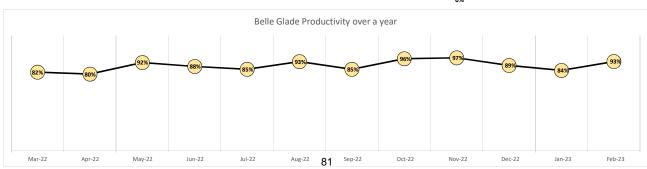
DENTAL HYGIENE											
DENTAL HYGIENE TOTALS		0.0	0	0	0	0	0	0			







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



BOCA

PRODUCTIVITY REPORT FEBRUARY 2023

<51%

>=51% and < 80%

>= 80% and <100%

>= 100%

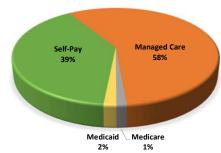
AS 02/28/2023 Based on Completed Appointments

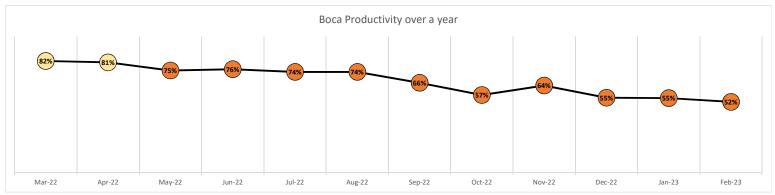
	ADULT CARE												
Provider	Daily Target	Days Worked	Target	for the Mont	h	Total fo	or the Month	Seen	0/ Monthly Toyoot Ashioused	Daily Average			
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average			
CASTIGLIA, SARAH, MD	17	18.5	194	122	316	98	46	144	46%	7.8			
WILKINSON, SARAH, PA	15	16.5	153	96	249	95	45	140	56%	8.5			
ADULT CARE TOTALS		35.0	347	218	565	193	91	284	50%				

BEHAVIORAL HEALTH INTEGRATION											
BROWN, JEREMY, LCSW 10 2.0 12 8 20 11 9 20 100% 10.0											
BH INTEGRATION TOTALS		2.0	12	8	20	11	9	20	100%		

GRAND TOTAL	37.0	359	226	585	204	100	304	52%	







PRODUCTIVITY REPORT FEBRUARY 2023

52

<51% >=51% and

224

668

- 000 --- 1 -1000

82%

>= 100%

AS 02/28/2023 Based on Completed Appointments

ADULT CARE TOTALS

			ADULT CARI	Ē.						
Provider	Daily Target	Days Worked	Target	for the Mont	:h	Total f	or the Month	Seen	% Monthly Target Achieved	Daily Average
riovidei	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Wonthly Target Achieved	Daily Average
HARBERGER, SENECA, MD	17	15.0	163	95	258	105	47	152	59%	10.1
DONNELL, MASON, PA	15	6.0	54	36	90	39	23	62	69%	10.3
LAM, MINH DAI, NP	15	16.5	160	90	250	187	80	267	107%	16.2
ST. VIL. CARLINE, NP	15	14.5	135	84	219	113	74	187	85%	12.9

BEHAVIORAL HEALTH INTEGRATION											
LUCCHESI, KAREN, Counselor	10	9.0	60	32	92	34	23	57	62%	6.3	
BROWN, JEREMY, LCSW	10	8.0	44	29	73	42	36	78	107%	9.8	
SH INTEGRATION TOTALS 17.0 104 61 165 76 59 135 82%											

512

305

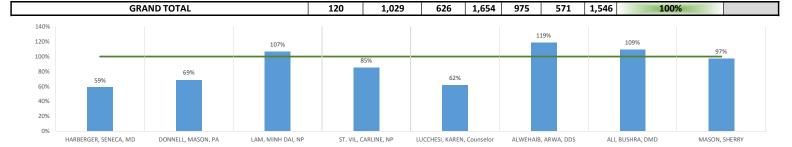
817

444

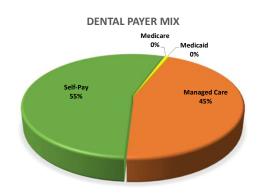
	BEHAVIORAL HEALTH ADDICTION										
BH ADDICTION TOTALS		0	0	0	0	0	0	0			

