

**District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
7/27/2022**

Present: Melissa Mastrangelo, Chair; Mike Smith, Vice-Chair; Julia Bullard, Secretary; James Elder; Irene Figueroa; Robert Glass; Tammy Jackson-Moore

Excused: Vice-Chair; Joseph Gibbons; John Casey Mullen

Staff: Darcy Davis; Dr. Belma Andric; Dr. Hyla Fritsch; Bernabe Icaza; Candice Abbott; Lisa Hogans; Dr. Charmaine Chibar; Marisol Miranda; Andrea Steele; Alexa Goodwin; Jonathan Dominique; Shane Hinds; Maria Chamberlin; Rachelle Francisco; Shannon Wynn

Minutes Transcribed By: Shannon Wynn

Meeting Scheduled for 12:45 p.m.

Meeting Began at 12:47 p.m.

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

2. Agenda Approval		
2A. Additions/Deletions/ Substitutions 2B. Motion to Approve Agenda Items	<p>Yes. Dr. Fritsch added the Jupiter Clinic overview to the agenda. Section 3A.</p> <p>Ms. Mastrangelo called for approval of the meeting agenda.</p>	<p>VOTE TAKEN: Ms. Tammy Jackson-Moore made a motion to approve the agenda. Mr. James Elder duly seconded the motion. A vote was called and the motion passed unanimously.</p>
3. Awards, Introductions and Presentations 3A. Jupiter Clinic Overview	<p>Ms. Rachelle Francisco presented to the Board the Jupiter clinic overview.</p>	<p>No action necessary.</p>
4. Disclosure of Voting Conflict	<p>None.</p>	<p>No action necessary.</p>
5. Public Comment	<p>None.</p>	<p>No action necessary.</p>
6. Meeting Minutes 6A-1 staff Recommends a MOTION TO APPROVE: Board meeting minutes of June 29, 2022	<p>There were no changes or comments to the minute's dated June 29, 2022.</p>	<p>VOTE TAKEN: As presented, Ms. Tammy Jackson- Moore made a motion to approve the Board meeting minutes of June 29, 2022. Mr. Robert Glass duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

7. Consent Agenda – Motion to Approve Consent Agenda Items	VOTE TAKEN: Ms. Tammy Jackson-Moore motioned to approve the consent agenda. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.
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7A. ADMINISTRATION

7A-1. Receive & File: July 2022 Internet Posting of District Public Meeting	The meeting notice was posted.	Receive & File. No further action is necessary.
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Receive & File. No further action is necessary.

7B. FINANCE

7B-1. Recommends a MOTION TO APPROVE: District Clinic Holdings, Inc. Financial Report May 2022	<p>The May financial statements represent the financial performance through the eighth month of the 2022 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, due from other governments decreased \$1.3M as a result of receiving reimbursements for grants and other funding programs. Deferred revenue decreased \$819k due to recognizing PRF Phase 4 funding.</p> <p>On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$601k). An increase in actual charity care recognized compared to budgeted charity care is contributing to this unfavorable variance. Gross patient revenue YTD was favorable to budget by \$2.5M. Total YTD revenue was unfavorable to budget by (\$399k), this was partially due to a timing difference in grant funds recognized. Operational expenses before depreciation were favorable to budget by \$3.6M due mostly to positive variances in salaries, wages, and benefits of \$1.8M, purchased services of \$319k, medical supplies of \$162k, medical services of \$126k, drugs of \$332k, lease and rental of \$580k and other expense of \$148k. Total YTD net margin was (\$7.2M) compared to the</p>	VOTE TAKEN: Ms. Tammy Jackson-Moore motioned to approve the District Clinic Holdings, Inc. Financial Report May 2022 agenda. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.
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	<p>budgeted loss of (\$11.1M) resulting in a favorable variance of \$3.9M or (35.0%).</p> <p>Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$883k). The Medical clinics YTD gross patient revenue was unfavorable to budget by (\$1.7M). The Medical clinics total YTD revenue was unfavorable to budget by (\$510k). These unfavorable variances resulted from lower net patient revenue than budgeted and a timing difference of revenue recognition for grant funds. Total operating expenses of \$15.6M were favorable to budget of \$19.1M by \$3.5M or 18.3%. The positive variance is mostly due to salaries, wages, and benefits of \$1.8M, purchased services of \$289k, medical supplies of \$199k, medical services of \$126k, drugs of \$332k, lease and rental of \$539k, and other expense of \$137k. Unanticipated staffing shortages as well as expense timing are driving these favorable variances. Total YTD net margin was favorable to budget by \$3.6M or (34.8%).</p> <p>Net patient revenue YTD for the Dental clinics was favorable to budget by \$281k. The Dental clinics total YTD gross patient revenue was favorable to budget by \$4.1M. An increase in unanticipated patient volume resulted in higher gross revenue, however, increased charity care and contractual allowances unfavorably impacted net patient revenue results. Total YTD operating expenses of \$2.9M were favorable to budget by \$122k. Total YTD net margin was (\$558k) compared to a budgeted loss of (\$895k) for a favorable variance of \$337k or (37.6%).</p>	
8. REGULAR AGENDA		
8A. EXECUTIVE		
8A-1. Receive & File: Executive Director Informational Update	Service Area Competition (SAC) Grant submission Federal Tort Claims Act redeeming application submission Service Area Competition (SAC) Grant submission Our Service Area Competition Grant submission is in the process of being finalized and will be submitted before the final deadline of August 4th. Our anticipated submission date is July 29th.	Receive & File. No further action is necessary.

