



C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County

BOARD OF DIRECTORS

June 26, 2019

12:45 P.M.

Meeting Location

1515 N. Flagler Drive, Suite 101

West Palm Beach, FL 33401

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

**BOARD OF DIRECTORS MEETING
AGENDA
June 26, 2019
1515 N Flagler Drive, Suite 101
West Palm Beach, FL 33401**

1. Call to Order – James Elder, Chair

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

2. Agenda Approval

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

3. Awards, Introductions and Presentations

4. Disclosure of Voting Conflict

5. Public Comment

6. Meeting Minutes

- A. **Staff recommends a MOTION TO APPROVE:**
Board Meeting Minutes of May 28, 2019.
[Pages 1-9]

7. Consent Agenda – Motion to Approve Consent Agenda Items

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

A. ADMINISTRATION

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

- 7A-2 **RECEIVE AND FILE:**
Attendance tracking.
[Page 10]

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

B. FINANCE

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

C. L. Brumback Primary Care Clinics Finance Report May 2019.
(Darcy Davis) [Pages 11-29]

C. POLICIES

7C-1 **Staff Recommends a MOTION TO APPROVE:**

Credentialing and Privileging Policy.
(Sarah Gonzalez) [Pages 30-35]

8. **Regular Agenda**

A. EXECUTIVE

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

Executive Director Informational Update.
(Belma Andric) [Pages 36-37]

B. OPERATIONS

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

Operations Reports – May 2019.
(Terry Megiveron) [Pages 38-57]

C. CREDENTIALING AND PRIVILEGING

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

Licensed Independent Practitioner Credentialing and Privileging – Arwa Alwehaib, DDS; Jennifer Dorce-Medard, DO; Aysha Momin, DDS; Elsy Navarro, APRN; Carline Vil-St.Joseph; Sandra Warren, MD.
(Sarah Gonzalez) [Pages 58-60]

D. QUALITY

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

Quality Council Reports.
(Dr. Noelle Stewart) [Pages 61-92]

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

10. **Board Member Comments**

**C. L. Brumback Primary Care Clinics
Board of Directors
Meeting Agenda
June 26, 2019**

- 11. Closed Risk Meeting [Under Separate Cover]**
Pursuant to Florida Statute Ch. 768.28, 395.0197, 766.101 and 400.119, 400.147

- 12. Establishment of Upcoming Meetings**

July 31, 2019 (HCD Board Room)

12:45pm Board of Directors

August 28, 2019 (HCD Board Room)

12:45pm Board of Directors

September 25, 2019 (HCD Board Room)

12:45pm Board of Directors

October 30, 2019 (HCD Board Room)

12:45pm Board of Directors

November 27, 2019 (HCD Board Room)

12:45pm Board of Directors

December 18, 2019 (HCD Board Room)

12:45pm Board of Directors

- 12. Motion to Adjourn**

**District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
5/28/2019**

Present: James Elder, Chairperson; Mike Smith, Treasurer; John Casey Mullen, Secretary; Shanti Howard; Julia Bullard; Cory Neering; Irene Figueroa

Excused:

Absent: Joseph Morel, Vice Chairperson

Staff: Dr. Belma Andric, CMO, VP & Executive Director of Clinical Services; Valerie Shahriari, General Counsel; Mina Bayik, Director of Finance; Terry Megiveron, Director of Business Development; Zulma Almeida Jairala, Director of FQHC Practice Operations; Dr. Tamara-Kay Tibby, Dental Director; Dr. Noelle Stewart, Medical Director; Cindy Yarborough, Chief Information Officer; Darcy Davis, CEO

Minutes Transcribed By: Jonathan Dominique

Meeting Scheduled For: 9:45 am

Meeting Began at: 9:45 am

AGENDA ITEM	DISCUSSION	ACTION
1. Call to Order 1A. Roll Call 1B. Affirmation of Mission	Mr. James Elder called the meeting to order. Roll call was taken. Mr. James Elder read the Affirmation of Mission.	The meeting was called to order at 9:45 am
2. Agenda Approval 2A. Additions/Deletions/ Substitutions	Mr. James Elder called for an approval of the meeting agenda. No additions/deletions/substitutions.	
2B. Motion to Approve Agenda Items	The agenda for the May 2019 meeting was approved as sent digitally to board members in the board package.	

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 6A Staff Recommends a MOTION TO APPROVE: Joint Board meeting minutes of March 26, 2019 6B Staff Recommends a MOTION TO APPROVE: Board Meeting Minutes of April 24, 2019	There were no changes or comments to the minutes dated March 26, 2019. There were no changes or comments to the minutes dated April 24, 2019.	VOTE TAKEN: Mr. Mullen made a motion to approve the Joint Board meeting minutes of March 26, 2019 as presented. The motion was duly seconded by Mr. Neering. A vote was called, and the motion passed unanimously. VOTE TAKEN: Mr. Smith made a motion to approve the minutes of April 24, 2019 as presented. The motion was duly seconded by Ms. Figueroa. A vote was called, and the motion passed unanimously.
7. Consent Agenda – Motion to Approve Consent Agenda Items		VOTE TAKEN: Mr. Mullen made a motion to approve the consent agenda as presented. The motion was duly seconded by Mr. Smith. A vote was called, and the motion passed unanimously.
7A. ADMINISTRATION		
7A-1. Receive & File: May 2019 Internet Posting of District Public Meeting	The meeting notice was posted.	Receive & File. No further action necessary.
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Receive & File. No further action necessary.
7A-3. Receive and File: Board member resignation – Shanti Howard	Ms. Howard has notified the C. L. Brumback Primary Care Clinics that she is resigning from her position on the board effective May 28, 2019.	Receive & File. No further action necessary.
7B. FINANCE		
7B-1. Receive and File:	Finance Report for April 2019 presented and reviewed in the Finance Committee meeting.	Motion referenced above, no further action necessary.

C.L. Brumback Primary Care Clinics Finance Report April 2019.		
7C. POLICIES		
7C-1. Staff Recommends a MOTION TO APPROVE: Revised Tracking Policies	Ms. Steele, Corporate Quality Director, presented this agenda item with updates to the Referral Tracking Policy (831-14), Diagnostic Test Results Tracking Policy (830-13) and Tracking Higher Level of Care Referrals & Hospitalizations Policy (832-14).	Motion referenced above, no further action necessary.
7D. OPERATIONS		
7D-1. Staff Recommends a MOTION TO APPROVE: Operations Report – April 2019	Mr. Megiveron, Director of Business Development presented the April 2019 overall productivity which showed that our highest percentage monthly target is currently for our Substance Abuse service-line. April 2019 productivity by location and by position shows that Boca had the highest Adult and Women’s Health percentage monthly target met; West Palm Beach had the highest Mental Health percentage monthly target met; Lantana had the highest pediatric percentage monthly target met; Belle Glade had the highest dental percentage monthly target met.	Motion referenced above, no further action necessary.
7E. EXECUTIVE		
7E-1. RECEIVE AND FILE: Executive Director Informational Update.	Dr. Andric, VP and Clinic Executive Director, provided an Executive Director informational update: HRSA-19-100 Fiscal Year 2019 Integrated Behavioral Health Services (IBHS) Supplemental Funding We submitted the grant application on 5/13/2019 requesting a Psychologist FTE and for on-site consulting services from Cherokee Health to provide continued training of our LCSW’s. Award is up to \$145,000.	Receive & File. No further action necessary.

	<p>HRSA-19-079 FY 2019 Oral Health Infrastructure (OHI) Technical Assistance</p> <p>We submitted the grant application on 5/21/2019 requesting new dental chairs/equipment across three dental clinics and other supplies to implement triple-integrated services in Lantana. Award is up to \$300,000.</p> <p>Sunshine Health Barrier Removal Fund Notification of our application proceeding to Phase 2 received 5/21/2019 for Lantana and Delray Clinics (approximately \$8,000 per clinic) to make dental services more accessible to members with intellectual and developmental disabilities, specifically - weighted blankets, noise cancelling headphones, TV or DVD player for members needed sensory accommodations to watch while getting dental services.</p> <p>NACHC CHI & EXPO Two newest board members will be joining five team members for the National Association of Community Health Center Conference in Chicago, IL in August.</p>	
<p>8. REGULAR AGENDA</p>		
<p>8A. CREDENTIALING AND PRIVILEGING</p>		
<p>8A-1. Staff Recommends a MOTION TO APPROVE: Licensed Independent Practitioner Credentialing and Privileging – Robert Rotella, DDS & Ada Seminario, DDS</p>	<p>Dr. Belma Andric, presented the following staff for re-credentialing and privileging:</p> <p>The C.L. Brumback Primary Care Clinics utilized internal Credentialing staff and the FQHC Dental Director to support the credentialing and privileging process. Presented today Dr. Robert Rotella, DDS, who joined the West Palm Beach Dental Clinic in 2015 specializing in General Dentistry – Pediatric. He attended the State University of New York at Buffalo where he also completed his residency program. Dr. Rotella has been</p>	<p>VOTE TAKEN: Mr. Elder made a motion to approve Licensed Independent Practitioner Credentialing and Privileging Dr. Robert Rotella, DDS and Dr. Ada Seminario, DDS as presented. The motion was duly seconded by Mr. Neering. A vote was called, and the motion passed unanimously.</p>

	<p>practicing for over 35 years and enjoys working with the indigent population.</p> <p>Dr. Ada Seminario, DDS joined the Belle Glade Dental Clinic in 2015 specializing in General Dentistry. She attended the Universidad Peruana Cayetano Heredia and completed her residency at the University of Connecticut Health Center. Dr. Seminario has been practicing for over 20 years, is fluent in Spanish and believes in accessible dental care for all communities.</p>	
<p>8B. QUALITY</p>		
<p>8B-1. Staff Recommends a MOTION TO APPROVE: Quality Council Reports – May 2019.</p>	<p>Dr. Noelle Stewart, Medical Director, presented the highlights of Quality Council Minutes for May 10, 2019 and the year to date UDS report dated April 2019.</p> <p><u>QUALITY</u> Of the 14 UDS Measures: 7 Exceeded the HRSA Goal and 7 were short of the HRSA Goal. Interventions were defined.</p> <p>We have started using Tableau which is a data dashboard that will allow us to review trends and patterns in quality and utilization in our patient population. This tool will be used to inform and support any changes in the provision of services that may be necessary.</p> <p>We are training all of our Adult providers to treat alcohol use disorder thereby improving their level of comfort with treatment of this disease.</p> <p>Pharmacy is now delivering medications to the Mobile clinic and Jupiter clinic.</p>	

UTILIZATION

We have been reviewing our lab invoices from Quest labs for analysis and trends.

Our medical dental integration (MDI) in Lantana serviced 431 pediatric patients in April. Of those 49 children were sent to dental for full evaluation and treatment.

PATIENT SATISFACTION

In June, we will implement ongoing Patient Satisfaction Surveys in order to identify and address satisfaction issues in real time rather than on an annual basis.

RISK

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

Mr. Smith voiced concern about Providers not dropping weight counseling

Dr. Stewart Explained that providers are providing weight counseling, it is just that they sometimes aren't using tools that are captured by the data reporting system. Tools such as informational pamphlets, text notifications, documenting in the chart that counseling was provided, etc. It's just a matter of these actions not being captured.

Mr. Neering Made point about satisfaction surveys, the process asking about how the data will be collected efficiently and made a point of inquiring about the follow-up process with the surveys.

In response to Mr. Neering's questions. Andrea Steele, Director of Corporate Quality, informed the board that a

	<p>new position, Manager of Patient Experience, has been created to focus on the patient experience and patient satisfaction surveys. David Speciale will be transitioning to this role.</p> <p>Mr. Smith asked if the content of the surveys dictated by compliance regulations.</p> <p>Dr. Andric informed that the survey questions are specific questions required for patients at a medical home. They are defined questions that, based on national guidelines, are required for the clinics to ask.</p>	
<p>9. CMO, VP and Executive Director of Clinical Services Comments</p>	<p>Dr. Andric welcomed the board members to the clinic reveal.</p> <p>Dr. Andric stated that DCH is still awaiting the Firewall and AHCA permits in order to open the clinic to the general public.</p> <p>HRSA-19-100 Fiscal Year 2019 Integrated Behavioral Health Services (IBHS) Supplemental Funding</p> <p>We submitted the grant application on 5/13/2019 requesting a Psychologist FTE and for on-site consulting services from Cherokee Health to provide continued training of our LCSW's. Award is up to \$145,000.</p> <p>HRSA-19-079 FY 2019 Oral Health Infrastructure (OHI) Technical Assistance</p> <p>We submitted the grant application on 5/21/2019 requesting new dental chairs/equipment across three dental clinics and other supplies to implement triple-integrated services in Lantana. Award is up to \$300,000.</p>	<p>No action necessary.</p>

	<p>Sunshine Health Barrier Removal Fund Notification of our application proceeding to Phase 2 received 5/21/2019 for Lantana and Delray Clinics (approximately \$8,000 per clinic) to make dental services more accessible to members with intellectual and developmental disabilities, specifically - weighted blankets, noise cancelling headphones, TV or DVD player for members needed sensory accommodations to watch while getting dental services.</p> <p>NACHC CHI & EXPO Two newest board members (Mr. Smith and Ms. Bullard) will be joining five team members for the National Association of Community Health Center Conference in Chicago, IL in August.</p>	
<p>10. Board Member Comments</p>	<p>None.</p> <p>Mr. Neering congratulated the staff and team on the work done. Speaks on history and changes made in providing access to quality healthcare in the Belle Glade/ Palm Beach County area.</p> <p>Dr. Andric responds thanking Mr. Neering for his comments. Speaks on the history of the Health Care District's investment in the Belle Glade Community.</p> <p>Mr. Butler asked about the HCD's approach in the sense of public relations to let the local community know about the new clinic.</p> <p>Dr. Andric responded stating that the HCD is holding off on advertisement as the clinic is not yet officially open. But will conduct a strong advertising campaign once the clinic is ready to open.</p> <p>Darcy Davis, CEO reminded the board members that if they are interested in the Documents in the Packets, they are free to take them, but to leave the binders behind.</p>	<p>No action necessary.</p>

<p>11. Establishment of Upcoming Meetings</p>	<p>2019 Board of Directors Meetings were approved at the November 28, 2018 Board meeting.</p> <p>Board meeting are held at the Health Care District Board Room at 1515 N. Flagler Drive, West Palm Beach, FL 33401. Meetings start at 12:45 PM:</p> <ul style="list-style-type: none"> • June 26, 2019 • July 31, 2019 • August 28, 2019 • September 25, 2019 • October 30, 2019 • November 27, 2019 • December 18, 2019 	<p>No action necessary.</p>
<p>13. Motion to Adjourn</p>	<p>There being no further business, the meeting was adjourned.</p>	<p>Mr. Elder made a motion to adjourn and seconded by Mr. Mullen. The meeting was adjourned.</p>

Minutes Submitted by: _____
Signature
Date

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

Attendance Tracking

	1/30/19	2/27/19	3/26/19	3/27/19	4/24/19	5/28/19	6/26/19	7/31/19	8/28/19	9/25/19	10/30/19	11/27/19	12/18/19
James Elder	X	X	X	X	X	X							
Irene Figueroa	X	X	X	X	A	X							
John Casey Mullen	X	X	X	X	X	X							
Shanti Howard	E	X	E	X	X	X							
Cory M. Neering	X	E	E	E	X	X							
Joan Roude	X	X											
Joseph Morel	X	X	X	X	X	A							
Julia Bullard	X	X	X	X	X	X							
Mike Smith		X	X	X	X	X							
Gary Butler				X	X	X							

X= Present

C= Cancel

E= Excused

A= Absent

DISTRICT CLINIC HOLDINGS, INC
BOARD OF DIRECTORS
June 26, 2019

1. Description: District Clinic Holdings, Inc. Financial Report May 2019

2. Summary:

The YTD May 2019 financial statements for the District Clinic Holdings, Inc. are presented for Board review.

3. Substantive Analysis:

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

4. Fiscal Analysis & Economic Impact Statement:

	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:



 Darcy J. Davis
 Chief Executive Officer

5. Reviewed/Approved by Committee:

Finance Committee

 Committee Name

6/26/2019

 Date Approved

DISTRICT CLINIC HOLDINGS, INC
BOARD OF DIRECTORS
June 26, 2019

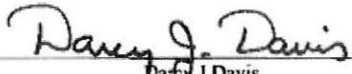
6. Recommendation:

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


Approved for Legal sufficiency:



Christy Goddeeris for Valerie Shahriani
VP & General Counsel



Darryl J Davis
Chief Executive Officer



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

MEMO

To: Finance Committee
From: Darcy J. Davis
Chief Executive Officer
Date: June 17, 2019

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

The May statements represent the financial performance for the first eight months of the 2019 fiscal year for C. L. Brumback.

Volume Analysis

Total medical clinic visits in all adult and pediatric clinics of 69,084 are 2,992 (4.2%) under the budget of 72,076 and 1,405 (2.1%) under the prior year of 67,679. Total dental visits of 18,382 are 4,753 (20.5%) under the budget of 23,135 and 2,745 (13.0%) under the prior year of 21,127.

Net Revenue

Clinic Medical net patient revenue of \$6.1M is \$1.3M (26.6%) over the budget of \$4.8M and \$1.7M (21.9%) under the prior year of \$7.9M. Medical net patient revenue per visit is \$88.77 compared to the budget of \$67.22 and prior year of \$116.06. Clinic Dental net patient revenue of \$1.9M is \$367k (24.1%) over the budget of \$1.5M and \$1.3M (40.1%) under the prior year of \$3.2M. Dental net patient revenue per visit is \$102.94 compared to the budget of \$65.92 and prior year of \$149.41. For both Clinic Medical and Clinic Dental, the positive variance in actual to budget net patient revenue per visit was caused by the unbudgeted HCD subsidy and LIP payments.

Expenses

Variances in expenses were caused by the following: savings and timing in salaries (\$130k), benefits (\$207k), medical supplies (\$72k), medical services (\$225k), drugs (\$45k), and other expense (\$69k) were partially offset by overages in purchased services (\$50k), other supplies (\$91k), repairs & maintenance (\$181k), and lease & rental (\$11k), resulting in a favorable net variance of \$425k in total Clinic operating expense. Clinic Medical operating expenses of \$13.4M are \$269k (2.0%) under the budget of \$13.7M and \$996k (8.0%) over the prior year of \$12.4M. Savings in salaries (\$64k), benefits (\$171k), medical services (\$225k), and other expenses (\$65k) are the main contributors to the favorable variance. Clinic Dental operating expenses of \$3.06M are \$156k (4.9%) under the budget of \$3.2M and \$99k (3.4%) over the prior year of \$2.95M. Savings in salaries (\$67k), benefits (\$36k), purchased services (\$30k), and medical supplies (\$41k) contribute to the favorable variance.

DISTRICT CLINIC HOLDINGS, INC.
COMPARATIVE STATEMENT OF NET POSITION

	<u>May 31, 2019</u>	<u>Apr 30, 2019</u>	<u>Increase (Decrease)</u>
Assets			
Cash and Cash Equivalents	(907,934)	1,167,574	\$ (2,075,507)
Accounts Receivable, net	1,121,830	1,365,927	(244,096)
Due From Other Funds			-
Due from Other Governments	3,242,361	1,388,052	1,854,308
Other Current Assets	136,968	130,182	6,786
Net Investment in Capital Assets	1,479,138	1,465,655	13,484
Total Assets	<u>\$ 5,072,364</u>	<u>\$ 5,517,390</u>	<u>\$ (445,026)</u>
Liabilities			
Accounts Payable	571,923	250,178	321,745
Due To Other Governments	-	-	-
Deferred Revenue	44,346	45,880	(1,534)
Other Current Liabilities	746,403	1,121,239	(374,835)
Non-Current Liabilities	797,053	797,053	-
Total Liabilities	<u>2,159,726</u>	<u>2,214,350</u>	<u>(54,624)</u>
Deferred Inflows of Resources			
Deferred Inflows- Other Post Employment Benefits	<u>\$ 612</u>	<u>\$ 612</u>	<u>\$ -</u>
Net Position			
Net Investment in Capital Assets	1,479,138	1,465,655	13,484
Unrestricted	1,432,888	1,836,773	(403,885)
Total Net Position	<u>2,912,026</u>	<u>3,302,428</u>	<u>(390,401)</u>
Total Liabilities, Deferred Inflows of Resources and Net Position	<u>\$ 5,072,364</u>	<u>\$ 5,517,390</u>	<u>\$ (445,026)</u>

Note: Amounts may not foot due to rounding.

District Clinics Holdings, Inc. Statement of Revenues and Expenses

FOR THE EIGHTH MONTH ENDED MAY 31, 2019

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
1,900,160	2,116,206	(216,046)	(10.2%)	1,729,846	170,313	9.8%	14,853,035	15,882,605	(1,029,570)	(6.5%)	14,819,209	33,826	0.2%
Gross Patient Revenue													
435,326	489,822	54,496	11.1%	828,230	392,904	47.4%	5,938,894	3,748,104	(2,190,790)	(58.5%)	5,585,374	(353,520)	(6.3%)
689,798	818,223	128,425	15.7%	259,306	(430,492)	(166.0%)	3,750,841	6,092,036	2,341,195	38.4%	2,824,156	(926,685)	(32.8%)
283,556	210,998	(72,558)	(34.4%)	22,862	(260,694)	(1,140.3%)	1,417,958	1,570,983	153,025	9.7%	1,169,444	(248,514)	(21.3%)
1,408,681	1,519,043	110,362	7.3%	1,110,398	(298,283)	(26.9%)	11,107,693	11,411,123	303,430	2.7%	9,578,974	(1,528,720)	(16.0%)
335,800	237,340	98,460	41.5%	1,790,782	(1,454,982)	(81.2%)	4,279,470	1,898,720	2,380,750	125.4%	5,771,116	(1,491,646)	-26%
827,279	834,503	(7,224)	(0.9%)	2,410,230	(1,582,951)	(65.7%)	8,024,812	6,370,202	1,654,610	26.0%	11,011,352	(2,986,540)	(27.1%)
43.54%	39.43%			139.33%			54.03%	40.11%			74.30%		
1,688,647	612,532	1,076,115	175.7%	706,398	982,249	139.1%	9,157,569	5,719,408	3,438,161	60.1%	5,044,108	4,113,461	81.5%
4,680	14,968	(10,288)	(68.7%)	64,999	(60,318)	(92.8%)	66,321	124,863	(58,542)	(46.9%)	232,836	(166,515)	(71.5%)
1,693,328	627,500	1,065,828	169.9%	771,396	921,931	119.5%	9,223,890	5,844,271	3,379,619	57.8%	5,276,944	3,946,946	74.8%
2,520,606	1,462,003	1,058,603	72.4%	3,181,626	(661,020)	(20.8%)	17,248,702	12,214,473	5,034,229	41.2%	16,288,296	960,406	5.9%
<i>Direct Operational Expenses:</i>													
1,459,040	1,385,841	(73,199)	(5.3%)	1,415,855	(43,185)	(3.1%)	10,459,482	10,589,826	130,345	1.2%	9,856,023	(603,459)	(6.1%)
372,646	393,935	21,289	5.4%	357,361	(15,284)	(4.3%)	2,801,375	3,008,222	206,847	6.9%	2,637,429	(163,945)	(6.2%)
128,618	63,197	(65,421)	(103.5%)	53,008	(75,610)	(142.6%)	568,658	518,649	(50,009)	(9.6%)	467,563	(101,095)	(21.6%)
47,947	47,753	(194)	(0.4%)	35,160	(12,788)	(36.4%)	277,223	349,131	71,908	20.6%	328,523	51,300	15.6%
133,496	24,731	(108,765)	(439.8%)	44,476	(89,020)	(200.2%)	329,015	237,568	(91,447)	(38.5%)	108,807	(220,207)	(202.4%)
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	15,355	15,355	100.0%
22,612	66,279	43,667	65.9%	-	(22,612)	0.0%	264,000	489,225	225,225	46.0%	-	(264,000)	0.0%
68,819	55,313	(13,506)	(24.4%)	40,454	(28,365)	(70.1%)	363,276	407,848	44,572	10.9%	382,387	19,111	5.0%
39,735	7,131	(32,604)	(457.2%)	92,624	52,890	57.1%	291,415	110,385	(181,030)	(164.0%)	354,483	63,069	17.8%
114,139	95,886	(18,253)	(19.0%)	122,460	8,321	6.8%	900,227	889,489	(10,738)	(1.2%)	973,261	73,035	7.5%
8,883	6,251	(2,632)	(42.1%)	9,388	505	5.4%	44,832	50,008	5,176	10.4%	50,751	5,920	11.7%
10,156	32,639	22,483	68.9%	11,680	1,524	13.1%	150,878	220,091	69,213	31.4%	182,737	31,859	17.4%
2,214	2,366	152	6.4%	1,883	(331)	(17.6%)	14,497	19,237	4,740	24.6%	12,521	(1,976)	(15.8%)
2,408,304	2,181,322	(226,982)	(10.4%)	2,184,349	(223,955)	(10.3%)	16,464,875	16,889,679	424,804	2.5%	15,369,842	(1,095,034)	(7.1%)
Net Performance before Depreciation & Overhead Allocations													
112,302	(719,319)	831,621	(115.6%)	997,277	(884,975)	(88.7%)	783,826	(4,675,206)	5,459,032	(116.8%)	918,455	(134,628)	(14.7%)

