



C. L. Brumback

**Primary Care Clinics**

Health Care District Palm Beach County

# **BOARD OF DIRECTORS**

**August 24, 2022**

**12:45 P.M.**

## **Meeting Location**

**1515 N. Flagler Drive, Suite 101**

**West Palm Beach, FL 33401**

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

**BOARD OF DIRECTORS MEETING  
AGENDA  
August 24, 2022  
1515 N. Flagler Drive, Suite 101  
West Palm Beach, FL 33401**

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

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

1. **Call to Order – Melissa Mastrangelo, Chair**
  - A. Roll Call
  - B. Affirmation of Mission: To provide compassionate, comprehensive health services to all Palm Beach County residents, through collaboration and partnership, in a culturally sensitive environment.
2. **Agenda Approval**
  - A. Additions/Deletions/Substitutions
  - B. Motion to Approve Agenda
3. **Awards, Introductions and Presentations**
  - A. C.L. Brumback Lake Worth Clinic Overview  
(Elba Cespedes and Marisol Miranda)
4. **Disclosure of Voting Conflict**
5. **Public Comment**
6. **Meeting Minutes**
  - A. **Staff recommends a MOTION TO APPROVE:**  
Board Meeting Minutes of July 27, 2022 [Pages 1-9]
7. **Consent Agenda – Motion to Approve Consent Agenda Items**
  - A. **ADMINISTRATION**
    - 7A-1 **RECEIVE AND FILE:**  
August 2022 Internet Posting of District Public Meeting  
<https://www.hcdpbc.org/resources/public-meetings>
    - 7A-2 **RECEIVE AND FILE:**  
Attendance tracking [Page 10]

(Consent Agenda Cont.)

**B. FINANCE**

- 7B-1 **Staff Recommends a MOTION TO APPROVE:**  
District Clinic Holdings, Inc. Financial Report June  
2022 YTD  
(Candice Abbott) [Pages 11-27]

**8. Regular Agenda**

**A. EXECUTIVE**

- 8A-1 **RECEIVE AND FILE:**  
Executive Director Informational Update  
(Dr. Hyla Fritsch) [Pages 28-29]

**B. ADMINISTRATION**

- 8B-1 **Staff Recommends a MOTION TO APPROVE:**  
Executive Director of Clinic Annual Evaluation  
(Dr. Belma Andric) [Page 30-31] (Under Separate Cover)

- 8B-2 **Staff Recommends a MOTION TO APPROVE:**  
Health Care District recommendation for an interim  
replacement of Executive Director  
(Darcy Davis) [Page 32-33]

**C. CREDENTIALING**

- 8C-1 **Staff Recommends a MOTION TO APPROVE:**  
Licensed Independent Practitioner Credentialing and Privileging  
(Dr. Charmaine Chibar) [Pages 34-36]

**D. QUALITY**

- 8D-1 **Staff Recommends a MOTION TO APPROVE:**  
Quality Report  
(Dr. Charmaine Chibar) [Pages 37-73]

**E. OPERATIONS**

- 8E-1 **Staff Recommends a MOTION TO APPROVE:**  
Operations Report- July 2022  
(Marisol Miranda) [Pages 74-83]

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

**10. Board Member Comments**

**11. Establishment of Upcoming Meetings**

**September 28, 2022 (HCD Board Room)**

12:45 p.m. Board of Directors

**October 26, 2022 (HCD Board Room)**

12:45 p.m. Board of Directors

**November 29, 2022 (HCD Board Room)**

12:45 p.m. Board of Directors

**December 13, 2022 (HCD Board Room)**

12:45 p.m. Board of Directors

**12. Motion to Adjourn**

**District Clinic Holdings, Inc.  
d.b.a. C.L. Brumback Primary Care Clinics  
Board of Directors Meeting  
Summary Minutes  
7/29/2022**

**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
<b>1. Call to Order</b>  <b>1A. Roll Call</b>  <b>1B. Affirmation of Mission</b>	<p>Ms. Mastrangelo called the meeting to order.</p> <p>Roll call was taken.</p> <p>Ms. Mastrangelo read the affirmation of mission.</p>	<p><b>The meeting was called to order at 12:47 p.m.</b></p>

<b>2. Agenda Approval</b>		
<b>2A. Additions/Deletions/ Substitutions</b>  <b>2B. Motion to Approve Agenda Items</b>	<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><b>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.</b></p>
<b>3. Awards, Introductions and Presentations</b>  3A. Jupiter Clinic Overview	<p>Ms. Rachelle Francisco presented to the Board the Jupiter clinic overview.</p>	<p><b>No action necessary.</b></p>
<b>4. Disclosure of Voting Conflict</b>	<p>None.</p>	<p><b>No action necessary.</b></p>
<b>5. Public Comment</b>	<p>None.</p>	<p><b>No action necessary.</b></p>
<b>6. Meeting Minutes</b>  <b>6A-1 staff Recommends a MOTION TO APPROVE:</b> Board meeting minutes of June 29, 2022	<p>There were no changes or comments to the minute's dated June 29, 2022.</p>	<p><b>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.</b></p>

<b>7. Consent Agenda – Motion to Approve Consent Agenda Items</b>		<b>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.</b>
<b>7A. ADMINISTRATION</b>		
<b>7A-1. Receive &amp; File:</b> July 2022 Internet Posting of District Public Meeting	The meeting notice was posted.	<b>Receive &amp; File. No further action is necessary.</b>
<b>7A-2. Receive &amp; File:</b> Attendance tracking	Attendance tracking was updated.	<b>Receive &amp; File. No further action is necessary.</b>
<b>7B. FINANCE</b>		
<b>7B-1. Recommends a MOTION TO APPROVE:</b> 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>	<b>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.</b>

	<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>	
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**8. REGULAR AGENDA**

**8A. EXECUTIVE**

<p><b>8A-1. Receive &amp; File:</b> Executive Director Informational Update</p>	<p>Service Area Competition (SAC) Grant submission</p> <p>Federal Tort Claims Act redeeming application submission</p> <p>Service Area Competition (SAC) Grant submission</p> <p>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.</p>	<p><b>Receive &amp; File. No further action is necessary.</b></p>
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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 &amp; Gynecology by The American Board of Obstetrics &amp; 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>	
<b>8C. QUALITY</b>		
<b>8C-1. Staff Recommends a</b>	This agenda item presents the updated Quality Improvement & Quality Updates:	<b>VOTE TAKEN: Ms. Jackson-Moore made a motion to</b>

<p><b>MOTION TO APPROVE:</b> Quality Report</p>	<ul style="list-style-type: none"> <li>• Quality Council Meeting Minutes July 2022</li> <li>• UDS Report – YTD</li> <li>• Provider Productivity – June 2022</li> </ul> <p><b>PATIENT SAFETY &amp; ADVERSE EVENTS</b> 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><b>PATIENT SATISFACTION AND GRIEVANCES</b> Patient relations are to be presented as a separate agenda item.</p> <p><b>QUALITY ASSURANCE &amp; IMPROVEMENT</b> 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><b>UTILIZATION OF HEALTH CENTER SERVICES</b> Individual monthly provider productivity is stratified by clinic.</p>	<p><b>approve the Quality Reports- as presented. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.</b></p>
<p><b>8D. OPERATIONS</b></p>		
<p><b>8D-1. Staff Recommends a MOTION TO APPROVE Operations Reports- June 2022</b></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><b>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.</b></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><b>8E-1. Staff Recommends a MOTION TO APPROVE</b> 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><b>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</b></p>

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

**Minutes Submitted by:** \_\_\_\_\_  
**Signature**
**Date**

**C. L. Brumback Primary Care Clinics**

**Board of Directors**

**Attendance Tracking**

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

**X= Present**

**C= Cancel**

**E= Excused**

**A= Absent**

**DISTRICT CLINIC HOLDINGS, INC**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

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

**2. Summary:**

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

**3. Substantive Analysis:**

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

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

	<b>Current FY Amounts</b>	<b>Total Amounts (Current + Future)</b>	<b>Budget</b>
Capital Requirements	N/A	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

Reviewed for financial accuracy and compliance with purchasing procedure:



\_\_\_\_\_  
 Candice Abbott  
 VP & Chief Financial Officer

**5. Reviewed/Approved by Committee:**

N/A  
 \_\_\_\_\_  
 Committee Name

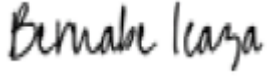
\_\_\_\_\_  
 Date

**6. Recommendation:**

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

**DISTRICT CLINIC HOLDINGS, INC**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

Approved for Legal sufficiency:



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Bernabe Icaza  
VP & General Counsel



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Candice Abbott  
VP & Chief Financial Officer



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Dr. Hyla Fritsch  
Executive Director of Clinic and Pharmacy  
Services



## MEMO

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To: Finance Committee  
From: Candice Abbott  
Chief Financial Officer  
Date: August 24, 2022

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

The June financial statements represent the financial performance through the ninth 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 increased \$297k as a result of revenue recognition for grants and other funding programs.

On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$307k). 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 \$2.9M. Total YTD revenue was unfavorable to budget by (\$126k), this was partially due to a timing difference in grant funds recognized. Operational expenses before depreciation were favorable to budget by \$3.9M due mostly to positive variances in salaries, wages, and benefits of \$2.0M, purchased services of \$256k, medical supplies of \$194k, medical services of \$132k, drugs of \$362k, lease and rental of \$667k, and other expense of \$126k. Total YTD net margin was (\$7.9M) compared to the budgeted loss of (\$12.4M) resulting in a favorable variance of \$4.5M or (36.6%).

Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$707k). The Medical clinics YTD gross patient revenue was unfavorable to budget by (\$1.8M). The Medical clinics total YTD revenue was unfavorable to budget by (\$346k). 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 \$17.6M were favorable to budget of \$21.4M by \$3.8M or 17.7%. The positive variance is mostly due to salaries, wages, and benefits of \$1.9M, purchased services of \$225k, medical supplies of \$238k, medical services of \$132k, drugs of \$362k, repair and maintenance of \$144k, lease and rental of \$619k, and other expense of \$110k. Unanticipated staffing shortages as well as expense timing are driving these favorable variances. Total YTD net margin was favorable to budget by \$4.1M or (36.1%).

Net patient revenue YTD for the Dental clinics was favorable to budget by \$367k. The Dental clinics total YTD gross patient revenue was favorable to budget by \$4.7M. 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 \$3.2M were favorable to budget by \$80k. Total YTD net margin was (\$605k) compared to a budgeted loss of (\$993k) for a favorable variance of \$389k or (39.1%).

**DISTRICT CLINIC HOLDINGS, INC.**  
**COMPARATIVE STATEMENT OF NET POSITION**

	<u>Jun 30, 2022</u>	<u>May 31, 2022</u>	<u>Increase (Decrease)</u>
<b>Assets</b>			
Cash and Cash Equivalents	(695,323)	12,918	\$ (708,241)
Accounts Receivable, net	2,573,594	2,161,832	411,763
Due from Other Governments	3,794,898	3,498,220	296,678
Other Current Assets	303,256	295,016	8,240
Net Investment in Capital Assets	2,590,043	2,634,671	(44,628)
<b>Total Assets</b>	<u>\$ 8,566,468</u>	<u>\$ 8,602,657</u>	<u>\$ (36,189)</u>
<b>Liabilities</b>			
Accounts Payable	194,752	302,256	(107,503)
Deferred Revenue	1,345,143	1,395,843	(50,700)
Other Current Liabilities	1,606,702	1,463,162	143,540
Non-Current Liabilities	1,284,596	1,316,034	(31,439)
<b>Total Liabilities</b>	<u>4,431,193</u>	<u>4,477,295</u>	<u>(46,102)</u>
<b>Deferred Inflows of Resources</b>			
Deferred Inflows- Other Post Employment Benefits	<u>\$ 2,177</u>	<u>\$ 2,177</u>	<u>\$ -</u>
<b>Net Position</b>			
Net Investment in Capital Assets	2,590,043	2,634,671	(44,628)
Unrestricted	1,543,055	1,488,514	54,541
<b>Total Net Position</b>	<u>4,133,098</u>	<u>4,123,185</u>	<u>9,913</u>
<b>Total Liabilities, Deferred Inflows of Resources and Net Position</b>	<u>\$ 8,566,468</u>	<u>\$ 8,602,657</u>	<u>\$ (36,189)</u>

**Note:** Amounts may not foot due to rounding.



# District Clinic Holdings, Inc. Statement of Revenues and Expenses

FOR THE EIGHT MONTH ENDED JUNE 30, 2022

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
31,774	40,833	9,059	22.2%	31,296	(478)	(1.5%)	Depreciation	284,288	367,497	83,209	22.6%	284,603	316	0.1%
<i>Overhead Allocations:</i>														
7,693	5,619	(2,074)	(36.9%)	5,042	(2,651)	(52.6%)	Risk Mgt	67,426	50,569	(16,857)	(33.3%)	28,264	(39,162)	(138.6%)
128,114	211,204	83,091	39.3%	227,784	99,670	43.8%	Rev Cycle	1,467,978	1,900,840	432,863	22.8%	1,812,906	344,928	19.0%
1,844	4,830	2,985	61.8%	4,462	2,618	58.7%	Internal Audit	14,164	43,468	29,304	67.4%	23,195	9,031	38.9%
29,076	29,602	526	1.8%	22,018	(7,058)	(32.1%)	Home Office Facilities	252,156	266,416	14,260	5.4%	161,691	(90,464)	(55.9%)
48,374	42,204	(6,170)	(14.6%)	42,774	(5,600)	(13.1%)	Administration	388,857	379,839	(9,018)	(2.4%)	346,381	(42,477)	(12.3%)
64,343	59,861	(4,482)	(7.5%)	46,846	(17,497)	(37.4%)	Human Resources	470,259	538,747	68,489	12.7%	458,721	(11,538)	(2.5%)
14,385	24,187	9,802	40.5%	18,366	3,981	21.7%	Legal	154,910	217,681	62,771	28.8%	166,284	11,374	6.8%
2,930	4,453	1,523	34.2%	9,635	6,705	69.6%	Records	27,830	40,079	12,248	30.6%	70,431	42,600	60.5%
5,549	8,934	3,384	37.9%	12,669	7,120	56.2%	Compliance	55,621	80,403	24,782	30.8%	55,905	285	0.5%
8,762	8,679	(83)	(1.0%)	11,422	2,659	23.3%	Comm Engage Plan	74,556	78,113	3,557	4.6%	65,943	(8,613)	(13.1%)
76,007	77,132	1,124	1.5%	68,316	(7,691)	(11.3%)	IT Operations	727,563	694,184	(33,379)	(4.8%)	656,810	(70,753)	(10.8%)
10,845	13,542	2,697	19.9%	17,290	6,446	37.3%	IT Security	105,730	121,875	16,146	13.2%	76,454	(29,275)	(38.3%)
55,868	50,742	(5,126)	(10.1%)	50,443	(5,425)	(10.8%)	IT Applications	416,691	456,680	39,989	8.8%	418,375	1,684	0.4%
49,302	64,734	15,433	23.8%	46,862	(2,440)	(5.2%)	Security Services	481,201	582,609	101,408	17.4%	408,214	(72,987)	(17.9%)
179,063	171,319	(7,744)	(4.5%)	155,840	(23,222)	(14.9%)	IT EPIC	1,668,426	1,541,871	(126,555)	(8.2%)	932,291	(736,135)	(79.0%)
27,779	32,082	4,303	13.4%	32,441	4,663	14.4%	Finance	277,489	288,737	11,248	3.9%	249,300	(28,189)	(11.3%)
7,062	7,670	608	7.9%	5,769	(1,293)	(22.4%)	Public Relations	53,450	69,031	15,580	22.6%	66,645	13,194	19.8%
10,069	12,663	2,593	20.5%	15,104	5,035	33.3%	Information Technology	84,890	113,965	29,075	25.5%	97,918	13,029	13.3%
8,100	7,714	(386)	(5.0%)	5,912	(2,188)	(37.0%)	Corporate Quality	68,185	69,423	1,238	1.8%	53,420	(14,765)	(27.6%)
12,742	15,014	2,272	15.1%	10,025	(2,718)	(27.1%)	Project MGMT Office	104,998	135,129	30,131	22.3%	84,570	(20,428)	(24.2%)
-	-	-	0.0%	-	-	0.0%	Managed Care Contract	-	-	-	0.0%	6,415	6,415	100.0%
747,907	852,184	104,277	12.2%	809,020	61,113	7.6%	Total Overhead Allocations	6,962,379	7,669,659	707,279	9.2%	6,240,134	(722,246)	(11.6%)
<b>3,176,926</b>	<b>3,546,643</b>	<b>369,717</b>	<b>10.4%</b>	<b>3,265,479</b>	<b>88,553</b>	<b>2.7%</b>	<b>Total Expenses</b>	<b>28,025,194</b>	<b>32,691,833</b>	<b>4,666,639</b>	<b>14.3%</b>	<b>27,266,394</b>	<b>(758,800)</b>	<b>(2.8%)</b>
<b>\$ (645,143)</b>	<b>\$ (1,287,844)</b>	<b>\$ 642,701</b>	<b>(49.9%)</b>	<b>\$ (940,313)</b>	<b>\$ 295,169</b>	<b>(31.4%)</b>	<b>Net Margin</b>	<b>\$ (7,875,371)</b>	<b>\$ (12,415,830)</b>	<b>\$ 4,540,459</b>	<b>(36.6%)</b>	<b>\$ (11,190,650)</b>	<b>\$ 3,315,278</b>	<b>(29.6%)</b>
1,409	42,740	41,331	96.7%	-	(1,409)	0.0%	Capital	15,628	1,072,810	1,057,182	98.5%	-	(15,628)	0.0%
<b>\$ 656,466</b>	<b>\$ 1,289,754</b>	<b>\$ 633,288</b>	<b>49.1%</b>	<b>\$ -</b>	<b>\$ (656,466)</b>	<b>0.0%</b>	<b>General Fund Support/ Transfer In</b>	<b>\$ 7,924,615</b>	<b>\$ 13,121,167</b>	<b>\$ 5,196,552</b>	<b>39.6%</b>	<b>\$ 9,987,030</b>	<b>\$ 2,062,414</b>	<b>20.7%</b>

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

	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Year to Date
<b>Gross Patient Revenue</b>	<b>2,112,033</b>	<b>1,969,914</b>	<b>2,121,489</b>	<b>2,081,642</b>	<b>2,080,482</b>	<b>2,287,694</b>	<b>2,424,033</b>	<b>2,318,008</b>	<b>2,353,552</b>	-	-	-	<b>19,748,847</b>
Contractual Allowances	1,691,626	1,206,065	(1,213,834)	628,878	508,459	262,082	852,445	23,543	453,108	-	-	-	4,412,372
Charity Care	36,418	90,974	2,416,799	865,037	871,977	916,848	1,061,019	935,323	944,007	-	-	-	8,138,402
Bad Debt	(155,607)	409,555	727,800	219,498	197,338	715,026	231,736	656,504	170,543	-	-	-	3,172,393
Other Patient Revenue	444,688	444,688	444,688	299,550	408,404	421,608	471,539	678,611	447,317	-	-	-	4,061,092
<b>Net Patient Revenue</b>	<b>984,285</b>	<b>708,007</b>	<b>635,413</b>	<b>667,780</b>	<b>911,110</b>	<b>815,346</b>	<b>750,371</b>	<b>1,381,249</b>	<b>1,233,211</b>	-	-	-	<b>8,086,771</b>
Collections %	46.60%	35.94%	29.95%	32.08%	43.79%	35.64%	30.96%	59.59%	52.40%	0.00%	0.00%	0.00%	40.95%
Grant Funds	1,044,836	1,160,187	1,030,989	1,329,092	1,021,208	1,293,780	1,906,243	1,162,711	1,245,495	-	-	-	11,194,540
Other Financial Assistance	-	-	-	-	-	-	-	819,465	50,700	-	-	-	870,165
Other Revenue	1,087	1,941	12,516	1,815	1,285	(16,626)	(6,665)	616	2,377	-	-	-	(1,653)
Total Other Revenues	1,045,922	1,162,128	1,043,505	1,330,907	1,022,494	1,277,154	1,899,579	1,982,792	1,298,572	-	-	-	12,063,051
<b>Total Revenues</b>	<b>2,030,207</b>	<b>1,870,135</b>	<b>1,678,918</b>	<b>1,998,686</b>	<b>1,933,604</b>	<b>2,092,500</b>	<b>2,649,949</b>	<b>3,364,041</b>	<b>2,531,783</b>	-	-	-	<b>20,149,823</b>
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,630,191	1,229,547	1,592,418	1,476,762	1,385,221	1,467,535	1,399,148	1,441,754	1,478,608	-	-	-	13,101,183
Benefits	415,815	365,414	411,926	436,127	405,473	421,814	406,874	410,126	413,216	-	-	-	3,686,786
Purchased Services	48,976	47,674	74,906	37,055	74,341	33,228	70,900	58,037	89,798	-	-	-	534,915
Medical Supplies	32,524	50,842	85,475	72,989	44,574	51,501	59,960	50,244	44,499	-	-	-	492,607
Other Supplies	13,026	5,890	10,731	23,292	51,222	72,845	44,840	12,933	78,667	-	-	-	313,446
Medical Services	39,783	40,636	44,092	41,584	32,835	54,767	69,681	54,765	56,566	-	-	-	434,708
Drugs	50,990	45,545	38,498	41,925	43,387	45,034	47,240	43,001	55,320	-	-	-	410,939
Repairs & Maintenance	44,211	41,679	83,118	36,605	45,492	25,316	43,814	24,886	(15,339)	-	-	-	329,783
Lease & Rental	106,427	102,846	102,325	108,509	103,683	112,896	105,469	109,729	96,591	-	-	-	948,476
Utilities	7,937	6,879	6,972	7,354	6,911	7,431	7,091	7,613	7,150	-	-	-	65,338
Other Expense	39,553	45,691	27,860	14,842	39,224	45,215	69,762	53,688	84,690	-	-	-	420,525
Insurance	4,026	4,026	4,026	4,026	4,026	4,026	4,026	4,159	7,480	-	-	-	39,821
Total Operational Expenses	2,433,459	1,986,669	2,482,346	2,301,071	2,236,389	2,341,609	2,328,806	2,270,934	2,397,245	-	-	-	20,778,527
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(403,252)</b>	<b>(116,533)</b>	<b>(803,428)</b>	<b>(302,385)</b>	<b>(302,785)</b>	<b>(249,109)</b>	<b>321,144</b>	<b>1,093,107</b>	<b>134,537</b>	-	-	-	<b>(628,704)</b>
Depreciation	31,642	31,642	31,642	31,642	32,767	31,165	31,007	31,007	31,774	-	-	-	284,288
<i>Overhead Allocations:</i>													
Risk Mgt	5,725	9,931	9,610	7,813	7,014	7,385	5,784	6,470	7,693	-	-	-	67,426
Rev Cycle	139,350	131,656	198,563	156,448	155,272	177,772	166,392	214,411	128,114	-	-	-	1,467,978
Internal Audit	283	1,301	1,525	2,520	1,575	1,653	1,743	1,720	1,844	-	-	-	14,164
Home Office Facilities	28,190	28,849	28,452	37,890	19,057	29,002	28,311	23,329	29,076	-	-	-	252,156
Administration	39,803	37,815	45,770	42,646	38,891	44,008	48,868	42,683	48,374	-	-	-	388,875
Human Resources	47,430	69,522	21,174	61,095	43,271	60,578	47,115	55,730	64,343	-	-	-	470,259
Legal	7,774	9,522	13,852	15,869	12,073	39,718	26,572	15,144	14,385	-	-	-	154,910
Records	3,029	3,626	2,777	3,556	2,328	3,051	3,166	3,367	2,930	-	-	-	27,830
Compliance	5,937	5,784	6,338	7,487	5,990	6,342	5,891	6,302	5,549	-	-	-	55,621
Comm Engage Plan	7,922	7,521	8,490	8,359	7,557	9,014	8,573	8,357	8,762	-	-	-	74,556
IT Operations	72,556	80,983	102,533	72,644	102,760	73,915	63,338	82,827	76,007	-	-	-	727,563
IT Security	8,357	13,278	17,327	9,731	8,929	9,253	11,753	16,257	10,845	-	-	-	105,730
IT Applications	57,793	32,152	55,800	38,470	44,169	65,221	42,962	24,255	55,868	-	-	-	416,691
Security Services	53,294	48,508	59,855	53,742	52,303	54,938	55,259	54,000	49,302	-	-	-	481,201
IT EPIC	160,592	140,711	197,854	211,401	233,395	184,580	182,957	177,873	179,063	-	-	-	1,668,426
Finance	33,898	29,465	34,870	32,359	26,958	29,841	30,722	31,597	27,779	-	-	-	277,489
Public Relations	7,665	5,024	5,041	5,905	5,240	5,315	6,304	5,893	7,062	-	-	-	53,450
Information Technology	8,010	8,832	8,455	9,382	7,882	7,994	11,945	12,320	10,069	-	-	-	84,890
Corporate Quality	7,261	8,513	7,104	7,425	7,217	6,849	7,392	8,326	8,100	-	-	-	68,185
Project MGMT Office	12,411	11,743	11,412	11,317	9,459	11,993	12,116	11,806	12,742	-	-	-	104,998
Managed Care Contract	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Overhead Allocations	707,279	684,736	836,803	796,058	791,341	828,421	767,163	802,671	747,907	-	-	-	6,962,379
<b>Total Expenses</b>	<b>3,172,379</b>	<b>2,703,047</b>	<b>3,350,791</b>	<b>3,128,771</b>	<b>3,060,497</b>	<b>3,201,195</b>	<b>3,126,976</b>	<b>3,104,612</b>	<b>3,176,926</b>	-	-	-	<b>28,025,194</b>
<b>Net Margin</b>	<b>\$ (1,142,173)</b>	<b>\$ (832,912)</b>	<b>\$ (1,671,873)</b>	<b>\$ (1,130,085)</b>	<b>\$ (1,126,893)</b>	<b>\$ (1,108,695)</b>	<b>\$ (477,027)</b>	<b>\$ 259,429</b>	<b>\$ (645,143)</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ (7,875,371)</b>
Capital	100,000	-	-	-	-	-	(100,000)	14,219	1,409	-	-	-	15,628
General Fund Support/ Transfer In	-	-	-	-	-	-	7,268,150	-	656,466	-	-	-	7,924,615

