



**BOARD OF COMMISSIONERS AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING AGENDA  
September 16, 2021 at 4:00PM  
1515 N Flagler Drive, Suite101  
West Palm Beach, FL 33401**

**Remote Participation Link:**

<https://zoom.us/j/5507895592?pwd=REZ4TWtYUXowQWNpWTBaVXRzZ1dDQT09>

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

**1. Call to Order – Les Daniels, Chair**

- A. Roll Call
- B. Invocation
- C. Pledge of Allegiance
- D. Affirmation of Mission: The mission of the Health Care District of Palm Beach County is to be the health care safety net for Palm Beach County. Our vision is meeting changes in health care to keep our community healthy.

**2. Agenda Approval**

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

**3. Awards, Introductions and Presentations**

- A. Budget FY 2022– Version 2 (Candice Abbott)
- B. OB Service Line at Lakeside Medical Center (Karen Harris)
- C. Epic Journey Go-Live Update (Patty Lavelly)

**4. Disclosure of Voting Conflict**

**5. Public Comment**

**6. Meeting Minutes**

A. **Staff Recommends a MOTION TO APPROVE:**

Joint Board and Finance & Audit Committee Meeting Minutes of June 29, 2021  
[Pages 1-9]

**7. Committee Reports**

7.1 Finance and Audit Committee – (No Report)

7.2 Good Health Foundation Committee – (No Report)

7.3 Quality, Patient Safety and Compliance Committee – (Commissioner Alonso)

7.4 Lakeside Health Advisory Board – (Commissioner Alonso)

7.5 Primary Care Clinics Board – (Commissioner Jackson-Moore)

**8. Consent Agenda – Motion to Approve Consent Agenda Items**

**HEALTH CARE DISTRICT**

A. **ADMINISTRATION**

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

September 2021 Internet Posting of District Public Meeting  
<https://www.hcdpbc.org/EventViewTrainingDetails.aspx?Bck=Y&EventID=423&m=0|0&DisplayType=C>

8A-2 **RECEIVE AND FILE:**

Health Care District Board Attendance [Page 10]

8A-3 **RECEIVE AND FILE:**

Health Care District Financial Statements July 2021 (Candice Abbott)  
[Pages 11-60]

8A-4 **RECEIVE AND FILE:**

Good Health Foundation Tax Form 990 (Candice Abbott) [Pages 61-102]

8A-5 **Staff Recommends a MOTION TO APPROVE:**

Medical Staff Appointment(s) for Lakeside Medical Center (Belma Andric, MD)  
[Pages 103-105]

8A-6 **Staff Recommends a MOTION TO APPROVE:**

Re-credentialing and Privileging of Healey Center Practitioner  
(Belma Andric, MD) [Pages 106-107]

**9. Regular Agenda**

A. **ADMINISTRATION**

- 9A-1 **Staff Recommends a MOTION TO APPROVE:**  
Low Income Pool Participation for Palm Beach County Hospitals and Federally Qualified Health Centers (Candice Abbott) [Pages 108-110]
- 9A-2 **Staff Recommends a MOTION TO APPROVE:**  
Local Provider Participation Fund for the Directed Payment Program (Candice Abbott) [Pages 111-112]
- 9A-3 **Staff Recommends a MOTION TO APPROVE:**  
Medicaid Directed Payment Program – Lakeside Medical Center (Candice Abbott) [Pages 113-114]
- 8A-4 **Staff Recommends a MOTION TO APPROVE:**  
Indirect Medical Education Program (Candice Abbott) [Pages 115-116]
- 9A-5 **RECEIVE AND FILE:**  
Internal Audit Update (Betsy Bittar) [Pages 117-124]
- 9A-6 **Staff Recommends a MOTION TO APPROVE:**  
Lease Agreement – Delray Primary Care Clinic (Belma Andric, MD) [Pages 125-126]
- 9A-7 **Staff Recommends a MOTION TO APPROVE:**  
Lease Agreement – West Boca Primary Care Clinic (Belma Andric, MD) [Pages 127-128]
- 9A-8 **Staff Recommends a MOTION TO APPROVE:**  
Lease Agreement – Mangonia Park Primary Care Clinic (Belma Andric, MD) [Pages 129-130]

**10. CEO Comments**

**11. Finance & Audit Committee Member Comments**

**12. HCD Board Member Comments**

**13. Establishment of Upcoming Board Meetings**

**September 28, 2021**

- 4:00PM, Health Care District Board Annual Meeting (Officer Elections)
- 5:15PM, Truth In Millage (TRIM) Meeting

**December 15, 2021**

- 2:00PM, Health Care District Board Meeting

**14. Motion to Adjourn**



**HEALTH CARE DISTRICT OF  
PALM BEACH COUNTY  
BOARD OF COMMISSIONERS AND FINANCE & AUDIT COMMITTEE  
SUMMARY MEETING MINUTES  
June 29, 2021  
1515 N Flagler Drive, Suite101  
West Palm Beach, FL 33401**

**Remote Participation Link:**

**<https://zoom.us/j/5507895592?pwd=REZ4TWtYUXowQWNpWTBaVXRzZ1dDQT09>**

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

**1. Call to Order**

Les Daniels called the meeting to order.

**A. Roll Call**

Health Care District Board members present included: Les Daniels, Chair; Nancy Banner, Vice Chair; Dr. Alonso; Cory Neering; and Tammy Jackson-Moore. Sean O'Bannon, Secretary and Ed Sabin were absent.

Finance and Audit Committee members present: Michael Burke; Richard Sartory and Mark Marciano. Joseph Gibbons and Sophia Eccleston were absent.

Staff present included: Darcy Davis, Chief Executive Officer; Dr. Belma Andric, Chief Medical Officer; Christy Goddeau, Interim General Counsel; Karen Harris, VP of Field Operations; Steven Hurwitz, Chief Administrative Officer; Candice Abbott, Chief Clinical Integration Officer; Patty Lavelly, Chief Information & Digital Officer; Heather Bokor, Chief Compliance & Privacy Officer.

Recording/Transcribing Secretary: Heidi Bromley

**B. Invocation**

Ms. Davis led the invocation.

**C. Pledge of Allegiance**

The Pledge of Allegiance was recited.

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- D. Affirmation of Mission: The mission of the Health Care District of Palm Beach County is to be the health care safety net for Palm Beach County. Our vision is meeting changes in health care to keep our community healthy.

## 2. Agenda Approval

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

**CONCLUSION/ACTION: Commissioner Banner made a motion to approve the agenda. The motion was duly seconded by Commissioner Alonso. There being no opposition, the motion passed unanimously.**

## 3. Awards, Introductions and Presentations

- A. Introduction of Heather Bokor, VP & Chief Compliance and Privacy Officer

*Ms. Davis introduced Ms. Bokor to the Board and Finance & Audit Committee as the new VP & Chief Compliance and Privacy Officer.*

- B. Introduction of Bernabe Icaza, VP & General Counsel

*Ms. Davis introduced Mr. Icaza to the Board and Finance & Audit Committee as the new incoming VP & General Counsel.*

- C. Introduction of Candice Abbott VP & Chief Financial Officer

*Ms. Davis introduced Candice Abbott to the Board and Finance & Audit Committee as the VP & Chief Financial Officer.*

- D. Introduction of Jessica Cafarelli, AVP & Controller

*Ms. Abbott introduced Jessica Cafarelli to the Board and Finance & Audit Committee as the new AVP & Controller.*

- E. 2021 Legislative Session Summary

*Mat Forrest with Ballard Partners provided the Board and Finance & Audit Committee with a 2021 Legislative Update.*

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**3. Awards, Introductions and Presentations (Continued)**

F. Economic Update and Investment Portfolio Strategy Review

*John Grady with Public Trust Advisors provided the Board and Finance & Audit Committee with an Economic Update and Investment Portfolio Strategy.*

G. Employee Engagement Results

*Ms. Weymer provided the Board and Finance & Audit Committee with the results of the annual HCD Employee Engagement.*

H. EPIC Update

*Ms. Lavelly provided the Board and Finance & Audit Committee with an update on EPIC.*

I. Budget Version 1

*Ms. Davis provided the Board and Finance & Audit Committee with version 1 of the HCD Budget.*

**4. Disclosure of Voting Conflict**

**5. Public Comment**

*Public comment was made by Don Chester, Assistant Administrator of St. Mary's Medical Center and The Palm Beach Children's Hospital.*

**6. Meeting Minutes**

A. **Staff Recommends a MOTION TO APPROVE:**  
Board Meeting Minutes of March 11, 2021

**CONCLUSION/ACTION:** Commissioner Alonso made a motion to approve the Meeting Minutes of March 11, 2021 as presented. The motion was duly seconded by Commissioner Jackson-Moore. There being no objection, the motion passed unanimously.

**7. FINANCE AND AUDIT COMMITTEE**

A. **Staff Recommends a MOTION TO APPROVE:**  
Finance & Audit Committee Meeting Minutes of March 10, 2021

**CONCLUSION/ACTION: Commissioner Banner made a motion to approve the Finance & Audit Committee Meeting Minutes of March 10, 2021 as presented. The motion was duly seconded by Mr. Burke. There being no objection, the motion passed unanimously.**

## **8. Committee Reports**

8.1 Finance and Audit Committee – (No Report)

8.2 Good Health Foundation Committee – (No Report)

8.3 Quality, Patient Safety and Compliance Committee – (Commissioner Alonso)

*Commissioner Alonso stated they reviewed several dashboards and a lot of information was gathered today which was much appreciated.*

8.4 Lakeside Health Advisory Board – (Commissioner Alonso)

*Dr. Alonso stated that presentations were done by Tom Cleare who introduced - Juliza Kramer, HCD's new Marketing and Branding Manager. A presentation was done by Juliza Kramer about Lakeside Medical Center's utilization of Facebook. Patty Lavelly provided an EPIC update. Janet Moreland gave a hospital update on the COPCN and stated that the Lab had their Joint Commission Survey and received five (5) citations. All citations have been cleared. Dr. Jennifer Dorce-Medard gave an update on the Center's Residency Program.*

8.5 Primary Care Clinics Board – (Commissioner Jackson-Moore)

*Commissioner Jackson-Moore stated that Dental services returned to normal operations as of April 5<sup>th</sup>. The only exception is limited dental hygiene as the last of the hygienists return to the clinics from the mass vaccination sites. Operations at the mass vaccine sites have ended. We have now concentrated our efforts on using the mobile units to reach underserved and needy communities for targeted vaccination efforts. We are relocating the Boca, Delray, and Mangonia clinics and we are opening new clinics in Atlantis and eventually in West Palm (RISE project). The Atlantis clinic, which will be located on Congress Avenue near JFK hospital, will become the flagship site for our patient population. The grant application for the Fiscal Year (FY) 2021 American Rescue Plan – Health Center Construction and Capital Improvements (ARP-Capital) grant has been submitted. We have successfully submitted our Federal Tort Claims Act (FTCA) medical malpractice coverage deeming application to HRSA.*



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**9. Consent Agenda – Motion to Approve Consent Agenda Items**

**CONCLUSION/ACTION: Commissioner Banner made a motion to approve the Consent Agenda. The motion was duly seconded by Commissioner Alonso. There being no objection, the motion passed unanimously.**

**HEALTH CARE DISTRICT**

**A. ADMINISTRATION**

**9A-1 RECEIVE AND FILE:**

June 2021 Internet Posting of District Public Meeting

<https://www.hcdpbc.org/EventViewTrainingDetails.aspx?Bck=Y&EventID=344&m=0|0&DisplayType=C>

**9A-2 RECEIVE AND FILE:**

Health Care District Board Attendance

**9A-3 RECEIVE AND FILE:**

Health Care District Financial Statements May 2021

**9A-4 Staff Recommends a MOTION TO APPROVE:**

Medical Staff Appointment(s) for Lakeside Medical Center

**9A-5 Staff Recommends a MOTION TO APPROVE:**

Re-credentialing and Privileging of Healey Center Practitioner

**9A-6 Staff Recommends a MOTION TO APPROVE:**

Proclamation Recognizing the Trauma System's 30<sup>th</sup> Year

**9A-7 Staff Recommends a MOTION TO APPROVE:**

Proclamation Recognizing National Nurses Week

**9A-8 Staff Recommends a MOTION TO APPROVE:**

Lakeside Medical Center Confidential Public Records Request Quarterly Report

**9A-9 RECEIVE AND FILE:**

Sponsored Programs Calendar Year 2020 Dashboard

**9A-10 Staff Recommends a MOTION TO APPROVE:**

Internal Audit Charter

**9A-11 Staff Recommends a MOTION TO APPROVE:**

Revisions to Purchasing Policy

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**9. Consent Agenda (Continued)**

**9A-12 Staff Recommends a MOTION TO APPROVE:**

RFQ for Pre-Qualified Architectural and Engineering Firms

**10. Regular Agenda**

**A. ADMINISTRATION**

**10A-1 Staff Recommends a MOTION TO APPROVE:**

Tentative Millage Rate

Ms. Davis stated that the District tax rate in 2021 was 0.7261 mills. Staff is recommending the 2022 proposed tentative millage rate be set at 0.7261, which is 3.6% over the rolled-back rate of 0.7009 and equal to the 2021 tax rate. The 2021 estimate of taxable values from the County showed an increase of 5.0% over 2020. The increase in taxable values in conjunction with keeping the millage rate flat results in an approximately \$7.1 million increase in ad valorem taxes relative to 2021. The proposed budget anticipates spending approximately \$21.0 million in reserves, including \$6.3 million in assigned reserves, which were designated for the replacement of the two Trauma Hawk helicopters.