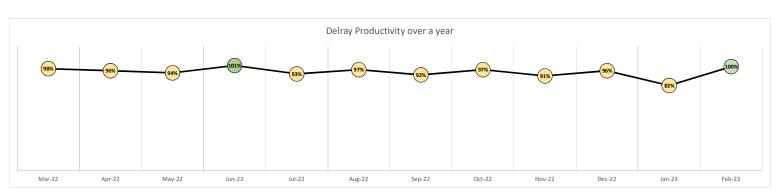
			DENTAL							
ALWEHAIB, ARWA, DDS	16	16.5	163	102	266	200	116	316	119%	19.2
ALI, BUSHRA, DMD	16	16.5	163	102	266	186	104	290	109%	17.6
DENTAL TOTALS		33	326	205	531	386	220	606	114%	

			ENTAL HYGIE	NE						
MASON, SHERRY	8	17.5	86	54	141	69	68	137	97%	7.8
DENTAL HYGIENE TOTALS		17.5	86	54	141	69	68	137	97%	









JUPITER

PRODUCTIVITY REPORT FEBRUARY 2023

JARY 2023

<51%

>- 80%

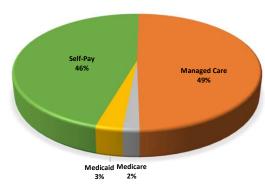
>= 100%

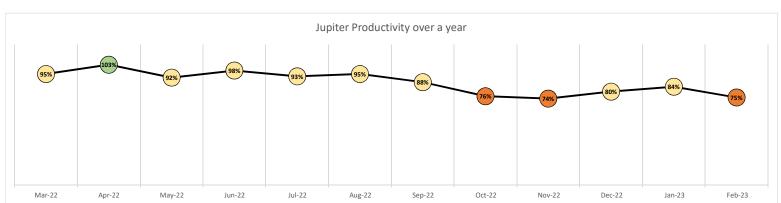
AS 02/28/2023 Based on Completed Appointments

				ADULT CAP	RE	•	•	•		
Provider	Daily Target	Days Worked	Target	for the Mont	h	Total fo	or the Month	Seen	% Monthly Target Achieved	Daily Average
riovidei	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	78 Wionthly Target Achieved	Daily Average
LARA SUAREZ, MARIA, NP	15	18.5	171	108	279	130	79	209	75%	11.3
LANGLEY, TAMARA, NP	15	14.5	135	84	219	102	49	151	69%	10.4
ADULT CARE TOTALS		33	306	192	498	232	128	360	72%	
PROPHETE, JOYCE, MD	17	2.0	20	14	34	16	5	21	62%	10.5
			14/05/	ENS HEALT						
PROFILEL, JOTCE, WID	17	2.0	20	14	34	10	,	21	02/0	10.5
WOMENS HEALTH CARE TOTALS		2	20	14	34	16	5	21	62%	
			DELLAN/IOD	AL HEALTH	LADDICT	ION				
			BEHAVIOR	AL HEALTH	ADDICT	ION				
HIRSCH, KAREN, LCSW	*** 3	10.5	34	20	54	34	24	58	107%	5.5
BH ADDICTION TOTALS		10.5	34	20	54	34	24	58	107%	