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

FOR THE EIGHT MONTH ENDED JUNE 30, 2022

	Clinic Administration	West Palm Beach Clinic	Lantana Clinic	Delray Clinic	Belle Glade Clinic	Lewis Center	St. Anns Clinic	Lake Worth Clinic	Jupiter Clinic	West Boca Clinic	Subxone Clinic	Mobile Warrior	Mobile Van Scout	Mobile Van Hero	Total
<b>Gross Patient Revenue</b>	-	2,035,819	3,078,250	866,283	1,012,640	814,723	16,293	2,100,627	697,883	507,619	732,710	3,288	-	18,657	<b>11,884,792</b>
Contractual Allowances	-	297,751	406,422	231,970	144,546	101,660	984	374,904	122,131	194,315	125,622	362	-	3,112	2,003,779
Charity Care	-	868,205	1,345,027	286,481	370,718	184,612	776	748,903	259,609	164,033	204,062	341	-	1,254	4,434,020
Bad Debt	-	227,332	478,082	162,373	241,142	342,205	672	333,839	69,504	38,746	314,264	98	-	3,445	2,211,701
Total Contractual Allowances and Bad Debt	-	1,393,288	2,229,532	680,824	756,405	628,477	2,431	1,457,646	451,244	397,094	643,948	801	-	7,811	8,649,500
Other Patient Revenue	-	595,242	726,788	279,775	248,109	49,581	6,243	429,682	185,141	221,765	99,384	24,642	13,614	13,614	2,893,580
<b>Net Patient Revenue</b>	-	<b>1,237,774</b>	<b>1,575,506</b>	<b>465,234</b>	<b>504,344</b>	<b>235,828</b>	<b>20,105</b>	<b>1,072,662</b>	<b>431,779</b>	<b>332,290</b>	<b>188,146</b>	<b>27,129</b>	<b>13,614</b>	<b>24,461</b>	<b>6,128,872</b>
Collection %	0.00%	60.80%	51.18%	53.70%	49.80%	28.95%	123.39%	51.06%	61.87%	65.46%	68.58%	825.20%	0.00%	131.11%	51.57%
Grant Funds	2,351,090	1,159,108	1,446,450	594,249	586,179	237,427	4,946	1,269,376	435,164	433,738	797,290	145,927	51,398	113,662	9,626,003
Other Financial Assistance	312,723	52,154	104,207	24,750	30,400	13,450	1,000	128,122	39,463	15,078	25,052	3,305	2,000	4,000	755,703
Other Revenue	(31,683)	5,288	6,784	2,445	10,755	-	-	1,617	1,334	1,608	-	-	-	-	(1,853)
Total Other Revenues	2,632,129	1,216,549	1,557,441	621,443	627,333	250,877	5,946	1,399,115	475,962	450,424	822,342	149,231	53,398	117,662	10,379,852
<b>Total Revenues</b>	<b>2,632,129</b>	<b>2,454,323</b>	<b>3,132,947</b>	<b>1,086,678</b>	<b>1,131,678</b>	<b>486,704</b>	<b>26,051</b>	<b>2,471,777</b>	<b>907,741</b>	<b>782,714</b>	<b>1,010,488</b>	<b>176,360</b>	<b>67,012</b>	<b>142,123</b>	<b>16,508,724</b>
<i>Direct Operational Expenses:</i>															
Salaries and Wages	2,632,852	1,191,223	1,635,467	641,344	668,004	291,646	57,788	1,489,377	523,224	514,351	1,030,797	154,951	50,823	137,576	11,019,421
Benefits	803,998	276,556	450,314	176,587	206,244	81,942	14,141	423,284	132,580	133,094	295,818	36,241	9,791	46,561	3,087,152
Purchased Services	282,824	20,216	53,492	17,746	23,761	9,127	-	32,900	23,853	29,930	21,159	1,227	1,227	1,227	518,691
Medical Supplies	3,597	76,109	47,270	33,130	27,341	24,478	2,503	44,444	12,954	17,960	34,036	5,329	886	515	330,553
Other Supplies	143,151	14,640	4,929	35,583	8,614	960	791	13,666	1,152	15,195	26,988	3,223	2,472	2,325	273,687
Medical Services	-	55,059	62,276	32,623	48,866	25,103	1,619	145,444	25,866	19,216	18,636	-	-	-	434,708
Drugs	-	194,887	122,261	46,346	32,964	519	204	8,405	1,551	3,332	313	-	22	136	410,939
Repairs & Maintenance	260,555	3,479	2,027	6,291	2,552	1,824	492	6,957	2,614	6,203	9,928	2,151	4,372	511	309,955
Lease & Rental	-	96,710	119,200	61,635	69,262	160	135	199,285	62,634	95,083	36,533	150	40	85	740,912
Utilities	-	2,801	3,285	552	15,459	1,845	-	11,123	5,455	5,654	4,303	-	-	-	50,478
Other Expense	276,743	10,581	13,885	5,854	22,700	4,175	471	14,345	4,771	4,848	31,759	3,733	2,143	5,125	401,132
Insurance	-	3,074	4,177	2,288	981	1,001	-	1,461	602	897	751	7,932	7,932	7,932	39,027
Total Operational Expenses	4,403,721	1,945,335	2,518,582	1,059,979	1,126,749	442,780	78,144	2,390,692	797,255	845,761	1,511,020	214,937	79,707	201,993	17,616,655
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(1,771,592)</b>	<b>508,988</b>	<b>614,364</b>	<b>26,699</b>	<b>4,929</b>	<b>43,925</b>	<b>(52,093)</b>	<b>81,085</b>	<b>110,486</b>	<b>(63,048)</b>	<b>(500,532)</b>	<b>(38,576)</b>	<b>(12,695)</b>	<b>(59,871)</b>	<b>(1,107,931)</b>
Depreciation	2,042	10,616	10,069	154	53,576	244	-	3,820	1,971	2,861	2,215	56,250	10,413	62,645	216,876
<i>Overhead Allocations:</i>															
Risk Mgt	8,861	7,054	9,429	4,915	3,817	1,821	277	6,592	2,253	2,882	6,071	1,698	690	1,593	57,954
Rev Cycle	-	179,696	240,182	125,201	97,244	46,391	7,045	167,925	57,402	73,426	154,659	43,252	17,577	40,582	1,250,581
Internal Audit	1,861	1,482	1,981	1,032	802	383	58	1,385	473	605	1,275	357	145	335	12,174
Home Office Facilities	228,031	-	-	-	-	-	-	-	-	-	-	-	-	-	228,031
Administration	51,105	40,683	54,376	28,345	22,016	10,503	1,595	38,018	12,996	16,623	35,014	9,792	3,979	9,188	334,233
Human Resources	74,110	46,901	52,092	30,432	28,642	10,741	1,790	41,351	16,111	19,691	48,512	12,531	5,370	14,321	402,593
Legal	20,359	16,207	21,662	11,292	8,770	4,184	635	15,145	5,177	6,622	13,949	3,901	1,585	3,660	133,149
Records	3,658	2,912	3,892	2,029	1,576	752	114	2,721	930	1,190	2,506	701	285	658	23,921
Compliance	7,310	5,819	7,778	4,054	3,149	1,502	228	5,438	1,859	2,378	5,008	1,401	569	1,314	47,807
Comm Engage Plan	9,798	7,800	10,426	5,435	4,221	2,014	306	7,289	2,492	3,187	6,713	1,877	763	1,762	64,083
IT Operations	95,620	76,118	101,740	53,034	41,192	19,651	2,984	71,132	24,315	31,103	65,513	18,321	7,446	17,190	625,359
IT Security	13,895	11,062	14,785	7,707	5,986	2,856	434	10,337	3,533	4,520	9,520	2,662	1,082	2,498	90,877
IT Applications	54,763	43,595	58,269	30,374	23,592	11,254	1,709	40,739	13,926	17,813	37,520	10,493	4,264	9,845	358,157
Security Services	-	59,188	79,111	41,239	32,030	15,280	-	55,311	18,907	24,185	50,941	14,246	5,790	13,367	409,595
IT EPIC	219,272	174,552	233,307	121,617	94,460	45,063	6,843	163,118	55,759	71,324	150,232	42,014	17,074	39,420	1,434,055
Finance	36,469	29,031	38,803	20,227	15,710	7,495	1,138	27,130	9,274	11,862	24,986	6,988	2,840	6,556	238,509
Public Relations	7,025	5,592	7,474	3,896	3,026	1,444	219	5,226	1,786	2,285	4,813	1,346	547	1,263	45,942
Information Technology	11,157	8,881	11,871	6,188	4,806	2,293	348	8,299	2,837	3,629	7,644	2,138	869	2,006	72,965
Corporate Quality	8,961	7,134	9,535	4,970	3,860	1,842	280	6,666	2,279	2,915	6,140	1,717	698	1,611	58,607
Project MGMT Office	13,799	10,985	14,683	7,654	5,945	2,836	431	10,265	3,509	4,489	9,454	2,644	1,075	2,481	90,248
Total Overhead Allocations	866,055	734,690	971,393	509,640	400,844	188,302	26,435	684,089	235,817	300,729	640,471	178,080	72,647	169,649	5,978,841
<b>Total Expenses</b>	<b>5,271,818</b>	<b>2,690,641</b>	<b>3,500,044</b>	<b>1,569,772</b>	<b>1,581,169</b>	<b>631,326</b>	<b>104,579</b>	<b>3,078,601</b>	<b>1,035,044</b>	<b>1,149,351</b>	<b>2,153,706</b>	<b>449,266</b>	<b>162,767</b>	<b>434,287</b>	<b>23,812,371</b>
<b>Net Margin</b>	<b>\$ (2,639,689)</b>	<b>\$ (236,318)</b>	<b>\$ (367,098)</b>	<b>\$ (483,095)</b>	<b>\$ (449,491)</b>	<b>\$ (144,621)</b>	<b>\$ (78,528)</b>	<b>\$ (606,824)</b>	<b>\$ (127,303)</b>	<b>\$ (366,638)</b>	<b>\$ (1,143,218)</b>	<b>\$ (272,906)</b>	<b>\$ (95,755)</b>	<b>\$ (292,165)</b>	<b>\$ (7,303,647)</b>
<b>Capital</b>	15,628	-	-	-	-	-	-	-	-	-	-	-	-	-	15,628
<b>General Fund Support/ Transfer In</b>	<b>\$ 7,319,275</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 7,319,275</b>



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

FOR THE EIGHT MONTH ENDED JUNE 30, 2022

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
24,329	31,250	6,921	22.1%	24,303	(26)	(0.1%)	Depreciation	216,876	281,250	64,374	22.9%	219,106	2,230	1.0%
<i>Overhead Allocations:</i>														
6,612	4,830	(1,783)	(36.9%)	4,325	(2,287)	(52.9%)	Risk Mgt	57,954	43,466	(14,489)	(33.3%)	24,245	(33,709)	(139.0%)
109,141	179,927	70,785	39.3%	192,313	83,171	43.2%	Rev Cycle	1,250,581	1,619,340	368,759	22.8%	1,530,594	280,013	18.3%
1,585	4,151	2,566	61.8%	3,828	2,243	58.6%	Internal Audit	12,174	37,362	25,188	67.4%	19,897	7,723	38.8%
26,294	26,770	476	1.8%	19,826	(6,468)	(32.6%)	Home Office Facilities	228,031	240,927	12,896	5.4%	145,592	(82,439)	(56.6%)
41,579	36,276	(5,303)	(14.6%)	36,692	(4,887)	(13.3%)	Administration	334,233	326,481	(7,752)	(2.4%)	297,130	(37,103)	(12.5%)
55,085	51,247	(3,837)	(7.5%)	40,516	(14,568)	(36.0%)	Human Resources	402,593	461,227	58,634	12.7%	396,741	(5,852)	(1.5%)
12,364	20,789	8,425	40.5%	15,754	3,390	21.5%	Legal	133,149	187,102	53,953	28.8%	142,641	9,492	6.7%
2,519	3,828	1,309	34.2%	8,265	5,747	69.5%	Records	23,921	34,449	10,528	30.6%	60,416	36,496	60.4%
4,770	7,679	2,909	37.9%	10,868	6,098	56.1%	Compliance	47,807	69,108	21,301	30.8%	47,956	149	0.3%
7,531	7,460	(71)	(1.0%)	9,798	2,266	23.1%	Comm Engage Plan	64,083	67,140	3,057	4.6%	56,567	(7,516)	(13.3%)
65,330	66,297	966	1.5%	58,603	(6,728)	(11.5%)	IT Operations	625,359	596,669	(28,690)	(4.8%)	563,421	(61,938)	(11.0%)
9,321	11,639	2,318	19.9%	14,832	5,511	37.2%	IT Security	90,877	104,755	13,877	13.2%	65,584	(25,294)	(38.6%)
48,020	43,614	(4,406)	(10.1%)	43,270	(4,750)	(11.0%)	IT Applications	358,157	392,528	34,371	8.8%	358,887	731	0.2%
41,965	55,101	13,136	23.8%	39,851	(2,114)	(5.3%)	Security Services	409,595	495,913	86,318	17.4%	347,143	(62,452)	(18.0%)
153,909	147,253	(6,656)	(4.5%)	133,682	(20,227)	(15.1%)	IT EPIC	1,434,055	1,325,278	(108,777)	(8.2%)	799,732	(634,323)	(79.3%)
23,877	27,575	3,699	13.4%	27,829	3,952	14.2%	Finance	238,509	248,177	9,668	3.9%	213,853	(24,656)	(11.5%)
6,070	6,593	523	7.9%	4,949	(1,121)	(22.7%)	Public Relations	45,942	59,334	13,392	22.6%	57,169	11,227	19.6%
8,655	10,884	2,229	20.5%	12,891	4,236	32.9%	Information Technology	72,965	97,955	24,991	25.5%	83,930	10,965	13.1%
6,962	6,630	(332)	(5.0%)	5,071	(1,891)	(37.3%)	Corporate Quality	58,607	59,670	1,064	1.8%	45,824	(12,783)	(27.9%)
10,952	12,905	1,953	15.1%	8,599	(2,353)	(27.4%)	Project MGMT Office	90,248	116,147	25,899	22.3%	72,545	(17,703)	(24.4%)
-	-	-	0.0%	-	-	0.0%	Managed Care Contract	-	-	-	0.0%	5,416	5,416	100.0%
642,541	731,447	88,906	12.2%	691,761	49,219	7.1%	Total Overhead Allocations	5,978,841	6,583,028	604,187	9.2%	5,335,284	(643,557)	(12.1%)
2,666,888	3,060,573	393,685	12.9%	2,790,805	123,917	4.4%	Total Expenses	23,812,371	28,276,842	4,464,471	15.8%	23,320,080	(492,291)	(2.1%)
\$ (631,496)	\$ (1,189,578)	\$ 558,082	(46.9%)	\$ (912,888)	\$ 281,391	(30.8%)	Net Margin	\$ (7,303,647)	\$ (11,422,592)	\$ 4,118,945	(36.1%)	\$ (10,145,328)	\$ 2,841,681	(28.0%)
1,409	37,740	36,331	96.3%	-	(1,409)	0.0%	Capital	15,628	947,810	932,182	98.4%	-	(15,628)	0.0%
\$ 593,308	\$ 1,196,072	\$ 602,764	50.4%	\$ -	\$ (593,308)	0.0%	General Fund Support/ Transfer In	\$ 7,319,275	\$ 12,089,183	\$ 4,769,908	39.5%	\$ 9,025,566	\$ 1,706,291	18.9%



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

FOR THE EIGHT MONTH ENDED JUNE 30, 2022

	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Portable Clinic Dental Clinic	Total
<b>Gross Patient Revenue</b>	-	2,728,405	2,521,507	1,372,993	1,169,054	2,268	7,794,227
Contractual Allowances	-	983,630	572,707	275,551	559,399	761	2,392,048
Charity Care	-	1,127,515	1,545,925	595,858	417,743	149	3,687,189
Bad Debt	-	384,101	171,043	260,326	142,767	(17)	958,219
Total Contractual Allowances and Bad Debt	-	2,495,246	2,289,674	1,131,735	1,119,908	893	7,037,456
Other Patient Revenue	-	441,912	313,785	219,055	192,760	-	1,167,512
<b>Net Patient Revenue</b>	-	675,071	545,618	460,314	241,905	1,375	1,924,284
Collection %	-	24.74%	21.64%	33.53%	20.69%	60.64%	24.69%
Grant Funds	219,186	592,628	377,626	177,730	201,367	-	1,568,537
Other Financial Assistance	31,403	41,216	29,937	-	11,905	-	114,462
Other Revenue	-	-	200	-	-	-	200
Total Other Revenues	250,589	633,843	407,764	177,730	213,273	-	1,683,199
<b>Total Revenues</b>	<b>250,589</b>	<b>1,308,915</b>	<b>953,382</b>	<b>638,043</b>	<b>455,178</b>	<b>1,375</b>	<b>3,607,482</b>
<i>Direct Operational Expenses:</i>							
Salaries and Wages	337,808	796,805	469,576	222,755	254,818	-	2,081,762
Benefits	102,812	206,440	119,333	85,314	85,736	-	599,634
Purchased Services	-	3,068	2,812	1,515	8,829	-	16,224
Medical Supplies	-	61,550	42,613	34,146	23,745	-	162,054
Other Supplies	283	17,197	8,508	8,704	5,067	-	39,759
Repairs & Maintenance	-	6,263	7,808	3,879	1,877	-	19,827
Lease & Rental	-	82,725	49,095	50,900	24,845	-	207,565
Utilities	-	3,801	3,285	552	7,223	-	14,860
Other Expense	5,550	5,369	4,877	2,848	748	-	19,393
Insurance	-	-	-	-	794	-	794
Total Operational Expenses	446,453	1,183,219	707,906	410,611	413,682	-	3,161,872
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(195,863)</b>	<b>125,695</b>	<b>245,476</b>	<b>227,432</b>	<b>41,496</b>	<b>-</b>	<b>445,610</b>
Depreciation	-	23,102	8,505	7,291	28,514	-	67,412
<i>Overhead Allocations:</i>							
Risk Mgt	937	3,073	2,115	2,144	1,202	-	9,472
Rev Cycle	-	78,280	53,869	54,624	30,624	-	217,396
Internal Audit	197	646	444	450	253	-	1,990
Home Office Facilities	24,125	-	-	-	-	-	24,125
Administration	5,407	17,722	12,196	12,367	6,933	-	54,625
Human Resources	5,370	23,987	16,827	16,111	5,370	-	67,666
Legal	2,154	7,060	4,858	4,927	2,762	-	21,761
Records	387	1,268	873	885	496	-	3,909
Compliance	773	2,535	1,744	1,769	992	-	7,813
Comm Engage Plan	1,037	3,398	2,338	2,371	1,329	-	10,473
IT Operations	10,116	33,159	22,818	23,138	12,972	-	102,204
IT Security	1,470	4,819	3,316	3,362	1,885	-	14,852
IT Applications	5,794	18,991	13,069	13,252	7,429	-	58,534
Security Services	-	25,784	17,743	17,992	10,087	-	71,606
IT EPIC	23,198	76,039	52,327	53,060	29,748	-	234,371
Finance	3,858	12,647	8,703	8,825	4,948	-	38,980
Public Relations	743	2,436	1,676	1,700	953	-	7,508
Information Technology	1,180	3,869	2,662	2,700	1,514	-	11,925
Corporate Quality	948	3,108	2,138	2,168	1,216	-	9,578
Project MGMT Office	1,460	4,785	3,293	3,339	1,872	-	14,750
Total Overhead Allocations	89,154	323,604	223,010	225,186	122,585	-	983,539
<b>Total Expenses</b>	<b>535,607</b>	<b>1,529,925</b>	<b>939,421</b>	<b>643,088</b>	<b>564,781</b>	<b>-</b>	<b>4,212,822</b>
<b>Net Margin</b>	<b>\$ (285,017)</b>	<b>\$ (221,011)</b>	<b>\$ 13,961</b>	<b>\$ (5,045)</b>	<b>\$ (109,603)</b>	<b>\$ 1,375</b>	<b>\$ (605,340)</b>
<b>Capital</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>General Fund Support/ Transfer In</b>	<b>\$ 605,340</b>	<b>-</b>	<b>21</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>605,340</b>





# District Clinic Holdings, Inc.- Behavioral Health Statement of Revenues and Expenses by Location

FOR THE EIGHT MONTH ENDED JUNE 30, 2022

	Portable Behavioral Health	West Palm Beach Behavioral Health	Lantana Behavioral Health	Delray Behavioral Health	Belle Glade Behavioral Health	Lewis Behavioral Health	West Boca Behavioral Health	Mangonia Behavioral Health	Total
<b>Gross Patient Revenue</b>	-	-	90	40	166	(686)	-	70,217	69,827
Contractual Allowances	-	66	51	-	(14)	19,492	16	(3,065)	16,545
Charity Care	-	31	-	-	146	453	-	16,563	17,192
Bad Debt	-	(1)	6	1	(13)	170	-	2,309	2,474
Total Contractual Allowances and Bad Debt	-	95	57	1	119	20,115	16	15,807	36,211
Other Patient Revenue	-	-	-	-	-	-	-	-	-
<b>Net Patient Revenue</b>	-	(95)	33	39	47	(20,801)	(16)	54,410	33,616
Collection %	-	0.00%	36.97%	96.53%	28.20%	3031.29%	0.00%	0.00%	48.14%
Grant Funds	-	-	-	-	-	-	-	-	-
Other Financial Assistance	-	-	-	-	-	-	-	-	-
Other Revenue	-	-	-	-	-	-	-	-	-
Total Other Revenues	-	-	-	-	-	-	-	-	-
<b>Total Revenues</b>	-	(95)	33	39	47	(20,801)	(16)	54,410	33,616
<i>Direct Operational Expenses:</i>									
Salaries and Wages	-	-	-	-	-	-	-	-	-
Benefits	-	-	-	-	-	-	-	-	-
Purchased Services	-	-	-	-	-	-	-	-	-
Medical Supplies	-	-	-	-	-	-	-	-	-
Other Supplies	-	-	-	-	-	-	-	-	-
Repairs & Maintenance	-	-	-	-	-	-	-	-	-
Lease & Rental	-	-	-	-	-	-	-	-	-
Utilities	-	-	-	-	-	-	-	-	-
Other Expense	-	-	-	-	-	-	-	-	-
Insurance	-	-	-	-	-	-	-	-	-
Total Operational Expenses	-	-	-	-	-	-	-	-	-
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	-	(95)	33	39	47	(20,801)	-	-	33,616
Depreciation	-	-	-	-	-	-	-	-	-
<i>Overhead Allocations:</i>									
Risk Mgt	-	-	-	-	-	-	-	-	-
Rev Cycle	-	-	-	-	-	-	-	-	-
Internal Audit	-	-	-	-	-	-	-	-	-
Home Office Facilities	-	-	-	-	-	-	-	-	-
Administration	-	-	-	-	-	-	-	-	-
Human Resources	-	-	-	-	-	-	-	-	-
Legal	-	-	-	-	-	-	-	-	-
Records	-	-	-	-	-	-	-	-	-
Compliance	-	-	-	-	-	-	-	-	-
Comm Engage Plan	-	-	-	-	-	-	-	-	-
IT Operations	-	-	-	-	-	-	-	-	-
IT Security	-	-	-	-	-	-	-	-	-
IT Applications	-	-	-	-	-	-	-	-	-
Security Services	-	-	-	-	-	-	-	-	-
IT EPIC	-	-	-	-	-	-	-	-	-
Finance	-	-	-	-	-	-	-	-	-
Public Relations	-	-	-	-	-	-	-	-	-
Information Technology	-	-	-	-	-	-	-	-	-
Corporate Quality	-	-	-	-	-	-	-	-	-
Project MGMT Office	-	-	-	-	-	-	-	-	-
Total Overhead Allocations	-	-	-	-	-	-	-	-	-
<b>Total Expenses</b>	-	-	-	-	-	-	-	-	-
<b>Net Margin</b>	\$ -	\$ (95)	\$ 33	\$ 39	\$ 47	\$ (20,801)	\$ (16)	\$ -	\$ 33,616
Capital	-	-	-	-	-	-	-	-	-
<b>General Fund Support/ Transfer In</b>	\$ -	-	-	24	-	-	-	-	-

# District Clinic Holdings, Inc.- Behavioral Health Statement of Revenues and Expenses

FOR THE EIGHT MONTH ENDED JUNE 30, 2022

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 69,827	\$ -	\$ 69,827	0.0%	\$ -	\$ 69,827	0.0%	Outpatient Revenue	\$ 69,827	\$ -	\$ 69,827	0.0%	\$ -	\$ 69,827	0.0%	
<b>69,827</b>	<b>-</b>	<b>69,827</b>	<b>0.0%</b>	<b>-</b>	<b>69,827</b>	<b>0.0%</b>	<b>Gross Patient Revenue</b>	<b>69,827</b>	<b>-</b>	<b>69,827</b>	<b>0.0%</b>	<b>-</b>	<b>69,827</b>	<b>0.0%</b>	
16,545	-	(16,545)	0.0%	-	(16,545)	0.0%	Contractual Allowances	16,545	-	(16,545)	0.0%	-	(16,545)	0.0%	
17,192	-	(17,192)	0.0%	-	(17,192)	0.0%	Charity Care	17,192	-	(17,192)	0.0%	-	(17,192)	0.0%	
2,474	-	(2,474)	0.0%	-	(2,474)	0.0%	Bad Debt	2,474	-	(2,474)	0.0%	-	(2,474)	0.0%	
36,211	-	(36,211)	0.0%	-	(36,211)	0.0%	Total Contractuals and Bad Debts	36,211	-	(36,211)	0.0%	-	(36,211)	0.0%	
-	-	-	0.0%	-	-	0.0%	Other Patient Revenue	-	-	-	0.0%	-	-	0.0%	
<b>33,616</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	<b>Net Patient Revenue</b>	<b>33,616</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	
48.14%	0.00%			0.00%			Collection %	48.14%	0.00%			0.00%			
-	-	-	0.0%	-	-	0.0%	Grant Funds	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Other Financial Assistance	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Other Revenue	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Total Other Revenues	-	-	-	0.0%	-	-	0.0%	
<b>33,616</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	<b>Total Revenues</b>	<b>33,616</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	
<i>Direct Operational Expenses:</i>															
-	-	-	0.0%	-	-	0.0%	Salaries and Wages	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Benefits	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Purchased Services	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Medical Supplies	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Other Supplies	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Repairs & Maintenance	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Lease & Rental	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Utilities	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Other Expense	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Insurance	-	-	-	0.0%	-	-	0.0%	
-	-	-	0.0%	-	-	0.0%	Total Operational Expenses	-	-	-	0.0%	-	-	0.0%	
<b>Net Performance before</b>															
<b>33,616</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	<b>Depreciation &amp; Overhead Allocations</b>	<b>33,616</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	<b>-</b>	<b>33,616</b>	<b>0.0%</b>	

# District Clinic Holdings, Inc.- Behavioral Health Statement of Revenues and Expenses

FOR THE EIGHT MONTH ENDED JUNE 30, 2022

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
-	-	-	0.0%	-	-	0.0%	Depreciation	-	-	-	0.0%	-	-	0.0%
							<i>Overhead Allocations:</i>							
-	-	-	0.0%	-	-	0.0%	Risk Mgt	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Rev Cycle	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Internal Audit	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Home Office Facilities	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Administration	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Human Resources	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Legal	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Records	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Compliance	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Comm Engage Plan	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT Operations	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT Security	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT Applications	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Security Services	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT EPIC	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Finance	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Public Relations	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Information Technology	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Corporate Quality	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Project MGMT Office	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Managed Care Contract	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Total Overhead Allocations	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Total Expenses	-	-	-	0.0%	-	-	0.0%
<b>\$ 33,616</b>	<b>\$ -</b>	<b>\$ 33,616</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ 33,616</b>	<b>0.0%</b>	<b>Net Margin</b>	<b>\$ 33,616</b>	<b>\$ -</b>	<b>\$ 33,616</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ 33,616</b>	<b>0.0%</b>
-	-	-	0.0%	-	-	0.0%	Capital	-	-	-	0.0%	-	-	0.0%
<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>General Fund Support/ Transfer In</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>

District Clinic Holdings, Inc.