**CONCLUSION/ACTION: Commissioner Tammy Jackson-Moore made a motion to approve the Tentative Millage Rate recommended by Staff. The motion was duly seconded by Commissioner Alonso. There being no objection, the motion passed unanimously.**

**10A-2 Staff Recommends a MOTION TO APPROVE:**

OB Service Line at Lakeside Medical Center

Ms. Harris stated that this agenda item is to request an extension for the time needed for the OB Services Line to reach the required goal set forth by the Board. Due to COVID 19, the hospital has seen an overall decline in utilization. Lakeside Medical Center is requesting a twelve month extension to allow the facility to reach its goal as several factors such as community outreach, community events are still a barrier.

**CONCLUSION/ACTION: Commissioner Banner made a motion to approve the OB Service Line at Lakeside. The motion was duly seconded by Commissioner Jackson-Moore. There being no objection, the motion passed unanimously.**

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**10A-3 RECEIVE AND FILE:**

**Internal Audit Timeline**

Ms. Bittar stated that From FY18 through FY20, the District fully out-sourced internal audit after a formal Request for Proposal (RFP). Although the firm was experienced in health care, the costs were prohibitive compared to the value received. In FY21, an in-house auditor was hired, along with an outside firm to co-source the internal audit function. For FY22, the proposal includes that the in-house internal audit function be further defined by charter, and that additional resources and tools will be added. The intent is to supplement the in-house function by performing a thorough search for a qualified outside firm(s) to co-source on an as needed basis.

**CONCLUSION/ACTION: Received and filed.**

**10A-4 Staff Recommends a MOTION TO APPROVE:**

**Internal Audit Update**

Ms. Bittar stated that included in your packet is an overview of the process that was utilized for the FY 2021 HCD Risk Assessment, which included a survey to 46 members of governance and leadership, and interviews on Entity Level Controls and Key Business Risks with key leaders. There was a 74% response rate to the survey, and the results were shared with a heat map, showing that there were no high risks noted, a few low significant risks, and the majority of risks falling into the categories of Moderate and Slight. The results of the HCD risk assessment are compared to other healthcare entities, and an internal audit work plan will be shared that addresses risks identified from the assessment.

**CONCLUSION/ACTION: Commissioner Alonso made a motion to approve the Internal Audit Update as presented. The motion was duly seconded by Commissioner Banner. There being no objection, the motion passed unanimously.**

**10A-5 Staff Recommends a MOTION TO APPROVE:**

**2020 Health Care District Audit**

Anil with RSM stated that the 2020 Health Care District audited Annual Financial Reports are presented for Board review. RSM completed the audit procedures for fiscal year end September 30, 2020. The opinion provides the assurance that the financial statements are presented fairly, with no material misstatements.

**CONCLUSION/ACTION: Commissioner Banner made a motion to approve the 2020 Health Care District Audited Financial Report. The motion was duly seconded by Commissioner Alonso. There being no objection, the motion passed unanimously.**

Health Care District Board and Finance & Audit Committee  
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B. **TRAUMA** – Public Hearing

10B-1 **Staff Recommends a MOTION TO APPROVE:**

Trauma Agency Five Year Plan

Dr. Andric stated that the 2021 proposed trauma five-year plan update demonstrates ongoing need and addresses the twelve required components for the Trauma Plan as set forth in Chapter 395, Part II, Florida Statutes, as well as additional components required by rule 64J-2.007. There are no substantive changes proposed in this five-year plan update.

**CONCLUSION/ACTION: Commissioner Alonso made a motion to approve the Five-Year Trauma Plan. The motion was duly seconded by Commissioner Jackson-Moore. There being no objection, the motion passed unanimously.**

11. **CEO Comments**
12. **Finance & Audit Committee Member Comments**
13. **HCD Board Member Comments**
14. **Establishment of Upcoming Board Meetings**

**September 16, 2021**

- 4:00PM, Joint Meeting with the Finance & Audit Committee
- 5:15PM, Truth In Millage (TRIM) Meeting

**September 28, 2021**

- 4:00PM, Health Care District Board Annual Meeting (Officer Elections)
- 5:15PM, Truth In Millage (TRIM) Meeting

**December 15, 2021**

- 2:00PM, Health Care District Board Meeting

Health Care District Board and Finance & Audit Committee  
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**15. Motion to Adjourn**

There being no further business, the meeting was adjourned.

\_\_\_\_\_  
**Sean O'Bannon, Secretary**

\_\_\_\_\_  
**Date**

DRAFT

**HEALTH CARE DISTRICT OF  
PALM BEACH COUNTY  
BOARD OF COMMISSIONERS**

**Board Meeting Attendance Tracking for 12/20 – 12/21**

	<b>12/8/20</b>	<b>3/11/21</b>	<b>6/29/21</b>	<b>9/16/21</b>	<b>9/28/21</b>	<b>12/15/21</b>
Leslie Daniels	<b>X</b>	<b>X</b>	<b>X</b>			
Nancy Banner	<b>X</b>	<b>X</b>	<b>X</b>			
Sean O’Bannon	<b>X</b>	<b>X</b>				
Dr. Alonso	<b>X</b>	<b>X</b>	<b>X</b>			
Cory Neering	<b>X</b>	<b>X</b>	<b>X</b>			
Ed Sabin	<b>X</b>	<b>X</b>				
Tammy Jackson-Moore	<b>X</b>	<b>X</b>	<b>X</b>			

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Health Care District Financial Statements**

**2. Summary:**

The YTD July 2021 financial statements for the Health Care District are presented for Board review.

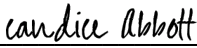
**3. Substantive Analysis:**

Management has provided the income statements and key statistical information for the Health Care District. Additional management discussion and analysis is incorporated into the financial statement presentation.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
  
 F63702991824Abbott  
 VP & Chief Financial Officer

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

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

N/A  
 \_\_\_\_\_  
 Date Approved

**6. Recommendation:**

Staff recommends the Board receive and file the YTD July 2021 Health Care District financial statements.

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

Approved for Legal sufficiency:

DocuSigned by:  
*Bernabe Icaza*  
0290C63270474caza  
VP & General Counsel

DocuSigned by:  
*Candice Abbott*  
F637D206055127  
VP & Chief Financial Officer

DocuSigned by:  
*Darcy Davis*  
778355891475.  
Chief Executive Officer





## MEMO

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To: Finance & Audit Committee

From: Candice Abbott, Chief Financial Officer

Date: August 31, 2021

Subject: Management Discussion and Analysis as of July 2021 Health Care District Financial Statements

The July statements represent the financial performance for the ten months of the 2021 fiscal year for the Health Care District. Total revenue year to date (YTD) of \$239.1M is favorable to budget of \$232.1M by (\$7.0M or 3.0%). Operational expenditures YTD are \$29.4M favorable to budget or 14.4%. Year to date, the consolidated net margin is \$60.6M, with a favorable variance to budget of \$36.3M or 148.8%.

The General Fund YTD total revenue of \$159.7M is over budget of \$158.9M by \$836k or 0.5%. This overall favorable variance is mainly due to revenue recognized from Cares Act, as well as timing of intergovernmental revenue for School Health and County JFK Revenue Guarantee. Unfavorable net patient revenue variance of \$1.4M is due to reduced Aeromedical transport volumes. Unrealized loss on investment variance of (\$1.0M) represents decrease in current market value of investment portfolio held by the District, and will only be realized should the District liquidate its portfolio. Other revenue is unfavorable by \$1.2M due to timing of the subrogation lien revenue anticipated.

Expenditures in the General Fund YTD after overhead allocation are favorable to budget by \$26.7M or 28.5%. Significant categories of favorable YTD budget variance include medical services of \$20.9M, other expenses of \$2.2M, salaries, wages and benefits \$2.0M, repair and maintenance \$1.2M, and purchased services \$629k. Medical services claims continue to decline through better utilization management of District Cares membership. Trauma contracts cap on payments ended in December 2020, and the new contract started in January. Other expenses are favorable to budget due to less than anticipated training expenses for EPIC as well as receiving refunds for prior year medical claims. Salaries and wages are favorable to budget due primarily to vacancies in the school health program. The repair and maintenance variance relates to IT software maintenance cost after Epic implementation. The purchased services favorable variance is



attributable to delayed implementation of the transportation program, as well as reduced contracted personnel. Reduced YTD contracted personnel in the Aeromed program resulted from reduced fire rescue staff due to one helicopter being grounded for repairs. The helicopter has since come back online beginning in April 2021.

The General Fund YTD has a net margin of \$92.8M versus a budgeted net margin of \$65.3M, for a favorable net margin variance of \$27.5M or 42.2%. The General Fund has subsidized a total of \$25.6M YTD to support operations of; Healey Center \$3.3M, Primary Care Clinics \$10.0M, Capital Project \$2.8M, and Medicaid Match \$9.5M.

The Healey Center total revenue YTD of \$15.4M was unfavorable to budget by \$78k. This unfavorable variance is primarily due to increased charity classification. Total YTD operating expenses before overhead allocation of \$16.2M were favorable to budget by \$525k or 3.1%. This favorable variance is mainly due to savings in the categories of salaries, wages, and benefits of \$407k, as well as other supplies of \$110k. Current vacant positions and the timing of certain expenses are the primary reason for savings. The YTD net margin after overhead allocations for the Healey Center was a loss of (\$4.2M) compared to budgeted loss of (\$4.7M) or (10.1%).

Lakeside Medical Center total revenue YTD of \$40.5M was favorable to budget by \$7.7M or 23.3%. This favorable variance resulted from the remaining Provider Relief Funds revenue being fully recognized for a total of \$16.6M YTD. Net patient revenue YTD of \$23.5M was under budget by (\$4.0M) or (14.5%). Total operating expenses YTD of \$36.7M was favorable to budget by \$454k or 1.2%. The YTD net margin after overhead allocations at Lakeside Medical Center was a loss of (\$6.9M) compared to a budgeted loss of (\$15.7M) for a variance of \$8.8M or 56.2%.

The Primary Care Clinics total revenue YTD of \$18.6M was under budget by (\$1.3M) primarily due to revenue recognition timing of COVID-19 stimulus funds. The COVID funds were budgeted for the current year, but due to changing guidance, they were able to be recognized earlier than anticipated in the prior year, thus creating a timing difference. Net patient revenue YTD was favorable to budget by \$1.7M or 22.6%. Total operating expenses YTD for the clinics are favorable to budget by \$440k or 1.9%. This favorable variance is primarily due to medical supplies of \$648k. The timing of medical supply purchases including COVID test kits are the primary reason for savings which is anticipated to reverse by year end. Total net margin YTD after overhead allocations for the Primary Care Clinics is a loss of (\$11.6M), compared to budgeted loss of (\$11.0M) for an unfavorable variance of (\$595k) or 5.4%.



Cash and investments have a combined balance of \$179.5M, of which \$1.5M is restricted. Due from other governments of \$16.5M reflects the Tax Collector receivable of \$2.1M, the School District receivable of \$2.9M, and grants receivable of \$11.5M. Total net position for all funds combined is \$266.9M.