^{***} Modifed Target - Admin time







PRODUCTIVITY REPORT FEBRUARY 2023

<51%

>=51% and < 80%

2004 and 41000

>= 100%

AS 02/28/2023 Based on Completed Appointments

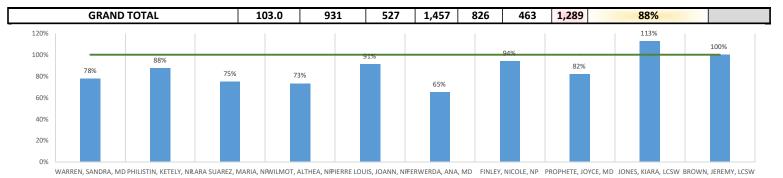
			Α	DULT CAR	E					
Provider	Daily Target	Days Worked	Target	for the Mont	:h	Total fo	or the Month	Seen	% Monthly Target Achieved	Daily Average
Flovidei	Daily larget	Days Worked	AM	PM	Total	AM	PM	Total	% Wontiny ranger Achieved	Daily Average
WARREN, SANDRA, MD	17	11.0	121	68	189	102	45	147	78%	13.4
PHILISTIN, KETELY, NP	15	16.0	152	90	242	143	69	212	88%	13.3
LARA SUAREZ, MARIA, NP	15	0.5	8	0	8	6	0	6	75%	12.0
WILMOT, ALTHEA, NP	15	2.0	18	12	30	16	6	22	73%	11.0
PIERRE LOUIS, JOANN, NP	15	14.5	135	84	219	127	73	200	91%	13.8
ADULT CARE TOTALS		44.0	434	254	688	394	193	587	85%	

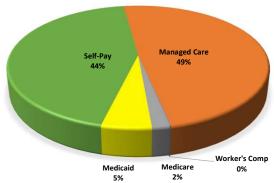
			WOME	N'S HEALT	H CARE					
FERWERDA, ANA, MD	17	6	82	27	109	47	24	71	65%	11.8
FINLEY, NICOLE, NP	15	18	171	102	273	169	88	257	94%	14.3
PROPHETE, JOYCE, MD	17	10	112	61	173	94	48	142	82%	14.2
WOMEN'S HEALTH CARE TOTALS		34	365	190	555	310	160	470	85%	

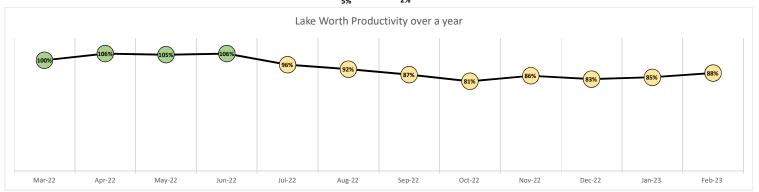
			BEHAVIORAL	HEALTH II	NTEGRAT	ION				
JONES, KIARA, LCSW	10	15.5	87.2	54.8	142	85	75	160	113%	10.3
BROWN, JEREMY, LCSW	10	9.5	44.4	27.6	72	37	35	72	100%	7.6
BH INTEGRATION TOTALS		25	132	82	214	122	110	232	108%	

** Avg New provider *** Avg Training Provider

		BEHAVIORA	L HEALTH	ADDICTIO	ON			
BH ADDICTION TOTALS	0	0	0	0	0	0	0	







			ADULT (ARE						
Provider	Daily Target	Days Worked	Targ	et for the N	lonth	Total f	or the Mont	th Seen	% Monthly Target Achieved	Daily Average
Flovidei	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
ALFONSO PUENTES, RAMIRO, MD	17	5.0	61	27	88	63	27	90	102%	18.0
JEAN-JACQUES, FERNIQUE, NP	17	17.0	161	96	257	168	76	244	95%	14.4
DONNELL, MASON, PA	17	12.5	117	72	189	122	57	179	95%	14.3
CASTIGLIA, SARAH, MD	17	0.5	9	0	9	9	0	9	100%	18.0
NAVARRO, ELSY, NP	17	17.5	170	96	266	176	87	263	99%	15.0
ADULT CARE TOTALS		52.5	518	291	809	538	247	785	97%	

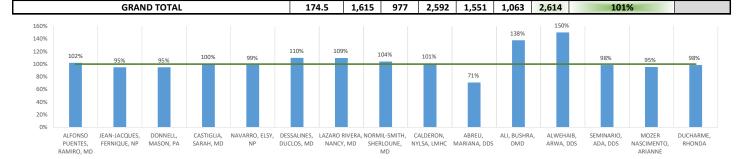
		P	EDIATRIC	CARE						
DESSALINES, DUCLOS, MD	17	15.5	163	102	265	185	106	291	110%	18.8
LAZARO RIVERA, NANCY, MD	17	16.5	173	109	282	202	107	309	109%	18.7
NORMIL-SMITH, SHERLOUNE, MD	17	17.5	184	116	299	191	120	311	104%	17.8
PEDIATRIC CARE TOTALS		49.5	520	326	847	578	333	911	108%	