	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
<b>Clinic Visits - Adults and Pediatrics</b>																
West Palm Beach	1,394	1,108	1,197	1,288	1,315	1,515	1,413	1,331	1,397				11,958	14,730	(18.8%)	9,376
Delray	477	563	541	473	500	631	636	606	722				5,149	10,937	(52.9%)	6,715
Lantana	1,821	1,554	1,450	1,408	1,721	1,764	1,662	1,553	1,839				14,772	14,095	4.8%	14,217
Belle Glade	691	610	688	648	692	835	688	718	715				6,285	7,547	(16.7%)	5,138
Lewis Center	488	507	432	245	358	286	304	348	147				3,115	2,249	38.5%	6,104
Lake Worth & Women's Health Care	1,334	1,119	1,180	1,054	1,223	1,270	1,062	1,056	1,105				10,403	12,183	(14.6%)	10,126
Jupiter Clinic	447	410	438	494	485	554	515	565	556				4,464	4,530	(1.5%)	4,559
West Boca & Women's Health Care	407	305	366	407	392	356	301	345	325				3,204	7,723	(58.5%)	6,240
St Ann Place	-	-	44	96	53	71	44	40	49				397	455	(12.7%)	-
Clb Mob 1 Warrior	658	1,415	941	169	23	33	-	-	-				3,239	1,352	139.6%	17
Clb Mob 2 Scout	416	365	756	575	426	200	-	7	-				2,745	747	267.5%	-
Clb Mob 3 Hero	178	331	2,467	1,955	39	20	11	-	-				5,001	747	569.5%	-
Mangonia Park	128	197	272	196	162	285	314	365	47				1,966	4,620	(57.4%)	3,177
<b>Total Clinic Visits</b>	<b>8,439</b>	<b>8,484</b>	<b>10,772</b>	<b>9,008</b>	<b>7,389</b>	<b>7,820</b>	<b>6,950</b>	<b>6,934</b>	<b>6,902</b>	-	-	-	<b>72,698</b>	<b>81,460</b>	<b>(10.8%)</b>	<b>65,669</b>
<b>Dental Visits</b>																
West Palm Beach	736	762	831	776	754	864	824	904	969				7,420	7,263	2.2%	3,827
Lantana	708	891	1,032	774	953	1,018	812	773	755				7,716	5,579	38.3%	4,334
Delray	439	391	373	415	400	536	405	455	499				3,913	5,187	(24.6%)	1,189
Belle Glade	338	357	340	331	406	417	356	436	476				3,457	2,765	25.0%	819
Lake Worth	-	-	-	-	-	-	-	-	-				-	-	0.0%	-
West Boca	-	-	-	-	-	-	-	-	-				-	-	0.0%	-
<b>Total Dental Visits</b>	<b>2,221</b>	<b>2,401</b>	<b>2,576</b>	<b>2,296</b>	<b>2,513</b>	<b>2,835</b>	<b>2,397</b>	<b>2,568</b>	<b>2,699</b>	-	-	-	<b>22,506</b>	<b>20,794</b>	<b>8.2%</b>	<b>10,169</b>
<b>Total Medical and Dental Visits</b>	<b>10,660</b>	<b>10,885</b>	<b>13,348</b>	<b>11,304</b>	<b>9,902</b>	<b>10,655</b>	<b>9,347</b>	<b>9,502</b>	<b>9,601</b>	-	-	-	<b>95,204</b>	<b>102,254</b>	<b>(6.9%)</b>	<b>75,838</b>
<b>Mental Health Counselors (non-billable)</b>																
West Palm Beach	103	106	103	117	144	303	197	148	178				1,399	1,367	2.3%	3
Delray	69	114	135	136	143	205	162	166	119				1,249	1,084	15.2%	130
Lantana	-	-	-	-	-	-	-	-	-				-	4,566	(100.0%)	43
Belle Glade	71	81	86	81	51	128	102	130	121				851	505	68.5%	185
Mangonia Park	511	320	326	403	458	404	333	344	47				3,146	821	283.2%	2,855
Lewis Center	866	787	845	907	890	927	917	997	130				7,266	1,952	272.2%	5,489
Lake Worth	179	162	120	184	170	227	177	192	207				1,618	1,452	11.4%	13
Jupiter	-	-	-	-	-	-	-	-	-				-	-	0.0%	-
West Boca	-	-	-	-	-	-	-	4	-				4	-	0.0%	-
Mobile Van	-	-	-	-	-	-	-	-	-				-	741	(100.0%)	-
<b>Total Mental Health Screenings</b>	<b>1,799</b>	<b>1,570</b>	<b>1,615</b>	<b>1,828</b>	<b>1,856</b>	<b>2,194</b>	<b>1,888</b>	<b>1,981</b>	<b>802</b>	-	-	-	<b>15,533</b>	<b>12,488</b>	<b>24.4%</b>	<b>8,718</b>
<b>GRAND TOTAL</b>	<b>12,459</b>	<b>12,455</b>	<b>14,963</b>	<b>13,132</b>	<b>11,758</b>	<b>12,849</b>	<b>11,235</b>	<b>11,483</b>	<b>10,403</b>	-	-	-				<b>84,556</b>

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

**1. Description: Executive Director Informational Update**

**2. Summary:**

AVP, Executive Director of Clinics and Pharmacy Services resignation

**3. Substantive Analysis:**

AVP, Executive Director of Clinics and Pharmacy Services resignation

- In order to reprioritize time with her family, Dr. Fritsch has tendered her letter of resignation effective October 7, 2022.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
Candice Abbott  
VP & Chief Financial Officer

**5. Reviewed/Approved by Committee:**

N/A

\_\_\_\_\_  
Committee Name

\_\_\_\_\_  
Date Approved

**6. Recommendation:**

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

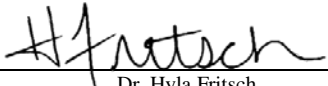
Approved for Legal sufficiency:

*Bernabe Icaza*

\_\_\_\_\_  
Bernabe Icaza  
VP & General Counsel



**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**



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

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

**1. Description: Executive Director of Clinic Annual Evaluation**

**2. Summary:**

This agenda item presents the annual evaluation of Dr. Hyla Fritsch, AVP & Executive Director of Clinic & Pharmacy Services.

**3. Substantive Analysis:**

The Bylaws and HRSA Compliance Manual indicate that the annual evaluation of the Executive Director of the Clinics are reviewed and approved by the Board. Evaluation provided under separate cover.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
 Candice Abbott  
 VP & Chief Financial Officer

**5. Reviewed/Approved by Committee:**

N/A

\_\_\_\_\_  
 Committee Name

\_\_\_\_\_  
 Date Approved

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

**6. Recommendation:**

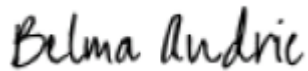
Staff recommends the Board approve Dr. Fritsch's Annual Evaluation.

Approved for Legal sufficiency:



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Bernabe Icaza  
VP & General Counsel



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



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Darcy J. Davis  
Chief Executive Officer

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

**1. Description: Health Care District recommendation for interim replacement of Executive Director**

**2. Summary:**

Dr. Hyla Fritsch was appointed by the District Clinic Holdings, Inc., d/b/a C. L. Brumback Primary Clinics (“Clinics”) Board of Directors (“Board”) as the Executive Director in October of 2020. Since that time, she has served the clinics diligently in her role. Dr. Fritsch has submitted her resignation effective October 7, 2022. At this time, we would like to recommend that Dr. Belma Andric be made the interim Executive Director of the Clinics effective October 7, 2022(HRSA Project Director).

**3. Substantive Analysis:**

The Health Care District of Palm Beach County (“HCD”) and the Clinics entered into a co-applicant arrangement in 2012 in order to transition the responsibility for operating the four existing Federally Qualified Health Centers (“FQHC”) from the State of Florida Department of Health to the HCD. In order to maintain the FQHC status and to receive grant funding from the Health Resources and Services Administration (“HRSA”), certain authorities were delegated to the Board as requirements of the HRSA rules and regulations. Several of the key components of these responsibilities include:

- Establishment of general policies for operating the FQHC’s
- Approval for the selection and dismissal of the Executive Director
- Evaluation of the clinic activities including productivity, patient satisfaction, achievement of project objectives and services utilization patterns
- Assuring that the clinics are operated in compliance with applicable federal, state and local laws and regulations
- Maintaining infrastructure agreements and contracts regarding sites, services and outreach
- Strive for top quartile of Uniform Data System quality awards

Also, there is an agreement between the HCD and the Clinics, which further outlines the role of each party in operating the clinics. The HCD has a robust infrastructure that provides necessary operational support and employs the Clinics’ personnel. Additionally, both parties have agreed to jointly review and approve a budget and financial plan each year.

In order to maintain continuity and stability in these unprecedented times, as well as maintain transparency into any proposed changes to the delivery of care at the FQHC’s, we believe that it would be in the best interest of the Clinics to allow Dr. Belma Andric to step into this role while recruiting for a replacement. She can work with existing staff and leadership, as well as the Board and HCD Board, to develop

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

suggestions to optimize care to patients of the FQHC's in a cost-effective, sustainable manner.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

\_\_\_\_\_  
 N/A  
 Candice Abbott  
 VP & Chief Financial Officer

**5. Reviewed/Approved by Committee:**

\_\_\_\_\_  
 N/A  
 Committee Name

\_\_\_\_\_  
 Date Approved

**6. Recommendation:**

HCD Management recommends to the Board that it appoint Dr. Belma Andric as the interim Executive Director of the Clinics (HRSA Project Director).

Approved for Legal sufficiency:

*Bernabe Icaza*  
 \_\_\_\_\_  
 Bernabe Icaza  
 VP & General Counsel

*Darcy Davis*  
 \_\_\_\_\_  
 Darcy Davis  
 CEO Health Care District

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

**1. Description: Licensed Independent Practitioner Credentialing and Privileging**

**2. Summary:**

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

**3. Substantive Analysis:**

The LIPs listed below 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
Noukelak	Germaine	MD	Internal Medicine	Initial Credentialing
Ali	Bushra	DMD	General Dentistry	Initial Credentialing
Stanek	Ewelina	PA	Physician Assistant	Initial Credentialing

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

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

Germaine Noukelak, MD, joined the Delray Clinic in 2022, specializing in Internal Medicine. She attended Howard University and completed her Residency at Howard University Hospital.

Bushra Ali, DMD, joined the Delray clinic in 2022, specializing in General Dentistry. She attended Rutgers, the State University of New Jersey School of Dental Medicine. Dr. Ali has been in practice for one year and is fluent in Arabic and Spanish.

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

Ewelina Stanek, PA, joined the West Palm Beach Clinic in 2022 as a Physician Assistant. She attended the University of New England and is certified as a Physician Assistant by the National Commission on Certification of Physician Assistants. She is fluent in Polish.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A  
 \_\_\_\_\_  
 Candice Abbott  
 VP & Chief Financial Officer

**5. Reviewed/Approved by Committee:**

N/A  
 \_\_\_\_\_  
 Committee Name

\_\_\_\_\_

Date Approved


**6. Recommendation:**

Staff recommends the Board approve the Initial Credentialing and privileging of Germaine Noukelak, MD, Internal Medicine.

Staff recommends the Board approve the Initial Credentialing and privileging of Bushra Ali, DMD, General Dentistry.


Staff recommends the Board approve the Initial Credentialing and privileging of Ewelina Stanek, PA, Physician Assistant.

Approved for Legal sufficiency:

  
 \_\_\_\_\_  
 Bernabe Icaza  
 VP & General Counsel

**DISTRICT CLINIC HOLDINGS, INC.  
BOARD OF DIRECTORS**

**August 24, 2022**



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Dr. Charmaine Chibar  
FQHC Medical Director



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



**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

**1. Description: Quality Report**

**2. Summary:**

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

- Quality Council Meeting Minutes August 2022
- UDS Report – YTD
- Provider Productivity – July 2022

**3. Substantive Analysis:**

PATIENT SAFETY & ADVERSE EVENTS

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

PATIENT SATISFACTION AND GRIEVANCES

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

QUALITY ASSURANCE & IMPROVEMENT

The cervical cancer screening measure satisfaction rate has improved from 38% to 47% over the past 2 months. The number of patients with missing data decreased from 62% to 54%. This was partly due to the auditing of charts to ensure that pap smears completed in previous years or by outside providers were being counted in the measure.

UTILIZATION OF HEALTH CENTER SERVICES

Individual monthly provider productivity is stratified by clinic.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
 Candice Abbott  
 VP & Chief Financial Officer

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

**5. Reviewed/Approved by Committee:**

N/A	
Committee Name	Date Approved

**6. Recommendation:**

Staff recommends the Board approve the updated Quality Report.

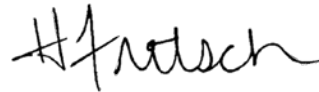
Approved for Legal sufficiency:



\_\_\_\_\_  
Bernabe Icaza  
VP & General Counsel



\_\_\_\_\_  
Dr. Charmaine Chibar  
FQHC Medical Director



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

**Quality Council Meeting Minutes**

**Date: August 5, 2022**

**Time: 9:00AM – 11:00AM**

**Attendees:** Andrea Steele – Executive Director of Corporate Quality; Maria Chamberlin – Nurse Manager; Dr. Sandra Warren – Associate Medical Director; Dr. John Cucuras – FQHC Dental Director; David Speciale – Patient Experience Director; Alexa Goodwin – Patient Relations Manager; Marisol Miranda – Director of Clinic Operations, Dr. Courtney Phillips - Director of Behavioral Health; Jonathan Dominique – Clinic Quality Analyst; Dr. Charmaine Chibar – FQHC Medical Director; Dr. Courtney Phillips - Director of Behavioral Health; Dr. Valena Grbic, Medical Director, District Cares; Dr. Hyla Fritsch – AVP, Executive Director of Clinic Operations & Pharmacy Services; Belma Andric – Chief Medical Officer;

**Excused:** Shauniel Brown – Senior Risk Manager; Irene Garcia – Dental Quality Coordinator; Carolina Foksinski, Operations Process Manager; Nancy Gonzalez – Dental Manager;

**Minutes by:** Jonathan Dominique

<u>AGENDA ITEM</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>																																									
<b>UTILIZATION</b>																																													
<b>OPERATIONS</b>	<p><b>Productivity</b>            In July, the clinics saw had over 10,000 patient visits which was more than 1,000 less than the month of June. However, this number was 2,000 more visits than this time last year (2021). That said, we continue to see an increase in overall total billable visits since the start of the pandemic.</p> <table border="1" data-bbox="401 1057 1087 1401"> <thead> <tr> <th colspan="6">Productivity July 2022</th> </tr> <tr> <th rowspan="2">Service Line</th> <th colspan="2">Target</th> <th colspan="2">Seen</th> <th rowspan="2">% of Goal</th> </tr> <tr> <th>In Person</th> <th>Tele</th> <th>In Person</th> <th>Tele</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Adult Care</td> <td>4,003</td> <td>29</td> <td>3,809</td> <td>28</td> <td>95%</td> </tr> <tr> <td>Pediatrics</td> <td>1,166</td> <td>0</td> <td>1,388</td> <td>0</td> <td>119%</td> </tr> <tr> <td>Women's Health</td> <td>370</td> <td>0</td> <td>385</td> <td>0</td> <td>104%</td> </tr> <tr> <td>Behavioral Health</td> <td>672</td> <td>194</td> <td>634</td> <td>149</td> <td>90%</td> </tr> </tbody> </table>	Productivity July 2022						Service Line	Target		Seen		% of Goal	In Person	Tele	In Person	Tele	Total	Adult Care	4,003	29	3,809	28	95%	Pediatrics	1,166	0	1,388	0	119%	Women's Health	370	0	385	0	104%	Behavioral Health	672	194	634	149	90%	<p>Marisol to work with Quality and Business Intelligence to better cater the Productivity dashboard to the needs of the Clinic Board (trends over time and updating fields).</p> <p>Volumes by clinic, and volumes by clinic over time, Payer Mix over time, etc.</p> <p>Marisol to discuss Payer Mix overtime with Angela and Candice from Finance/Rev Cycle</p>	<p>Marisol / Andrea / Monica</p> <p>Marisol</p>	<p>9/6/22</p> <p>9/6/22</p> <p>9/6/22</p>
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<p><b>Medical Payer Mix</b>          Self-Pay – 53%          Managed Care – 39%          Pending Medicaid – 3%          Medicaid – 3%          Other – 0%</p> <p><b>Dental Payer Mix</b>          Self-Pay – 51%          Managed Care – 45%          Medicaid – 3%          Medicare – 0%          Pending Medicaid – 1%</p> <p><b>(Clinic productivity report with graphs were presented.)</b></p>	<p>Admin Team to create committee of providers where suggestions for workflow process improvement can be discussed. <i>Provider Workgroup.</i></p> <p>Daily 4pm (15min) Huddle suggested to allow for increased communication between clinic admin staff.</p>	<p>Dr. Chibar, Dr. Warren, Marisol, Hyla</p> <p>Clinic Admin Team</p>	<p>9/6/22</p>																														
<p><b>Walk-ins</b>          Medical</p> <ul style="list-style-type: none"> <li>Scheduled: 6,517 (84%)</li> <li>Walk-Ins: 1,240 (16%)</li> </ul> <p>Dental:</p> <ul style="list-style-type: none"> <li>Scheduled: 2,055 (87%)</li> <li>Walk-Ins: 313 (13%)</li> </ul>																																	

<p>West Palm beach is consistently high in the walk-in rate 326 (30%) category while Mangonia had the highest number of walk-ins 398 (25%).</p> <p>Year to date trends show that the Medical walk-in rates vary between 15% and 16% throughout the year while the walk ins for dental have trended downward from 20% and trended down to 13%.</p>			
<p><b><u>No Show Rates</u></b>        No Show rates have slowly been increasing from January and are at a rate of 19%; down 10% from this time last year. However, YTD the No-show rate has fluctuated between 20% and 19% through 2022. The process has not changed at all. Admin team believes that this can possibly be due to a shortage in staff (7 registration staff members) and summer vacation.</p> <p><b>(Report with graph presented.)</b></p>			
<p><b><u>Provider Orders and Referrals</u></b></p> <p>Admin team to reevaluate list of available and necessary referrals, be able to differentiate between them and to look to remove duplicates from the options. There are a lot of issues with how referrals were set up in epic and Dr. Warren believes that the providers are misinterpreting what the listed referrals actually are, and this issue is costing the Clinics funds.</p> <p>Dr. Cucuras looking to see if there was a difference in pediatric dental referrals in Athena vs EPIC</p>	<p>Team to bring this to Medical Workgroup</p> <p>Marisol to look into the possibility of generating a report</p>	<p>Dr. Chibar / Marisol / June / Andrea / Dr. Warren</p> <p>Marisol / Ivonne /</p>	<p>9/6/22</p> <p>9/6/22</p>

			Dr. Cucuras	
<b>PATIENT RELATIONS</b>				
<b>GRIEVANCES, COMPLAINTS &amp; COMPLIMENTS</b>	<p><b><u>Patient Relations Dashboard</u></b></p> <p>For June 2022, there were a total of 17 Patient Relations Occurrences that occurred between 5 Clinics and Clinic Administration. Of the 17 occurrences, there was 4 Grievances and 13 Complaints. The top 5 categories were Finance, Care &amp; Treatment, Communication, Respect Related and Physician Related issues. The top subcategory was Billing Issues. There was also a total of 27 compliments received across 4 Clinics and Clinic Administration.</p> <p><b><i>(Patient Relations Report &amp; Patient Relations Dashboard with Graphs presented.)</i></b></p>			
<b>SURVEY RESULTS</b>	<p><b><u>Patient Satisfaction Survey – June 2022</u></b></p> <p>For June 2022 there were 372 surveys completed which is an 8% increase from the previous month. The top 5 and lowest 5 scored-questions were presented. Of the surveys completed, 75% were scored as Excellent /Very Good (Promoters) and 11% of the surveys were scored as Fair/Poor (Detractors). Promoters stayed the same and detractors scores increased 2% when compared to last month. Survey data indicates that 65% were completed by Females, 34% Male, and 1% Chose not to disclose. Patients prefer to be seen in the mornings at the beginning of the week. Most surveys (28%) were completed by patients after their first visit to the practice. Surveys were received for all locations and Departments with Lake Worth &amp; Lantana Primary Care receiving the most amount of surveys. Detractor-scored responses presented by clinic. Those clinics with the</p>	<p>David will provide a trended report of the Top 5 and 5 Lowest-scored questions.</p> <p>Dr. Andric would like more context for the ‘Total Completed Surveys’ dashboard. David will add the percentage of patients that answered the surveys that were sent out.</p> <p>Dr. Andric would like to have the questions ranked.</p>	<p>David</p> <p>David</p> <p>David</p>	<p>9/6/22</p> <p>9/6/22</p> <p>9/6/22</p>



	<p>highest number of detractor scores to receive corrective actions include:</p> <p><b>Wait time exam room</b></p> <ul style="list-style-type: none"><li>• Lantana Dental – 60%</li><li>• WPB Primary – 39%</li><li>• Lake Worth Primary – 27%</li><li>• Lantana Primary – 25%</li></ul> <p><b>Wait time reception</b></p> <ul style="list-style-type: none"><li>• WPB Primary – 36%</li><li>• WPB Dental – 27%</li><li>• Lake Worth Primary – 27%</li><li>• Lantana Dental – 20%</li></ul> <p><b>Informed about delays during the visit</b></p> <ul style="list-style-type: none"><li>• Mangonia Park – 50%</li><li>• Lantana Dental – 40%</li><li>• WPB Primary – 39%</li><li>• WPB Dental – 35%</li><li>• Delray Primary – 35%</li><li>• Lantana Primary 22%</li><li>• Jupiter Primary 21%</li></ul> <p><b>Ability to contact After Hours</b></p> <ul style="list-style-type: none"><li>• Mangonia Primary – 50%</li><li>• WPB Dental – 50%</li><li>• WPB Primary – 37%</li><li>• Delray Dental – 25%</li><li>• Lantana Primary – 24%</li></ul> <p><b>Phone calls answered promptly</b></p> <ul style="list-style-type: none"><li>• Lake Worth BH – 100% (1 survey)</li><li>• Lantana Dental – 40%</li><li>• WPB Primary – 39%</li><li>• WPB Dental – 32%</li></ul>	<p>David will provide clinics with Highest Detractors slide to the Clinics (will also add slide defining detractors)</p>	<p>David</p>	<p>9/6/22</p>
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	<ul style="list-style-type: none"> <li>• Mangonia Park – 25%</li> </ul> <p>Breakdown of scores; Benchmarks with like organizations; and Patient Comments by Clinic / Department presented. PDCA's are being implemented to improve scores for 2022.          (Patient Satisfaction Survey PowerPoint presented.)</p> <p><b><i>(Patient Satisfaction Survey PowerPoint presented.)</i></b></p>			
<p><b>OUTBOUND CALL CAMPAIGNS</b></p>	<p><b><u>Provider Reschedules</u></b>          In July 2022, The Clinic Service Center contacted 652 patients to reschedule their appointment. This was due to provider call out, provider resignation and provider unavailable. This was 56% increase a from the previous month where we rescheduled 418 patients.</p> <p><b><u>Outbound Campaigns</u></b></p> <p><i>HPV 1<sup>st</sup> Dose – West Palm Beach Clinic</i>          In July 2022, The Clinic Service Center contacted 51 patients who had not received the 1<sup>st</sup> dose of the HPV vaccine at the West Palm Beach Clinic. Of the 51, 3 were scheduled for an appointment and 9 patients already had an upcoming appointment.</p> <p><i>HPV 1<sup>st</sup> Dose – Belle Glade Clinic</i>          In July 2022, The Clinic Service Center contacted 17 patients who had not received any doses of the HPV vaccine at the Belle Glade Clinic. Of the 17, 3 were scheduled for an appointment and 2 already had an upcoming appointment. Notes were added to the chart for the patients who already had an upcoming appointment.</p> <p><i>BPB – Boca Clinic</i></p>	<p>Team considering limiting 1<sup>st</sup> dose campaign and instead focusing on 2<sup>nd</sup> and 3<sup>rd</sup> dose candidates instead. Will follow trend to determine</p>	<p>Alexa</p>	<p>9/6/22</p>



	<p>In July 2022, The Clinic Service Center contacted 586 patients who have not been to the Boca Clinic since 2021 in efforts to bring them back to the clinic. Out of the 586 patients, we were able to schedule 17% (35 patients) an appointment.</p> <p><i>Depression Remission:</i>        In July 2022, The Clinic Service Center contacted 209 patients in efforts to get them into the Clinic for Depression Remission. Of the 209 patients, 106 already had an upcoming appointment and 22 were scheduled for an appointment. Notes were added to the chart for the patients who already had an upcoming appointment.</p> <p><i>After Hours:</i>        In July 2022, the Clinic Service Center returned 149 calls received from the After-Hours service. This was a 33% decrease from the previous month. After hours calls by Type, by Clinic, and by Department presented. Of the 149 after hours calls received 14% of the calls were paged out to the on-call provider for a clinical issue. All clinical issues were paged out. Trends over time reported.</p> <p><i>FINFROCK Outreach (no graph to be presented)</i>        In July 2022, The Clinic Service Center contacted and registered 56 patients for a Health Fair Event happening in Belle Glade that our mobile unit was going to be a part of on 7/29/2022.</p> <p><b><i>(Outbound Campaign PowerPoint presented.)</i></b></p>			
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<p><b>NEXT THIRD AVAILABLE</b></p>	<p>The Next Third Available (NTA) report as of July 31, 2022 was presented by Clinic location and included all Departments associated and clinics. The report excludes “same day” appointment slots that are available each clinic Monday thru Friday. Monthly data and Trends over time data presented for each clinic and service line. An “decrease” is an improvement in NTA, whereas an “increase” is a lengthening of days wait for an appointment.</p> <p><b>Women’s Health</b></p> <ul style="list-style-type: none"> <li>• LW: between 4 and 30 days wait. Decreased from last month (32/40 days wait)</li> <li>• BG: 27 days wait. Increased by 10 days compared to last month (17 days)</li> </ul> <p><b>Primary Care</b></p> <p><u>Belle Glade</u></p> <ul style="list-style-type: none"> <li>• Belle Glade PCC: Providers: between 12 and 46 days wait. Increased compared to last month (9/43 days wait)</li> <li>• Residents: between 3 and 48 days wait. Decreased from last month (9/51 days wait)</li> </ul> <p><u>Boca Raton</u></p> <ul style="list-style-type: none"> <li>• Between 2 and 127 days wait. Increased compared to last month (0 days wait)</li> </ul> <p><u>Delray Beach</u></p> <ul style="list-style-type: none"> <li>• Between 11 and 61 days wait. Increased compared to last month (6/60 days wait)</li> </ul> <p><u>Jupiter</u></p> <ul style="list-style-type: none"> <li>• Between 28 and 127 days wait. Increased compared to last month (26 days wait)</li> </ul> <p><u>Lake Worth</u></p>	<p>There are provider with schedules open who are no longer with the organization. These templates appear to be opening ahead by about 127 days and, in turn, affecting our NTA dashboard.</p>		
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	<ul style="list-style-type: none"> <li>• Between 54 and 68 days wait. Decreased from last month (66/76 days wait)</li> <li>• Covering Provider (Dr. Warren): 76 days wait. Decreased from last month (102 days)</li> </ul> <p><u>Lantana</u></p> <ul style="list-style-type: none"> <li>• Adults: Between 28 and 81 days wait. Increased from last month (12/85 days wait)</li> <li>• Peds: Between 12 and 36 days wait. Increased from last month (1/36 days wait)</li> </ul> <p><u>Lewis Center</u></p> <ul style="list-style-type: none"> <li>• Two (2) day wait. Decrease from last month (4 days). Covering provider is an outlier at 127 days.</li> </ul> <p><u>Mangonia Park</u></p> <ul style="list-style-type: none"> <li>• Between 2 and 6 days wait. Decreased from last month (5/6 days wait)</li> </ul> <p><u>West palm Beach</u></p> <ul style="list-style-type: none"> <li>• Adults: Between 5 and 76 days wait. Increased compared to last month (7/49 days wait)</li> <li>• Peds: Between 21 and 24 days wait. Decreased from last month (29/33 days wait)</li> </ul> <p><b><u>Behavioral Health</u></b></p> <ul style="list-style-type: none"> <li>• Mangonia Park: Between 0 and 70 days wait. Increased compared to last month (0/23 days wait)</li> <li>• Other Locations: 0 days wait. Decreased from last month (0/4 days wait)</li> </ul> <p><b><u>Dental</u></b></p> <p><b>New Adult (Comps)</b></p> <ul style="list-style-type: none"> <li>• BG: 0/0 days wait</li> <li>• DB: 0/0 days wait</li> <li>• WPB: Between 38/50 days wait</li> </ul> <p><b>New Peds (Comps)</b></p>			
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	<ul style="list-style-type: none"> <li>• BG: 1 day wait</li> <li>• DB: 5 days wait</li> <li>• LAN: Between 1/41 days wait</li> <li>• WPB: 61 days wait</li> </ul> <p><b>Dental Procedures</b></p> <ul style="list-style-type: none"> <li>• BG: Between 1/16 days wait</li> <li>• DB: Between 0/5 days wait</li> <li>• LAN: 0 days wait</li> <li>• WPB: Between 0/7 days wait</li> </ul> <p><b>Hygiene</b></p> <ul style="list-style-type: none"> <li>• BG: Between 77/78 days wait</li> <li>• DB: Between 0/128 days wait</li> <li>• LAN: Between 0/1 days wait</li> <li>• WPB: Between 0/2 day wait</li> </ul> <p><i>(Third Next Available PowerPoint presented.)</i></p>			
<b>QUALITY</b>				
<b>QUALITY AUDITS</b>				
<b>MEDICAL</b>	<p><b>Hemoglobin A1C/Point of Care Testing</b></p> <p>Shows:          The diabetes measure data for January-June 2022 shows that our patients are currently controlled at 71% while 27 % are uncontrolled (from 3258 diabetic patients total) and 2 % of patients need data. HRSA goal is to have 67% of patients with controlled diabetes. There were 2673 POC A1Cs done (82% of Diabetic Patients). There was an increase of A1c POC testing compared to 3% in the previous month. The majority of controlled patients had 81% and uncontrolled 91.6% patients had the A1c done at POC vs. lab.          West Palm Beach Clinic (2%) Belle Glade Clinic (1%), Lantana Clinic (1%), and Delray Clinic (1%) - have highest percentage of untested patients as June; they account for</p>	<p>Ivonne to add percentages to Dashboard, adding data (color) key and Percentages removing the need for <i>controlled/uncontrolled</i> in the actual graph.</p>	<p>Ivonne /          Dr. Warren</p>	<p>9/6/22</p>



35 patients from the total of 56 with no data. 56 patients did not have data, 43% had already a future appointment, 57% patients did not have a schedule future appointment. We have seen a decrease in the number of patients with no lab results. We are now down to single digits in many different clinic locations.