# Health Care District of Palm Beach County

FINANCIAL STATEMENT

July 2021



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### Management Discussion and Analysis

### Combined Financial Statements

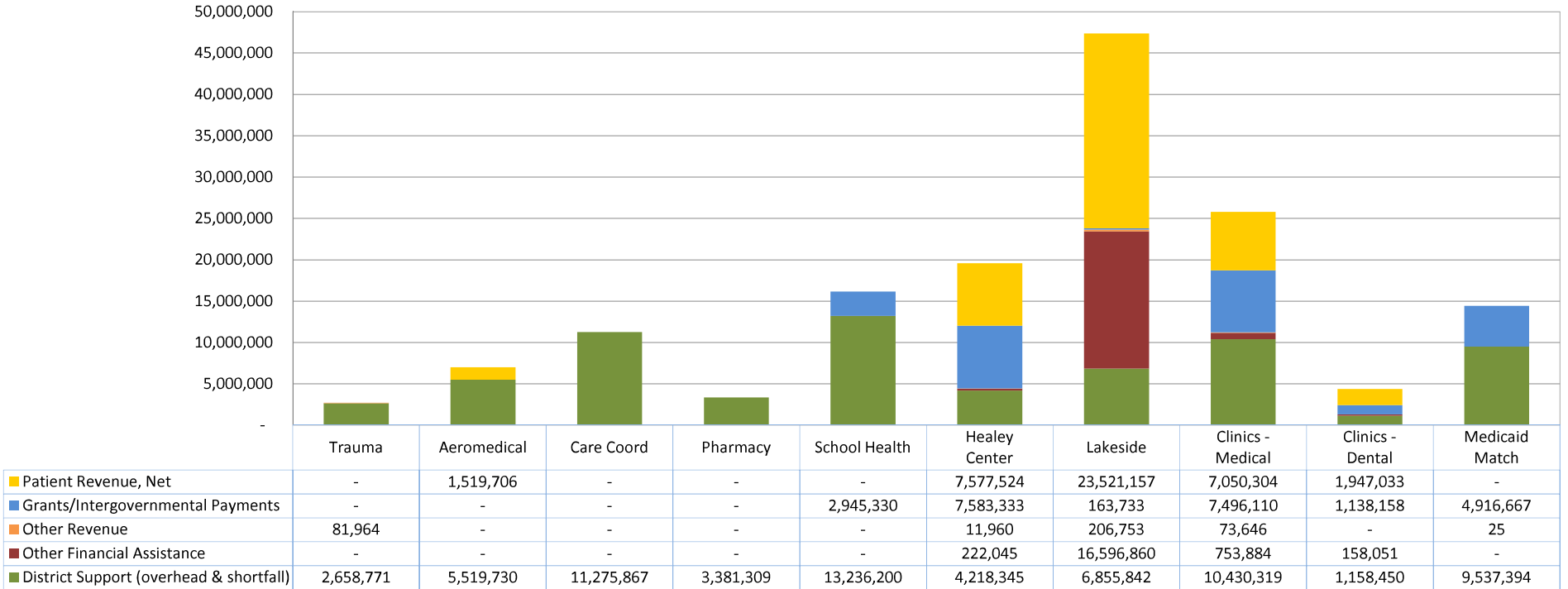
Revenues and Expenditures – Combined All Funds (Functional).....	1
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Combined Statement of Net Position.....	3 - 4

### Supplemental Information

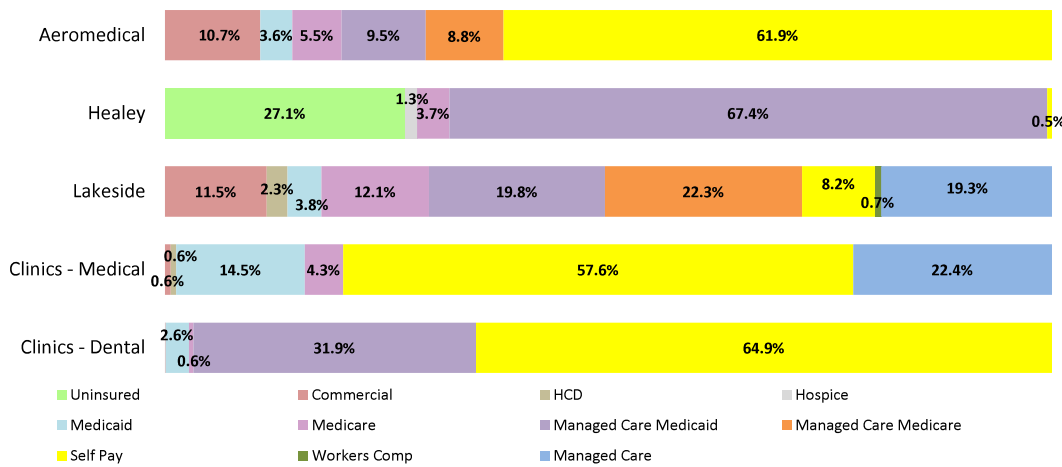
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# Program Dashboard - YTD July 2021

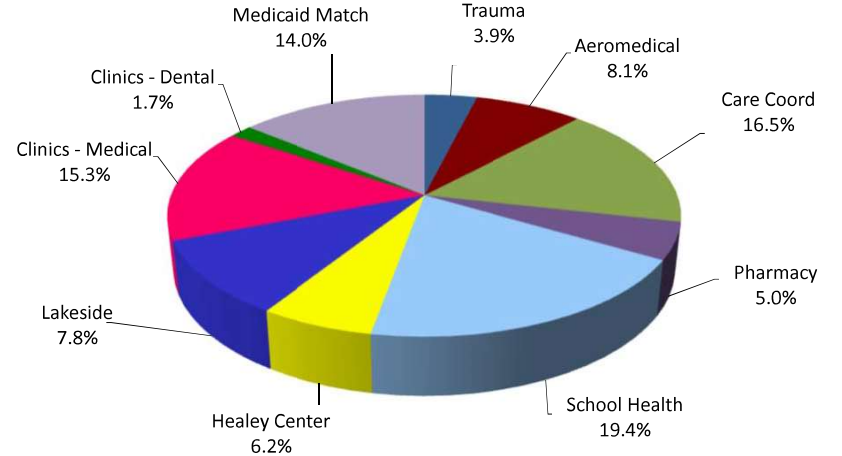
## YTD Revenue and District Support by Program



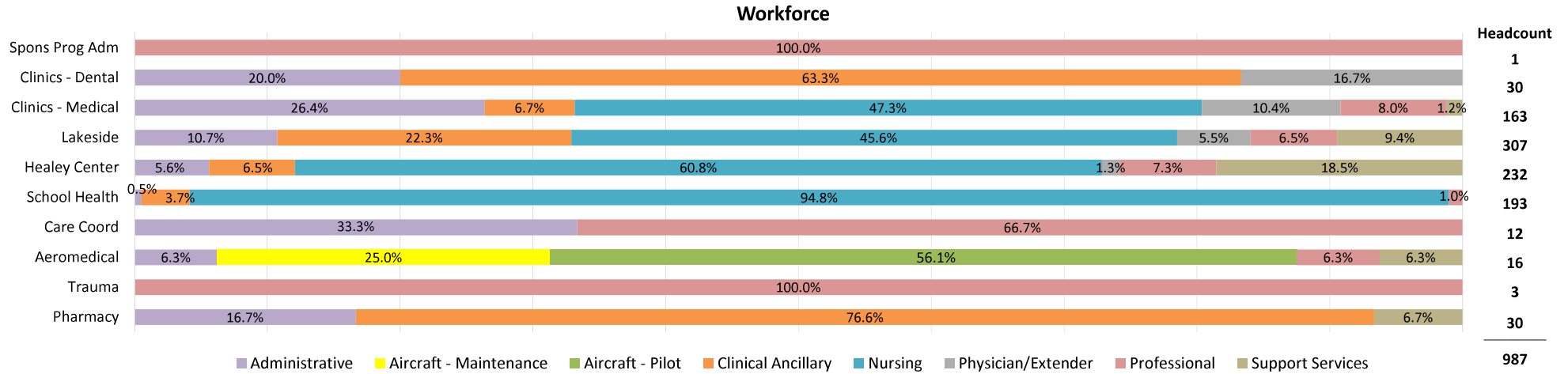
## YTD Payor Mix by Volume



## District Support (overhead and shortfall)

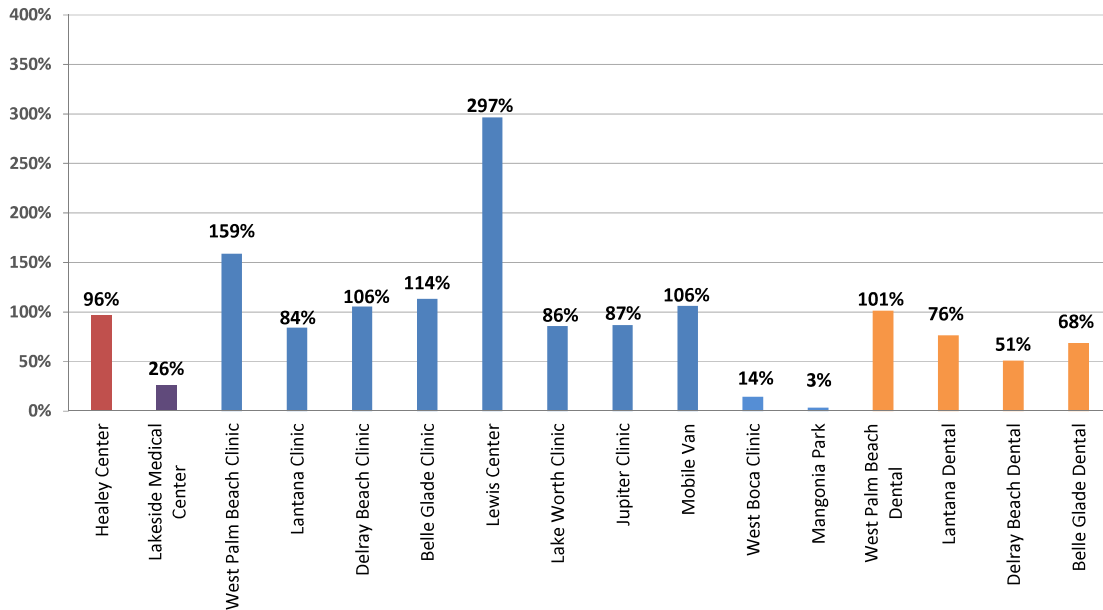


# Program Dashboard - YTD July 2021



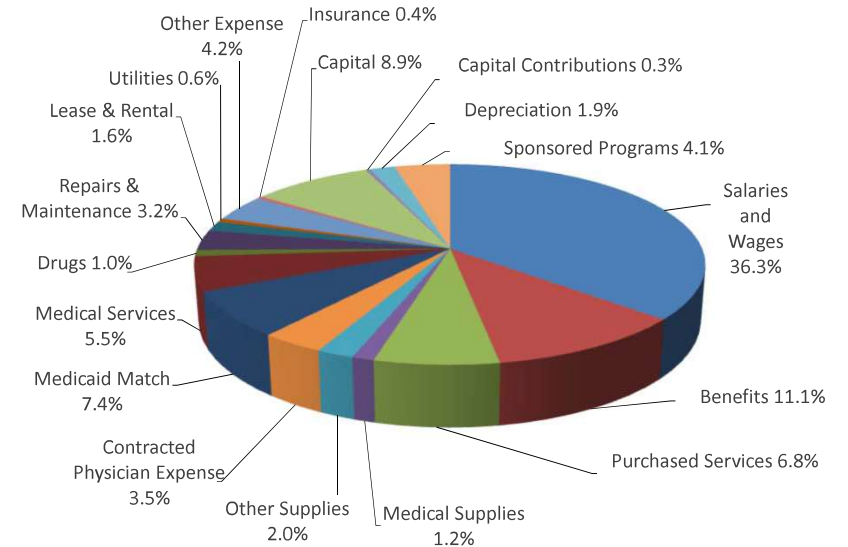
\* Clinical Ancillary is comprised of employees in pharmacy, lab, radiology, ultrasound, respiratory, physical therapy, social services, activities, and dental hygienists/assistants  
 \*\* Support Services is comprised of employees in housekeeping, dietary, laundry, purchasing, and warehouse/delivery

### Capacity Percentage



Healey Center and Lakeside Medical Center capacity percentages reflect the year-to-date average daily census. Primary Care and Dental Clinic capacity percentages represent the number of completed visits compared to the budgeted number of visits at each location.

