



C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County

BOARD OF DIRECTORS

May 25, 2022

12:45 P.M.

Meeting Location

1515 N. Flagler Drive, Suite 101

West Palm Beach, FL 33401

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

**BOARD OF DIRECTORS MEETING
AGENDA
May 25, 2022
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 – Mike Smith, 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. WPBF-25 News Story – Free Grab-and-go Narcan Available in Palm Beach County (Robin Kish)
 - B. C.L. Brumback Belle Glade Clinic Overview (Dr. Jennifer Dorce-Medard; Rocio Tamez)
 - C. Language Line Video Demonstration (Marisol Miranda)
4. **Disclosure of Voting Conflict**
5. **Public Comment***
6. **Meeting Minutes**
 - A. **Staff recommends a MOTION TO APPROVE:**
Board Meeting Minutes of April 27, 2022 [Pages 1-12]

7. Consent Agenda – Motion to Approve Consent Agenda Items

A. ADMINISTRATION

7A-1 **RECEIVE AND FILE:**
May 2022 Internet Posting of District Public Meeting
<https://www.hcdpbc.org/resources/public-meetings>

7A-2 **RECEIVE AND FILE:**
Attendance tracking [Page 13]

B. FINANCE

7B-1 **Staff recommends a MOTION TO APPROVE:**
District Clinic Holdings, Inc. Financial Report March 2022 YTD
(Candice Abbott) [Pages 14-27]

8. Regular Agenda

A. ADMINISTRATION

8A-1 **Staff Recommends a MOTION TO APPROVE:**
Election of Officers and Committee Appointments
(Thomas Cleare) [Pages 28-29]

B. EXECUTIVE

8B-1 **RECEIVE AND FILE:**
Executive Director Informational Update
(Dr. Hyla Fritsch) [Pages 30-31]

C. CREDENTIALING

8C-1 **Staff Recommends a MOTION TO APPROVE:**
Licensed Independent Practitioner Credentialing and Privileging –
(Dr. Charmaine Chibar) [Pages 32-34]

D. QUALITY

8D-1 **Staff Recommends a MOTION TO APPROVE:**
Quality Report
(Dr. Charmaine Chibar) [Pages 35-72]

(Regular Agenda Cont.)

E. OPERATIONS

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

Operations Report- April 2022
(Marisol Miranda) [Pages 73-81]

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

10. **Board Member Comments**

11. **Establishment of Upcoming Meetings**

June 29, 2022 (HCD Board Room)

12:45 p.m. Board of Directors

July 27, 2022 (HCD Board Room)

12:45 p.m. Board of Directors

August 24, 2022 (HCD Board Room)

12:45 p.m. Board of Directors

September 28, 2022 (HCD Board Room)

12:45 p.m. Board of Directors

October 26, 2022 (HCD Board Room)

12:45 p.m. Board of Directors

November 29, 2022 (HCD Board Room)

12:45 p.m. Board of Directors

December 13, 2022 (HCD Board Room)

12:45 p.m. Board of Directors

12. **Motion to Adjourn**

13. **Closed Meeting**

**District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
4/27/2022**

Present: Mike Smith, Chair; Melissa Mastrangelo, Vice-Chair (Zoom); Julia Bullard, Secretary; Joseph Gibbons, Treasurer; John Casey Mullen; Tammy Jackson-Moore; James Elder; Irene Figueroa; Robert Glass

Absent: Irene Figueroa

Staff: Dr. Belma Andric; Dr. Hyla Fritsch; Bernabe Icaza; Candice Abbott; Martha Hyacinthe; Dr. Charmaine Chibar; Marisol Miranda; Andrea Steele; Alexa Goodwin; Jonathan Dominique; Lisa Hogans; Patricia Lavelly; Robin Kish; Shoaib Haq; Thomas Cleare; David Speciale; Maria Chamberlin; Dr. J. Dorce-Medoard; Shane Hinds; Shannon Wynn

Minutes Transcribed By: Shannon Wynn

Meeting Scheduled for 12:45 p.m.

Meeting Began at 12:47 p.m.

AGENDA ITEM	DISCUSSION	ACTION
1. Call to Order	Mr. Smith called the meeting to order.	The meeting was called to order at 12:47 p.m.
1A. Roll Call	Roll call was taken.	
1B. Affirmation of Mission	Mr. Smith read the affirmation of mission.	

2. Agenda Approval		
2A. Additions/Deletions/ Substitutions	None.	VOTE TAKEN: Mr. Gibbons made a motion to approve the agenda. Ms. Tammy Jackson-Moore duly seconded the motion. A vote was called and the motion passed unanimously.
2B. Motion to Approve Agenda Items	Mr. Smith called for approval of the meeting agenda.	
3. Awards, Introductions and Presentations	None.	No action necessary.
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.
6. Meeting Minutes		VOTE TAKEN: As presented, Ms. Tammy Jackson-Moore made a motion to approve the Board meeting minutes of March 30, 2022. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.
6A-1 Staff Recommends a MOTION TO APPROVE: Board meeting minutes of March 30, 2022	There were no changes or comments to the minutes dated March 30, 2022.	
7. Consent Agenda – Motion to Approve Consent Agenda Items		VOTE TAKEN: Mr. Gibbons motioned to approve the consent agenda. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.
7A. ADMINISTRATION		
7A-1. Receive & File: April 2022 Internet	The meeting notice was posted.	

Posting of District Public Meeting		Receive & File. No further action is necessary.
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Receive & File. No further action is necessary.
7B. FINANCE		
7B-1. Staff Recommends a MOTION TO APPROVE: District Clinic Holdings, Inc. Financial Report February 2022	<p>Management Discussion and Analysis as of February 2022 C.L. Brumback Primary Care Clinic Financial Statements.</p> <p>The February financial statements represent the financial performance through the fifth month of the 2022 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, deferred revenue remains the same amount as last month of (\$2.2M).</p> <p>On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$551k). An increase in actual charity care recognized compared to budgeted charity care is contributing to this unfavorable variance. Gross patient revenue YTD was favorable to budget by \$1.4M. Total YTD revenue was unfavorable to budget by (\$1.5M), which is partially due to a timing difference in grant funds recognized. Operational expenses before depreciation were favorable to budget by \$2.4M due mostly to positive variances in salaries, wages, and benefits of \$1.1M, purchased services of \$321k, other supplies of \$97k, drugs of \$191k, lease and rental of \$361k and other expense 127k. Total YTD net margin was (\$5.9M) compared to budget of (\$7.2M) resulting in a favorable variance of \$1.3M or (18.4%).</p> <p>Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$772k). The Medical clinics YTD gross patient revenue is unfavorable</p>	VOTE TAKEN: Mr. Gibbons motioned to approve the consent agenda. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.

	<p>to budget by \$(988k). The Medical clinic's total YTD revenue was unfavorable to budget by (\$1.5M). This unfavorable variance resulted from lower net patient revenue than budgeted and a timing difference of revenue recognition for grant funds. Total operating expenses of \$9.7M were favorable to budget of \$12.0M by \$2.3M. The positive variance is mostly due to salaries, wages, and benefits of \$1.1M, purchased services of \$295k, medical supplies of 103k, medical service of 103k, other supplies of \$82k, drugs of \$191k, lease and rental of \$333k, and other expense of 123k. Total YTD net margin was favorable to budget by \$1.3M or (18.9 %).</p> <p>Net patient revenue YTD for the Dental clinics was favorable to budget by \$221k. The Dental clinic's total YTD gross patient revenue was favorable to budget by \$2.4M. Total operating expenses of \$1.7M were favorable to budget by \$63k. Total YTD net margin was (\$526k) compared to a budgeted loss of (\$598k) for a favorable variance of \$73k or (12.2 %).</p>	
7C. POLICIES		
<p>7C-1. Staff Recommends a MOTION TO APPROVE: Instant Messaging & Secure Texting Policy & Procedure</p>	<p>This agenda item presents the new Instant Messaging and Secure Texting Policy & Procedure.</p> <p>The Co-Applicant agreement between the Health Care District of Palm Beach County and C. L. Brumback Primary Care Clinics allows the Clinics to adopt certain policies and procedures from the Grantee of Record (Health Care District of Palm Beach County). Accordingly, the Clinics would like to adopt the new Instant Messaging and Secure Texting Policy & Procedure.</p>	<p>VOTE TAKEN: Mr. Gibbons motioned to approve the consent agenda. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
8. REGULAR AGENDA		
8A. EXECUTIVE		
<p>8A-1. Receive & File: Executive Director Informational Update</p>	<p>The new West Boca Clinic had a wonderfully successful Grand Opening on April 18, 2022. Please see attached photos of before, during, and after construction and our Grand Opening day.</p>	<p>Receive & File. No further action is necessary.</p>

8B. ADMINISTRATION		
<p>8B-1. Staff Recommends a MOTION TO APPROVE: Change In Scope – Form 5B: C. L. Brumback Primary Care Clinics – West Boca</p>	<p>We respectfully request the authorization to close our prior site on Form 5B: C. L. Brumback Primary Care Clinics – West Boca, located at 23123 State Road 7, Suite 108, Boca Raton, FL 33428.</p> <p>Staff respectfully request a permanent Change In Scope to close our prior West Boca Clinic since we have successfully moved to our new site with over 4,671 square feet located two miles from our prior clinic.</p>	<p>VOTE TAKEN: Ms. Tammy Jackson-Moore made a motion to approve the Change in Scope- Form 5B: C.L. Brumback PCC- West Boca as presented. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
<p>8B-2. Receive & File: Patient Target Adjustment</p>	<p>We are notifying the Board of a recent patient target adjustment.</p> <p>Patient targets are set as goals when you submit your Service Area Competition (SAC) grant. FY2019 projected 46,403 unique patients to be served by the calendar year 2020. Due to the pandemic, we did not achieve this goal in 2020.</p> <p>Our FY2023 SAC application will be due later this year. In anticipation of this application, we have adjusted our patient target down to 44,915. We will need to continue to evaluate patient targets as we begin to complete our FY2023 SAC application.</p> <p>Mr. Smith requested that we provide the Board with a 5-year trend in revenue and productivity.</p> <p>Ms. Steele recommends adding the UDS 1 pager to the pocket of the Board of Directors folder moving forward.</p> <p>Ms. Jackson-Moore asked if we would be penalized for decreasing our patient target.</p> <p>Dr. Fritsch stated that we reached out to HRSA before decreasing our target and explained our circumstances. As long as we meet our goal for the SAC grant, we will reach our requirements.</p>	<p>Receive & File. No further action is necessary.</p>
8C. CREDENTIALING		

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

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

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

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

Last Name	First Name	Degree	Specialty	Credentialing
Bowen	Beverly	DMD	General Dentistry	Initial Credentialing
Wilkinson	Sarah	PA	Physician Assistant	Initial Credentialing

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

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

Beverly Bowen, DMD, joined the West Palm Beach Clinic in 2022, specializing in General Dentistry. She attended the University of Pittsburgh, School of Dental Medicine. Dr. Bowen has been in practice for two years.

VOTE TAKEN: Ms. Tammy Jackson-Moore made a motion to approve the Licensed Independent Practitioner Credentialing and Privileging of Dr. Beverly Bowen and Sarah Wilkinson as presented. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.

	<p>Sarah Wilkinson, PA, joined the Boca Raton Clinic in 2022 as a Physician Assistant. She attended Albany Medical College and is certified as a Physician Assistant by the National Commission on Certification of Physician Assistants. Ms. Wilkinson has been in practice for ten years.</p>	
<p>8D. OPERATIONS</p>		
<p>8D-1. Staff Recommends a MOTION TO APPROVE Operations Reports- February 2022</p>	<p>This agenda item provides the following operations reports for February 2022:</p> <p>Clinic Productivity, including in-person and telehealth metrics, No Show trended over time, demographics metrics and walk-in percentages.</p> <p>In February, the clinics had 10,889 visits which are 933 more than the month prior and 3,050 more than February of 2021. The Lantana Clinic had the highest volume with 1,835 visits, followed by the West Palm Beach Clinic with 1,330.</p> <p>Our payer mix for February reflects 56% uninsured patients and 29% Managed Care.</p> <p>Productivity targets were met in Lantana Adult Medical, Women’s Health in Lake Worth and Belle Glade, Lantana Pediatrics and Dental, Behavioral Health in Lake Worth, Belle Glade and Substance Abuse in Lewis and Mangonia. In the 90% and higher range were Adult Medical at Belle Glade, Delray, West Palm Beach, Jupiter, Lewis and Mangonia; West Palm Beach Pediatrics, Dental in Delray, West Palm Beach, and Belle Glade, and Behavioral Health in Lantana.</p> <p>The largest age group of patients were ages 30-39 with 16%. 51% of patients reported as White, followed by 39% as Black or African American. 43% of patients reported as Hispanic or Latino. 49% of patients’ primary language was English, followed by Spanish at 34%. Creole-speaking totaled 17%. 60% of patients identified as female and 90% as straight. 5% of patients reported as Agricultural workers, of which 81% were seasonal and 19% were migrants. 18% of patients reported being homeless, of which 74% were Doubling Up.</p> <p>In February, the number of patients who walked in and were seen the same day totaled 2,259. 20% of patients seen in medical were walk-ins, and 24% of patients seen in dental were walk-ins. The Lantana medical clinic had the</p>	<p>VOTE TAKEN: Mr. Gibbons made a motion to approve the Operations Reports- February 2022 as presented. Ms. Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

	<p>highest volume of walk-ins with 413, followed by the West Palm Beach medical clinic with 349. The West Palm Beach dental clinic had the highest volume of walk-ins with 227, followed by the Delray Beach dental clinic with 157 walk-ins. The medical clinics' rolling 12-month average walk-ins' percentage is 21% and the dental clinic's rolling 12-month average walk-in percentage is 35%. February showed a decrease of 1% in medical and dental walk-ins from the previous month.</p> <p>The No Show rate in February was 18%. The Tele no-show rate was 9% of the total no-shows in the past 12 months.</p>	
<p>8D-2. Staff Recommends a MOTION TO APPROVE Operations Reports- March 2022</p>	<p>This agenda item provides the following operations reports for March 2022:</p> <p>Clinic Productivity, including in-person and telehealth metrics, No Show trended over time, demographics metrics and walk-in percentages.</p> <p>In March, the clinics had 12,175 visits which are 1,286 more than the month prior and 2,749 more than March of 2021. The Lantana Clinic had the highest volume with 1,812 visits, followed by the West Palm Beach Clinic with 1,698.</p> <p>Our payer mix for January reflects 58% uninsured patients and 35% Managed Care.</p> <p>Productivity targets were met in Women's Health in Lake Worth, Lantana and West Palm Beach Pediatrics, Behavioral Health in Lake Worth and Substance Abuse in the Lewis Center. In the 90% and higher range were Adult Medical in Belle Glade, Delray, West Palm Beach, Lantana and Jupiter; Dental in Delray, Lantana and West Palm Beach, Belle Glade and Delray Behavioral Health and Substance Abuse in West Palm Beach, where the team temporarily saw patients four days in March.</p> <p>The largest age group of patients were ages 30-39 with 15%. 50% of patients reported as White, followed by 39% as Black or African American. 42% of patients reported as Hispanic or Latino. 51% of patients' primary language was English, followed by Spanish at 33%. Creole-speaking totaled 16%. 60% of patients identified as female and 90% as straight. 4% of patients reported as Agricultural workers, of which 80% were seasonal and 20% were migrants. 18% of patients reported being homeless, of which 74% were Doubling Up.</p>	<p>VOTE TAKEN: Mr. Elder made a motion to approve the Operations Reports- March 2022 as presented. Mr. Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

	<p>In March, the number of patients who walked in and were seen the same day totaled 2,458. 19% of patients seen in medical were walk-ins, and 25% of patients seen in dental were walk-ins. The West Palm Beach medical clinic had the highest volume of walk-ins with 382, followed by the Lantana and Mangonia medical clinics with 375 each. The West Palm Beach dental clinic had the highest volume of walk-ins with 258, followed by the Delray Beach dental clinic with 191 walk-ins. The medical clinics' rolling 12-month average walk-ins' percentage is 22% and the dental clinic's rolling 12-month average walk-in percentage is 37%. March showed a decrease of 1% in medical and 3% in dental walk-ins from the previous month.</p> <p>The No Show rate in March was 16%. The Tele no-show rate remains at 9% of the total no-shows in the past 12 months.</p> <p>Mr. Gibbons asked if the walk-in patients make up for the no-show patients.</p> <p>Ms. Miranda stated that it differs. Some of the larger clinics usually have a more significant rate of walk-in patients than no-show patients.</p>	
8E. QUALITY		
<p>8E-1. Staff Recommends a MOTION TO APPROVE Quality Reports</p>	<p>This agenda item presents the updated Quality Improvement & Quality Updates:</p> <ul style="list-style-type: none"> • Quality Council Meeting Minutes April 2022 • UDS Report – YTD • Provider Productivity – March 2022 <p><u>PATIENT SAFETY & ADVERSE EVENTS</u> Patient safety and risk, including adverse events, peer review and chart review are brought to the board “under separate cover” on a quarterly basis.</p> <p><u>PATIENT SATISFACTION AND GRIEVANCES</u> Patient relations are to be presented as a separate agenda item.</p> <p><u>QUALITY ASSURANCE & IMPROVEMENT</u></p> <p>Epic optimization: Created Smart Sets in Epic to improve our UDS metrics, resulting in increases in the following measures: Adult Weight Screening and</p>	<p>VOTE TAKEN: Ms. Jackson-Moore motioned to approve the Quality Reports as presented. Mr. Glass duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

	<p>Follow Up, Breast Cancer Screening and Weight Screening and Counseling for Children and Adolescents.</p> <p>Diabetes Control: We continue to show steady improvement in our diabetes measures. We significantly increased Point Of Care (POC) A1C testing for our diabetic patients (70% of diabetic patients in February compared to 10% of diabetic patients in January). The most recent UDS report shows our patients are currently controlled at 64%, up from 57% last month. HRSA's goal is to have 67% of patients with controlled diabetes.</p> <p><u>UTILIZATION OF HEALTH CENTER SERVICES</u> Individual monthly provider productivity is stratified by clinic.</p> <p>Ms. Jackson-Moore asked why the HIV percentage is low.</p> <p>Dr. Chibar stated that the test and result would need to be completed to get full credit.</p> <p>Ms. Steele also stated that most people get HIV screening through the Department of Health than through the C.L. Brumback clinics.</p> <p>Mr. Glass asked if the clinics made an effort to have patients participate in colon-rectal screening during March.</p> <p>Dr. Chibar stated that we didn't have anything targeted for the month. Internally, the staff competed with other staff to effectively increase the POD (Poop on Demand) and encourage the patients to participate.</p> <p>Ms. Mastrangelo asked if a patient is screened for depression when they will get reassessed.</p> <p>Dr. Chibar stated that the patient would be reassessed each visit.</p>	
<p>8F-1. Staff Recommends a MOTION TO APPROVE Patient Relations Dashboard Report</p>	<p>This agenda item provides the following:</p> <p>Quarterly Patient Relations Dashboard Q1 - 2022</p> <p>For Quarter 1, 39 Patient Relations Occurrences occurred between 7 clinics and clinic administration. Of the 39 occurrences, there were 9 grievances and 30 complaints. The top 5 categories were Care and Treatment,</p>	<p>VOTE TAKEN: Mr. Gibbons motioned to approve the Patient Relations Dashboard Report as presented. Mr. Elder duly seconded the motion. A vote was called,</p>

	<p>Communication, Finance Related, Physician Related and Respect Related issues. The top 3 subcategories were Poor Communication and Billing issues with 6 complaints and grievances in each, followed by Lack of Continuity of Care with 4 complaints or grievances.</p> <p>There were also 160 patient compliments, of which 155 were patient compliments and 5 employee Thumbs-Up compliments received across 8 clinics and clinic administration.</p> <p>Mr. Smith asked what the difference is between a grievance and a complaint.</p> <p>Mr. Speciale stated that a complaint could be resolved within 24 hours, while a grievance takes more work and has a longer process to complete.</p> <p>Mr. Smith asked if employees have the option to speak up about burnout.</p> <p>Dr. Fritsch stated that we monitor the staff and are hypervigilant on making sure the team doesn't get burnout.</p> <p>Dr. Andric stated that an employee would fill out an engagement survey to see how our employees feel about their work environment each year.</p> <p>Ms. Abbott also added that there has to be an action plan for those employees in need, and HR has set up programs for employees to prevent burnout and large turnovers.</p>	<p>and the motion passed unanimously.</p>
<p>9. A.V.P. and Executive Director of Clinic Services Comments</p>	<p>None</p>	<p>No action necessary.</p>
<p>10. Board Member Comments</p>	<p>Mr. Glass thanked the staff for working hard to open the clinic at St. Ann.</p> <p>Mr. Smith requested that each clinic supervisor can present a slide on their clinic location.</p>	<p>No action necessary.</p>
<p>11. Establishment of Upcoming Meetings</p>	<p><u>May 25, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p>	<p>No action necessary.</p>

C. L. Brumback Primary Care Clinics

Board of Directors

Attendance Tracking

	1/26/22	2/23/22	3/30/22	4/27/22	5/25/22	6/29/22	7/27/22	8/24/22	9/28/22	10/26/22	11/29/22	12/13/22
Mike Smith	X	X	X	X								
Melissa Mastrangelo	X	X (ZOOM)	E	X (ZOOM)								
Julia Bullard	X	X	X	X								
Joseph Gibbons	X	X	X	X								
John Casey Mullen	X	X	X	X								
James Elder	X	X	X	X								
Irene Figueroa	X	X	X	A								
Tammy Jackson-Moore	X	X	X	X								
Robert Glass	X (ZOOM)	X (ZOOM)	X (ZOOM)	X								

X= Present

C= Cancel

E= Excused

A= Absent

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

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

2. Summary:

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

3. Substantive Analysis:

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

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

 Candice Abbott
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

 Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

6. Recommendation:

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

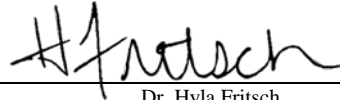
Approved for Legal sufficiency:



Bernabe A Icaza
VP & General Counsel



Candice Abbott
VP & Chief Financial Officer



Dr. Hyla Fritsch
Executive Director of Clinic and Pharmacy
Services

MEMO

To: Finance Committee
From: Candice Abbott
Chief Financial Officer
Date: May 25, 2022

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

The March financial statements represent the financial performance through the sixth month of the 2022 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, due from other governments decreased \$819k due to receiving cash related to grant funding.

On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$697k). An increase in actual charity care recognized compared to budgeted charity care is contributing to this unfavorable variance. Gross patient revenue YTD was favorable to budget by \$1.8M. Total YTD revenue was unfavorable to budget by (\$1.7M), which is partially due to a timing difference in grant funds recognized. Operational expenses before depreciation were favorable to budget by \$2.9M due mostly to positive variances in salaries, wages, and benefits of \$1.4M, purchased services of \$397k, medical supplies of \$106k, medical services of \$113k, drugs of \$234k, lease and rental of \$431k and other expense 145k. Total YTD net margin was (\$7.0M) compared to the budgeted loss of (\$8.7M) resulting in a favorable variance of \$1.7M or (19.7%).

Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$913k). The Medical clinics YTD gross patient revenue is unfavorable to budget by (\$1.2M). The Medical clinics total YTD revenue was unfavorable to budget by (\$1.6M). This unfavorable variance resulted from lower net patient revenue than budgeted and a timing difference of revenue recognition for grant funds. Total operating expenses of \$11.7M were favorable to budget of \$14.5M by \$2.9M or 19.6%. The positive variance is mostly due to salaries, wages, and benefits of \$1.4M, purchased services of \$369k, medical supplies of 135k, medical services of 113k, drugs of \$234k, lease and rental of \$402k, and other expense of 135k. Unanticipated staffing shortages as well as expense timing are driving these favorable variances. Total YTD net margin was favorable to budget by \$1.7M or (20.8%).

Net patient revenue YTD for the Dental clinics was favorable to budget by \$217k. The Dental clinics total YTD gross patient revenue was favorable to budget by \$3.0M. An increase in unanticipated patient volume resulted in higher gross revenue, however increased charity care classification unfavorably impacted net patient revenue results. Total YTD operating expenses of \$2.1M were favorable to budget by \$79k. Total YTD net margin was (\$649k) compared to a budgeted loss of (\$700k) for a favorable variance of \$51k or (7.3%).

DISTRICT CLINIC HOLDINGS, INC.
COMPARATIVE STATEMENT OF NET POSITION

	<u>Mar 31, 2022</u>	<u>Feb 28, 2022</u>	<u>Increase (Decrease)</u>
Assets			
Cash and Cash Equivalents	(5,782,864)	(5,499,266)	\$ (283,598)
Restricted Cash	-	-	-
Accounts Receivable, net	2,572,307	2,471,091	101,215
Due From Other Funds	-	-	-
Due from Other Governments	2,973,466	3,792,253	(818,787)
Other Current Assets	210,159	187,098	23,062
Net Investment in Capital Assets	2,605,298	2,654,836	(49,538)
Total Assets	<u>\$ 2,578,366</u>	<u>\$ 3,606,012</u>	<u>\$ (1,027,646)</u>
Liabilities			
Accounts Payable	195,359	296,462	(101,103)
Due To Other Governments	-	-	-
Deferred Revenue	2,212,808	2,212,808	-
Other Current Liabilities	1,866,063	1,692,895	173,168
Non-Current Liabilities	1,315,107	1,306,122	8,985
Total Liabilities	<u>5,589,337</u>	<u>5,508,288</u>	<u>81,049</u>
Deferred Inflows of Resources			
Deferred Inflows- Other Post Employment Benefits	<u>\$ 2,177</u>	<u>\$ 2,177</u>	<u>\$ -</u>
Net Position			
Net Investment in Capital Assets	2,605,298	2,654,836	(49,538)
Unrestricted	(5,618,446)	(4,559,289)	(1,059,157)
Total Net Position	<u>(3,013,148)</u>	<u>(1,904,453)</u>	<u>(1,108,695)</u>
Total Liabilities, Deferred Inflows of Resources and Net Position	<u>\$ 2,578,366</u>	<u>\$ 3,606,012</u>	<u>\$ (1,027,646)</u>

Note: Amounts may not foot due to rounding.