District Clinics Holdings, Inc. Statement of Revenues and Expenses

FOR THE EIGHTH MONTH ENDED MAY 31, 2019

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
13,156	21,815	8,659	39.7%	16,972	3,816	22.5%	Depreciation	105,520	168,798	63,278	37.5%	136,464	30,943	22.7%
<i>Overhead Allocations:</i>														
407	12,715	12,308	96.8%	9,838	9,431	95.9%	Risk Mgt	24,885	101,720	76,835	75.5%	77,516	52,631	67.9%
91,067	91,067	-	0.0%	16,506	(74,561)	(451.7%)	Rev Cycle	728,536	728,536	-	0.0%	341,497	(387,039)	(113.3%)
5,406	5,559	153	2.7%	5,377	(29)	(0.5%)	Internal Audit	42,216	44,472	2,256	5.1%	19,115	(23,101)	(120.8%)
18,734	20,787	2,053	9.9%	36,418	17,684	48.6%	Palm Springs Facility	150,543	166,296	15,753	9.5%	203,919	53,376	26.2%
24,884	24,923	39	0.2%	17,828	(7,056)	(39.6%)	Administration	199,345	199,384	39	0.0%	201,401	2,056	1.0%
35,165	34,245	(920)	(2.7%)	34,524	(641)	(1.9%)	Human Resources	271,738	273,960	2,222	0.8%	231,448	(40,290)	(17.4%)
12,733	12,733	-	0.0%	14,375	1,642	11.4%	Legal	101,864	101,864	-	0.0%	81,602	(20,262)	(24.8%)
7,156	8,444	1,288	15.3%	10,701	3,546	33.1%	Records	50,075	67,552	17,477	25.9%	54,358	4,283	7.9%
7,033	11,698	4,665	39.9%	5,303	(1,730)	(32.6%)	Compliance	51,530	93,584	42,054	44.9%	47,640	(3,890)	(8.2%)
-	1,428	1,428	100.0%	1,250	1,250	100.0%	Planning/Research	5,582	11,424	5,842	51.1%	14,581	8,999	61.7%
30,964	34,893	3,929	11.3%	30,126	(837)	(2.8%)	Finance	237,584	279,144	41,560	14.9%	223,304	(14,279)	(6.4%)
11,862	13,149	1,287	9.8%	8,045	(3,817)	(47.5%)	Public Relations	64,974	105,192	40,218	38.2%	56,972	(8,003)	(14.0%)
125,735	99,679	(26,056)	(26.1%)	110,642	(15,093)	(13.6%)	Information Technology	719,272	797,432	78,160	9.8%	655,294	(63,979)	(9.8%)
-	-	-	0.0%	-	-	0.0%	Budget & Decision Support	-	-	-	0.0%	13,118	13,118	100.0%
1,828	2,714	886	32.7%	3,945	2,117	53.7%	Corporate Quality	19,759	21,712	1,953	9.0%	27,454	7,696	28.0%
4,500	5,764	1,264	21.9%	7,962	3,462	43.5%	Managed Care Contract	28,624	46,112	17,488	37.9%	46,537	17,913	38.5%
377,474	379,798	2,324	0.6%	312,840	(64,634)	(20.7%)	Total Overhead Allocations	2,696,526	3,038,384	341,858	11.3%	2,295,756	(400,770)	(17.5%)
2,798,935	2,582,935	(216,000)	(8.4%)	2,514,161	(284,773)	(11.3%)	Total Expenses	19,266,922	20,096,861	829,939	4.1%	17,802,062	(1,464,860)	(8.2%)
\$ (278,328)	\$ (1,120,932)	\$ 842,604	(75.2%)	\$ 667,465	\$ (945,793)	(141.7%)	Net Margin	\$ (2,018,220)	\$ (7,882,388)	\$ 5,864,168	(74.4%)	\$ (1,513,766)	\$ (504,455)	(33.3%)
112,074	-	(112,074)	0.0%	(40,825)	(152,899)	374.5%	Capital	112,074	1,221,688	1,109,614	90.8%	-	(112,074)	0.0%
\$ -	\$ 1,087,500	\$ 1,087,500	100.0%	\$ 100,000	\$ 100,000	100.0%	General Fund Support/ Transfer In	\$ 2,627,860	\$ 8,700,000	\$ 6,072,140	69.8%	\$ 2,170,000	\$ (457,860)	(21.1%)

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

	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Year to Date
Gross Patient Revenue	1,946,640	1,491,722	2,006,898	1,645,818	1,905,360	1,935,491	2,020,946	1,900,160	-	-	-	-	14,853,035
Contractual Allowances	629,927	523,761	955,352	869,362	704,192	909,476	911,498	435,326	-	-	-	-	5,938,894
Charity Care	522,280	370,440	411,855	348,213	541,362	394,786	472,106	689,798	-	-	-	-	3,750,841
Bad Debt	209,421	136,222	187,946	107,004	224,566	85,698	183,544	283,556	-	-	-	-	1,417,958
Other Patient Revenue	185,546	460,636	346,606	1,379,115	478,512	490,512	602,746	335,800	-	-	-	-	4,279,470
Net Patient Revenue	770,557	921,934	798,350	1,700,355	913,751	1,036,042	1,056,544	827,279	-	-	-	-	8,024,812
Collections %	39.58%	61.80%	39.78%	103.31%	47.96%	53.53%	52.28%	43.54%	-	-	-	-	54.03%
Grant Funds	574,778	606,454	690,034	1,616,221	1,355,777	1,496,682	1,128,976	1,688,647	-	-	-	-	9,157,569
Other Revenue	4,645	8,821	24,768	6,149	3,627	9,704	3,928	4,680	-	-	-	-	66,321
Total Other Revenues	579,423	615,275	714,802	1,622,369	1,359,404	1,506,386	1,132,904	1,693,328	-	-	-	-	9,223,890
Total Revenues	1,349,980	1,537,209	1,513,151	3,322,725	2,273,156	2,542,428	2,189,447	2,520,606	-	-	-	-	17,248,702
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,387,450	1,190,417	1,317,029	1,213,339	1,197,291	1,332,097	1,362,818	1,459,040	-	-	-	-	10,459,482
Benefits	339,645	322,045	314,881	366,759	347,313	365,610	372,476	372,646	-	-	-	-	2,801,375
Purchased Services	65,028	68,614	50,770	82,094	51,993	54,666	66,875	128,618	-	-	-	-	568,658
Medical Supplies	41,828	27,305	14,573	29,201	46,174	32,270	37,924	47,947	-	-	-	-	277,223
Other Supplies	34,148	3,947	2,672	28,292	36,989	36,467	53,003	133,496	-	-	-	-	329,015
Contracted Physician Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical Services	58,809	(461)	19,144	25,930	78,155	25,831	33,980	22,612	-	-	-	-	264,000
Drugs	47,555	37,534	36,129	31,431	37,448	32,329	72,032	68,819	-	-	-	-	363,276
Repairs & Maintenance	29,881	36,555	32,150	30,986	31,031	41,024	50,051	39,735	-	-	-	-	291,415
Lease & Rental	109,171	104,594	104,526	114,021	108,872	133,369	111,536	114,139	-	-	-	-	900,227
Utilities	4,568	6,558	5,313	5,904	4,092	4,376	5,138	8,883	-	-	-	-	44,832
Other Expense	15,526	(576)	24,682	22,887	23,732	33,511	20,962	10,156	-	-	-	-	150,878
Insurance	2,425	2,170	2,170	2,170	2,170	2,170	(990)	2,214	-	-	-	-	14,497
Total Operational Expenses	2,136,034	1,798,702	1,924,039	1,953,014	1,965,259	2,093,719	2,185,804	2,408,304	-	-	-	-	16,464,875
Net Performance before Depreciation & Overhead Allocations	(786,055)	(261,492)	(410,887)	1,369,711	307,896	448,708	3,643	112,302	-	-	-	-	783,826
Depreciation	17,256	17,256	5,158	13,224	13,157	13,156	13,156	13,156	-	-	-	-	105,520
<i>Overhead Allocations:</i>													
Risk Mgt	9,302	16,111	8,246	(15,331)	1,744	2,172	2,233	407	-	-	-	-	24,885
Rev Cycle	86,904	98,059	124,187	100,095	94,850	42,307	91,067	91,067	-	-	-	-	728,536
Internal Audit	5,120	5,120	5,120	5,120	5,222	5,718	5,389	5,406	-	-	-	-	42,216
Palm Springs Facility	17,032	16,269	16,141	23,398	19,430	20,583	18,956	18,734	-	-	-	-	150,543
Administration	24,974	26,124	21,164	26,766	23,790	26,720	24,923	24,884	-	-	-	-	199,345
Human Resources	33,486	34,265	34,863	38,678	32,527	31,650	31,103	35,165	-	-	-	-	271,738
Legal	6,468	11,903	8,094	34,857	15,627	(551)	12,733	12,733	-	-	-	-	101,864
Records	6,520	6,452	6,067	6,656	5,239	6,258	5,727	7,156	-	-	-	-	50,075
Compliance	5,776	7,197	3,605	6,283	4,168	12,918	4,550	7,033	-	-	-	-	51,530
Planning/Research	1,340	1,281	1,209	1,325	426	0	-	-	-	-	-	-	5,582
Finance	24,095	32,875	22,630	39,695	23,194	26,486	37,644	30,964	-	-	-	-	237,584
Public Relations	6,478	6,365	7,466	7,466	7,077	8,264	9,126	11,862	-	-	-	-	64,974
Information Technology	80,379	69,273	97,329	86,977	82,158	90,638	86,782	125,735	-	-	-	-	719,272
Budget & Decision Support	-	-	-	-	-	-	-	-	-	-	-	-	-
Corporate Quality	3,986	3,764	2,150	2,591	2,015	1,778	1,647	1,828	-	-	-	-	19,759
Managed Care Contract	3,421	4,019	3,039	3,676	3,234	3,502	3,233	4,500	-	-	-	-	28,624
Total Overhead Allocations	315,282	339,079	362,180	368,255	320,701	278,442	335,113	377,474	-	-	-	-	2,696,526
Total Expenses	2,468,573	2,155,037	2,291,377	2,334,492	2,299,117	2,385,318	2,534,074	2,798,935	-	-	-	-	19,266,922
Net Margin	\$ (1,118,593)	\$ (617,827)	\$ (778,226)	\$ 988,232	\$ (25,961)	\$ 157,110	\$ (344,627)	\$ (278,328)	\$ -	\$ -	\$ -	\$ -	\$ (2,018,220)
Capital	-	-	(13,581)	13,581	1,752	(1,752)	-	112,074	-	-	-	-	112,074
General Fund Support/ Transfer In	1,101,337	596,437	930,086	-	-	-	-	-	-	-	-	-	\$ 2,627,860

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

FOR THE EIGHTH MONTH ENDED MAY 31, 2019

	Clinic Administration	West Palm Beach Clinic	Lantana Clinic	Delray Clinic	Belle Glade Clinic	Jerome Golden Center	Lewis Center	Rams Clinic	Lake Worth Clinic	Jupiter Clinic	West Boca Clinic	Subxone Clinic	Mobile Van	Total
Gross Patient Revenue	-	2,321,463	2,488,570	1,791,408	1,194,639	-	550,438	-	1,811,683	687,121	1,172,506	-	223,740	12,241,567
Contractual Allowances	-	1,101,756	890,029	889,986	562,045	(837)	284,286	250	710,969	243,380	504,747	-	86,534	5,273,145
Charity Care	-	509,034	640,848	294,752	173,405	2,994	122,887	-	450,432	125,059	216,474	-	45,843	2,581,726
Bad Debt	-	228,841	367,198	208,191	180,412	6,302	99,592	(249)	108,605	19,587	61,473	-	49,998	1,329,950
Total Contractual Allowances and Bad Debt	-	1,839,632	1,898,075	1,392,928	915,862	8,459	506,765	1	1,270,006	388,026	782,694	-	182,374	9,184,821
Other Patient Revenue	-	623,628	623,317	417,307	297,684	2,926	120,763	-	518,419	148,480	262,925	-	60,395	3,075,843
Net Patient Revenue	-	1,105,459	1,213,812	815,786	576,461	(5,533)	164,436	(1)	1,060,096	447,575	652,737	-	101,761	6,132,589
Collection %	0.00%	47.62%	48.78%	45.54%	48.25%	0.00%	29.87%	0.00%	58.51%	65.14%	55.67%	0.00%	45.48%	50.10%
Grant Funds	954,958	1,041,556	984,845	863,858	1,322,027	-	242,893	-	1,004,627	350,686	448,152	82,008	311,986	7,607,595
Other Revenue	23,439	4,921	1,456	2,363	7,737	-	258	-	3,905	7,398	1,099	13,506	6	66,088
Total Other Revenues	978,397	1,046,477	986,301	866,221	1,329,764	-	243,151	-	1,008,531	358,084	449,252	95,514	311,992	7,673,683
Total Revenues	978,397	2,151,935	2,200,113	1,682,007	1,906,225	(5,533)	407,587	(1)	2,068,627	805,659	1,101,989	95,514	413,753	13,806,271
<i>Direct Operational Expenses:</i>														
Salaries and Wages	1,208,620	1,325,593	1,241,563	1,072,472	698,507	-	297,745	-	1,256,723	438,283	568,677	281,841	181,406	8,571,431
Benefits	244,823	319,057	345,345	323,227	183,292	-	78,080	-	370,107	123,872	154,928	68,237	58,474	2,269,441
Purchased Services	126,145	63,640	46,680	39,867	43,209	-	6,457	-	77,001	44,146	51,364	-	4,504	503,013
Medical Supplies	-	15,843	45,024	9,741	10,529	-	5,066	-	16,992	5,605	5,571	-	568	114,939
Other Supplies	31,255	12,518	34,462	4,344	65,417	-	2,079	-	8,207	1,327	6,908	39,864	4,263	210,642
Contracted Physician Expense	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical Services	-	39,100	39,139	34,816	31,445	-	5,908	-	74,228	7,946	31,417	-	-	264,000
Drugs	-	91,190	104,355	74,046	24,651	-	923	-	31,771	13,855	1,284	18,924	984	361,984
Repairs & Maintenance	-	41,380	40,278	40,778	25,385	-	6,853	-	41,649	15,711	23,794	2,400	4,775	243,004
Lease & Rental	50	91,992	105,926	61,357	128,511	5,013	3,218	-	154,946	52,751	85,912	-	-	689,676
Utilities	-	744	2,667	816	15,172	-	1,451	-	8,360	4,664	3,988	-	-	37,862
Other Expense	79,074	7,062	3,811	4,525	6,299	-	3,302	-	9,923	3,848	6,353	250	3,116	127,563
Insurance	-	2,565	2,082	1,850	660	148	-	-	552	295	333	-	5,642	14,128
Total Operational Expenses	1,689,967	2,010,686	2,011,333	1,667,839	1,233,077	5,161	411,082	-	2,050,459	712,302	940,529	411,517	263,732	13,407,683
Net Performance before Depreciation & Overhead Allocations	(711,570)	141,249	188,780	14,168	673,148	(10,694)	(3,495)	(1)	18,168	93,357	161,460	(316,003)	150,021	398,589
Depreciation	5,682	3,682	3,048	1,198	1,672	504	858	83	4,839	3,417	3,197	-	50,000	78,180
<i>Overhead Allocations:</i>														
Risk Mgt	2,551	2,742	2,740	2,421	1,556	-	576	-	3,196	1,095	1,643	1,025	462	20,006
Rev Cycle	-	90,736	90,656	80,120	51,480	-	19,048	-	105,744	36,232	54,344	33,928	15,272	577,560
Internal Audit	4,327	4,652	4,648	4,108	2,639	-	977	-	5,422	1,857	2,786	1,739	783	33,938
Palm Springs Facility Administration	133,929	-	-	-	-	-	-	-	-	-	-	-	-	133,929
Human Resources	20,432	21,968	21,952	19,400	12,464	-	4,616	-	25,608	8,776	13,160	8,216	3,696	160,288
Legal	16,863	34,851	32,716	29,233	16,863	-	5,619	-	32,153	12,370	21,361	11,244	4,499	217,771
Records	10,440	11,224	11,216	9,912	6,368	-	2,360	-	13,080	4,480	6,720	4,200	1,888	81,888
Compliance	5,132	5,518	5,513	4,872	3,131	-	1,158	-	6,431	2,203	3,305	2,063	929	40,257
Planning/Research	5,281	5,678	5,674	5,014	3,222	-	1,192	-	6,618	2,267	3,401	2,123	956	41,426
Finance	572	615	615	543	349	-	129	-	717	246	368	230	104	4,487
Public Relations	24,350	26,180	26,159	23,117	14,855	-	5,496	-	30,512	10,454	15,681	9,789	4,407	191,001
Information Technology	6,659	7,160	7,154	6,322	4,062	-	1,503	-	8,345	2,859	4,289	2,677	1,205	52,235
Budget & Decision Support	73,720	79,259	79,194	69,986	44,972	-	16,640	-	92,375	31,648	47,475	29,637	13,342	578,245
Corporate Quality	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Managed Care Contract	2,024	2,177	2,177	1,922	1,237	-	458	-	2,534	867	1,303	815	364	15,879
Total Overhead Allocations	306,280	296,324	293,974	260,118	165,221	-	60,521	-	336,889	116,777	177,972	109,020	48,506	2,171,604
Total Expenses	2,001,929	2,310,693	2,308,356	1,929,156	1,399,969	5,665	472,460	83	2,392,187	832,496	1,121,698	520,537	362,238	15,657,467
Net Margin	\$ (1,023,532)	\$ (158,758)	\$ (108,243)	\$ (247,149)	\$ 506,256	\$ (11,198)	\$ (64,873)	\$ (84)	\$ (323,560)	\$ (26,837)	\$ (19,709)	\$ (425,024)	\$ 51,515	\$ (1,851,195)
Capital	-	-	-	-	9,843	-	-	-	-	-	-	-	-	9,843
General Fund Support/ Transfer In	\$ 2,627,860	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,627,860

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

FOR THE EIGHTH MONTH ENDED MAY 31, 2019

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
1,550,322	1,730,798	(180,476)	(10.4%)	1,390,399	159,923	11.5%	12,241,567	13,013,076	(771,509)	(5.9%)	12,184,575	56,992	0.5%
Gross Patient Revenue							Gross Patient Revenue						
385,662	409,360	23,698	5.8%	748,701	363,039	48.5%	5,273,145	3,149,025	(2,124,120)	(67.5%)	5,150,014	(123,131)	(2.4%)
489,257	639,099	149,842	23.4%	133,080	(356,177)	(267.6%)	2,581,726	4,758,381	2,176,655	45.7%	1,831,374	(750,352)	(41.0%)
266,167	194,134	(72,033)	(37.1%)	84,257	(181,910)	(215.9%)	1,329,950	1,445,424	115,474	8.0%	1,206,924	(123,027)	(10.2%)
1,141,087	1,242,593	101,506	8.2%	966,038	(175,049)	(18.1%)	9,184,821	9,352,830	168,009	1.8%	8,188,312	(996,510)	(12.2%)
230,268	148,099	82,169	55.5%	1,176,951	(946,683)	(80.4%)	3,075,843	1,184,792	1,891,051	159.6%	3,858,486	(782,642)	(20.3%)
639,503	636,304	3,199	0.5%	1,601,312	(961,809)	(60.1%)	6,132,589	4,845,038	1,287,551	26.6%	7,854,749	(1,722,160)	(21.9%)
41.25%	36.76%			115.17%			50.10%	37.23%			64.46%		
Net Patient Revenue							Net Patient Revenue						
1,372,148	502,660	869,488	173.0%	554,346	817,802	147.5%	7,607,595	4,371,280	3,236,315	74.0%	4,077,556	3,530,039	86.6%
4,680	12,135	(7,455)	(61.4%)	64,999	(60,318)	(92.8%)	66,088	102,199	(36,111)	(35.3%)	198,836	(132,748)	(66.8%)
Other Revenue							Other Revenue						
1,376,829	514,795	862,034	167.5%	619,345	757,484	122.3%	7,673,683	4,473,479	3,200,204	71.5%	4,276,391	3,397,291	79.4%
Total Other Revenues							Total Other Revenues						
2,016,331	1,151,099	865,232	75.2%	2,220,656	(204,325)	(9.2%)	13,806,271	9,318,517	4,487,754	48.2%	12,131,140	1,675,131	13.8%
Total Revenues							Total Revenues						
<i>Direct Operational Expenses:</i>													
1,199,859	1,130,036	(69,823)	(6.2%)	1,149,366	(50,492)	(4.4%)	8,571,431	8,635,164	63,733	0.7%	8,088,187	(483,244)	(6.0%)
Salaries and Wages							Salaries and Wages						
302,678	319,525	16,847	5.3%	289,124	(13,554)	(4.7%)	2,269,441	2,440,007	170,566	7.0%	2,123,443	(145,998)	(6.9%)
Benefits							Benefits						
123,535	53,076	(70,459)	(132.8%)	44,992	(78,543)	(174.6%)	503,013	422,832	(80,181)	(19.0%)	391,199	(111,813)	(28.6%)
Purchased Services							Purchased Services						
21,485	19,742	(1,743)	(8.8%)	9,200	(12,285)	(133.5%)	114,939	145,565	30,626	21.0%	107,281	(7,658)	(7.1%)
Medical Supplies							Medical Supplies						
54,486	13,945	(40,541)	(290.7%)	39,350	(15,136)	(38.5%)	210,642	150,477	(60,165)	(40.0%)	88,891	(121,751)	(137.0%)
Other Supplies							Other Supplies						
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	15,355	15,355	100.0%
Contracted Physician Expense							Contracted Physician Expense						
22,612	66,279	43,667	65.9%	-	(22,612)	0.0%	264,000	489,225	225,225	46.0%	-	(264,000)	0.0%
Medical Services							Medical Services						
68,726	53,358	(15,368)	(28.8%)	40,439	(28,287)	(69.9%)	361,984	393,635	31,652	8.0%	371,460	9,476	2.6%
Drugs							Drugs						
24,031	5,073	(18,958)	(373.7%)	78,704	54,673	69.5%	243,004	70,907	(172,097)	(242.7%)	308,723	65,719	21.3%
Repairs & Maintenance							Repairs & Maintenance						
87,629	71,493	(16,136)	(22.6%)	89,821	2,192	2.4%	689,676	672,957	(16,719)	(2.5%)	705,384	15,708	2.2%
Lease & Rental							Lease & Rental						
8,162	5,503	(2,659)	(48.3%)	8,152	(10)	(0.1%)	37,862	44,024	6,162	14.0%	44,079	6,217	14.1%
Utilities							Utilities						
9,042	29,499	20,457	69.3%	10,140	1,098	10.8%	127,563	192,640	65,077	33.8%	156,281	28,718	18.4%
Other Expense							Other Expense						
2,183	2,307	124	5.4%	1,808	(375)	(20.8%)	14,128	18,765	4,637	24.7%	11,802	(2,327)	(19.7%)
Insurance							Insurance						
1,924,426	1,769,836	(154,590)	(8.7%)	1,761,095	(163,331)	(9.3%)	13,407,683	13,676,198	268,515	2.0%	12,412,085	(995,598)	(8.0%)
Total Operational Expenses							Total Operational Expenses						
91,905	(618,737)	710,642	(114.9%)	459,561	(367,656)	(80.0%)	398,589	(4,357,681)	4,756,270	(109.1%)	(280,945)	679,533	(241.9%)
Net Performance before Depreciation & Overhead Allocations							Net Performance before Depreciation & Overhead Allocations						