### Functional Expense Breakdown



## Revenues & Expenditures - Combined All Funds (Functional)

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
<b>Revenues:</b>															
\$ 2,403,695	\$ 3,030,515	\$ (626,820)	(20.7%)	\$ 2,870,113	\$ (466,418)	(16.3%)	Ad Valorem Taxes	\$ 147,297,197	\$ 147,000,000	\$ 297,197	0.2%	\$ 139,271,877	\$ 8,025,321	5.8%	
4,661,059	4,204,871	456,188	10.8%	4,219,661	441,398	10.5%	Patient Revenue, Net	41,615,723	45,644,971	(4,029,248)	(8.8%)	36,581,482	5,034,241	13.8%	
1,250,000	1,481,916	(231,916)	(15.6%)	1,482,115	(232,115)	(15.7%)	Intergovernmental Revenue	16,072,130	14,819,160	1,252,970	8.5%	14,869,899	1,202,231	8.1%	
1,403,407	42,444	1,360,963	3,206.5%	1,607,165	(203,758)	(12.7%)	Grants	8,798,002	7,404,355	1,393,647	18.8%	8,013,262	784,739	9.8%	
160,444	121,339	39,105	32.2%	267,431	(106,987)	(40.0%)	Interest Earnings	1,332,804	1,213,390	119,414	9.8%	2,728,653	(1,395,849)	(51.2%)	
103,064	-	103,064	0.0%	(9,881)	112,944	(1,143.1%)	Unrealized Gain/(Loss)-Investments	(1,037,737)	-	(1,037,737)	0.0%	1,419,059	(2,456,796)	(173.1%)	
15,222,219	1,337,554	13,884,665	1,038.1%	1,269,418	13,952,800	1,099.1%	Other Financial Assistance	22,777,623	12,251,809	10,525,814	85.9%	6,147,897	16,629,727	270.5%	
27,330	234,299	(206,969)	(88.3%)	52,762	(25,432)	(48.2%)	Other Revenue	2,258,348	3,746,930	(1,488,582)	(39.7%)	2,912,737	(654,389)	(22.5%)	
<b>\$ 25,231,217</b>	<b>\$ 10,452,938</b>	<b>\$ 14,778,279</b>	<b>141.4%</b>	<b>\$ 11,758,785</b>	<b>\$ 13,472,433</b>	<b>114.6%</b>	<b>Total Revenues</b>	<b>\$ 239,114,090</b>	<b>\$ 232,080,615</b>	<b>\$ 7,033,475</b>	<b>3.0%</b>	<b>\$ 211,944,867</b>	<b>\$ 27,169,223</b>	<b>12.8%</b>	
<b>Expenditures:</b>															
7,188,169	7,430,551	242,381	3.3%	6,755,095	(433,074)	(6.4%)	Salaries and Wages	71,268,863	73,551,986	2,283,123	3.1%	70,587,535	(681,328)	(1.0%)	
2,150,023	2,254,607	104,584	4.6%	2,062,048	(87,975)	(4.3%)	Benefits	21,750,199	22,447,235	697,036	3.1%	22,010,009	259,810	1.2%	
1,290,981	1,424,788	133,807	9.4%	1,183,002	(107,979)	(9.1%)	Purchased Services	13,361,023	13,305,034	(55,989)	(0.4%)	13,325,246	(35,777)	(0.3%)	
197,785	319,100	121,315	38.0%	270,093	72,308	26.8%	Medical Supplies	2,373,524	3,108,508	734,984	23.6%	2,462,092	88,568	3.6%	
338,562	405,890	67,328	16.6%	339,572	1,010	0.3%	Other Supplies	3,997,160	4,044,779	47,619	1.2%	2,212,061	(1,785,099)	(80.7%)	
693,844	702,365	8,521	1.2%	748,944	55,100	7.4%	Contracted Physician Expense	6,889,594	7,023,650	134,056	1.9%	7,527,959	638,365	8.5%	
1,407,924	1,485,814	77,890	5.2%	1,449,573	41,649	2.9%	Medicaid Match	14,454,085	14,531,971	77,886	0.5%	14,204,652	(249,433)	(1.8%)	
657,090	3,805,925	3,148,835	82.7%	2,452,798	1,795,709	73.2%	Medical Services	10,891,714	31,891,371	20,999,657	65.8%	33,399,938	22,508,224	67.4%	
130,256	186,219	55,963	30.1%	237,202	106,946	45.1%	Drugs	1,994,316	1,808,938	(185,378)	(10.2%)	2,142,202	147,886	6.9%	
464,200	754,430	290,230	38.5%	529,824	65,624	12.4%	Repairs & Maintenance	6,346,562	7,544,300	1,197,738	15.9%	5,261,887	(1,084,675)	(20.6%)	
313,792	402,249	88,457	22.0%	315,775	1,983	0.6%	Lease & Rental	3,164,118	3,644,997	480,879	13.2%	3,229,744	65,626	2.0%	
110,519	132,590	22,071	16.6%	127,512	16,993	13.3%	Utilities	1,142,155	1,325,900	183,745	13.9%	1,162,345	20,190	1.7%	
532,877	839,876	306,999	36.6%	558,168	25,292	4.5%	Other Expense	8,262,177	10,750,545	2,488,368	23.1%	7,794,314	(467,863)	(6.0%)	
93,880	83,727	(10,153)	(12.1%)	96,919	3,039	3.1%	Insurance	871,984	837,270	(34,714)	(4.1%)	1,149,105	277,121	24.1%	
819,506	836,496	16,990	2.0%	832,687	13,181	1.6%	Sponsored Programs	8,015,561	8,364,960	349,399	4.2%	8,102,435	86,874	1.1%	
16,389,407	21,064,627	4,675,219	22.2%	17,959,212	1,569,805	8.7%	Total Operational Expenditures	174,783,034	204,181,444	29,398,410	14.4%	194,571,523	19,788,489	10.2%	
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>															
\$ 8,841,810	\$ (10,611,689)	\$ 19,453,499	(183.3%)	\$ (6,200,428)	\$ 15,042,238	(242.6%)		\$ 64,331,056	\$ 27,899,171	\$ 36,431,885	130.6%	\$ 17,373,343	\$ 46,957,712	270.3%	
374,929	354,000	(20,928)	(5.9%)	356,277	(18,652)	(5.2%)	Depreciation	3,714,831	3,540,000	(174,831)	(4.9%)	3,541,647	(173,184)	(4.9%)	
<b>16,764,336</b>	<b>21,418,627</b>	<b>4,654,291</b>	<b>21.7%</b>	<b>18,315,489</b>	<b>1,551,154</b>	<b>8.5%</b>	<b>Total Expenses</b>	<b>178,497,866</b>	<b>207,721,444</b>	<b>29,223,578</b>	<b>14.1%</b>	<b>198,113,170</b>	<b>19,615,305</b>	<b>9.9%</b>	
<b>\$ 8,466,882</b>	<b>\$ (10,965,689)</b>	<b>\$ 19,432,570</b>	<b>(177.2%)</b>	<b>\$ (6,556,705)</b>	<b>\$ 15,023,587</b>	<b>(229.1%)</b>	<b>Net Margin</b>	<b>\$ 60,616,224</b>	<b>\$ 24,359,171</b>	<b>\$ 36,257,053</b>	<b>148.8%</b>	<b>\$ 13,831,696</b>	<b>\$ 46,784,528</b>	<b>338.2%</b>	
<b>Capital</b>															
5,323,692	1,998,466	(3,325,226)	(166.4%)	1,151,990	(4,171,702)	(362.1%)		17,440,204	24,310,309	6,870,105	28.3%	13,189,426	(4,250,778)	(32.2%)	
243,518	-	(243,518)	0.0%	47,657	(195,861)	(411.0%)	Capital Contributions	605,968	-	(605,968)	0.0%	338,995	(266,973)	(78.8%)	
<b>\$ 3,386,708</b>	<b>\$ (12,964,155)</b>	<b>\$ 16,350,863</b>	<b>(126.1%)</b>	<b>\$ (7,661,038)</b>	<b>\$ 11,047,746</b>	<b>(144.2%)</b>	<b>RESERVES ADDED (USED)</b>	<b>\$ 43,781,988</b>	<b>\$ 48,862</b>	<b>\$ 43,733,126</b>	<b>89,503.6%</b>	<b>\$ 981,265</b>	<b>\$ 42,800,723</b>	<b>4,361.8%</b>	



## Revenues and Expenses by Fund YTD

FOR THE TENTH MONTH ENDED JULY 31, 2021

	General Fund	Healey Center	Lakeside Medical	Primary Care Clinics	Medicaid Match	Capital Funds	Total
<b>Revenues:</b>							
Ad Valorem Taxes	\$ 147,297,197	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 147,297,197
Premiums	-	-	-	-	-	-	-
Patient Revenue, Net	1,519,706	7,577,524	23,521,157	8,997,336	-	-	41,615,723
Intergovernmental Revenue	3,572,130	7,583,333	-	-	4,916,667	-	16,072,130
Grants	-	-	163,733	8,634,268	-	-	8,798,002
Interest Earnings	1,326,125	-	-	-	-	-	1,326,125
Unrealized Gain/(Loss)-Investments	(1,037,737)	-	-	-	-	-	(1,037,737)
Other Financial Assistance	5,046,784	222,045	16,596,860	911,935	-	-	22,777,623
Other Revenue	1,971,081	11,960	206,753	73,646	25	1,561	2,265,026
<b>Total Revenues</b>	<b>\$ 159,695,286</b>	<b>\$ 15,394,863</b>	<b>\$ 40,488,502</b>	<b>\$ 18,617,185</b>	<b>\$ 4,916,692</b>	<b>\$ 1,561</b>	<b>\$ 239,114,090</b>
<b>Expenditures:</b>							
Salaries and Wages	30,678,049	9,797,622	16,390,174	14,403,018	-	-	71,268,863
Benefits	9,745,543	3,385,949	4,559,180	4,059,528	-	-	21,750,199
Purchased Services	8,942,252	537,147	2,851,516	1,030,108	-	-	13,361,023
Medical Supplies	104,804	533,488	1,202,824	532,407	-	-	2,373,524
Other Supplies	1,900,791	666,843	1,209,247	220,279	-	-	3,997,160
Contracted Physician Expense	12,500	12,085	6,865,009	-	-	-	6,889,594
Medicaid Match	-	-	-	-	14,454,085	-	14,454,085
Medical Services	10,109,429	149,079	-	633,206	-	-	10,891,714
Drugs	(46,943)	306,586	1,135,075	599,599	-	-	1,994,316
Repairs & Maintenance	5,304,050	242,756	578,372	221,384	-	-	6,346,562
Lease & Rental	1,604,331	13,971	502,290	1,043,525	-	-	3,164,118
Utilities	86,223	362,146	622,432	71,354	-	-	1,142,155
Other Expense	7,302,876	95,614	600,651	263,036	-	-	8,262,177
Insurance	597,748	70,921	166,271	37,044	-	-	871,984
Sponsored Programs	8,015,561	-	-	-	-	-	8,015,561
<b>Total Operational Expenditures</b>	<b>84,357,213</b>	<b>16,174,207</b>	<b>36,683,042</b>	<b>23,114,487</b>	<b>14,454,085</b>	<b>-</b>	<b>174,783,035</b>
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>\$ 75,338,073</b>	<b>\$ (779,344)</b>	<b>\$ 3,805,461</b>	<b>\$ (4,497,302)</b>	<b>\$ (9,537,394)</b>	<b>\$ 1,561</b>	<b>\$ 64,331,055</b>
<b>Budget</b>	<b>\$ 46,599,434</b>	<b>\$ (1,226,379)</b>	<b>\$ (4,300,957)</b>	<b>\$ (3,611,166)</b>	<b>\$ (9,614,241)</b>	<b>\$ 52,480</b>	<b>\$ 27,899,171</b>
<b>Prior Year: Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>\$ 47,270,531</b>	<b>\$ (759,500)</b>	<b>\$ (13,487,536)</b>	<b>\$ (6,411,236)</b>	<b>\$ (9,286,982)</b>	<b>\$ 48,068</b>	<b>\$ 17,373,343</b>