		BEHAVIOR	AL HEALT	H INTEGR	RATION					
CALDERON, NYLSA, LMHC	10	12.5	78	48	126	52	75	127	101%	10.2
JONES, KIARA, LCSW	10	1	6	4	10	6	5	11	110%	11.0
BH INTEGRATION TOTALS		13.5	84	52	136	58	80	138	101%	

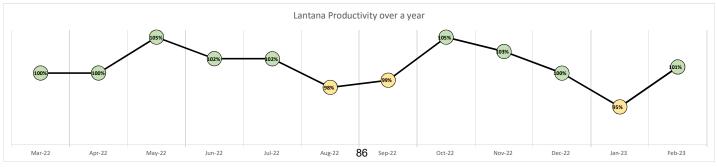
BEHAVIORAL HEALTH ADDICTION											
BH ADDICTION TOTALS		0	0	0	0	0	0	0			

			DENT	AL						
ABREU, MARIANA, DDS	16	3.0	29	19	48	20	14	34	71%	11.3
ALI, BUSHRA, DMD	16	1.0	10	6	16	15	7	22	138%	22.0
ALWEHAIB, ARWA, DDS	16	0.5	8	0	8	12	0	12	150%	24.0
SEMINARIO, ADA, DDS	16	17.5	173	109	282	186	91	277	98%	15.8
DENTAL TOTALS		22	219	134	354	233	112	345	98%	

DENTAL HYGIENE												
MOZER NASCIMENTO, ARIANNE	8	18.5	91	58	149	90	52	142	95%	7.7		
DUCHARME, RHONDA	16	18.5	182	115	298	54	239	293	98%	15.8		
DENTAL HYGIENE TOTALS		37	274	173	446	144	291	435	97%			







LEWIS

PRODUCTIVITY REPORT FEBRUARY 2023

<51%

=51% and < 80%

80% and <100%

>= 100%

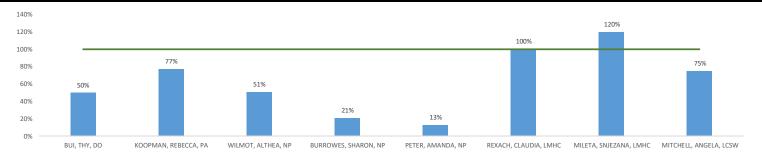
AS 02/28/2023 Based on Completed Appointments

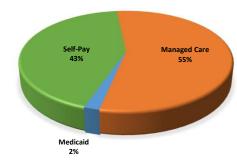
	ADULT CARE													
Provider	Daily Target	Days Worked	Target	for the Mont	:h	Total fo	or the Month	Seen	% Monthly Target Achieved	Daily Average				
Flovidei	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Worthly ranget Achieved	Daily Average				
BUI, THY, DO	17	2.0	20	14	34	11	6	17	50%	8.5				
KOOPMAN, REBECCA, PA	15	2.0	18	12	30	12	11	23	77%	11.5				
WILMOT, ALTHEA, NP	15	3.0	27	18	45	13	10	23	51%	7.7				
ADULT CARE TOTALS		7	65	44	109	36	27	63	58%					

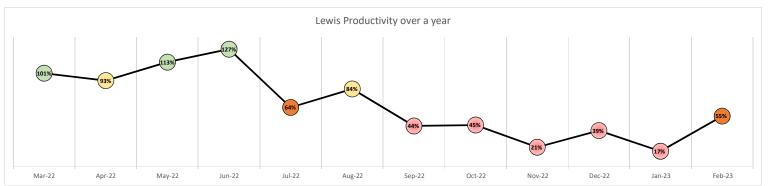
	BEHAVIORAL HEALTH INTEGRATION													
BH INTEGRATION TOTALS		0	0	0	0	0	0	0						