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

FOR THE EIGHTH MONTH ENDED MAY 31, 2019

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
9,742	6,072	(3,670)	(60.4%)	4,375	(5,367)	(122.7%)	Depreciation	78,180	48,576	(29,604)	(60.9%)	35,930	(42,251)	(117.6%)	
<i>Overhead Allocations:</i>															
327	10,221	9,894	96.8%	7,718	7,391	95.8%	Risk Mgt	20,006	81,768	61,762	75.5%	60,812	40,806	67.1%	
72,195	72,195	-	0.0%	12,793	(59,402)	(464.3%)	Rev Cycle	577,560	577,560	-	0.0%	264,679	(312,881)	(118.2%)	
4,346	4,469	123	2.7%	4,218	(128)	(3.0%)	Internal Audit	33,938	35,752	1,814	5.1%	14,996	(18,943)	(126.3%)	
16,667	18,493	1,826	9.9%	31,175	14,508	46.5%	Palm Springs Facility	133,929	147,944	14,015	9.5%	174,559	40,631	23.3%	
20,036	20,036	-	0.0%	13,986	(6,050)	(43.3%)	Administration	160,288	160,288	-	0.0%	156,848	(3,440)	(2.2%)	
28,181	27,444	(737)	(2.7%)	26,054	(2,127)	(8.2%)	Human Resources	217,771	219,552	1,781	0.8%	177,075	(40,697)	(23.0%)	
10,236	10,236	-	0.0%	11,277	1,041	9.2%	Legal	81,888	81,888	-	0.0%	64,305	(17,583)	(27.3%)	
5,753	6,789	1,036	15.3%	8,395	2,643	31.5%	Records	40,257	54,312	14,055	25.9%	42,620	2,364	5.5%	
5,654	9,404	3,750	39.9%	4,160	(1,494)	(35.9%)	Compliance	41,426	75,232	33,806	44.9%	37,919	(3,507)	(9.2%)	
-	1,148	1,148	100.0%	980	980	100.0%	Planning/Research	4,487	9,184	4,697	51.1%	8,614	4,127	47.9%	
24,893	28,051	3,158	11.3%	23,634	(1,258)	(5.3%)	Finance	191,001	224,408	33,407	14.9%	177,481	(13,520)	(7.6%)	
9,536	10,572	1,036	9.8%	6,311	(3,225)	(51.1%)	Public Relations	52,235	84,576	32,341	38.2%	45,256	(6,979)	(15.4%)	
101,082	80,135	(20,947)	(26.1%)	86,800	(14,282)	(16.5%)	Information Technology	578,245	641,080	62,835	9.8%	514,088	(64,158)	(12.5%)	
-	-	-	0.0%	-	-	0.0%	Budget & Decision Support	-	-	-	0.0%	8,068	8,068	100.0%	
1,469	2,181	712	32.6%	3,095	1,626	52.5%	Corporate Quality	15,879	17,448	1,569	9.0%	21,538	5,659	26.3%	
3,567	4,569	1,002	21.9%	6,171	2,603	42.2%	Managed Care Contract	22,693	36,552	13,859	37.9%	36,069	13,376	37.1%	
303,943	305,943	2,000	0.7%	246,769	(57,174)	(23.2%)	Total Overhead Allocations	2,171,604	2,447,544	275,940	11.3%	1,804,927	(366,676)	(20.3%)	
2,238,112	2,081,851	(156,261)	(7.5%)	2,012,239	(225,873)	(11.2%)	Total Expenses	15,657,467	16,172,318	514,851	3.2%	14,252,942	(1,404,525)	(9.9%)	
\$ (221,780)	\$ (930,752)	\$ 708,972	(76.2%)	\$ 208,417	\$ (430,198)	(206.4%)	Net Margin	\$ (1,851,195)	\$ (6,853,801)	\$ 5,002,606	(73.0%)	\$ (2,121,802)	\$ 270,606	12.8%	
9,843	-	(9,843)	0.0%	-	(9,843)	0.0%	Capital	9,843	450,000	440,157	97.8%	-	(9,843)	0.0%	
\$ -	\$ 1,087,500	\$ 1,087,500	100.0%	\$ 100,000	\$ 100,000	100.0%	General Fund Support/ Transfer In	\$ 2,627,860	\$ 8,700,000	\$ 6,072,140	69.8%	\$ 2,170,000	\$ (457,860)	(21.1%)	

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

FOR THE EIGHTH MONTH ENDED MAY 31, 2019

	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Total
Gross Patient Revenue	-	911,341	729,939	661,696	308,493	2,611,468
Contractual Allowances	-	248,059	160,662	165,205	91,823	665,749
Charity Care	-	353,032	358,393	345,465	112,226	1,169,115
Bad Debt	-	17,034	48,570	12,019	10,385	88,008
Total Contractual Allowances and Bad Debt	-	618,125	567,625	522,689	214,434	1,922,872
Other Patient Revenue	-	410,946	321,159	321,067	150,454	1,203,627
Net Patient Revenue	-	704,163	483,473	460,074	244,513	1,892,223
Collection %	-	77.27%	66.23%	69.53%	79.26%	72.46%
Grant Funds	145,715	490,311	391,856	334,881	187,211	1,549,974
Other Revenue	-	-	-	-	233	233
Total Other Revenues	145,715	490,311	391,856	334,881	187,444	1,550,207
Total Revenues	145,715	1,194,474	875,330	794,955	431,957	3,442,430
<i>Direct Operational Expenses:</i>						
Salaries and Wages	187,094	593,017	476,278	415,583	216,079	1,888,051
Benefits	41,051	176,305	123,785	127,568	63,224	531,933
Purchased Services	-	15,605	13,155	12,552	24,333	65,645
Medical Supplies	-	53,566	45,605	40,863	22,249	162,284
Other Supplies	27	17,925	19,638	14,019	66,763	118,372
Contracted Physician Expense	-	-	-	-	-	-
Medical Services	-	-	-	-	-	-
Drugs	-	106	300	615	272	1,292
Repairs & Maintenance	-	8,030	9,479	9,424	21,479	48,411
Lease & Rental	-	76,568	43,838	41,024	49,120	210,550
Utilities	-	1,069	3,035	999	1,867	6,969
Other Expense	1,746	8,467	6,789	1,370	4,944	23,316
Insurance	-	-	-	-	369	369
Total Operational Expenses	229,917	950,658	741,901	664,017	470,699	3,057,193
Net Performance before Depreciation & Overhead Allocations	(84,202)	243,816	133,428	130,937	(38,742)	385,238
Depreciation	-	9,677	4,354	6,811	6,498	27,340
<i>Overhead Allocations:</i>						
Risk Mgt	316	1,536	1,348	1,041	638	4,879
Rev Cycle	-	50,808	44,608	34,448	21,112	150,976
Internal Audit	537	2,605	2,287	1,766	1,082	8,277
Palm Springs Facility	16,614	-	-	-	-	16,614
Administration	2,497	12,304	10,800	8,344	5,112	39,057
Human Resources	2,246	16,863	15,742	12,370	6,745	53,966
Legal	1,296	6,288	5,520	4,264	2,608	19,976
Records	637	3,090	2,713	2,095	1,284	9,818
Compliance	655	3,180	2,791	2,156	1,321	10,103
Planning/Research	71	344	302	234	143	1,094
Finance	3,021	14,661	12,870	9,940	6,090	46,583
Public Relations	826	4,010	3,520	2,718	1,666	12,739
Information Technology	9,145	44,386	38,964	30,093	18,439	141,027
Budget & Decision Support	-	-	-	-	-	-
Corporate Quality	254	1,216	1,070	829	509	3,879
Managed Care Contract	-	1,996	1,753	1,354	829	5,932
Total Overhead Allocations	38,116	163,287	144,289	111,653	67,578	524,922
Total Expenses	268,033	1,123,622	890,544	782,481	544,775	3,609,455
Net Margin	\$ (122,318)	\$ 70,852	\$ (15,215)	\$ 12,474	\$ (112,818)	\$ (167,025)
Capital	-	-	-	-	102,231	102,231
General Fund Support/ Transfer In					\$	-

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

FOR THE EIGHTH MONTH ENDED MAY 31, 2019

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
349,838	385,408	(35,570)	(9.2%)	339,448	10,390	3.1%	2,611,468	2,869,529	(258,061)	(9.0%)	2,634,634	(23,166)	(0.9%)
49,664	80,462	30,798	38.3%	79,529	29,864	37.6%	665,749	599,079	(66,670)	(11.1%)	435,359	(230,390)	(52.9%)
200,541	179,124	(21,417)	(12.0%)	126,227	(74,315)	(58.9%)	1,169,115	1,333,655	164,540	12.3%	992,782	(176,333)	(17.8%)
17,389	16,864	(525)	(3.1%)	(61,395)	(78,784)	(128.3%)	88,008	125,559	37,551	29.9%	(37,479)	(125,487)	334.8%
267,594	276,450	8,856	3.2%	144,360	(123,234)	(85.4%)	1,922,872	2,058,293	135,421	6.6%	1,390,662	(532,210)	(38.3%)
105,532	89,241	16,291	18.3%	613,831	(508,299)	(82.8%)	1,203,627	713,928	489,699	68.6%	1,912,631	(709,004)	(37.1%)
187,776	198,199	(10,423)	(5.3%)	808,918	(621,142)	(76.8%)	1,892,223	1,525,164	367,059	24.1%	3,156,603	(1,264,380)	(40.1%)
53.68%	51.43%			238.30%			72.46%	53.15%		119.81%			
316,499	109,872	206,627	188.1%	152,051	164,448	108.2%	1,549,974	1,348,128	201,846	15.0%	966,553	583,422	60.4%
-	2,833	(2,833)	(100.0%)	-	-	0.0%	233	22,664	(22,431)	(99.0%)	34,000	(33,767)	(99.3%)
316,499	112,705	203,794	180.8%	152,051	164,448	108.2%	1,550,207	1,370,792	179,415	13.1%	1,000,553	549,655	54.9%
504,275	310,904	193,371	62.2%	960,970	(456,695)	(47.5%)	3,442,430	2,895,956	546,474	18.9%	4,157,156	(714,725)	(17.2%)
<i>Direct Operational Expenses:</i>													
259,181	255,805	(3,376)	(1.3%)	266,489	7,307	2.7%	1,888,051	1,954,662	66,611	3.4%	1,767,836	(120,215)	(6.8%)
69,968	74,410	4,442	6.0%	68,238	(1,730)	(2.5%)	531,933	568,215	36,282	6.4%	513,986	(17,947)	(3.5%)
5,083	10,121	5,038	49.8%	8,016	2,933	36.6%	65,645	95,817	30,172	31.5%	76,364	10,719	14.0%
26,462	28,011	1,549	5.5%	25,960	(503)	(1.9%)	162,284	203,566	41,282	20.3%	221,242	58,959	26.6%
79,010	10,786	(68,224)	(632.5%)	5,127	(73,884)	(1,441.2%)	118,372	87,091	(31,281)	(35.9%)	19,916	(98,456)	(494.4%)
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
93	1,955	1,862	95.2%	15	(78)	(515.1%)	1,292	14,213	12,921	90.9%	10,927	9,635	88.2%
15,704	2,058	(13,646)	(663.1%)	13,921	(1,784)	(12.8%)	48,411	39,478	(8,933)	(22.6%)	45,760	(2,651)	(5.8%)
26,510	24,393	(2,117)	(8.7%)	32,639	6,129	18.8%	210,550	216,532	5,982	2.8%	267,877	57,327	21.4%
721	748	27	3.6%	1,236	515	41.7%	6,969	5,984	(985)	(16.5%)	6,672	(298)	(4.5%)
1,114	3,140	2,026	64.5%	1,540	426	27.7%	23,316	27,451	4,135	15.1%	26,456	3,141	11.9%
31	59	28	47.5%	75	44	58.7%	369	472	103	21.8%	719	350	48.7%
483,878	411,486	(72,392)	(17.6%)	423,254	(60,624)	(14.3%)	3,057,193	3,213,481	156,288	4.9%	2,957,756	(99,436)	(3.4%)
Net Performance before													
20,397	(100,582)	120,979	(120.3%)	537,716	(517,318)	(96.2%)	385,238	(317,525)	702,763	(221.3%)	1,199,399	(814,162)	(67.9%)

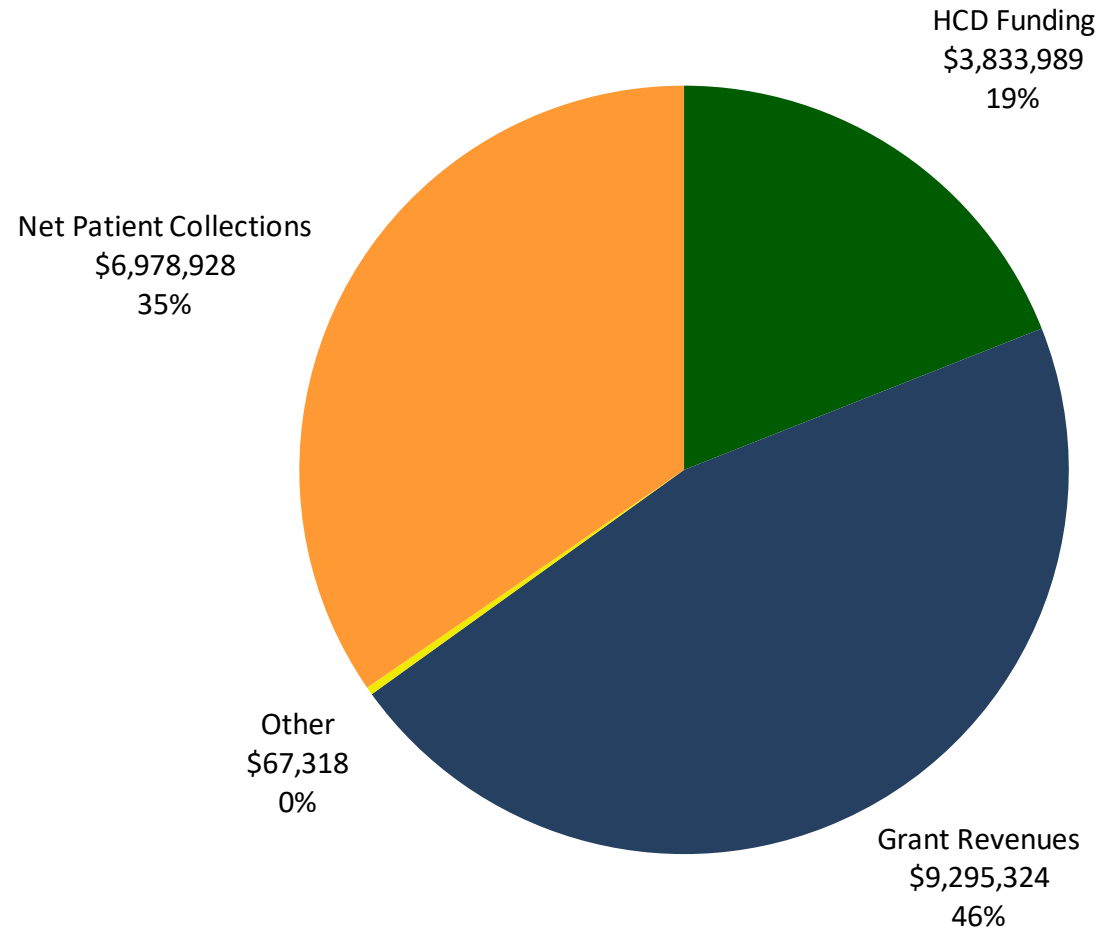
District Clinics Holdings, Inc.- Dental Statement of Revenues and Expenses

FOR THE EIGHTH MONTH ENDED MAY 31, 2019

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
3,414	15,743	12,329	78.3%	12,597	9,183	72.9%	27,340	120,222	92,882	77.3%	100,534	73,194	72.8%
<i>Overhead Allocations:</i>													
80	2,494	2,414	96.8%	2,120	2,040	96.2%	4,879	19,952	15,073	75.5%	16,704	11,825	70.8%
18,872	18,872	-	0.0%	3,713	(15,159)	(408.3%)	150,976	150,976	-	0.0%	76,818	(74,158)	(96.5%)
1,060	1,090	30	2.8%	1,159	99	8.5%	8,277	8,720	443	5.1%	4,119	(4,158)	(100.9%)
2,068	2,294	226	9.9%	5,243	3,176	60.6%	16,614	18,352	1,738	9.5%	29,360	12,745	43.4%
4,848	4,887	39	0.8%	3,842	(1,007)	(26.2%)	39,057	39,096	39	0.1%	44,553	5,496	12.3%
6,983	6,801	(182)	(2.7%)	8,470	1,486	17.5%	53,966	54,408	442	0.8%	54,373	407	0.7%
2,497	2,497	-	0.0%	3,098	601	19.4%	19,976	19,976	-	0.0%	17,298	(2,679)	(15.5%)
1,403	1,655	252	15.2%	2,306	903	39.2%	9,818	13,240	3,422	25.8%	11,738	1,919	16.4%
1,379	2,294	915	39.9%	1,143	(236)	(20.7%)	10,103	18,352	8,249	44.9%	9,721	(382)	(3.9%)
-	280	280	100.0%	269	269	100.0%	1,094	2,240	1,146	51.1%	5,966	4,872	81.7%
6,071	6,842	771	11.3%	6,492	421	6.5%	46,583	54,736	8,153	14.9%	45,824	(759)	(1.7%)
2,326	2,577	251	9.7%	1,734	(592)	(34.2%)	12,739	20,616	7,877	38.2%	11,715	(1,024)	(8.7%)
24,653	19,544	(5,109)	(26.1%)	23,842	(811)	(3.4%)	141,027	156,352	15,325	9.8%	141,206	179	0.1%
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	5,050	5,050	100.0%
358	533	175	32.8%	850	492	57.8%	3,879	4,264	385	9.0%	5,916	2,037	34.4%
933	1,195	262	22.0%	1,791	858	47.9%	5,932	9,560	3,628	38.0%	10,468	4,536	43.3%
73,531	73,855	324	0.4%	66,071	(7,460)	(11.3%)	524,922	590,840	65,918	11.2%	490,829	(34,093)	(6.9%)
560,823	501,084	(59,739)	(11.9%)	501,922	(58,901)	(11.7%)	3,609,455	3,924,543	315,088	8.0%	3,549,120	(60,336)	(1.7%)
\$ (56,548)	\$ (190,180)	\$ 133,632	(70.3%)	\$ 459,048	\$ (515,596)	(112.3%)	\$ (167,025)	\$ (1,028,587)	\$ 861,562	(83.8%)	\$ 608,036	\$ (775,061)	(127.5%)
102,231	-	(102,231)	0.0%	(40,825)	(143,056)	350.4%	102,231	771,688	669,457	86.8%	-	(102,231)	0.0%
\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	0.0%

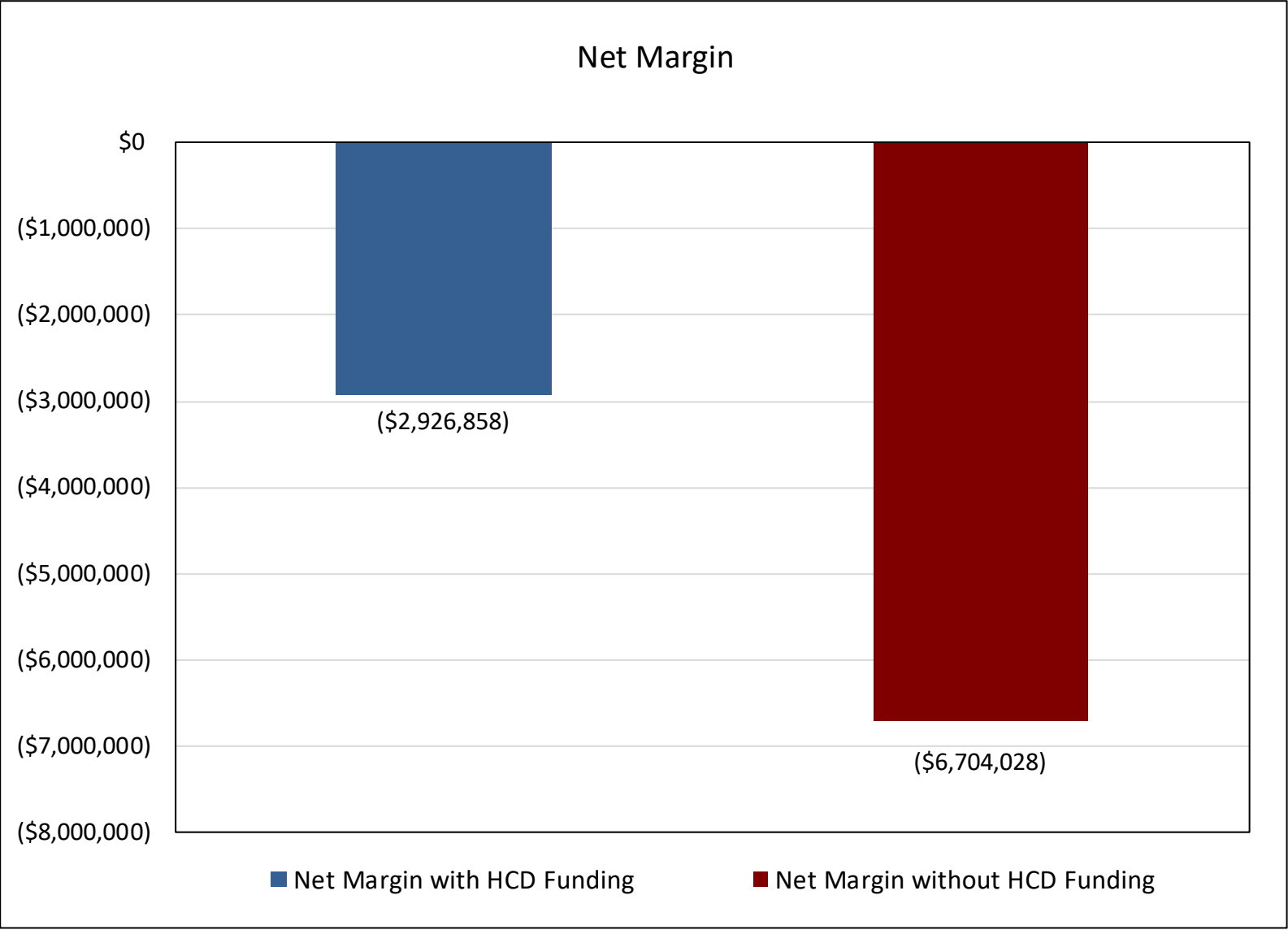
	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
Clinic Visits - Adults and Pediatrics																
West Palm Beach	1,661	1,289	1,312	1,734	1,628	1,447	1,798	1,754					12,623	12,950	(2.5%)	12,532
Delray	1,355	1,162	1,134	1,180	1,212	1,356	1,283	1,312					9,994	11,799	(15.3%)	11,014
Lantana	1,411	1,309	1,261	1,314	1,409	1,424	1,524	1,505					11,157	12,451	(10.4%)	10,298
Belle Glade	1,030	790	839	934	806	850	949	819					7,017	6,417	9.4%	7,127
Jerome Golden Center	-	-	-	-	-	-	-	-					-	-	0.0%	2,014
Lewis Center	267	233	229	239	246	227	277	271					1,989	1,786	11.4%	1,561
Lake Worth & Women's Health Care	1,608	1,153	1,104	1,214	1,130	1,466	1,483	1,454					10,612	12,861	(17.5%)	12,017
Jupiter Clinic	421	457	418	467	483	502	565	555					3,868	4,299	(10.0%)	3,901
West Boca & Women's Health Care	1,009	861	781	923	815	900	984	877					7,150	5,666	26.2%	4,890
Mobile Van	239	186	119	201	200	159	143	151					1,398	1,488	(6.0%)	-
Suboxone	361	289	222	301	415	476	611	601					3,276	2,359	38.9%	2,325
Total Clinic Visits	9,362	7,729	7,419	8,507	8,344	8,807	9,617	9,299	-	-	-	-	69,084	72,076	(4.2%)	67,679
Dental Visits																
West Palm Beach	918	722	704	800	792	839	873	813					6,461	7,282	(11.3%)	7,242
Lantana	653	508	468	616	630	717	646	672					4,910	7,286	(32.6%)	5,823
Delray	676	522	446	503	535	644	675	574					4,575	5,568	(17.8%)	5,070
Belle Glade	406	260	230	259	275	292	377	337					2,436	2,999	(18.8%)	2,992
Total Dental Visits	2,653	2,012	1,848	2,178	2,232	2,492	2,571	2,396	-	-	-	-	18,382	23,135	(20.5%)	21,127
Total Medical and Dental Visits	12,015	9,741	9,267	10,685	10,576	11,299	12,188	11,695	-	-	-	-	87,466	95,211	(8.1%)	88,806
Mental Health Counselors (non-billable)																
West Palm Beach	124	100	103	135	117	110	154	133					976	676	44.4%	721
Delray	137	118	102	117	106	102	126	219					1,027	670	53.3%	677
Lantana	467	414	368	433	383	265	423	885					3,638	1,826	99.2%	1,163
Belle Glade	17	21	22	26	18	25	23	20					172	116	48.3%	115
Lewis Center	268	219	192	235	232	253	283	208					1,890	766	146.7%	945
Lake Worth	173	99	73	190	98	111	76	178					998	973	2.6%	1,096
Jupiter	-	-	-	-	-	-	-	-					-	233	(100.0%)	241
West Boca	-	-	-	-	-	-	-	-					-	159	(100.0%)	171
Mobile Van	-	-	-	16	40	57	95	78					286	-	100.0%	-
Total Mental Health Screenings	1,186	971	860	1,152	994	923	1,180	1,721	-	-	-	-	8,987	5,419	65.8%	5,129