District Clinics Holdings, Inc. Statement of Revenues and Expenses

FOR THE SIXTH MONTH ENDED MARCH 31, 2022

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
31,165	40,833	9,668	23.7%	31,593	428	1.4%	190,500	244,998	54,498	22.2%	190,190	(310)	(0.2%)
<i>Overhead Allocations:</i>													
7,385	5,619	(1,767)	(31.4%)	4,413	(2,972)	(67.3%)	47,479	33,713	(13,766)	(40.8%)	13,700	(33,780)	(246.6%)
177,772	211,204	33,433	15.8%	197,221	19,449	9.9%	959,061	1,267,227	308,166	24.3%	1,144,996	185,936	16.2%
1,653	4,830	3,177	65.8%	1,246	(406)	(32.6%)	8,856	28,979	20,123	69.4%	9,487	631	6.7%
29,002	29,602	600	2.0%	20,104	(8,898)	(44.3%)	171,440	177,611	6,171	3.5%	111,325	(60,114)	(54.0%)
44,008	42,204	(1,804)	(4.3%)	44,102	94	0.2%	248,933	253,226	4,294	1.7%	216,883	(32,049)	(14.8%)
60,578	59,861	(717)	(1.2%)	77,147	16,570	21.5%	303,070	359,165	56,095	15.6%	343,748	40,678	11.8%
39,718	24,187	(15,531)	(64.2%)	25,673	(14,045)	(54.7%)	98,808	145,121	46,312	31.9%	97,980	(828)	(0.8%)
3,051	4,453	1,402	31.5%	8,062	5,011	62.2%	18,367	26,719	8,353	31.3%	44,274	25,907	58.5%
6,342	8,934	2,591	29.0%	8,271	1,928	23.3%	37,878	53,602	15,724	29.3%	34,495	(3,383)	(9.8%)
9,014	8,679	(335)	(3.9%)	6,624	(2,390)	(36.1%)	48,864	52,075	3,212	6.2%	39,118	(9,746)	(24.9%)
73,915	77,132	3,217	4.2%	109,310	35,396	32.4%	505,390	462,790	(42,601)	(9.2%)	472,540	(32,851)	(7.0%)
9,253	13,542	4,289	31.7%	7,634	(1,619)	(21.2%)	66,875	81,250	14,376	17.7%	44,289	(22,586)	(51.0%)
65,221	50,742	(14,479)	(28.5%)	34,133	(31,089)	(91.1%)	293,606	304,453	10,847	3.6%	190,050	(103,556)	(54.5%)
54,938	64,734	9,796	15.1%	47,158	(7,780)	(16.5%)	322,640	388,406	65,766	16.9%	266,553	(56,087)	(21.0%)
184,580	171,319	(13,261)	(7.7%)	180,108	(4,472)	(2.5%)	1,128,533	1,027,914	(100,619)	(9.8%)	497,272	(631,262)	(126.9%)
29,841	32,082	2,241	7.0%	25,741	(4,099)	(15.9%)	187,391	192,492	5,100	2.6%	166,645	(20,747)	(12.4%)
5,315	7,670	2,355	30.7%	9,625	4,310	44.8%	34,191	46,021	11,829	25.7%	45,961	11,770	25.6%
7,994	12,663	4,669	36.9%	10,196	2,201	21.6%	50,555	75,976	25,421	33.5%	60,165	9,610	16.0%
6,849	7,714	865	11.2%	6,203	(646)	(10.4%)	44,368	46,282	1,914	4.1%	34,712	(9,655)	(27.8%)
11,993	15,014	3,022	20.1%	9,555	(2,437)	(25.5%)	68,334	90,086	21,753	24.1%	52,871	(15,463)	(29.2%)
-	-	-	0.0%	508	508	100.0%	-	-	-	0.0%	6,412	6,412	100.0%
828,421	852,184	23,763	2.8%	833,035	4,614	0.6%	4,644,638	5,113,106	468,468	9.2%	3,893,476	(751,162)	(19.3%)
3,201,195	3,781,480	580,285	15.3%	3,297,479	96,284	2.9%	18,616,680	22,070,148	3,453,468	15.6%	17,364,084	(1,252,596)	(7.2%)
\$ (1,108,695)	\$ (1,499,533)	\$ 390,838	(26.1%)	\$ (1,470,760)	\$ 362,065	(24.6%)	\$ (7,012,630)	\$ (8,731,364)	\$ 1,718,734	(19.7%)	\$ (9,056,599)	\$ 2,043,969	(22.6%)
-	42,740	42,740	100.0%	-	-	0.0%	100,000	944,590	844,590	89.4%	-	(100,000)	0.0%
\$ -	\$ 1,501,443	\$ 1,501,443	100.0%	\$ -	\$ -	0.0%	\$ -	\$ 9,430,972	\$ 9,430,972	100.0%	\$ 5,970,026	\$ 5,970,026	100.0%

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

	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Year to Date
Gross Patient Revenue	2,112,033	1,969,914	2,121,489	2,081,642	2,080,482	2,287,694	-	-	-	-	-	-	12,653,254
Contractual Allowances	1,691,626	1,206,065	(1,213,834)	628,878	508,459	262,082	-	-	-	-	-	-	3,083,277
Charity Care	36,418	90,974	2,416,799	865,037	871,977	916,848	-	-	-	-	-	-	5,198,052
Bad Debt	(155,607)	409,555	727,800	219,498	197,338	715,026	-	-	-	-	-	-	2,113,610
Other Patient Revenue	444,688	444,688	444,688	299,550	408,404	421,608	-	-	-	-	-	-	2,463,626
Net Patient Revenue	984,285	708,007	635,413	667,780	911,110	815,346	-	-	-	-	-	-	4,721,941
Collections %	46.60%	35.94%	29.95%	32.08%	43.79%	35.64%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	37.32%
Grant Funds	1,044,836	1,160,187	1,030,989	1,329,092	1,021,208	1,293,780	-	-	-	-	-	-	6,880,091
Other Financial Assistance	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Revenue	1,087	1,941	12,516	1,815	1,285	(16,626)	-	-	-	-	-	-	2,017
Total Other Revenues	1,045,922	1,162,128	1,043,505	1,330,907	1,022,494	1,277,154	-	-	-	-	-	-	6,882,109
Total Revenues	2,030,207	1,870,135	1,678,918	1,998,686	1,933,604	2,092,500	-	-	-	-	-	-	11,604,050
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,630,191	1,229,547	1,592,418	1,476,762	1,385,221	1,467,535	-	-	-	-	-	-	8,781,673
Benefits	415,815	365,414	411,926	436,127	405,473	421,814	-	-	-	-	-	-	2,456,570
Purchased Services	48,976	47,674	74,906	37,055	74,341	33,228	-	-	-	-	-	-	316,180
Medical Supplies	32,524	50,842	85,475	72,989	44,574	51,501	-	-	-	-	-	-	337,904
Other Supplies	13,026	5,890	10,731	23,292	51,222	72,845	-	-	-	-	-	-	177,006
Medical Services	39,783	40,636	44,092	41,584	32,835	54,767	-	-	-	-	-	-	253,697
Drugs	50,990	45,545	38,498	41,925	43,387	45,034	-	-	-	-	-	-	265,378
Repairs & Maintenance	44,211	41,679	83,118	36,605	45,492	25,316	-	-	-	-	-	-	276,422
Lease & Rental	106,427	102,846	102,325	108,509	103,683	112,896	-	-	-	-	-	-	636,687
Utilities	7,937	6,879	6,972	7,354	6,911	7,431	-	-	-	-	-	-	43,484
Other Expense	39,553	45,691	27,860	14,842	39,224	45,215	-	-	-	-	-	-	212,385
Insurance	4,026	4,026	4,026	4,026	4,026	4,026	-	-	-	-	-	-	24,157
Total Operational Expenses	2,433,459	1,986,669	2,482,346	2,301,071	2,236,389	2,341,609	-	-	-	-	-	-	13,781,542
Net Performance before Depreciation & Overhead Allocations	(403,252)	(116,533)	(803,428)	(302,385)	(302,785)	(249,109)	-	-	-	-	-	-	(2,177,492)
Depreciation	31,642	31,642	31,642	31,642	32,767	31,165	-	-	-	-	-	-	190,500
<i>Overhead Allocations:</i>													
Risk Mgt	5,725	9,931	9,610	7,813	7,014	7,385	-	-	-	-	-	-	47,479
Rev Cycle	139,350	131,656	198,563	156,448	155,272	177,772	-	-	-	-	-	-	959,061
Internal Audit	283	1,301	1,525	2,520	1,575	1,653	-	-	-	-	-	-	8,856
Home Office Facilities	28,190	28,849	28,452	37,890	19,057	29,002	-	-	-	-	-	-	171,440
Administration	39,803	37,815	45,770	42,646	38,891	44,008	-	-	-	-	-	-	248,933
Human Resources	47,430	69,522	21,174	61,095	43,271	60,578	-	-	-	-	-	-	303,070
Legal	7,774	9,522	13,852	15,869	12,073	39,718	-	-	-	-	-	-	98,808
Records	3,029	3,626	2,777	3,556	2,328	3,051	-	-	-	-	-	-	18,367
Compliance	5,937	5,784	6,338	7,487	5,990	6,342	-	-	-	-	-	-	37,878
Comm Engage Plan	7,922	7,521	8,490	8,359	7,557	9,014	-	-	-	-	-	-	48,864
IT Operations	72,556	80,983	102,533	72,644	102,760	73,915	-	-	-	-	-	-	505,390
IT Security	8,357	13,278	17,327	9,731	8,929	9,253	-	-	-	-	-	-	66,875
IT Applications	57,793	32,152	55,800	38,470	44,169	65,221	-	-	-	-	-	-	293,606
Security Services	53,294	48,508	59,855	53,742	52,303	54,938	-	-	-	-	-	-	322,640
IT EPIC	160,592	140,711	197,854	211,401	233,395	184,580	-	-	-	-	-	-	1,128,533
Finance	33,898	29,465	34,870	32,359	26,958	29,841	-	-	-	-	-	-	187,391
Public Relations	7,665	5,024	5,041	5,905	5,240	5,315	-	-	-	-	-	-	34,191
Information Technology	8,010	8,832	8,455	9,382	7,882	7,994	-	-	-	-	-	-	50,555
Corporate Quality	7,261	8,513	7,104	7,425	7,217	6,849	-	-	-	-	-	-	44,368
Project MGMT Office	12,411	11,743	11,412	11,317	9,459	11,993	-	-	-	-	-	-	68,334
Managed Care Contract	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Overhead Allocations	707,279	684,736	836,803	796,058	791,341	828,421	-	-	-	-	-	-	4,644,638
Total Expenses	3,172,379	2,703,047	3,350,791	3,128,771	3,060,497	3,201,195	-	-	-	-	-	-	18,616,680
Net Margin	\$ (1,142,173)	\$ (832,912)	\$ (1,671,873)	\$ (1,130,085)	\$ (1,126,893)	\$ (1,108,695)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (7,012,630)
Capital	100,000	-	-	-	-	-	-	-	-	-	-	-	100,000
General Fund Support/ Transfer In	-	-	-	-	-	-	-	-	-	-	-	-	\$ -

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

FOR THE SIXTH MONTH ENDED MARCH 31, 2022

	Clinic Administration	West Palm Beach Clinic	Lantana Clinic	Delray Clinic	Belle Glade Clinic	Lewis Center	Lake Worth Clinic	Jupiter Clinic	West Boca Clinic	Subxone Clinic	Mobile Warrior	Mobile Van Scout	Mobile Van Hero	Total
Gross Patient Revenue	-	1,310,618	1,876,077	550,358	677,528	584,893	1,428,696	453,058	346,398	440,743	3,288	-	15,565	7,692,763
Contractual Allowances	-	179,255	236,045	151,036	113,039	74,729	341,114	84,755	145,221	89,006	183	-	417	1,414,798
Charity Care	-	561,426	889,650	174,557	234,134	137,098	499,874	181,979	104,999	107,216	341	-	1,294	2,893,002
Bad Debt	-	141,952	334,962	119,354	191,959	267,763	241,950	46,277	25,371	263,330	(202)	-	2,606	1,635,442
Total Contractual Allowances and Bad Debt	-	882,632	1,460,657	444,947	539,132	479,590	1,082,939	313,011	275,591	459,552	322	-	4,317	5,943,243
Other Patient Revenue	-	362,935	447,181	165,840	149,723	29,077	260,022	113,011	132,677	57,737	14,161	7,824	7,824	1,750,971
Net Patient Revenue	-	790,920	862,600	271,250	288,120	134,380	605,780	253,058	203,485	38,928	17,127	7,824	19,072	3,500,492
Collection %	0.00%	60.35%	45.98%	49.29%	42.53%	22.98%	42.40%	55.86%	58.74%	8.83%	0.00%	0.00%	0.00%	45.50%
Grant Funds	1,349,473	754,318	883,048	353,325	349,462	137,183	794,621	253,452	274,058	601,388	100,375	34,722	73,817	5,963,263
Other Financial Assistance	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Revenue	(13,148)	2,837	3,252	832	5,032	-	81	1,334	1,597	-	-	-	-	1,817
Total Other Revenues	1,336,325	757,155	886,300	354,157	354,495	137,183	794,702	254,787	275,656	601,388	100,375	34,722	73,817	5,965,081
Total Revenues	1,336,325	1,548,075	1,748,900	625,407	642,614	271,562	1,400,482	507,844	479,140	640,316	117,502	42,546	92,890	9,465,573
<i>Direct Operational Expenses:</i>														
Salaries and Wages	1,736,033	816,637	1,064,935	425,673	416,849	197,360	1,015,704	332,434	356,102	711,696	134,212	51,158	106,243	7,402,370
Benefits	520,424	187,217	292,621	114,356	137,887	54,924	285,424	84,199	93,714	197,803	29,054	9,851	34,887	2,053,274
Purchased Services	187,795	9,990	23,269	9,197	14,758	5,036	20,822	9,188	12,779	9,796	685	685	685	304,685
Medical Supplies	3,597	57,014	30,195	23,841	16,473	15,029	35,040	9,474	12,207	20,362	5,329	886	475	231,847
Other Supplies	96,717	9,546	2,353	12,092	5,292	533	13,164	608	7,654	12,754	2,557	1,435	1,632	167,127
Medical Services	-	32,770	37,132	19,230	29,271	15,151	81,938	13,923	12,995	10,410	-	-	-	253,697
Drugs	-	125,987	75,809	30,848	21,334	375	6,241	1,419	2,993	80	-	22	78	265,378
Repairs & Maintenance	239,009	2,021	1,351	1,831	1,606	1,216	3,273	1,351	3,506	2,583	2,016	4,237	376	264,377
Lease & Rental	-	64,515	78,390	39,400	48,026	120	134,603	41,582	65,340	24,257	90	30	85	496,542
Utilities	-	2,175	2,172	611	10,237	1,220	7,058	3,827	3,673	2,747	-	-	-	33,720
Other Expense	144,240	5,906	9,815	3,845	2,145	2,469	10,434	3,499	1,727	6,332	3,180	1,657	3,359	198,738
Insurance	-	2,027	2,791	1,533	435	664	965	409	595	499	4,571	4,571	4,571	23,631
Total Operational Expenses	2,927,815	1,315,805	1,620,833	682,458	704,313	294,098	1,614,667	501,912	573,286	999,318	181,693	74,532	152,390	11,695,386
Net Performance before Depreciation & Overhead Allocations	(1,591,491)	232,270	128,067	(57,051)	(61,699)	(22,535)	(214,185)	5,932	(94,146)	(359,002)	(64,190)	(31,986)	(59,501)	(2,229,814)
Depreciation	2,042	7,199	6,800	103	35,717	163	2,564	1,371	2,335	921	37,500	6,942	41,763	145,420
<i>Overhead Allocations:</i>														
Risk Mgt	6,240	4,967	6,639	3,461	2,688	1,282	4,642	1,587	2,030	4,275	1,196	486	1,122	40,810
Rev Cycle	-	117,399	156,916	81,796	63,531	30,308	109,709	37,502	47,970	101,042	28,258	11,483	26,513	817,031
Internal Audit	1,164	927	1,238	646	501	239	866	296	379	797	223	91	209	7,612
Home Office Facilities	155,037	-	-	-	-	-	-	-	-	-	-	-	-	155,037
Administration	32,716	26,044	34,810	18,145	14,094	6,723	24,338	8,319	10,642	22,415	6,269	2,547	5,882	213,964
Human Resources	47,762	30,226	33,572	19,612	18,459	6,922	26,650	10,383	12,690	31,265	8,076	3,461	9,229	259,461
Legal	12,986	10,337	13,817	7,202	5,594	2,669	9,660	3,302	4,224	8,897	2,488	1,011	2,335	84,928
Records	2,414	1,922	2,568	1,339	1,040	496	1,796	614	785	1,654	463	188	434	15,787
Compliance	4,978	3,963	5,297	2,761	2,145	1,023	3,703	1,266	1,619	3,411	954	388	895	32,557
Comm Engage Plan	6,422	5,112	6,833	3,562	2,766	1,320	4,777	1,633	2,089	4,400	1,230	500	1,155	41,999
IT Operations	66,421	52,874	70,672	36,840	28,613	13,650	49,411	16,890	21,605	45,507	12,727	5,172	11,941	434,396
IT Security	8,789	6,996	9,352	4,875	3,786	1,806	6,538	2,235	2,859	6,022	1,684	684	1,580	57,480
IT Applications	38,587	30,717	41,057	21,402	16,623	7,930	28,705	9,812	12,551	26,437	7,394	3,005	6,937	252,362
Security Services	-	39,685	53,043	27,650	21,476	10,245	37,086	12,677	16,216	34,156	9,552	3,882	8,962	274,629
IT EPIC	148,317	118,068	157,810	82,262	63,893	30,481	110,334	37,715	48,244	101,618	28,419	11,549	26,664	970,003
Finance	24,628	19,605	26,204	13,660	10,609	5,061	18,321	6,263	8,011	16,873	4,719	1,918	4,428	161,068
Public Relations	4,494	3,577	4,781	2,492	1,936	923	3,343	1,143	1,462	3,079	861	350	808	29,388
Information Technology	6,644	5,289	7,069	3,685	2,862	1,365	4,943	1,690	2,161	4,552	1,273	517	1,194	43,453
Corporate Quality	5,831	4,642	6,204	3,234	2,512	1,198	4,338	1,483	1,897	3,995	1,117	454	1,048	38,135
Project MGMT Office	8,981	7,149	9,556	4,981	3,869	1,846	6,681	2,284	2,921	6,153	1,721	699	1,615	58,735
Total Overhead Allocations	582,409	489,500	647,439	339,605	266,998	125,489	455,840	157,093	200,354	426,547	118,622	48,385	112,950	3,988,836
Total Expenses	3,512,267	1,812,505	2,275,071	1,022,166	1,007,029	419,750	2,073,071	660,376	775,975	1,426,787	337,814	129,860	307,104	15,829,643
Net Margin	\$ (2,175,942)	\$ (264,429)	\$ (526,171)	\$ (396,759)	\$ (364,415)	\$ (148,187)	\$ (672,589)	\$ (152,532)	\$ (296,835)	\$ (786,470)	\$ (220,312)	\$ (87,313)	\$ (214,214)	\$ (6,364,070)
Capital	-	-	-	-	-	-	-	-	-	100,000	-	-	-	100,000
General Fund Support/ Transfer In	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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

FOR THE SIXTH MONTH ENDED MARCH 31, 2022

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
23,766	31,250	7,484	23.9%	24,251	485	2.0%	145,420	187,500	42,080	22.4%	146,370	949	0.6%
<i>Overhead Allocations:</i>													
6,348	4,830	(1,518)	(31.4%)	3,786	(2,562)	(67.7%)	40,810	28,977	(11,833)	(40.8%)	11,752	(29,058)	(247.3%)
151,445	179,927	28,482	15.8%	166,509	15,064	9.0%	817,031	1,079,560	262,529	24.3%	966,694	149,663	15.5%
1,420	4,151	2,731	65.8%	1,069	(351)	(32.8%)	7,612	24,908	17,296	69.4%	8,138	526	6.5%
26,227	26,770	543	2.0%	18,102	(8,125)	(44.9%)	155,037	160,618	5,581	3.5%	100,241	(54,796)	(54.7%)
37,826	36,276	(1,551)	(4.3%)	37,831	5	0.0%	213,964	217,654	3,690	1.7%	186,045	(27,919)	(15.0%)
51,861	51,247	(614)	(1.2%)	66,724	14,863	22.3%	259,461	307,485	48,023	15.6%	297,303	37,841	12.7%
34,139	20,789	(13,349)	(64.2%)	22,022	(12,116)	(55.0%)	84,928	124,735	39,807	31.9%	84,049	(880)	(1.0%)
2,623	3,828	1,205	31.5%	6,916	4,293	62.1%	15,787	22,966	7,179	31.3%	37,979	22,192	58.4%
5,451	7,679	2,227	29.0%	7,095	1,643	23.2%	32,557	46,072	13,515	29.3%	29,590	(2,967)	(10.0%)
7,748	7,460	(288)	(3.9%)	5,683	(2,065)	(36.3%)	41,999	44,760	2,760	6.2%	33,556	(8,444)	(25.2%)
63,531	66,297	2,765	4.2%	93,768	30,236	32.2%	434,396	397,779	(36,616)	(9.2%)	405,351	(29,045)	(7.2%)
7,953	11,639	3,686	31.7%	6,549	(1,405)	(21.5%)	57,480	69,837	12,356	17.7%	37,992	(19,489)	(51.3%)
56,059	43,614	(12,445)	(28.5%)	29,279	(26,780)	(91.5%)	252,362	261,685	9,324	3.6%	163,027	(89,335)	(54.8%)
46,763	55,101	8,339	15.1%	40,103	(6,660)	(16.6%)	274,629	330,609	55,980	16.9%	226,675	(47,953)	(21.2%)
158,651	147,253	(11,398)	(7.7%)	154,499	(4,152)	(2.7%)	970,003	883,518	(86,485)	(9.8%)	426,566	(543,437)	(127.4%)
25,649	27,575	1,926	7.0%	22,081	(3,568)	(16.2%)	161,068	165,452	4,384	2.6%	142,950	(18,118)	(12.7%)
4,569	6,593	2,024	30.7%	8,257	3,688	44.7%	29,388	39,556	10,168	25.7%	39,426	10,038	25.5%
6,871	10,884	4,013	36.9%	8,746	1,875	21.4%	43,453	65,304	21,850	33.5%	51,611	8,157	15.8%
5,887	6,630	743	11.2%	5,321	(566)	(10.6%)	38,135	39,780	1,645	4.1%	29,777	(8,359)	(28.1%)
10,308	12,905	2,597	20.1%	8,197	(2,111)	(25.8%)	58,735	77,431	18,697	24.1%	45,353	(13,381)	(29.5%)
-	-	-	0.0%	429	429	100.0%	-	-	-	0.0%	5,414	5,414	100.0%
711,330	731,447	20,118	2.8%	712,965	1,635	0.2%	3,988,836	4,388,686	399,850	9.1%	3,329,488	(659,348)	(19.8%)
2,727,827	3,286,399	558,573	17.0%	2,843,527	115,700	4.1%	15,829,643	19,122,731	3,293,088	17.2%	14,796,860	(1,032,783)	(7.0%)
\$ (985,800)	\$ (1,398,245)	\$ 412,446	(29.5%)	\$ (1,184,198)	\$ 198,398	(16.8%)	\$ (6,364,070)	\$ (8,031,584)	\$ 1,667,513	(20.8%)	\$ (7,867,575)	\$ 1,503,504	(19.1%)
-	37,740	37,740	100.0%	-	-	0.0%	100,000	834,590	734,590	88.0%	-	(100,000)	0.0%
\$ -	\$ 1,404,739	\$ 1,404,739	100.0%	\$ -	\$ -	0.0%	\$ -	\$ 8,678,694	\$ 8,678,694	100.0%	\$ 4,856,903	\$ 4,856,903	100.0%

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

FOR THE SIXTH MONTH ENDED MARCH 31, 2022

	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Total
Gross Patient Revenue	-	1,714,930	1,650,018	881,166	714,376	4,960,491
Contractual Allowances	-	575,093	329,515	335,269	428,601	1,668,478
Charity Care	-	672,271	1,042,101	344,052	246,626	2,305,050
Bad Debt	-	157,343	66,085	174,747	79,994	478,168
Total Contractual Allowances and Bad Debt	-	1,404,707	1,437,701	854,068	755,220	4,451,696
Other Patient Revenue	-	270,785	191,473	131,762	118,634	712,654
Net Patient Revenue	-	581,009	403,790	158,860	77,791	1,221,449
Collection %	-	33.88%	24.47%	18.03%	10.89%	24.62%
Grant Funds	130,711	339,587	234,325	91,890	120,315	916,828
Other Financial Assistance	-	-	-	-	-	-
Other Revenue	-	-	200	-	-	200
Total Other Revenues	130,711	339,587	234,525	91,890	120,315	917,028
Total Revenues	130,711	920,596	638,315	250,750	198,106	2,138,477
<i>Direct Operational Expenses:</i>						
Salaries and Wages	206,671	515,373	340,734	135,133	181,393	1,379,303
Benefits	64,957	139,273	85,314	56,592	57,160	403,296
Purchased Services	-	2,287	2,127	1,430	5,652	11,495
Medical Supplies	-	39,596	28,134	24,832	13,495	106,057
Other Supplies	283	6,475	1,515	1,354	253	9,879
Repairs & Maintenance	-	3,223	4,107	3,732	983	12,045
Lease & Rental	-	55,160	32,740	35,665	16,580	140,145
Utilities	-	2,175	2,172	610	4,807	9,763
Other Expense	3,755	4,279	2,698	2,166	748	13,646
Insurance	-	-	-	-	526	526
Total Operational Expenses	275,665	767,841	499,541	261,513	281,596	2,086,156
Net Performance before Depreciation & Overhead Allocations	(144,954)	152,755	138,774	(10,763)	(83,490)	52,322
Depreciation	-	15,093	5,647	4,881	19,458	45,079
<i>Overhead Allocations:</i>						
Risk Mgt	660	2,164	1,489	1,510	847	6,670
Rev Cycle	-	51,142	35,193	35,687	20,007	142,030
Internal Audit	123	404	278	282	158	1,244
Home Office Facilities	16,402	-	-	-	-	16,402
Administration	3,461	11,345	7,807	7,917	4,438	34,969
Human Resources	3,461	15,459	10,845	10,383	3,461	43,609
Legal	1,374	4,503	3,099	3,142	1,762	13,880
Records	255	837	576	584	327	2,580
Compliance	527	1,726	1,188	1,205	675	5,321
Comm Engage Plan	679	2,227	1,533	1,554	871	6,864
IT Operations	7,027	23,033	15,850	16,073	9,011	70,994
IT Security	930	3,048	2,097	2,127	1,192	9,394
IT Applications	4,082	13,381	9,208	9,337	5,235	41,244
Security Services	-	17,288	11,897	12,063	6,763	48,011
IT EPIC	15,691	51,433	35,394	35,890	20,121	158,530
Finance	2,605	8,540	5,877	5,960	3,341	26,324
Public Relations	475	1,558	1,072	1,087	610	4,803
Information Technology	703	2,304	1,586	1,608	901	7,102
Corporate Quality	617	2,022	1,392	1,411	791	6,233
Project MGMT Office	950	3,114	2,143	2,173	1,218	9,599
Total Overhead Allocations	60,024	215,529	148,524	149,993	81,732	655,802
Total Expenses	335,689	998,464	653,712	416,387	382,785	2,787,037
Net Margin	\$ (204,978)	\$ (77,868)	\$ (15,397)	\$ (165,637)	\$ (184,680)	\$ (648,560)
Capital	-	-	-	-	-	-
General Fund Support/ Transfer In	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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