# Combined Governmental Funds Statement of Net Position

As of July 31, 2021

	General Fund July 2021	General Fund June 2021	Medicaid Match July 2021	Medicaid Match June 2021	Capital Projects July 2021	Capital Projects June 2021	Governmental Funds July 2021	Governmental Funds June 2021
<b>Assets</b>								
Cash and Cash Equivalents	\$ 78,886,431	\$ 79,218,203	\$ 609,042	\$ 609,042	\$ 17,862,497	\$ 27,249,544	\$ 97,357,970	\$ 107,076,789
Restricted Cash	-	-	-	-	-	-	-	-
Investments	92,657,814	97,010,902	-	-	-	-	92,657,814	97,010,902
Notes Receivable	-	-	-	-	-	-	-	-
Accounts Receivable, net	1,517,167	1,112,683	-	-	-	-	1,517,167	1,112,683
Due From Other Funds	-	-	-	-	-	-	-	-
Due From Other Governments	10,043,457	9,742,999	-	-	-	-	10,043,457	9,742,999
Inventory	47,382	47,382	-	-	-	-	47,382	47,382
Other Current Assets	5,738,155	5,285,477	-	-	-	-	5,738,155	5,285,477
<b>Total Assets</b>	<u>\$ 188,890,406</u>	<u>\$ 192,417,646</u>	<u>\$ 609,042</u>	<u>\$ 609,042</u>	<u>\$ 17,862,497</u>	<u>\$ 27,249,544</u>	<u>\$ 207,361,945</u>	<u>\$ 220,276,232</u>
<b>Liabilities</b>								
Accounts Payable	2,386,546	2,600,593	-	-	5,410,493	9,652,240	7,797,039	12,252,833
Medical Benefits Payable	874,158	631,000	-	-	-	-	874,158	631,000
Due To Other Funds	-	-	-	-	-	-	-	-
Due To Other Governments	-	-	-	-	-	-	-	-
Deferred Revenue	3,096,125	2,797,315	-	-	-	-	3,096,125	2,797,315
Other Current Liabilities	2,093,476	1,792,670	-	-	-	-	2,093,476	1,792,670
Noncurrent Liabilities	648,810	648,810	-	-	-	-	648,810	648,810
<b>Total Liabilities</b>	<u>9,099,115</u>	<u>8,470,388</u>	<u>-</u>	<u>-</u>	<u>5,410,493</u>	<u>9,652,240</u>	<u>14,509,608</u>	<u>18,122,627</u>
<b>Fund Balances</b>								
Nonspendable	5,157,022	4,699,767	-	-	-	-	5,157,022	4,699,767
Assigned to Subsequent Year's Budget	65,700,000	65,700,000	-	-	-	-	65,700,000	65,700,000
Assigned to Capital Projects	-	-	-	-	12,452,004	17,597,304	12,452,004	17,597,304
Assigned to Medicaid Match	-	-	609,042	609,042	-	-	609,042	609,042
Unassigned	108,934,268	113,547,491	-	-	-	-	108,934,268	113,547,491
<b>Ending Fund Balance</b>	<u>179,791,290</u>	<u>183,947,258</u>	<u>609,042</u>	<u>609,042</u>	<u>12,452,004</u>	<u>17,597,304</u>	<u>192,852,336</u>	<u>202,153,604</u>
<b>Total Liabilities and Fund Balances</b>	<u>\$ 188,890,405</u>	<u>\$ 192,417,646</u>	<u>\$ 609,042</u>	<u>\$ 609,042</u>	<u>\$ 17,862,497</u>	<u>\$ 27,249,544</u>	<u>\$ 207,361,944</u>	<u>\$ 220,276,231</u>

## Combined Business-Type Funds Statement of Net Position

As of July 31, 2021

	Healey Center July 2021	Healey Center June 2021	Healthy Palm Beaches July 2021	Healthy Palm Beaches June 2021	Lakeside Medical Center July 2021	Lakeside Medical Center June 2021	Primary Care Clinics July 2021	Primary Care Clinics June 2021	Business-Type Funds July 2021	Business-Type Funds June 2021
<b>Assets</b>										
Cash and Cash Equivalents	\$ 2,413,345	\$ 2,225,610	\$ 1,415,104	\$ 1,415,104	\$ (8,022,640)	\$ (20,543,084)	\$ (7,796,102)	\$ (7,632,552)	\$ (11,990,293)	\$ (24,534,922)
Restricted Cash	8,855	8,855	1,500,000	1,500,000	-	15,555,685	-	221,426	1,508,855	17,285,966
Accounts Receivable, net	877,986	1,026,183	1,630	1,630	4,129,016	3,189,366	2,408,480	2,782,139	7,417,112	6,999,319
Due From Other Funds	-	-	-	-	-	-	-	-	-	-
Due From Other Governments	-	-	-	-	295,646	178,965	6,162,665	5,386,052	6,458,312	5,565,017
Inventory	-	-	-	-	688,933	690,475	-	-	688,933	690,475
Other Current Assets	93,687	104,315	45,555	45,555	651,652	380,427	251,155	118,470	1,042,048	648,767
Net Investment in Capital Assets	17,351,849	17,382,328	-	-	34,304,530	34,377,371	2,763,457	2,794,555	54,419,835	54,554,255
<b>Total Assets</b>	<b>\$ 20,745,721</b>	<b>\$ 20,747,291</b>	<b>\$ 2,962,289</b>	<b>\$ 2,962,289</b>	<b>\$ 32,047,137</b>	<b>\$ 33,829,205</b>	<b>\$ 3,789,655</b>	<b>\$ 3,670,090</b>	<b>\$ 59,544,803</b>	<b>\$ 61,208,876</b>
<b>Deferred Outflows of Resources</b>										
Deferred Outflows Related to Pensions	\$ 112,870	\$ 112,870	\$ -	\$ -	\$ 13,243	\$ 13,243	\$ 20,199	\$ 20,199	\$ 146,312	\$ 146,312
<b>Liabilities</b>										
Accounts Payable	172,860	222,946	-	-	546,647	548,908	286,986	93,858	1,006,493	865,711
Medical Benefits Payable	-	-	-	-	-	-	-	-	-	-
Due to Other Funds	-	-	-	-	-	-	-	-	-	-
Due to Other Governments	55,857	55,857	-	-	2,301,819	2,301,819	-	-	2,357,676	2,357,676
Deferred Revenue	-	-	-	-	130,264	15,350,834	834,022	621,160	964,286	15,971,994
Other Current Liabilities	1,306,123	1,179,702	-	-	2,330,093	2,081,590	1,400,585	1,310,619	5,036,800	4,571,911
Noncurrent Liabilities	1,332,817	1,337,744	-	-	2,193,783	2,160,596	1,438,384	1,416,655	4,964,984	4,914,995
<b>Total Liabilities</b>	<b>\$ 2,867,657</b>	<b>\$ 2,796,250</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 7,502,606</b>	<b>\$ 22,443,747</b>	<b>\$ 3,959,976</b>	<b>\$ 3,442,292</b>	<b>\$ 14,330,240</b>	<b>\$ 28,682,288</b>
<b>Deferred Inflows of Resources</b>										
Deferred Inflows	\$ 102,110	\$ 102,110	\$ -	\$ -	\$ 13,627	\$ 13,627	\$ 474	\$ 474	\$ 116,211	\$ 116,211
<b>Net Position</b>										
Net Investment in Capital Assets	17,351,849	17,382,328	-	-	34,304,530	34,377,371	2,763,457	2,794,555	54,419,835	54,554,255
Restricted	8,855	8,855	1,500,000	1,500,000	-	15,555,685	-	221,426	1,508,855	17,285,966
Unrestricted	528,121	570,618	1,462,289	1,462,289	(9,760,383)	(38,547,982)	(2,914,053)	(2,768,458)	(10,684,026)	(39,283,532)
<b>Total Net Position</b>	<b>17,888,824</b>	<b>17,961,802</b>	<b>2,962,289</b>	<b>2,962,289</b>	<b>24,544,146</b>	<b>11,385,074</b>	<b>(150,596)</b>	<b>247,523</b>	<b>45,244,664</b>	<b>32,556,688</b>
<b>Total Net Position</b>	<b>\$ 20,756,481</b>	<b>\$ 20,758,051</b>	<b>\$ 2,962,289</b>	<b>\$ 2,962,289</b>	<b>\$ 32,046,753</b>	<b>\$ 33,828,821</b>	<b>\$ 3,809,380</b>	<b>\$ 3,689,815</b>	<b>\$ 59,574,904</b>	<b>\$ 61,238,977</b>



# **SUPPLEMENTAL INFORMATION**

## **GENERAL FUND**

# General Fund Revenue & Expenditures

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 2,403,695	\$ 3,030,515	\$ (626,820)	(20.7%)	\$ 2,870,113	\$ (466,418)	(16.3%)	\$ 147,297,197	\$ 147,000,000	\$ 297,197	0.2%	\$ 139,271,877	\$ 8,025,321	5.8%
456,562	271,890	184,672	67.9%	528,277	(71,715)	(13.6%)	1,519,706	2,933,915	(1,414,209)	(48.2%)	2,095,343	(575,637)	(27.5%)
(0)	231,917	(231,917)	(100.0%)	232,115	(232,115)	(100.0%)	3,572,130	2,319,170	1,252,960	54.0%	2,369,899	1,202,231	50.7%
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	108,084	(108,084)	(100.0%)
160,361	114,062	46,299	40.6%	266,603	(106,241)	(39.9%)	1,326,125	1,140,620	185,505	16.3%	2,661,853	(1,335,728)	(50.2%)
103,064	-	103,064	0.0%	(9,881)	112,944	(1,143.1%)	(1,037,737)	-	(1,037,737)	0.0%	1,419,059	(2,456,796)	(173.1%)
(78,847)	230,000	(308,847)	(134.3%)	-	(78,847)	0.0%	5,046,784	2,300,000	2,746,784	119.4%	-	5,046,784	0.0%
11,829	176,133	(164,304)	(93.3%)	36,676	(24,847)	(67.7%)	1,971,081	3,165,270	(1,194,189)	(37.7%)	2,634,310	(663,229)	(25.2%)
<b>\$ 3,056,662</b>	<b>\$ 4,054,517</b>	<b>\$ (997,855)</b>	<b>(24.6%)</b>	<b>\$ 3,923,902</b>	<b>\$ (867,240)</b>	<b>(22.1%)</b>	<b>\$ 159,695,286</b>	<b>\$ 158,858,975</b>	<b>\$ 836,311</b>	<b>0.5%</b>	<b>\$ 150,560,424</b>	<b>\$ 9,134,862</b>	<b>6.1%</b>
<b>Expenditures:</b>													
3,139,718	3,233,090	93,371	2.9%	2,651,202	(488,517)	(18.4%)	30,678,049	32,236,366	1,558,317	4.8%	30,247,499	(430,550)	(1.4%)
969,946	1,023,498	53,552	5.2%	837,704	(132,242)	(15.8%)	9,745,543	10,225,414	479,871	4.7%	10,096,874	351,332	3.5%
850,289	1,059,415	209,126	19.7%	747,193	(103,096)	(13.8%)	8,942,252	9,571,290	629,038	6.6%	8,646,451	(295,801)	(3.4%)
4,815	19,993	15,178	75.9%	1,555	(3,260)	(209.7%)	104,804	199,930	95,126	47.6%	43,722	(61,082)	(139.7%)
74,382	204,852	130,470	63.7%	147,888	73,506	49.7%	1,900,791	2,048,520	147,729	7.2%	578,399	(1,322,391)	(228.6%)
-	4,167	4,167	100.0%	-	-	0.0%	12,500	41,670	29,170	70.0%	135,417	122,917	90.8%
590,669	3,719,701	3,129,032	84.1%	2,305,432	1,714,763	74.4%	10,109,429	31,038,883	20,929,454	67.4%	32,522,340	22,412,911	68.9%
(17,465)	6,600	24,065	364.6%	616	18,080	2,936.2%	(46,943)	66,000	112,943	171.1%	68,482	115,425	168.5%
202,979	651,319	448,340	68.8%	376,284	173,305	46.1%	5,304,050	6,513,190	1,209,140	18.6%	3,254,234	(2,049,816)	(63.0%)
163,103	181,752	18,649	10.3%	138,476	(24,628)	(17.8%)	1,604,331	1,807,488	203,157	11.2%	1,498,103	(106,228)	(7.1%)
13,626	9,707	(3,919)	(40.4%)	12,851	(775)	(6.0%)	86,223	97,070	10,847	11.2%	84,381	(1,842)	(2.2%)
448,188	715,412	267,224	37.4%	456,780	8,591	1.9%	7,302,876	9,490,320	2,187,444	23.0%	7,094,029	(208,847)	(2.9%)
65,387	55,844	(9,543)	(17.1%)	68,495	3,108	4.5%	597,748	558,440	(39,308)	(7.0%)	917,527	319,779	34.9%
819,506	836,496	16,990	2.0%	832,687	13,181	1.6%	8,015,561	8,364,960	349,399	4.2%	8,102,435	86,874	1.1%
7,325,143	11,721,846	4,396,702	37.5%	8,577,161	1,252,018	14.6%	84,357,213	112,259,541	27,902,328	24.9%	103,289,893	18,932,680	18.3%
<b>Net Performance before Overhead</b>													
<b>(4,268,481)</b>	<b>(7,667,329)</b>	<b>3,398,848</b>	<b>(44.3%)</b>	<b>(4,653,259)</b>	<b>384,778</b>	<b>(8.3%)</b>	<b>75,338,073</b>	<b>46,599,434</b>	<b>28,738,639</b>	<b>61.7%</b>	<b>47,270,531</b>	<b>28,067,542</b>	<b>59.4%</b>
(1,534,358)	(1,866,560)	332,202	(17.8%)	(945,262)	589,095	(62.3%)	(17,476,939)	(18,665,597)	1,188,658	(6.4%)	(10,156,739)	7,320,201	(72.1%)
<b>5,790,786</b>	<b>9,855,286</b>	<b>4,064,500</b>	<b>41.2%</b>	<b>7,631,899</b>	<b>1,841,113</b>	<b>24.1%</b>	<b>66,880,274</b>	<b>93,593,944</b>	<b>26,713,670</b>	<b>28.5%</b>	<b>93,133,154</b>	<b>26,252,881</b>	<b>28.2%</b>
<b>\$ (2,734,123)</b>	<b>\$ (5,800,769)</b>	<b>\$ 3,066,645</b>	<b>(52.9%)</b>	<b>\$ (3,707,997)</b>	<b>\$ 973,873</b>	<b>(26.3%)</b>	<b>\$ 92,815,013</b>	<b>\$ 65,265,031</b>	<b>\$ 27,549,981</b>	<b>42.2%</b>	<b>\$ 57,427,270</b>	<b>\$ 35,387,743</b>	<b>61.6%</b>
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
<b>\$ (1,421,844)</b>	<b>\$ (6,208,541)</b>	<b>\$ 4,786,697</b>	<b>(77.1%)</b>	<b>\$ (1,202,002)</b>	<b>\$ 219,843</b>	<b>(18.3%)</b>	<b>\$ (25,620,787)</b>	<b>\$ (42,147,241)</b>	<b>\$ 16,526,454</b>	<b>(39.2%)</b>	<b>\$ (61,310,363)</b>	<b>\$ (35,689,576)</b>	<b>58.2%</b>