Primary Care Clinics Funding Sources

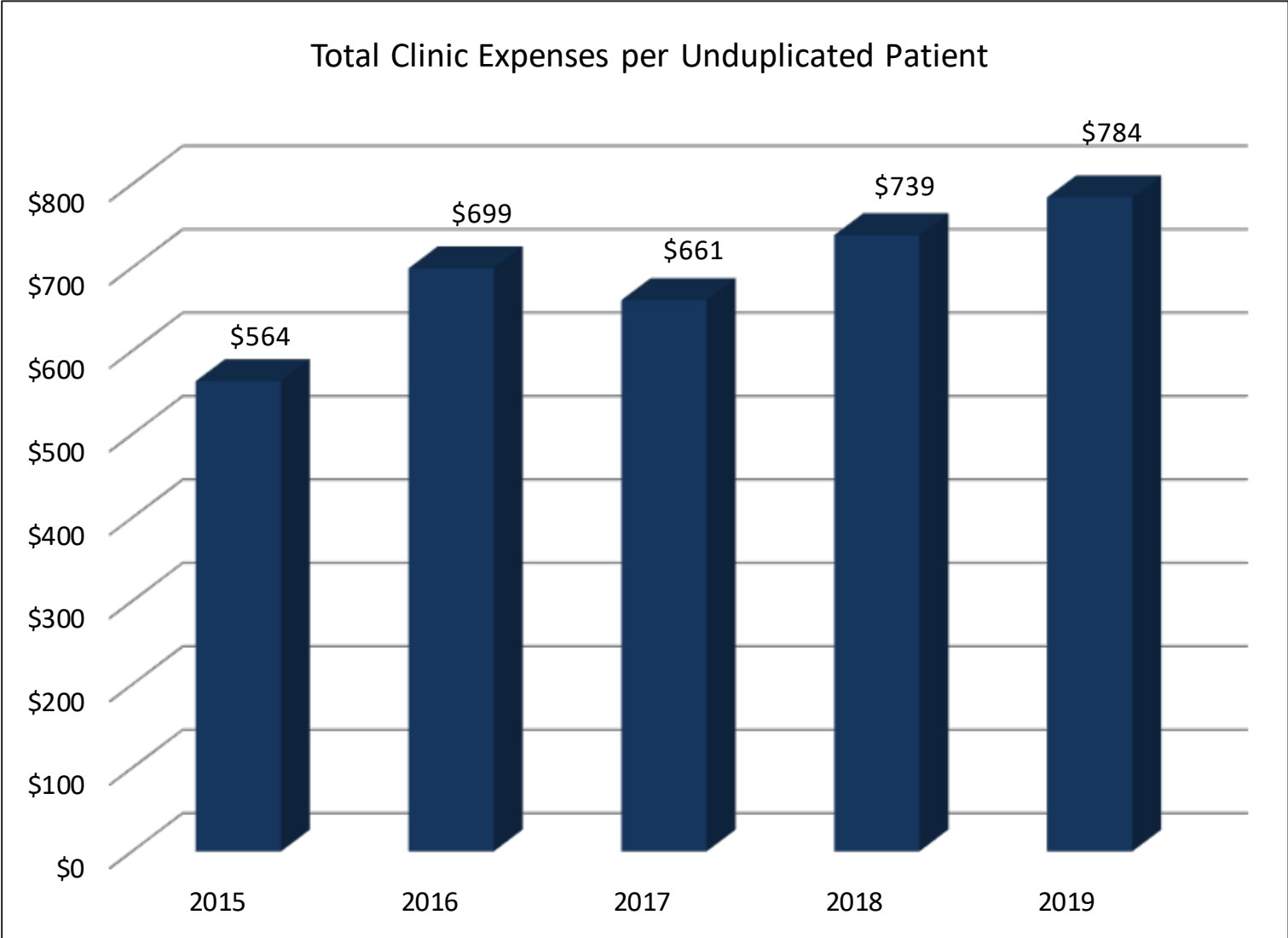


Fiscal YTD May 2019 Total Expenses \$20,175,560

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

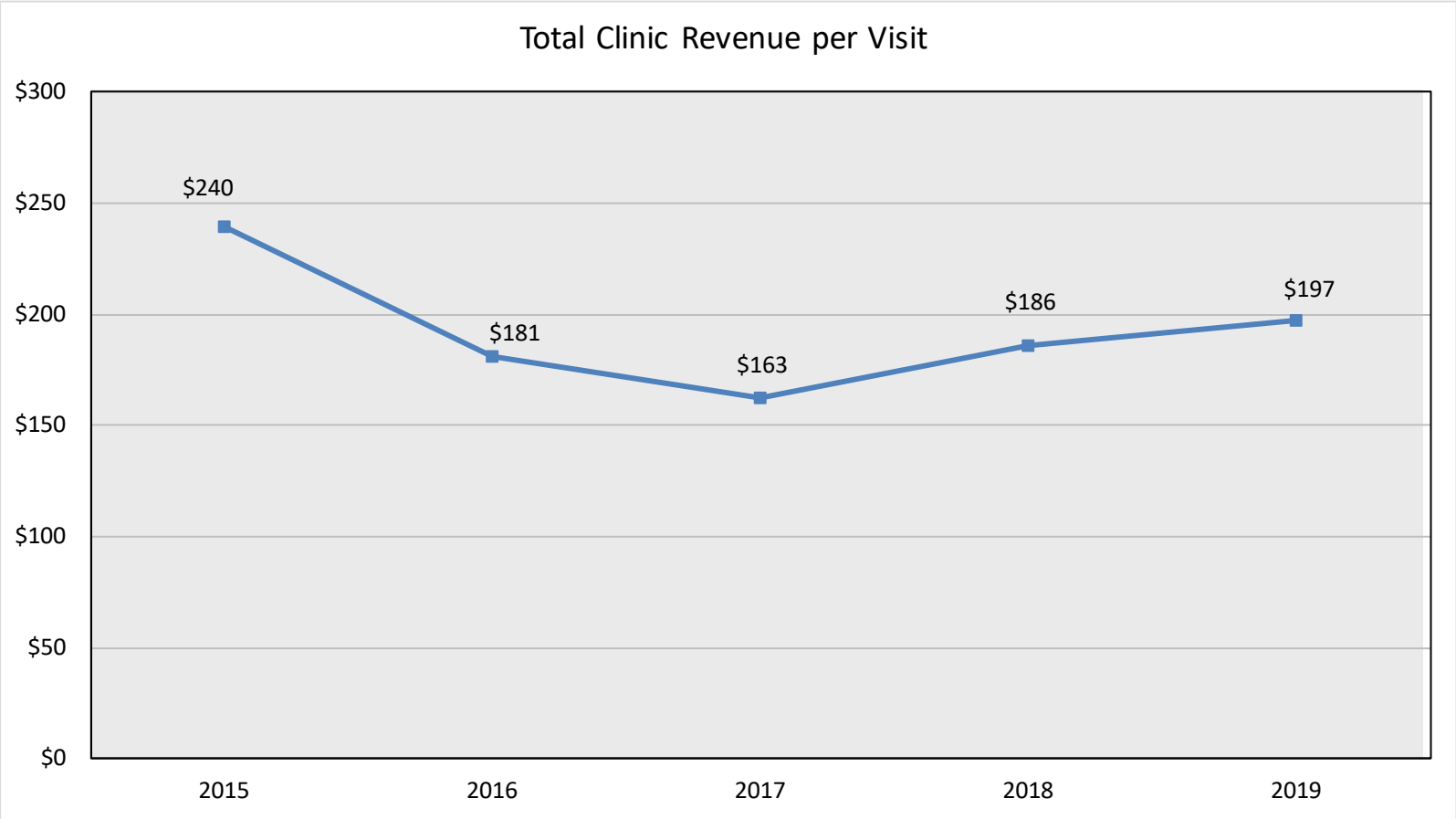


* Net Margin includes overhead allocations and capital, and excludes depreciation.

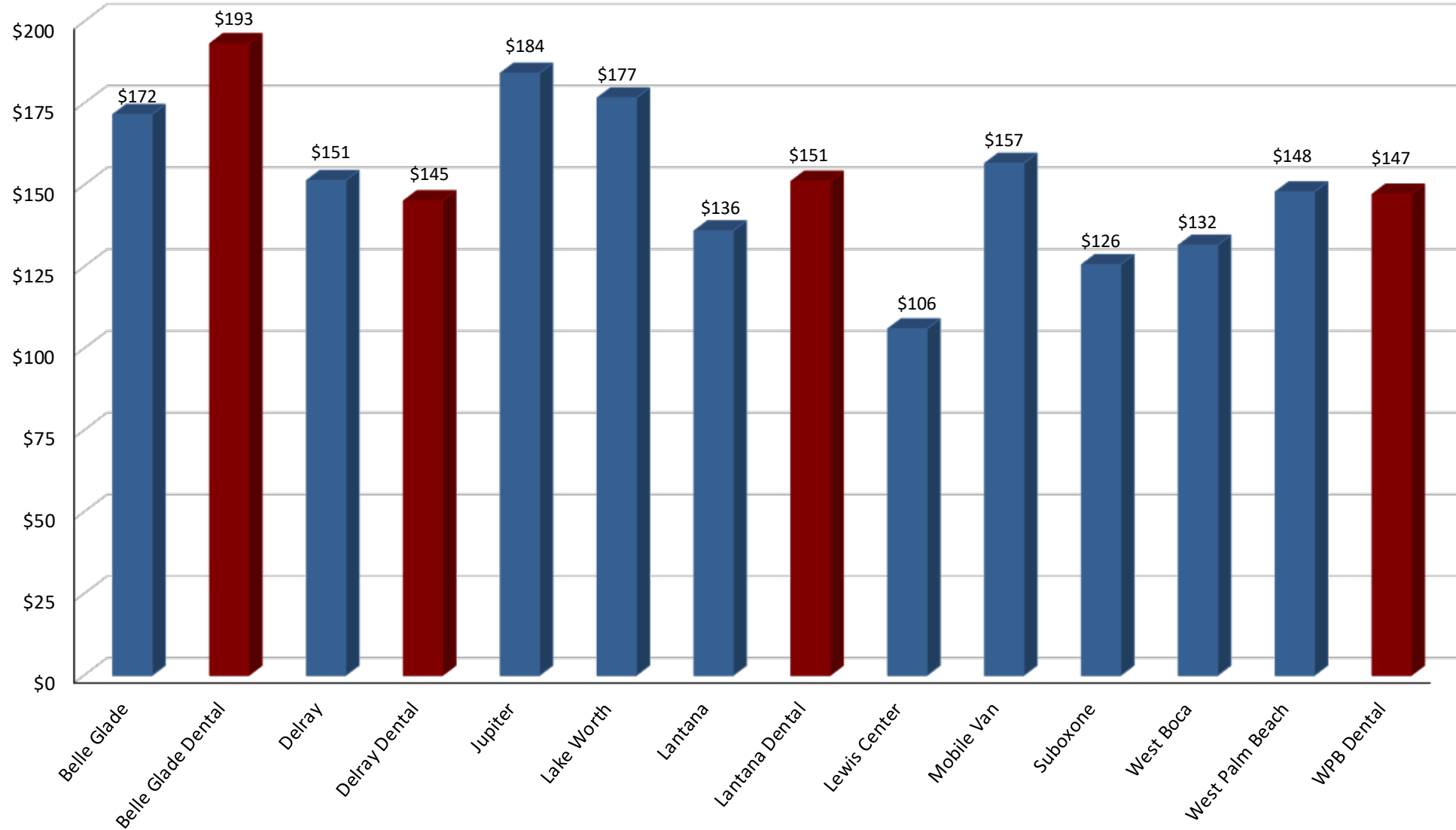


* 2019 data reflects fiscal year-to-date May expenses annualized.

** Expenses include overhead allocations and capital, and exclude depreciation.



Total Operating Expenses per Visit by Clinic



*Based on fiscal year-to-date May 2019 total operating expenses

** Visits for the medical clinics include medical and mental health visits

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

1. Description: Credentialing and Privileging Policy

2. Summary:

The agenda item represents the revised C.L. Brumback Primary Care Clinics Credentialing and Privileging Policy. As the ultimate authority, the Board shall review and approve all changes to the policy.

3. Substantive Analysis:

The purpose of the Credentialing and Privileging Policy is to establish a written process for the credentialing and privileging of health center practitioners, employed or contracted, volunteers and locum tenens at all health care sites in accordance with state, federal and HRSA requirements.

The C.L. Brumback Primary Care Clinics established a credentialing and privileging policy to ensure health center practitioners meet specific criteria and standards for professional qualifications. Credentialing and privileging is performed for health center practitioners at the time of hire, prior to the practitioner providing patient care services and every two (2) years thereafter.

The revisions to the Credentialing and Privileging Policy include but are not limited to, the addition of Medical Residents in the category of Other Licensed or Certified Health Care Practitioners and the addition of the Behavioral Health Director providing oversight and clinical leadership to credentialing staff.

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

 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

N/A

Committee Name

Date Approved

6. Recommendation:

Staff recommends the Board approve the Credentialing and Privileging Policy as revised.

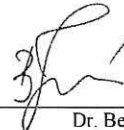
Approved for Legal sufficiency:



Christy Goddeau *For The*
General Counsel



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



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

POLICY

Policy Title:	Credentialing and Privileging Policy	Effective Date:	4/26/2017 <u>6/26/2019</u>
Department:	Primary Care Clinics	Policy Number:	600-17

POLICY

It is the policy of the C.L. Brumback Primary Care Clinics to credential and privilege health center practitioners, employed or contracted, volunteers and locum tenens at all health care sites in accordance with state, federal and HRSA requirements.

Credentialing and privileging will be performed for health center practitioners at the time of hire, prior to the practitioner providing patient care services, and every two (2) years thereafter.

There are two (2) categories of health center practitioners, ~~that require different levels of credentialing and privileging:~~

1. Licensed Independent Practitioner (LIP) – an individual permitted by law to provide care and services without direction or supervision, within the scope of the individual practitioner’s license and consistent with individually granted privileges. C.L. Brumback Primary Care Clinics defines the following practitioners as LIP’s:
 - Physician
 - Dentist
 - Nurse Practitioner
 - Nurse Midwife

2. Other Licensed or Certified Health Care Practitioner (OLCP) – an individual who is licensed, registered, or certified, but is not permitted by law to provide patient care services without direction or supervision. C.L. Brumback Primary Care Clinic defines the following practitioners as OLCP’s:
 - Registered Nurse
 - Licensed Practical Nurse
 - Certified and/or Registered Medical Assistant
 - Certified and/or Registered Dental Assistant
 - Licensed Dental Hygienist
 - Certified Mental Health Counselor
 - Licensed Clinical Social Worker
 - Medical Resident

The C.L. Brumback Primary Care Clinics Board of Directors has the ultimate authority and responsibility for the provisions of this policy. The Board of Directors shall review and approve any changes to the policy and at a minimum, shall review the policy every three (3) years.

The Medical Director/Dental Director/Women’s Health Director/Behavioral Health Director shall oversee the credentialing and privileging activities, provide clinical leadership and direction to credentialing staff,

POLICY

Policy Title: **Credentialing and Privileging Policy** Effective Date: ~~4/26/2017~~6/26/2019

Department: **Primary Care Clinics** Policy Number: 600-17

credential ~~and privilege~~ other licensed or certified health care practitioners and make credentialing and privileging recommendations of licensed independent practitioners to the Board.

APPROVED BY	DATE
Belma Andric, MD, MPH, Chief Medical Officer, VP and Executive Director of Clinical Services <u>Christopher F. Irizarry, MPA, FQHC Executive Director</u>	4/26/2017 <u>6/26/2019</u>
C.L. Brumback Board Approval:	4/26/2017 <u>6/26/2019</u>

POLICY REVISION HISTORY

Original Policy Date	Revisions
4/23/2013	4/25/2017 <u>6/26/2019</u>
	4/25/2017 <u>4/24/2014</u>
	4/24/2014 <u>5/23/2013</u>
	<u>5/23/2013</u>

POLICY

Policy Title:	Credentialing and Privileging Policy	Effective Date:	6/26/2019
Department:	Primary Care Clinics	Policy Number:	600-17

POLICY

It is the policy of the C.L. Brumback Primary Care Clinics to credential and privilege health center practitioners, employed or contracted, volunteers and locum tenens at all health care sites in accordance with state, federal and HRSA requirements.

Credentialing and privileging will be performed for health center practitioners at the time of hire, prior to the practitioner providing patient care services, and every two (2) years thereafter.

There are two (2) categories of health center practitioners.

1. Licensed Independent Practitioner (LIP) – an individual permitted by law to provide care and services without direction or supervision, within the scope of the individual practitioner’s license and consistent with individually granted privileges. C.L. Brumback Primary Care Clinics defines the following practitioners as LIP’s:
 - Physician
 - Dentist
 - Nurse Practitioner
 - Nurse Midwife

2. Other Licensed or Certified Health Care Practitioner (OLCP) – an individual who is licensed, registered, or certified, but is not permitted by law to provide patient care services without direction or supervision. C.L. Brumback Primary Care Clinic defines the following practitioners as OLCP’s:
 - Registered Nurse
 - Licensed Practical Nurse
 - Certified and/or Registered Medical Assistant
 - Certified and/or Registered Dental Assistant
 - Licensed Dental Hygienist
 - Certified Mental Health Counselor
 - Licensed Clinical Social Worker
 - Medical Resident

The C.L. Brumback Primary Care Clinics Board of Directors has the ultimate authority and responsibility for the provisions of this policy. The Board of Directors shall review and approve any changes to the policy and at a minimum, shall review the policy every three (3) years.

The Medical Director/Dental Director/Women’s Health Director/Behavioral Health Director shall oversee the credentialing and privileging activities, provide clinical leadership and direction to credentialing staff,

POLICY

Policy Title: **Credentialing and Privileging Policy** Effective Date: 6/26/2019

Department: **Primary Care Clinics** Policy Number: 600-17

credential other licensed or certified health care practitioners and make credentialing and privileging recommendations of licensed independent practitioners to the Board.

APPROVED BY	DATE
Belma Andric, MD, MPH, Chief Medical Officer, VP and Executive Director of Clinical Services	6/26/2019
C.L Brumback Board Approval:	6/26/2019

POLICY REVISION HISTORY

Original Policy Date	Revisions	
4/23/2013	6/26/2019	
	4/25/2017	
	4/24/2014	
	5/23/2013	

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

1. Description: Executive Director Informational Update

2. Summary:

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

- Belle Glade Clinic

3. Substantive Analysis:

Belle Glade Clinic

In direct communication with and actively planning the AHCA inspection in the next few weeks.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Darcy J. Davis
Chief Executive Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

6. Recommendation:

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

Approved for Legal sufficiency:



Christy Goddeau *for the*
General Counsel



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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

1. Description: Operations Reports – May 2019

2. Summary:

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

- Productivity Summary Report

3. Substantive Analysis:

May 2019 productivity overall showed that we had a slight increase in our monthly target percentage in our Pediatric and Women’s Health service-lines.

May 2019 productivity by location and by position shows that Boca had the highest Adult percentage monthly target met in addition Lake Worth showed the highest Women’s Health percentage monthly target met; Delray had the highest Mental Health percentage monthly target met; Lantana continues to have the highest pediatric percentage monthly target met; West Palm Beach had the highest dental percentage monthly target met.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Darcy J. Davis
Chief Executive Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

6. Recommendation:

Staff recommends the Board Approve the Operations Reports May 2019.

Approved for Legal sufficiency:



Christy Goddeau *for the*
General Counsel



Terry Megiveron
Director of Practice Operations

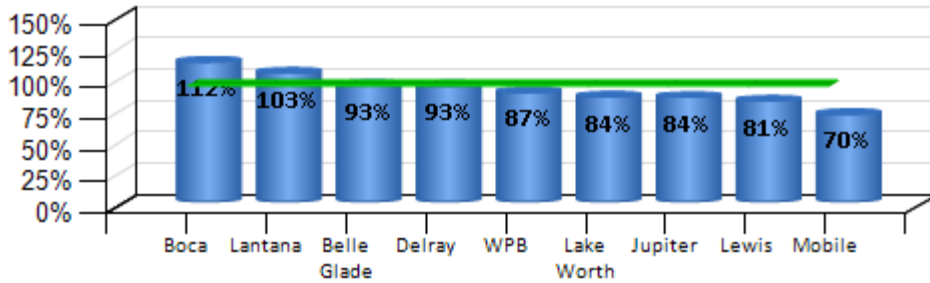


Dr. Belma Andric
Chief Medical Officer, VP & Executive Director
of Clinic Services

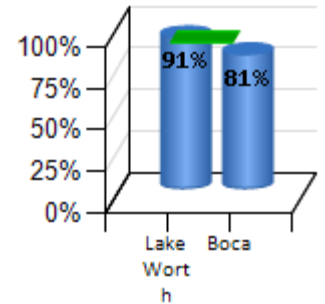
ALL CLINICS PRODUCTIVITY MAY 2019

	Target	Total seen	% Monthly Target
ADULT CARE	7337	6682	91%
PEDIATRIC CARE	1936	1550	80%
MENTAL HEALTH	1765	1427	81%
SUBSTANCE ABUSE	785	601	77%
WOMEN'S HEALTH CARE	530	466	88%
DENTAL	2474	1982	80%
DENTAL HYGIENE	608	414	68%