FOR THE SIXTH MONTH ENDED MARCH 31, 2022

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
909,663	371,931	537,732	144.6%	241,003	668,660	277.4%	4,960,491	2,002,185	2,958,306	147.8%	1,577,151	3,383,339	214.5%
191,686	68,183	(123,503)	(181.1%)	98,836	(92,851)	(93.9%)	1,668,478	367,037	(1,301,441)	(354.6%)	555,037	(1,113,441)	(200.6%)
406,099	172,416	(233,683)	(135.5%)	76,266	(329,833)	(432.5%)	2,305,050	928,151	(1,376,899)	(148.3%)	708,082	(1,596,968)	(225.5%)
252,314	29,754	(222,560)	(748.0%)	51,077	(201,238)	(394.0%)	478,168	160,173	(317,995)	(198.5%)	187,787	(290,381)	(154.6%)
850,099	270,353	(579,746)	(214.4%)	226,178	(623,921)	(275.9%)	4,451,696	1,455,361	(2,996,335)	(205.9%)	1,450,906	(3,000,790)	(206.8%)
122,312	85,084	37,228	43.8%	114,789	7,523	6.6%	712,654	458,027	254,627	55.6%	714,116	(1,461)	(0.2%)
181,875	186,662	(4,787)	(2.6%)	129,614	52,261	40.3%	1,221,449	1,004,851	216,598	21.6%	840,361	381,088	45.3%
19.99%	50.19%			53.78%			24.62%	50.19%		53.28%			
168,598	207,131	(38,533)	(18.6%)	200,342	(31,744)	(15.8%)	916,828	1,242,786	(325,958)	(26.2%)	463,709	453,119	97.7%
-	-	-	0.0%	(162,565)	162,565	(100.0%)	-	-	-	0.0%	74,129	(74,129)	(100.0%)
-	-	-	0.0%	-	-	0.0%	200	-	200	0.0%	-	200	0.0%
168,598	207,131	(38,533)	(18.6%)	37,777	130,822	346.3%	917,028	1,242,786	(325,758)	(26.2%)	537,838	379,190	70.5%
350,473	393,793	(43,320)	(11.0%)	167,390	183,083	109.4%	2,138,477	2,247,637	(109,160)	(4.9%)	1,378,199	760,278	55.2%
<i>Direct Operational Expenses:</i>													
227,427	238,907	11,480	4.8%	229,642	2,215	1.0%	1,379,303	1,403,089	23,786	1.7%	1,355,534	(23,769)	(1.8%)
67,322	68,171	849	1.2%	60,849	(6,473)	(10.6%)	403,296	405,138	1,842	0.5%	377,150	(26,146)	(6.9%)
1,164	2,706	1,542	57.0%	512	(652)	(127.2%)	11,495	39,195	27,700	70.7%	13,963	2,468	17.7%
19,441	14,218	(5,223)	(36.7%)	8,781	(10,660)	(121.4%)	106,057	76,534	(29,523)	(38.6%)	45,132	(60,925)	(135.0%)
3,051	4,302	1,251	29.1%	47	(3,004)	(6,369.9%)	9,879	25,812	15,933	61.7%	941	(8,937)	(949.3%)
2,593	2,150	(443)	(20.6%)	1,029	(1,564)	(152.0%)	12,045	12,900	855	6.6%	3,864	(8,181)	(211.7%)
27,655	28,675	1,020	3.6%	22,410	(5,245)	(23.4%)	140,145	169,117	28,972	17.1%	134,420	(5,725)	(4.3%)
1,654	1,609	(45)	(2.8%)	1,692	38	2.3%	9,763	9,576	(187)	(2.0%)	10,382	618	6.0%
(1,518)	3,935	5,453	138.6%	1,536	3,054	198.8%	13,646	23,610	9,964	42.2%	17,784	4,138	23.3%
88	88	0	0.4%	41	(47)	(115.7%)	526	528	2	0.4%	244	(282)	(115.7%)
348,878	364,761	15,884	4.4%	326,540	(22,337)	(6.8%)	2,086,156	2,165,499	79,343	3.7%	1,959,415	(126,740)	(6.5%)
Net Performance before													
1,596	29,032	(27,436)	(94.5%)	(159,150)	160,746	(101.0%)	52,322	82,138	(29,816)	(36.3%)	(581,216)	633,538	(109.0%)

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

FOR THE SIXTH MONTH ENDED MARCH 31, 2022

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
7,399	9,583	2,184	22.8%	7,342	(57)	(0.8%)	45,079	57,498	12,419	21.6%	43,821	(1,259)	(2.9%)
<i>Overhead Allocations:</i>													
1,037	789	(248)	(31.4%)	628	(410)	(65.3%)	6,670	4,736	(1,934)	(40.8%)	1,948	(4,722)	(242.4%)
26,327	31,278	4,951	15.8%	30,712	4,385	14.3%	142,030	187,667	45,637	24.3%	178,302	36,273	20.3%
232	678	446	65.8%	177	(55)	(31.0%)	1,244	4,071	2,827	69.4%	1,349	105	7.8%
2,775	2,832	57	2.0%	2,002	(773)	(38.6%)	16,402	16,993	590	3.5%	11,084	(5,318)	(48.0%)
6,182	5,929	(253)	(4.3%)	6,271	89	1.4%	34,969	35,572	603	1.7%	30,838	(4,131)	(13.4%)
8,717	8,613	(103)	(1.2%)	10,424	1,707	16.4%	43,609	51,680	8,071	15.6%	46,446	2,837	6.1%
5,579	3,398	(2,182)	(64.2%)	3,650	(1,929)	(52.8%)	13,880	20,386	6,506	31.9%	13,931	51	0.4%
429	626	197	31.5%	1,146	718	62.6%	2,580	3,753	1,173	31.3%	6,295	3,715	59.0%
891	1,255	364	29.0%	1,176	285	24.2%	5,321	7,530	2,209	29.3%	4,905	(416)	(8.5%)
1,266	1,219	(47)	(3.9%)	942	(324)	(34.4%)	6,864	7,315	451	6.2%	5,562	(1,302)	(23.4%)
10,383	10,835	452	4.2%	15,542	5,159	33.2%	70,994	65,010	(5,984)	(9.2%)	67,189	(3,806)	(5.7%)
1,300	1,902	602	31.7%	1,085	(214)	(19.7%)	9,394	11,414	2,019	17.7%	6,297	(3,097)	(49.2%)
9,162	7,128	(2,034)	(28.5%)	4,853	(4,309)	(88.8%)	41,244	42,768	1,524	3.6%	27,022	(14,222)	(52.6%)
8,175	9,633	1,458	15.1%	7,055	(1,120)	(15.9%)	48,011	57,797	9,786	16.9%	39,878	(8,133)	(20.4%)
25,929	24,066	(1,863)	(7.7%)	25,609	(320)	(1.2%)	158,530	144,396	(14,134)	(9.8%)	70,705	(87,825)	(124.2%)
4,192	4,507	315	7.0%	3,660	(532)	(14.5%)	26,324	27,040	716	2.6%	23,695	(2,629)	(11.1%)
747	1,077	331	30.7%	1,369	622	45.4%	4,803	6,465	1,662	25.7%	6,535	1,732	26.5%
1,123	1,779	656	36.9%	1,450	327	22.5%	7,102	10,673	3,571	33.5%	8,555	1,453	17.0%
962	1,084	121	11.2%	882	(80)	(9.1%)	6,233	6,501	269	4.1%	4,936	(1,297)	(26.3%)
1,685	2,109	424	20.1%	1,359	(326)	(24.0%)	9,599	12,655	3,056	24.1%	7,517	(2,082)	(27.7%)
-	-	-	0.0%	79	79	100.0%	-	-	-	0.0%	999	999	100.0%
117,092	120,737	3,645	3.0%	120,070	2,979	2.5%	655,802	724,421	68,619	9.5%	563,988	(91,814)	(16.3%)
473,368	495,081	21,713	4.4%	453,953	(19,415)	(4.3%)	2,787,037	2,947,418	160,381	5.4%	2,567,224	(219,813)	(8.6%)
\$ (122,895)	\$ (101,288)	\$ (21,607)	21.3%	\$ (286,563)	\$ 163,667	(57.1%)	\$ (648,560)	\$ (699,781)	\$ 51,221	(7.3%)	\$ (1,189,025)	\$ 540,465	(45.5%)
-	5,000	5,000	100.0%	-	-	0.0%	-	110,000	110,000	100.0%	-	-	0.0%
\$ -	\$ 96,704	\$ 96,704	100.0%	\$ -	\$ -	0.0%	\$ -	\$ 752,278	\$ 752,278	100.0%	\$ 1,113,123	\$ 1,113,123	100.0%

Clinic Visits - Adults and Pediatrics	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
	West Palm Beach	1,394	1,108	1,197	1,288	1,315	1,515							7,817	9,426	(17.1%)
Delray	477	563	541	473	500	631							3,185	7,159	(55.5%)	5,014
Lantana	1,821	1,554	1,450	1,408	1,721	1,764							9,718	9,099	6.8%	8,891
Belle Glade	691	610	688	648	692	835							4,164	5,155	(19.2%)	3,334
Lewis Center	488	507	432	245	358	286							2,316	1,454	59.3%	4,331
Lake Worth & Women's Health Care	1,334	1,119	1,180	1,054	1,223	1,270							7,180	7,850	(8.5%)	6,289
Jupiter Clinic	447	410	438	494	485	554							2,828	2,835	(0.2%)	3,110
West Boca & Women's Health Care	407	305	366	407	392	356							2,233	5,106	(56.3%)	4,300
St Ann Place	-	-	44	96	53	71							264	291	(9.3%)	-
Clb Mob 1 Warrior	658	1,415	941	169	23	33							3,239	944	243.1%	17
Clb Mob 2 Scout	416	365	756	575	426	200							2,738	522	424.5%	-
Clb Mob 3 Hero	178	331	2,467	1,955	39	20							4,990	522	855.9%	-
Mangonia Park	128	197	272	196	162	285							1,240	2,488	(50.2%)	1,592
Total Clinic Visits	8,439	8,484	10,772	9,008	7,389	7,820	-	-	-	-	-	-	51,912	52,560	(1.2%)	42,936
Dental Visits																
West Palm Beach	736	762	831	776	754	864							4,723	4,775	(1.1%)	1,738
Lantana	708	891	1,032	774	953	1,018							5,376	3,592	49.7%	2,797
Delray	439	391	373	415	400	536							2,554	3,326	(23.2%)	-
Belle Glade	338	357	340	331	406	417							2,189	1,722	27.1%	2
Lake Worth	-	-	-	-	-	-							-	-	0.0%	-
West Boca	-	-	-	-	-	-							-	-	0.0%	-
Total Dental Visits	2,221	2,401	2,576	2,296	2,513	2,835	-	-	-	-	-	-	14,842	13,415	10.6%	4,537
Total Medical and Dental Visits	10,660	10,885	13,348	11,304	9,902	10,655	-	-	-	-	-	-	66,754	65,975	1.2%	47,473
Mental Health Counselors (non-billable)																
West Palm Beach	103	106	103	117	144	303							876	875	0.1%	3
Delray	69	114	135	136	143	205							802	709	13.1%	129
Lantana	-	-	-	-	-	-							-	2,947	(100.0%)	39
Belle Glade	71	81	86	81	51	128							498	345	44.3%	141
Mangonia Park	511	320	326	403	458	404							2,422	442	448.0%	1,618
Lewis Center	866	787	845	907	890	927							5,222	1,263	313.5%	3,458
Lake Worth	179	162	120	184	170	227							1,042	936	11.3%	13
Jupiter	-	-	-	-	-	-							-	-	0.0%	-
West Boca	-	-	-	-	-	-							-	-	0.0%	-
Mobile Van	-	-	-	-	-	-							-	517	(100.0%)	-
Total Mental Health Screenings	1,799	1,570	1,615	1,828	1,856	2,194	-	-	-	-	-	-	10,862	8,034	35.2%	5,401
GRAND TOTAL	12,459	12,455	14,963	13,132	11,758	12,849	-	-	-	-	-	-	51,912	52,560	(1.2%)	42,936

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

1. Description: Election of Officers and Committee Appointments

2. Summary:

This agenda item presents the annual election of Officers and Committee Appointments.

3. Substantive Analysis:

The Clinic Bylaws require the Officers of the Board to be elected each year. This agenda item presents the current Officers of the Board as well as the current Committee Appointments. The Clinic Bylaws only permit someone to hold a specific officer position for two consecutive terms. Officers in their second term are not permitted to hold the same Officer Position for another term. However, they can hold other Officer Positions. This year's Election of Officers, the Board will need to elect a new Chairperson and a new Vice-Chairperson. Committee appointments do not have limits on how long a Board Member can serve on a committee.

The current Officers of the Board are:

Chairperson

Michael Smith (Second Term)

Vice-Chairperson

Melissa Mastrangelo (Second Term)

Secretary

Julia Bullard (First Term)

Treasurer

Joe Gibbons (First Term)

The current Committee Appointments are:

Finance Committee:

James Elder
Michael Smith
Tammy Jackson-Moore

Planning Committee:

All Board Members

Membership / Nominating Committee:

John Casey Mullen
Irene Figueroa

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

 Candice Abbott
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

 Date Approved

6. Recommendation:

Staff recommends the Board Elect Officers and appoint Committee Membership/Designations.

Approved for Legal sufficiency:

Bernabe Icaza

 Bernabe A. Icaza
 VP & General Counsel

Thomas W Cleare

 Thomas Cleare
 AVP of Planning & Community Engagement

Hyla Fritsch

 Dr. Hyla Fritsch
 AVP & Executive Director of Clinics and
 Pharmacy Services

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

1. Description: Executive Director Informational Update

2. Summary:

FY 2022 ARP-UDS+ supplemental funding for H8F recipients

2022 National Health Care for the Homeless Council Conference

3. Substantive Analysis:

FY 2022 ARP-UDS+ supplemental funding for H8F recipients

We have an opportunity to apply for an additional \$60,000 in funding from the American Rescue Plan grant. Our application was submitted prior to the May 23rd deadline. The intention is to use this additional funding to offset some of the increased expenses of our video language translation service.

2022 National Health Care for the Homeless Council Conference

Earlier this month, our team attended the 2022 National Health Care for the Homeless Council Conference in Seattle, Washington. Team members were able to attend educational and networking sessions centering around the many issues that face the homeless population when accessing safe and equitable health care and medical respite programs. Pre-conference Institute and breakout sessions included *Medical Respite: A Bridge to Community and Belonging*, *Providing On-Demand Medical Services Using Mobile Teams*, and *Engaging Same-Day Peer Ambassadors in Unsheltered Settings*, *Designing the Medical Respite Space: A Trauma-Informed Approach to a Healing Environment*, among many other informative and engaging topics.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

 Candice Abbott
 VP & Chief Financial Officer

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

5. Reviewed/Approved by Committee:

N/A	
Committee Name	Date Approved

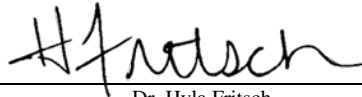
6. Recommendation:

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

Approved for Legal sufficiency:



Bernabe Icaza
VP & General Counsel



Dr. Hyla Fritsch
AVP & Executive Director of Pharmacy & Clinic
Services

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

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
Taheri	Nergess	DO	Family Medicine	Initial Credentialing
Chibar	Charmaine	MD	Pediatrics	Recredentialing
Ferwerda	Ana	MD	Obstetrics & Gynecology	Recredentialing
Perez	Daniel	MD	Family Medicine	Recredentialing
Zangeneh	Yasmine	DMD	Pediatric Dentistry	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.

Nergess Taheri, DO, joined the Belle Glade Clinic in 2022, specializing in Family Medicine. She attended Nova Southeastern University College of Osteopathic Medicine and completed her Residency at Lakeside Medical Center. Dr. Taheri has been in practice for two years.

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

Charmaine Chibar, MD, joined the West Palm Beach Clinic in 2020, specializing in Pediatric Medicine. She attended the Emory University School of Medicine and completed her Residency at the University of South Florida. Dr. Chibar is certified in Pediatric Medicine by The American Board of Pediatrics. She has been in practice for eighteen years.

Ana Ferwerda, MD, joined the Lake Worth Clinic in 2016, specializing in Obstetrics and Gynecology. She attended the Ponce School of Medicine and Health Sciences and completed her Residency at Allegheny General Hospital. Dr. Ferwerda is certified in Obstetrics and Gynecology by the American Board of Obstetrics and Gynecology. She has been in practice for seven years and is fluent in Spanish.

Daniel Perez, MD, joined the Lake Worth Clinic in 2016, specializing in Family Medicine. He attended the Higher Institute of Medicine Santiago and completed his Residency at Dr. Pila’s Hospital. Dr. Perez is certified in Family Medicine by the American Board of Family Medicine. He has been in practice for thirteen years and is fluent in Spanish.

Yasmine Zangeneh, MD, joined the Lantana Clinic in 2018, specializing in Pediatric Dentistry. She attended the University of Florida and completed her Residency at the University of Rochester. Dr. Zangeneh is certified in Pediatric Dentistry by The American Board of Pediatric Dentistry. She has been in practice for eleven years and is fluent in Farsi.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

 Candice Abbott
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

 Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

6. Recommendation:

Staff recommends the Board approve the Initial Credentialing and privileging of Nergess Taheri, DO, Family Medicine.

Staff recommends the Board approve the Recredentialing and privileging of Dr. Charmaine Chibar, MD, Pediatric Medicine.

Staff recommends the Board approve the Recredentialing and privileging of Dr. Ana Ferwerda, MD, Obstetrics and Gynecology.

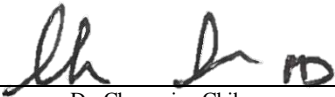
Staff recommends the Board approve the Recredentialing and privileging of Dr. Daniel Perez, MD, Family Medicine.

Staff recommends the Board approve the Recredentialing and privileging of Dr. Yasmine Zangeneh, DMD, Pediatric Dentistry.

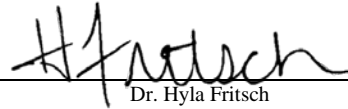
Approved for Legal sufficiency:



Bernabe Icaza
VP & General Counsel



Dr. Charmaine Chibar
FQHC Medical Director



Dr. Hyla Fritsch
AVP & Executive Director of Clinics and
Pharmacy Services

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

1. Description: Quality Report

2. Summary:

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

- Quality Council Meeting Minutes May 2022
- UDS Report – YTD
- Provider Productivity – April 2022
-

3. Substantive Analysis:

PATIENT SAFETY & ADVERSE EVENTS

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

PATIENT SATISFACTION AND GRIEVANCES

Patient relations to be presented as a separate agenda item.

QUALITY ASSURANCE & IMPROVEMENT

- **PDCAs:** We have implemented updates to the following PDCAs to improve the quality of care that we provide to our patients.
 - Communication
 - Improve Patient Access
 - Referrals
 - Communicating Delays
 - Whole Person care
- **Chronic Disease Management / Care Plan Outbound Campaign:** In April 2022, the Clinic Service center contacted patients in an effort to get them into the clinic for a follow-up appointment to create care plans as part of their chronic disease management.

UTILIZATION OF HEALTH CENTER SERVICES

Individual monthly provider productivity is stratified by clinic.

4. Fiscal Analysis & Economic Impact Statement:

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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Candice Abbott
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date Approved

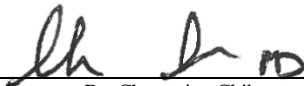
6. Recommendation:

Staff recommends the Board approve the updated Quality Report.

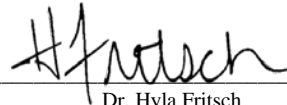
Approved for Legal sufficiency:



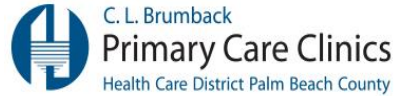
Bernabe Icaza
VP & General Counsel



Dr. Charmaine Chibar
FQHC Medical Director



Dr. Hyla Fritsch
AVP & Executive Director of Clinic and
Pharmacy Services



Quality Council Meeting Minutes

Date: May 3, 2022

Time: 9:00AM – 11:00AM

Attendees: Andrea Steele – Executive Director of Corporate Quality; Maria Chamberlin – Nurse Manager; Dr. Sandra Warren – Associate Medical Director; Alexa Goodwin – Patient Relations Manager; Marisol Miranda – Director of Clinic Operations, Dr. Courtney Phillips - Director of Behavioral Health; Jonathan Dominique – Clinic Quality Analyst; Dr. Charmaine Chibar – FQHC Medical Director; Dr. Courtney Phillips - Director of Behavioral Health; Dr. Valena Grbic, Medical Director, District Cares; Nancy Gonzalez – Dental Manager;

Excused: Shauniel Brown – Senior Risk Manager; Dr. John Cucuras – FQHC Dental Director; Irene Garcia – Dental Quality Coordinator; Belma Andric – Chief Medical Officer; Dr. Hyla Fritsch – AVP, Executive Director of Clinic Operations & Pharmacy Services; David Speciale – Patient Experience Director; Carolina Foksinski, Operations Process Manager;

Minutes by: Jonathan Dominique

<u>AGENDA ITEM</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSI BLE PARTY</u>	<u>DATE</u>
UTILIZATION				
OPERATIONS	<p><u>Productivity</u> In April, the number of patients seen did decrease. The number of Unique patients went down by approximately 600 and the number of visits was down by over 1300. This is possibly due to spring break taking place with patients and providers taking in the holiday. PEDS decreased by 254, while Adult visits decreased by approximately 1,000 visits. There was a total of 10,827 visits 7,321 unique patients. Our payer mix remains about the same 57% uninsured, 36% for managed care, 5% for Medicaid, and the rest going to Medicare. Jupiter and Lake worth are the only clinic sites that met the target for adults. Women’s health in Lake worth is at target while Belle Glade is at 85%. Pediatrics is at target in both Lantana and West Palm Beach. There are some questions about behavioral health numbers, which Marisol will validate. <i>(Clinic productivity report with graphs were presented.)</i></p>			

	<p><u>Patient Demographics</u></p> <table border="1"> <tr> <td colspan="2" style="text-align: center;"><u>Race</u></td> </tr> <tr> <td>White</td> <td>50%</td> </tr> <tr> <td>Black or African American</td> <td>40%</td> </tr> <tr> <td colspan="2" style="text-align: center;"><u>Ethnicity</u></td> </tr> <tr> <td>Hispanic or Latino</td> <td>41%</td> </tr> <tr> <td>Not Hispanic or Latino</td> <td>59%</td> </tr> <tr> <td colspan="2" style="text-align: center;"><u>Language</u></td> </tr> <tr> <td>English</td> <td>50%</td> </tr> <tr> <td>Spanish</td> <td>32%</td> </tr> <tr> <td>Creole</td> <td>18%</td> </tr> <tr> <td colspan="2" style="text-align: center;"><u>Agricultural</u></td> </tr> <tr> <td>Yes</td> <td>4%</td> </tr> <tr> <td>No</td> <td>96%</td> </tr> <tr> <td colspan="2" style="text-align: center;"><u>Homeless</u></td> </tr> <tr> <td>Yes</td> <td>19%</td> </tr> <tr> <td>No</td> <td>81%</td> </tr> <tr> <td colspan="2" style="text-align: center;"><u>Sex</u></td> </tr> <tr> <td>Male</td> <td>40%</td> </tr> <tr> <td>Female</td> <td>60%</td> </tr> <tr> <td>Unknown</td> <td>0%</td> </tr> <tr> <td colspan="2" style="text-align: center;"><u>Gender</u></td> </tr> <tr> <td>Male</td> <td>40%</td> </tr> <tr> <td>Female</td> <td>60%</td> </tr> <tr> <td>Choose Not to Disclose</td> <td>0%</td> </tr> <tr> <td>Other</td> <td>0%</td> </tr> </table>	<u>Race</u>		White	50%	Black or African American	40%	<u>Ethnicity</u>		Hispanic or Latino	41%	Not Hispanic or Latino	59%	<u>Language</u>		English	50%	Spanish	32%	Creole	18%	<u>Agricultural</u>		Yes	4%	No	96%	<u>Homeless</u>		Yes	19%	No	81%	<u>Sex</u>		Male	40%	Female	60%	Unknown	0%	<u>Gender</u>		Male	40%	Female	60%	Choose Not to Disclose	0%	Other	0%			
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	<p><u>Walk-ins</u> Medical Scheduled Encounters 80% Walk-ins 20%</p> <p>Dental Scheduled Encounters 77% Walk-ins 23%</p>			
	<p><u>No Show Rates</u> No Show rates are trending downward and are at 16%, down 11% from last year.</p> <p>(Report with graph presented.)</p>			
PATIENT RELATIONS				
GRIEVANCES, COMPLAINTS & COMPLIMENTS	<p><u>Patient Relations Dashboard</u> For March 2022, 17 Patient Relations Occurrences occurred between 4 Clinics and Clinic Administration. Of the 17 occurrences, there were 4 Grievances and 13 Complaints. The top 5 categories were Physician Related, Care & Treatment, Finance, Referral Related and Respect Related issues. The top subcategories with 3 Complaints and Grievances were Physician Related Communication, followed by Lack of Continuity of Care, Billing Issues and All Aspects of Care, with 2 occurrences in each. There were also 105 compliments received across 6 Clinics and Clinic Administration.</p>			

	<i>(Patient Relations Report & Patient Relations Dashboard with Graphs presented.)</i>			
SURVEY RESULTS	<p><u>Patient Satisfaction Survey – March 2022</u></p> <p>For March 2022, there were 447 surveys completed which is a 6% increase from the previous month. The top 5 and lowest 5 questions and scores are presented. Of the surveys completed, 76% of the surveys were scored as Excellent /Very Good (Promoters) and 10% of the surveys were scored as Fair/Poor (Detractors). Surveys were completed by 64% Females, 35% Male, and 1% Chose not to disclose. Patients prefer to be seen in the mornings at the beginning of the week. Patients completed most surveys (38%) after their first visit to the practice. Lake Worth, West Palm, and Lantana Primary Care received the most surveys. Opportunities for improvement include questions related to the “Appointment” and “Communication” Sections of the survey. A breakdown of each of these sections presented by the clinic, including the number of surveys received and % of which were scored as “detractors.” The 5 lowest scored questions were:</p> <ul style="list-style-type: none"> • Waiting time in the reception area • Being informed about delays during the visit • Waiting time in the exam room • Ability to contact us after hours • Phone calls being answered promptly 	<p>Alexa to inquire about the decisions behind Phreesia benchmark scores (i.e., Practice size 1-10, 11+, etc.).</p> <p>Alexa to follow up with Monica on using the Data warehouse to find some patients that are somewhat difficult to track due to a lack of identifiers.</p>	<p>Alexa</p> <p>Alexa</p>	<p>6/7/22</p> <p>6/7/22</p>

	<p>Breakdown of scores; Benchmarks with like organizations and Patient Comments by Clinic / Department presented. PDCA's are being implemented to improve scores for 2022.</p> <p>Trends over time were reported for Q1 2022, including overall scores, results by section, and trends on low-scoring questions.</p> <p><i>(Patient Satisfaction Survey PowerPoint presented.)</i></p>		David Speciale	
PDCA's	<p><u>Communication</u> This PDCA was updated in April 2022 (org. 2/1/2020) to reflect current operations and inventions to address and improve communication between Patients, Clinicians, and Team Members. Throughout the pandemic and resuming of services, communication between Patients, Providers, and Team Members has been measured through patient surveys and patient relations. Many new technologies have improved communication, including Phressia, Language Line, ScribeX, and SnapComm. Overall, Patient complaints related to communications have decreased significantly since 2020.</p> <p><u>Improve Patient Access</u> This PDCA was updated in April 2022 (org. 2/1/2020) to reflect current operations and inventions to address and improve Patient Access. This includes optimizing EPIC and Phreesia to reduce Patient Cycle Times and reduce the Next third Available. The onboarding of new providers and the use of scribes are expected to improve this data throughout the year. The Women Health template is being revised to add same-day appointment slots.</p>			