Federal Tort Claims Act redeeming application submission
 Our Federal Tort Claims Act redeeming application submission was submitted in the Electronic Handbook on July 5th.

8B. CREDENTIALING

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

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

The LIPs listed below completed the credentialing and privileges process and met the standards 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
Bui	Thy	DO	Family Medicine	Initial Credentialing
Castiglia	Sarah	DO	Internal Medicine	Initial Credentialing
Prophete	Joyce	MD	Obstetrics & Gynecology	Initial Credentialing
Langley	Tamara	APRN	Nurse Practitioner	Initial Credentialing
Harberger	Seneca	MD	Family Medicine	Recredentialing

Primary source and secondary source verifications were performed for credentialing and privileging elements in accordance with state, federal and

VOTE TAKEN: MS. Tammy Jackson-Moore motioned to approve the initial credentialing and privileging agenda of Thy Bui; Sarah Castiglia; Joyce Prophete; Tamara Langley and recredentialing of Seneca Harberger. Mr. Glass duly seconded the motion. A vote was called, and the motion passed unanimously.


	<p>HRSA requirements. A Nationally accredited Credentials Verification Organization (CVO) was utilized to verify the elements requiring primary source verification.</p> <p>The C.L. Brumback Primary Care Clinics utilized internal Credentialing staff and the FQHC Medical Director to support the credentialing and privileging process.</p> <p>Thy Bui, DO, joined the Mangonia Park Clinic in 2022, specializing in Family Medicine, after completing his Residency at Lakeside Medical Center. He attended the Nova Southeastern University School of Medicine.</p> <p>Sarah Castiglia, DO, joined the Delray clinic in 2022, specializing in Internal Medicine. She attended Ohio University and completed her residency at West Virginia University School of Medicine.</p> <p>Joyce Prophete, MD, joined the Lake Worth Clinic in 2022, specializing in Obstetrics and Gynecology. She attended the University of Medicine and Dentistry of New Jersey and completed her residency at Drexel University College. Dr. Prophete is certified in Obstetrics & Gynecology by The American Board of Obstetrics & Gynecology. She has been in practice for sixteen years.</p> <p>Tamara Langley, APRN, joined the West Palm Beach Clinic in 2022 as a Nurse Practitioner. She attended the University of Miami. Ms. Langley is certified as a Family Nurse Practitioner by the American Nurses Credentialing Center. She has been in practice for ten years.</p> <p>Seneca Harberger, MD, joined the Belle Glade Clinic in 2018, specializing in Family Medicine. He attended Temple University and completed his residency at the Hospital of The University of Pennsylvania. Dr. Harberger is certified in Family Medicine by The American Board of Family Medicine. He has been in practice for four years and is fluent in Spanish.</p>	
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8C. QUALITY		
8C-1. Staff Recommends a	This agenda item presents the updated Quality Improvement & Quality Updates:	VOTE TAKEN: Ms. Jackson-Moore made a motion to