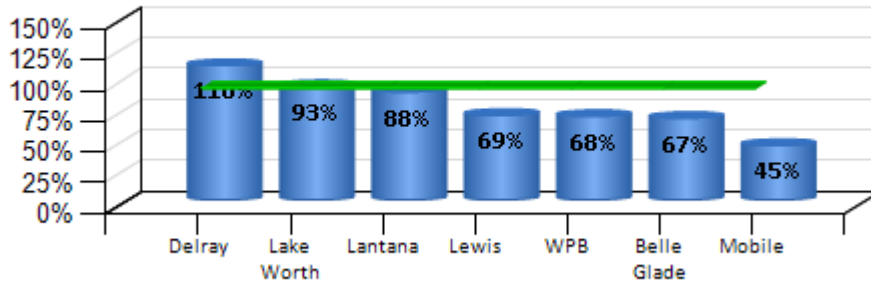
Adult care



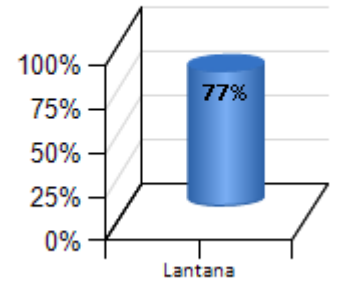
Women's Health



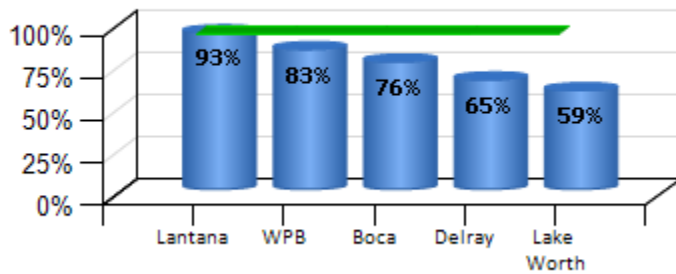
Mental Health



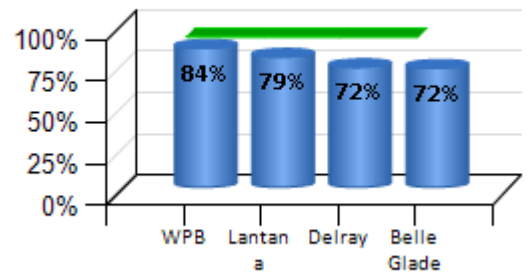
Substance Abuse



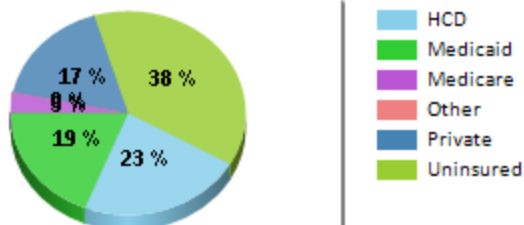
Pediatric Care



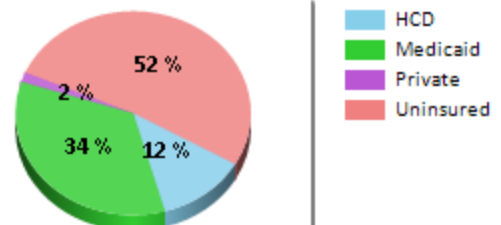
Dental & Dental Hygiene



Medical Payer Mix YTD



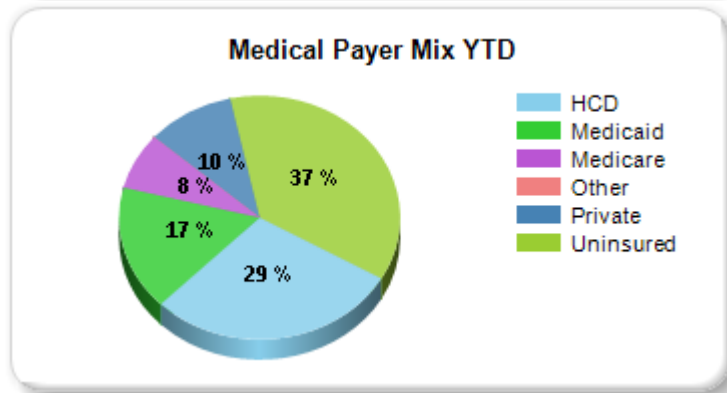
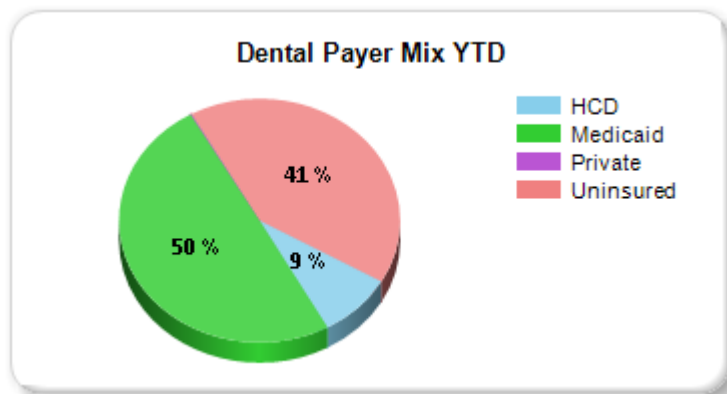
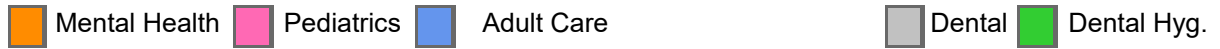
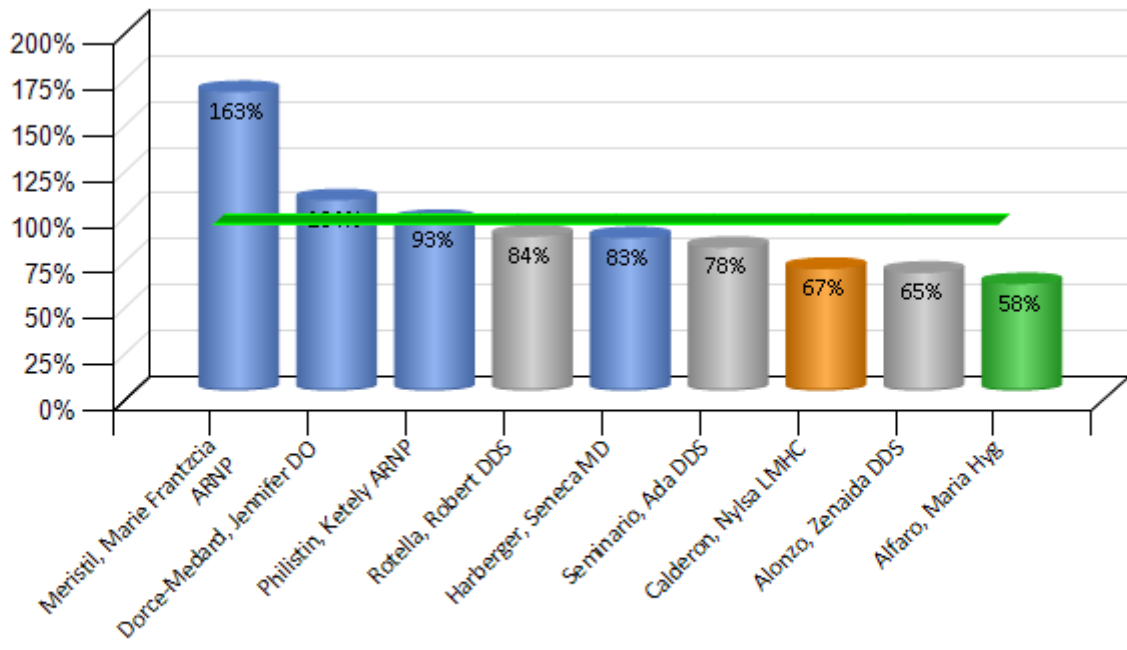
Dental Payer Mix YTD



BELLE GLADE TOTALS FOR MAY 2019

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Meristil, Marie Frantzia ARNP	12	2.5	30	49	163%	19.6
Dorce-Medard, Jennifer DO	18	8.0	144	150	104%	18.8
Philistin, Ketely ARNP	16	21.0	336	312	93%	14.9
Harberger, Seneca MD	18	20.5	369	308	83%	15.0
BELLE GLADE ADULT CARE TOTALS		52.0	879	819	93%	
MENTAL HEALTH						
Calderon, Nylsa LMHC	10	3.0	30	20	67%	6.7
BELLE GLADE MENTAL HEALTH TOTALS		3.0	30	20	67%	
DENTAL						
Rotella, Robert DDS	16	4.0	64	54	84%	13.5
Seminario, Ada DDS	16	14.0	224	175	78%	12.5
Alonzo, Zenaida DDS	16	3.0	48	31	65%	10.3
BELLE GLADE DENTAL TOTALS		21.0	336	260	77%	
DENTAL HYGIENE						
Alfaro, Maria Hyg	8	16.5	132	77	58%	4.7
BELLE GLADE DENTAL HYGIENE TOTALS		16.5	132	77	58%	
BELLE GLADE TOTALS		92.5	1377	1176	85%	

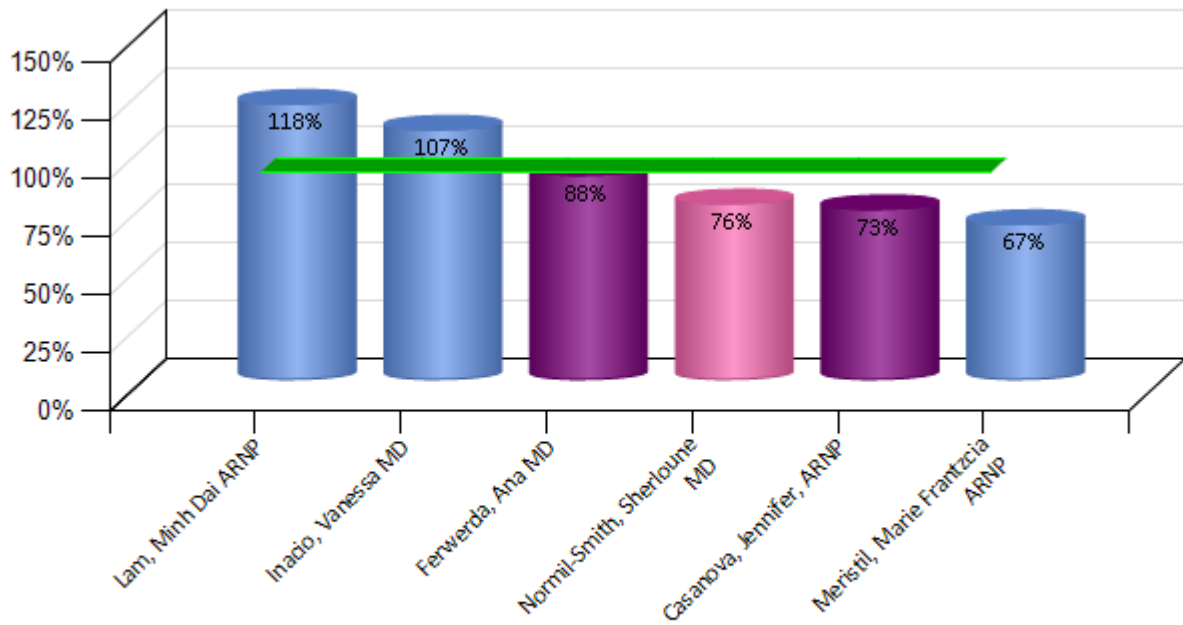
BELLE GLADE PROVIDER PRODUCTIVITY MAY 2019



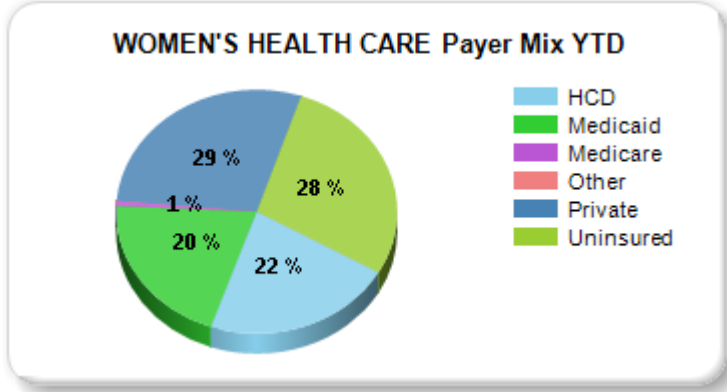
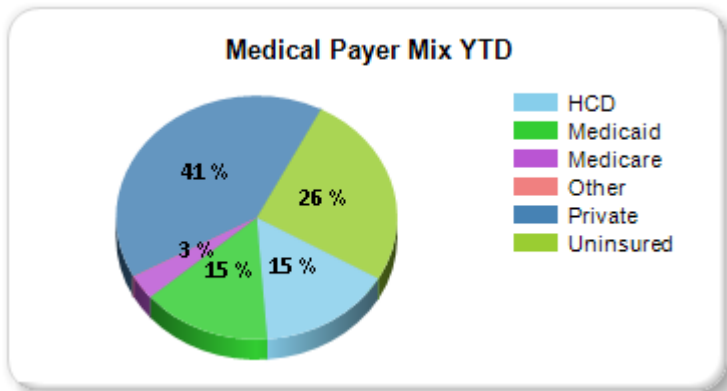
BOCA TOTALS FOR MAY 2019

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Lam, Minh Dai ARNP	16	17.0	272	322	118%	18.9
Inacio, Vanessa MD	18	16.0	288	309	107%	19.3
Meristil, Marie Frantzcia ARNP	12	1.0	12	8	67%	8.0
BOCA ADULT CARE TOTALS		34.0	572	639	112%	
PEDIATRIC CARE						
Normil-Smith, Sherloune MD	18	7.5	135	102	76%	13.6
BOCA PEDIATRIC CARE TOTALS		7.5	135	102	76%	
WOMEN'S HEALTH CARE						
Ferwerda, Ana MD	18	5.0	90	79	88%	15.8
Casanova, Jennifer, ARNP	13	6.0	78	57	73%	9.5
BOCA WOMEN'S HEALTH CARE TOTALS		11.0	168	136	81%	
BOCA TOTALS		52.5	875	877	100%	

BOCA PROVIDER PRODUCTIVITY MAY 2019



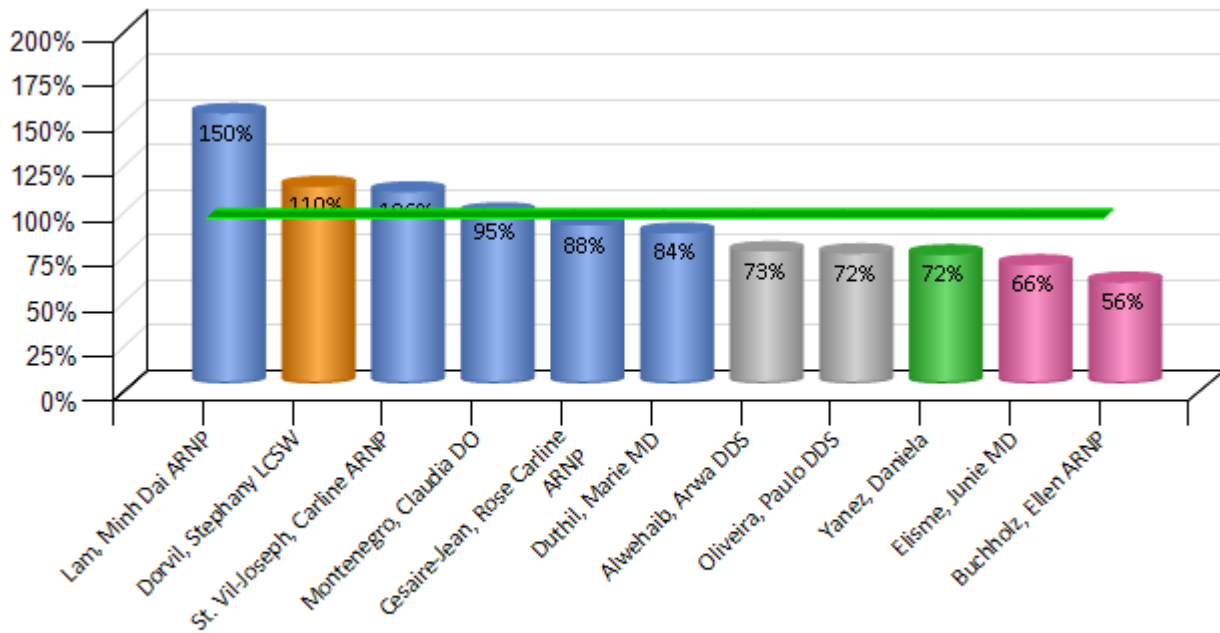
■ Pediatrics
 ■ Adult Care
 ■ Women's Health



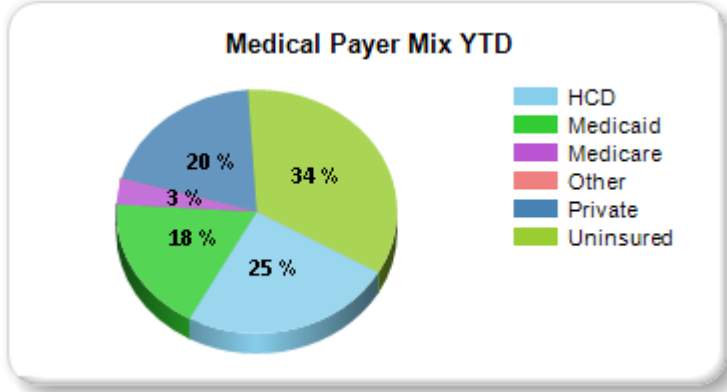
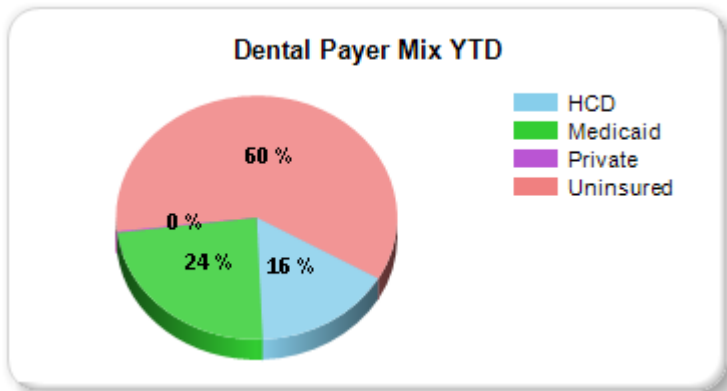
DELRAY BEACH TOTALS FOR MAY 2019

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Lam, Minh Dai ARNP	16	1.0	16	24	150%	24.0
St. Vil-Joseph, Carline ARNP	16	14.5	232	247	106%	17.0
Montenegro, Claudia DO	18	16.0	288	273	95%	17.1
Cesaire-Jean, Rose Carline ARNP	16	19.5	312	274	88%	14.1
Duthil, Marie MD	18	19.0	342	286	84%	15.1
DELRAY BEACH ADULT CARE TOTALS		70.0	1190	1104	93%	
PEDIATRIC CARE						
Elisme, Junie MD	18	16.0	288	190	66%	11.9
Buchholz, Ellen ARNP	16	2.0	32	18	56%	9.0
DELRAY BEACH PEDIATRIC CARE TOTALS		18.0	320	208	65%	
MENTAL HEALTH						
Dorvil, Stephany LCSW	10	20.0	200	219	110%	11.0
DELRAY BEACH MENTAL HEALTH TOTALS		20.0	200	219	110%	
DENTAL						
Alwehaib, Arwa DDS	16	21.5	344	252	73%	11.7
Oliveira, Paulo DDS	16	19.0	304	219	72%	11.5
DELRAY BEACH DENTAL TOTALS		40.5	648	471	73%	
DENTAL HYGIENE						
Yanez, Daniela	8	18.0	144	103	72%	5.7
DELRAY BEACH DENTAL HYGIENE TOTALS		18.0	144	103	72%	
DELRAY BEACH TOTALS		166.5	2502	2105	84%	

DELRAY BEACH PROVIDER PRODUCTIVITY MAY 2019



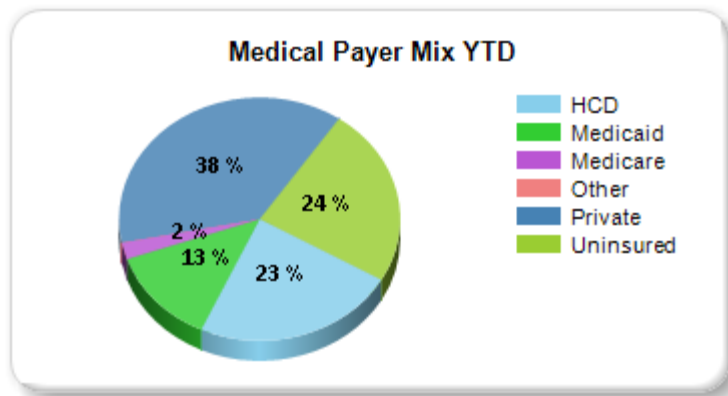
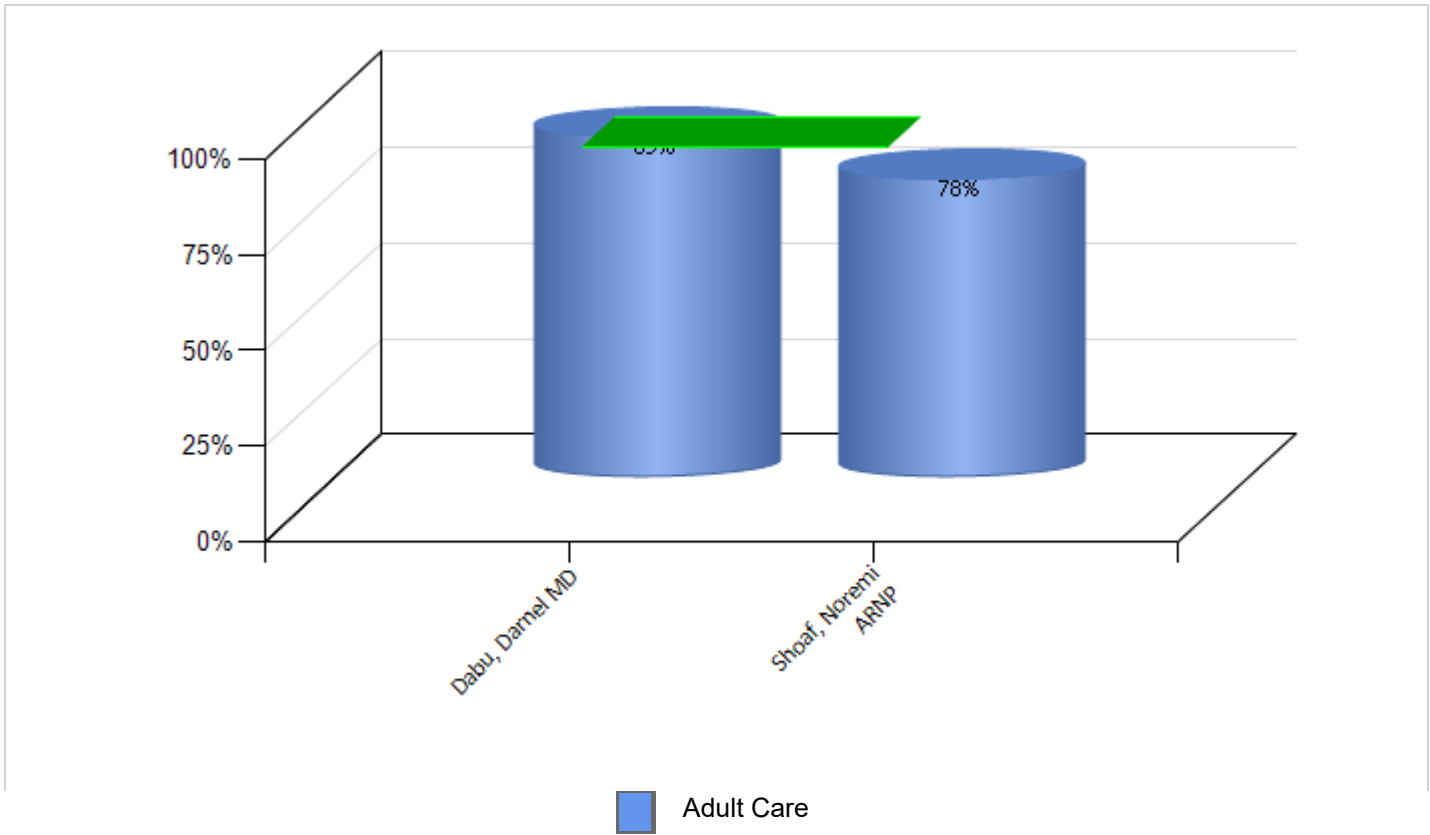
■ Mental Health
 ■ Pediatrics
 ■ Adult Care
 ■ Dental
 ■ Dental Hyg.