**Colorectal Cancer Screening**

Colorectal cancer screening YTD - JUNE 2022		Satisfied	Needs Data			
Clinics	Eligible Population		# Patients with FIT Test Ordered		# Missed Patients	
Belle Glade	828	336 41%	367	44%	125	15%
Boca	487	235 48%	197	40%	55	11%
Delray Beach	927	347 37%	515	56%	65	7%
Jupiter	712	248 35%	273	38%	191	27%
Lake Worth	111	438 39%	553	50%	120	11%
Lantana	1050	412 39%	516	49%	122	12%
Lewis Center	113	9 8%	76	67%	28	25%
Mangonia Park	146	28 19%	97	66%	21	14%
Mobile	27	0 0%	26	96%	1	4%

West Palm Beach	1137	425 37%	590 52%	122 11%			
<b>Total</b>		<b>2480</b>	<b>3243 49%</b>	<b>877 13%</b>			
		<b>38%</b>	<b>4120 62%</b>				
<p><b><u>FIT Test</u></b>          It appears that Fit tests are not being returned as expected. Our highest return rates were at Belle Glade Clinic (46%), Lantana Clinic (39%), and Boca Raton Clinic (44%).           Belle Glade, Lantana Clinic and West Palm Beach Clinic are leading the charge in Point of Care FIT Tests.   <b>(Report with graph presented.)</b></p>							
<p><b><u>Cervical Cancer Screening</u></b>          Satisfied: 3561 (46%)          Needs Data: 4127 (54%)</p>							
<p><b><u>Breast Cancer Screening</u></b>          Satisfied screenings – 51% (n=1,876)          Unsatisfied Screenings – 49% (n=1,775) of the 1,775</p> <ul style="list-style-type: none"> <li>• Not Met with order – 75% (1,340)</li> <li>• Not Met (Patient Missed) – 25% (435)</li> </ul> <p>Jan-June: Satisfaction remained the same compared with the previous month in all categories.           Dr. Andric suggested that Dr. Chibar and Dr. Warren create individual binders for the Providers to review their</p>					<p>Dr. Chibar and Dr. Warren to create framework for 1:1 – like reviews.</p>		<p>9/6/22</p>



<p>Same Day Extractions: 224 (54% n=418)</p> <p>Returns (Follow-Up): Patients with a future extraction appointment type– 23 (6% n=418)</p> <p>Returned within 21 days for extraction</p> <p>17 (74% n=23)</p> <p>Antibiotics Given: Patients without a future extraction appointment type</p> <p>96 (23% n=418)</p> <p>Extraction not needed: non-emergent</p> <p>75 (18% n=418)</p> <p>Dr. Andric had concerns with the reported number of extractions per month (per our finance dept.). The team uses data pulling from two main codes.</p>	<p>Dr. Andric requested that the team also provide YTD extraction data from now on. Team will also follow up with business intelligence to confirm that the data source for Extractions dashboard is the same as the data source for revenue cycle.</p>	<p>Dr. Cucuras / Jonathan</p>	<p>9/6/22</p>
<p><b>MDI/WHO – June 2022</b></p> <ul style="list-style-type: none"> <li>– Total Pediatric Patients 188</li> <li>– Have Dental Home 73(39%; n=188)</li> <li>– No Dental Home 115 (61%; n=188)             <ul style="list-style-type: none"> <li>○ No MDI 15 (13% n=115)</li> <li>○ MDI 98 (85% n=115)                 <ul style="list-style-type: none"> <li>▪ WHO 47 (46% n=102)</li> <li>▪ No WHO 53 (52% n=102)</li> </ul> </li> </ul> </li> </ul> <p>Patients seen by Pediatric Dentists</p>			



	37 (79%; n=47)			
	<p><b>HPV</b>          YTD Number of eligible patients (n=1194)</p> <p>Distribution of patient doses goes as follows (520 vaccines from Jan-June 2022)</p> <ul style="list-style-type: none"> <li>• Dose 1 – 377</li> <li>• Dose 2 –123</li> <li>• Dose 3 –20</li> </ul> <p>There were 396 patients seen that were previously vaccinated for HPV</p> <p>262 Patients were Seen with No HPV vaccine or refusal consent on file.</p>	<p>Ivonne to provide a version of her report with trended data over time (last year or two, whatever she might have) to show the clinics’ progress in the last two years.</p> <p>Dr. Chibar to also discuss with providers the number of patients that no longer show up under PEDs in Florida shots as they turned 18 and now fall into the adult category.</p>	<p>Ivonne /          Dr. Chibar</p> <p>Dr. Chibar</p>	<p>9/6/22</p> <p>9/6/22</p>
<b>BEHAVIORAL HEALTH</b>	<p><b>SBIRT:</b>  <b>93</b> SBIRTs completed in June as opposed to <b>16</b> completed in May</p> <p>There seems to be an issue with the SBIRT capture in EPIC and the code/smartset reporting. At the beginning of the year, we were using a smartset with the correct code built in which is why we were capturing numbers like January (n=451) our partners with EPIC removed the smartset and the capture has not been the same since.</p>	<p>Mike is looking into another option to see if it is possible to not use BPAs. It appears that the providers are doing SBIRTs, however the system is not capturing it.</p>		<p>9/6/22</p>
	<p><b>PHQ 2/9</b>          Total encounters with PHQ2/9: 5,347          8% positive rate based on &gt;10, or 1 or above, (n=449)</p>			

	<p>Of that 8% Positive (n=449) 95% had a negative PHQ9 and 5% had no PHQ9 at all.</p> <p>Patients that were seen by the BHC or had future appt - 49% (n= 219)        Only n= 230 had positive PHQ9 and NO BH, which is at 51%,</p>			
<p><b>NURSING</b></p>	<p><b><u>Higher Level of Care</u></b></p> <p>For a mid-year check-in: June was the highest number of HLC referrals this year as well as the largest number of Adult Stabilization and Pediatric ER referrals this year. ER referrals was the second highest for the year.</p> <p>WPB continues to be the highest producer of HLC referrals. For the year they are 77 (29%) of all referrals with the second highest being BG at 39 (14%).        Dr. Clarke is the highest producer of pediatric ER referrals for the year so far with 72 (66%).        Dr. Florez is the highest producer for adults for the year so far with 29 (11%).</p> <p>92 ER referrals/91 patients were sent to the ER in June.        The breakdown of the referrals is:</p> <ul style="list-style-type: none"> <li>- WH- 10 (11%)</li> <li>- Peds- 27 (29%)</li> <li>- Adult- 46 (50%)</li> <li>- Adult Crisis- 8 (10%)</li> <li>- Urgent Care- 1</li> <li>- Peds Crisis-0</li> <li>- Dental- 0</li> </ul>			

<p>There were 2 patients with multiple orders in June. Upon review of the chart, the duplicate referrals from Dr. Clarke were appropriate.</p> <p><b>ADULT REFERRALS-</b> Dr. Perez, Joanne Pierre-Louis and Elsy Navarro were the top producers of adult referrals for May with 4 each of the 54 adult referrals.</p> <p><b>HOSPITAL REFERRAL-</b> These are from the WH department.</p> <p><b>PEDS REFERRALS-</b> highest producer was Dr. Clarke</p> <ul style="list-style-type: none"> <li>– 23 of the 27 (85%) peds referrals were from Dr. Clarke</li> </ul> <p>The incorrect referral type was used 5 times for a pediatric referral, all by the same pediatrician.</p> <p><b>URGENT CARE/ER REFERRAL-</b>      This referral type was discontinued in the month of July and removed from the Provider preference list. We should not continue to see this referral type used moving forward.</p> <p>Inter-clinic transport is covered by established COPCN guidelines for patients receiving services not provided at their home locations. For example, a patient from 45<sup>th</sup> street can be transferred via HCD transportation for a high level of care women’s health visit at another clinic location.</p>			
<p><b><u>HIV Linkage To Care</u></b></p> <ul style="list-style-type: none"> <li>• 12 Patients listed</li> </ul>			

	<ul style="list-style-type: none"> <li>• <u>4</u> patients with new HIV diagnoses</li> <li>• 1 refused to be seen by DOH,</li> <li>• <u>7</u> Patients linked to care after 30 days</li> </ul>			
	<p><b>Clinical Performance Measures:</b>          The team reviewed the expect clinical goals over the next three years for the Service Area Competition Grant submission. The measures include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Diabetes</li> <li>• Hypertension</li> <li>• Low Birth Weight</li> <li>• Entry into Care</li> <li>• Depression Screening</li> <li>• Early Childhood Immunization</li> </ul> <p>Contributing and limiting factors were also considered in the creation of this list.</p>	<p>Team decided to add language addressing point of care A1c Testing and the PHq9 testing.</p>		
<p><b>PEER REVIEW</b></p>	<p><b>Dental</b>          30 charts were peer reviewed. 27 were evaluated as “within standard of care”, 3 were evaluated as , “ Provider Self-identified Remediation” and 0 “Provider Education Required”, 0 were evaluated as “Inappropriate Care”. Of the 3 evaluated as “ Provider Self-identified Remediation” 2 had no next visit scheduled for that patient. Provider needs note that the next visit is scheduled. 1 of the 3 had Unsigned anesthesia consent (on provider side) in their chart.</p>			
<p><b>QUALITY METRICS</b></p>				



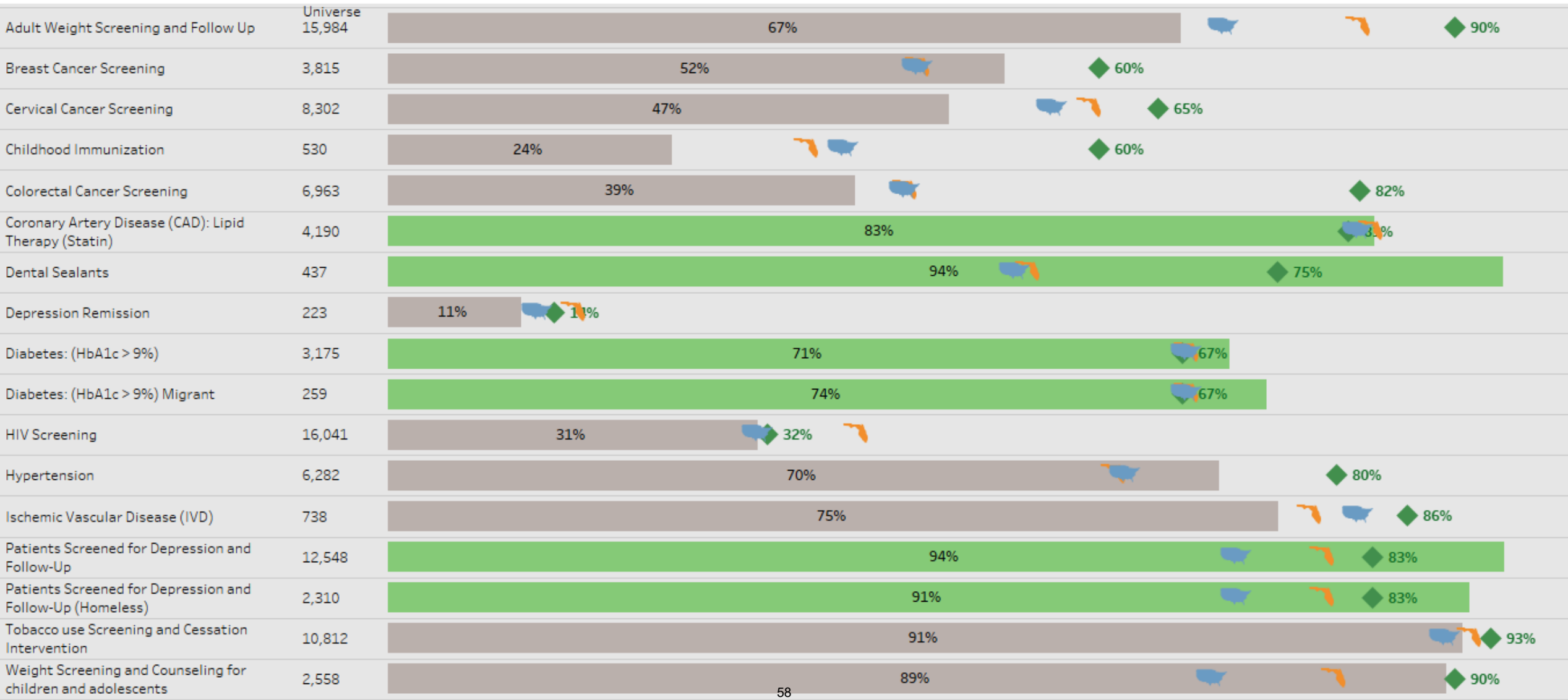
**UDS June 2022**

Of the 16 UDS Measures: 6 Exceeded the HRSA Goal and 10 were short of the HRSA Goal (*Clinic Score/ HRSA Goal / Healthy People Goal*)

<b>Medical UDS Report</b>	<b>Adult Weight screening and follow up:</b> (67% / 90%)			
	<b>Breast Cancer Screening:</b> (52%/60%)			
	<b>Cervical Cancer Screening:</b> (47% /65%)			
	<b>Childhood immunization:</b> (24%/ 60%)			
	<b>Colorectal Cancer Screening:</b> (39% / 82%)			
	<b>Coronary Artery Disease CAD:</b> (83% / 81%)			
	<b>Dental Sealants:</b> (94% / 75% )			
	<b>Depression Remission:</b> (11% / 14% )			
	<b>Diabetes:</b> (71% / 67% )			
	<b>HIV Screening:</b> (31% / 32%)			
	<b>Hypertension:</b> (70% / 80% )			
	<b>Ischemic Vascular Disease (IVD):</b> (75% / 86%)			
	<b>Depression screening:</b> (94% / 83% )			
	<b>Depression screening (Homeless):</b> (91% / 83% )			
	<b>Tobacco use screening &amp; cessation:</b> (91% / 93%)			
	<b>Weight assessment, Children &amp; Adolescent:</b> (89% /90%)			

**Meeting Adjourned: 12:30PM**

## OVERALL PERFORMANCE



**PRODUCTIVITY REPORT JULY 2022**

**ALL PROVIDERS**

AS 07/31/2022 Based on Completed Appointments

<51%

>=51% and < 80%

>= 80% and <100%

>= 100%

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen		% Monthly Target Achieved		Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
ALFONSO PUENTES, RAMIRO	17	18.3	280	7	287	256	7	263	92%	14.4
BUI, THY	10 **	7.0	73	0	73	77	0	77	105%	11.0
CASTIGLIA, SARAH	6 **	5.0	30	0	30	30	0	30	100%	6.0
DABU, DARNEL	17	19.0	320	3	323	297	3	300	93%	15.8
DORCE-MEDARD, JENNIFER	17	2.0	67	0	67	67	0	67	100%	33.5
FERNANDEZ SANCHEZ, MARCO	15	16.0	242	0	242	263	0	263	109%	16.4
FLOREZ, GLORIA	17	10.0	169	1	170	157	1	158	93%	15.8
HARBERGER, SENECA	8 Belle Glade * / 17	16.5	236	0	236	196	0	196	83%	11.9
JEAN-JACQUES, FERNIQUE	15	20.0	300	1	301	304	1	305	101%	15.3
KOOPMAN, REBECCA	15	18.5	278	0	278	312	0	312	112%	16.9
LAM, MINH DAI	15	15.0	214	6	220	245	7	252	115%	16.8
LANGLEY, TAMARA	3 **	3.0	7	0	7	7	0	7	100%	2.3
NAVARRO, ELSY	15	18.5	278	1	279	275	0	275	99%	14.9
PEREZ, DANIEL JESUS	7 Belle Glade * / 17	17.0	198	0	198	180	0	180	91%	10.6
PHILISTIN, KETELY	15	16.0	238	4	242	235	4	239	99%	14.9
PIERRE LOUIS, JOANN	15	17.0	254	2	256	228	1	229	89%	13.5
SHOAF, NOREMI	15	17.0	254	2	256	240	2	242	95%	14.2
ST VIL, CARLINE	15	6.5	98	0	98	83	0	83	85%	12.8
TAHERI, NERGESS T.	10 * Belle Glade / 17	11.0	101	0	101	75	0	75	74%	6.8
WARREN, SANDRA	17	6.0	61	0	61	54	0	54	89%	9.0
WILKINSON, SARAH	15	18.0	269	2	271	205	2	207	76%	11.5
ZITO, AMALINETTE	17	4.0	36	0	36	23	0	23	64%	5.8
<b>ADULT CARE TOTALS</b>		<b>281.3</b>	<b>4,003</b>	<b>29</b>	<b>4,032</b>	<b>3,809</b>	<b>28</b>	<b>3,837</b>	<b>95%</b>	

\* Avg Target for Belle Glade Primary \*\* Avg New Provider

RESIDENTS										
PY1	6	13.4	60	0	60	71	0	71	118%	5.3
PY2	10	17.5	165	0	165	89	0	89	54%	5.1
PY3	14	29.6	316	3	319	205	3	208	65%	7.0
<b>RESIDENTS TOTAL</b>		<b>60.5</b>	<b>541</b>	<b>3</b>	<b>544</b>	<b>365</b>	<b>3</b>	<b>368</b>	<b>68%</b>	

PEDIATRIC CARE										
CLARKE-AARON, NOELLA	17	7.0	119	0	119	141	0	141	118%	20.1
CHIBAR, CHARMAINE	17	1.0	3	0	3	3	0	3	100%	3.0
DESSALINES, DUCLOS	17	17.5	297	0	297	352	0	352	119%	20.1
LAZARO RIVERA, NANCY	17	17.0	289	0	289	344	0	344	119%	20.2
MARZOUCA, KISHA F.	17	10.5	178	0	178	225	0	225	130%	21.4
NORMIL-SMITH, SHERLOUNE	17	16.5	280	0	280	323	0	323	115%	19.6
<b>PEDIATRIC CARE TOTALS</b>		<b>69.5</b>	<b>1,166</b>	<b>0</b>	<b>1,166</b>	<b>1,388</b>	<b>0</b>	<b>1,388</b>	<b>119%</b>	

WOMEN'S HEALTH CARE										
CASANOVA, JENNIFER	15	14.5	198	0	198	226	0	226	114%	15.6
FERWERDA, ANA	17	9.0	139	0	139	126	0	126	91%	14.0
PROPHETE, JOYCE	11 **	3.0	33	0	33	33	0	33	100%	11.0
<b>WOMEN'S HEALTH CARE TOTALS</b>		<b>26.5</b>	<b>370</b>	<b>0</b>	<b>370</b>	<b>385</b>	<b>0</b>	<b>385</b>	<b>104%</b>	

\*\* Avg New Provider

BEHAVIORAL HEALTH										
LEQUERICA ZIEMBA, ADRIANA	6	16.0	72	24	96	90	19	109	114%	6.8
CALDERON, NYLSA	10	19.5	155	40	195	144	30	174	89%	8.9
GREEN, ASHLEY	10	1.0	6	4	10	4	4	8	80%	8.0
JONES, KIARA	10	18.0	159	21	180	157	17	174	97%	9.7
LUCCHESI, KAREN	10	20.5	161	44	205	139	32	171	83%	8.3
CUSIMANO, ANGELA	12	15.0	119	61	180	100	47	147	82%	9.8
<b>BEHAVIORAL HEALTH TOTALS</b>		<b>90</b>	<b>672</b>	<b>194</b>	<b>866</b>	<b>634</b>	<b>149</b>	<b>783</b>	<b>90%</b>	

SUBSTANCE ABUSE DISORDER										
PHILLIPS, COURTNEY	8	14.0	66	19	85	84	15	99	116%	7.1
DRAYTON, RENEISHA	10	19.5	130	65	195	169	41	210	108%	10.8
HIRSCH, KAREN	6	15.0	57	33	90	60	17	77	86%	5.1
MILETA, SNEJZANA	10	19.5	138	57	195	171	20	191	98%	9.8
MITCHELL, ANGELA	10	17.5	126	49	175	156	30	186	106%	10.6
LAWRENCE, MELISSA	10	17.0	100	70	170	103	39	142	84%	8.4
<b>SUBSTANCE ABUSE DISORDER TOTALS</b>		<b>102.5</b>	<b>617</b>	<b>293</b>	<b>910</b>	<b>743</b>	<b>162</b>	<b>905</b>	<b>99%</b>	

DENTAL										
ALWEHAIB, ARWA	16	9.5	152	0	152	164		164	108%	17.3
BOWEN, BEVERLY	12	19.5	312	0	312	270		270	87%	13.8
CUCURAS, JOHN N	16	2.0	3	0	3	3		3	100%	1.5
SEMINARIO, ADA	16	14.7	236	0	236	205		205	87%	13.9
SOFIANOS JR, MICHAEL	16	20.5	328	0	328	328		328	100%	16.0
SILVA, MICHELLE	16	14.0	218	0	218	225		225	103%	16.1
ZANGENEH, YASMINE	16	14.7	236	0	236	197		197	83%	13.4
WILLIAMS, RICHARD	16	16.0	256	0	256	213		213	83%	13.3
<b>DENTAL TOTALS</b>		<b>110.9</b>	<b>1,741</b>	<b>0</b>	<b>1,741</b>	<b>1,605</b>		<b>1,605</b>	<b>92%</b>	

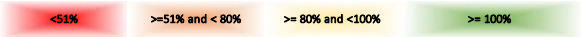
DENTAL HYGIENE										
MOZER NASCIMENTO, ARIANNE	8	19.5	156	0	156	156		156	100%	8.0
PARRISH, ROSARIO	8	9.5	76	0	76	72		72	95%	7.6
HARDCASTLE, CORINA	8	14.5	116	0	116	116		116	100%	8.0
MASON, SHERRY	8	19.5	156	0	156	135		135	87%	6.9
PETERSEN, PATRICE	MID 16	18.5	296	0	296	284		284	96%	15.4
<b>DENTAL HYGIENE TOTALS</b>		<b>81.5</b>	<b>800</b>	<b>0</b>	<b>800</b>	<b>763</b>		<b>763</b>	<b>95%</b>	

<b>GRAND TOTAL</b>		<b>822.7</b>	<b>9,910</b>	<b>59</b>	<b>10,429</b>	<b>9,692</b>	<b>342</b>	<b>10,034</b>	<b>96%</b>	
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# PRODUCTIVITY REPORT JULY 2022

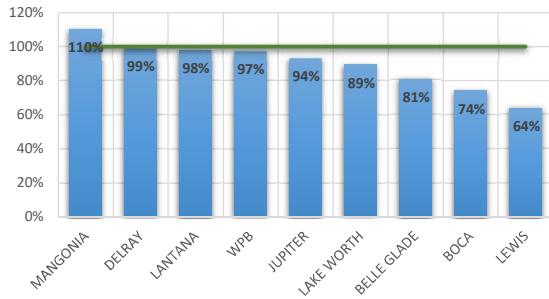
ALL CLINICS

AS 07/31/2022 Based on Completed Appointments

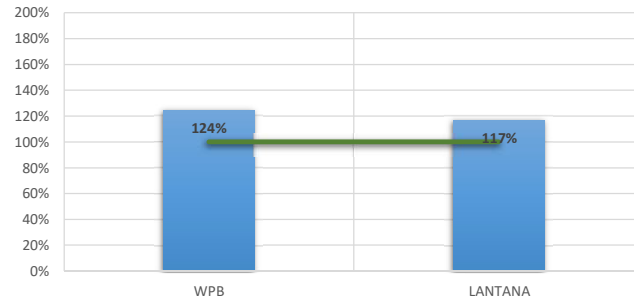


Category	Target for the Month			Total for the Month Seen			% Monthly Target Achieved
	AS 07/31/2022	In-Person	Telehealth	Total	In-Person	Telehealth	
ADULT CARE	4,003	29	4,032	3,809	28	3,837	95%
PEDIATRIC CARE	1,166	0	1,166	1,388	0	1,388	119%
WOMEN'S HEALTH CARE	370	0	370	385	0	385	104%
BEHAVIORAL HEALTH	672	194	866	634	149	783	90%
SUBSTANCE ABUSE DISORDER	617	293	910	743	162	905	99%
DENTAL HEALTH	1,741	0	1,741	1,605	0	1,605	92%
DENTAL HYGIENE	800	0	800	763	0	763	95%
RESIDENTS	541	3	544	365	3	368	68%
<b>Grand Total</b>	<b>9,910</b>	<b>519</b>	<b>10,429</b>	<b>9,692</b>	<b>342</b>	<b>10,034</b>	<b>96%</b>