# Trauma Statement of Revenues and Expenditures

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 10,946	\$ 115,417	\$ (104,471)	(90.5%)	\$ 33,333	\$ (22,388)	(67.2%)	Other Revenue	\$ 81,964	\$ 1,154,170	\$ (1,072,206)	(92.9%)	\$ 769,354	\$ (687,391)	(89.3%)	
<b>10,946</b>	<b>115,417</b>	<b>(104,471)</b>	<b>(90.5%)</b>	<b>33,333</b>	<b>(22,388)</b>	<b>(67.2%)</b>	<b>Total Revenue</b>	<b>81,964</b>	<b>1,154,170</b>	<b>(1,072,206)</b>	<b>(92.9%)</b>	<b>769,354</b>	<b>(687,391)</b>	<b>(89.3%)</b>	
<i>Direct Operational Expenses:</i>															
28,556	38,777	10,221	26.4%	31,779	3,223	10.1%	Salaries and Wages	310,860	382,485	71,625	18.7%	365,901	55,041	15.0%	
7,681	12,194	4,513	37.0%	10,833	3,153	29.1%	Benefits	93,826	120,915	27,089	22.4%	116,273	22,448	19.3%	
-	-	-	0.0%	-	-	0.0%	Purchased Services	25,000	-	(25,000)	0.0%	-	(25,000)	0.0%	
199,132	2,311,034	2,111,902	91.4%	1,225,531	1,026,399	83.8%	Medical Services	2,552,351	16,952,213	14,399,862	84.9%	18,025,550	15,473,199	85.8%	
-	42	42	100.0%	-	-	0.0%	Other Supplies	298	420	122	29.0%	332	34	10.1%	
-	4,167	4,167	100.0%	-	-	0.0%	Contracted Physician Expense	12,500	41,670	29,170	70.0%	135,417	122,917	90.8%	
-	-	-	0.0%	833	833	100.0%	Repairs & Maintenance	-	-	-	0.0%	8,042	8,042	100.0%	
-	-	-	0.0%	-	-	0.0%	Utilities	-	-	-	0.0%	-	-	0.0%	
110	722	612	84.8%	-	(110)	0.0%	Other Expense	(345,758)	7,220	352,978	4,888.9%	5,146	350,904	6,818.7%	
-	-	-	0.0%	15,275	15,275	100.0%	Insurance	-	-	-	0.0%	426,662	426,662	100.0%	
<b>235,478</b>	<b>2,366,936</b>	<b>2,131,458</b>	<b>90.1%</b>	<b>1,284,252</b>	<b>1,048,774</b>	<b>81.7%</b>	<b>Total Operational Expenses</b>	<b>2,649,077</b>	<b>17,504,923</b>	<b>14,855,846</b>	<b>84.9%</b>	<b>19,083,323</b>	<b>16,434,245</b>	<b>86.1%</b>	
<b>Net Performance before Overhead</b>															
<b>(224,532)</b>	<b>(2,251,519)</b>	<b>2,026,987</b>	<b>(90.0%)</b>	<b>(1,250,919)</b>	<b>1,026,386</b>	<b>(82.1%)</b>	<b>Allocations</b>	<b>(2,567,114)</b>	<b>(16,350,753)</b>	<b>13,783,639</b>	<b>(536.9%)</b>	<b>(18,313,968)</b>	<b>15,746,855</b>	<b>(86.0%)</b>	
<i>Overhead Allocations:</i>															
96	66	(29)	(44.1%)	40	(56)	(141.0%)	Risk Mgt	742	663	(79)	(11.9%)	487	(255)	(52.3%)	
151	89	(62)	(69.6%)	-	(151)	0.0%	Internal Audit	681	888	207	23.3%	984	303	30.8%	
3,350	3,302	(48)	(1.5%)	3,541	191	5.4%	Home Office Facilities	30,355	33,017	2,662	8.1%	31,954	1,599	5.0%	
805	766	(39)	(5.1%)	748	(57)	(7.6%)	Administration	8,725	7,659	(1,066)	(13.9%)	8,253	(472)	(5.7%)	
885	895	10	1.1%	794	(91)	(11.4%)	Human Resources	9,517	8,948	(569)	(6.4%)	8,200	(1,317)	(16.1%)	
966	397	(569)	(143.1%)	397	(569)	(143.5%)	Legal	4,768	3,974	(795)	(20.0%)	3,887	(881)	(22.7%)	
77	185	108	58.2%	177	99	56.1%	Records	1,688	1,855	167	9.0%	1,652	(36)	(2.2%)	
15	159	144	90.5%	105	90	85.8%	Compliance	1,293	1,587	294	18.5%	2,010	717	35.7%	
153	161	9	5.3%	-	-	0.0%	Comm Engage Plan	1,661	1,615	(46)	(2.8%)	-	-	0.0%	
1,216	1,910	694	36.3%	-	-	0.0%	IT Operations	16,235	19,102	2,867	15.0%	-	-	0.0%	
189	195	6	3.1%	-	-	0.0%	IT Security	1,937	1,946	10	0.5%	-	-	0.0%	
928	730	(198)	(27.1%)	783	(145)	(18.5%)	Finance	6,628	7,298	669	9.2%	7,487	859	11.5%	
123	232	108	46.8%	141	17	12.3%	Public Relations	1,647	2,318	671	28.9%	2,235	588	26.3%	
47	191	145	75.6%	3,195	3,148	98.5%	Information Technology	2,296	1,913	(383)	(20.0%)	23,461	21,165	90.2%	
235	259	24	9.4%	-	(235)	0.0%	Project MGMT Office	2,168	2,589	421	16.3%	1,457	(712)	(48.8%)	
94	110	15	14.0%	-	(94)	0.0%	Corporate Quality	1,316	1,097	(219)	(19.9%)	422	(894)	(211.9%)	
<b>9,329</b>	<b>9,647</b>	<b>318</b>	<b>3.3%</b>	<b>9,919</b>	<b>2,149</b>	<b>21.7%</b>	<b>Total Overhead Allocations</b>	<b>91,658</b>	<b>96,468</b>	<b>4,810</b>	<b>5.0%</b>	<b>92,491</b>	<b>20,665</b>	<b>22.3%</b>	
<b>244,807</b>	<b>2,376,583</b>	<b>2,131,776</b>	<b>89.7%</b>	<b>1,294,171</b>	<b>1,050,923</b>	<b>81.2%</b>	<b>Total Expenses</b>	<b>2,740,735</b>	<b>17,601,391</b>	<b>14,860,656</b>	<b>84.4%</b>	<b>19,175,813</b>	<b>16,454,911</b>	<b>85.8%</b>	
<b>\$ (233,861)</b>	<b>\$ (2,261,166)</b>	<b>\$ 2,027,305</b>	<b>(89.7%)</b>	<b>\$ (1,260,838)</b>	<b>\$ 1,028,535</b>	<b>(81.6%)</b>	<b>Net Margin</b>	<b>\$ (2,658,771)</b>	<b>\$ (16,447,221)</b>	<b>\$ 13,788,450</b>	<b>(83.8%)</b>	<b>\$ (18,406,459)</b>	<b>\$ 15,767,520</b>	<b>85.7%</b>	

## Aeromedical Statement of Revenues and Expenditures

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 1,222,839	\$ 1,132,235	\$ 90,604	8.0%	\$ 959,256	\$ 263,583	27.5%	\$ 10,197,852	\$ 12,237,711	\$ (2,039,859)	(16.7%)	\$ 11,100,484	\$ (902,632)	(8.1%)
<b>Gross Patient Revenue</b>							<b>Gross Patient Revenue</b>						
1,741,820	566,290	(1,175,530)	(207.6%)	374,784	(1,367,036)	(364.8%)	6,237,301	6,120,703	(116,598)	(1.9%)	6,847,765	610,464	8.9%
(24,611)	170,814	195,425	114.4%	-	24,611	0.0%	102,949	1,842,609	1,739,660	94.4%	1,633,982	1,531,033	93.7%
(950,932)	123,241	1,074,173	871.6%	56,195	1,007,127	1,792.2%	2,337,896	1,340,484	(997,412)	(74.4%)	523,394	(1,814,502)	(346.7%)
766,277	860,345	94,068	10.9%	430,979	(335,298)	(77.8%)	8,678,146	9,303,796	625,650	6.7%	9,005,141	326,996	3.6%
<b>456,562</b>	<b>271,890</b>	<b>184,672</b>	<b>67.9%</b>	<b>528,277</b>	<b>(71,715)</b>	<b>(13.6%)</b>	<b>1,519,706</b>	<b>2,933,915</b>	<b>(1,414,209)</b>	<b>(48.2%)</b>	<b>2,095,343</b>	<b>(575,637)</b>	<b>(27.5%)</b>
37.34%	24.01%			55.07%			14.90%	23.97%		18.88%			
<b>456,562</b>	<b>271,890</b>	<b>184,672</b>	<b>67.9%</b>	<b>528,278</b>	<b>(71,715)</b>	<b>(13.6%)</b>	<b>1,519,706</b>	<b>2,933,915</b>	<b>(1,414,209)</b>	<b>(48.2%)</b>	<b>2,095,343</b>	<b>(575,637)</b>	<b>(27.5%)</b>
<b>Total Revenues</b>							<b>Total Revenues</b>						
<i>Direct Operational Expenses:</i>							<i>Direct Operational Expenses:</i>						
177,583	184,462	6,879	3.7%	174,676	(2,906)	(1.7%)	1,676,123	1,819,475	143,352	7.9%	1,720,892	44,769	2.6%
50,044	56,640	6,596	11.6%	61,211	11,167	18.2%	518,808	561,473	42,665	7.6%	584,149	65,342	11.2%
250,384	389,140	138,756	35.7%	230,324	(20,060)	(8.7%)	2,135,694	2,886,168	750,474	26.0%	2,537,243	401,549	15.8%
4,495	1,542	(2,953)	(191.5%)	1,545	(2,950)	(191.0%)	22,080	15,420	(6,660)	(43.2%)	11,464	(10,617)	(92.6%)
6,808	9,843	3,035	30.8%	4,795	(2,013)	(42.0%)	65,626	98,430	32,804	33.3%	72,224	6,598	9.1%
23,633	98,429	74,796	76.0%	84,274	60,641	72.0%	1,245,756	984,290	(261,466)	(26.6%)	749,727	(496,029)	(66.2%)
5,049	4,924	(125)	(2.5%)	5,773	724	12.5%	43,583	49,240	5,657	11.5%	43,841	258	0.6%
5,090	5,100	10	0.2%	5,090	-	0.0%	50,901	51,000	99	0.2%	50,901	-	0.0%
21,782	27,580	5,798	21.0%	25,395	3,613	14.2%	224,467	275,800	51,333	18.6%	216,415	(8,052)	(3.7%)
19,244	15,187	(4,057)	(26.7%)	14,048	(5,195)	(37.0%)	190,689	151,870	(38,819)	(25.6%)	137,833	(52,856)	(38.3%)
<b>564,111</b>	<b>792,847</b>	<b>228,736</b>	<b>28.8%</b>	<b>607,132</b>	<b>43,020</b>	<b>7.1%</b>	<b>6,173,728</b>	<b>6,893,166</b>	<b>719,438</b>	<b>10.4%</b>	<b>6,124,694</b>	<b>(49,038)</b>	<b>(0.8%)</b>
<b>Total Operational Expenses</b>							<b>Total Operational Expenses</b>						
<b>Net Performance before Overhead</b>							<b>Net Performance before Overhead</b>						
<b>(107,549)</b>	<b>(520,957)</b>	<b>413,408</b>	<b>(79.4%)</b>	<b>(78,854)</b>	<b>(28,695)</b>	<b>36.4%</b>	<b>(4,654,022)</b>	<b>(3,959,251)</b>	<b>(694,771)</b>	<b>17.5%</b>	<b>(4,029,347)</b>	<b>(624,675)</b>	<b>15.5%</b>
<b>Allocations</b>							<b>Allocations</b>						
<i>Overhead Allocations:</i>							<i>Overhead Allocations:</i>						
1,279	887	(392)	(44.1%)	483	(796)	(164.9%)	9,932	8,871	(1,060)	(12.0%)	5,934	(3,998)	(67.4%)
17,040	13,798	(3,242)	(23.5%)	-	(17,040)	0.0%	137,901	137,978	77	0.1%	430,152	292,251	67.9%
2,015	1,188	(827)	(69.6%)	-	(2,015)	0.0%	9,117	11,885	2,768	23.3%	11,990	2,873	24.0%
10,776	10,254	(521)	(5.1%)	9,117	(1,659)	(18.2%)	116,820	102,544	(14,276)	(13.9%)	100,571	(16,249)	(16.2%)
3,203	3,239	36	1.1%	2,875	(328)	(11.4%)	34,452	32,393	(2,059)	(6.4%)	29,685	(4,767)	(16.1%)
12,934	5,320	(7,614)	(143.1%)	4,834	(8,100)	(167.6%)	63,842	53,202	(10,640)	(20.0%)	47,362	(16,480)	(34.8%)
1,037	2,483	1,447	58.3%	2,151	1,115	51.8%	22,599	24,835	2,235	9.0%	20,134	(2,465)	(12.2%)
201	2,125	1,924	90.5%	1,284	1,083	84.4%	17,316	21,248	3,932	18.5%	24,496	7,180	29.3%
2,047	2,162	115	5.3%	-	(2,047)	0.0%	22,236	21,621	(615)	(2.8%)	-	(22,236)	0.0%
16,286	25,575	9,289	36.3%	-	(16,286)	0.0%	217,368	255,754	38,386	15.0%	-	(217,368)	0.0%
2,525	2,606	81	3.1%	-	(2,525)	0.0%	25,931	26,060	128	0.5%	-	(25,931)	0.0%
12,422	9,771	(2,651)	(27.1%)	9,541	(2,881)	(30.2%)	88,745	97,708	8,962	9.2%	91,236	2,491	2.7%
1,652	3,103	1,451	46.8%	1,714	62	3.6%	22,055	31,033	8,978	28.9%	27,234	5,179	19.0%
624	2,562	1,938	75.6%	38,927	38,303	98.4%	30,744	25,620	(5,124)	(20.0%)	285,887	255,143	89.2%
3,143	3,467	324	9.4%	-	(3,143)	0.0%	29,033	34,669	5,635	16.3%	17,753	(11,280)	(63.5%)
1,263	1,469	206	14.0%	-	(1,263)	0.0%	17,617	14,692	(2,926)	(19.9%)	5,140	(12,477)	(242.7%)
<b>88,447</b>	<b>90,011</b>	<b>1,564</b>	<b>1.7%</b>	<b>70,925</b>	<b>(17,522)</b>	<b>(24.7%)</b>	<b>865,708</b>	<b>900,110</b>	<b>34,402</b>	<b>3.8%</b>	<b>1,097,575</b>	<b>231,867</b>	<b>21.1%</b>
<b>Total Overhead Allocations</b>							<b>Total Overhead Allocations</b>						
<b>652,558</b>	<b>882,858</b>	<b>230,300</b>	<b>26.1%</b>	<b>678,057</b>	<b>25,498</b>	<b>3.8%</b>	<b>7,039,436</b>	<b>7,793,276</b>	<b>753,840</b>	<b>9.7%</b>	<b>7,222,265</b>	<b>182,829</b>	<b>2.5%</b>
<b>Total Expenses</b>							<b>Total Expenses</b>						
<b>\$ (195,996)</b>	<b>\$ (610,968)</b>	<b>\$ 414,971</b>	<b>(67.9%)</b>	<b>\$ (149,779)</b>	<b>\$ (46,217)</b>	<b>30.9%</b>	<b>\$ (5,519,730)</b>	<b>\$ (4,859,361)</b>	<b>\$ (660,369)</b>	<b>13.6%</b>	<b>\$ (5,126,922)</b>	<b>\$ (392,808)</b>	<b>(7.7%)</b>
<b>Net Margin</b>							<b>Net Margin</b>						