	BEHAVIORAL HEALTH ADDICTION													
BURROWES, SHARON, NP	12	2.0	14	10	24	2	3	5	21%	2.5				
PETER, AMANDA, NP	12	2.0	14	10	24	2	1	3	13%	1.5				
REXACH, CLAUDIA, LMHC	10	1.0	0	2	2	0	2	2	100%	2.0				
MILETA, SNJEZANA, LMHC	10	2.0	12	8	20	16	8	24	120%	12.0				
MITCHELL, ANGELA, LCSW	10	0.5	0	4	4	0	3	3	75%	6.0				
BH ADDICTION TOTALS		7.5	41	33	74	20	17	37	50%					

GRAND TOTAL	14.5	106	77	183	56	44	100	55%	







MANGONIA

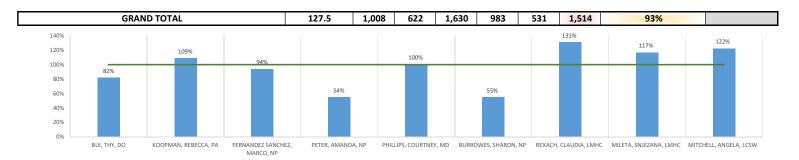
PRODUCTIVITY REPORT FEBRUARY 2023

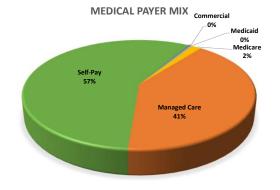
>=51% and < 80%

			ADUI	T CARE						
Provider	Daily Target	Days Worked	Targ	et for the M	onth	Total f	or the Mont	h Seen	0/ 84 - while Townsh A ships and	Daily Average
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
BUI, THY, DO	17	16.5	173	109	282	103	128	231	82%	14.0
KOOPMAN, REBECCA, PA	15	16.5	153	96	249	190	81	271	109%	16.4
FERNANDEZ SANCHEZ, MARCO, NP	15	17.0	161	96	257	178	63	241	94%	14.2
ADJUIT CARE TOTALS		50.0	197	201	700	471	272	7/12	0/1%	

	BEHAV	IORAL HEA	ALTH INTE	GRATION				
BH INTEGRATION TOTALS	0.0	0	0	0	0	0	0	

		ВЕНА	VIORAL H	EALTH AD	DICTION					
PETER, AMANDA, NP	12	15.5	115	72	187	65	37	102	54%	6.6
PHILLIPS, COURTNEY, MD	8	0.5	1	0	1	1	0	1	100%	2.0
BURROWES, SHARON, NP	12	16.5	122	77	199	67	42	109	55%	6.6
REXACH, CLAUDIA, LMHC	10	14.0	90	52	142	130	56	186	131%	13.3
MILETA, SNJEZANA, LMHC	10	16.0	96	64	160	125	62	187	117%	11.7
MITCHELL, ANGELA, LCSW	10	15.0	96	56	152	124	62	186	122%	12.4
BH ADDICTION TOTALS		77.5	521	321	841	512	259	771	92%	







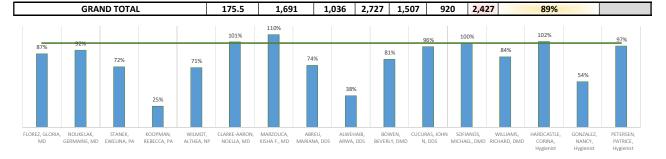
			Α	DULT CAR	E					
Provider	Daily Target	Days Worked	Target	for the Mont	h	Total f	or the Month	Seen	% Monthly Target Achieved	Daily Average
Piovidei	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
FLOREZ, GLORIA, MD	17	17.0	173	116	289	151	101	252	87%	14.8
NOUKELAK, GERMAINE, MD	17	19.5	212	122	334	204	102	306	92%	15.7
STANEK, EWELINA, PA	15	11.0	107	60	167	82	38	120	72%	10.9
KOOPMAN, REBECCA, PA	15	0.5	8	0	8	2	0	2	25%	4.0
WILMOT, ALTHEA, NP	15	1.5	18	6	24	11	6	17	71%	11.3
ADULT CARE TOTALS		49.5	518	304	822	450	247	697	85%	
			PE	DIATRIC CA	RE					
CLARKE-AARON, NOELLA, MD	17	17.5	184	116	299	194	109	303	101%	17.3
MARZOUCA, KISHA F., MD	17	18.5	194	122	316	206	127	333	110%	18.0
PEDIATRIC CARE TOTALS		36	377	238	615	400	236	636	103%	