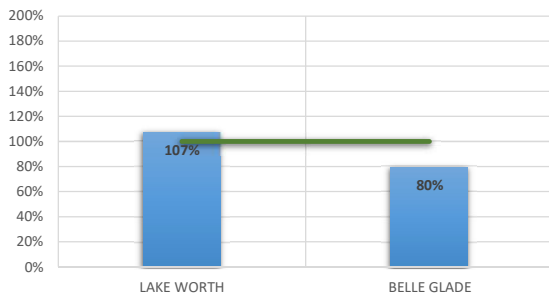
Adult Care



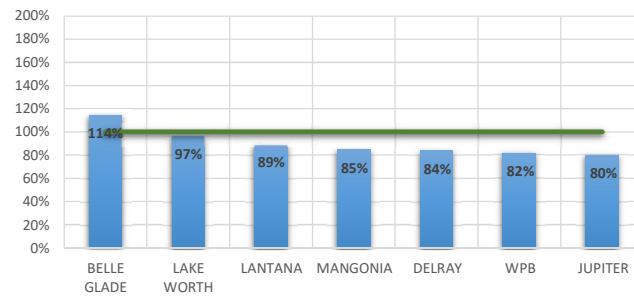
Pediatric Care



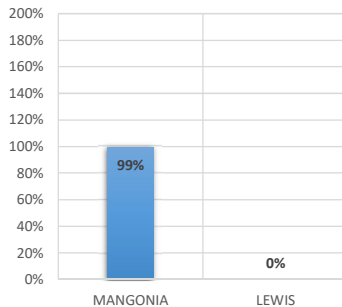
Women's Health Care



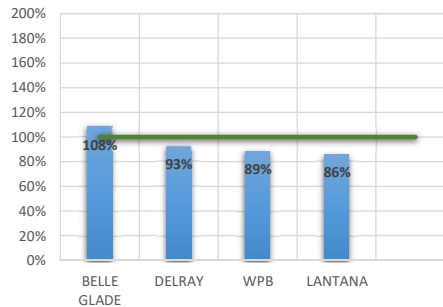
Behavioral Health



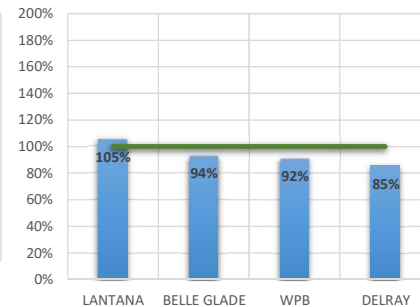
Substance Abuse Disorder



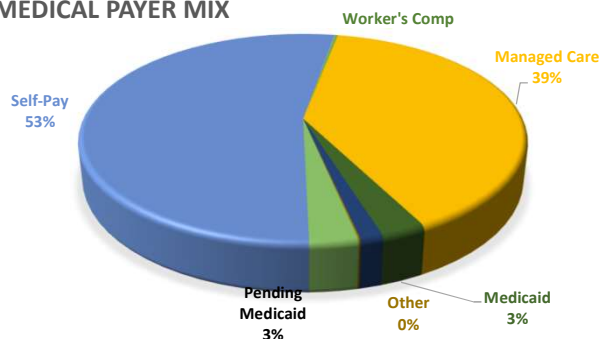
Dental



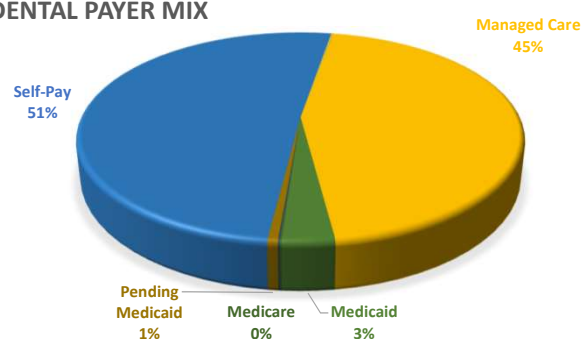
Dental Hygiene



MEDICAL PAYER MIX



DENTAL PAYER MIX





**ADULT CARE**

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

ALFONSO PUENTES, RAMIRO	83%	95%	77%	90%	80%	87%	96%	94%	90%	92%
BUI, THY										105%
DABU, DARNEL	90%	99%	82%	83%	83%	91%	102%	102%	97%	93%
DORCE-MEDARD, JENNIFER	89%	67%	111%	111%	67%	67%	83%	133%	83%	100%
CASTIGLIA, SARAH										100%
FLOREZ, GLORIA	99%	98%	78%	91%	93%	95%	87%	90%	94%	93%
HARBERGER, SENECA				100%	100%	100%	100%	100%	95%	83%
JEAN-JACQUES, FERNIQUE	96%	106%	96%	96%	102%	87%	100%	102%	105%	101%
KOOPMAN, REBECCA	62%	70%	63%	69%	98%	87%	86%	99%	111%	112%
LAM, MINH DAI	125%	116%	108%	108%	104%	104%	106%	107%	113%	115%
LANGLEY, TAMARA										100%
PIERRE LOUIS, JOANN	89%	100%	81%	95%	97%	95%	105%	97%	97%	89%
NAVARRO, ELSY	92%	103%	93%	92%	103%	97%	97%	99%	101%	99%
PEREZ, DANIEL JESUS				81%	95%	97%	88%	86%	100%	91%
PHILISTIN, KETELY	91%	98%	87%	101%	102%	90%	92%	88%	99%	99%
WILKINSON, SARAH								55%	79%	76%
FERNANDEZ SANCHEZ, MARCO	149%	168%	118%	76%	100%	83%	83%	95%	111%	109%
SHOAF, NOREMI	88%	95%	87%	96%	91%	97%	99%	101%	98%	95%
ST. VIL, CARLINE	77%	92%	98%	83%	87%	84%	92%	95%	101%	
WARREN, SANDRA	78%	100%	70%		100%	85%	100%	68%	74%	89%
ZITO, AMALINETTE	100%	89%	81%	104%	100%	100%	92%	122%	85%	64%
RESIDENTS				75%	64%	72%	71%	78%	75%	68%

<b>PEDIATRIC CARE</b>		Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
CLARKE-AARON, NOELLA		92%	89%	85%	89%	97%	98%	104%	102%	111%	118%		
CHIBAR, CHARMAINE		61%	100%	100%	100%				100%	108%	100%		
DESSALINES, DUCLOS		120%	126%	108%	107%	121%	119%	113%	121%	109%	119%		
LAZARO RIVERA, NANCY		130%	136%	113%	115%	128%	128%	120%	126%	117%	119%		
MARZOUCA, KISHA F.		90%	88%	85%	99%	95%	101%	100%	110%	110%	130%		
NORMIL-SMITH, SHERLOUNE		116%	106%	106%	108%	113%	112%	106%	116%	98%	115%		

<b>WOMEN'S HEALTH CARE</b>		Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
CASANOVA, JENNIFER		107%	133%	107%	121%	137%	123%	120%	134%	143%	114%		
FERWERDA, ANA		110%	102%	84%	92%	114%	106%	99%	103%	122%	91%		

<b>BEHAVIORAL HEALTH</b>		Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
CALDERON, NYLSA		90%	97%	84%	92%	97%	91%	91%	93%	99%	89%		
JONES, KIARA		98%	101%	89%	96%	98%	100%	99%	98%	104%	97%		
GREEN, ASHLEY							118%	105%	61%		80%		
LUCCHESI, KAREN		43%	67%	65%	70%	89%	86%	95%	83%	92%	83%		
CUSIMANO, ANGELA			116%	50%	70%	79%	89%	75%	71%	81%	82%		
LEQUERICA ZIEMBA, ADRIANA		79%	84%	84%	90%	109%	113%	105%	137%	105%	114%		

<b>SUBSTANCE ABUSE CARE</b>		Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
DRAYTON, RENEISHA							105%	92%	118%	105%	108%		
HIRSCH, KAREN		86%	98%	81%	70%	131%	117%	105%	115%	122%	86%		
PEREZ-NUNEZ, DIANA				77%	83%	90%	82%	84%	96%	67%			
MILETA, SNJEZANA		93%	124%	100%	93%	93%	96%	86%	109%	81%	98%		
MITCHELL, ANGELA		110%	105%	93%	94%	92%	97%	85%	114%	106%	106%		
LAWRENCE, MELISSA			129%	89%	103%	125%	105%	105%	121%	103%	84%		
PHILLIPS, COURTNEY		153%	53%	87%	166%	121%	132%	100%	94%	109%	116%		

**DENTAL**

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

ALWEHAIB, ARWA	100%	105%	89%	97%	104%	104%	99%	99%	113%	108%
CUCURAS, JOHN N	90%	140%	96%	102%	113%	94%	103%	106%	103%	
BOWEN, BEVERLY								110%	74%	87%
SEMINARIO, ADA	75%	112%	94%	77%	102%	90%	90%	78%	87%	87%
SILVA, MICHELLE	78%	102%	81%	92%	108%	94%	89%	97%	92%	103%
SOFIANOS JR, MICHAEL						101%	106%	96%	85%	100%
ZANGENEH, YASMINE	70%	107%	80%	73%	104%	82%	80%	97%	86%	83%
WILLIAMS, RICHARD	63%	95%	78%	70%	84%	82%	83%	84%	81%	83%
PARRISH, ROSARIO								116%	96%	95%
HARDCASTLE, CORINA	78%	89%	88%	83%	88%	92%	94%	96%	98%	100%
MASON, SHERRY	60%	78%	59%	69%	72%	89%	84%	89%	76%	87%
GONZALEZ, NANCY		63%	75%			98%	106%	150%		
PETERSEN, PATRICE	54%	83%	90%	88%	111%	100%	102%	108%	101%	96%

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
DORCE-MEDARD, JENNIFER	17	1.0	18	0	18	18	0	18	100%	18.0
HARBERGER, SENECA	8	4.5	32	0	32	24	0	24	75%	5.3
PEREZ, DANIEL JESUS	7	8.5	53	0	53	46	0	46	87%	5.4
TAHERI, NERGESS T.	10	11.0	101	0	101	75	0	75	74%	6.8
PHILUSTIN, KETELY	15	0.5	8	0	8	8	0	8	100%	16.0
<b>ADULT CARE TOTALS</b>		<b>25.5</b>	<b>212</b>	<b>0</b>	<b>212</b>	<b>171</b>	<b>0</b>	<b>171</b>	<b>81%</b>	

RESIDENTS										
PY1	8	13.4	60	0	60	71	0	71	118%	5.3
PY2	12	17.5	165	0	165	89	0	89	54%	5.1
PY3	12	29.6	316	3	319	205	3	208	65%	7.0
<b>RESIDENTS TOTALS</b>		<b>60.5</b>	<b>541</b>	<b>3</b>	<b>544</b>	<b>365</b>	<b>3</b>	<b>368</b>	<b>68%</b>	

WOMEN'S HEALTH CARE										
FERWERDA, ANA	13	3.5	44	0	44	35		35	80%	10.0
<b>WOMEN'S HEALTH CARE TOTALS</b>		<b>3.5</b>	<b>44</b>	<b>0</b>	<b>44</b>	<b>35</b>	<b>0</b>	<b>35</b>	<b>80%</b>	

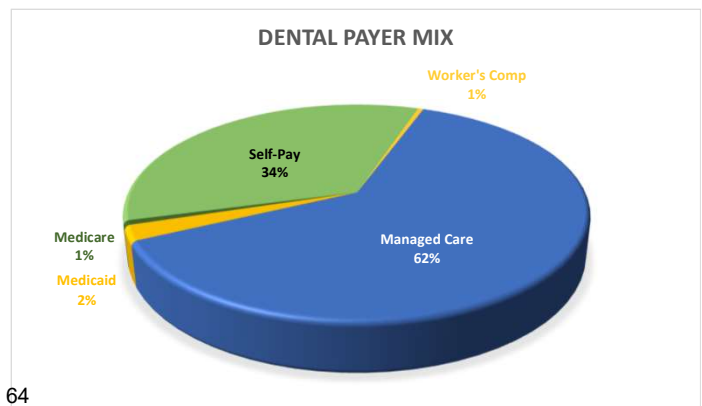
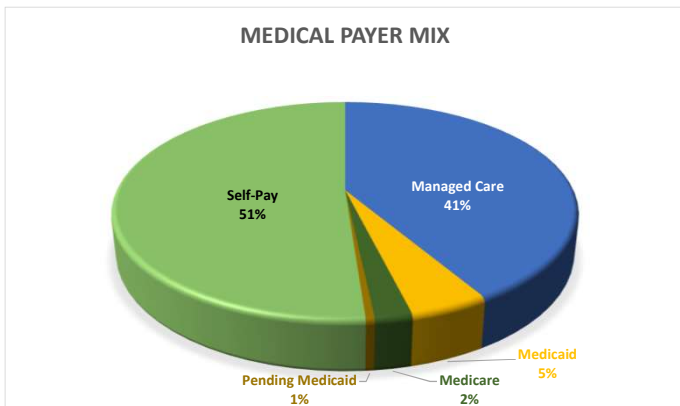
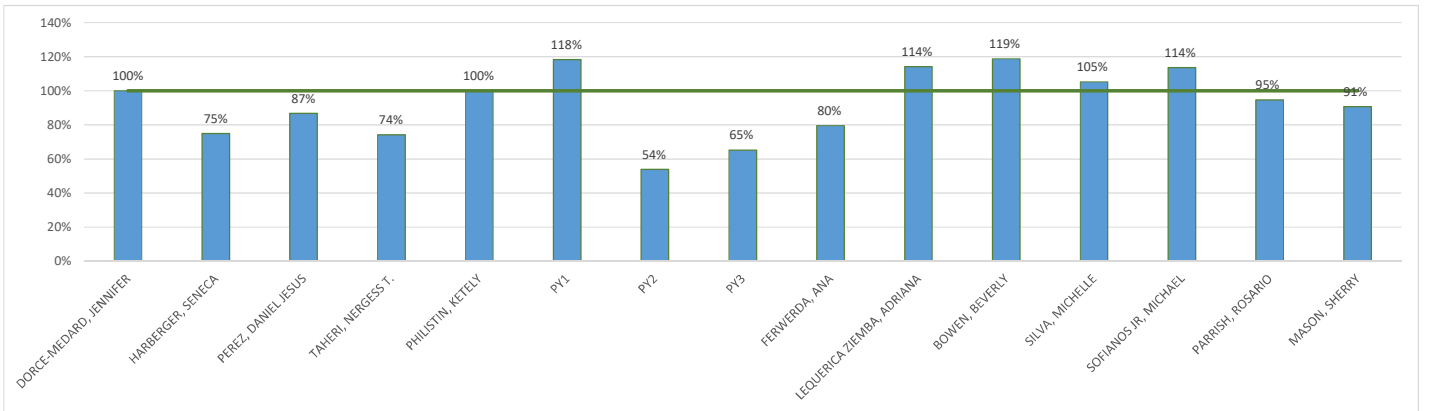
BEHAVIORAL HEALTH										
LEQUERICA ZIEMBA, ADRIANA	6	15.3	70	22	92	88	17	105	114%	6.9
<b>BEHAVIORAL HEALTH TOTALS</b>		<b>15.3</b>	<b>70</b>	<b>22</b>	<b>92</b>	<b>88</b>	<b>17</b>	<b>105</b>	<b>114%</b>	

SUBSTANCE ABUSE DISORDER										
<b>SUBSTANCE ABUSE DISORDER TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

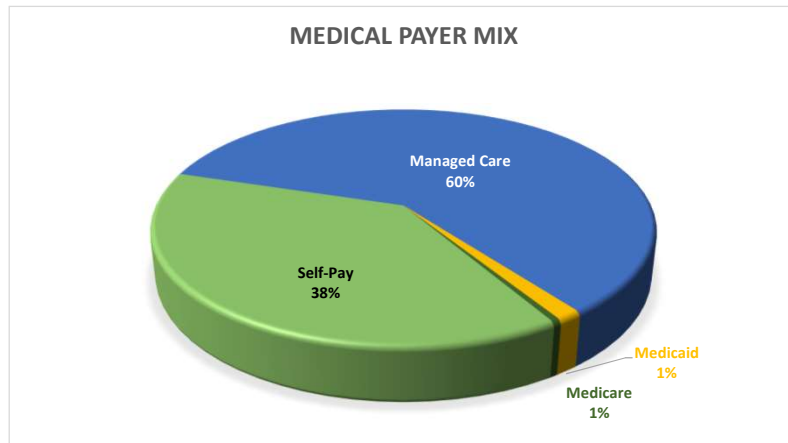
DENTAL										
BOWEN, BEVERLY	16	1.0	16	0	16	19		19	119%	19.0
SILVA, MICHELLE	16	13.5	210	0	210	221		221	105%	16.4
SOFIANOS JR, MICHAEL	16	5.5	88	0	88	100		100	114%	18.2
<b>DENTAL TOTALS</b>		<b>20.0</b>	<b>314</b>	<b>0</b>	<b>314</b>	<b>340</b>	<b>0</b>	<b>340</b>	<b>108%</b>	

DENTAL HYGIENE										
PARRISH, ROSARIO	8	9.5	76	0	76	72		72	95%	7.6
MASON, SHERRY	8	4.0	32	0	32	29		29	91%	7.3
<b>DENTAL HYGIENE TOTALS</b>		<b>13.5</b>	<b>108</b>	<b>0</b>	<b>108</b>	<b>101</b>	<b>0</b>	<b>101</b>	<b>94%</b>	

GRAND TOTAL										
		<b>138.3</b>	<b>1,289</b>	<b>25</b>	<b>1,314</b>	<b>1,100</b>	<b>20</b>	<b>1,120</b>	<b>85%</b>	

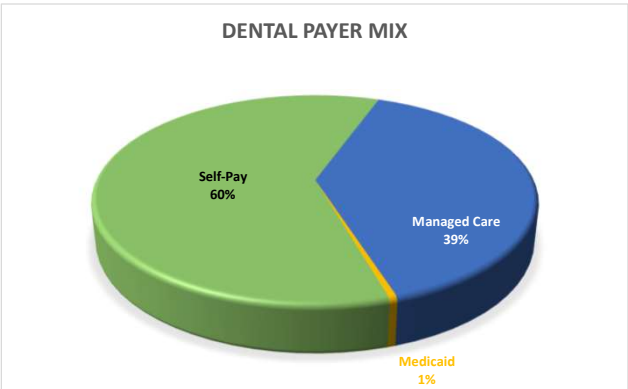
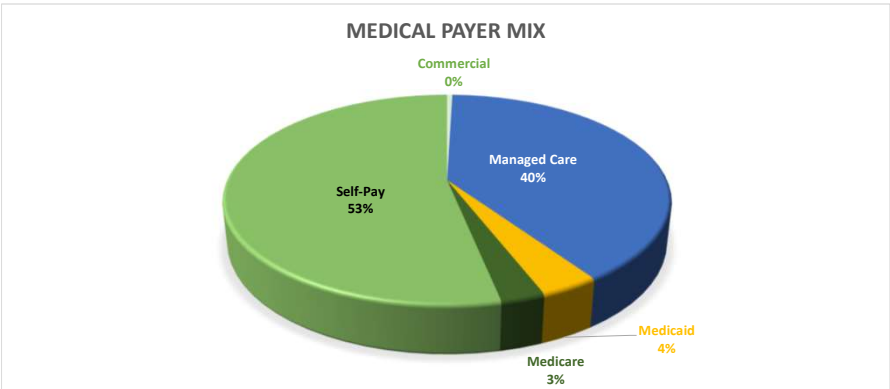
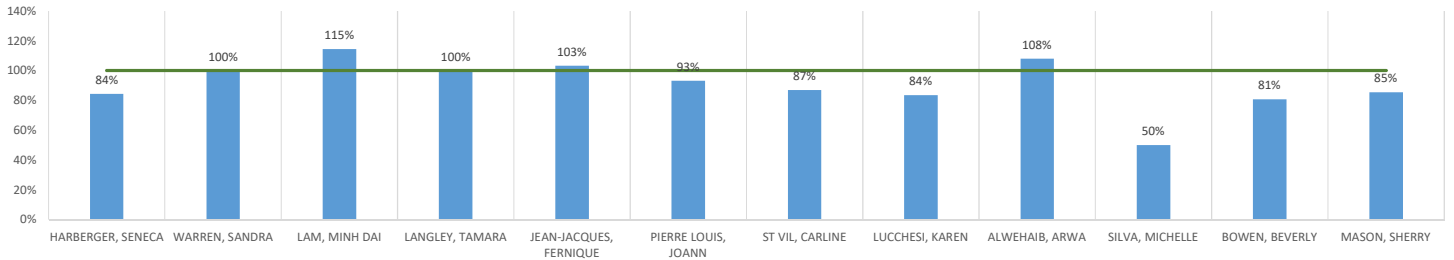


ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
WILKINSON, SARAH	15	17.5	261	2	263	196	2	198	75%	11.3
ST VIL, CARLINE	15	2.0	30	0	30	19	0	19	63%	9.5
<b>ADULT CARE TOTALS</b>		<b>19.5</b>	<b>291</b>	<b>2</b>	<b>293</b>	<b>215</b>	<b>2</b>	<b>217</b>	<b>74%</b>	
SUBSTANCE ABUSE DISORDER										
<b>SUBSTANCE ABUSE DISORDER TOTALS</b>		<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		
<b>GRAND TOTAL</b>		<b>19.5</b>	<b>291</b>	<b>2</b>	<b>293</b>	<b>215</b>	<b>2</b>	<b>217</b>	<b>74%</b>	



AS 07/31/2022 Based on Completed Appointments

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
HARBERGER, SENECA	17	12	204	0	204	172	0	172	84%	14.3
WARREN, SANDRA	4	1	4	0	4	4	0	4	100%	4.0
LAM, MINH DAI	15	15	214	6	220	245	7	252	115%	16.8
LANGLEY, TAMARA	2	3	7	0	7	7	0	7	100%	2.3
JEAN-JACQUES, FERNIQUE	15	2.0	30	0	30	31	0	31	103%	15.5
PIERRE LOUIS, JOANN	15	1.0	15	0	15	14	0	14	93%	14.0
ST VIL, CARLINE	15	1.5	23	0	23	20	0	20	87%	13.3
<b>ADULT CARE TOTALS</b>		<b>35.5</b>	<b>497</b>	<b>6</b>	<b>503</b>	<b>493</b>	<b>7</b>	<b>500</b>	<b>99%</b>	
BEHAVIORAL HEALTH										
LUCCHESI, KAREN	10	19.5	152	43	195	132	31	163	84%	8.4
<b>BEHAVIORAL HEALTH TOTALS</b>		<b>19.5</b>	<b>152</b>	<b>43</b>	<b>195</b>	<b>132</b>	<b>31</b>	<b>163</b>	<b>84%</b>	
SUBSTANCE ABUSE DISORDER										
<b>SUBSTANCE ABUSE DISORDER TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		
DENTAL										
ALWEHAIB, ARWA	16	9.5	152	0	152	164		164	108%	17.3
SILVA, MICHELLE	16	0.5	8	0	8	4		4	50%	8.0
BOWEN, BEVERLY	16	10	160	0	160	129		129	81%	12.9
<b>DENTAL TOTALS</b>		<b>20</b>	<b>320</b>	<b>0</b>	<b>320</b>	<b>297</b>	<b>0</b>	<b>297</b>	<b>93%</b>	
DENTAL HYGIENE										
MASON, SHERRY	8	15.5	124	0	124	106		106	85%	6.8
<b>DENTAL HYGIENE TOTALS</b>		<b>15.5</b>	<b>124</b>	<b>0</b>	<b>124</b>	<b>106</b>	<b>0</b>	<b>106</b>	<b>85%</b>	
<b>GRAND TOTAL</b>		<b>91</b>	<b>1093</b>	<b>49</b>	<b>1142</b>	<b>1028</b>	<b>38</b>	<b>1066</b>	<b>93%</b>	

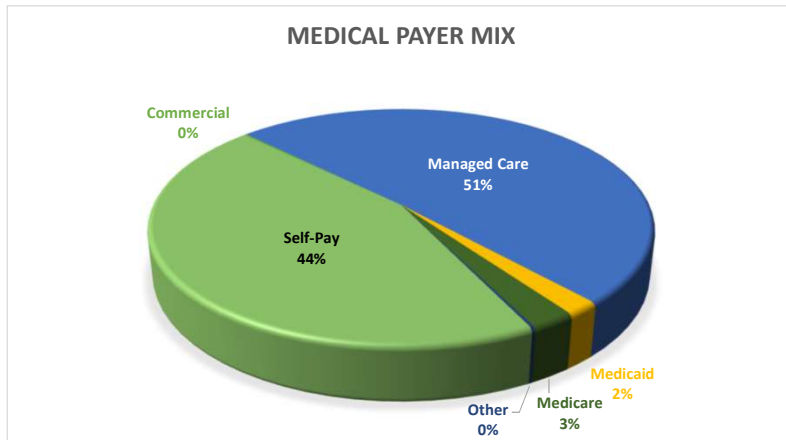
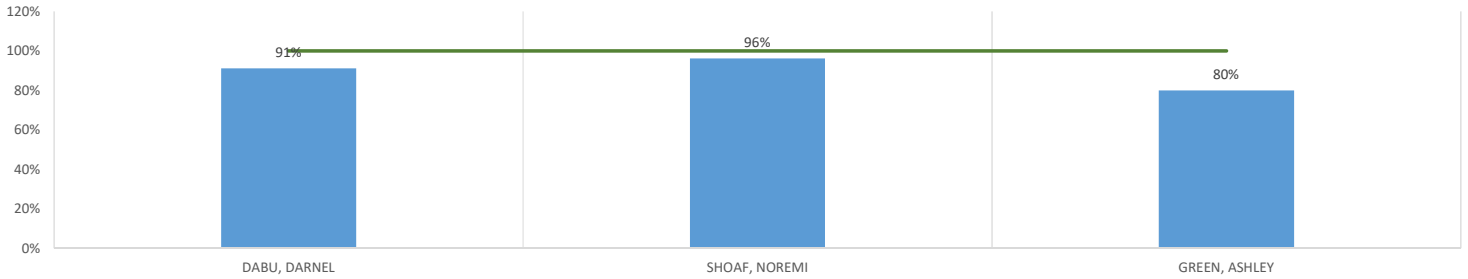


ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
DABU, DARNEL	17	16.0	268	3	271	244	3	247	91%	15.4
SHOAF, NOREMI	15	16.0	238	2	240	229	2	231	96%	14.4
<b>ADULT CARE TOTALS</b>		<b>32</b>	<b>506</b>	<b>5</b>	<b>511</b>	<b>473</b>	<b>5</b>	<b>478</b>	<b>94%</b>	

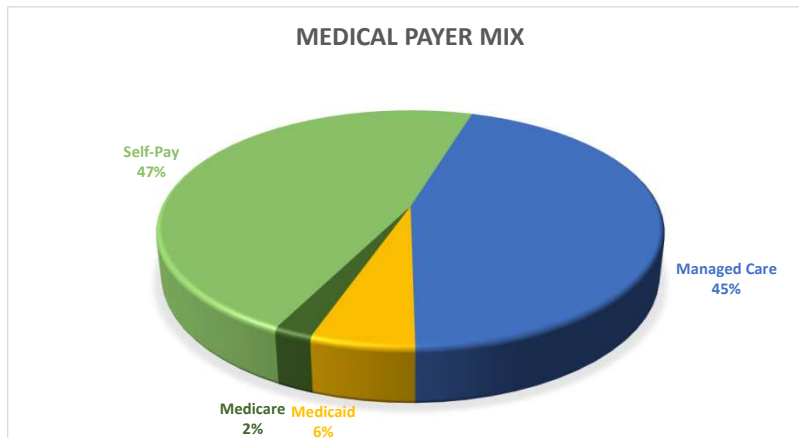
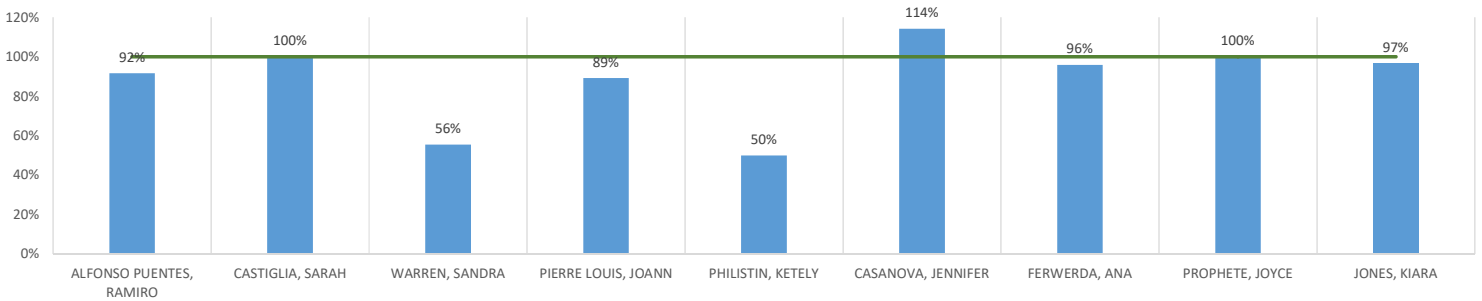
BEHAVIORAL HEALTH										
GREEN, ASHLEY	10	1.0	6	4	10	4	4	8	80%	8.0
<b>BEHAVIORAL HEALTH TOTALS</b>		<b>1</b>	<b>6</b>	<b>4</b>	<b>10</b>	<b>4</b>	<b>4</b>	<b>8</b>	<b>80%</b>	