	<p><u>Referrals</u> This PDCA was updated in April 2022 (org. 2/1/2020) to reflect current operations and inventions to address and improve Referrals. This includes the restructuring of the department, interventions to optimize EPIC, and the creation of dashboards to monitor the progress of the Referral Team and provider referral rates. As Epic continues to be optimized, we expect to see further improvements to the overall referral process and patient experience.</p> <p><u>Communicating Delays</u> On February 2, 2022, this PDCA was created to improve the patient satisfaction survey scores for the question, “being informed about delays in this visit,” which was amongst the “Worst 5 Questions” on the Phressia survey. Site visits were conducted at the WPB clinic to observe staff and optimize the EMR. SOP was created to improve this measure and to be presented in the workgroup. Once implemented, survey data will be reviewed to see if interventions were effective.</p> <p><u>Whole Person Care</u> The next step in developing this PDCA is to marry the data from Unite Us with SDOH data pulled from EPIC. We have data concerning Unite Us referrals and SDOH reports. Still, we do not have anything truly ‘useful.’ The solution to this problem is integrating the Unite Us platform in the EPIC EHR. We were recently informed by Unite Us team members that though it has been delayed, they are in the process of working out this integration with the EPIC team. With this integration, we will be able to create cases, bidirectional referral functionality, and track outcomes from EPIC. But the most exciting part is that we</p>	<p>Jonathan to look into Unite Us growth and SDOH Referral Reports. Will report as more information comes in.</p>	<p>Jonathan</p>	
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	<p>will be able to automatically create clients in EPIC, thereby directly tying Positive SDOH screenings in the EHR with Subsequent Unite Us referrals.</p> <p>Dr. Warren pointed out that now, in the behavioral health referral, you can indicate the reason for said referral. SDOH as a reason for referral is one of the options. How Many SDOH Positives saw a BH and how many had referrals to address that Positive? As there are options outside of Unite Us.</p>			
<p>OUTBOUND CALL CAMPAIGNS</p>	<p><u>Provider Reschedules</u> In April 2022, the Clinic Service Center contacted 647 patients to reschedule their appointment. This was due to provider PTO, provider resignation, provider location changes and provider unavailable. This was a 17% decrease from the previous month when we rescheduled 783 patients.</p> <p><u>Chronic Disease Management (CDM) /Care Plan Campaign</u> In April 2022, the Clinic Service Center contacted 55 patients to get them into the clinic for a follow-up appointment to create Care Plans. Of the 55 patients, 11 patients (20%) were scheduled for an appointment.</p> <p><u>After Hours Call Return Summary Report – April & Trends Over Time</u> In April 2022, the Clinic Service Center returned 170 calls from the After-Hours service. This was a 16% decrease from the previous month. After-hours calls by Type, by clinic, and by department presented. Of the 170 after-</p>			

	<p>hours calls received, 21% were a request for an appointment. Trends over time were reported.</p> <p><u>Hospital Follow Up Scheduling Campaign - March 2022</u> The Clinic Service Center contacted 338 Managed Care patients that required a Hospital Follow Up appointment. This was a 28% increase from the previous month. Of the 338 patients, 24% were either seen or scheduled to be seen by their clinic PCP at the time of the outreach. 50% of the patients had Sunshine as their payor.</p> <p>Andrea informed Alexa that the business unit is about to start a pilot for the Health Information Exchange (HIE) with our chronic disease management patients (approx. 200 patients). If these patients have insurance, the CSC staff will not have to place an outbound call if the nurses will have already addressed it. This is a slight process change that will only require that they check that the patient was contacted before reaching out.</p> <p><u>Hospital Follow Up Trends & Reconciliation</u> The Clinic Service Center reconciled hospital follow-up appointments between January 2022 and March 2022. The average of outreach activities for these three months are:</p> <ul style="list-style-type: none"> • 5% of Patients have a Future Appointment • 17% of Patients were Loss to Follow Up • 19% of Patients Attended Appointment • 60% of Patients Did not Attend an Appointment <p>Breakdown by month and trends over time presented.</p> <p><i>(Outbound Campaign PowerPoint presented.)</i></p>			
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<p>NEXT THIRD AVAILABLE</p>	<p>The Next Third Available report for April 2022 was presented by the Clinic location and included all Departments associated with that clinic. The report excludes “same day” appointment slots available for each clinic. The clinics with the greatest Next Third Available are Woman’s Health Belle Glade, Women’s Health Lake Worth, Lake Worth Primary Care and West Palm Beach Primary Care. Some clinics have extended Third Next Available appointments because a covering provider is scheduled for that location at a future date.</p> <p>Trends over time were also presented for each clinic. Data indicates that Third Next Available for Primary Care is the highest at the Boca, Delray, Jupiter, Lake Worth, Lantana, West Palm Beach Clinics and the lowest in the Belle Glade, Lewis Center, Mangonia Park, and Mobile Clinics. Note that future staff coverages are outliers in some clinics. The third next available is expected to improve as providers are onboarded.</p> <p>Corrective actions include hiring and additional onboarding providers for Primary Care. Also, Clinic Operations has proposed a new Women’s Health template that incorporates “Same Day” appointment slots. These templates are pending final approval. Spikes in the data are attributed to Provider coverage and schedules at other clinics. Some improvements need to be made to the report with the BI team.</p>	<p>Work with the BI team to improve the next third report so that covering providers and providers no longer with the organization are removed from the report.</p>	<p>David</p>	
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	<p>There is some concern with Lake Worth being so high, but this is probably due to providers moving around and covering.</p> <p><i>(Third Next Available PowerPoint presented.)</i></p>						
QUALITY							
QUALITY AUDITS							
MEDICAL	<p>Hemoglobin A1C/Point of Care Testing</p> <p>Shows: The diabetes measure data for January-March 2022 shows that our patients are currently controlled at 68 %, while 22 % are uncontrolled (from 2406 diabetic patients total) and 9% of patients need data. HRSA’s goal is to have 67% of patients with controlled diabetes. There were 1710 POC A1Cs done (71% of Diabetic Patients). There was a similar percentage of A1c POC testing done in the previous month. The majority of controlled patients had 73.8%, and in uncontrolled 93% of patients had the A1c done at POC vs. lab. Boca Clinic (16%), West Palm Clinic (11%), and Lake Worth Clinic (10%) - have the highest percentage of untested patients in March. 228 patients did not have data, 74% had already a future appointment, and 26% of patients did not have a scheduled future appointment. Less than 1% had telemedicine appointments set.</p>						
	<p>Colorectal Cancer Screening</p> <table border="1" data-bbox="384 1307 1108 1414"> <tr> <td data-bbox="384 1307 625 1414"> Colorectal cancer screening YTD - MAR 2022 </td> <td data-bbox="625 1307 751 1414" style="background-color: #d9ead3;">Satisfied</td> <td data-bbox="751 1307 1108 1414" style="background-color: #f4cccc;">Needs Data</td> </tr> </table>	Colorectal cancer screening YTD - MAR 2022	Satisfied	Needs Data			
Colorectal cancer screening YTD - MAR 2022	Satisfied	Needs Data					

Clinics	Eligible Population		# Patients with FIT Test Ordered	# Missed Patients
Belle Glade	766	213 28%	399 52%	154 20%
Boca	376	145 39%	164 44%	67 18%
Delray Beach	652	183 28%	407 62%	62 10%
Jupiter	439	98 22%	156 36%	185 42%
Lake Worth	767	202 26%	416 54%	149 19%
Lantana	778	241 31%	389 50%	148 19%
Lewis Center	122	12 10%	92 75%	18 15%
Mangonia Park	42	3 7%	26 62%	13 31%
Mobile	3	0 0%	0 0%	3 100%
West Palm Beach	873	213 24%	512 59%	148 17%
Total		1311	2569 53%	963 20%
		27%	3532	73%

Satisfied: 1311 (27%)

Needs Data: 3532 (73%)

All clinics have improved their Colorectal cancer screening metrics. The number of patients not met is down to 73% from 76% last month.

Dr. Warren to follow up with the Providers with “Missed patients” and provide re-education.

<p><u>Cervical Cancer Screening</u> Satisfied: 1865 (35%) Needs Data: 3,428 (65%)</p> <p>67% (2289) of patients that have not met the requirements have been scheduled for a future appointment. Dr. Phillips suggested that the rescheduled patients should be notified ahead of time that they will possibly be screened that day and come prepared accordingly, as sometimes, when the patients are not mentally prepared, they are more hesitant to be screened.</p>	<p>Dr. Warren plans to use the list of providers with the highest concentration of patients not met to provide re-education / find better ways of improving the metric. Admin will also consider pre-visit notification informing patients of possible screening.</p>			
<p><u>Breast Cancer Screening</u> Satisfied screenings – 1329 (49)% Unsatisfied Screenings – 1396 (51)%</p> <ul style="list-style-type: none"> • Not Met with order – 36% • Not Met (Patient Missed) – 15% <p>Jan-Mar: Satisfaction improved from 48%- to 49%, while the number of patients not met with order increased from 31%-36%The number of patients who were short, however, Decreased from 21%-15%. 86% of the patients missing data / not met have been scheduled a future appointment with primary care.</p>				
<p><u>FIT Test</u> It appears that Fit tests are not being returned as expected. Our highest return rates were at Belle Glade Clinic (46%), Lantana Clinic (39%), and Jupiter Clinic (28%).</p>				

	<p>Belle Glade, Lantana and West Palm lead the charge in Point of Care FIT Tests. There has also been an increase in the number of fit tests returned overall by more than 5%. Dr. warren introduced Jasmine, the outcomes champion for Fit Tests.</p> <p>(Report with graph presented.)</p>			
DENTAL	<p><u>Dental Sealants</u></p> <p>92% (n=198) [Jan-Dec 2022]</p> <p>92% March 2022</p>			
	<p>Same Day Extractions (Limited Exams)</p> <p>Limited Exams (n= 438)</p> <p>Same Day Extractions: 235 (54% n=438)</p> <p>Returns (Follow-Up): Patients with a future extraction appointment type– 38 (9% n=438)</p> <p>Returned within 21 days for extraction</p> <p>28 (74% n=38)</p> <p>Antibiotics Given: Patients without a future extraction appointment type</p> <p>100 (23% n=438)</p> <p>Extraction not needed: non-emergent</p> <p>60 (14% n=438)</p>			
	<p>MDI/WHO – March 2022</p> <p>– Total Pediatric Patients 258</p>			

	<ul style="list-style-type: none"> ○ Excluded from MDI 100 (39%) ○ No MDI 16 (10%); ○ MDI 142 (90%) <p>– Total Well visit 258</p> <ul style="list-style-type: none"> ○ Excluded from MDI 100 (39%) had dental home ○ No MDI 16 (10% n=158) ○ MDI 142 (90% n=158) <ul style="list-style-type: none"> ▪ WHO 77 (54% n=142) <p>No WHO 65 (46% n=142)</p>															
	<p>Dental Clinic Audit Summary</p> <table border="1" data-bbox="394 675 1096 959"> <thead> <tr> <th colspan="2">Dental Clinic Audit-March 2022</th> </tr> </thead> <tbody> <tr> <td>Belle Glade</td> <td>96%</td> </tr> <tr> <td>Delray</td> <td>94%</td> </tr> <tr> <td>Lantana</td> <td>96%</td> </tr> <tr> <td>West Palm Beach</td> <td>95%</td> </tr> </tbody> </table>	Dental Clinic Audit-March 2022		Belle Glade	96%	Delray	94%	Lantana	96%	West Palm Beach	95%					
Dental Clinic Audit-March 2022																
Belle Glade	96%															
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<p>WOMEN'S HEALTH</p>	<p><u>Prenatal Age</u></p> <table border="1" data-bbox="485 1154 1003 1406"> <thead> <tr> <th colspan="2">Jan – March 2022</th> </tr> <tr> <th>Age</th> <th>Number of Patients</th> </tr> </thead> <tbody> <tr> <td>Less than 15 Years</td> <td>0</td> </tr> <tr> <td>Ages 15-19</td> <td>2</td> </tr> <tr> <td>Ages 20-24</td> <td>34</td> </tr> <tr> <td>Ages 25-44</td> <td>104</td> </tr> </tbody> </table>	Jan – March 2022		Age	Number of Patients	Less than 15 Years	0	Ages 15-19	2	Ages 20-24	34	Ages 25-44	104	<p>There appears to be an error on the backend. The entire section that would allow for the population of the prenatal episode has been removed, resulting in a lack of documentation for certain required fields that would then count for the patient census. As a result, the patients that have entered into care</p>	<p>Dr. Chibar / Andrea</p>	<p>6/7/22</p>
Jan – March 2022																
Age	Number of Patients															
Less than 15 Years	0															
Ages 15-19	2															
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	<table border="1" data-bbox="487 233 1003 315"> <tr> <td>Ages 45 and Over</td> <td>0</td> </tr> <tr> <td>Total</td> <td>140</td> </tr> </table> <p>(Report with graph presented.)</p> <p>Entry into Care 140 women entered into care in the month of Jan-MAR.</p> <p>65 - Entered into Care in the First trimester 62 - Entered into care in the second trimester 13 - Entered into care in the third trimester</p> <p>135 - Entered into Care with the C.L. Brumback Primary care Clinics 5 - Had her first visit with another provider 0 - Had initial provider not recorded.</p> <p>(Report with graph presented.)</p>	Ages 45 and Over	0	Total	140	<p>have not been counted and the data remains the same from last month. EPIC team is in the process of bringing the fields back while navigating dependency on another report that is having issues—meeting is scheduled to rectify the situation and solidify which fields are required. I will update next month.</p>		
Ages 45 and Over	0							
Total	140							
	<p>Deliveries & Birthweights 18 Deliveries in March.</p> <ul style="list-style-type: none"> - (<1500 grams) – 1 - (1500-2499 grams) – 0 - (>2500 grams) –17 <p>(Report with graph presented.)</p>							
	<p>HPV YTD (Mar 22) = 751</p> <p>Patients 9-18 seen previously and vaccinated with HPV vaccine or have refusal form (219 29%)</p> <p>Patients 9-18 seen with no HPV vaccine and No refusal consent (261 35%)</p>	<p>Dr. Chibar to follow up to verify data to scope discrepancies.</p>	<p>Dr. Chibar</p>					

	<p>Patients 9-18 vaccinated with HPV Vaccine Jan-Mar 2022 (271 36%)</p> <table border="1" data-bbox="436 342 993 428"> <thead> <tr> <th>Dose 1</th> <th>Dose 2</th> <th>Dose 3</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>224</td> <td>41</td> <td>6</td> <td>271</td> </tr> </tbody> </table>	Dose 1	Dose 2	Dose 3	Total	224	41	6	271			
Dose 1	Dose 2	Dose 3	Total									
224	41	6	271									
<p>BEHAVIORAL HEALTH</p>	<p><u>Cage-Aid:</u> Around n= 11,010 performed Jan-Mar 22.</p> <ul style="list-style-type: none"> – Positive – 767 – Negative – 9,611 – Cage Never Performed – 632 <p>Last Alcohol Use Screening</p> <ul style="list-style-type: none"> – Last screening Performed in 2021 – 41% – Last screening Performed in 2022 – 55% – No Alcohol Screening – 4% <p>(Report with graph presented.)</p>											
	<p><u>SBIRT:</u> SBIRT numbers have not lived up to the standards set by the clinic admin team. Dr. Phillips has suggested an approach to Provider education (video) to emphasize organizational importance while also investigating the possibility that the EHR is not correctly reporting SBIRTS dropping. Once, there was an error with the billing codes – that issue appears to have since been resolved.</p>			<p>3/1/22</p>								

	<p><u>PHQ 2/9</u> Total encounters with PHQ2/9: 5,844 10.4% positive rate based on >10, or 1 or above, (n=607). The number of patients without a future BHC appointment after screening positive has drastically improved over the last year. Dr. Phillips expects a continuous improvement in this metric.</p>			
<p>NURSING</p>	<p><u>Higher Level of Care</u> 65 ER referrals/64 patients were sent to the ER in March. The breakdown of the referrals is as follows: WH- 11 (17%) Peds- 18 (28%) Adult- 34 (52%) Adult Crisis- 1 (1.5%) Dental- 1 (1.5%)</p> <p>There were 2 patients with multiple orders in March. Upon review of the chart, the duplicate referrals were appropriate.</p> <p>Dr. Clarke's first referral was a new patient visit where 10 year old had pain with respirations x3 days. Fever in the clinic; congestion- HLC referral to R/O pneumonia.</p> <p>The second referral was also Dr. Clarke- 2 days later. Patient in for hospital follow-up. CXR was normal at the hospital, and no labs were performed. Cough at visit/wheezing and intense pain continued.</p>			

<p>Following up by a Nurse in the clinic and a Nurse monitoring, the HLC WQ was complete. Follow-up appt canceled due to the patient having private insurance.</p> <p>CRISIS STABILIZATION- The crisis stabilization referral was initiated by Mangonia clinic.</p> <p>ADULT REFERRALS- Dr. Florez WPB was the top producer of adult referrals for February, with 9 of the 43 adult referrals (21%).</p> <p>HOSPITAL REFERRAL- These are from the WH department</p> <p>PEDS REFERRALS- the highest producer was Dr. Clarke</p> <ul style="list-style-type: none"> – 12 of the 18 (68%) peds referrals were from Dr. Clarke – 2 of the 18 (11%) from Dr. Marzouca – 2 of the 18 (11%) from Dr. Lazaro – 1 of the 18 (5%) from Dr. Dessalines – 1 of the 18 (5%) from Dr. Normil-Smith <p>The incorrect referral type was used one time for a pediatric referral—an improvement from February.</p> <p>URGENT CARE/ER REFERRAL- An audit was done on this referral type. Rebecca Koopman, William Draper, Dr. Alwehaib, Dr. Puentes and Dr. Ferwerda utilized this referral type instead of the Emergency Medicine Referral. Providers to be reminded this referral type is for after-hours referrals to HLC.</p>			
QUALITY METRICS			

UDS March 2022

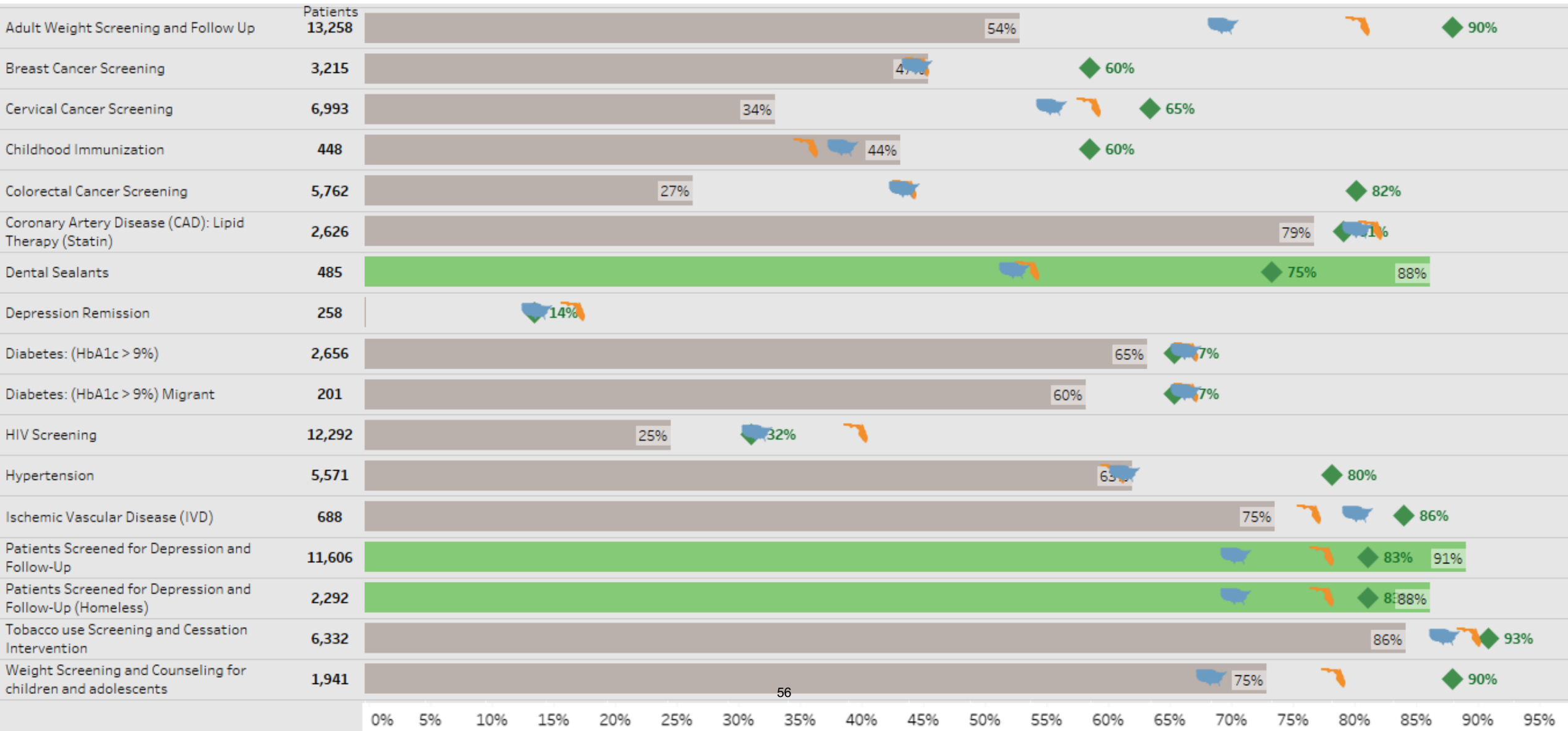
Of the 16 UDS Measures: 3 Exceeded the HRSA Goal and 16 were short of the HRSA Goal (*Clinic Score/ HRSA Goal / Healthy People Goal*)

Medical UDS Report	Adult Weight screening and follow up: (53% / 90%)			
	Breast Cancer Screening: (49%/60%)			
	Cervical Cancer Screening: (34% /65%)			
	Childhood immunization: (45%/ 60%)			
	Colorectal Cancer Screening: (27% / 82%)			
	Coronary Artery Disease CAD: (78% / 81%)			
	Dental Sealants: (89% / 75%)			
	Depression Remission: (0% / 14%)			
	Diabetes: (65% / 67%)			
	HIV Screening: (25% / 32%)			
	Hypertension: (64% / 80%)			
	Ischemic Vascular Disease (IVD): (75% / 86%)			
	Depression screening: (91% / 83%)			
	Depression screening (Homeless): (88% / 83%)			
	Tobacco use screening & cessation: (86% / 93%)			
	Weight assessment, Children & Adolescent: (74% /90%)			

Meeting Adjourned: 11:00 AM

OVERALL PERFORMANCE

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



0% 5% 10% 15% 20% 25% 30% 35% 40% 45% 50% 55% 60% 65% 70% 75% 80% 85% 90% 95%

PRODUCTIVITY REPORT APRIL 2022

ALL PROVIDERS

AS 04/30/2022 Based on Completed Appointments

<51%

>=51% and < 80%

>= 80% and <100%

>= 100%

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen		% Monthly Target Achieved		Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
ALFONSO PUENTES, RAMIRO	17	14.0	239	1	240	230	1	231	96%	16.5
DABU, DARNEL	17	16.5	278	3	281	284	2	286	102%	17.3
DORCE-MEDARD, JENNIFER	17	1.0	18	0	18	15	0	15	83%	15.0
FLOREZ, GLORIA	17	13.5	228	2	230	198	2	200	87%	14.8
GARCIA, CARLOS A	12 Mobile - St Ann/ 15	22.5	326	4	330	264	4	268	81%	11.9
HARBERGER, SENECA	2.5 *	10.0	23	1	24	23	1	24	100%	2.4
JEAN-JACQUES, FERNIQUE	15	19.5	295	0	295	295	0	295	100%	15.1
KOOPMAN, REBECCA	15	21.0	316	0	316	273	0	273	86%	13.0
LAM, MINH DAI	15	19.0	278	9	287	295	9	304	106%	16.0
LOUIS, JOANN PIERRE	15	18.0	271	1	272	284	1	285	105%	15.8
NAVARRO, ELSY	15	18.5	279	0	279	270	0	270	97%	14.6
PEREZ, DANIEL JESUS	6.5 Belle Glade * / 17	14.5	193	1	194	170	1	171	88%	11.8
PHILISTIN, KETELY	15	21.0	315	3	318	290	3	293	92%	14.0
SANCHEZ, MARCO FERNANDEZ	15	21.0	317	0	317	263	0	263	83%	12.5
SHOAF, NOREMI	15	18.0	268	4	272	265	3	268	99%	14.9
VIL, CARLINE ST	15	17.5	264	0	264	242	0	242	92%	13.8
WARREN, SANDRA	17	4.0	23	0	23	23	0	23	100%	5.8
ZITO, AMALINETTE	17	4.0	35	1	36	32	1	33	92%	8.3
ADULT CARE TOTALS		273.5	3,966	30	3,996	3,716	28	3,744	94%	

* Avg Target for Belle Glade Primary

RESIDENTS										
PY1	8	9.5	76	0	76	69	0	69	91%	7.3
PY2	12	23.2	275	3	278	205	3	208	75%	9.0
PY3	16	23.1	369	0	369	238	0	238	64%	10.3
RESIDENTS TOTAL		55.8	720	3	723	512	3	515	71%	

PEDIATRIC CARE										
CLARKE-AARON, NOELLA	17	18.5	317	0	317	330	0	330	104%	17.8
DESSALINES, DUCLOS	17	15.5	264	0	264	299	0	299	113%	19.3
LAZARO RIVERA, NANCY	17	16.5	281	0	281	338	0	338	120%	20.5
MARZOUCIA, KISHA F.	17	19.5	332	0	332	331	0	331	100%	17.0
NORMIL-SMITH, SHERLOUNE	17	20.0	340	0	340	360	0	360	106%	18.0
PEDIATRIC CARE TOTALS		90	1,534	0	1,534	1,658	0	1,658	108%	

WOMEN'S HEALTH CARE										
CASANOVA, JENNIFER	15	19.0	286	0	286	344	0	344	120%	18.1
FERWERDA, ANA	17	9.0	157	0	157	156	0	156	99%	17.3
WOMEN'S HEALTH CARE TOTALS		28	443	0	443	500	0	500	113%	

BEHAVIORAL HEALTH										
LEQUERICA ZIEMBA, ADRIANA	6	17.5	71	34	105	77	33	110	105%	6.3
GREEN, ASHLEY	5	12.0	54	6	60	59	4	63	105%	5.3
CALDERON, NYLSA	10	20.5	190	15	205	178	9	187	91%	9.1
JONES, KIARA	10	18.0	159	21	180	160	19	179	99%	9.9
LUCCHESE, KAREN	10	17.0	142	28	170	138	23	161	95%	9.5
CUSIMANO, ANGELA	12	19.5	195	39	234	147	29	176	75%	9.0
BEHAVIORAL HEALTH TOTALS		104.5	811	143	954	759	117	876	92%	

SUBSTANCE ABUSE DISORDER										
PHILLIPS, COURTNEY	8	2.0	1	2	3	1	2	3	100%	1.5
PEREZ-NUNEZ, DIANA	15	20.4	296	12	308	255	5	260	84%	12.7
DRAYTON, RENEISHA	10	20.0	190	10	200	177	7	184	92%	9.2
HIRSCH, KAREN	6	18.5	66	45	111	87	30	117	105%	6.3
MILETA, SNJEZANA	10	20.5	137	68	205	144	33	177	86%	8.6
MITCHELL, ANGELA	10	20.0	106	94	200	102	67	169	85%	8.5
LAWRENCE, MELISSA	10	19.5	129	66	195	152	53	205	105%	10.5
REXACH, CLAUDIA	10	19.0	86	104	190	79	66	145	76%	7.6
SUBSTANCE ABUSE DISORDER TOTALS		139.9	1,011	401	1,412	997	263	1,260	89%	