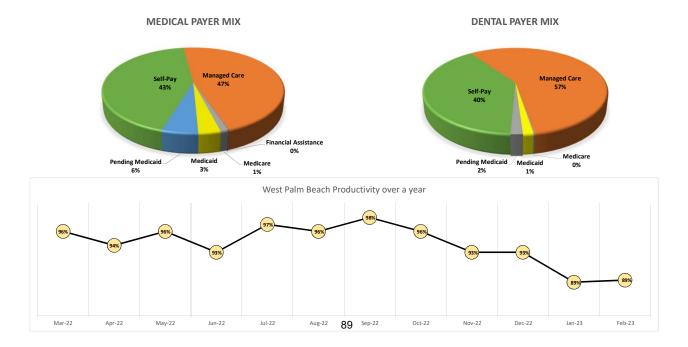
	BEHAVIORAL HEALTH INTEGRATION													
JONES, KIARA, LCSW	10	1.0	6	4	10	5	6	11	110%	11.0				
CALDERON, NYLSA, LMHC	CALDERON, NYLSA, LMHC 10 1.0 6 4 10 8 5 13 130% 13.0													
BH INTEGRATION TOTALS		2	12	8	20	13	11	24	120%					

	BEHAVIORAL HEALTH ADDICTION													
REXACH, CLAUDIA, LMHC	10	1	12	6	18	5	6	11	61%	11.0				
BH ADDICTION TOTALS		1	12	6	18	5	6	11	61%					

DENTAL										
ABREU, MARIANA, DDS	16	13.5	134	83	218	130	30	160	74%	11.9
ALWEHAIB, ARWA, DDS	16	1.0	10	6	16	5	1	6	38%	6.0
BOWEN, BEVERLY, DMD	16	18.5	182	115	298	148	92	240	81%	13.0
CUCURAS, JOHN N, DDS	16	3.0	29	19	48	35	11	46	96%	15.3
SOFIANOS, MICHAEL, DMD	16	0.5	8	0	8	8	0	8	100%	16.0
WILLIAMS, RICHARD, DMD	16	18.5	182	115	298	154	95	249	84%	13.5
DENTAL TOTALS		55.0	546	339	885	480	229	709	80%	

DENTAL HYGIENE										
HARDCASTLE, CORINA, Hygienist	8	15.5	77	48	125	65	62	127	102%	8.2
GONZALEZ, NANCY, Hygienist	8	3.0	14	10	24	5	8	13	54%	4.3
PETERSEN, PATRICE, Hygienist	16	13.5	134	83	218	89	121	210	97%	15.6
DENTAL HYGIENE TOTALS		32.0	226	141	366	159	191	350	96%	





MOBILE & PORT CLIN

AS 02/28/2023 Based on Completed Appointments

PRODUCTIVITY REPORT FEBRUARY 2023

<51%

>=5194 and < 9094

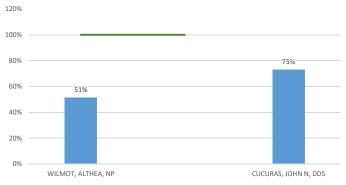
>= 90% and <100%

>= 100%

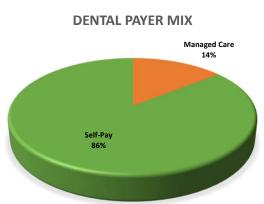
ADULT CARE										
Provider	Daily Target Da		Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
Flovidei	Daily larget	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly ranget Achieved	Daily Average
WILMOT, ALTHEA, NP	12	10.0	74	49	123	38	25	63	51%	6.3
ADULT CARE TOTALS		10	74	49	123	38	25	63	51%	