## Care Coordination Statement of Revenues and Expenditures

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
-	-	-	0.0%	-	-	0.0%	<b>Total Revenue</b>	-	-	-	0.0%	-	-	0.0%	
<i>Direct Operational Expenses:</i>															
66,936	101,909	34,973	34.3%	128,700	61,764	48.0%	Salaries and Wages	736,124	1,005,192	269,068	26.8%	2,725,221	1,989,096	73.0%	
23,399	36,800	13,401	36.4%	42,976	19,577	45.6%	Benefits	245,090	368,000	122,910	33.4%	886,467	641,377	72.4%	
308,770	320,219	11,449	3.6%	281,436	(27,334)	(9.7%)	Purchased Services	3,117,980	3,202,190	84,210	2.6%	2,850,230	(267,751)	(9.4%)	
391,537	1,216,667	825,130	67.8%	938,874	547,337	58.3%	Medical Services	6,481,080	12,166,670	5,685,590	46.7%	14,355,763	7,874,683	54.9%	
892	1,417	525	37.1%	1,565	673	43.0%	Other Supplies	14,945	14,170	(775)	(5.5%)	12,621	(2,324)	(18.4%)	
-	-	-	0.0%	14,128	14,128	100.0%	Repairs & Maintenance	199	-	(199)	0.0%	200,910	200,711	99.9%	
-	-	-	0.0%	-	-	0.0%	Lease & Rental	-	-	-	0.0%	47,533	47,533	100.0%	
-	-	-	0.0%	-	-	0.0%	Utilities	-	-	-	0.0%	2,955	2,955	100.0%	
(48,755)	8,096	56,851	702.2%	4,381	53,136	1,212.9%	Other Expense	(74,215)	80,960	155,175	191.7%	(158,061)	(83,846)	53.0%	
<b>742,779</b>	<b>1,685,108</b>	<b>942,329</b>	<b>55.9%</b>	<b>1,412,059</b>	<b>669,280</b>	<b>47.4%</b>	<b>Total Operational Expenses</b>	<b>10,521,204</b>	<b>16,837,182</b>	<b>6,315,979</b>	<b>37.5%</b>	<b>20,923,638</b>	<b>10,402,434</b>	<b>49.7%</b>	
<b>Net Performance before Overhead</b>															
<b>(742,779)</b>	<b>(1,685,108)</b>	<b>942,329</b>	<b>(55.9%)</b>	<b>(1,412,059)</b>	<b>669,280</b>	<b>(47.4%)</b>	<b>Allocations</b>	<b>(10,521,204)</b>	<b>(16,837,182)</b>	<b>6,315,979</b>	<b>(37.5%)</b>	<b>(20,923,638)</b>	<b>10,402,434</b>	<b>(49.7%)</b>	
<i>Overhead Allocations:</i>															
899	605	(295)	(48.8%)	629	(271)	(43.1%)	Risk Mgt	6,986	6,046	(940)	(15.5%)	7,725	739	9.6%	
1,418	810	(608)	(75.0%)	-	(1,418)	0.0%	Internal Audit	6,413	8,100	1,687	20.8%	15,610	9,197	58.9%	
24,751	24,397	(354)	(1.5%)	26,162	1,411	5.4%	Home Office Facilities	224,299	243,968	19,669	8.1%	236,114	11,815	5.0%	
7,580	6,989	(591)	(8.5%)	11,869	4,289	36.1%	Administration	82,172	69,888	(12,283)	(17.6%)	130,931	48,759	37.2%	
-	3,758	3,758	100.0%	12,389	12,389	100.0%	Human Resources	45,099	37,583	(7,517)	(20.0%)	127,926	82,826	64.7%	
7,702	3,626	(4,076)	(112.4%)	6,293	(1,409)	(22.4%)	Legal	43,511	36,259	(7,252)	(20.0%)	61,660	18,149	29.4%	
729	1,693	963	56.9%	2,801	2,071	74.0%	Records	15,896	16,926	1,029	6.1%	26,212	10,315	39.4%	
141	1,448	1,307	90.2%	1,671	1,530	91.5%	Compliance	12,180	14,481	2,301	15.9%	31,891	19,711	61.8%	
1,440	1,474	33	2.3%	-	(1,440)	0.0%	Comm Engage Plan	15,641	14,736	(905)	(6.1%)	-	(15,641)	0.0%	
11,456	17,431	5,975	34.3%	-	(11,456)	0.0%	IT Operations	152,898	174,307	21,410	12.3%	-	(152,898)	0.0%	
1,776	1,776	0	0.0%	-	(1,776)	0.0%	IT Security	18,240	17,761	(479)	(2.7%)	-	(18,240)	0.0%	
8,738	6,659	(2,079)	(31.2%)	12,421	3,683	29.7%	Finance	62,424	66,592	4,168	6.3%	118,778	56,354	47.4%	
1,162	2,115	953	45.1%	2,231	1,069	47.9%	Public Relations	15,514	21,150	5,637	26.7%	35,455	19,942	56.2%	
-	1,746	1,746	100.0%	50,677	50,677	100.0%	Information Technology	20,953	17,461	(3,492)	(20.0%)	372,188	351,234	94.4%	
2,210	2,363	152	6.4%	-	(2,210)	0.0%	Project MGMT Office	20,422	23,628	3,206	13.6%	23,112	2,690	11.6%	
512	1,001	490	48.9%	-	(512)	0.0%	Corporate Quality	12,016	10,013	(2,003)	(20.0%)	6,692	(5,324)	(79.6%)	
<b>70,515</b>	<b>77,890</b>	<b>7,375</b>	<b>9.5%</b>	<b>127,143</b>	<b>56,629</b>	<b>44.5%</b>	<b>Total Overhead Allocations</b>	<b>754,663</b>	<b>778,899</b>	<b>24,236</b>	<b>3.1%</b>	<b>1,194,292</b>	<b>439,629</b>	<b>36.8%</b>	
<b>813,293</b>	<b>1,762,998</b>	<b>949,705</b>	<b>53.9%</b>	<b>1,539,202</b>	<b>725,909</b>	<b>47.2%</b>	<b>Total Expenses</b>	<b>11,275,867</b>	<b>17,616,081</b>	<b>6,340,214</b>	<b>36.0%</b>	<b>22,117,930</b>	<b>10,842,063</b>	<b>49.0%</b>	
<b>\$ (813,293)</b>	<b>\$ (1,762,998)</b>	<b>\$ 949,705</b>	<b>(53.9%)</b>	<b>\$ (1,539,202)</b>	<b>\$ 725,909</b>	<b>(47.2%)</b>	<b>Net Margin</b>	<b>\$ (11,275,867)</b>	<b>\$ (17,616,081)</b>	<b>\$ 6,340,214</b>	<b>(36.0%)</b>	<b>\$ (22,117,930)</b>	<b>\$ 10,842,063</b>	<b>(49.0%)</b>	