DENTAL										
ALWEHAIB, ARWA	16	18.5	296	0	296	292		292	99%	15.8
CUCURAS, JOHN N	12	7.5	66	0	66	68		68	103%	9.1
OLIVEIRA, PAULO	16	12.5	200	0	200	168		168	84%	13.4
SEMINARIO, ADA	16	16.5	264	0	264	238		238	90%	14.4
SOFIANOS JR, MICHAEL	16	20.5	328	0	328	348		348	106%	17.0
SILVA, MICHELLE	16	16.5	264	0	264	234		234	89%	14.2
ZANGENEH, YASMINE	16	16.5	264	0	264	211		211	80%	12.8
WILLIAMS, RICHARD	16	13.5	216	0	216	180		180	83%	13.3
DENTAL TOTALS		122.0	1,898	0	1,898	1,739		1,739	92%	

DENTAL HYGIENE										
MOZER NASCIMENTO, ARIANNE	8	17.5	140	0	140	137		137	98%	7.8
GARCIA, IRENE	8 / MDI =16	6.0	96	0	96	88		88	92%	14.7
GONZALEZ, NANCY	8	2.0	16	0	16	17		17	106%	8.5
HARDCASTLE, CORINA	8	13.5	108	0	108	102		102	94%	7.6
MASON, SHERRY	8	20.5	164	0	164	138		138	84%	6.7
PETERSEN, PATRICE	8	15.5	172	0	172	175		175	102%	11.3
DENTAL HYGIENE TOTALS		75.0	696	0	696	657		657	94%	

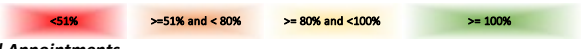
GRAND TOTAL		888.7	11,079	577	11,656	10,538	411	10,949	94%	
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ST. ANN NURSES										
ST ANN NURSES TOTALS		11.5	115	0	115	23	0	23	20%	

PRODUCTIVITY REPORT APRIL 2022

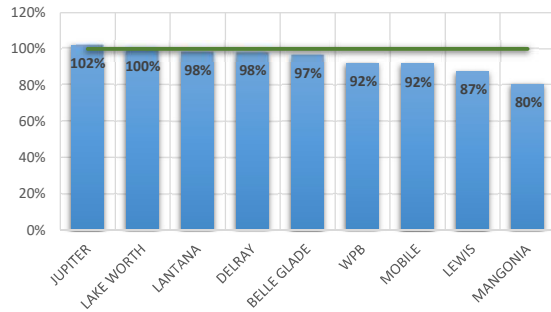
ALL CLINICS

AS 04/30/2022 Based on Completed Appointments

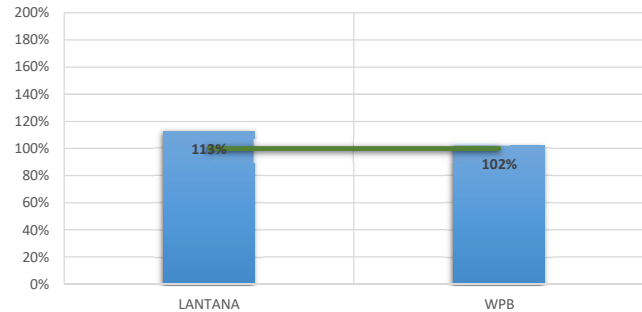


Category	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	
	AS 04/30/2022	In-Person	Telehealth	Total	In-Person	Telehealth		Total
ADULT CARE		3,966	30	3,996	3,716	28	3,744	94%
PEDIATRIC CARE		1,534	0	1,534	1,658	0	1,658	108%
WOMEN'S HEALTH CARE		443	0	443	500	0	500	113%
BEHAVIORAL HEALTH		811	143	954	759	117	876	92%
SUBSTANCE ABUSE DISORDER		1,011	401	1,412	997	263	1,260	89%
DENTAL HEALTH		1,898	0	1,898	1,739	0	1,739	92%
DENTAL HYGIENE		696	0	696	657	0	657	94%
RESIDENTS		720	3	723	512	3	515	71%
Grand Total		11,079	577	11,656	10,538	411	10,949	94%

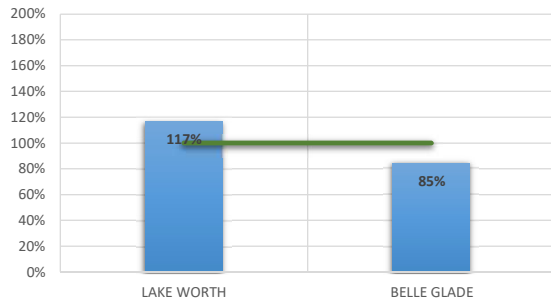
Adult Care



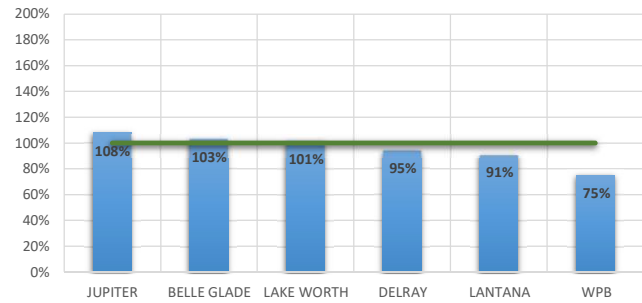
Pediatric Care



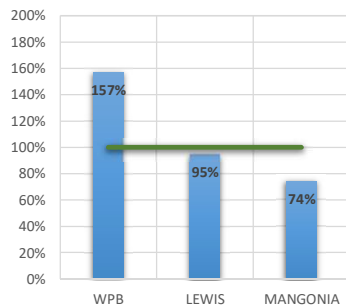
Women's Health Care



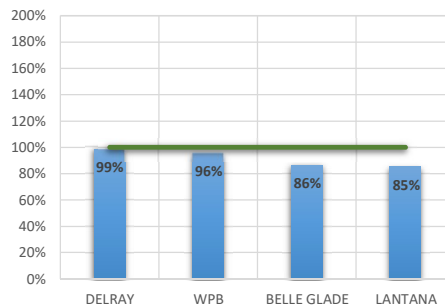
Behavioral Health



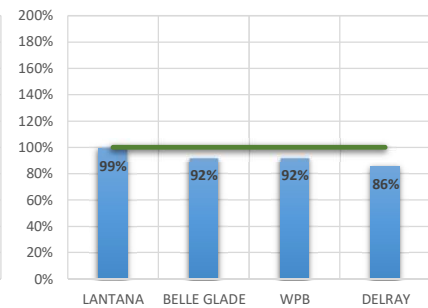
Substance Abuse Disorder



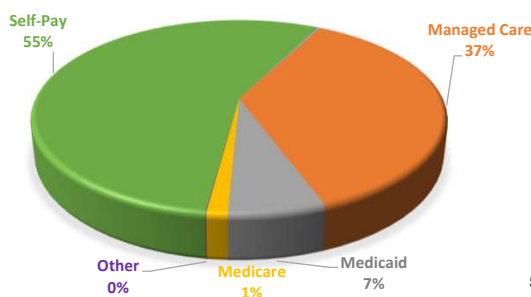
Dental



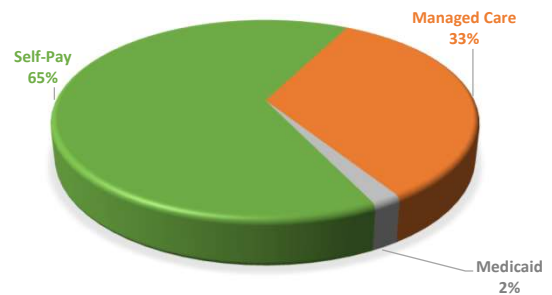
Dental Hygiene



MEDICAL PAYER MIX



DENTAL PAYER MIX



ADULT CARE

Oct-21 Nov-21 Dec-21 Jan-22 Feb-22 Mar-22 Apr-22 May-22 Jun-22 Jul-22 Aug-22 Sep-22

ALFONSO PUENTES, RAMIRO	83%	95%	77%	90%	80%	87%	96%
CESAIRE JEAN, ROSE CARLINE	80%	83%	62%	72%	72%	77%	
DABU, DARNEL	90%	99%	82%	83%	83%	91%	102%
DORCE-MEDARD, JENNIFER	89%	67%	111%	111%	67%	67%	83%
FLOREZ, GLORIA	99%	98%	78%	91%	93%	95%	87%
GARCIA, CARLOS A	81%	90%	75%	83%	87%	90%	81%
HARBERGER, SENECA				100%	100%	100%	100%
JEAN-JACQUES, FERNIQUE	96%	106%	96%	96%	102%	87%	100%
KOOPMAN, REBECCA	62%	70%	63%	69%	98%	87%	86%
LAM, MINH DAI	125%	116%	108%	108%	104%	104%	106%
LOUIS, JOANN PIERRE	89%	100%	81%	95%	97%	95%	105%
NAVARRO, ELSY	92%	103%	93%	92%	103%	97%	97%
PEREZ, DANIEL JESUS				81%	95%	97%	88%
PHILISTIN, KETELY	91%	98%	87%	101%	102%	90%	92%
RAHMAN, SM		51%	55%	68%	64%	90%	
SANCHEZ, MARCO FERNANDEZ	149%	168%	118%	76%	100%	83%	83%
SHOAF, NOREMI	88%	95%	87%	96%	91%	97%	99%
VIL, CARLINE ST	77%	92%	98%	83%	87%	84%	92%
WARREN, SANDRA	78%	100%	70%		100%	85%	100%
ZITO, AMALINETTE	100%	89%	81%	104%	100%	100%	92%
RESIDENTS				75%	64%	72%	71%

PEDIATRIC CARE

Oct-21 Nov-21 Dec-21 Jan-22 Feb-22 Mar-22 Apr-22 May-22 Jun-22 Jul-22 Aug-22 Sep-22

CLARKE-AARON, NOELLA	92%	89%	85%	89%	97%	98%	104%
CHIBAR, CHARMAINE	61%	100%	100%	100%			
DESSALINES, DUCLOS	120%	126%	108%	107%	121%	119%	113%
LAZARO RIVERA, NANCY	130%	136%	113%	115%	128%	128%	120%
MARZOUCA, KISHA F.	90%	88%	85%	99%	95%	101%	100%
NORMIL-SMITH, SHERLOUNE	116%	106%	106%	108%	113%	112%	106%

WOMEN'S HEALTH CARE

CASANOVA, JENNIFER	107%	133%	107%	121%	137%	123%	120%
FERWERDA, ANA	110%	102%	84%	92%	114%	106%	99%

BEHAVIORAL HEALTH

CALDERON, NYLSA	90%	97%	84%	92%	97%	91%	91%
JONES, KIARA	98%	101%	89%	96%	98%	100%	99%
GREEN, ASHLEY						118%	105%
LUCCHESI, KAREN	43%	67%	65%	70%	89%	86%	95%
CUSIMANO, ANGELA		116%	50%	70%	79%	89%	75%
LEQUERICA ZIEMBA, ADRIANA	79%	84%	84%	90%	109%	113%	105%

SUBSTANCE ABUSE CARE

DRAYTON, RENEISHA						105%	92%
HIRSCH, KAREN	86%	98%	81%	70%	131%	117%	105%
PEREZ-NUNEZ, DIANA			77%	83%	90%	82%	84%
MILETA, SNJEZANA	93%	124%	100%	93%	93%	96%	86%
MITCHELL, ANGELA	110%	105%	93%	94%	92%	97%	85%
LAWRENCE, MELISSA		129%	89%	103%	125%	105%	105%
PHILLIPS, COURTNEY	153%	53%	87%	166%	121%	132%	100%
REXACH, CLAUDIA	107%	121%	94%	80%	122%	109%	76%

DENTAL

Oct-21 Nov-21 Dec-21 Jan-22 Feb-22 Mar-22 Apr-22 May-22 Jun-22 Jul-22 Aug-22 Sep-22

ALWEHAIB, ARWA	100%	105%	89%	97%	104%	104%	99%
CUCURAS, JOHN N	90%	140%	96%	102%	113%	94%	103%
OLIVEIRA, PAULO	78%	95%	79%	86%	89%	103%	84%
SEMINARIO, ADA	75%	112%	94%	77%	102%	90%	90%
SILVA, MICHELLE	78%	102%	81%	92%	108%	94%	89%
SOFIANOS JR, MICHAEL						101%	106%
ZANGENEH, YASMINE	70%	107%	80%	73%	104%	82%	80%
WILLIAMS, RICHARD	63%	95%	78%	70%	84%	82%	83%
BARBOSA, BIANCA	170%	87%	103%	93%	104%	91%	
HARDCASTLE, CORINA	78%	89%	88%	83%	88%	92%	94%
GRAY, NICOLE	65%	75%	66%	61%	74%	68%	
MASON, SHERRY	60%	78%	59%	69%	72%	89%	84%
GONZALEZ, NANCY		63%	75%			98%	106%
PETERSEN, PATRICE	54%	83%	90%	88%	111%	100%	102%

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
HARBERGER, SENECA	2	10.0	23	1	24	23	1	24	100%	2.4
PEREZ, DANIEL JESUS	6	5.0	32	0	32	32	0	32	100%	6.4
DORCE-MEDARD, JENNIFER	17	1.0	18	0	18	15	0	15	83%	15.0
PHILISTIN, KETELY	15	1.0	16	0	16	16	0	16	100%	16.0
ADULT CARE TOTALS		17	89	1	90	86	1	87	97%	

RESIDENTS										
PY1	8	9.5	76	0	76	69	0	69	91%	7.3
PY2	12	23.2	275	3	278	205	3	208	75%	9.0
PY3	16	23.1	369	0	369	238	0	238	64%	10.3
RESIDENTS TOTALS		55.8	720	3	723	512	3	515	71%	

WOMEN'S HEALTH CARE										
FERWERDA, ANA	17	3.0	52	0	52	44		44	85%	14.7
WOMEN'S HEALTH CARE TOTALS		3	52	0	52	44	0	44	85%	

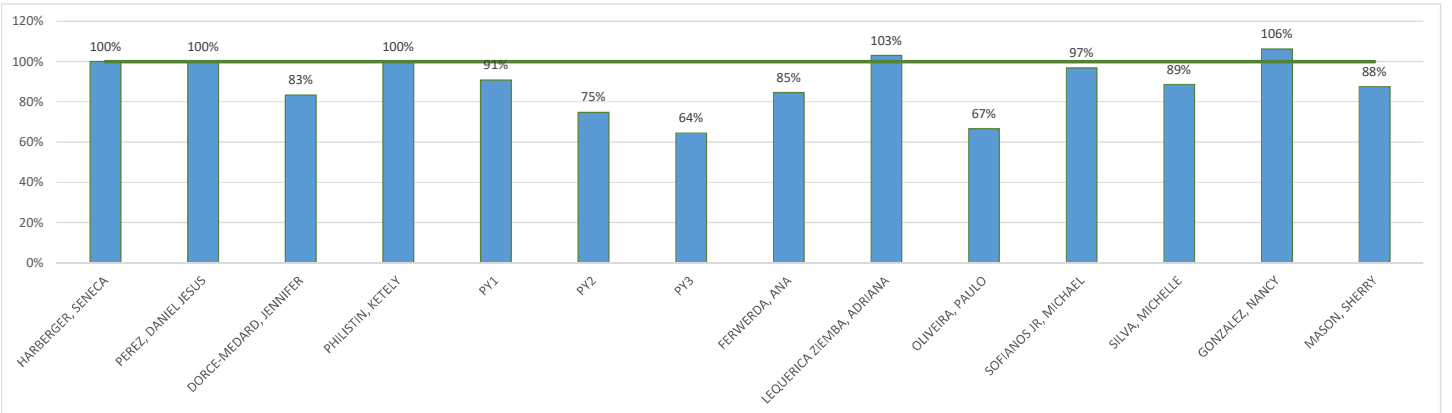
BEHAVIORAL HEALTH										
LEQUERICA ZIEMBA, ADRIANA	6	16.5	66	33	99	71	31	102	103%	6.2
BEHAVIORAL HEALTH TOTALS		16.5	66	33	99	71	31	102	103%	

SUBSTANCE ABUSE DISORDER										
SUBSTANCE ABUSE DISORDER TOTALS		0	0	0	0	0	0	0		

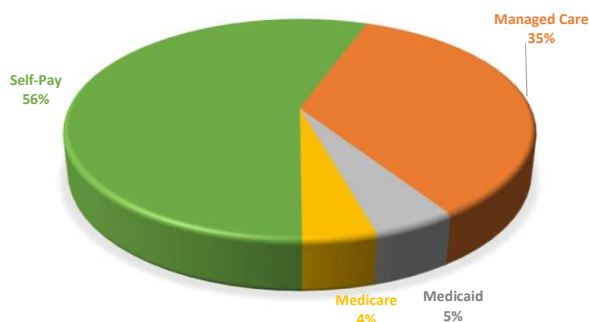
DENTAL										
OLIVEIRA, PAULO	16	3.0	48	0	48	32		32	67%	10.7
SOFIANOS JR, MICHAEL	16	2.0	32	0	32	31		31	97%	15.5
SILVA, MICHELLE	16	16.5	264	0	264	234		234	89%	14.2
DENTAL TOTALS		21.5	344	0	344	297	0	297	86%	

DENTAL HYGIENE										
GONZALEZ, NANCY	8	2.0	16	0	16	17		17	106%	8.5
MASON, SHERRY	8	6.0	48	0	48	42		42	88%	7.0
DENTAL HYGIENE TOTALS		8.0	64	0	64	59	0	59	92%	

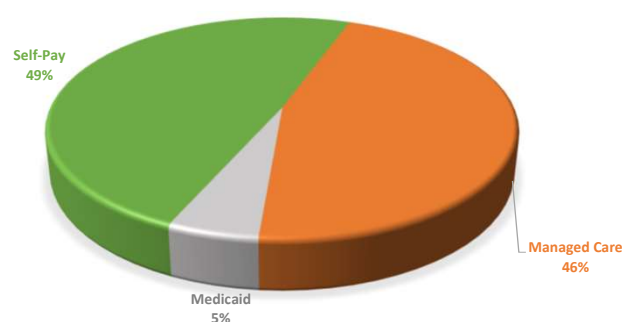
GRAND TOTAL										
		121.8	1,335	37	1,372	1,069	35	1,104	80%	



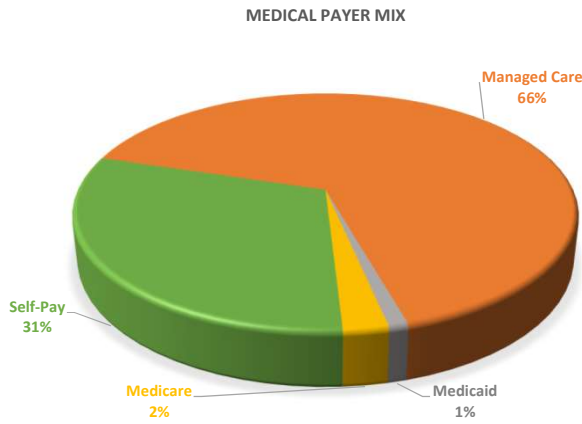
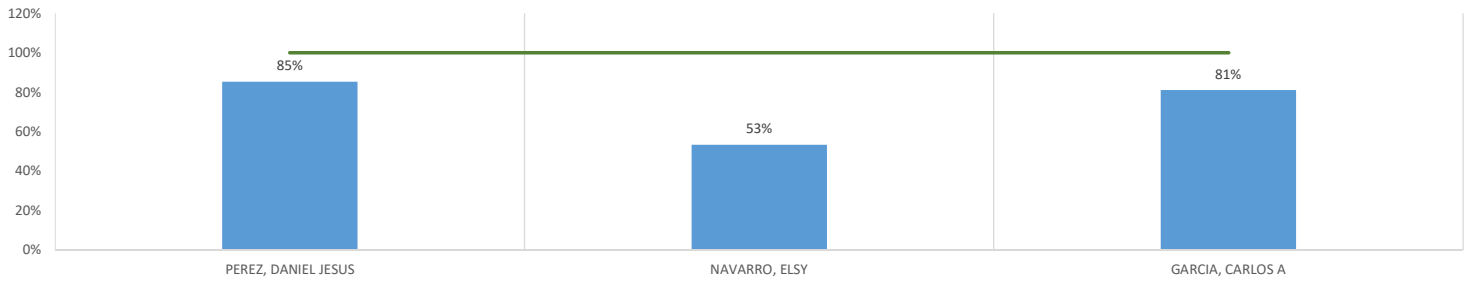
MEDICAL PAYER MIX



DENTAL PAYER MIX



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
PEREZ, DANIEL JESUS	17	6.0	101	1	102	86	1	87	85%	14.5
NAVARRO, ELSY	15	1.0	15	0	15	8	0	8	53%	8.0
GARCIA, CARLOS A	15	15.5	229	4	233	185	4	189	81%	12.2
ADULT CARE TOTALS		22.5	345	5	350	279	5	284	81%	
SUBSTANCE ABUSE DISORDER										
SUBSTANCE ABUSE DISORDER TOTALS										
GRAND TOTAL		22.5	345	5	350	279	5	284	81%	





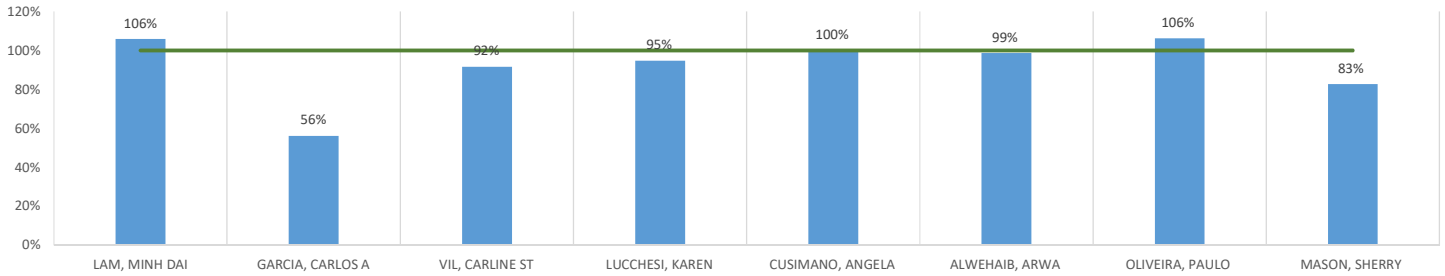
ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
LAM, MINH DAI	15	19	278	9	287	295	9	304	106%	16.0
GARCIA, CARLOS A	15	1	16	0	16	9	0	9	56%	9.0
VIL, CARLINE ST	15	17.5	264	0	264	242	0	242	92%	13.8
ADULT CARE TOTALS		37.5	558	9	567	546	9	555	98%	

BEHAVIORAL HEALTH										
LUCCHESI, KAREN	10	17.0	142	28	170	138	23	161	95%	9.5
CUSIMANO, ANGELA	12	0.1	0	1	1	0	1	1	100%	10.0
BEHAVIORAL HEALTH TOTALS		17.1	142	29	171	138	24	162	95%	

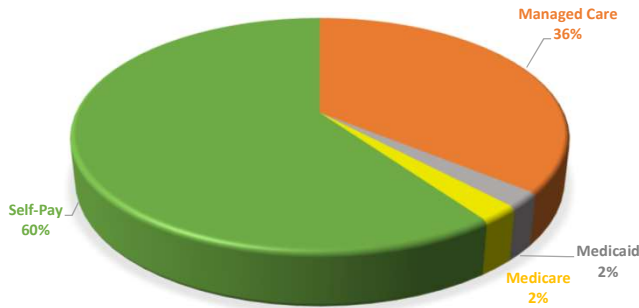
DENTAL										
ALWEHAIB, ARWA	16	18.5	296	0	296	292		292	99%	15.8
DENTAL TOTALS		18.5	296	0	296	292	0	292	99%	

DENTAL HYGIENE										
OLIVEIRA, PAULO	16	1	16	0	16	17		17	106%	17.0
MASON, SHERRY	8	14.5	116	0	116	96		96	83%	6.6
DENTAL HYGIENE TOTALS		15.5	132	0	132	113	0	113	86%	

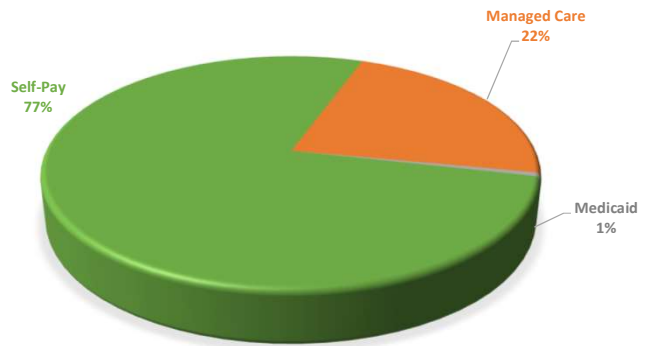
GRAND TOTAL										
		89	1128	38	1166	1089	33	1122	96%	



MEDICAL PAYER MIX



DENTAL PAYER MIX

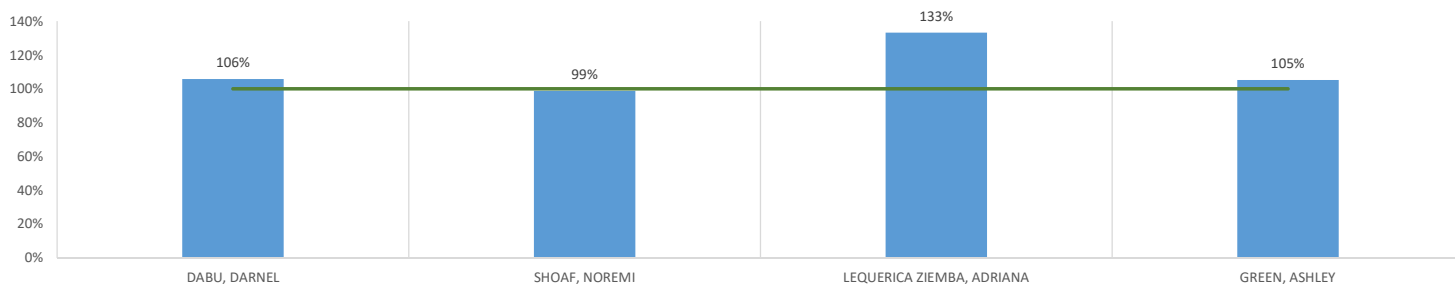




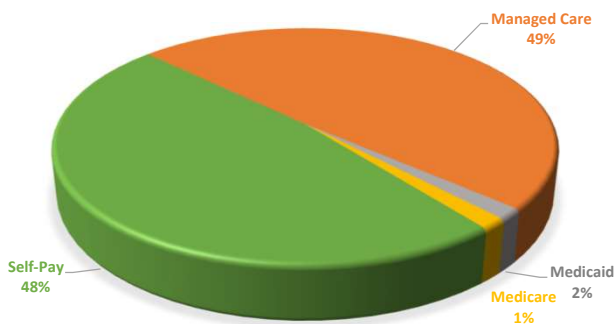
ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
DABU, DARNEL	17	12.0	201	3	204	214	2	216	106%	18.0
SHOAF, NOREMI	15	17.5	260	4	264	258	3	261	99%	14.9
ADULT CARE TOTALS		29.5	461	7	468	472	5	477	102%	