JUPITER TOTALS FOR MAY 2019

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Dabu, Darnel MD	18	20.0	360	319	89%	16.0
Shoaf, Noremi ARNP	16	19.0	304	236	78%	12.4
JUPITER ADULT CARE TOTALS		39.0	664	555	84%	
JUPITER TOTALS		39.0	664	555	84%	

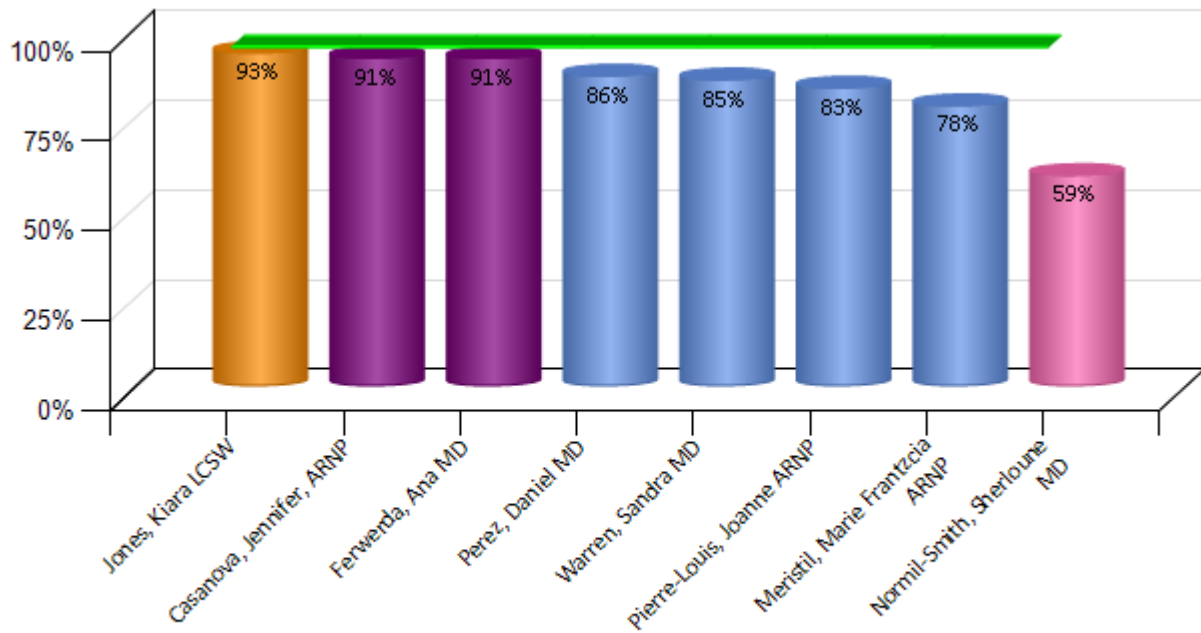
JUPITER PROVIDER PRODUCTIVITY MAY 2019



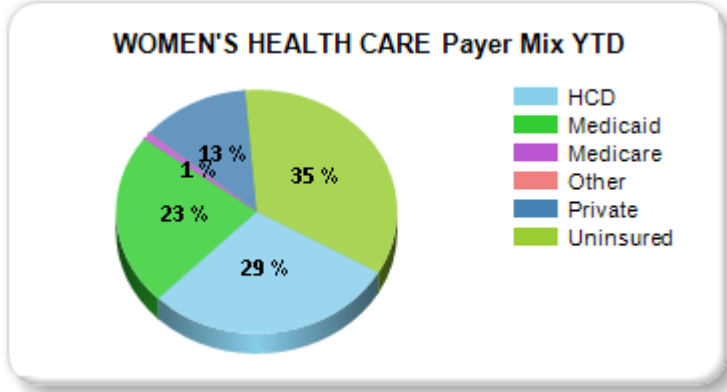
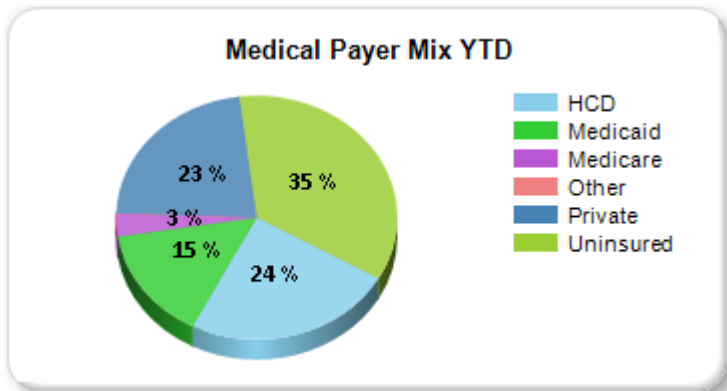
LAKE WORTH TOTALS FOR MAY 2019

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Perez, Daniel MD	18	21.0	378	326	86%	15.5
Warren, Sandra MD	18	19.5	351	299	85%	15.3
Pierre-Louis, Joanne ARNP	16	19.0	304	252	83%	13.3
Meristil, Marie Frantzcia ARNP	12	14.0	168	131	78%	9.4
LAKE WORTH ADULT CARE TOTALS		73.5	1201	1008	84%	
PEDIATRIC CARE						
Normil-Smith, Sherloune MD	18	11.0	198	116	59%	10.5
LAKE WORTH PEDIATRIC CARE TOTALS		11.0	198	116	59%	
WOMEN'S HEALTH CARE						
Casanova, Jennifer, ARNP	13	14.0	182	166	91%	11.9
Ferwerda, Ana MD	18	10.0	180	164	91%	16.4
LAKE WORTH WOMEN'S HEALTH CARE TOTALS		24.0	362	330	91%	
MENTAL HEALTH						
Jones, Kiara LCSW	10	19.0	190	176	93%	9.3
LAKE WORTH MENTAL HEALTH TOTALS		19.0	190	176	93%	
LAKE WORTH TOTALS		127.5	1951	1630	84%	

LAKE WORTH PROVIDER PRODUCTIVITY MAY 2019



■ Mental Health
 ■ Pediatrics
 ■ Adult Care
 ■ Women's Health



LANTANA TOTALS FOR MAY 2019

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Meristil, Marie Frantzcia ARNP	12	0.5	6	9	150%	18.0
Presendieu, Heden ARNP	16	16.0	256	282	110%	17.6
Navarro, Elsy ARNP	16	19.0	304	316	104%	16.6
Perez, Daniel MD	18	0.5	9	9	100%	18.0
Alfonso-Puentes, Ramiro MD	18	19.0	342	329	96%	17.3
LANTANA ADULT CARE TOTALS		55.0	917	945	103%	

PEDIATRIC CARE						
Lazaro, Nancy MD	18	20.0	360	335	93%	16.8
Dessalines, Duclos MD	18	13.5	243	225	93%	16.7
LANTANA PEDIATRIC CARE TOTALS		33.5	603	560	93%	

MENTAL HEALTH						
Rowling, Courtney MD	16	16.5	264	290	110%	17.6
Rivera-Pullen, Valerie LCSW	10	20.5	205	154	75%	7.5
Alvarez, Franco MD	16	5.0	80	60	75%	12.0
Calderon, Nylsa LMHC	10	12.5	125	89	71%	7.1
LANTANA MENTAL HEALTH TOTALS		54.5	674	593	88%	

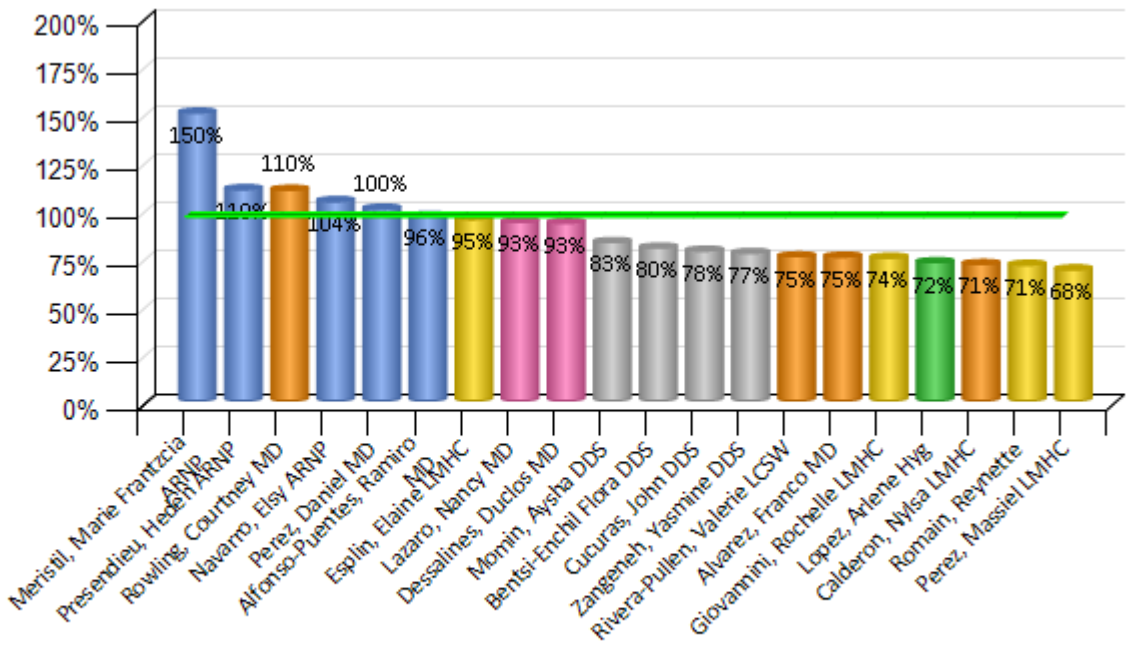
SUBSTANCE ABUSE						
Esplin, Elaine LMHC	10	18.5	185	175	95%	9.5
Giovannini, Rochelle LMHC	10	18.0	180	134	74%	7.4
Romain, Reynette	10	20.5	205	145	71%	7.1
Perez, Massiel LMHC	10	21.5	215	147	68%	6.8
LANTANA SUBSTANCE ABUSE TOTALS		78.5	785	601	77%	

DENTAL						
Momin, Aysha DDS	16	18.0	288	238	83%	13.2
Bentsi-Enchil Flora DDS	16	14.5	232	185	80%	12.8
Cucuras, John DDS	16	2.0	32	25	78%	12.5
Zangeneh, Yasmine DDS	13	10.0	130	100	77%	10.0
LANTANA DENTAL TOTALS		44.5	682	548	80%	

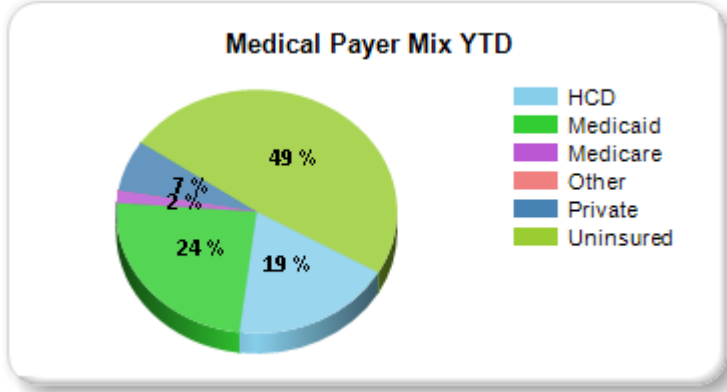
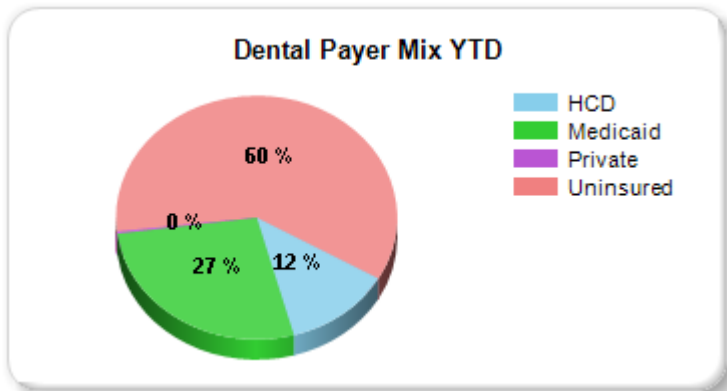
DENTAL HYGIENE						
Lopez, Arlene Hyg	8	21.5	172	124	72%	5.8
LANTANA DENTAL HYGIENE TOTALS		21.5	172	124	72%	

LANTANA TOTALS		287.5	3833	3371	88%	
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LANTANA PROVIDER PRODUCTIVITY MAY 2019



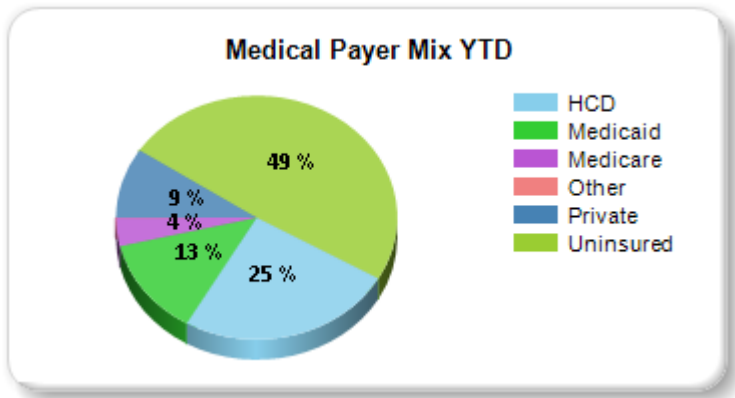
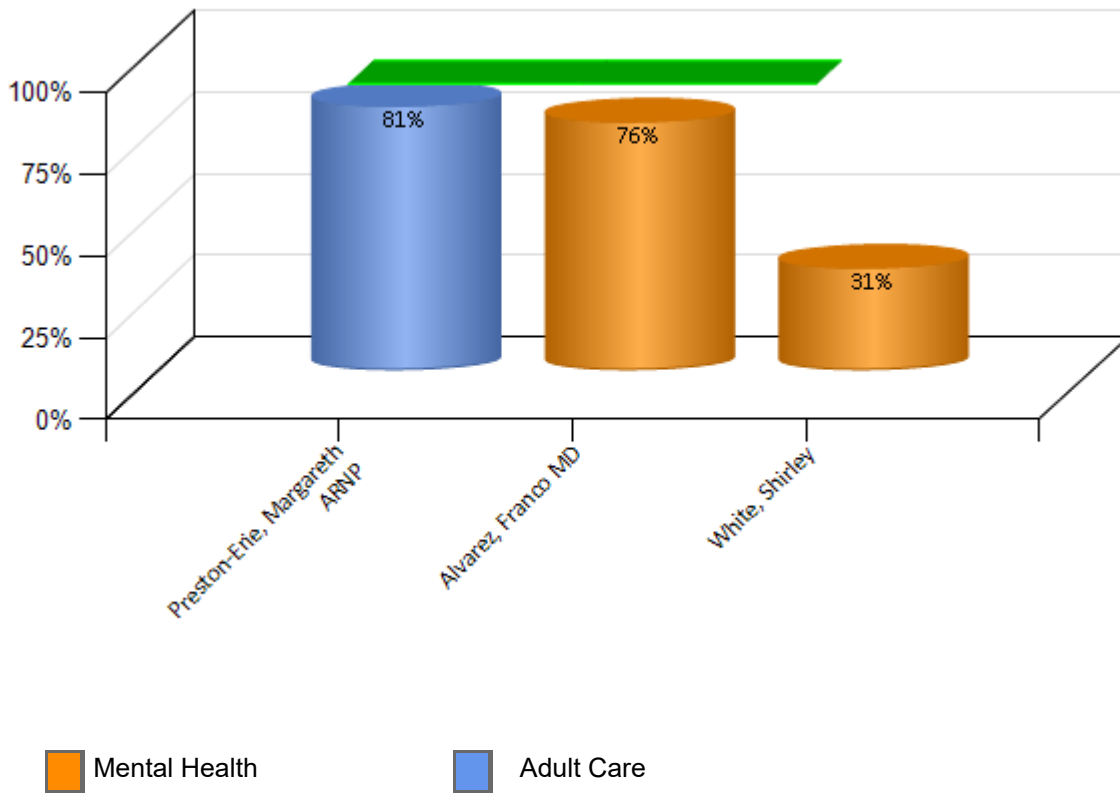
Subs Abuse
 Mental Health
 Pediatrics
 Adult Care
 Dental
 Dental Hyg.



LEWIS CENTER TOTALS FOR MAY 2019

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Preston-Erie, Margareth ARNP	16	21.0	336	271	81%	12.9
LEWIS CENTER ADULT CARE TOTALS		21.0	336	271	81%	
MENTAL HEALTH						
Alvarez, Franco MD	16	16.0	256	194	76%	12.1
White, Shirley	10	4.5	45	14	31%	3.1
LEWIS CENTER MENTAL HEALTH TOTALS		20.5	301	208	69%	
LEWIS CENTER TOTALS			41.5	637	75%	

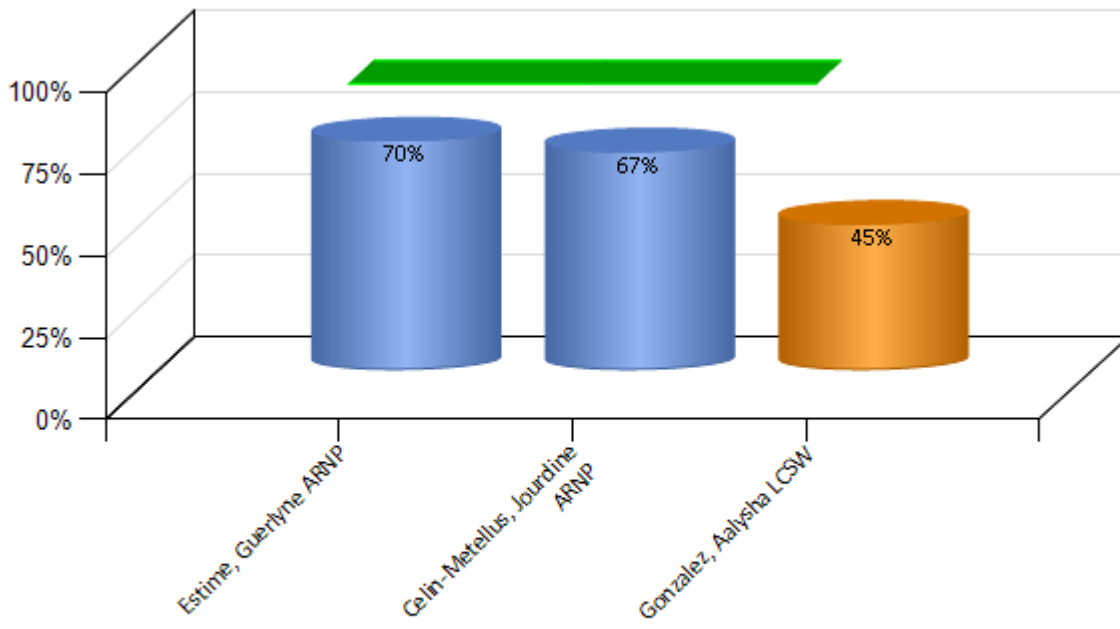
LEWIS CENTER PROVIDER PRODUCTIVITY MAY 2019



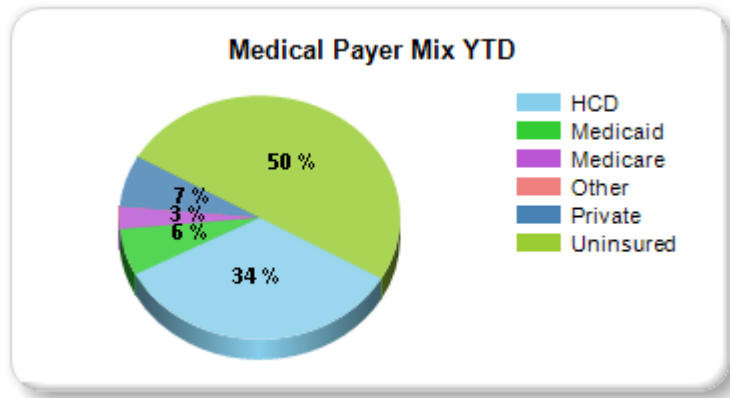
MOBILE CLINIC TOTALS FOR MAY 2019

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Estime, Guerlyne ARNP	12	17.5	210	147	70%	8.4
Celin-Metellus, Jourdine ARNP	12	0.5	6	4	67%	8.0
MOBILE CLINIC ADULT CARE TOTALS		18.0	216	151	70%	
MENTAL HEALTH						
Gonzalez, Aalysha LCSW	10	17.5	175	78	45%	4.5
MOBILE CLINIC MENTAL HEALTH TOTALS		17.5	175	78	45%	
MOBILE CLINIC TOTALS		35.5	391	229	59%	

MOBILE CLINIC PROVIDER PRODUCTIVITY MAY 2019



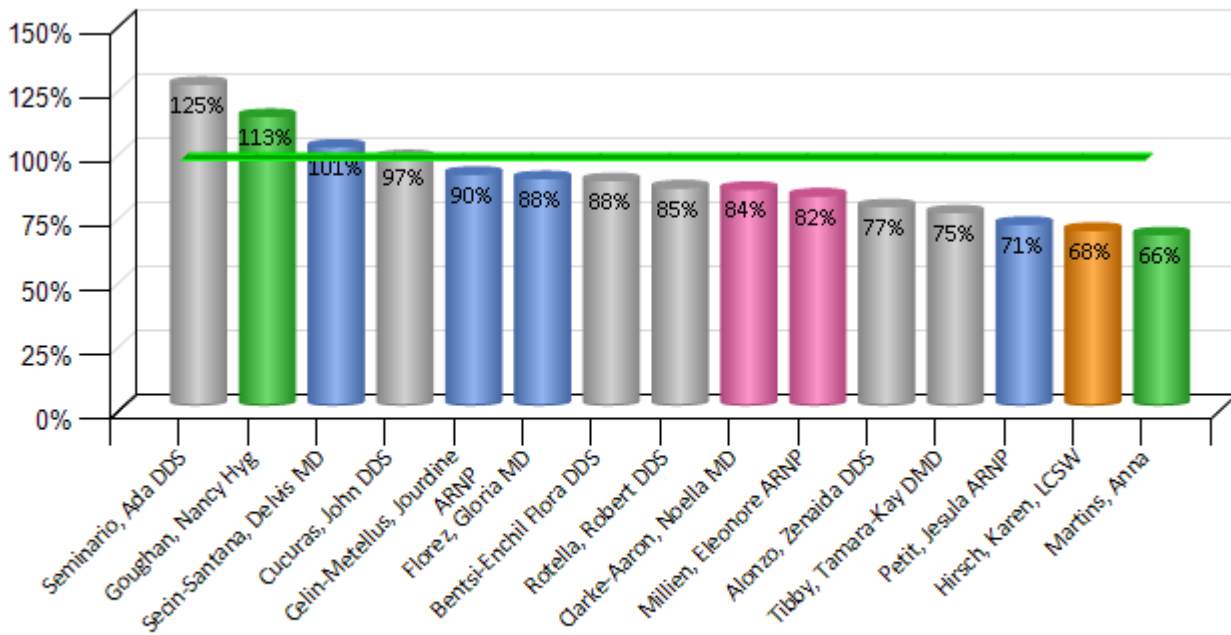
■ Mental Health
 ■ Adult Care



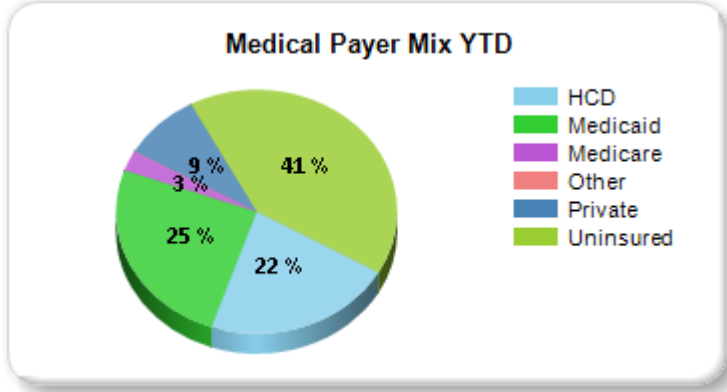
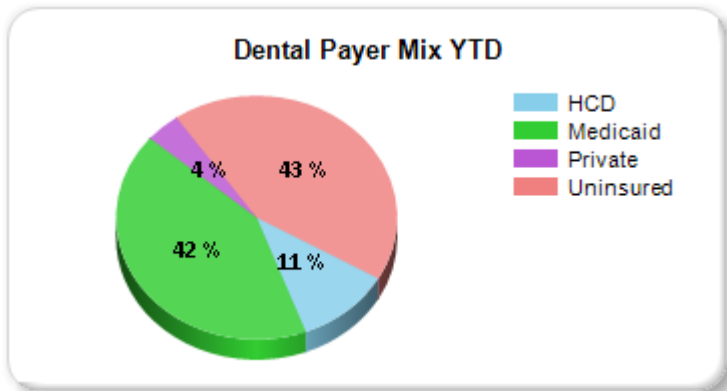
WEST PALM BEACH TOTALS FOR MAY 2019

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Secin-Santana, Delvis MD	16	21.0	336	338	101%	16.1
Celin-Metellus, Jourdine ARNP	16	19.5	312	281	90%	14.4
Florez, Gloria MD	18	21.0	378	334	88%	15.9
Petit, Jesula ARNP	16	21.0	336	237	71%	11.3
WEST PALM BEACH ADULT CARE TOTALS		82.5	1362	1190	87%	
PEDIATRIC CARE						
Clarke-Aaron, Noella MD	18	20.0	360	303	84%	15.2
Millien, Eleonore ARNP	16	20.0	320	261	82%	13.1
WEST PALM BEACH PEDIATRIC CARE TOTALS		40.0	680	564	83%	
MENTAL HEALTH						
Hirsch, Karen, LCSW	10	19.5	195	133	68%	6.8
WEST PALM BEACH MENTAL HEALTH TOTALS		19.5	195	133	68%	
DENTAL						
Seminario, Ada DDS	16	0.5	8	10	125%	20.0
Cucuras, John DDS	16	18.0	288	278	97%	15.4
Bentsi-Enchil Flora DDS	16	2.0	32	28	88%	14.0
Rotella, Robert DDS	16	13.5	216	183	85%	13.6
Alonzo, Zenaida DDS	16	16.0	256	198	77%	12.4
Tibby, Tamara-Kay DMD	16	0.5	8	6	75%	12.0
WEST PALM BEACH DENTAL TOTALS		50.5	808	703	87%	
DENTAL HYGIENE						
Goughan, Nancy Hyg	8	1.0	8	9	113%	9.0
Martins, Anna	8	19.0	152	101	66%	5.3
WEST PALM BEACH DENTAL HYGIENE TOTALS		20.0	160	110	69%	
WEST PALM BEACH TOTALS		212.5	3205	2700	84%	

WEST PALM BEACH PROVIDER PRODUCTIVITY MAY 2019



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



DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

1. Description: Licensed Independent Practitioner Credentialing and Privileging

2. Summary:

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

3. Substantive Analysis:

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

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

Last Name	First Name	Degree	Specialty	Credentialing
Alwehaib	Arwa	DDS	General Dentistry	Recredentialing
Dorce-Medard	Jennifer	DO	Family Medicine	Recredentialing
Momin	Aysha	DDS	General Dentistry	Recredentialing
Navarro	Elsy	APRN	Family Medicine Nurse Practitioner	Recredentialing
St. Vil-Joseph	Carline	APRN	Family Medicine Nurse Practitioner	Recredentialing
Warren	Sandra	MD	Preventive Medicine	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 and Dental Director to support the credentialing and privileging process.