SUBSTANCE ABUSE DISORDER										
<b>SUBSTANCE ABUSE DISORDER TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

<b>GRAND TOTAL</b>		<b>33</b>	<b>512</b>	<b>9</b>	<b>521</b>	<b>477</b>	<b>9</b>	<b>486</b>	<b>93%</b>	
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ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
ALFONSO PUENTES, RAMIRO	16	18.3	280	7	287	256	7	263	92%	14.4
CASTIGLIA, SARAH	6 **	5.0	30	0	30	30	0	30	100%	6.0
WARREN, SANDRA	17	1.0	18	0	18	10	0	10	56%	10.0
PIERRE LOUIS, JOANN	15	16.0	239	2	241	214	1	215	89%	13.4
PHILISTIN, KETELY	15	0.5	8	0	8	4	0	4	50%	8.0
<b>ADULT CARE TOTALS</b>		<b>40.8</b>	<b>575</b>	<b>9</b>	<b>584</b>	<b>514</b>	<b>8</b>	<b>522</b>	<b>89%</b>	
<i>**Avg New Provider</i>										
WOMEN'S HEALTH CARE										
CASANOVA, JENNIFER	15	14.5	198	0	198	226	0	226	114%	15.6
FERWERDA, ANA	17	5.5	95	0	95	91	0	91	96%	16.5
PROPHETE, JOYCE	11 **	3	33	0	33	33	0	33	100%	11.0
<b>WOMEN'S HEALTH CARE TOTALS</b>		<b>23</b>	<b>326</b>	<b>0</b>	<b>326</b>	<b>350</b>	<b>0</b>	<b>350</b>	<b>107%</b>	
<i>**Avg New Provider</i>										
BEHAVIORAL HEALTH										
JONES, KIARA	10	18	159	21	180	157	17	174	97%	9.7
<b>BEHAVIORAL HEALTH TOTALS</b>		<b>18</b>	<b>159</b>	<b>21</b>	<b>180</b>	<b>157</b>	<b>17</b>	<b>174</b>	<b>97%</b>	
SUBSTANCE ABUSE DISORDER										
<b>SUBSTANCE ABUSE DISORDER TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		
<b>GRAND TOTAL</b>		<b>81.8</b>	<b>1,060</b>	<b>30</b>	<b>1,090</b>	<b>1,021</b>	<b>25</b>	<b>1,046</b>	<b>96%</b>	







ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
PEREZ, DANIEL JESUS	17	8.5	145	0	145	134	0	134	92%	15.8
JEAN-JACQUES, FERNIQUE	15	18.0	270	1	271	273	1	274	101%	15.2
NAVARRO, ELSY	15	18.5	278	1	279	275	0	275	99%	14.9
ST VIL, CARLINE	15	3.0	45	0	45	44	0	44	98%	14.7
<b>ADULT CARE TOTALS</b>		<b>48</b>	<b>738</b>	<b>2</b>	<b>740</b>	<b>726</b>	<b>1</b>	<b>727</b>	<b>98%</b>	

PEDIATRIC CARE										
DESSALINES, DUCLOS	17	14.5	246	0	246	285	0	285	116%	19.7
LAZARO RIVERA, NANCY	17	17	289	0	289	344	0	344	119%	20.2
NORMIL-SMITH, SHERLOUNE	17	16.5	280	0	280	323	0	323	115%	19.6
<b>PEDIATRIC CARE TOTALS</b>		<b>48</b>	<b>815</b>	<b>0</b>	<b>815</b>	<b>952</b>	<b>0</b>	<b>952</b>	<b>117%</b>	

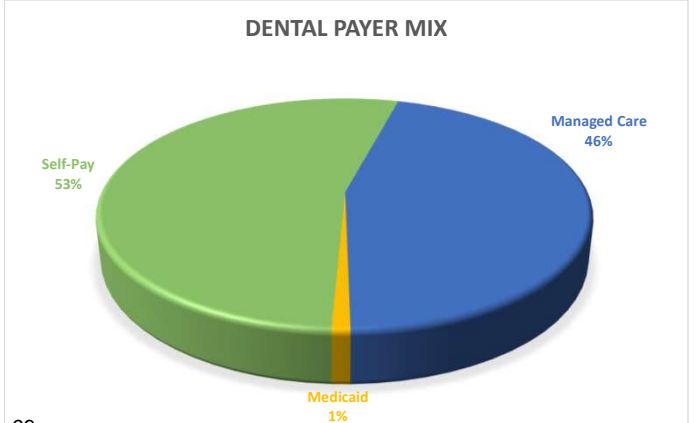
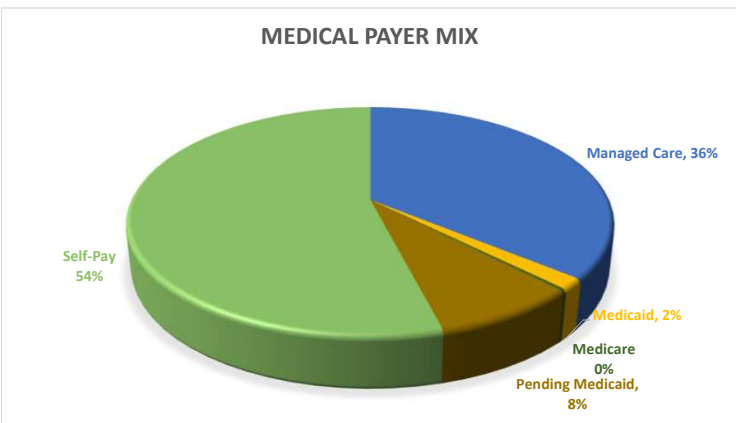
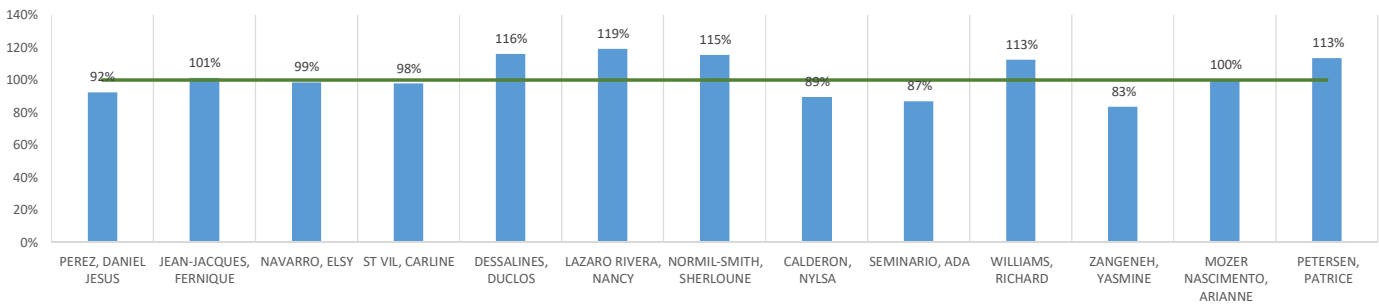
BEHAVIORAL HEALTH										
CALDERON, NYLSA	10	19.5	155	40	195	144	30	174	89%	8.9
<b>BEHAVIORAL HEALTH TOTALS</b>		<b>19.5</b>	<b>155</b>	<b>40</b>	<b>195</b>	<b>144</b>	<b>30</b>	<b>174</b>	<b>89%</b>	

SUBSTANCE ABUSE DISORDER										
<b>SUBSTANCE ABUSE DISORDER TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

DENTAL										
SEMINARIO, ADA	16	14.7	236	0	236	205		205	87%	13.9
WILLIAMS, RICHARD	16	0.5	8	0	8	9		9	113%	18.0
ZANGENEH, YASMINE	16	14.7	236	0	236	197		197	83%	13.4
<b>DENTAL TOTALS</b>		<b>29.9</b>	<b>480</b>	<b>0</b>	<b>480</b>	<b>411</b>	<b>0</b>	<b>411</b>	<b>86%</b>	

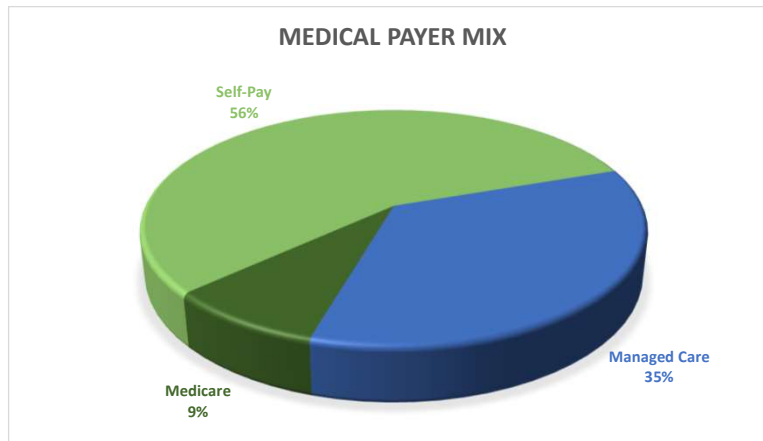
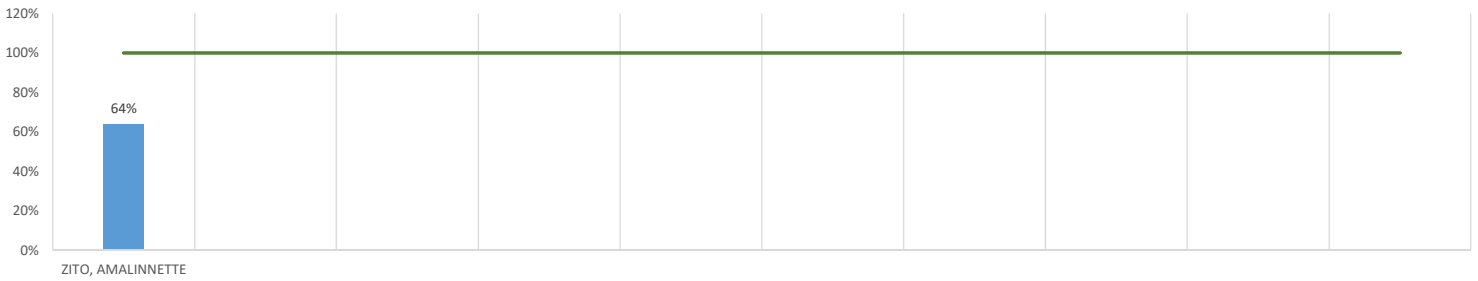
DENTAL HYGIENE										
MOZER NASCIMENTO, ARIANNE	8	19.5	156	0	156	156		156	100%	8.0
PETERSEN, PATRICE	16	6.5	104	0	104	118		118	113%	18.2
<b>DENTAL HYGIENE TOTALS</b>		<b>26</b>	<b>260</b>	<b>0</b>	<b>260</b>	<b>274</b>	<b>0</b>	<b>274</b>	<b>105%</b>	

<b>GRAND TOTAL</b>		<b>171.4</b>	<b>2,448</b>	<b>42</b>	<b>2,490</b>	<b>2,507</b>	<b>31</b>	<b>2,538</b>	<b>102%</b>	
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AS 07/31/2022 Based on Completed Appointments

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
ZITO, AMALINETTE	9	4	36	0	36	23	0	23	64%	5.8
<b>ADULT CARE TOTALS</b>		<b>4</b>	<b>36</b>	<b>0</b>	<b>36</b>	<b>23</b>	<b>0</b>	<b>23</b>	<b>64%</b>	
BEHAVIORAL HEALTH										
<b>BEHAVIORAL HEALTH TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		
SUBSTANCE ABUSE DISORDER										
<b>SUBSTANCE ABUSE CARE TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		
<b>GRAND TOTAL</b>		<b>4</b>	<b>36</b>	<b>0</b>	<b>36</b>	<b>23</b>	<b>0</b>	<b>23</b>	<b>64%</b>	



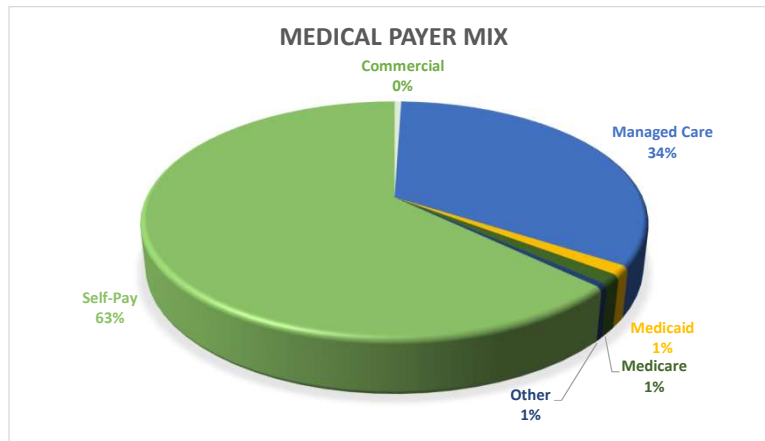
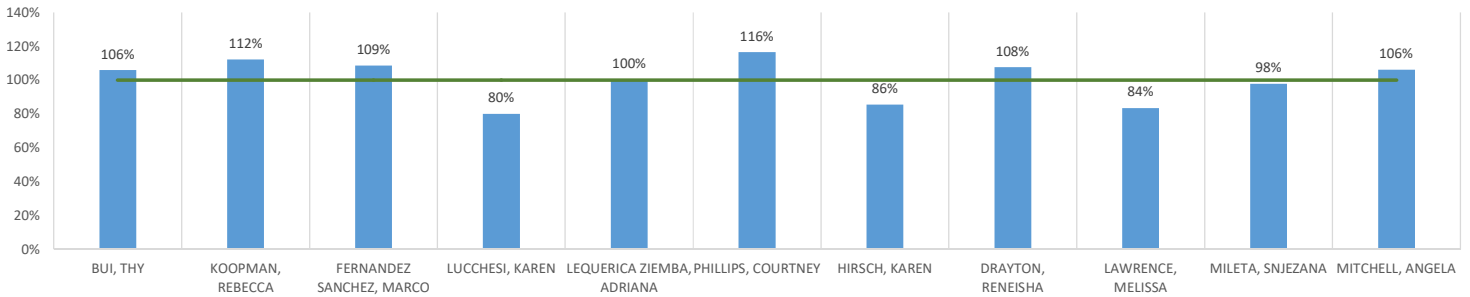
AS 07/31/2022 Based on Completed Appointments

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
BUI, THY	11	6.0	67	0	67	71	0	71	106%	11.8
KOOPMAN, REBECCA	15	18.5	278	0	278	312	0	312	112%	16.9
FERNANDEZ SANCHEZ, MARCO	15	16.0	242	0	242	263	0	263	109%	16.4
<b>ADULT CARE TOTALS</b>		<b>40.5</b>	<b>587</b>	<b>0</b>	<b>587</b>	<b>646</b>	<b>0</b>	<b>646</b>	<b>110%</b>	

BEHAVIORAL HEALTH										
LUCCHESI, KAREN	10	1.0	9	1	10	7	1	8	80%	8.0
LEQUERICA ZIEMBA, ADRIANA	6	0.5	1	2	3	1	2	3	100%	6.0
<b>BEHAVIORAL HEALTH TOTALS</b>		<b>1.5</b>	<b>10</b>	<b>3</b>	<b>13</b>	<b>8</b>	<b>3</b>	<b>11</b>	<b>85%</b>	

SUBSTANCE ABUSE DISORDER										
PHILLIPS, COURTNEY	6	14.0	66	19	85	84	15	99	116%	7.1
HIRSCH, KAREN	6	15.0	57	33	90	60	17	77	86%	5.1
DRAYTON, RENEISHA	10	19.5	130	65	195	169	41	210	108%	10.8
LAWRENCE, MELISSA	10	17.0	100	70	170	103	39	142	84%	8.4
MILETA, SNJEZANA	10	19.5	138	57	195	171	20	191	98%	9.8
MITCHELL, ANGELA	10	17.5	126	49	175	156	30	186	106%	10.6
<b>SUBSTANCE ABUSE CARE TOTALS</b>		<b>102.5</b>	<b>617</b>	<b>293</b>	<b>910</b>	<b>743</b>	<b>162</b>	<b>905</b>	<b>99%</b>	

<b>GRAND TOTAL</b>		<b>144.5</b>	<b>1,214</b>	<b>296</b>	<b>1,510</b>	<b>1,397</b>	<b>165</b>	<b>1,562</b>	<b>103%</b>	
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ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
DABU, DARNEL	17	3.0	52	0	52	53	0	53	102%	17.7
FLOREZ, GLORIA	17	10.0	169	1	170	157	1	158	93%	15.8
WARREN, SANDRA	10	4.0	39	0	39	40	0	40	103%	10.0
PHILISTIN, KETELY	15	15.0	222	4	226	223	4	227	100%	15.1
SHOAF, NOREMI	15	1.0	16	0	16	11	0	11	69%	11.0
WILKINSON, SARAH	15	0.5	8	0	8	9	0	9	113%	18.0
<b>ADULT CARE TOTALS</b>		<b>33.5</b>	<b>506</b>	<b>5</b>	<b>511</b>	<b>493</b>	<b>5</b>	<b>498</b>	<b>97%</b>	

PEDIATRIC CARE										
CLARKE-AARON, NOELLA	17	7	119	0	119	141	0	141	118%	20.1
DESSALINES, DUCLOS	17	3	51	0	51	67	0	67	131%	22.3
CHIBAR, CHARMAINE	3	1	3	0	3	3	0	3	100%	3.0
MARZOUCA, KISHA F.	17	10.5	178	0	178	225	0	225	130%	21.4
<b>PEDIATRIC CARE TOTALS</b>		<b>21.5</b>	<b>351</b>	<b>0</b>	<b>351</b>	<b>436</b>	<b>0</b>	<b>436</b>	<b>124%</b>	

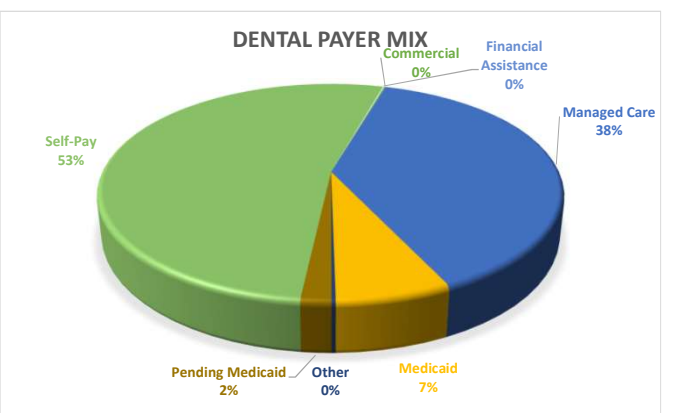
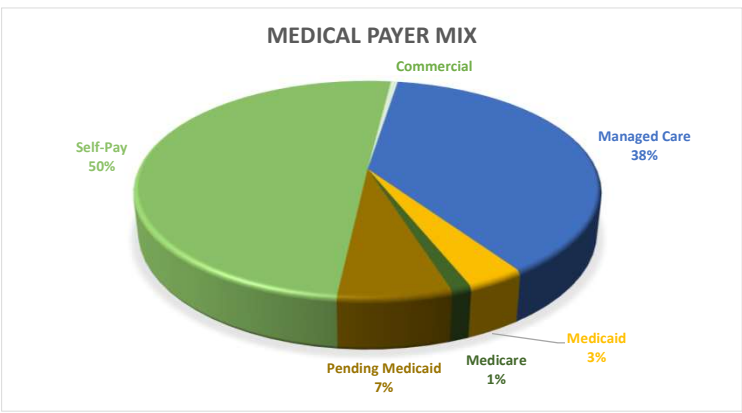
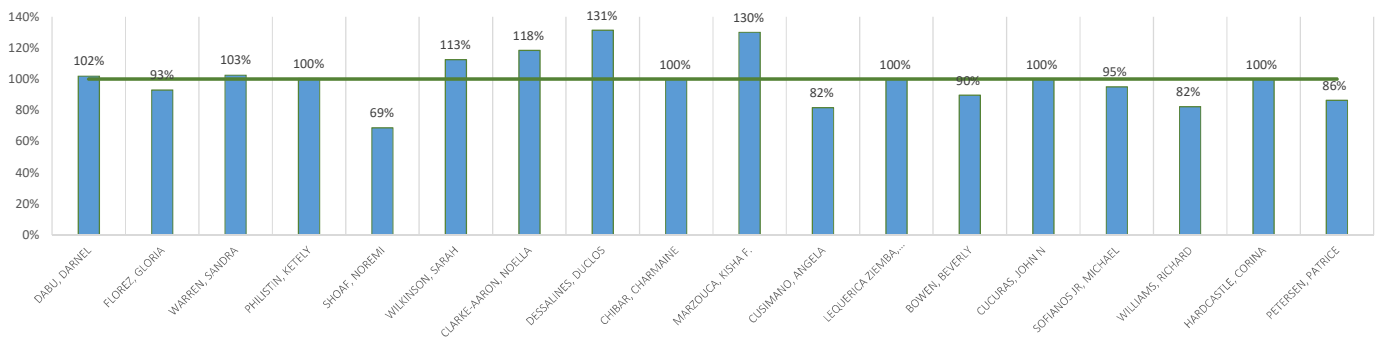
BEHAVIORAL HEALTH										
CUSIMANO, ANGELA	12	15.0	119	61	180	100	47	147	82%	9.8
LEQUERICA ZIEMBA, ADRIANA	6	0.2	1	0	1	1	0	1	100%	5.0
<b>BEHAVIORAL HEALTH TOTALS</b>		<b>15.2</b>	<b>120</b>	<b>61</b>	<b>181</b>	<b>101</b>	<b>47</b>	<b>148</b>	<b>82%</b>	

SUBSTANCE ABUSE DISORDER										
<b>SUBSTANCE ABUSE DISORDER TOTALS</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

DENTAL										
BOWEN, BEVERLY	16	8.5	136	0	136	122		122	90%	14.4
CUCURAS, JOHN N	2	2.0	3	0	3	3		3	100%	1.5
SOFIANOS JR, MICHAEL	16	15.0	240	0	240	228		228	95%	15.2
WILLIAMS, RICHARD	16	15.5	248	0	248	204		204	82%	13.2
<b>DENTAL TOTALS</b>		<b>41.0</b>	<b>627</b>	<b>0</b>	<b>627</b>	<b>557</b>	<b>0</b>	<b>557</b>	<b>89%</b>	

DENTAL HYGIENE										
HARDCASTLE, CORINA	8	14.5	116	0	116	116		116	100%	8.0
PETERSEN, PATRICE	16	12.0	192	0	192	166		166	86%	13.8
<b>DENTAL HYGIENE TOTALS</b>		<b>26.5</b>	<b>308</b>	<b>0</b>	<b>308</b>	<b>282</b>	<b>0</b>	<b>282</b>	<b>92%</b>	

GRAND TOTAL										
		<b>137.7</b>	<b>1,912</b>	<b>66</b>	<b>1,978</b>	<b>1,869</b>	<b>52</b>	<b>1,921</b>	<b>97%</b>	



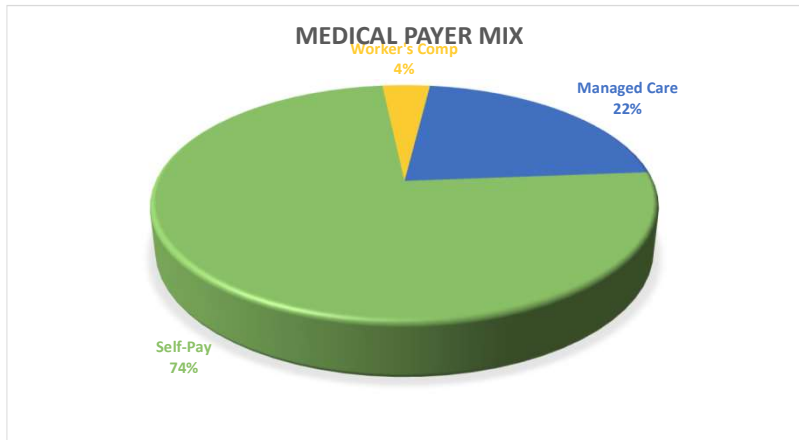
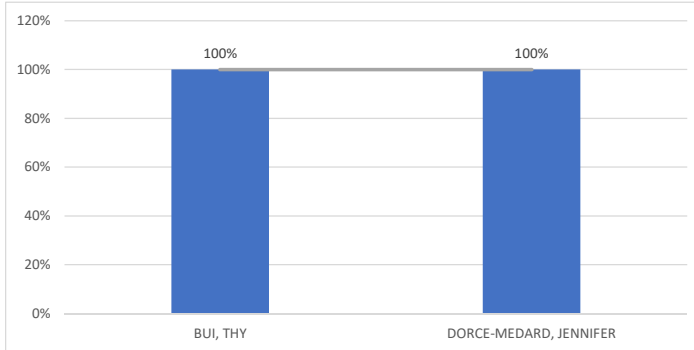
**MOBILE PRODUCTIVITY REPORT JULY 2022**

AS 07/31/2022 Based on Completed Appointments



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			In-Person	Telehealth	Total	In-Person	Telehealth	Total		
BUI, THY	6	1.0	6	0	6	6		6	100%	6.0
DORCE-MEDARD, JENNIFER	49	1.0	49	0	49	49		49	100%	49.0
<b>ADULT CARE TOTALS</b>		<b>2</b>	<b>55</b>	<b>0</b>	<b>55</b>	<b>55</b>	<b>0</b>	<b>55</b>	<b>100%</b>	

<b>GRAND TOTAL</b>		<b>2</b>	<b>55</b>	<b>0</b>	<b>55</b>	<b>55</b>	<b>0</b>	<b>55</b>	<b>100%</b>	
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**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

**1. Description: Operations Reports – July 2022**

**2. Summary:**

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

- Clinic Productivity, No Show trended over time and walk-in percentages.

**3. Substantive Analysis:**

In July, the clinics had 10,055 visits which were 1,226 less than the month prior and 1,940 more than July of 2021. 72% of patients were adults and 28% were pediatrics. The Lantana Clinic had the highest volume with 1,810 visits, followed by the Mangonia Clinic with 1,566.

Our payer mix for July reflects 57% uninsured, which is 10% lower than the previous month. 38% of patients were Managed Care, which is 10% higher than the previous month. 59% of patients were females, 50% of patients reported as White and 39% reported as Black. Of those patients, 39% reported as Hispanic. Our homeless population is consistent with the prior month at 19%. 70% of those patients reported Doubling Up. 48% of patients reported speaking English, 32% Spanish and 17% Creole. 89% of patients reported as straight. Agricultural workers reported as 5%.

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

In July, the number of patients who walked in and were seen the same day totaled 1,553, a decrease of 33% from the previous month. 16% of patients seen in medical were walk-ins and 13% of patients seen in dental were walk-ins. The Mangonia Clinic had the highest volume of walk-ins with 398, followed by the West Palm Beach clinic with 326 walk-ins. The West Palm Beach dental clinic consistently has the highest volume of walk-ins with 146, followed by the Delray Beach dental clinic with 76 walk-ins. The medical clinics' 2022 average walk-in' percentage decreased to 15% and the dental clinic's 2022 average walk-in percentage decreased to 16%.