BEHAVIORAL HEALTH										
LEQUERICA ZIEMBA, ADRIANA	6	1	5	1	6	6	2	8	133%	8.0
GREEN, ASHLEY	5	11.4	51	6	57	56	4	60	105%	5.3
BEHAVIORAL HEALTH TOTALS		12.4	56	7	63	62	6	68	108%	

GRAND TOTAL		41.9	517	14	531	534	11	545	103%	
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MEDICAL PAYER MIX

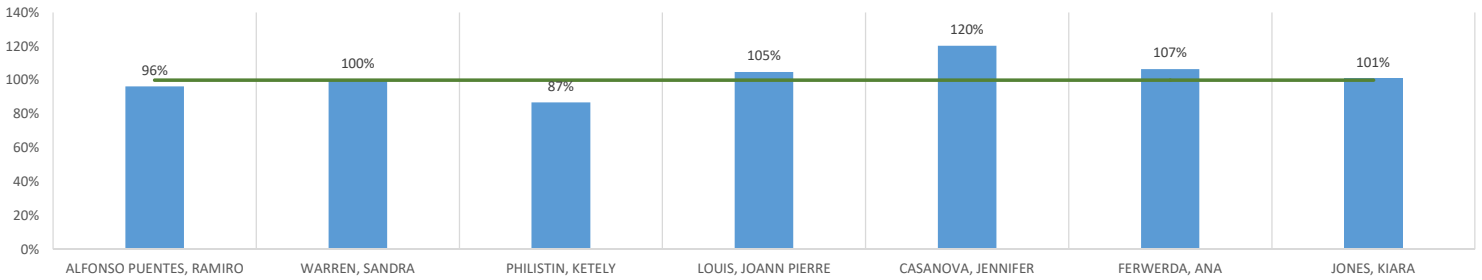


ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
ALFONSO PUENTES, RAMIRO	17	14.0	239	1	240	230	1	231	96%	16.5
WARREN, SANDRA	6	1.0	6	0	6	6	0	6	100%	6.0
PHILISTIN, KETELY	15	1.5	22	1	23	19	1	20	87%	13.3
LOUIS, JOANN PIERRE	15	18.0	271	1	272	284	1	285	105%	15.8
ADULT CARE TOTALS		34.5	538	3	541	539	3	542	100%	

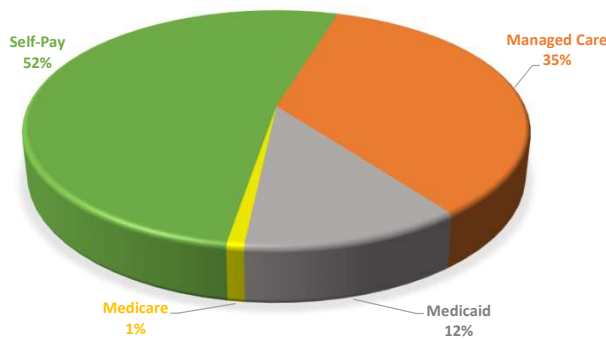
WOMEN'S HEALTH CARE										
CASANOVA, JENNIFER	15	19	286	0	286	344	0	344	120%	18.1
FERWERDA, ANA	17	6.0	105	0	105	112	0	112	107%	18.7
WOMEN'S HEALTH CARE TOTALS		25	391	0	391	456	0	456	117%	

BEHAVIORAL HEALTH										
JONES, KIARA	10	17.5	156	19	175	159	18	177	101%	10.1
BEHAVIORAL HEALTH TOTALS		17.5	156	19	175	159	18	177	101%	

GRAND TOTAL		77	1,085	22	1,107	1,154	21	1,175	106%	
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MEDICAL PAYER MIX



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
PEREZ, DANIEL JESUS	17	3.5	60	0	60	52	0	52	87%	14.9
JEAN-JACQUES, FERNIQUE	15	19.5	295	0	295	295	0	295	100%	15.1
NAVARRO, ELSY	15	17.0	256	0	256	253	0	253	99%	14.9
ADULT CARE TOTALS		40	611	0	611	600	0	600	98%	

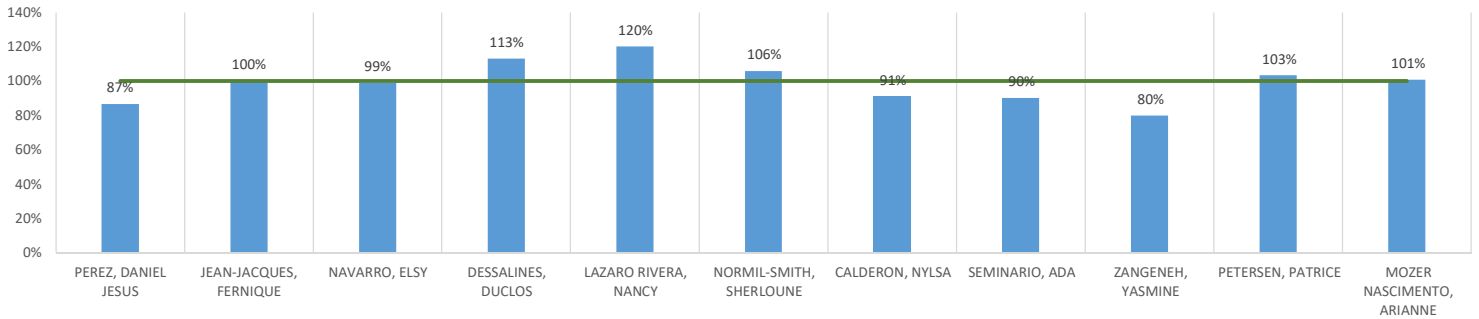
PEDIATRIC CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
DESSALINES, DUCLOS	17	15.5	264	0	264	299	0	299	113%	19.3
LAZARO RIVERA, NANCY	17	16.5	281	0	281	338	0	338	120%	20.5
NORMIL-SMITH, SHERLOUNE	17	20	340	0	340	360	0	360	106%	18.0
PEDIATRIC CARE TOTALS		52	885	0	885	997	0	997	113%	

BEHAVIORAL HEALTH										
Provider	Daily Target	Days Worked	In-Person	Telehealth	Total	In-Person	Telehealth	Total	% Monthly Target Achieved	Daily Average
CALDERON, NYLSA	10	20.5	190	15	205	178	9	187	91%	9.1
BEHAVIORAL HEALTH TOTALS		20.5	190	15	205	178	9	187	91%	

DENTAL										
Provider	Daily Target	Days Worked	In-Person	Telehealth	Total	In-Person	Telehealth	Total	% Monthly Target Achieved	Daily Average
SEMINARIO, ADA	16	16.5	264	0	264	238		238	90%	14.4
ZANGENEH, YASMINE	16	16.5	264	0	264	211		211	80%	12.8
DENTAL TOTALS		33	528	0	528	449	0	449	85%	

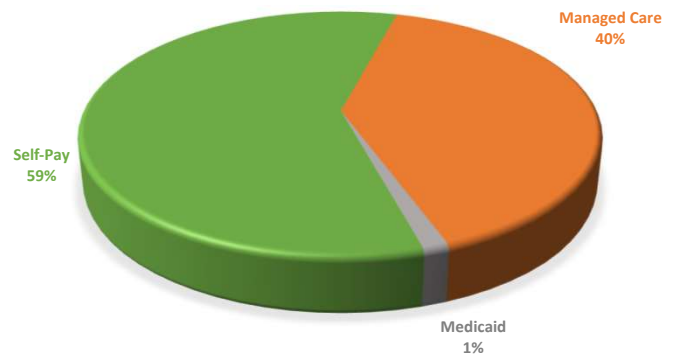
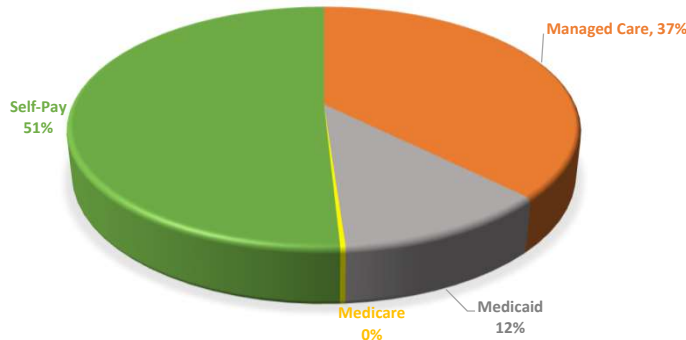
DENTAL HYGIENE										
Provider	Daily Target	Days Worked	In-Person	Telehealth	Total	In-Person	Telehealth	Total	% Monthly Target Achieved	Daily Average
PETERSEN, PATRICE	12	12.5	148	0	148	153		153	103%	12.2
GARCIA, IRENE	16	6	96	0	96	88		88	92%	14.7
MOZER NASCIMENTO, ARIANNE	8	15.0	120	0	120	121		121	101%	8.1
DENTAL HYGIENE TOTALS		33.5	364	0	364	362	0	362	99%	

GRAND TOTAL										
Provider	Daily Target	Days Worked	In-Person	Telehealth	Total	In-Person	Telehealth	Total	% Monthly Target Achieved	Daily Average
GRAND TOTAL		179	2,578	15	2,593	2,586	9	2,595	100%	



MEDICAL PAYER MIX

DENTAL PAYER MIX

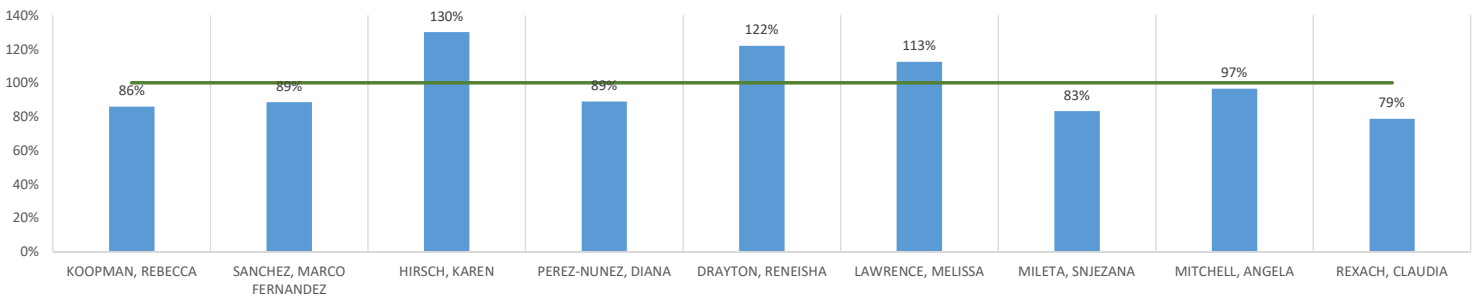


ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
KOOPMAN, REBECCA	15	8.5	128	0	128	110	0	110	86%	12.9
SANCHEZ, MARCO FERNANDEZ	15	10.5	158	0	158	140	0	140	89%	13.3
ADULT CARE TOTALS		19	286	0	286	250	0	250	87%	

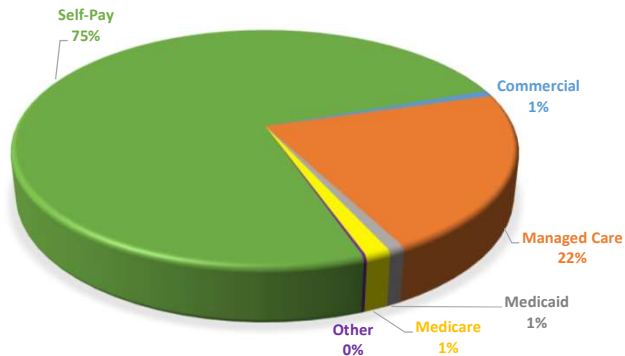
BEHAVIORAL HEALTH										
BEHAVIORAL HEALTH TOTALS		0	0	0	0	0	0	0		

SUBSTANCE ABUSE DISORDER										
HIRSCH, KAREN	6	3.4	20	0	20	25	1	26	130%	7.6
PEREZ-NUNEZ, DIANA	15	17.9	258	12	270	235	5	240	89%	13.4
DRAYTON, RENEISHA	10	8.7	79	8	87	99	7	106	122%	12.2
LAWRENCE, MELISSA	10	16.0	96	64	160	128	52	180	113%	11.3
MILETA, SNJEZANA	10	15.5	88	67	155	96	33	129	83%	8.3
MITCHELL, ANGELA	10	11.6	28	88	116	48	64	112	97%	9.7
REXACH, CLAUDIA	10	15.0	50	100	150	55	63	118	79%	7.9
SUBSTANCE ABUSE CARE TOTALS		88.1	619	339	958	686	225	911	95%	

GRAND TOTAL		107.1	905	339	1,244	936	225	1,161	93%	
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MEDICAL PAYER MIX



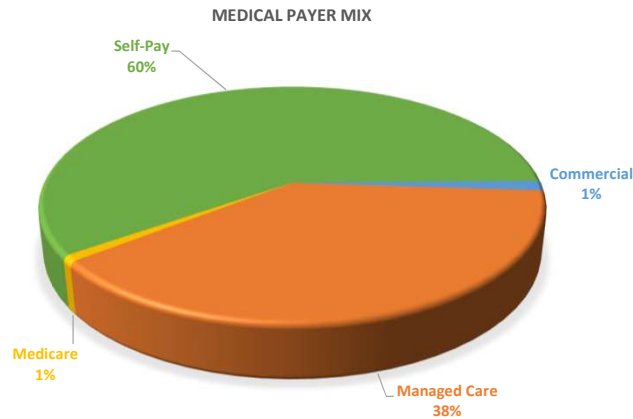
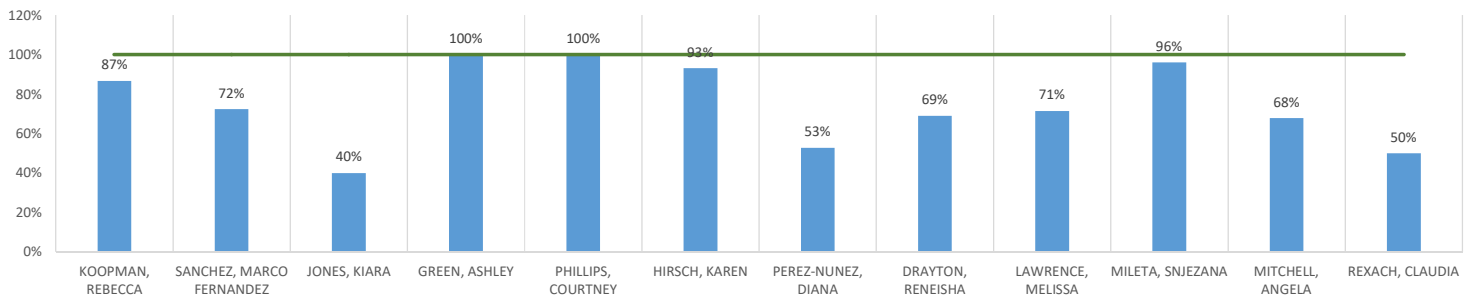


ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
KOOPMAN, REBECCA	15	12.5	188	0	188	163	0	163	87%	13.0
SANCHEZ, MARCO FERNANDEZ	15	9.5	144	0	144	104	0	104	72%	10.9
ADULT CARE TOTALS		22.0	332	0	332	267	0	267	80%	

BEHAVIORAL HEALTH										
JONES, KIARA	10	0.5	3	2	5	1	1	2	40%	4.0
GREEN, ASHLEY	5	0.6	3	0	3	3	0	3	100%	5.0
BEHAVIORAL HEALTH TOTALS		1.1	6	2	8	4	1	5	63%	

SUBSTANCE ABUSE DISORDER										
PHILLIPS, COURTNEY	2	2.0	1	2	3	1	2	3	100%	1.5
HIRSCH, KAREN	6	14.4	42	45	87	52	29	81	93%	5.6
PEREZ-NUNEZ, DIANA	15	2.5	38	0	38	20	0	20	53%	8.0
DRAYTON, RENEISHA	10	11.3	111	2	113	78	0	78	69%	6.9
LAWRENCE, MELISSA	10	3.5	33	2	35	24	1	25	71%	7.1
MILETA, SNJEZANA	10	5.0	49	1	50	48	0	48	96%	9.6
MITCHELL, ANGELA	10	8.4	78	6	84	54	3	57	68%	6.8
REXACH, CLAUDIA	10	3.0	30	0	30	15	0	15	50%	5.0
SUBSTANCE ABUSE CARE TOTALS		50.1	382	58	440	292	35	327	74%	

GRAND TOTAL		73.2	720	60	780	563	36	599	77%	
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ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
DABU, DARNEL	17	4.5	77	0	77	70	0	70	91%	15.6
FLOREZ, GLORIA	17	13.5	228	2	230	198	2	200	87%	14.8
WARREN, SANDRA	6	3.0	17	0	17	17	0	17	100%	5.7
ZITO, AMALINETTE	9	4.0	35	1	36	32	1	33	92%	8.3
GARCIA, CARLOS A	15	2.5	39	0	39	40	0	40	103%	16.0
NAVARRO, ELSY	15	0.5	8	0	8	9	0	9	113%	18.0
PHILISTIN, KETELY	15	18.5	277	2	279	255	2	257	92%	13.9
SANCHEZ, MARCO FERNANDEZ	15	1.0	15	0	15	19	0	19	127%	19.0
SHOAF, NOREMI	15	0.5	8	0	8	7	0	7	88%	14.0
ADULT CARE TOTALS		48	704	5	709	647	5	652	92%	

PEDIATRIC CARE										
CLARKE-AARON, NOELLA	17	18.5	317	0	317	330	0	330	104%	17.8
MARZOUCA, KISHA F.	17	19.5	332	0	332	331	0	331	100%	17.0
PEDIATRIC CARE TOTALS		38	649	0	649	661	0	661	102%	

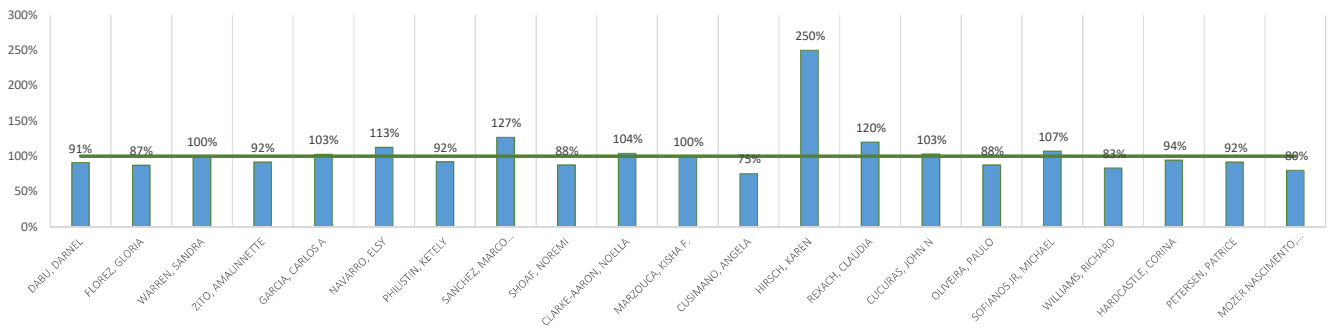
BEHAVIORAL HEALTH										
CUSIMANO, ANGELA	12	19.4	195	38	233	147	28	175	75%	9.0
BEHAVIORAL HEALTH TOTALS		19.4	195	38	233	147	28	175	75%	

SUBSTANCE ABUSE DISORDER										
HIRSCH, KAREN	6	0.7	4	0	4	10	0	10	250%	14.3
REXACH, CLAUDIA	10	1	6	4	10	9	3	12	120%	12.0
SUBSTANCE ABUSE DISORDER TOTALS		1.7	10	4	14	19	3	22	157%	

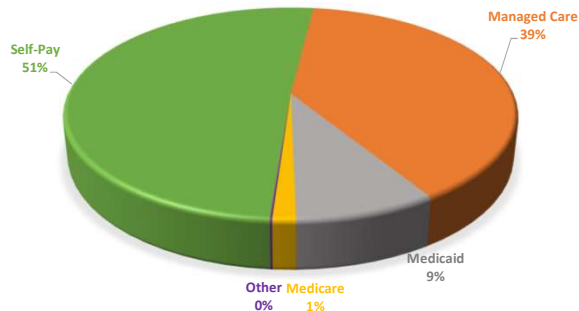
DENTAL										
CUCURAS, JOHN N	9	7.5	66	0	66	68		68	103%	9.1
OLIVEIRA, PAULO	16	8.5	136	0	136	119		119	88%	14.0
SOFIANOS JR, MICHAEL	16	18.5	296	0	296	317		317	107%	17.1
WILLIAMS, RICHARD	16	13.5	216	0	216	180		180	83%	13.3
DENTAL TOTALS		48.0	714	0	714	684	0	684	96%	

DENTAL HYGIENE										
HARDCASTLE, CORINA	8	13.5	108	0	108	102		102	94%	7.6
PETERSEN, PATRICE	8	3.0	24	0	24	22		22	92%	7.3
MOZER NASCIMENTO, ARIANNE	8	2.5	20	0	20	16		16	80%	6.4
DENTAL HYGIENE TOTALS		19.0	152	0	152	140	0	140	92%	

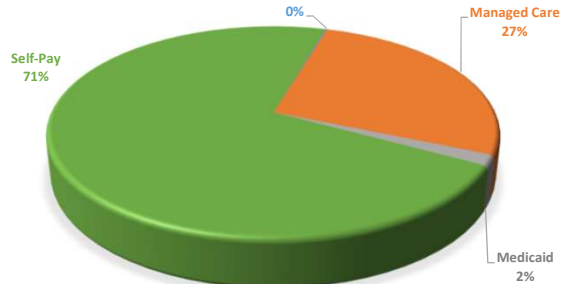
GRAND TOTAL										
		174.1	2,424	47	2,471	2,298	36	2,334	94%	



MEDICAL PAYER MIX



DENTAL PAYER MIX



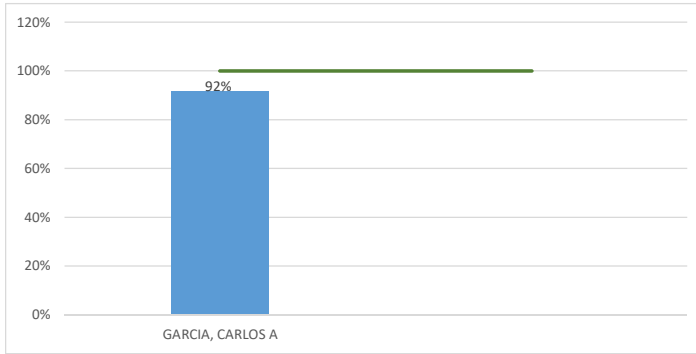
MOBILE PRODUCTIVITY REPORT APRIL 2022

AS 04/30/2022 Based on Completed Appointments

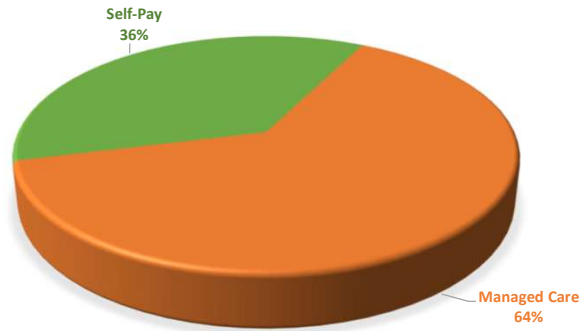


ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
GARCIA, CARLOS A	12	1.0	12	0	12	11		11	92%	11.0
ADULT CARE TOTALS		1	12	0	12	11	0	11	92%	

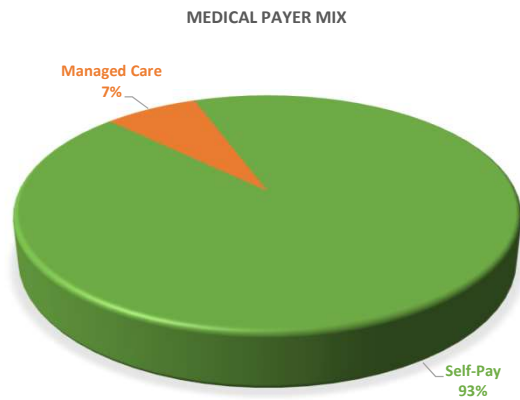
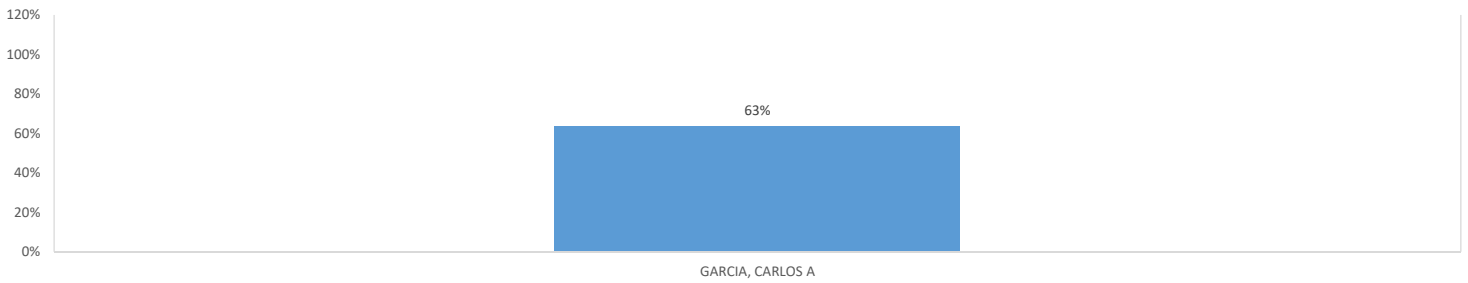
GRAND TOTAL		1	12	0	12	11	0	11	92%	
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MEDICAL PAYER MIX



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
GARCIA, CARLOS A	12	2.5	30	0	30	19	0	19	63%	7.6
ADULT CARE TOTALS		2.5	30	0	30	19	0	19	63%	
GRAND TOTAL		2.5	30	0	30	19	0	19	63%	



DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

1. Description: Operations Reports – April 2022

2. Summary:

This agenda item provides the following operations reports for April 2022:

- Clinic Productivity, including in-person and telehealth metrics, No Show trended over time, demographics metrics and walk-in percentages.

3. Substantive Analysis:

In April, the clinics had 10,843 visits which are 1,332 less than the month prior yet 680 more than April of 2021. 73% of patients were adults and 27% were pediatrics. The Lantana Clinic had the highest volume with 1,704 visits, followed by the West Palm Beach Clinic with 1,504.

Our payer mix for January reflects 57% uninsured patients and 36% Managed Care.

Productivity targets were met in Jupiter and Lake Worth Adult Medical, Pediatrics in West Palm Beach and Lantana Clinics, Women's Health in Lake Worth, Behavioral Health in Lake Worth and Belle Glade Clinics. In the 90% and higher range were Adult Medical in Belle Glade, Delray, West Palm Beach and Lantana; Dental in Delray, Lantana and West Palm Beach, Behavioral Health in Jupiter and Substance Use Disorder at the Lewis Center.

The largest age group of patients were ages 30-39 with 15% and ages 1-9 also at 15%. 50% of patients reported as White, followed by 40% as Black or African American. 41% of patients reported as Hispanic or Latino. 50% of patients' primary language was English, followed by Spanish at 32%. Creole-speaking totaled 18%. 60% of patients consistently identified as female and 90% as straight. 4% of patients reported as Agricultural workers, of which 84% were seasonal and 16% were migrants. 19% of patients reported as homeless, of which 74% were Doubling Up.