DENTAL										
CUCURAS, JOHN N, DDS	12	0.5	10	0	10	7		7	73%	14.0
DENTAL TOTALS		0.5	10	0	10	7	0	7	73%	

GRAND TOTAL	11	02	10	122	15	25	70	E 20/	
GRAND IOTAL	1 11	0.3	1 43	133	1 43	23	///	55%	









DISTRICT CLINIC HOLDINGS, INC. BOARD OF DIRECTORS March 29, 2023

1. Description: Operations Reports – February 2023

2. Summary:

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

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

3. Substantive Analysis:

In February, the clinics had 11,532 visits, slightly higher than the prior month and 6% higher than in February 2022. 39% of patients were from adults Primary Care, 25% from Dental and 13% from Pediatrics. The Lantana Medical Clinic had the highest volume, with 1,834 visits, followed by Mangonia, with 1,515 visits.

Our payer mix for January was consistent with the previous month, with 51% uninsured. 44% of patients were Managed Care and 4% were Medicaid.

61% of patients were female. 51% of patients reported as White and 41% as Black or African American. 40% of patients reported as Hispanic, which was 1% higher than the previous month. Our largest age group has consistently remained those between the ages of 30 and 39.

In February, 2,097 patients were reported as homeless. 25.5% average between all clinics, of which 60% reported doubling up. By individual clinic, the percentage was higher in Lantana, Mangonia, Lewis Center and the Mobile Clinics. Mangonia, Lewis Center and Mobile clinic served 481 unique patients. Only 16% reported doubling up, whereas 44% reported as in the street or a homeless shelter.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements		Yes 🗌 No 🔀
Annual Net Revenue		Yes No No
Annual Expenditures		Yes No No

N/A	
Candice Abbott	
VP & Chief Financial Officer	

DISTRICT CLINIC HOLDINGS, INC. BOARD OF DIRECTORS

March 29, 2023

5.	Reviewed/Approved by Committee:	
	N/A	

6. Recommendation:

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

Approved for Legal sufficiency:

Bernabe Icaza

Bernabe Icaza VP & General Counsel

Committee Name

JU. JU. Dalla

Marisol Miranda Director of Clinic Operations Alicia Ottmann, PA-C AVP, Executive Director FQHC & Pharmacy Services