<p>MOTION TO APPROVE: Quality Report</p>	<ul style="list-style-type: none"> • Quality Council Meeting Minutes July 2022 • UDS Report – YTD • Provider Productivity – June 2022 <p>PATIENT SAFETY & ADVERSE EVENTS Patient safety and risk, including adverse events, peer review and chart review, are brought to the board “under separate cover” on a quarterly basis.</p> <p>PATIENT SATISFACTION AND GRIEVANCES Patient relations are to be presented as a separate agenda item.</p> <p>QUALITY ASSURANCE & IMPROVEMENT The breast cancer screening measure data for January – May 2022 shows that among the whole population, the satisfaction of the metric improved from 44%- 51% over the past month, getting us closer to our goal of 60%. The number of patients with no order decreased from 13%-12%, while the number of patients not met with order remained the same at 37%. Our highest performing locations are Belle Glade, Boca, and Lantana. We are exceeding goals in Belle Glade (61%) and Boca (62%) and very close to the goal in Lantana (56%).</p> <p>UTILIZATION OF HEALTH CENTER SERVICES Individual monthly provider productivity is stratified by clinic.</p>	<p>approve the Quality Reports- as presented. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
<p>8D. OPERATIONS</p>		
<p>8D-1. Staff Recommends a MOTION TO APPROVE Operations Reports- June 2022</p>	<p>This agenda item provides the following operations reports for June 2022:</p> <p>Clinic Productivity, including in-person and telehealth metrics, No Show trended over time and walk-in percentages.</p> <p>In June, the clinics had 11,224 visits which are 240 more than the month prior and 647 more than June of 2021. 72% of patients were adults and 28% were pediatrics. The Lantana Clinic had the highest volume with 1,815 visits, followed by the West Palm Beach Clinic with 1,554.</p>	<p>VOTE TAKEN: Mr. James Elder made a motion to approve the Operations Reports- June 2022 as presented. Me. Robert Glass duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

	<p>Our payer mix for June reflects 67% uninsured, which is 2% higher than the previous month. 28% of patients were Managed Care.</p> <p>Productivity targets were met in Belle Glade, Delray, Lantana and Mangonia Adult Medical; Pediatrics in both West Palm Beach and Lantana Clinics; Women's Health in both Lake Worth and Belle Glade, Behavioral Health in Lake Worth and Belle Glade Clinics and Substance Use at the Lewis Center. In the 90% and higher range were Adult Medical in West Palm Beach, Jupiter, Lake Worth, Lewis Center and our Boca Clinic, Dental in Delray, Belle Glade and Lantana.</p> <p>In June, the number of patients who walked in and were seen the same day totaled 2,324, an increase of 13% from the previous month. 24% of patients seen in medical were walk-ins and 23% of patients seen in dental were walk-ins. The West Palm Beach Clinic had the highest volume of walk-ins with 507, followed by the Lantana clinic with 484 walk-ins. The West Palm Beach dental clinic consistently has the highest volume of walk-ins with 223, followed by the Delray Beach dental clinic with 212 walk-ins. The medical clinics' rolling 12-month average walk-in' percentage remains 22% and the dental clinic's rolling 12-month average walk-in percentage decreased to 27%.</p> <p>The No Show rate in June slightly increased to 18%. The Tele no-show rate remains consistent at 9% of the total no-shows in the past 12 months.</p>	
<p>8E-1. Staff Recommends a MOTION TO APPROVE Patient Relations Q2 Report</p>	<p>This agenda item provides the following:</p> <p>Quarterly Patient Relations Dashboard Q2 - 2022</p> <p>For Quarter 2, 43 Patient Relations Occurrences occurred between 6 clinics and Clinic Administration. Of the 43 occurrences, there were 6 grievances and 37 complaints. The top 5 categories were Care and Treatment, Finance, Respect, Referrals and Communication Related issues. The top 3 subcategories were Lack of Continuity of Care and Billing issues with 7 Complaints and Grievances in each, followed by Bad Attitude/Rude with 5 Complaints or Grievances.</p> <p>There were also 109 patient compliments, of which 99 were patient compliments and 10 employee Thumbs-Up compliments received across 8 Clinics and Clinic Administration.</p>	<p>VOTE TAKEN: Ms. Tammy Jackson-Moore made a motion to approve the Patient Relations Q2 Report as presented. Ms.Irene Figueroa duly seconded the motion. A vote was called, and the motion passed unanimously</p>

9. AVP and Executive Director of Clinic Services Comments	None.	No action necessary.
10. Board Member Comments	Mr. Smith stated there is an overload of information provided.	No action necessary.
11. Establishment of Upcoming Meetings	<p style="text-align: center;"><u>August 24, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p style="text-align: center;"><u>September 28, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p style="text-align: center;"><u>October 26, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p style="text-align: center;"><u>November 29, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p style="text-align: center;"><u>December 14, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p>	No action necessary.
12. Motion to Adjourn	There being no further business, the meeting was adjourned at 2:00 p.m.	VOTE TAKEN: Mr. James Elder made a motion to adjourn. Ms. Irene Figueroa duly seconded the motion. A vote was called, and the motion passed unanimously.

Minutes Submitted by:  8/24/22
Signature Date