In April, the number of patients who walked in and were seen the same day totaled 2,223. 20% of patients seen in medical were walk-ins and 23% of patients seen in dental were walk-ins. The West Palm Beach medical clinic consistently had the highest volume of walk-ins with 428, followed by the Lantana clinic with 373 each. The West Palm Beach dental clinic also consistently had the highest volume of walk-ins with 222, followed by the Delray Beach dental clinic with 139 walk-ins. The medical clinics' rolling 12-month average walk-ins' percentage is 22% and the dental clinic's rolling 12-month average walk-in percentage is 31%. April showed an increase of 1% in medical and a decrease of 2% in dental walk-ins from the previous month.

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
May 25, 2022

The No Show rate in April remains consistent at 16%. The Tele no-show rate remains consistent at 9% of the total no-shows in the past 12 months.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

 Candice Abbott
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A


 Committee Name

 Date Approved

6. Recommendation:

Staff recommends that the Board approve the Operations Reports for April 2022.

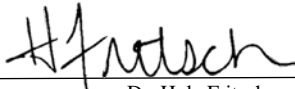
Approved for Legal sufficiency:



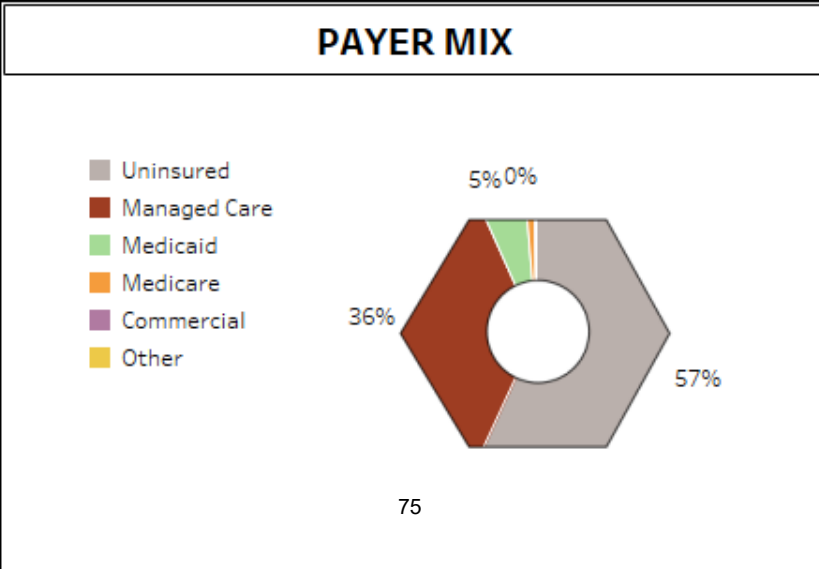
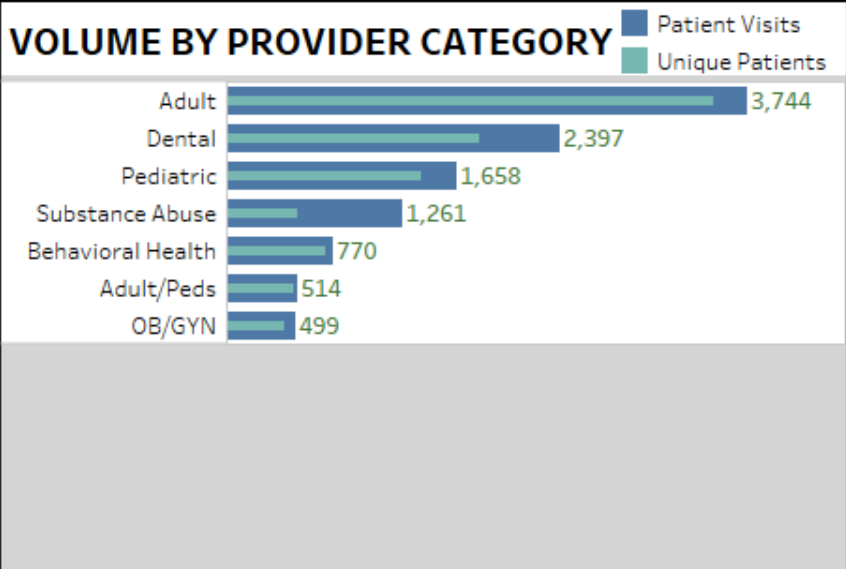
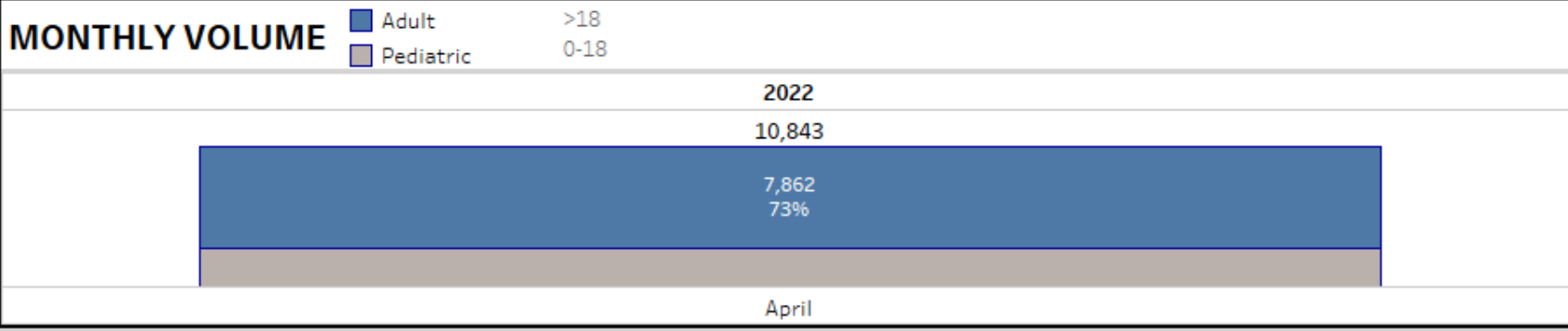
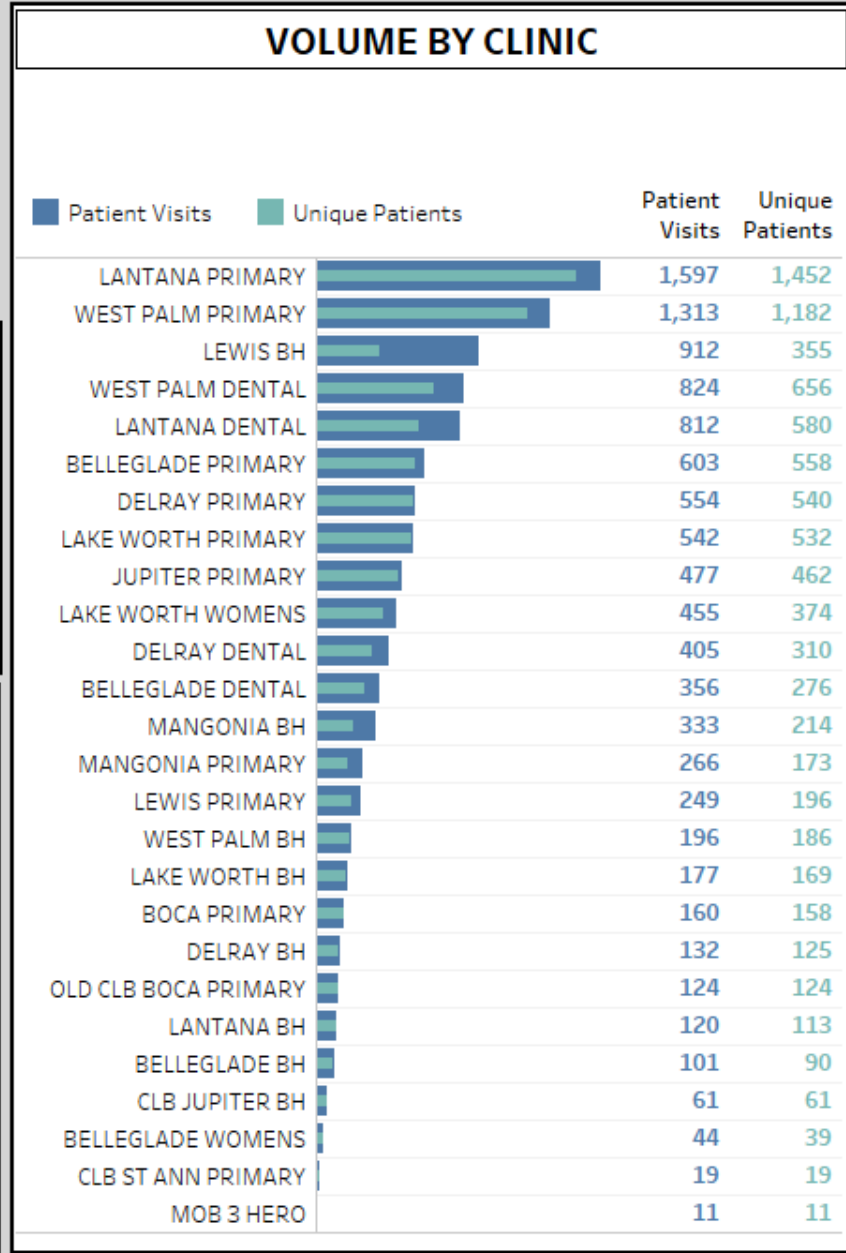
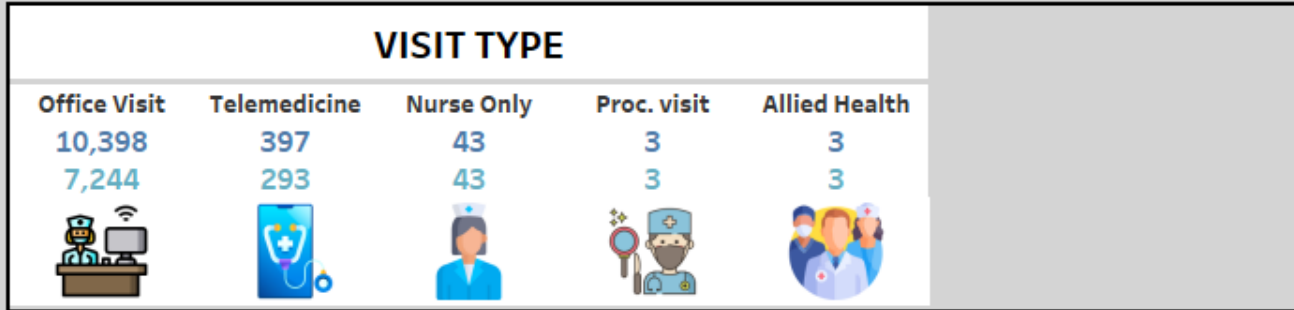
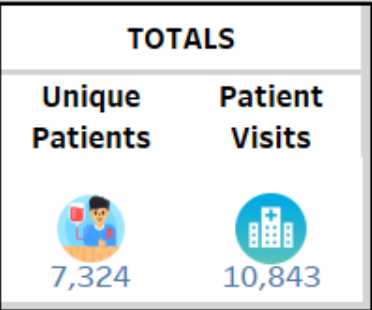
 Bernabe Icaza
 VP & General Counsel



 Marisol Miranda
 Director of Clinic Operations



 Dr. Hyla Fritsch
 AVP & Executive Director of Clinic and
 Pharmacy Services

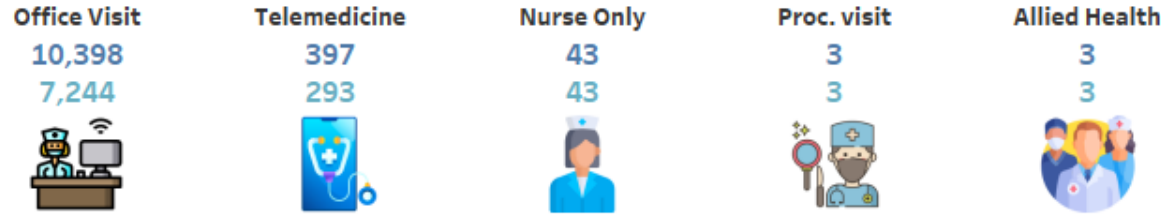


Unique Patients
Patient Visits



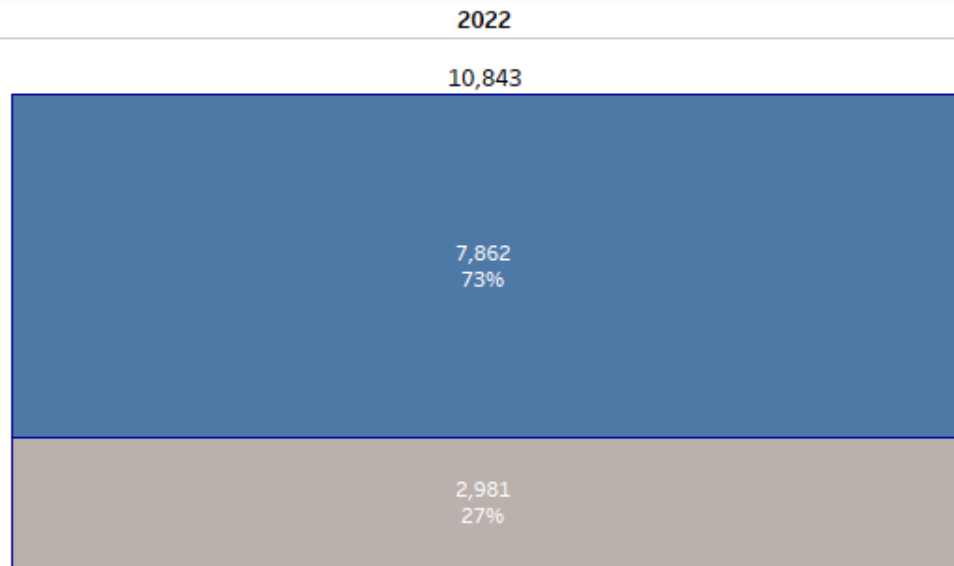
Visits
 Patients

VISIT TYPE



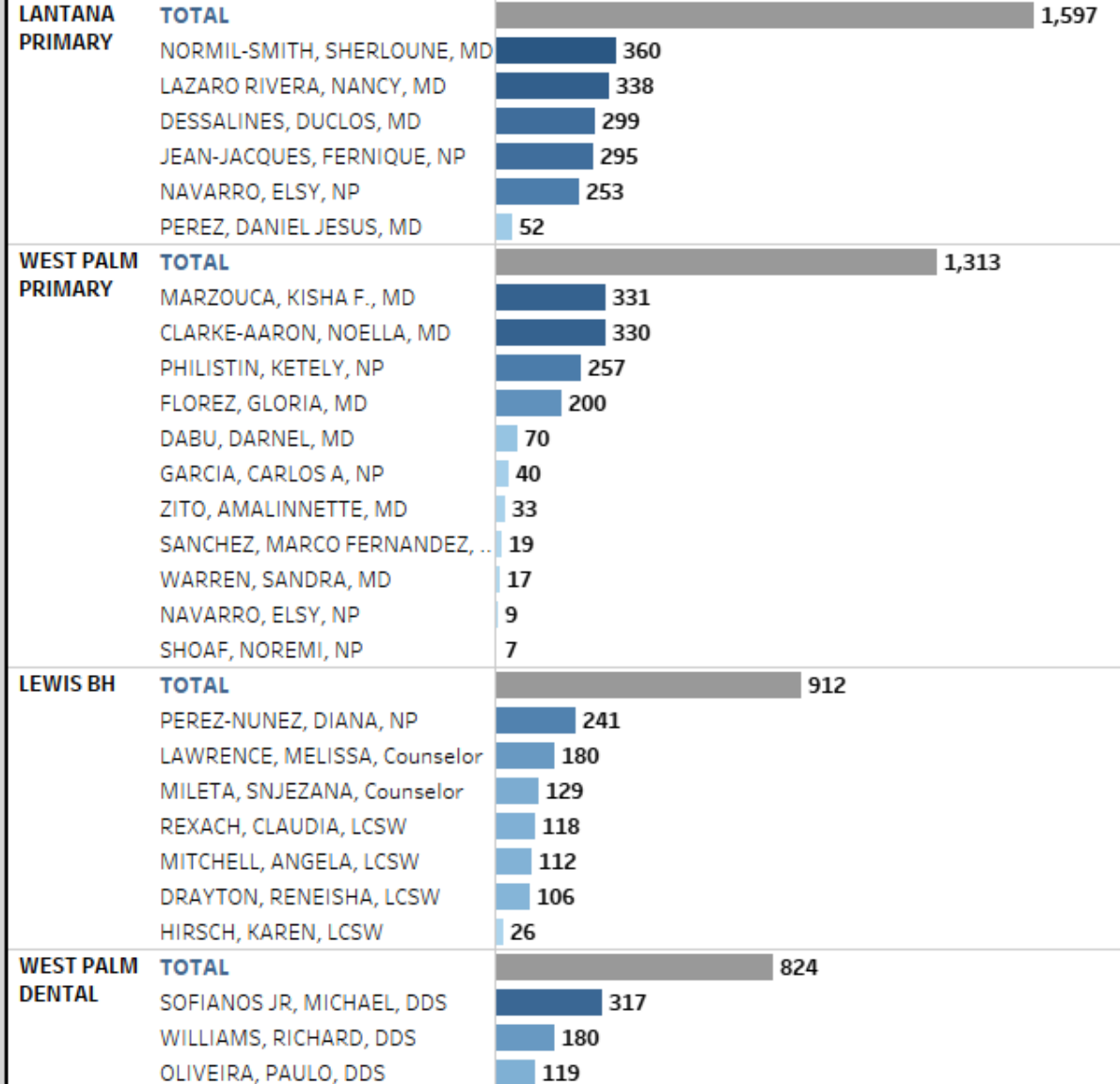
MONTHLY VOLUME

■ Adult ■ Pediatric

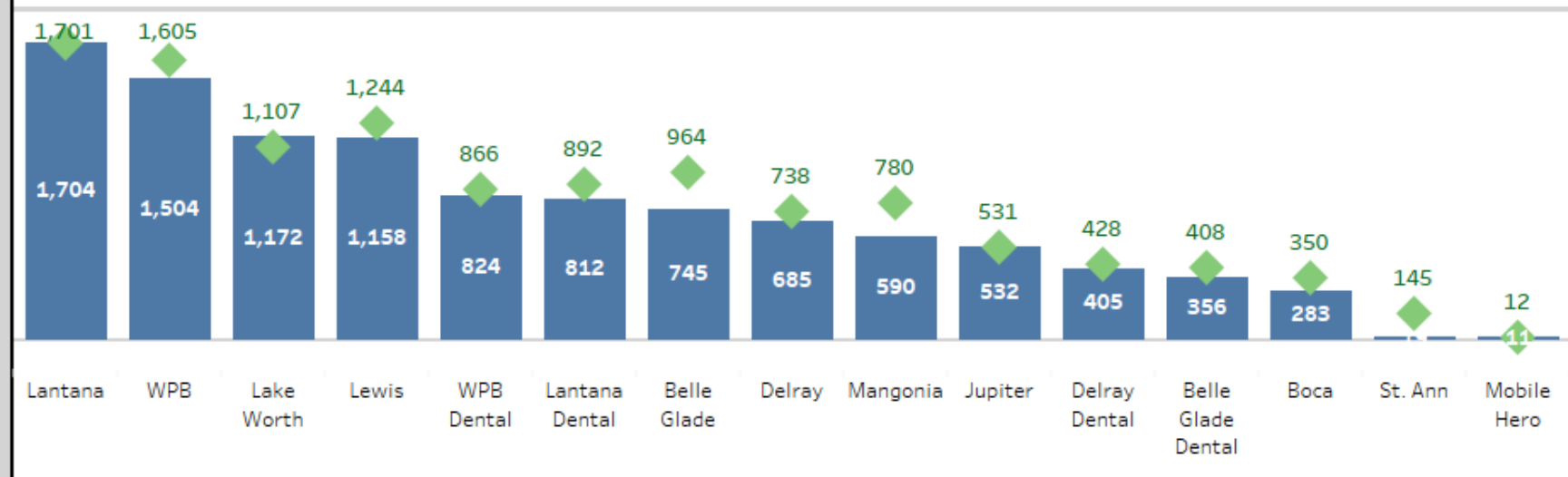


April

VOLUME BY CLINIC BY PROVIDER



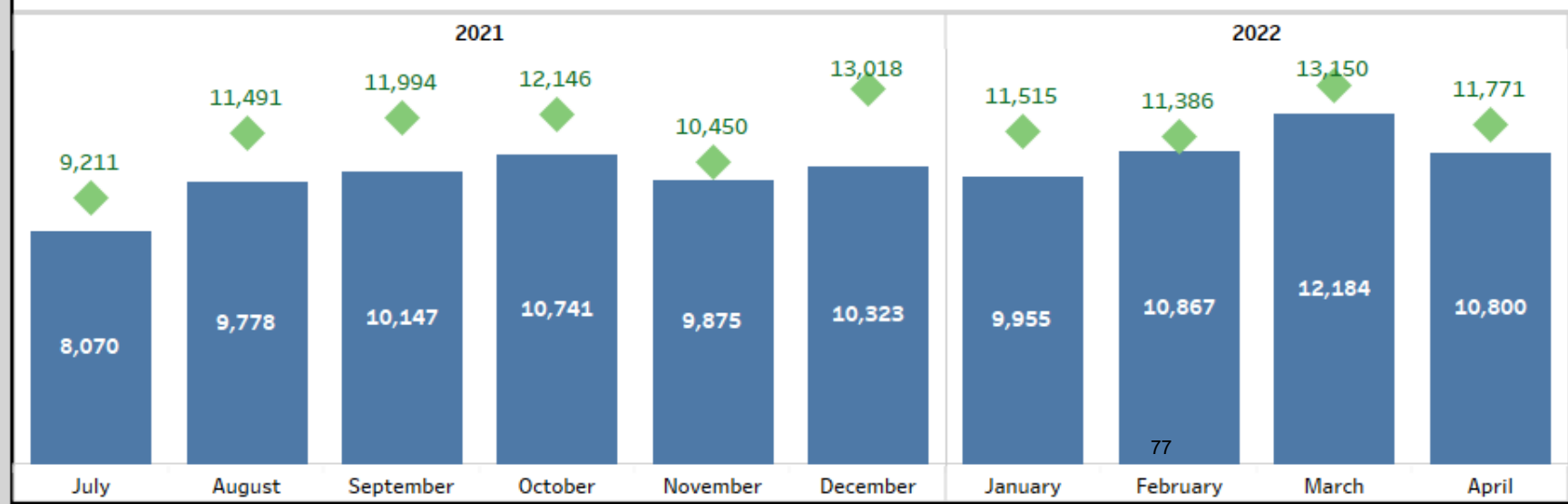
VOLUME BY CLINIC ◆ Target



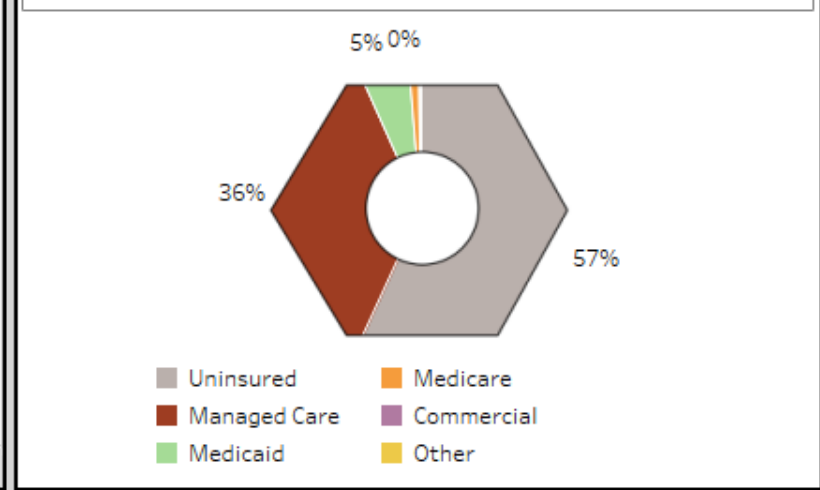
VISIT TYPE

	In Person	Tele Health	Total
Adult	3,717	27	3,744
Adult/Peds	511	3	514
Behavioral Health	664	106	770
Dental	2,397		2,397
OB/GYN	499		499
Pediatric	1,658		1,658
Substance Abuse	1,000	261	1,261
Total	10,446	397	10,843