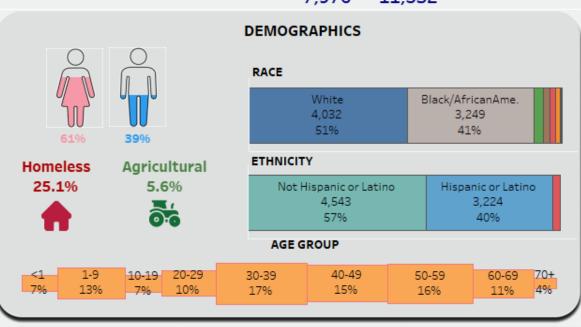
Date Approved

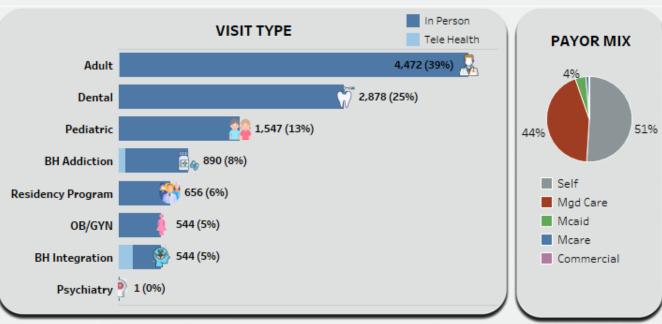
^

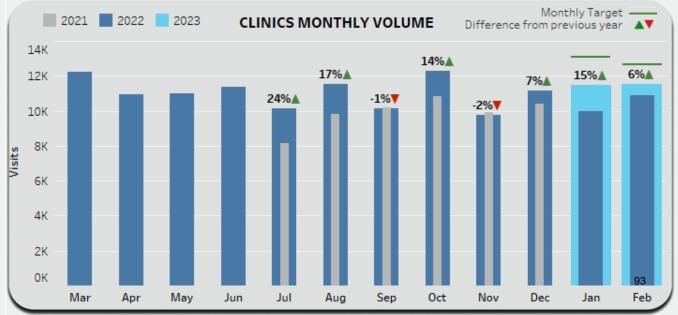


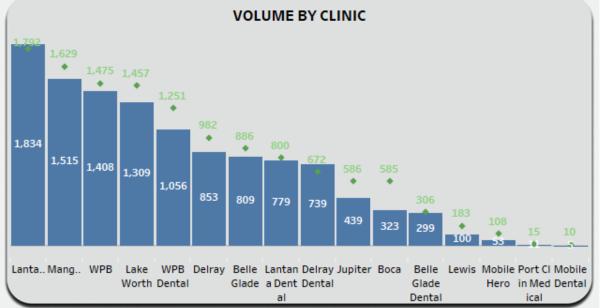
Unique Patient
Patients Visits
7,976 11,532

Monthly Productivity February 2023



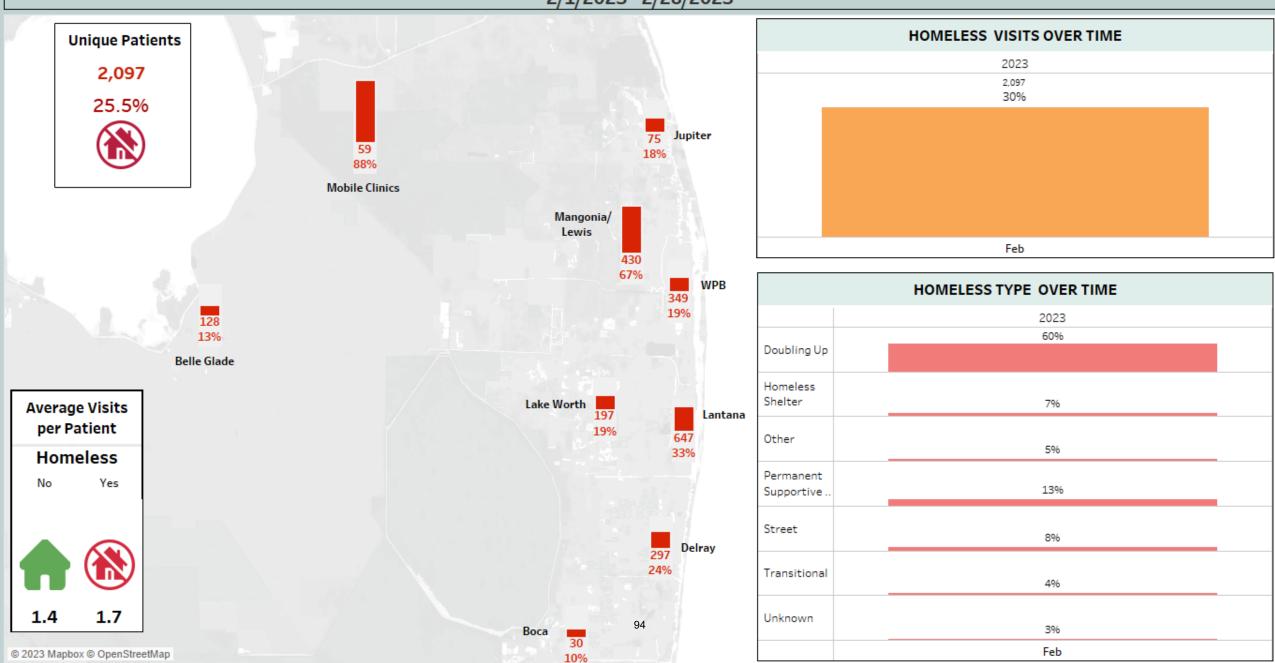


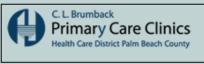






HOMELESS BREAKDOWN BY CLINIC 2/1/2023 - 2/28/2023





HOMELESS BREAKDOWN BY CLINIC 2/1/2023 - 2/28/2023