The No-Show rate in July slightly increased to 19%. The Tele no-show rate remains consistent at 9% of the total no-shows in the past 12 months.

**DISTRICT CLINIC HOLDINGS, INC.**  
**BOARD OF DIRECTORS**  
**August 24, 2022**

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A  
 \_\_\_\_\_  
 Candice Abbott  
 VP & Chief Financial Officer

**5. Reviewed/Approved by Committee:**


N/A  
 \_\_\_\_\_  
 Committee Name


\_\_\_\_\_  
 Date Approved

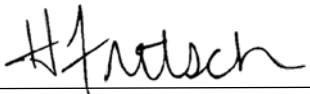
**6. Recommendation:**

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

Approved for Legal sufficiency:

  
 \_\_\_\_\_  
 Bernabe Icaza  
 VP & General Counsel

  
 \_\_\_\_\_  
 Marisol Miranda  
 Director of Clinic Operations

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

All

Click to display filter options

### TOTALS

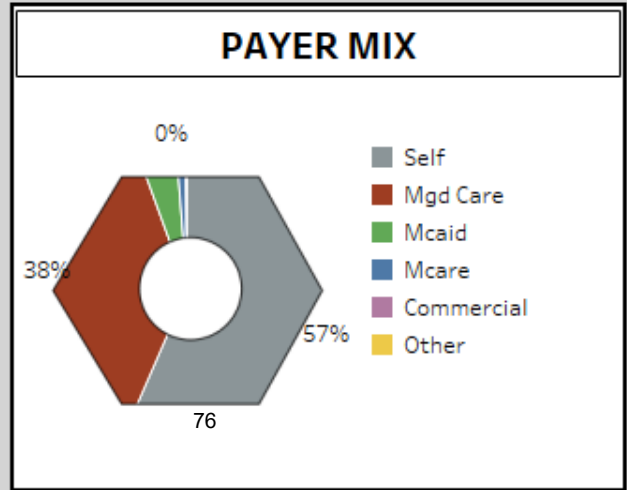
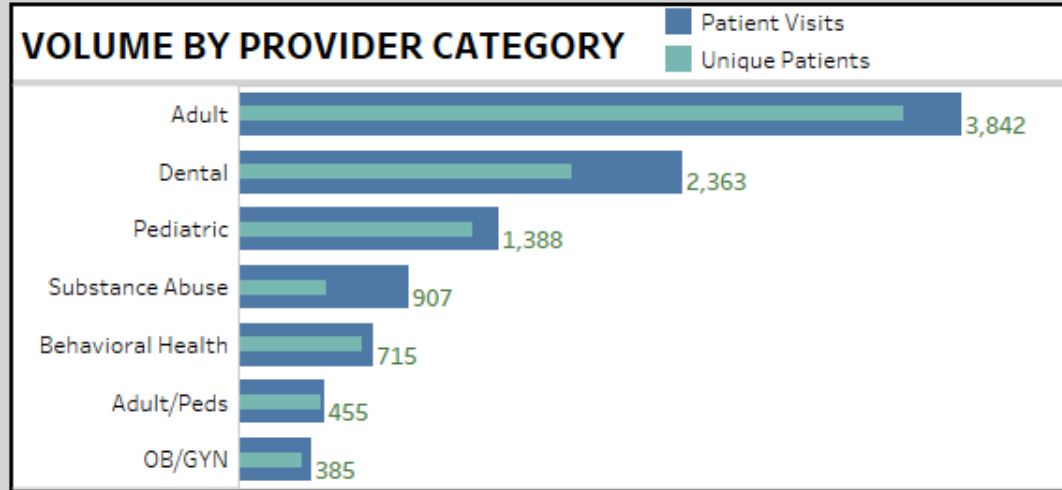
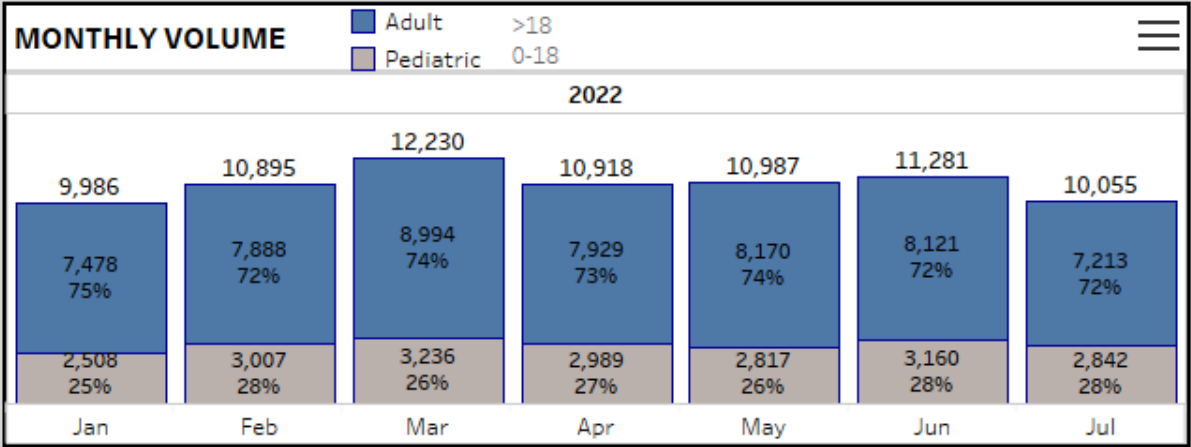
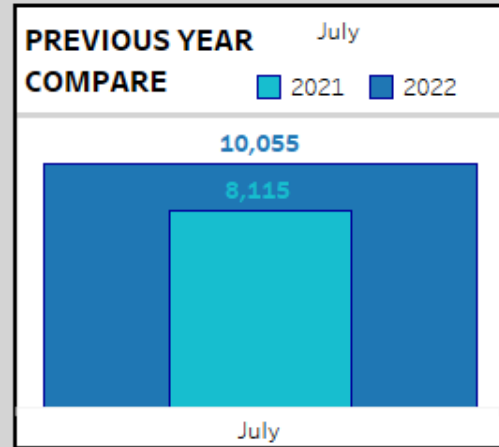
<b>Unique Patients</b>	<b>Patient Visits</b>
6,904	10,055

### VISIT TYPE

Office Visit	Telemedicine	Nurse Only
6,809	251	50
9,678	327	50

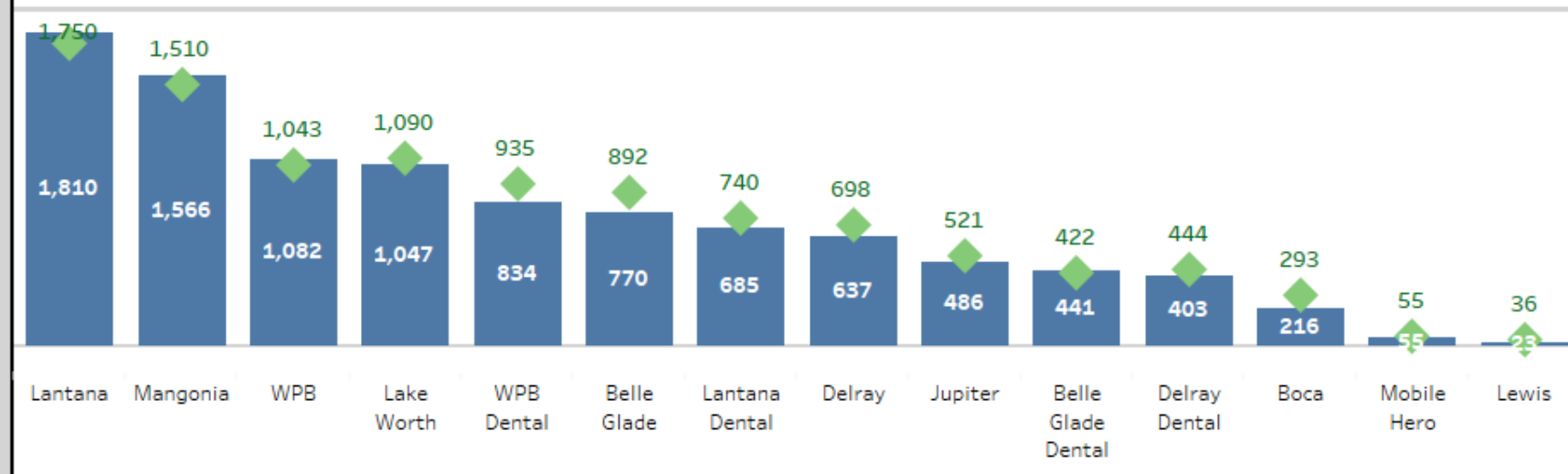
### VOLUME BY CLINIC

	Unique Patients	Patient Visits
Lantana Primary	1,570	1,679
West Palm Beach Primary	870	934
Mangonia BH	493	685
West Palm Beach Dental	672	834
Lantana Dental	513	522
Mangonia Primary	598	630
Belle Glade Primary	484	500
Lake Worth Primary	304	350
Delray Primary	464	478
Jupiter Primary	291	403
Belle Glade Dental	212	216
Delray Dental	469	918
Lake Worth Women's	323	441
Boca Primary	21	23
Lake Worth BH	55	55
West Palm Beach BH	164	175
Delray BH	423	648
Lantana BH	142	148
Belle Glade BH	125	131
Mobile Hero	122	137
Belle Glade Women's	100	105
Lewis Primary	32	35
Jupiter BH	8	8





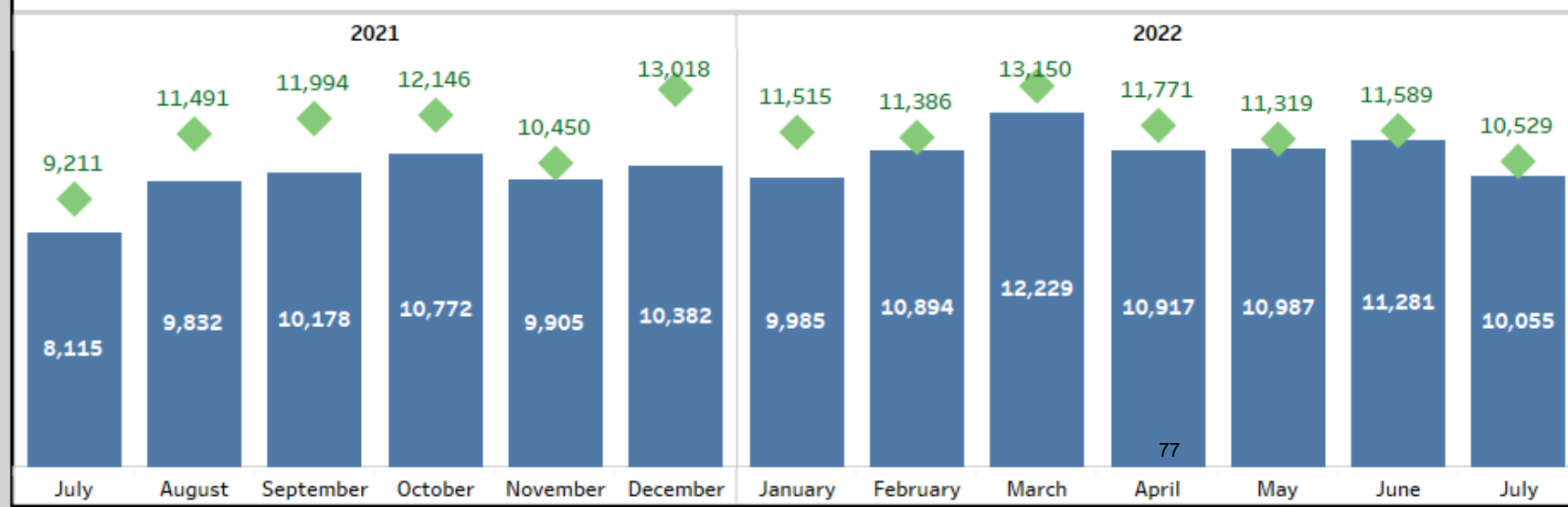
## VOLUME BY CLINIC ◆ Target



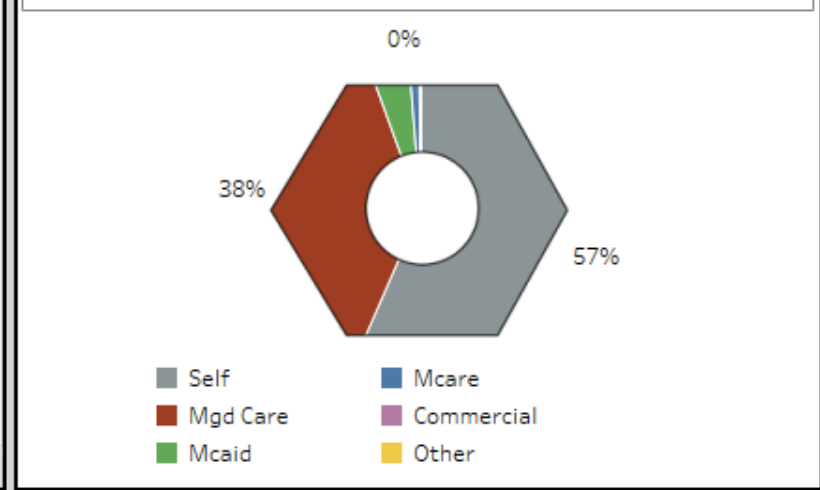
## VISIT TYPE

	In Person	Tele Health	Total
Adult	3,815	27	<b>3,842</b>
Adult/Peds	455		<b>455</b>
Behavioral Health	582	133	<b>715</b>
Dental	2,363		<b>2,363</b>
OB/GYN	385		<b>385</b>
Pediatric	1,388		<b>1,388</b>
Substance Abuse	740	167	<b>907</b>
<b>Total</b>	<b>9,728</b>	<b>327</b>	<b>10,055</b>

## MONTHLY TREND



## PAYOR MIX



**Unique Patients**



38,043

**Patient Visits**



135,541



59%



41%

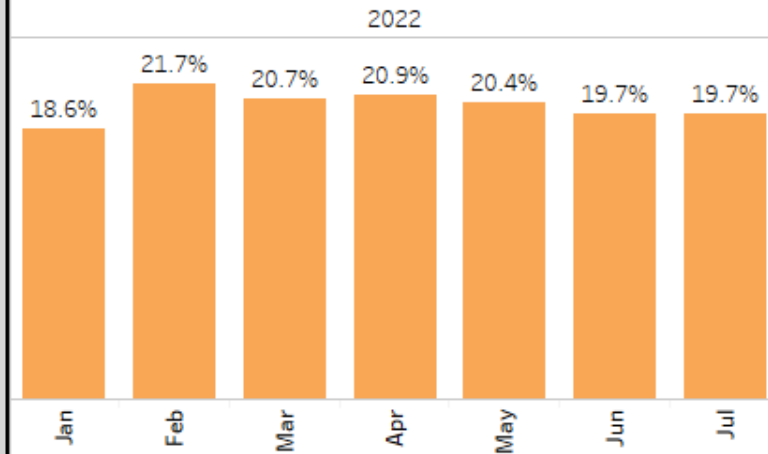
**Race**



**Ethnicity**



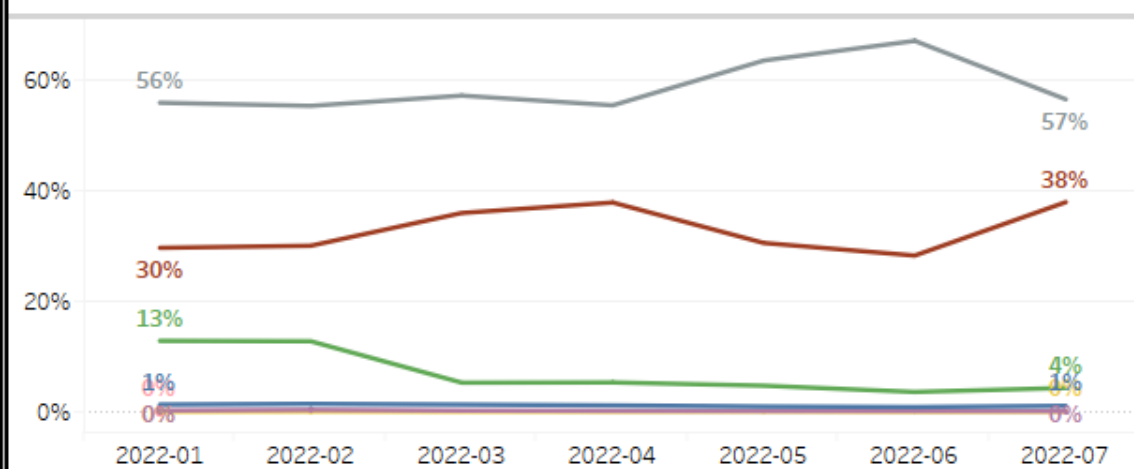
## HOMELESS OVER TIME



## HOMELESS TYPE OVER TIME

	2022						
	Jan	Feb	Mar	Apr	May	Jun	Jul
Doubling Up	71%	72%	73%	72%	70%	71%	70%
Homeless Shelter	4%	6%	5%	6%	6%	6%	6%
Other	2%	2%	2%	2%	3%	3%	2%
Permanent Supportive...	10%	9%	7%	8%	7%	7%	7%
Street	7%	7%	7%	7%	7%	8%	9%
Transitional	2%	2%	3%	2%	4%	3%	3%
Unknown	3%	3%	3%	3%	3%	3%	2%

## Payer Mix Over Time



**Patients Visits**

**VISIT TYPE**

Office Visit Telemedici.. Nurse Only Immunizat..

37,879

2,050

534

5

129,262

5,706

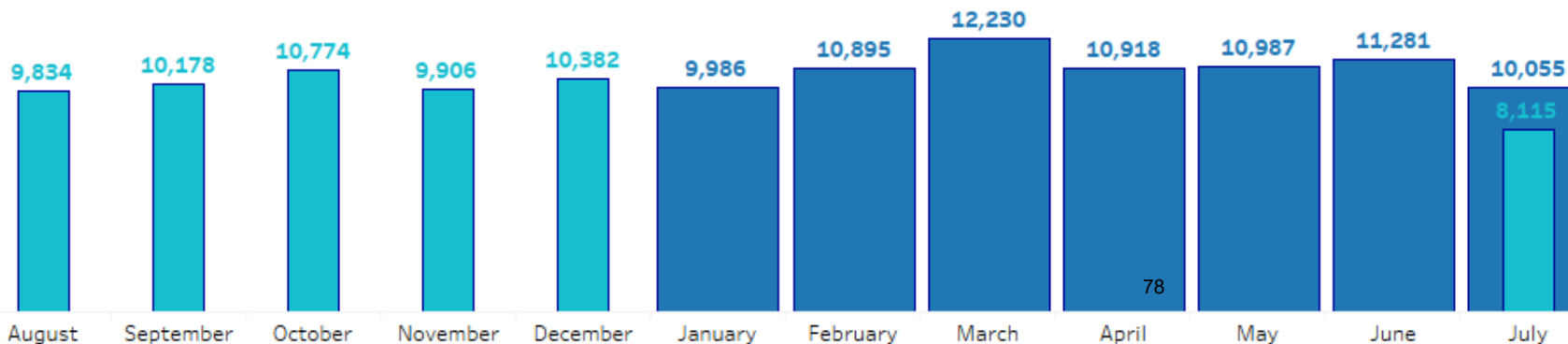
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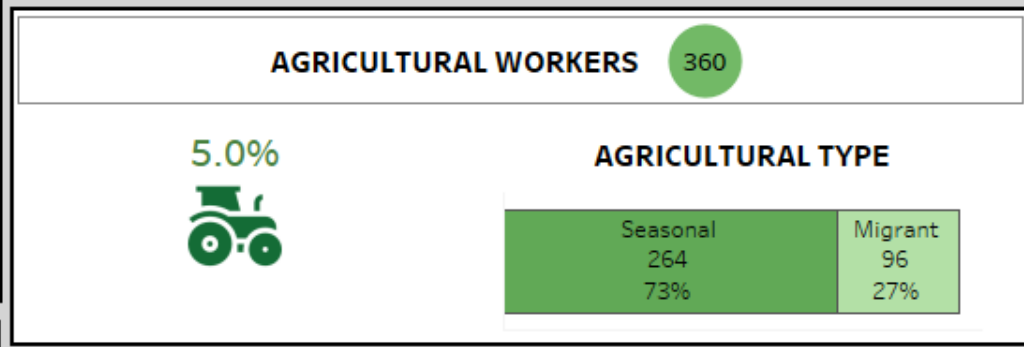
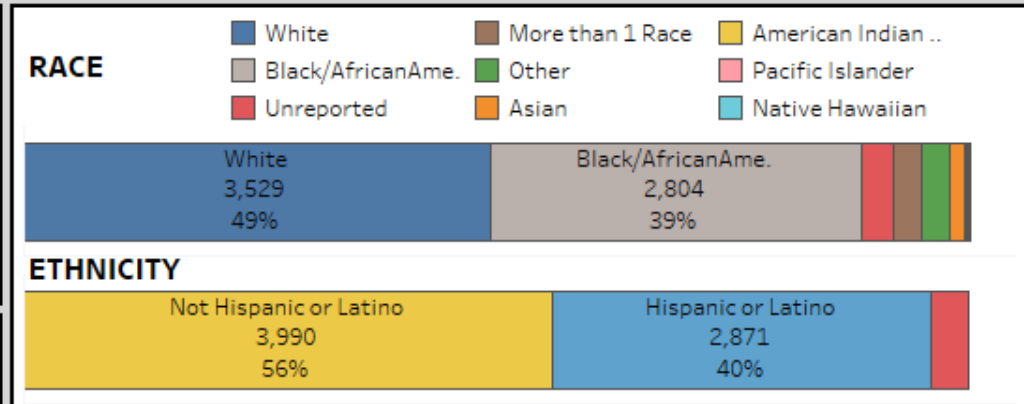
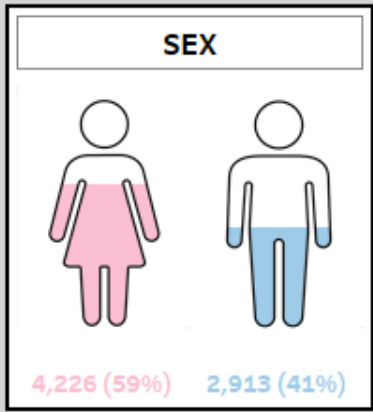
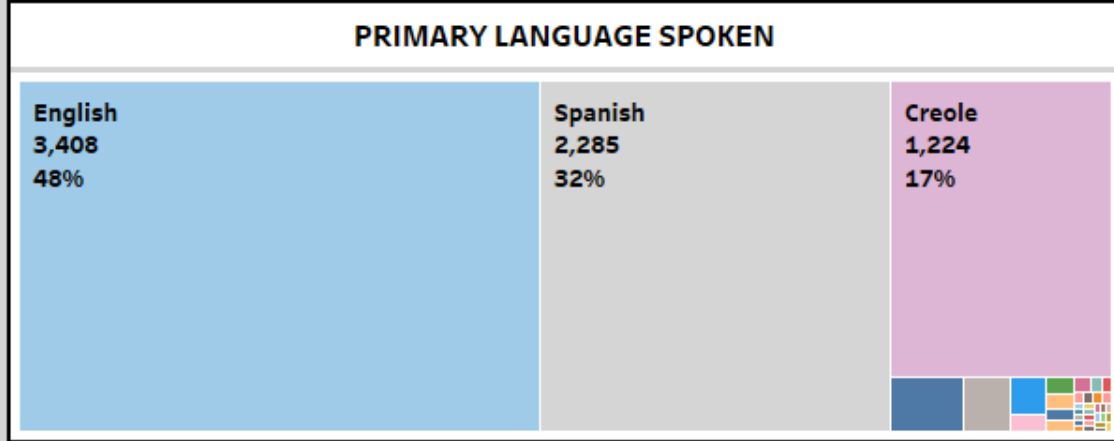
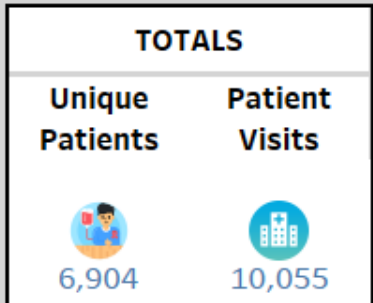
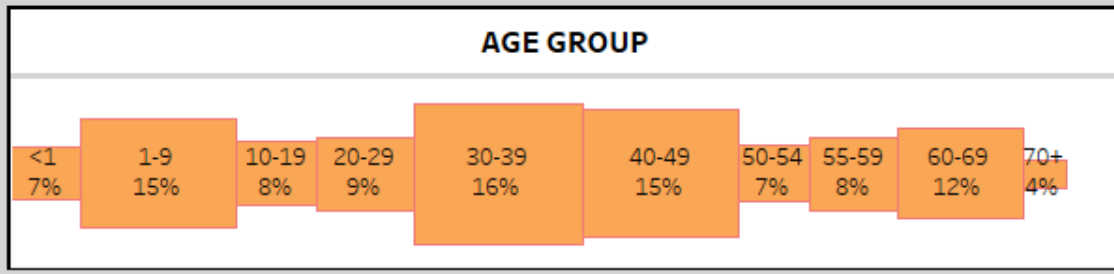
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## MONTHLY VOLUME