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

Arwa Alwehaib, DDS joined the Delray Clinic in 2015 specializing in General Dentistry. She attended the Baghdad University College of Dentistry and completed her residency program at Nova Southeastern University. Dr. Alwahaib has been practicing for over 15 years, is fluent in Arabic and conversant in Spanish and French.

Jennifer Dorce-Medard, DO joined the Belle Glade Clinic in 2017 specializing in Family Medicine. She attended Touro College of Osteopathic Medicine, completed her residency program at Broward Health Medical Center and also completed a Sports Medicine Fellowship at Nova Southeastern University. Dr. Dorce-Medard is certified in Family Medicine and Osteopathic Manipulative Treatment by the American Osteopathic Board of Family Physicians. She has been in practice for 3 years and is fluent in French Creole.

Aysha Momin, DDS joined the Lantana Clinic in 2015 specializing in General Dentistry. She attended the Indiana University School of Dentistry. Dr. Momin has been practicing for 12 years and is fluent in Hindi.

Elsy Navarro, APRN joined the Lantana Clinic in 2015 as a Nurse Practitioner specializing in Family Medicine. She attended the State University of New York at Stony Brook and is certified as an Adult Nurse Practitioner by the American Academy of Nurse Practitioners. Ms. Navarro has been practicing for 8 years and is fluent in Spanish.

Carline St. Vil-Joseph, APRN joined the Delray Clinic in 2015 as a Nurse Practitioner specializing in Family Medicine. She attended the Long Island University and is certified as a Family Nurse Practitioner by the American Academy of Nurse Practitioners. Ms. St. Vil-Joseph has been practicing for 16 years and is fluent in French Creole and conversant in Spanish.

Sandra Warren, MD joined the West Palm Beach Clinic in 2015 specializing in Preventive Medicine. She attended the Universidad de Caldas and completed her residency program at the Palm Beach County Department of Health. Dr. Warren is certified in Public Health and General Preventive Medicine by the American Board of Preventive Medicine. She has been practicing for over 25 years and is fluent in Spanish.

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

 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

N/A

Committee Name

Date Approved

6. Recommendation:

Staff recommends the Board approve the recredentialing and renewal of privileges of Dr. Alwehaib, General Dentistry.

Staff recommends the Board approve the recredentialing and renewal of privileges of Dr. Dorce-Medard, Family Medicine.

Staff recommends the Board approve the recredentialing and renewal of privileges of Dr. Momin, General Dentistry.

Staff recommends the Board approve the recredentialing and renewal of privileges of Ms. Navarro, Family Medicine Nurse Practitioner.

Staff recommends the Board approve the recredentialing and renewal of privileges of Ms. St. Vil-Joseph, Family Medicine Nurse Practitioner.

Staff recommends the Board approve the recredentialing and renewal of privileges of Dr. Warren, Preventive Medicine.

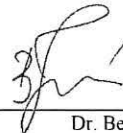
Approved for Legal sufficiency:



Christy Goddeau *for the*
General Counsel



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



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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

1. Description: Quality Council Reports

2. Summary:

This agenda item provides the following:

- Quality Council Minutes – Jun 2019
- UDS Report – YTD May 2019

3. Substantive Analysis:

QUALITY

Of the 14 UDS Measures: 7 Exceeded the HRSA Goal and 7 were short of the HRSA Goal. Interventions were defined.

We are now able to run reports on Women’s Health data which we will trend to identify opportunities for improvement.

An Athena consultant completed an assessment of usage and workflows in the clinic in the month of June. Her findings and recommendations are aimed at improving efficiencies in managing and processing patients.

Pharmacy has implemented mail orders for the Jupiter patients. This will be extended to Lake Worth and Boca patients eventually.

We are working on an integrated health approach for diabetes care coordination, where high risk diabetic patients receive both medical and dental care with a goal of improving A1C and overall health outcomes. This will be piloted in the West Palm Clinic.

UTILIZATION

A review of appointment trends from for Tele-Psychiatry showed an increased in visits from April to May 2019. Total unduplicated patients seen in April and May for Tele-psychiatry was 22.

PATIENT SATISFACTION

Patient satisfaction surveys are being collected daily in the clinics now. We will be able to report on the first month’s outcome at the next board meeting.

RISK

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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
June 26, 2019

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Darcy J. Davis
Chief Executive Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date Approved

6. Recommendation:

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

Approved for Legal sufficiency:



Christy Goddeau *For the*
General Counsel



Dr. Noelle Stewart
FQHC Medical Director



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

Quality Council Meeting Minutes

Date: June 14th, 2019

Time: 1:00pm – 3:00 pm

Attendees: Dr. Belma Andric – Chief Medical Officer/Executive Director, Julia Bollard – FQHC Board Member Dr. Noelle Stewart – FQHC Medical Director; Dr. Duclos Dessalines – Director of Pediatrics; Dr. Tamara-Kay Tibby - Dental Director; Dr. Ana Ferwerda – Director of Women’s Health; Dr. Courtney Rowling - Director of Behavioral Health (via WebEx); Lisa Hogans – Director of Nursing; Nancy Fox-Goughan, Dental Quality Coordinator; Maria Chamberlin – Nurse Manager; Zulma Almeida Jairala – FQHC Director Of Operations; Terry Megiveron – Director of Business; Development Andrea Steele – Corporate Quality Director (via WebEx)

Absent: David Speciale – Patient Experience Manager; Marguerite Lynch – Project Coordinator; Dr. Dorce-Medard – DIO

Minutes by: Jonathan Dominique / David Speciale

<u>AGENDA ITEM</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
QUALITY				
48-HOUR METRICS				
Medical Metrics	<p><u>Open Orders, Labs, & Documents – Provider Buckets:</u></p> <p>May 2019 – For March there were 2 Providers, 1 Resident, and 3 Nurse buckets that did not comply with the 48-hour metric. Chart Auditor has begun to report weekly 48 hour metrics to be addressed in more real time</p> <p>May 2019 - Provider buckets reviewed weekly (4 times for the month). The data from the bucket reviews were compiled and compliance rates for this 48-hour measure are as follows:</p> <ul style="list-style-type: none"> • MD/DO – 89% (↑ from April) • ARNP – 100% (↑ from April) • Residents – 92% (same as April) • Nurse Buckets – 67% (Same as April) • Social Work – 100% (Same as April) 			

	<p><u>Diabetes:</u> WPB will serve as a pilot site for diabetes care coordination (medical/dental).</p> <p>Determined how to report diabetes information from Dentrix.</p> <p>The dental program applied for NNOHA Integrating Oral Health Care into Primary Care Practice Learning Collaborative where our team can learn from other health centers strategies for implementing the MDI program and learn from others who have diabetes pilot.</p> <ul style="list-style-type: none"> • Nancy Gonzalez- Dental Champion • Desalines Duclos – Medical Champion • Andrea Steele – IT Champion 	<p>Dr. Tibby and Dr. Stewart will collaborate on a workflow to automate data in Tableau (July 2019).</p> <p>Improvements needed: Medical providers should be trained on caries risk assessment and screening. Pre- and post-test for pediatric providers.</p> <p>Monthly MDI meetings with entire team</p> <p>Complete MDI workflow.</p> <p>Track referrals to Diabetes. Discuss in Medical Wkgrp. Have Monica build a report in Tableau. The estimated target group is 1584 diabetics who have an A1C over 9. Estimate that 1/3 of these are at WPB clinic.</p> <p>Need to develop workflow to track referrals, dental cleanings and correlate to A1C.</p>		
UDS REPORT				
<u>May 2019</u>				
Of the 14 UDS Measures: 7 Exceeded the HRSA Goal and 7 were short of the HRSA Goal (<i>Clinic Score/ HRSA Goal</i>)				

Medical UDS Report	Childhood immunization: (50%/60 %) It appears that pneumococcal and DTAP are the vaccines with lower rates. This may be because they each require 4 administrations and Athena may be counting those not yet due in the not satisfied. Athena may be looking at completed vaccines and not up to date as satisfied.	Check Athena report definition for pneumococcal and DTAP and determine if unsatisfied includes not completed.	David/Andrea	7/12/2019
	Reports from Tableau were reconciled against Florida shots. Some patients were satisfied in FL Shots but unsatisfied in Athena.	Use Florida shot overdue data for pneumococcal and DTAP to reach out to patients and schedule for vaccine administration.	David/Andrea	7/12/2019
	MA in Lake Worth was unable to provide the requested list.	Check the FL Shot satisfied patients that are unsatisfied in Athena to determine if it is because vaccines have not been reconciled.	David	7/12/2019
	Chart Auditor now has access to vaccine error queue.	The nurse educator will observe the MA in Lake Worth and will provide training to ensure that she is satisfying competencies.	Lisa	7/12/2019
	Clinics will get additional vaccine fridges	Chart auditor will begin working the vaccine error queue and supply an update of number of errors left	Lisa	7/12/2019
	Creating a call list in the patient access in order to schedule those due for vaccinations including Flu and HPV.	Will meet to discuss final placement of all fridges.	Lisa	7/12/2019
		Working Athena for the reconciliation workflow		

	<p>Cervical Cancer Screening: (60.30% /65%/HP 93%) Starting lunch and learn in Belle Glade. We will be presenting the report of abnormal PAPs. Spoke to Quest Lab team about extending the retrieval time of pap smear results from one year to past 4 years.</p> <p>Registration face sheet-Rendering provider issue where Physician is listed as rendering provider in frontline instead of the ARNP. The frontline is issuing those reports</p>	<p>Starting Thursdays in May, the Medical and WH Director will go to one clinic a week for cervical cancer lunch learn. Follow up with quest on request for pap results</p> <p>Schedule Quantum training from Quest on how to see labs from outside providers.</p> <p>All team members should be set up with Quantum- not only leads</p> <p>Inform the Frontline staff to make corrections to said reports per visit.</p>	<p>Dr. Ferwerda & Dr. Stewart</p> <p>Dr. Stewart</p> <p>Zulma</p> <p>Zulma</p>	<p>7/12/2019</p> <p>7/12/2019</p> <p>7/12/2019</p> <p>7/12/2019</p>
	<p>Weight Assessment, Children & Adolescent: (77% /90 %) Family medicine provider was not aware of the order set that needed to be dropped and was recently re-trained.</p>			
	<p>Adult Weight screening and follow up: (98.18% / 90%)</p>			
	<p>Tobacco use screening & cessation: (97.04% / 93%) Quitline report reviewed from 1/1/2019 – 6/10/2019. Of the 3,413 unduplicated patients who self-identified as a smoker, there were 150 patients referred from clinics to Quitline services of which:</p> <ul style="list-style-type: none"> • 78 (52%) patients could not be reached • 42 (28%) patients accepted services • 25 (17%) patients declined services 	<p>Clinic staff and Practice Managers should be reminded the importance on Quitline referrals and be encouraged to refer all patients who identify as smokers.</p>	<p>Clinic Directors</p>	<p>ASAP</p>

	<ul style="list-style-type: none"> • 4 (3%) patients were already enrolled • 1 (1%) patient was pending services <p>Referrals by clinic reviewed</p>			
	Asthma Pharmacologic Therapy: (97.32% / 99%)			
	Coronary Artery Disease CAD: (92.53% / 81%)			
	Ischemic Vascular Disease (IVD): 90.86% / 86%)			
	<p>Colorectal Cancer Screening: (45.90% / 82 %)</p> <p>Difficulty in Getting back FIT tests from patients. Patients are appearing as non-compliant in Athena as it's capturing the measurement year instead of when they're due.</p> <p>Abnormal Fit Test report will be followed up weekly. We are reconciling all abnormal FIT from May 2018.</p> <p>A new log was created to make nurse responses more consistent. This will be started in June.</p> <p>For May 2018 – April 2019 there were a total of 198 Abnormal FIT tests of which:</p> <ul style="list-style-type: none"> • 72 (36%) have been closed • 126 (64%) remain open and follow-up status is pending <p>For May 2019 there was a total of 17 Abnormal FOT tests of which:</p> <ul style="list-style-type: none"> • 11 (65%) patients received follow-up • 6 (35%) are pending follow-up 	<p>Develop a more robust follow-up procedure with phone calls and developing a customer report</p> <p>Developing FIT test report to go out to teams bimonthly</p> <p>Follow up on POD code drop down options</p> <p>Present Report at next work group (5/2019)</p> <p>Nurses are continuing to monitor all open cases until closed. Report update next meeting</p> <p>Meet with all nurses and instruct them to follow up with Abnormal FOIT tests in a timely manner.</p>	<p>Clinic Directors</p> <p>Dr. Stewart Andrea</p> <p>Dr. Stewart</p> <p>David/Lisa</p> <p>Lisa</p> <p>Lisa</p>	<p>7/12/2019</p> <p>7/12/2019</p> <p>ASAP</p> <p>7/12/2019</p> <p>7/12/2019</p>

	HIV linkage: (100%/85%)			
	Depression screening: (82% / 83%)			
	<p>Hypertension: (70% / 80%) Check and see that the nurse visit controlled bps are being captured as "Satisfied".</p> <p>Providers failing to give short term follow-up for uncontrolled BP and there seems to be a non-adherence to medications.</p>	<p>Working with pharmacy in the Reeducation of providers to send patients for interval follow-up at 2 weeks, and encourage them to combination pills for therapy</p> <p>Pharmacy is helping send patient messages to providers and recommending a change to combination therapy when possible.</p>		
	<p>Diabetes: (55% / 67%) (53% / 65%) Measure is capturing any diabetic who has not had A1c done in 2019, even if patient is not yet due for the screening test. Reporting bias. It is expected that over the year, numbers will improve.</p> <p>Retraining populating A1C results on QM Tab</p>	<p>Schedule Diabetes Lunch and learns to train providers in treating diabetes and advancing therapies. Developing a plan/campaign.</p> <p>Pharmacy will also help in providing help in preventative initiatives.</p>		

Dental UDS & Quality Metrics	Dental Triage May 2019: 96% (517/541) of all patients who present for a triage get seen for a same day appointment	Limited/Triage. Measure is being revised to include patients who had extraction or procedure on the same day. Measure improved from 90% of 340 total patients in May 2018 to 96% of 541 in May 2019.	Dr. Tibby	
	Instadose Tracking – May 2019 No Report- Will be reported quarterly			
	Complication Rates No Update. Earliest deliverable will be July 2019	Develop and report Dental Complication Rates	Dr. Tibby	7/12/2019
	Dental Sealants NNOHA No Report	No Update.		
	Medical History Forms The paper medical history form is only completed at the patient’s initial examination appointment. Team members have been retrained to do a verbal update on all returning patients. Laminated copy of the medical history forms, in all four languages, are in each operatory as a reference.	The Quality Team will work on detailed dental patient flow that will define all checkpoints for dental patients after registration to the coding. This patient flow will define what is done with the patient medical history form (i.e. doing away with paper medical history). The goal is to eliminate the medical history form. This has to be finalized before the team members are trained. This will be developed into an SOP. with the following areas: Verify Appointment, Med history, Vital Signs Section, and Consent Revisit going to an electronic medical history for the patient’s initial visit.	Nancy Lisa Dr. Tibby Dr. Tibby	7/12/2019 7/12/2019

Pediatric Quality Metrics	<p><u>FLU</u> To be discussed at next meeting.</p>			
	<p><u>Weight Management</u></p> <p>Providers are not dropping for weight management which is affecting the UDS numbers.</p> <p>Entering Vaccines in Athena. In reference to the above, it appears that sometimes even when physicians do go about checking off the info, it isn't logged.</p>	<p>This issue has been addressed.</p> <p>Tasking group from wpb clinic to use Florida shots history to enter into the EHR during visit</p>		
	<p><u>HPV</u> No Report</p>			
Substance Abuse Quality Metrics	<p><u>May 2019</u></p> <ul style="list-style-type: none"> • MAT Program Census – 130 Patients • New Patient Intakes – 16 Patients • Patient Readmits – 3 Patients • Patient Discharges – 11 Patients • Reason for Discharge. Of the 11 patients: <ul style="list-style-type: none"> - 9 unable to locate - 1 relocated - 1 transitioned into a higher level of care <p><u>Treatment Phase</u></p> <p>Phase 1 – 51 (39%) Phase 2 – 34 (26%) Phase 3 – 10 (8%) Phase 4 – 24 (18%) Vivitrol Patients – 7 (5%) Naltrexone Patients – 4 (3%)</p>			

	<p>YTD trends presented and patients are increasingly moving into Phase 2 and 4 of the program.</p> <p>Met with IT to utilize Tableau for Behavioral Health reports including BAM, PHQ-9, Referrals, and WHO's</p>			
	<p><u>Counselor Dashboards</u> New report identified breakdown of counselor's individual caseloads including total # of patients, # of monthly intakes completed, # of monthly discharges completed, and patient phase of treatment for each counselor caseload. Two-month trends presented (except for phase of treatment).</p>	Trend provider caseloads and identify reason for discharge by provider.	David / Dr. Rowling	7/12/2019
Behavioral Health Quality Metrics	<p><u>Tele-psychiatry:</u> reviewed a 2-month appointment trend of Tele-Psychiatry. Appointments have increased from April to May 2019. Total unduplicated patients seen in April and May for Tele-psychiatry was 22.</p> <p>Future reporting to include Behavioral Health Integration trends for pediatric patients.</p>			
	<p><u>PHQ-9</u> May 2019 – There were 3,601 PHQ-9's performed of which</p> <ul style="list-style-type: none"> • 3,444 (96%) were scored • 157 (4%) were unscored <p>The 157 unscored PHQ-9's were reported by clinic site, provider, and possible reasons unscored.</p>	Meet with clinical teams to ensure they are scoring all PHQ2/9 screenings at the time they are administered.	Dr. Stewart, Dr. Rowling	ASAP

	Two-month trends reported A way to do a deeper dive into the data for each mental health specialist.	HQ-2 PHQ-9 data to potentially be placed in tableau to allow for greater data analysis. The increase in data should allow for smarter and more informed decisions in treatment.		
	BH productivity	Experimented in Lantana on Fridays to see if doing more BPS without positive screen is helpful. Will train on that. Will follow productivity.	Dr. Rowling	
	David presented the top 4 providers struggling to screen and follow up with behavioral health. He identified 4 providers with most “unsatisfied PHQ-2/9”	Sit down and go over with Santana, Dabu, Erie, Inacio to “score” and be sure to re-explain process of referring for BH. It is important to stress that each PHQ-2/9	David	
	Chart auditor will review if all positive WHOs/PHQ-9/BH referrals were scheduled with BH and this should be improving now that all staff have been retrained. It will need to be trended from pre-training to post training.	Follow up with report to see if training resulted in change. If some were not scheduled, reason it is not done should be documented by the provider with follow up	Dr. Andric/Zulma	
	Fentanyl testing	Done and being trained and used.	Rowling/Stewart	
	Clinics and TelePsych services	Dr. Rowling will follow up by providing a report per clinic during the next Quality council meeting.		
	FTE provider	Emily, P.A. C to start on 4/17		
Women’s Health UDS	Enrollment Data May 2019			

<p>& Quality Metrics</p>	<ul style="list-style-type: none"> • 17 – Patient Enrollments • 5 - Deliveries • 2 - RPICC Referrals • 0 – Transfers • 0 – Miscarriages <p>YTD trends also presented</p> <p>Age Categories for Prenatal Patients – of 127 patients:</p> <ul style="list-style-type: none"> • 10 (8%) are ages 15-19 • 28 (22%) are ages 20-24 • 89 (70%) are ages 25-44 <p>Early Entry into Prenatal Care</p> <p>1st Trimester</p> <ul style="list-style-type: none"> • 5 (6%) women did not have 1st visit at CLBPCC • 75 (86%) women had 1st visit at CLBPCC • 7 (8%) women did not have initial provider recorded <p>2nd Trimester</p> <ul style="list-style-type: none"> • 2 (6%) women did not have 1st visit at CLBPCC • 27 (84%) women had 1st visit at CLBPCC • 3 (9%) women did not have initial provider recorded <p>3rd Trimester</p> <ul style="list-style-type: none"> • 0 (0%) women did not have 1st visit at CLBPCC • 6 (86%) women had 1st visit at CLBPCC • 1 (14%) women did not have initial provider recorded 			
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	<p><u>Birth Weights (48 Total)</u></p> <ul style="list-style-type: none"> • 98% > 2500 Grams • 2% <1500-2500 Grams • 0% < 1500 Grams <p>Dr. Andric asked about potentially collecting and comparing numbers to existing literature to see how the Clinics compare.</p>	<p>Dr. Ferwerda will look into collecting and grouping data by demographic and comparing to national, regional, state numbers.</p>		
<p>Referral Tracking</p>	<p>May 2019 – Total number of outside referrals ordered by Department / Provider presented, of the 5,214 Outside Referrals ordered:</p> <ul style="list-style-type: none"> • Adult Medicine = 4545 • Pediatric Medicine = 413 • Psychiatry = 21 • Women’s Health = 40 • Residents = 195 <p>Total unduplicated patients served, total unduplicated patients that received a referral, and referral per Provider data reported.</p> <p>Looking to see referrals per provider</p>	<p>Zulma will reach out to David to have the data put in tableau and trended. This way the data can be key in on each provider’s numbers.</p>	<p>Zulma / David</p>	
<p>Human Resources</p>	<p><u>May 2019</u></p> <ul style="list-style-type: none"> • New Hires – 5 • Clinic Terminations – 3 			

Quality Metrics	Voluntary-1 Involuntary-2 <ul style="list-style-type: none"> • Worker’s Comp – 0 <u>YTD trends presented</u> <ul style="list-style-type: none"> • New Hires – 24 • Clinic Terminations – 17 Voluntary- 11 Involuntary- 6 • Worker’s Comp – 2 			
Pharmacy	<u>Pharmacy Warm Handoff (WHO)</u> Last three days of this new process has resulted in more than 40 WHOs across all pharmacies			
	<u>Diabetes Patient Counseling</u> —pharmacy admin to create a counseling program and guidelines for counseling on all new diabetes prescriptions	Will research in pharmacy software how to document patient counseling for each new diabetic prescription	Kristine Luis	
	<u>Deleted Prescriptions in Athena</u> —this is an urgent discussion due to potential safety issue	PCC providers continue to delete RXs in Athena instead of making note and calling pharmacy Spoke with Dr. Andric and Dr. Stewart to address this and begin enforcing provider accountability for this error	Dr. Stewart Dr. Andric	
	<u>Mail Order Pilot</u> —program has been implemented for Jupiter patients	Pilot program will be monitored for patient percentage enrollment; Jupiter PCC staff were trained at the June staff meeting and all West palm/Central Fill staff were trained Friday, June 7 th .		