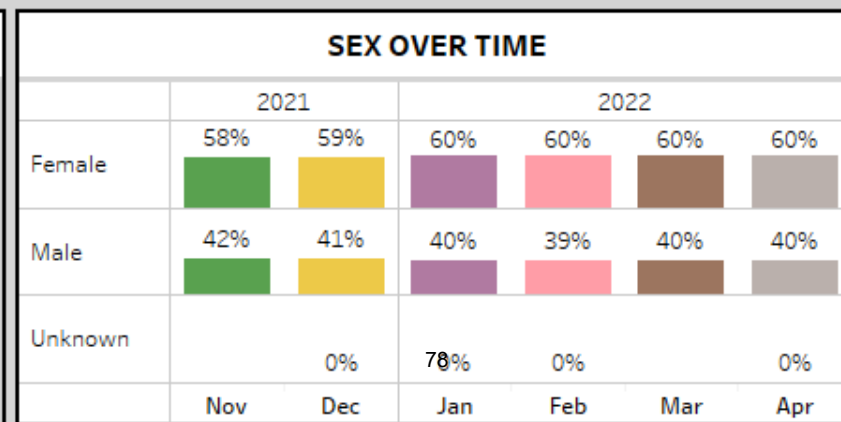
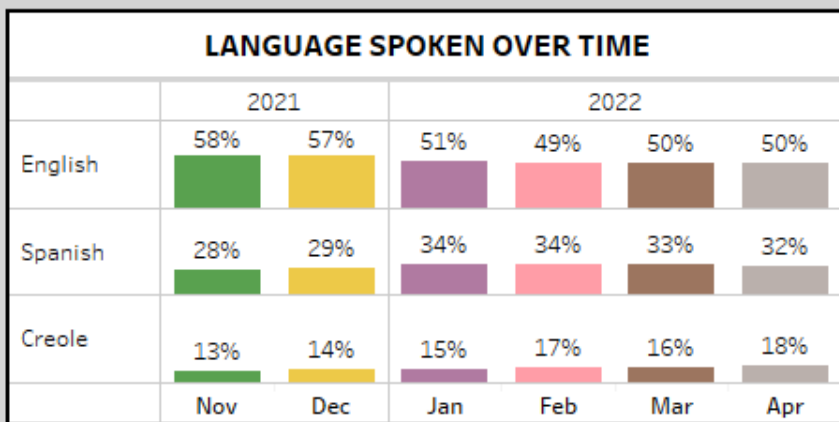
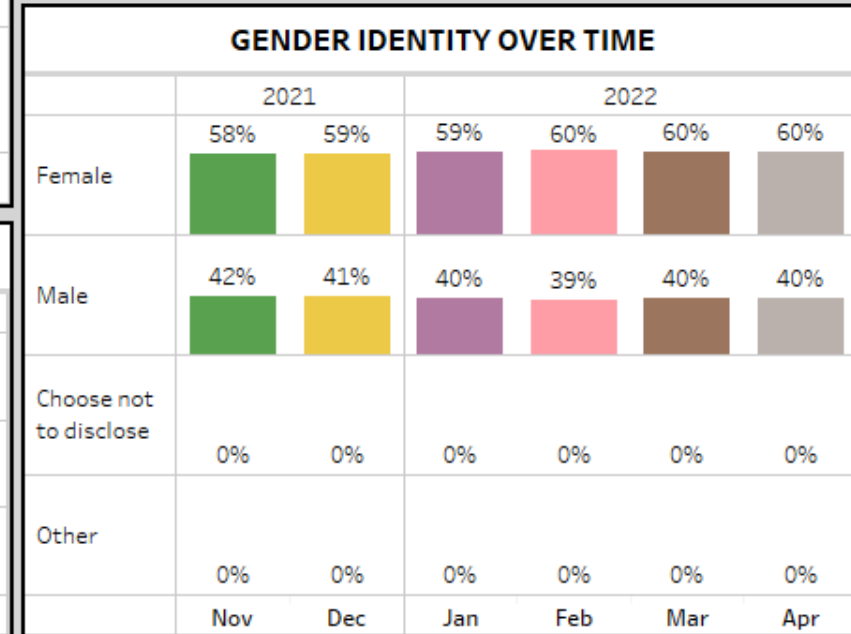
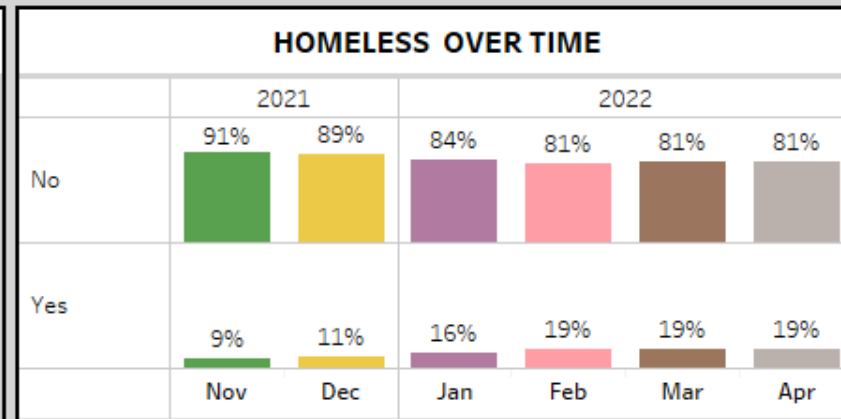
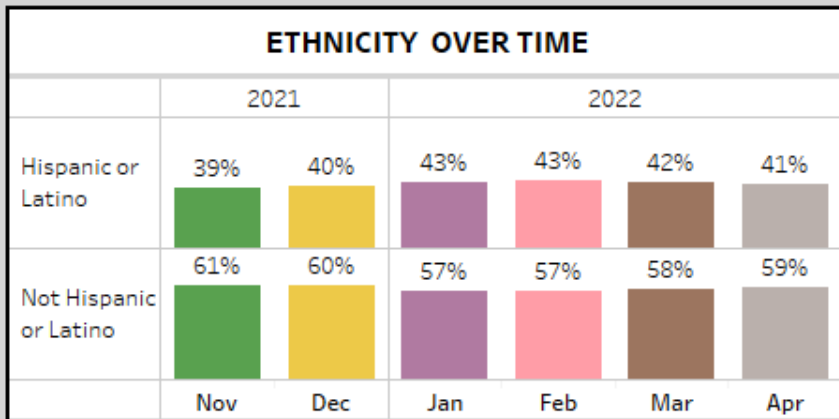
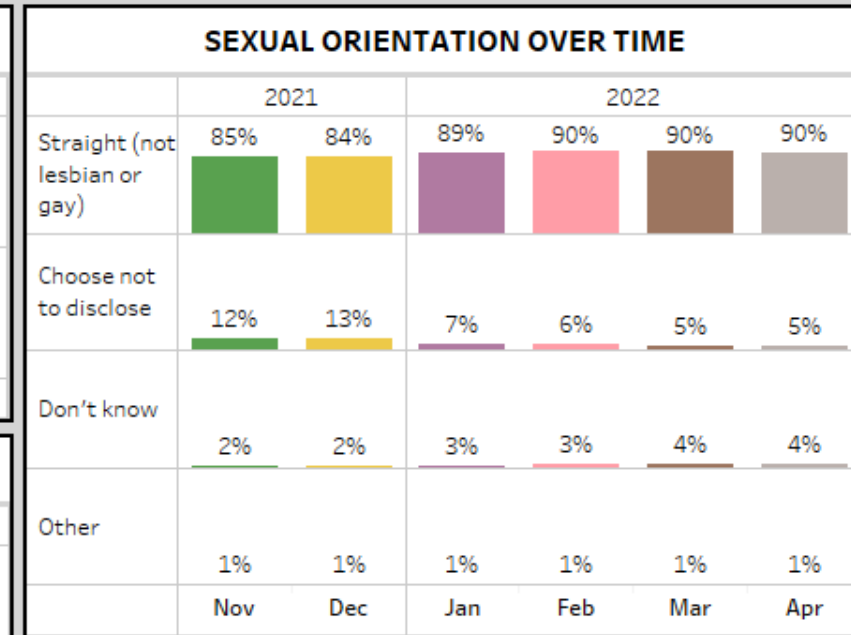
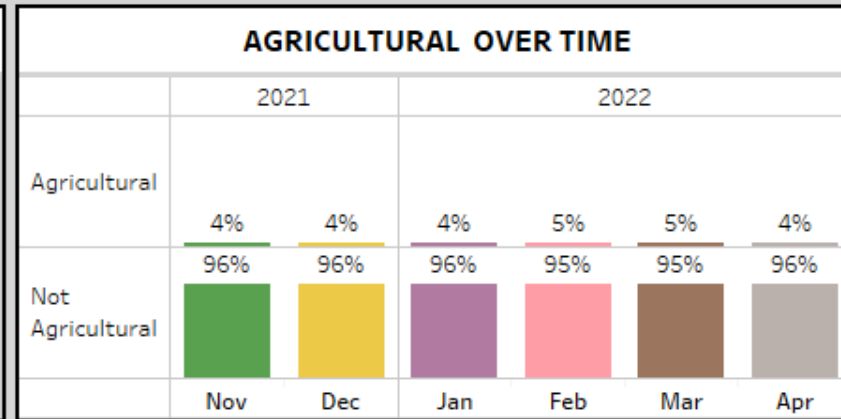
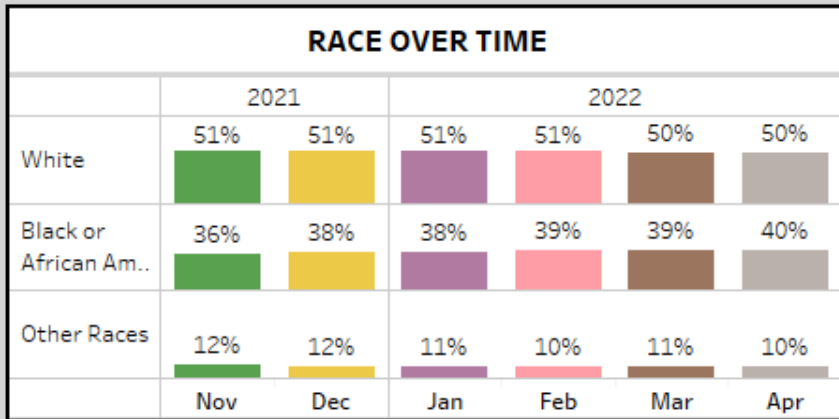
MONTHLY TREND



PAYOR MIX

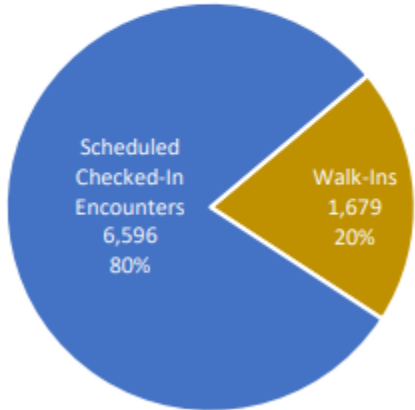


DEMOGRAPHICS TRENDED OVERTIME FOR THE LAST SIX MONTHS

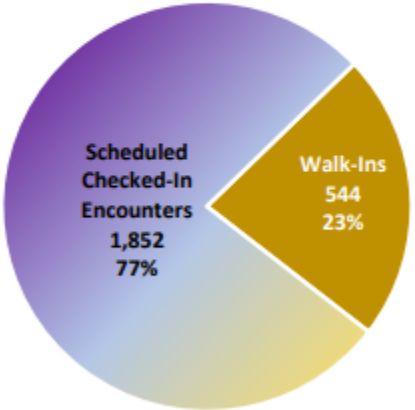


Number and percentage of Walk-Ins. Seen in April 2022 at C. L. Brumback Primary Care Clinics

Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA
April 2022

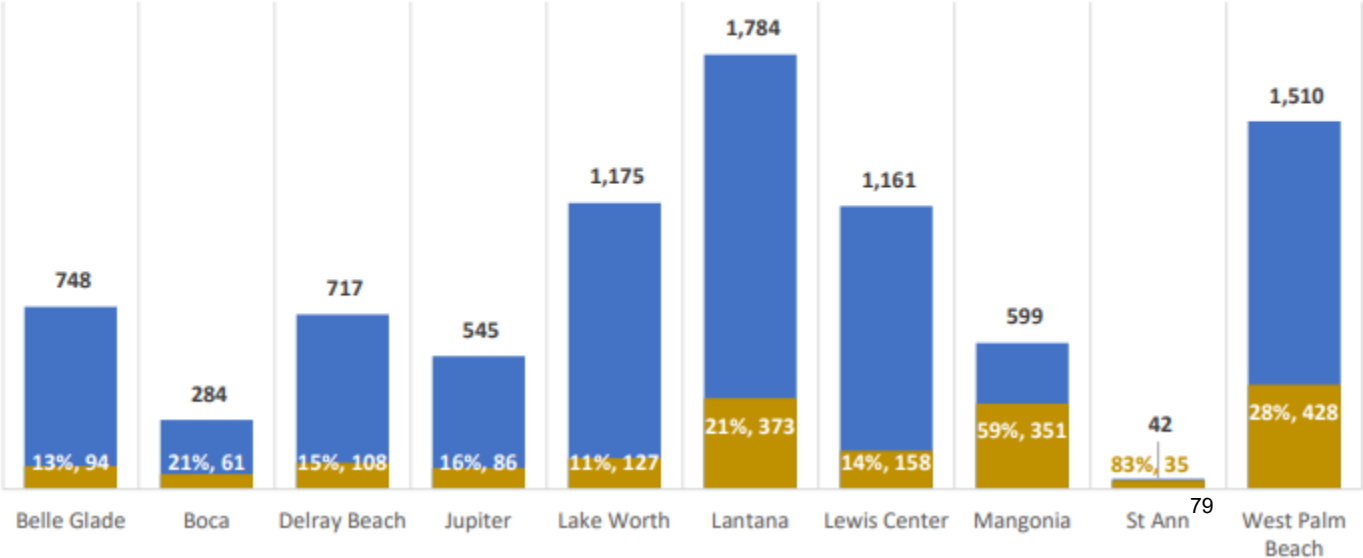


Walk-ins Dental
April 2022



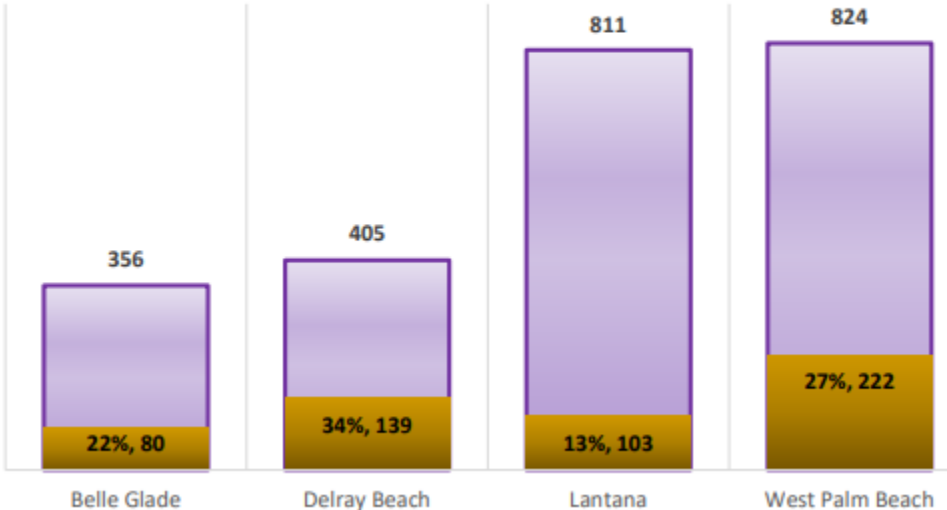
Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA by Clinic
April 2022

■ Scheduled Checked-In Encounters ■ Medical Walk-Ins



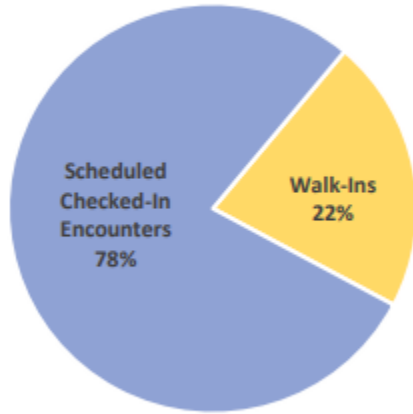
Walk-ins Dental by Clinic
April 2022

■ Scheduled Checked-In Encounters ■ Dental Walk-Ins

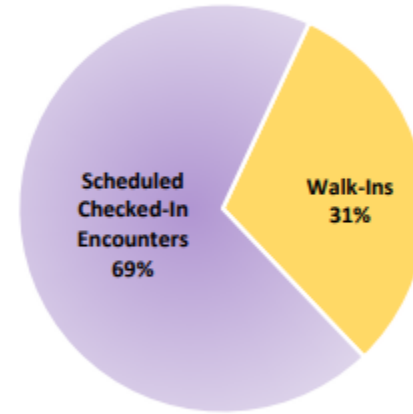


Number and percentage of Walk-Ins. Seen during May 2021 to April 2022 at C. L. Brumback Primary Care Clinics

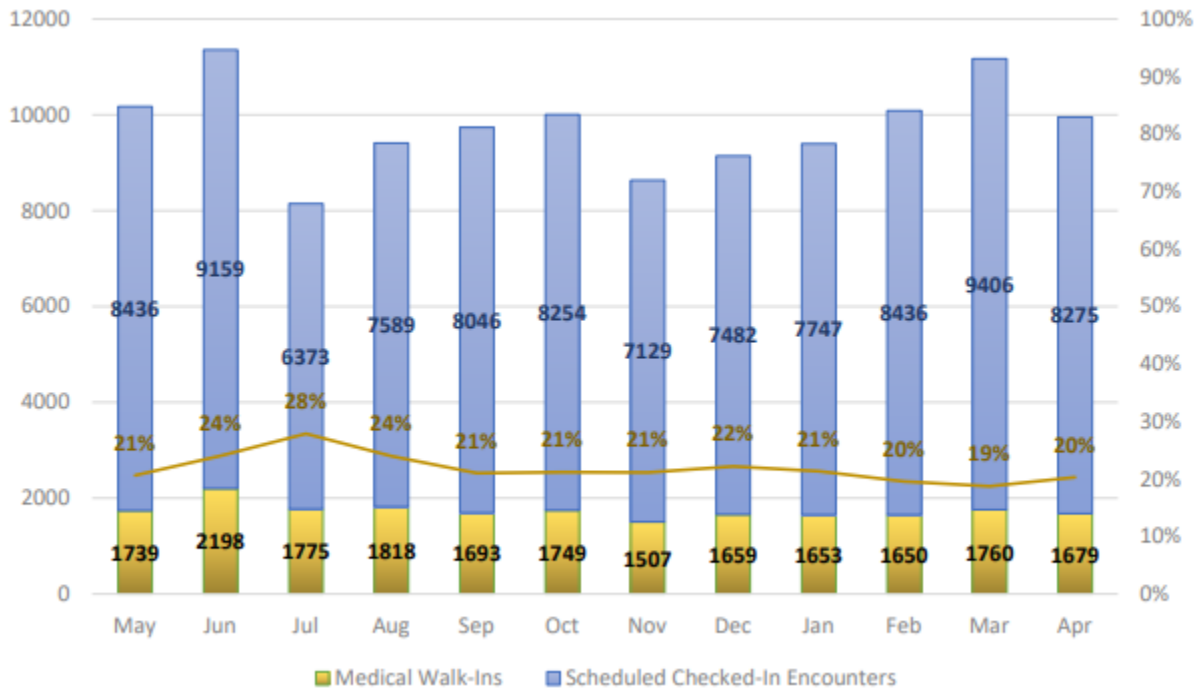
Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA
May 2021 - April 2022



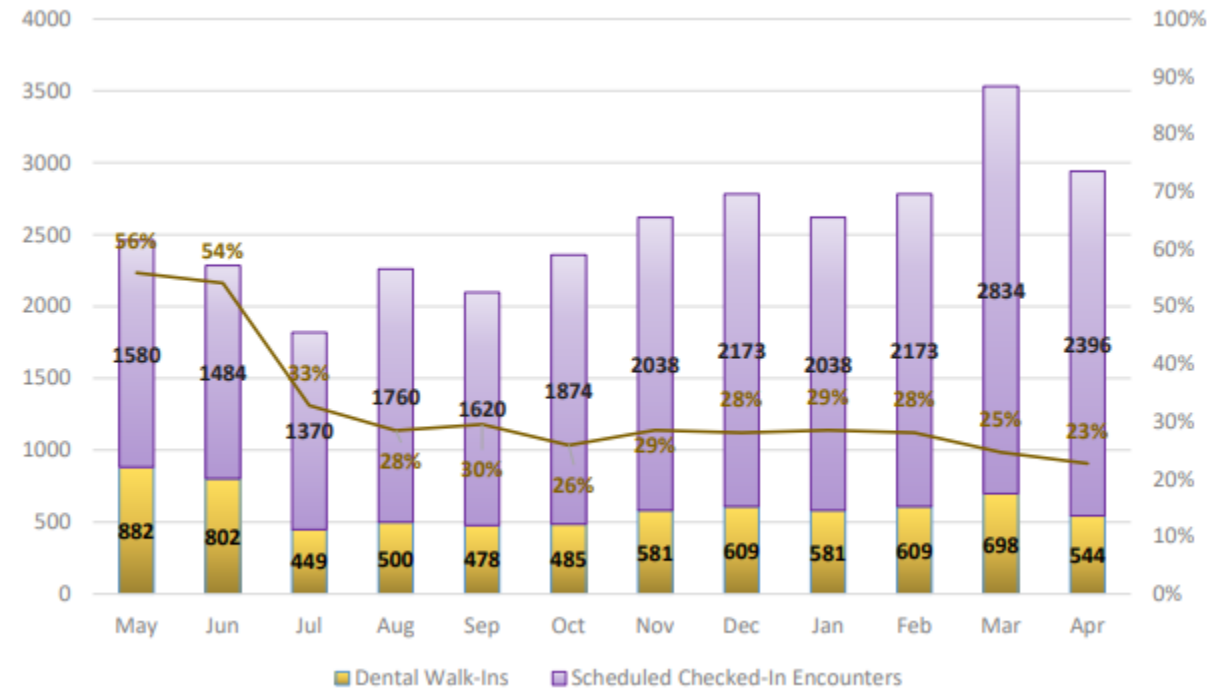
Walk-ins Dental
May 2021 - April 2022



Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA
May 2021 - April 2022



Walk-ins Dental
May 2021 - April 2022

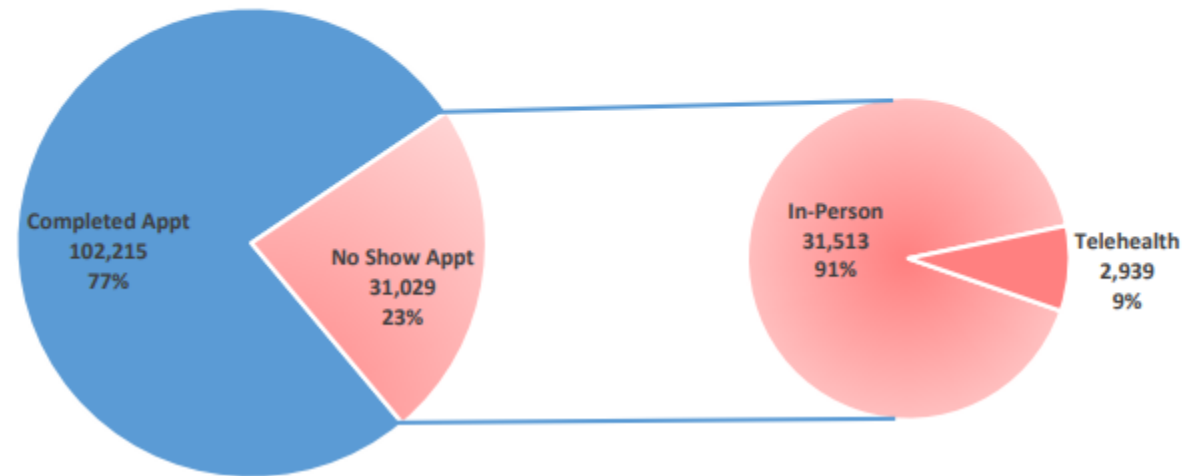
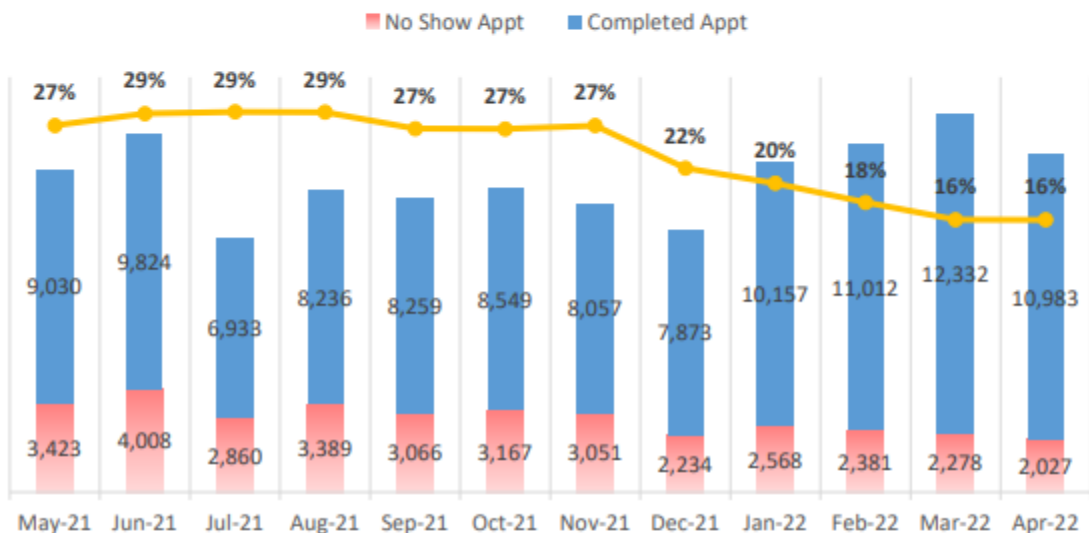


No Show Appointment Analysis

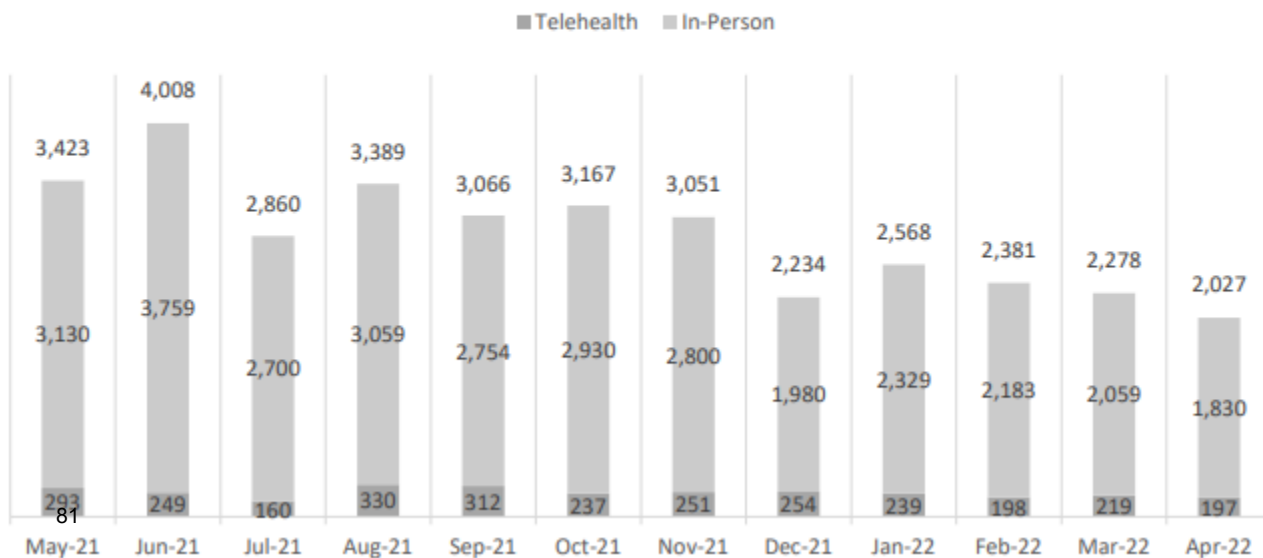
May 2021 – April 2022

(Medical, Adult Peds, Pediatric Care, Women's Health, Dental, Behavioral Health and Substance Abuse Care)

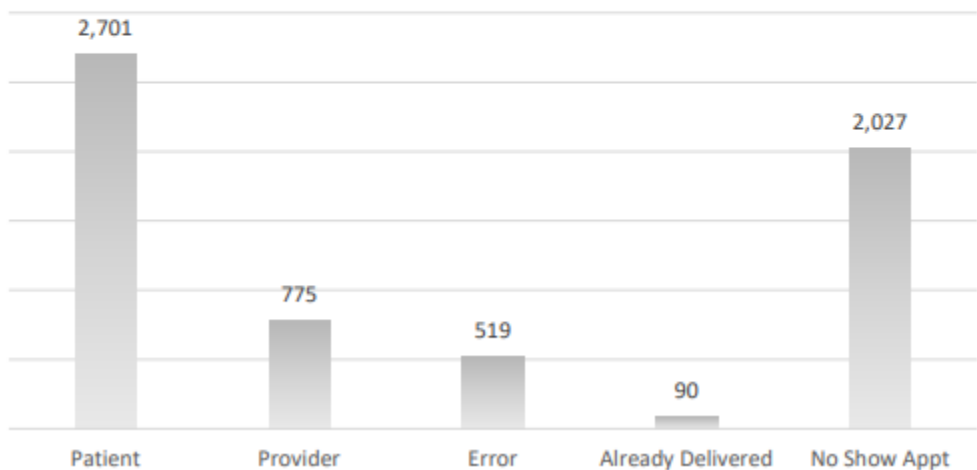
No Shows vs Checked in appointments



Telehealth vs In-Person No Shows



Top 5 Cancellation Reasons in April 2022





C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County