2021 2022

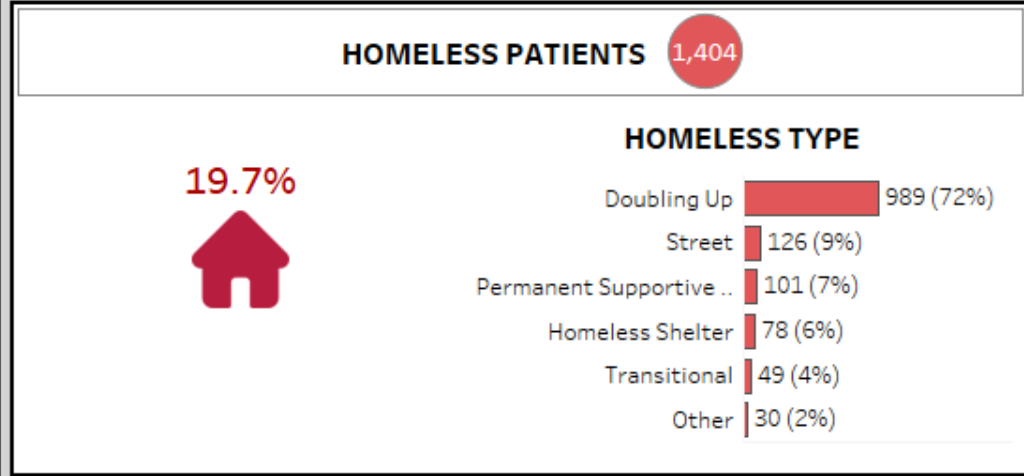




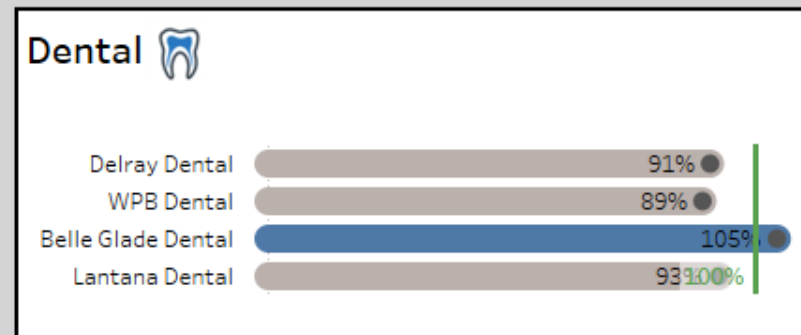
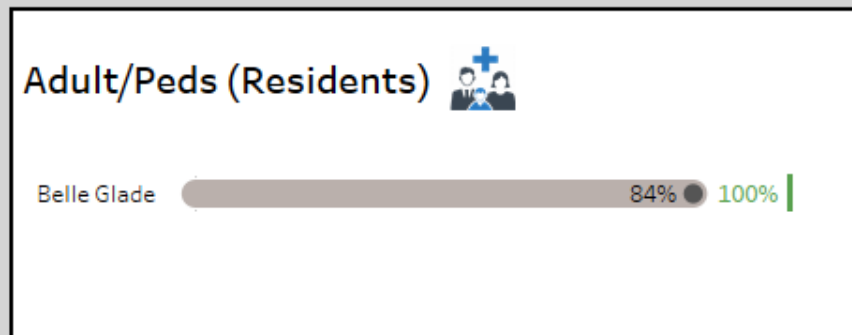
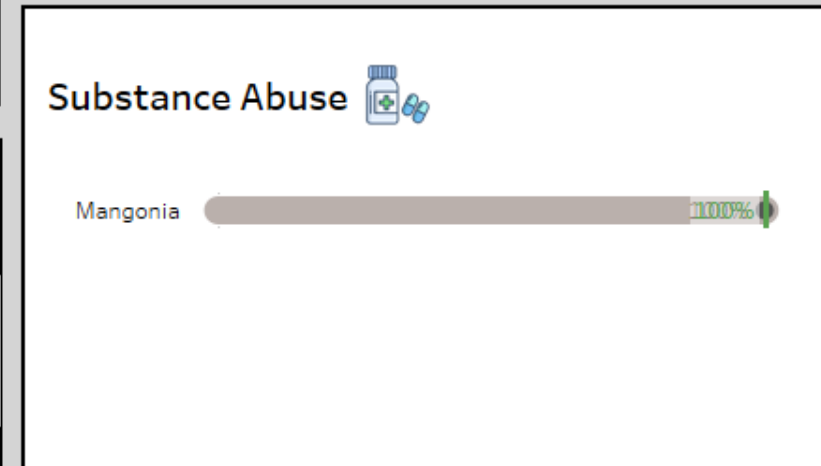
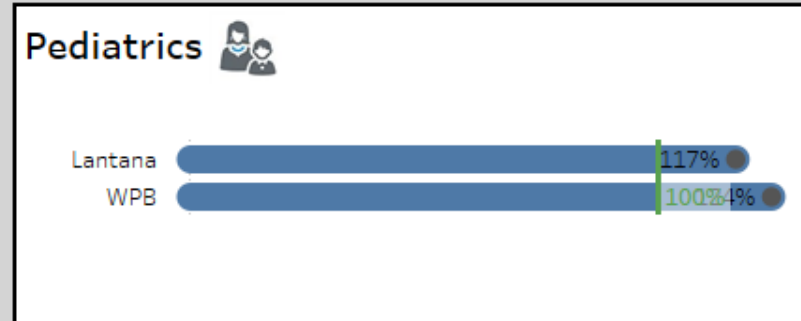
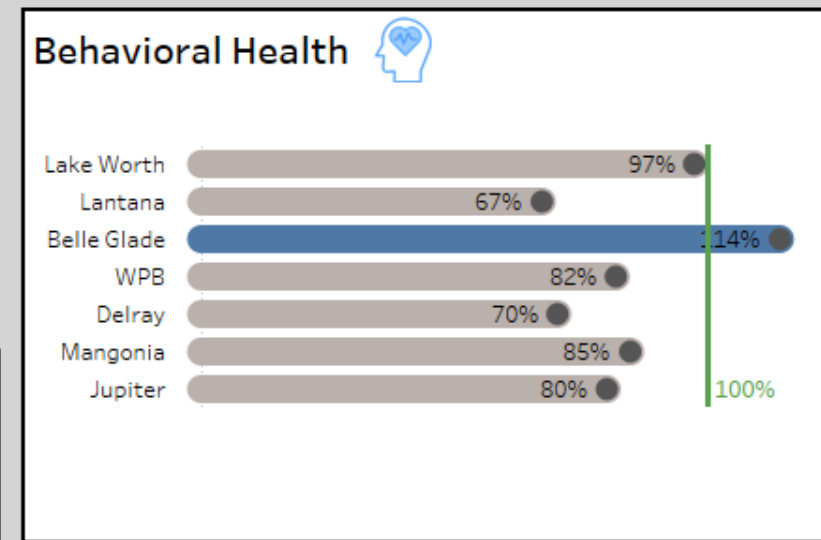
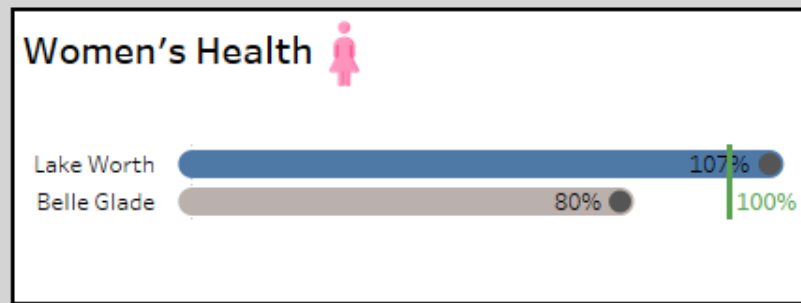
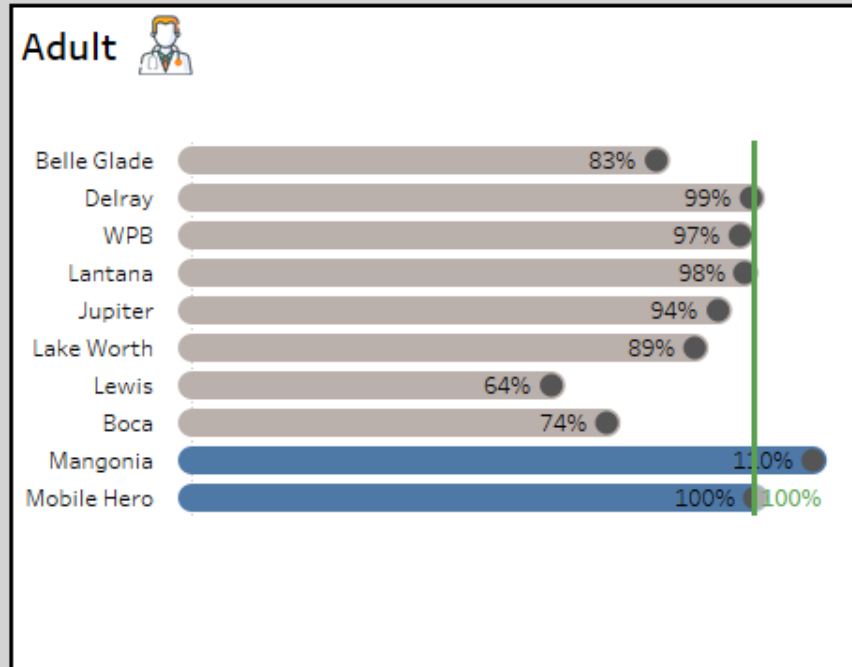
### GENDER IDENTITY AND SEXUAL ORIENTATION

Gender Identity	Unique Patients	%
Female	4,219	59%
Male	2,910	41%
Transgender Female/ Assigned Male at Birth	2	0%
Transgender Male / Female-to-Male	1	0%
Non-binary	4	0%
Choose not to disclose	4	0%
Unknown	3	0%

Sexual Orientation	Unique Patients	%
Straight (not lesbian or gay)	6,389	89.44%
Choose not to disclose	383	5.36%
Don't know	311	4.35%
Bisexual	25	0.35%
Something else	18	0.25%
Lesbian	9	0.13%
Gay	8	0.11%

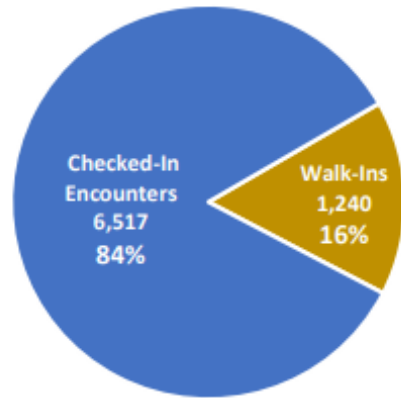


■ Target Met ■ Target Not Met

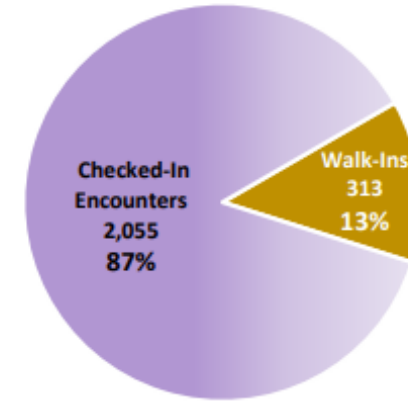


# Number and percentage of Walk-Ins seen in July 2022 at C. L. Brumback Primary Care Clinics

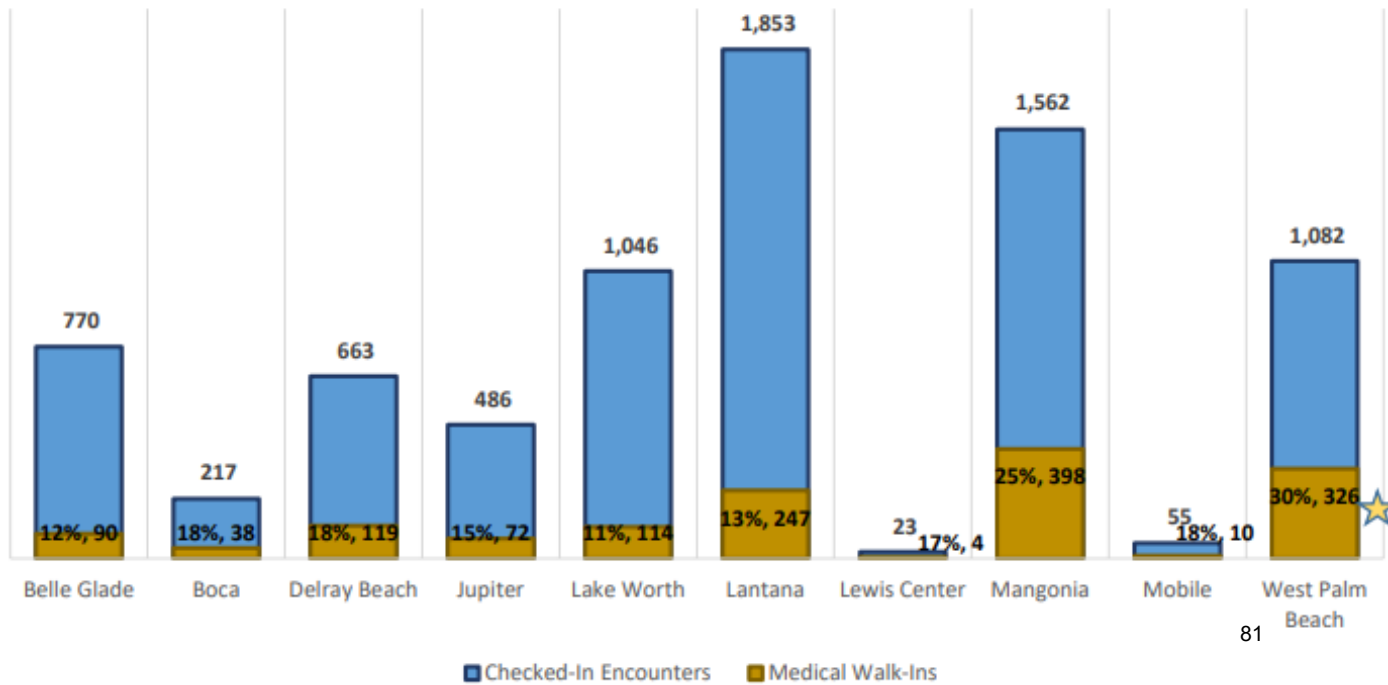
Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA  
July 2022



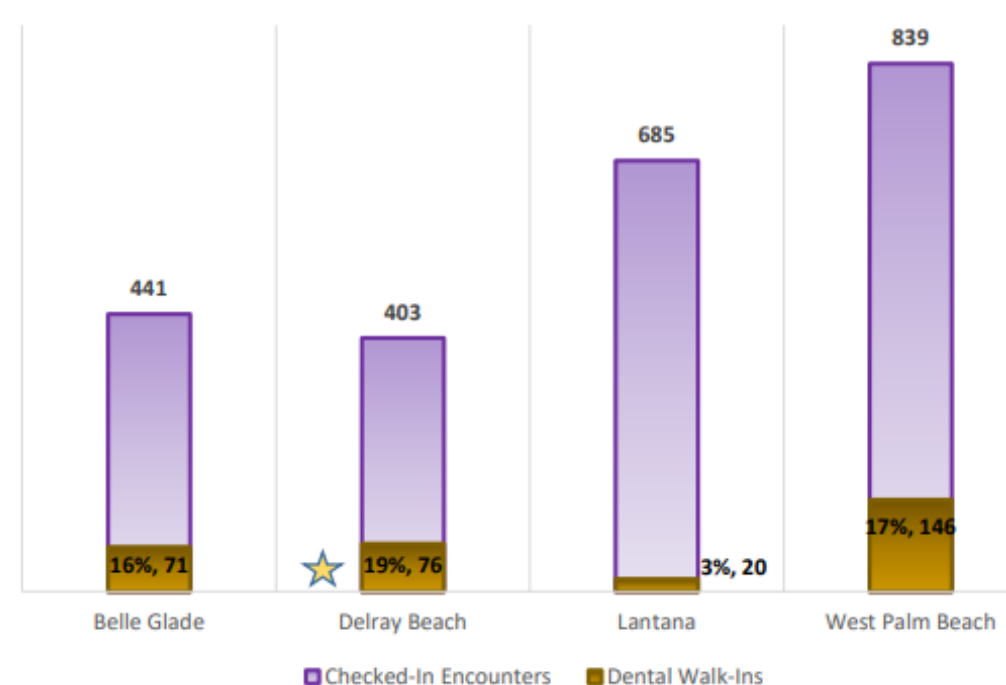
Walk-ins Dental  
July 2022



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

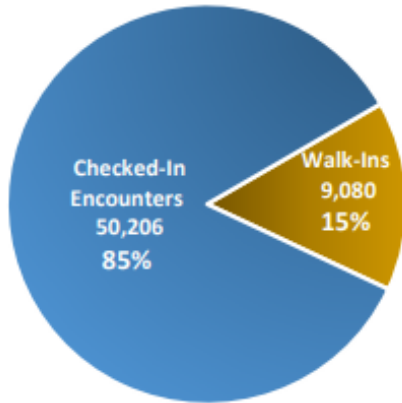


Walk-ins Dental by Clinic  
July 2022

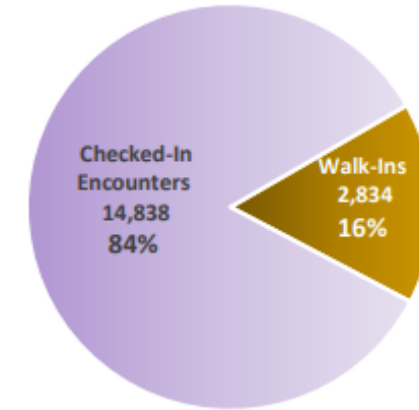


# Number and percentage of Walk-Ins seen during YTD 2022 at C. L. Brumback Primary Care Clinics

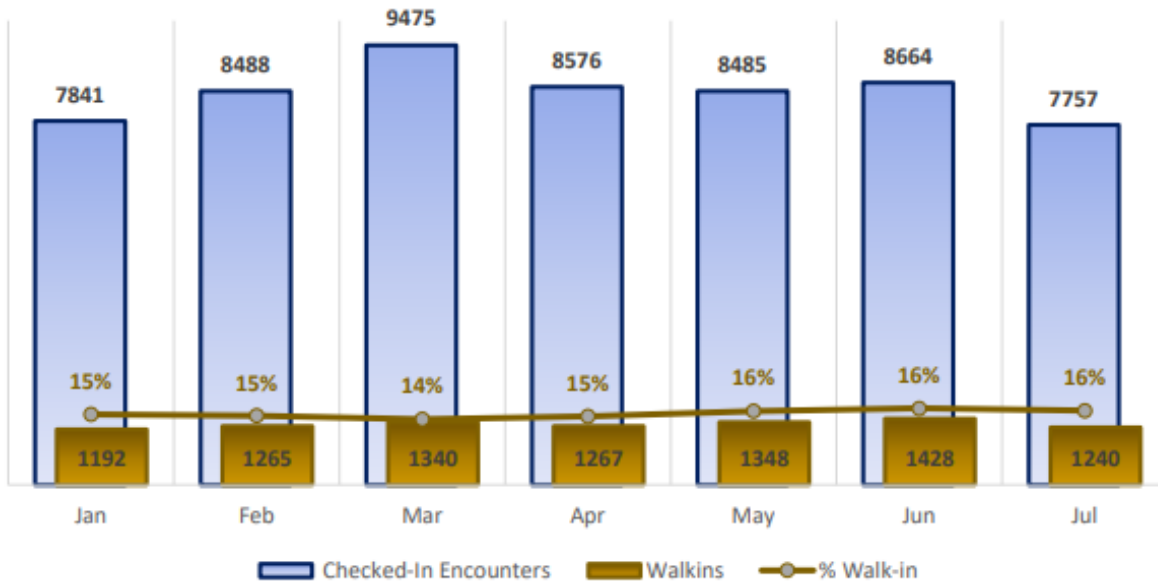
Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA  
2022



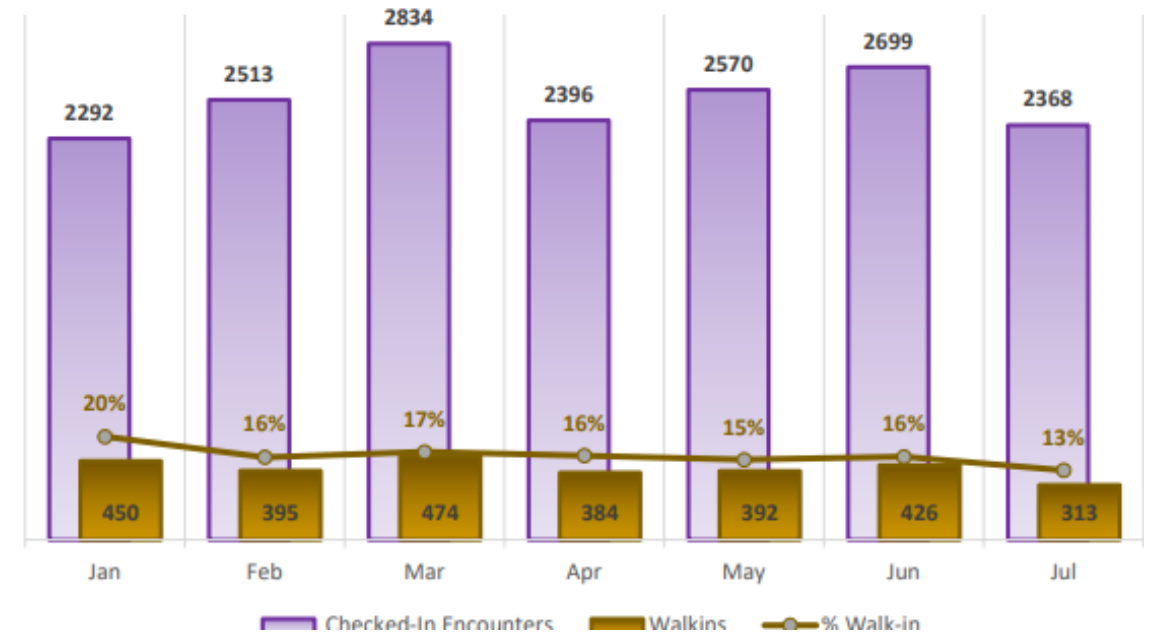
Walk-ins Dental  
2022



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



Walk-ins Dental  
2022

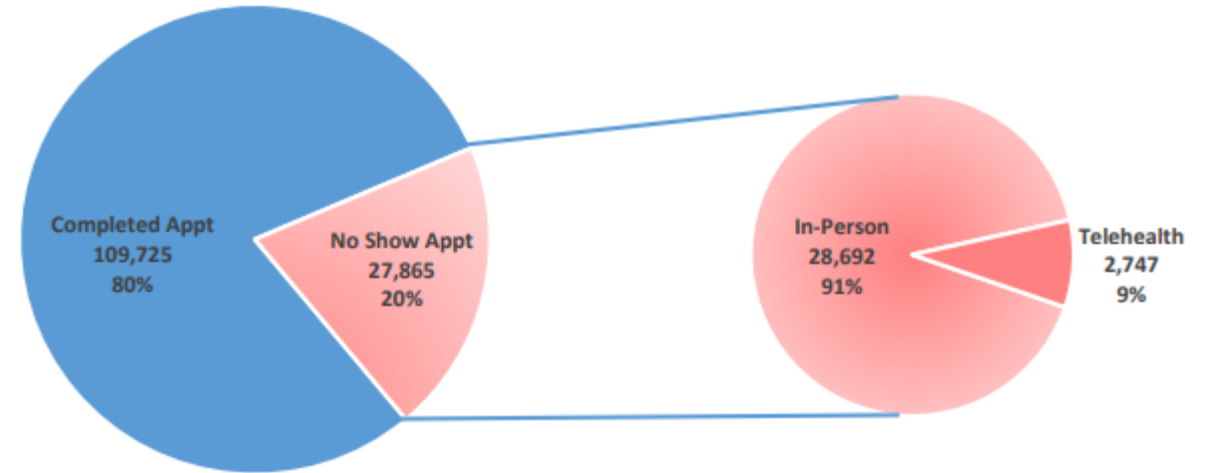
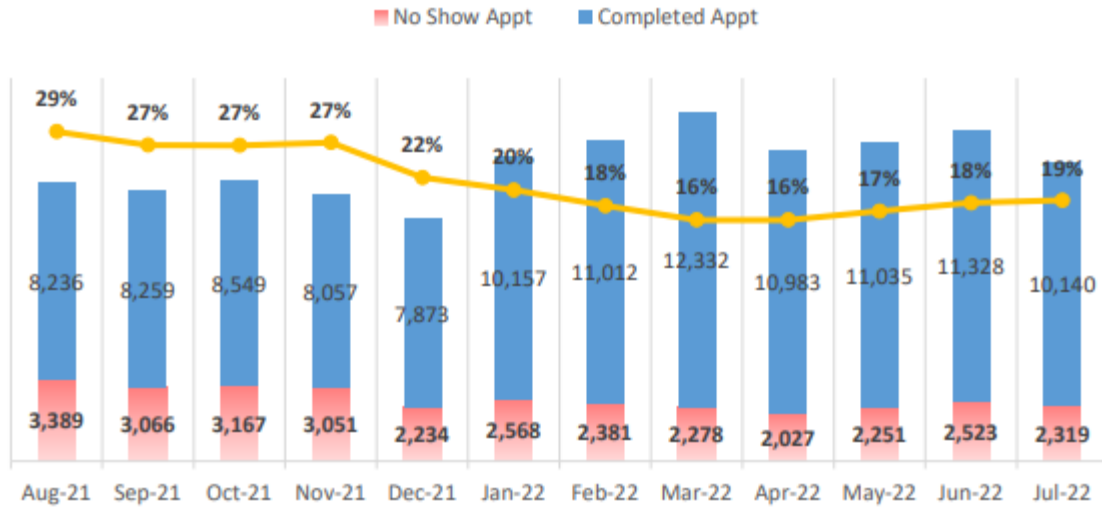


# No Show Appointment Analysis

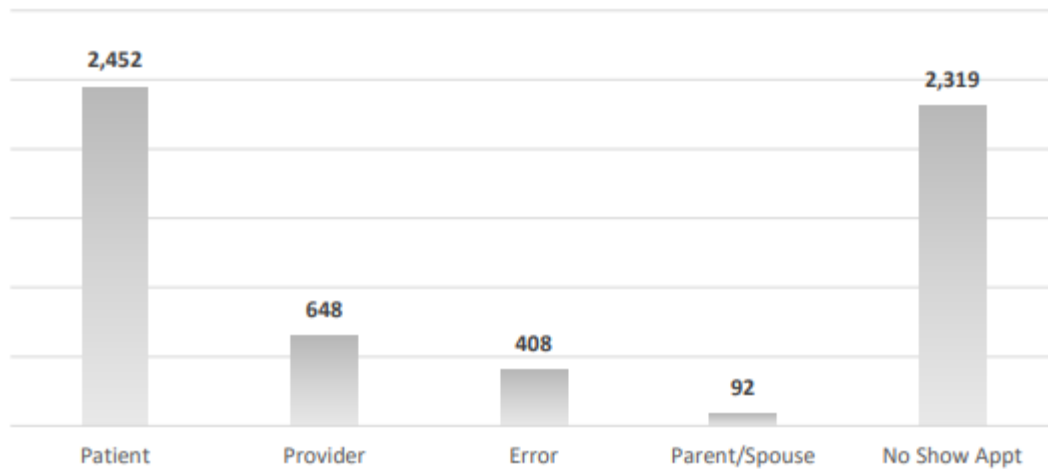
## Aug 2021 – Jul 2022

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

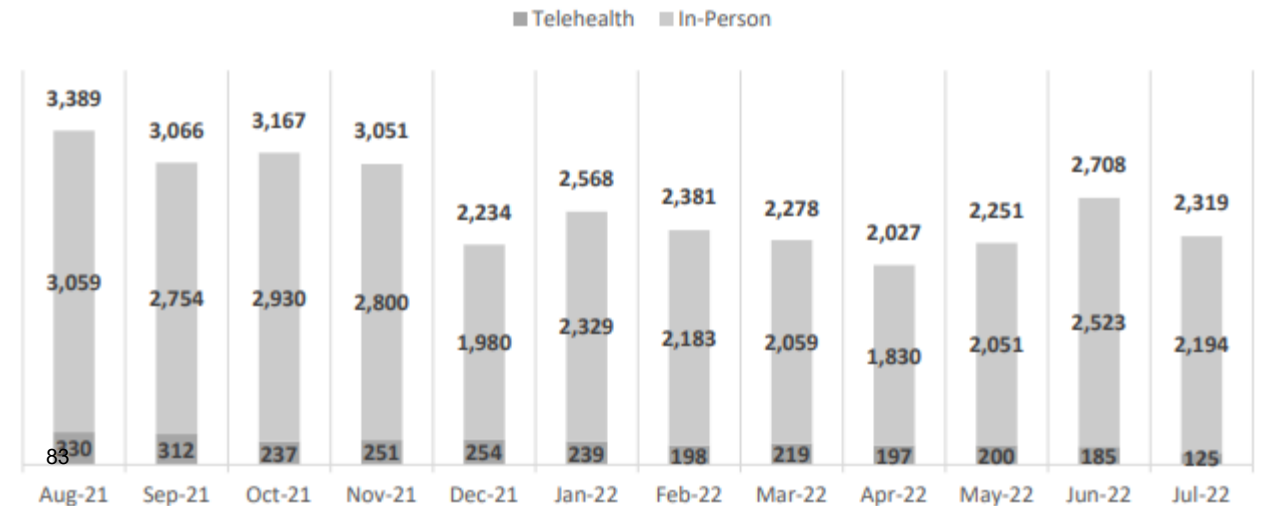
### No Shows vs Checked in appointments



### Top 5 Cancellation Reasons in July 2022



### Telehealth vs In-Person No Shows





C. L. Brumback

**Primary Care Clinics**

Health Care District Palm Beach County