		<p>Once this pilot program is fully functioning, it will be rolled out to Boca then Lake Worth patients.</p> <p>Pharmacy Services is still pending the Manifesting and Shipping Amendment to add Pitney Bowes to our software—and still pending PB accounts</p>		
Mobile Clinic	<p><u>Delray location</u> 13 patients seen 11 of which are new 6 were also seen by Behavioral Health.</p>			
GRANT UPDATE				
	<p><u>American Cancer Society:</u> <u>HPV:</u> Lunch and learns have been rescheduled and will begin in May. Charts were reviewed to see if HPV refusal form was being used. Findings suggest that team is still not using the forms and instead use the general vaccine refusal. Everyone was retrained to use the specific HPV vaccine form.</p> <p><u>New Access Point Grant</u> – submitted on 4/10/19 for \$650,000. We will have no updates until September.</p> <p><u>QI Grant:</u> Avahna – preliminary documents are with General Counsel for review.</p>	<p>In the month of May, our ACS liaison, along with our team, are going out to the clinics for a lunch and learn on HPV vaccinations</p> <p>Audit charts to see that forms are in fact being used.</p>	<p>Dr. Stewart</p> <p>Lisa</p>	<p>6/14/2019</p> <p>6/14/2019</p>

	<p><u>Overdose Data to Action Department of Health and Human Services Centers for Disease Control – NCIPC</u> A draft narrative and budget provided to Department of Health Palm Beach County on 4/5/2019.</p> <p><u>Integrated Behavioral Health Services (IBHS) Supplemental Funding</u> Award is up to \$145,000. We will have no updates until September.</p> <p><u>Oral Health Infrastructure (OHI) Technical Assistance</u> Award is up to \$300,000. We will have no updates until September.</p> <p><u>Sunshine Health Grant</u> As part of the second round of the grant application process, Lantana and Delray had an Accessibility Site Review performed by the Center for Independent Living of South Florida on Thursday 6/13.</p> <p>Children’s Services Program Grant terminated as of May 31, 2019. The highlights from our grant year October 2018 through May 2019 are:</p> <p>275 dental visits of which 233 were billed to the grant</p> <p>114 dental visits were for restorative care.</p> <p>Restorations (fillings) were the most utilized dental</p>			
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	<p>services and this is a significant improvement over previous years when patients primarily had examinations and did not complete their needed restorative care.</p> <p>79 dental visits were for deep cleanings or prophies.</p> <p>25 dental visits were for extractions.</p>			
CHART REVIEW				
Nursing Chart Review	<p>After Hours – May 2019</p> <p>Total of 45 After Hour Calls of which:</p> <ul style="list-style-type: none"> • 26 were paged and categorized as “urgent” of which: <ul style="list-style-type: none"> - 25 (96%) were compliant with the follow up goal within 24 hours - 1 (4%) was non-compliant with follow up goal • 19 not paged of which 3 should have been paged 	To Be presented at next Quality Council (Was not presented due to time)		
	<p>Critical Lab – May 2019</p> <p>Total of 33 critical labs and all were addressed within 24 hours. Three-month trend presented.</p>	To Be presented at next Quality Council (Was not presented due to time)		
	<p>Higher Level of Care (HLC) – May 2019</p> <p>Total transfers to HLC in May was 126 (up from 116 in April), of which:</p> <ul style="list-style-type: none"> • 79 (63%) Patients seen for Hospital Follow Up • 20 (16%) Patients had no Hospital Follow Up • 14 (11%) Patients have a future appointment • 13 (10%) Patients refused or did not go to the hospital 	To Be presented at next Quality Council (Was not presented due to time)		

	<p>Of the 126 Patients:</p> <ul style="list-style-type: none"> • 41 (33%) hospital records received • 72 (67%) hospital records pending • 13 (10%) NA <p>Four-month trend presented and patients seen for hospital follow up have increased.</p>			
	<p>New Team Member Chart Review – May 2019 Nurse chart auditor conducted a chart review on three new team members: 2 Registered Nurses and 1 Medical Assistant. The review consisted of 5 charts per position. Results concluded that reviews were within the standard of care for all three team members.</p>	<p>To Be presented at next Quality Council (Was not presented due to time)</p>		
	<p>Walk-In Report – May 2019 Patient Walk-In's reviewed from 5/6 thru 5/31/2019. There were a total of 295 patients of which:</p> <ul style="list-style-type: none"> • 205 (69%) patients were seen by the provider • 51 (17%) patients were seen by the nurse • 16 (5%) patients were not required to be seen • 15 (5%) patients walk-in status unknown • 8 (3%) patients received a future appointment <p><u>Future appointments</u> 3 physicals 2 New patient appointments 1 New GYN appointment 2 Medical Adult appointment</p>			

	8 Future appointments which weren't specified as the only future appointments would be school, work, and annual physicals.	Lisa will work with Dr. Ferwerda to ask that the walk-ins are conducted differently. This will allow them to determine the purpose of the future appointment.	Lisa / Dr. Stewart	7/13/2019
	<p><u>New Hire Chart Reviews</u></p> <p>3 New Hires</p> <ul style="list-style-type: none"> • 1 MA- 100% in her charts in all categories • 2 RNs- Are behind on some charts (refer to excel sheet) 	Karen went to reeducate the two RNs in all of the categories where they weren't 100% complete		
Dental Chart Review	<p><u>May Documentation (5 of 14 charts)</u></p> <p>3 Missing (1 anes consent and 1 med hist not signed by provider and 1 chart signed in 72 hours)</p> <p>2 Doc Center Errors 1 scanned upside down, 1 date on consents not</p> <p><u>May Radiographic Quality (4 of 14 charts)</u></p> <p>1 Missing Pano on 9 year old</p> <p>3 Technique Errors (overlapping, many extra PA and lead apron on pano)</p>	Completed Dental Assistant Skills Assessments on Radiographic Quality	Nancy and Dr. Tibby	7/13/2019
	<p><u>ER Referral Chart Reviews</u></p> <p>May 2019:</p> <ul style="list-style-type: none"> • 5-referrals to ER. Patient cases present for all 5 in Athena. • 1 patient had extraction and went to ER for syncope • 1 patient- lost to follow up still needs extraction • 2 patients were hospitalized and had extractions in the hospital 	Although Dental Providers are entering patient case for all ER referral in Athena as trained, the process is not working. The Medical director and Nurse Manager will problem shoot the tracking of the patient cases.		

	<ul style="list-style-type: none"> • St. Mary's 3 days and had extractions done in the hospital • Palms West 5 days and had tooth extracted in the hospital 5 days and he will see a specialist for ongoing care • 1 patient has appt for extraction 6/5/2019 	Meet with Lisa to review Dental ER procedure and workflow with Medical Staff	Lisa	7/13/2019
PEER REVIEW				
Medical Peer Review:	In process for Q1 2019			
Dental Peer Review:	In process for Q1 2019			
Behavioral Health Peer Review	In process for Q1 2019			
Substance Abuse Peer Review	In process for Q1 2019			
Women's Health Peer Review	In process for Q1 2019			
Nurse Peer Review	Under development	Begin new hire peer reviews for nurses which will be audited by clinical nurse educator	Lisa	7/12/2019

QUALITY ITEMS				
Dental Quality Items	At the August next provider meeting, Dr. Tibby will discuss patient workflows for diabetic and pregnant women patients.			
Patient Satisfaction Survey	The Summer Patient Satisfaction Survey has been launched and is available on the clinic website and on clinic iPads. May 2019 Complaints/Grievances- 5 Compliments- 5	Report update on Patient Satisfaction Survey David will trend this data for next time it's presented.	David	7/12/2019
Medical Quality Report	TRAINING: Hand Hygiene – the clinics completed a three-phase training in April. Phase 1 consisted on an electronic training module and assessment through “Engagedly”. Phase 2 consisted of an onsite training by the Clinic Nurse Educator. Results of the trainings presented. Phase 3 related to post training interventions including the use and monitoring of hand soap and sanitizers through visual observation and through monthly review of supply order requisitions. Risk Training & the annual 340B training were launched in the month of May. We are now using a training effectiveness tool to evaluate the trainers which is completed by the new hires at the end of their training. This will help identify areas that we may need to revise or improve.	These trainings need to be incorporated into new employee onboarding. Bring any notable findings from training effectiveness tool to workgroup.	Dr. Stewart, Karen & Shannon Angela	

POLICY & PROCEDURE - To Be presented at next Quality Council				
Dental				
Medical				
Pharmacy				
Behavioral Health				
Women's Health				
DIRECTOR UPDATES				
Medical Updates	<p>We will begin screening and treating for alcohol and drug use disorder in the clinics. We are currently working on the treatment protocol and hope to present it at the June provider meeting.</p> <p>We are offering Hepatitis A vaccine to all team members and are prioritizing higher risk team members (i.e. mobile clinic and MAT clinic teams)</p>			
New Employee Orientation	<p>The following new employees attended New employee orientation:</p> <ul style="list-style-type: none"> • Zulma Almeida Jairala – Director of FQHC Practice Operations • Jacqueline McKenzie Cameron – Risk Manager for Clinic • Sophonise Rouzard – Dental registration Specialists 			
Pharmacy Updates	<p>As of 5/10/2019 – Pharmacy is delivering to the Mobile Van and of the 68 mobile clinic patients</p> <ul style="list-style-type: none"> • 175 prescriptions were delivered 			

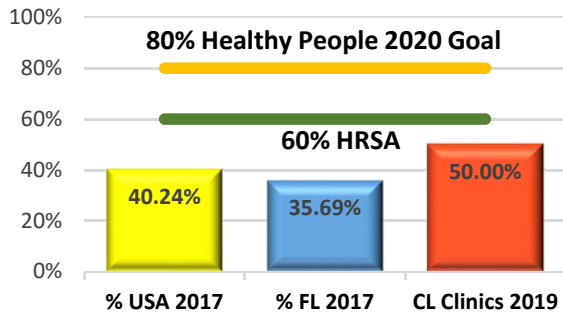
	<ul style="list-style-type: none"> • 12 prescriptions were undelivered <p>Jupiter Clinic there were 35 patients of which</p> <ul style="list-style-type: none"> • 103 prescriptions were delivered • 2 prescriptions were undelivered <p>Pharmacy to start mail order for patients. Patients will be able to coordinate this in person through the clinic pharmacy.</p>			
<p>Dental Updates:</p>	<p><u>Strategic Planning Review</u></p> <p>Dental Provider Dashboard- Pending</p> <p>Pillar 2-Patient Safety Performing Goal: Provide Continuum of Care from Pediatric to Dental Clinic</p> <p>Develop culture of Dental/Pediatric Integration</p> <p>Develop the data collection tools to closely monitor MDI numbers and overall pediatric medical and dental</p>	<p>Updating provider incentive document in Quality Improvement Tab</p> <p>Unlocked charts, sealant measure, post op complications, CRA</p> <p>Create a culture that supports MDI (Strategic Plan), make it easier for WHOs from MDI to be placed in schedule in Lantana</p> <p>Monica to create a dashboard in Tableau for MDI. Will include data from Athena – pediatric patient visits.</p>	<p>Dr. Tibby, Dr. Stewart</p> <p>Dr. Tibby</p>	

Nursing Updates:	<p>Risk manager started on 5/6/19 and is in the clinics shadowing until 5/20.</p> <p>Infection control nurse has been hired and starts 6/3/19 Annual TB screening will be sent out to all team members to complete.</p> <p>Nurse Manager and Nurse Educator will be certified to provide BLS training. We hope offer training to team members on a routine basis.</p>			
Women's Health Updates:	<p>Women's Health UDS measures have been reconciled between Athena and program manual Log. Data will be entered into Tableau. Report to be presented next Quality Council</p>			
UTILIZATION				
Tableau Clinic Dashboards	<p>Tableau dashboards presented:</p> <ul style="list-style-type: none"> • General Indicators • County Service Area – Geographic Distribution Map • Monthly Encounter Trends • Patient Population 	<p>To be presented at next Quality Council.</p>		
Productivity	<p>May 2019 Productivity report was presented (% of monthly target reached).</p> <p>Adult Care- 91% Pediatric Care- 80% Mental Health- 81% Substance Abuse- 77% Women's Health Care- 88% Dental- 80% Dental Hygiene- 68%</p>			

	There was a concern with in-between OB visits not counting as billable visits	Terry is going to look into this to see how the tracking could be more accurate.		
Meeting Adjourned – 3:15pm				

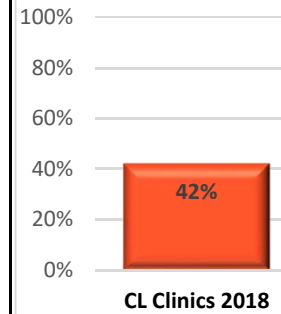
C. L. BRUMBACK PRIMARY CARE CLINICS
YTD May 2019

CHILDHOOD IMMUNIZATION

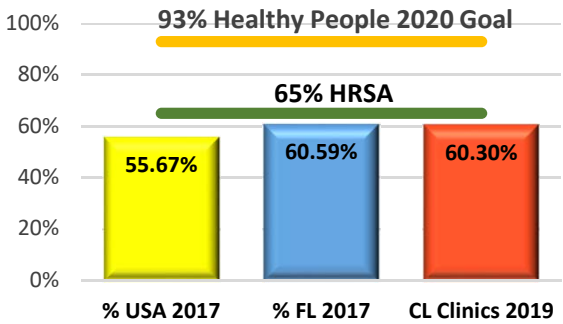


Findings: 1. Lowest rates in, Pneumococcal, Rotavirus and Influenza 2. Reconciliation of vaccines with Florida Shots is still faulty

Interventions: 1. Create call list for patient access to schedule appointments for those due for vaccines. 2. Work with Athena for Recociliation workflow.

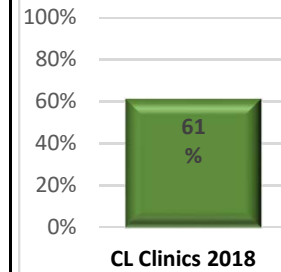


CERVICAL CANCER SCREENING

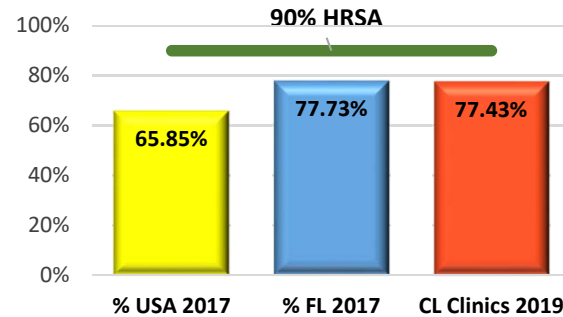


Findings: 1. Difficulty getting records from outside providers that have performed the screening. 2. Patients are showing as non-compliant although they did not have an encounter in the measurement year

Interventions: 1. Develop care teams to improve efficiencies in following up on requested medical records. 2. Develop a custom report. 3. Work with Athena to investigate this issue.

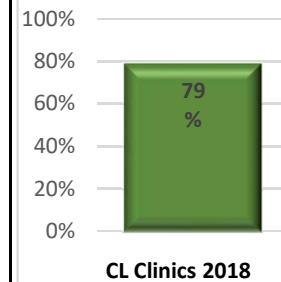


WEIGHT SCREENING AND COUNSELING FOR CHILDREN AND ADOLESCENTS



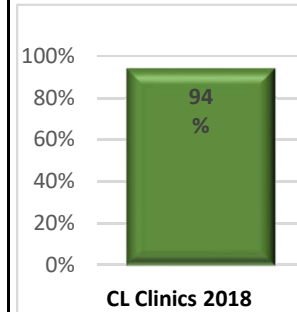
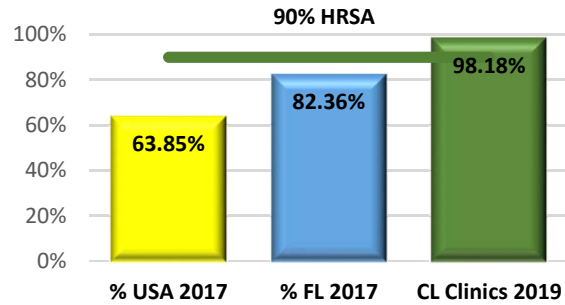
Findings: 1. Providers not dropping the order group at every visit.

Interventions: 1. Train providers that health education should be given at every visit regardless of reason for visit.

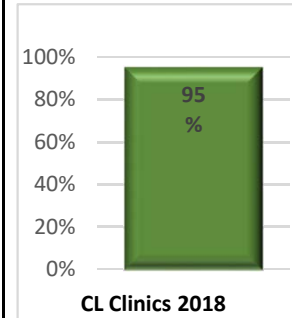
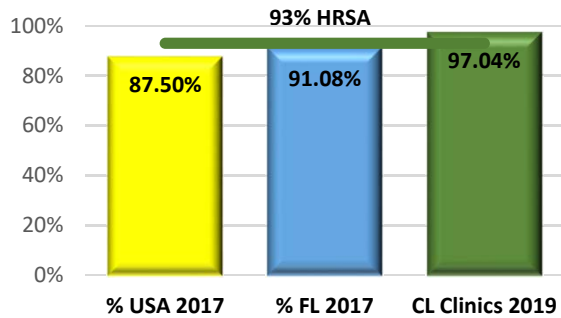


C. L. BRUMBACK PRIMARY CARE CLINICS
YTD May 2019

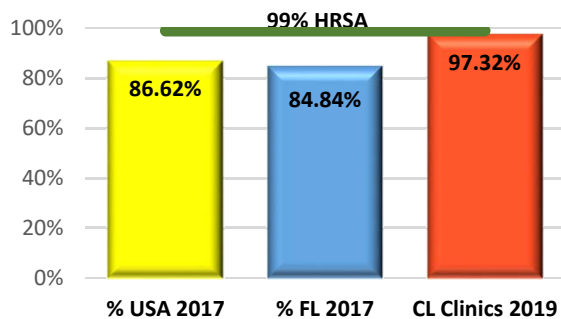
ADULT WEIGHT SCREENING AND FOLLOW UP



TOBACCO USE SCREENING AND CESSATION INTERVENTION

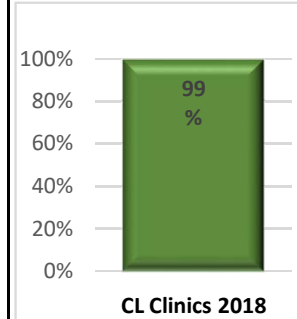


ASTHMA PHARMACOLOGIC THERAPY

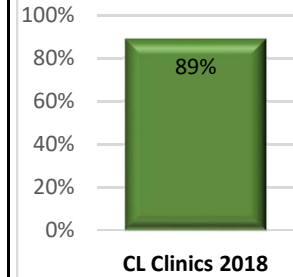
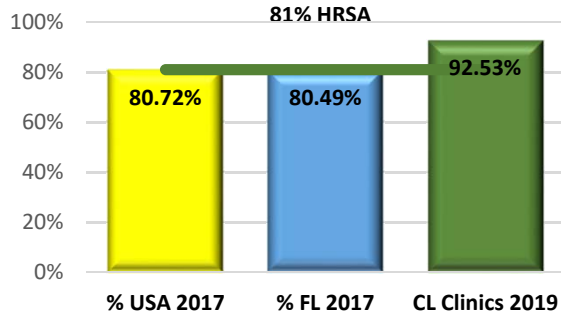


Findings: 1. Providers are diagnosing patients with persistent asthma who likely met criteria for intermittent asthma.

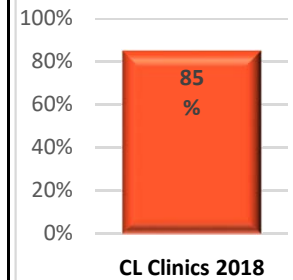
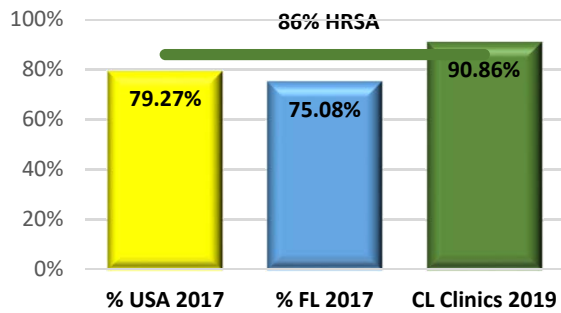
Interventions: 1. Provide education on diagnosis of asthma severity and therapy guidance



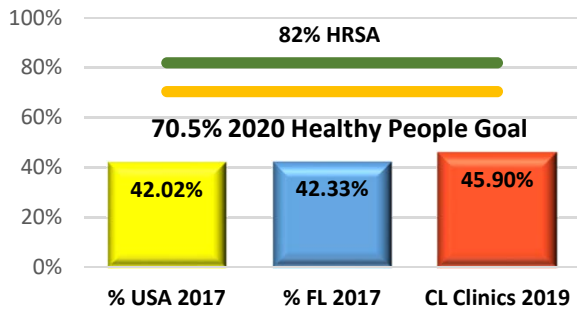
CORONARY ARTERY DISEASE (CAD): LIPID THERAPY



ISCHEMIC VASCULAR DISEASE (IVD): Antiplatelet Therapy

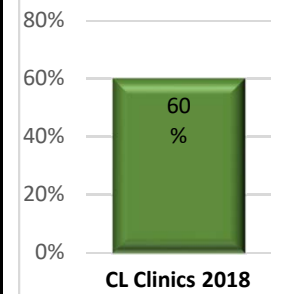


COLORECTAL CANCER SCREENING



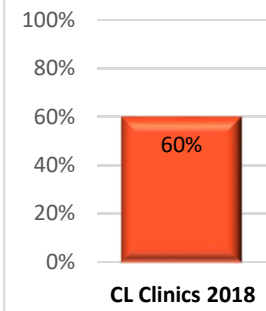
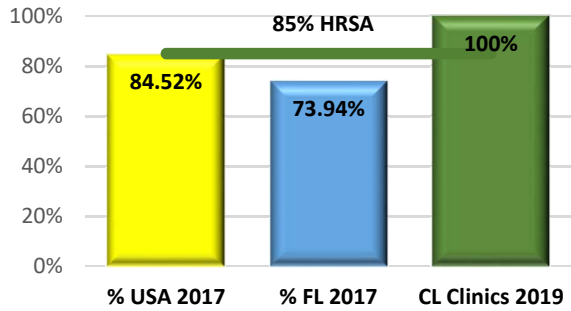
Findings: 1. Difficulty in getting FIT test returned from patient. 2. Patients are showing as non-compliant before their full year is up. Athena is capturing as a measurement year instead of when they are actually due.

Interventions: 1. Encourage POD 2. More robust patient follow up through phone call reminders. 3. Develop a custom report

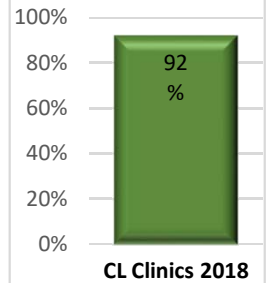
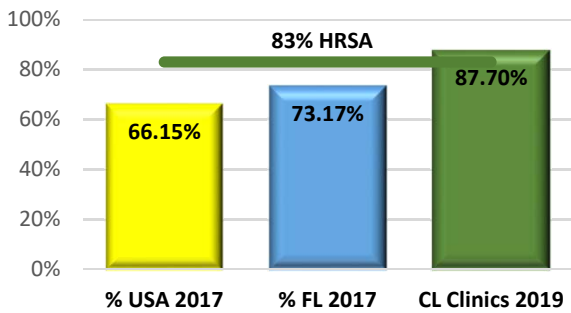


C. L. BRUMBACK PRIMARY CARE CLINICS
YTD May 2019

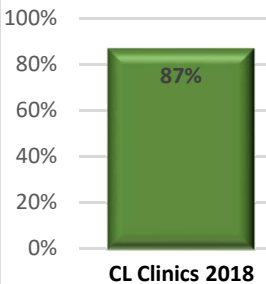
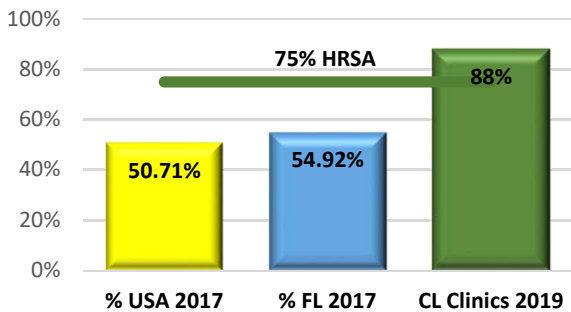
HIV LINKAGE TO CARE



PATIENTS SCREENED FOR DEPRESSION AND FOLLOW-UP

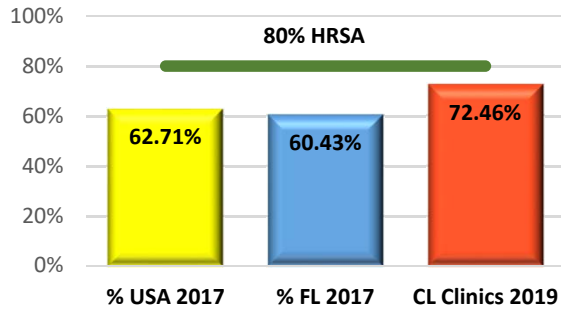


DENTAL SEALANTS



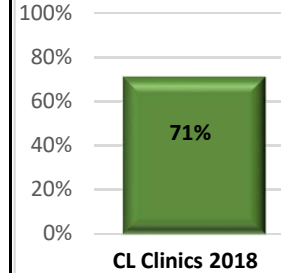
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YTD May 2019

HYPERTENSION

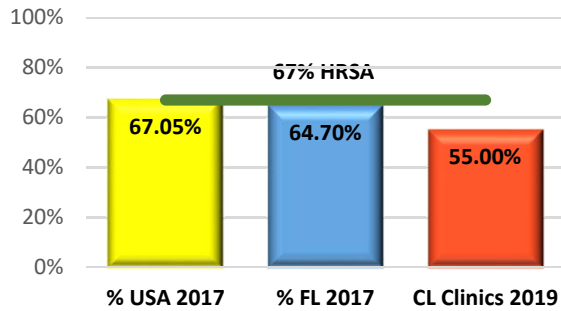


Findings: 1. Providers failing to give short term follow up for uncontrolled BP 2. non-adherence to medication regimen

Interventions: 1. Reeducate on short interval follow up for uncontrolled hypertension and advancement of therapy 2. Encourage use of combination pills. 3. Pharmacy will begin sending patient messages to providers to recommend changing to combination therapy when appropriate.

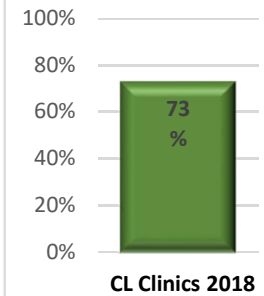


DIABETES



Findings: 1. Providers are not populating A1c results from specialist report.

Interventions: 1. Retrain on populating A1c value in QM tab when specialist note is reviewed.





C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County