## Pharmacy Services Statement of Revenues and Expenditures

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
-	-	-	0.0%	-	-	0.0%	<b>Total Revenues</b>	-	-	-	0.0%	-	-	0.0%
<i>Direct Operational Expenses:</i>														
208,746	237,054	28,308	11.9%	212,572	3,826	1.8%	Salaries and Wages	2,107,708	2,338,209	230,501	9.9%	2,279,066	171,358	7.5%
66,114	76,148	10,034	13.2%	72,327	6,213	8.6%	Benefits	660,579	756,064	95,485	12.6%	697,113	36,534	5.2%
1,058	1,900	842	44.3%	7,627	6,569	86.1%	Purchased Services	11,953	19,000	7,047	37.1%	64,824	52,871	81.6%
5,866	15,292	9,426	61.6%	6,864	998	14.5%	Other Supplies	58,231	152,920	94,689	61.9%	83,019	24,788	29.9%
(17,465)	6,600	24,065	364.6%	616	18,080	2,936.2%	Drugs	(46,943)	66,000	112,943	171.1%	68,482	115,425	168.5%
1,965	784	(1,181)	(150.7%)	17,016	15,051	88.5%	Repairs & Maintenance	4,375	7,840	3,465	44.2%	174,610	170,236	97.5%
7,368	8,973	1,605	17.9%	6,795	(573)	(8.4%)	Lease & Rental	77,833	89,730	11,897	13.3%	66,442	(11,390)	(17.1%)
-	-	-	0.0%	-	-	0.0%	Utilities	-	-	-	0.0%	-	-	0.0%
1,186	13,564	12,378	91.3%	9,020	7,833	86.8%	Other Expense	59,924	135,640	75,716	55.8%	57,008	(2,916)	(5.1%)
2,349	1,898	(451)	(23.8%)	1,898	(451)	(23.8%)	Insurance	20,893	18,980	(1,913)	(10.1%)	13,511	(7,381)	(54.6%)
<b>277,189</b>	<b>362,213</b>	<b>85,024</b>	<b>23.5%</b>	<b>334,735</b>	<b>57,547</b>	<b>17.2%</b>	<b>Total Operational Expenses</b>	<b>2,954,552</b>	<b>3,584,383</b>	<b>629,831</b>	<b>17.6%</b>	<b>3,504,077</b>	<b>549,524</b>	<b>15.7%</b>
<b>Net Performance before Overhead</b>														
<b>(277,189)</b>	<b>(362,213)</b>	<b>85,024</b>	<b>(23.5%)</b>	<b>(334,735)</b>	<b>57,547</b>	<b>(17.2%)</b>	<b>Allocations</b>	<b>(2,954,552)</b>	<b>(3,584,383)</b>	<b>629,831</b>	<b>(17.6%)</b>	<b>(3,504,077)</b>	<b>549,524</b>	<b>(15.7%)</b>
<i>Overhead Allocations:</i>														
669	464	(205)	(44.1%)	267	(402)	(150.9%)	Risk Mgt	5,197	4,642	(555)	(12.0%)	3,278	(1,919)	(58.5%)
-	-	-	0.0%	-	-	0.0%	Rev Cycle	-	-	-	0.0%	-	-	0.0%
1,055	622	(433)	(69.6%)	-	(1,055)	0.0%	Internal Audit	4,770	6,219	1,448	23.3%	6,624	1,854	28.0%
5,639	5,366	(273)	(5.1%)	5,037	(602)	(11.9%)	Administration	61,127	53,657	(7,470)	(13.9%)	55,564	(5,563)	(10.0%)
5,947	6,013	67	1.1%	5,257	(689)	(13.1%)	Human Resources	63,956	60,133	(3,823)	(6.4%)	54,286	(9,669)	(17.8%)
6,768	2,784	(3,984)	(143.1%)	2,671	(4,097)	(153.4%)	Legal	33,406	27,838	(5,568)	(20.0%)	26,167	(7,239)	(27.7%)
543	1,299	757	58.3%	1,189	646	54.4%	Records	11,825	12,995	1,170	9.0%	11,124	(701)	(6.3%)
105	1,112	1,007	90.5%	709	604	85.2%	Compliance	9,061	11,118	2,057	18.5%	13,534	4,473	33.1%
1,071	1,131	60	5.3%	-	(1,071)	0.0%	Comm Engage Plan	11,635	11,313	(322)	(2.8%)	-	(11,635)	0.0%
8,522	13,382	4,861	36.3%	-	(8,522)	0.0%	IT Operations	113,739	133,824	20,086	15.0%	-	(113,739)	0.0%
1,321	1,364	43	3.1%	-	(1,321)	0.0%	IT Security	13,569	13,636	67	0.5%	-	(13,569)	0.0%
6,500	5,113	(1,387)	(27.1%)	5,271	(1,229)	(23.3%)	Finance	46,436	51,126	4,690	9.2%	50,407	3,970	7.9%
864	1,624	759	46.8%	947	83	8.7%	Public Relations	11,540	16,238	4,698	28.9%	15,046	3,506	23.3%
326	1,341	1,014	75.6%	21,506	21,180	98.5%	Information Technology	16,087	13,406	(2,681)	(20.0%)	157,948	141,861	89.8%
661	769	108	14.0%	-	(661)	0.0%	Corporate Quality	9,218	7,688	(1,531)	(19.9%)	2,840	(6,379)	(224.6%)
1,644	1,814	170	9.4%	-	(1,644)	0.0%	Project MGMT Office	15,192	18,140	2,949	16.3%	9,808	(5,384)	(54.9%)
-	-	-	0.0%	-	-	0.0%	Managed Care Contract	-	-	-	0.0%	-	-	0.0%
<b>41,634</b>	<b>44,197</b>	<b>2,563</b>	<b>5.8%</b>	<b>42,854</b>	<b>1,220</b>	<b>2.8%</b>	<b>Total Overhead Allocations</b>	<b>426,757</b>	<b>441,972</b>	<b>15,215</b>	<b>3.4%</b>	<b>406,627</b>	<b>(20,130)</b>	<b>(5.0%)</b>
<b>318,823</b>	<b>406,410</b>	<b>87,587</b>	<b>21.6%</b>	<b>377,589</b>	<b>58,767</b>	<b>15.6%</b>	<b>Total Expenses</b>	<b>3,381,309</b>	<b>4,026,355</b>	<b>645,046</b>	<b>16.0%</b>	<b>3,910,703</b>	<b>529,394</b>	<b>13.5%</b>
<b>\$ (318,823)</b>	<b>\$ (406,410)</b>	<b>\$ 87,587</b>	<b>(21.6%)</b>	<b>\$ (377,589)</b>	<b>\$ 58,767</b>	<b>(15.6%)</b>	<b>Net Margin</b>	<b>\$ (3,381,309)</b>	<b>\$ (4,026,355)</b>	<b>\$ 645,046</b>	<b>(16.0%)</b>	<b>\$ (3,910,703)</b>	<b>\$ 529,394</b>	<b>(13.5%)</b>

# School Health Statement of Revenues and Expenditures

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ (0)	\$ 231,917	\$ (231,917)	(100.0%)	\$ 232,115	\$ (232,115)	(100.0%)	Palm Beach County School District	\$ 2,945,330	\$ 2,319,170	\$ 626,160	27.0%	\$ 2,369,899	\$ 575,431	24.3%	
-	0	-	0.0%	0	-	0.0%	Grants	-	-	-	0.0%	108,084	(108,084)	(100.0%)	
<b>(0)</b>	<b>231,917</b>	<b>(231,917)</b>	<b>(100.0%)</b>	<b>232,115</b>	<b>(232,115)</b>	<b>(100.0%)</b>	<b>Total Revenue</b>	<b>2,945,330</b>	<b>2,319,170</b>	<b>626,160</b>	<b>27.0%</b>	<b>2,477,983</b>	<b>467,347</b>	<b>18.9%</b>	
<i>Direct Operational Expenses:</i>															
1,070,603	1,103,478	32,875	3.0%	801,099	(269,503)	(33.6%)	Salaries and Wages	10,524,281	11,228,825	704,544	6.3%	11,213,847	689,566	6.1%	
333,020	390,523	57,503	14.7%	248,998	(84,023)	(33.7%)	Benefits	3,451,882	3,907,504	455,622	11.7%	4,222,842	770,961	18.3%	
-	-	-	0.0%	-	-	0.0%	Purchased Services	-	-	-	0.0%	-	-	0.0%	
-	18,201	18,201	100.0%	10	10	100.0%	Medical Supplies	78,854	182,010	103,156	56.7%	32,259	(46,595)	(144.4%)	
158	3,750	3,592	95.8%	-	(158)	0.0%	Other Supplies	42,506	37,500	(5,006)	(13.3%)	23,380	(19,126)	(81.8%)	
-	84	84	100.0%	8,335	8,335	100.0%	Repairs & Maintenance	-	840	840	100.0%	117,154	117,154	100.0%	
280	230	(50)	(21.7%)	-	(280)	0.0%	Lease & Rental	2,745	2,300	(445)	(19.3%)	-	(2,745)	0.0%	
-	-	-	0.0%	-	-	0.0%	Utilities	-	-	-	0.0%	-	-	0.0%	
2,217	2,467	250	10.1%	27	(2,190)	(8,060.6%)	Other Expense	9,369	24,670	15,301	62.0%	5,672	(3,697)	(65.2%)	
<b>1,406,279</b>	<b>1,518,733</b>	<b>112,454</b>	<b>7.4%</b>	<b>1,058,470</b>	<b>(347,809)</b>	<b>(32.9%)</b>	<b>Total Operational Expenses</b>	<b>14,109,636</b>	<b>15,383,649</b>	<b>1,274,013</b>	<b>8.3%</b>	<b>15,615,155</b>	<b>1,505,518</b>	<b>9.6%</b>	
<b>Net Performance before Overhead</b>															
<b>(1,406,279)</b>	<b>(1,286,816)</b>	<b>(119,463)</b>	<b>9.3%</b>	<b>(826,355)</b>	<b>(579,924)</b>	<b>70.2%</b>	<b>Allocations</b>	<b>(11,164,306)</b>	<b>(13,064,479)</b>	<b>1,900,173</b>	<b>(14.5%)</b>	<b>(13,137,172)</b>	<b>1,972,865</b>	<b>(15.0%)</b>	
<i>Overhead Allocations:</i>															
2,816	1,986	(830)	(41.8%)	1,196	(1,620)	(135.4%)	Risk Mgt	21,871	19,859	(2,012)	(10.1%)	14,700	(7,171)	(48.8%)	
4,438	2,661	(1,778)	(66.8%)	-	(4,438)	0.0%	Internal Audit	20,076	26,606	6,529	24.5%	29,705	9,628	32.4%	
7,774	7,662	(111)	(1.5%)	8,217	443	5.4%	Home Office Facilities	70,445	76,623	6,178	8.1%	74,156	3,711	5.0%	
23,730	22,956	(774)	(3.4%)	22,586	(1,144)	(5.1%)	Administration	257,257	229,558	(27,698)	(12.1%)	249,158	(8,099)	(3.3%)	
36,572	39,534	2,961	7.5%	38,073	1,501	3.9%	Human Resources	474,403	395,336	(79,067)	(20.0%)	393,126	(81,277)	(20.7%)	
28,596	11,910	(16,687)	(140.1%)	11,975	(16,621)	(138.8%)	Legal	140,704	119,099	(21,605)	(18.1%)	117,337	(23,367)	(19.9%)	
2,283	5,560	3,276	58.9%	5,330	3,047	57.2%	Records	49,767	55,595	5,828	10.5%	49,880	114	0.2%	
442	4,757	4,314	90.7%	3,180	2,738	86.1%	Compliance	38,133	47,566	9,433	19.8%	60,687	22,554	37.2%	
4,509	4,840	332	6.8%	-	(4,509)	0.0%	Comm Engage Plan	48,967	48,402	(565)	(1.2%)	-	(48,967)	0.0%	
35,865	57,254	21,389	37.4%	-	(35,865)	0.0%	IT Operations	478,680	572,538	93,858	16.4%	-	(478,680)	0.0%	
5,560	5,834	274	4.7%	-	(5,560)	0.0%	IT Security	57,105	58,338	1,233	2.1%	-	(57,105)	0.0%	
27,356	21,873	(5,483)	(25.1%)	23,637	(3,719)	(15.7%)	Finance	195,431	218,731	23,299	10.7%	226,031	30,600	13.5%	
3,638	6,947	3,310	47.6%	4,246	608	14.3%	Public Relations	48,569	69,471	20,902	30.1%	67,471	18,902	28.0%	
1,425	5,735	4,311	75.2%	96,438	95,013	98.5%	Information Technology	67,753	57,353	(10,400)	(18.1%)	708,264	640,511	90.4%	
6,920	7,761	841	10.8%	-	(6,920)	0.0%	Project MGMT Office	63,936	77,610	13,674	17.6%	43,982	(19,954)	(45.4%)	
2,781	3,289	507	15.4%	-	(2,781)	0.0%	Corporate Quality	38,797	32,889	(5,908)	(18.0%)	12,735	(26,062)	(204.7%)	
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
194,705	210,557	15,852	7.5%	214,878	20,173	9.4%	Total Overhead Allocations	2,071,893	2,105,572	33,679	1.6%	2,047,232	(24,661)	(1.2%)	
<b>1,600,984</b>	<b>1,729,290</b>	<b>128,307</b>	<b>7.4%</b>	<b>1,273,348</b>	<b>(327,636)</b>	<b>(25.7%)</b>	<b>Total Expenses</b>	<b>16,181,530</b>	<b>17,489,221</b>	<b>1,307,691</b>	<b>7.5%</b>	<b>17,662,387</b>	<b>1,480,858</b>	<b>8.4%</b>	
<b>\$ (1,600,984)</b>	<b>\$ (1,497,373)</b>	<b>\$ (103,611)</b>	<b>6.9%</b>	<b>\$ (1,041,233)</b>	<b>\$ (559,750)</b>	<b>53.8%</b>	<b>Net Margin</b>	<b>\$ (13,236,200)</b>	<b>\$ (15,170,051)</b>	<b>\$ 1,933,851</b>	<b>(12.7%)</b>	<b>\$ (15,184,404)</b>	<b>\$ 1,948,205</b>	<b>(12.8%)</b>	

## Sponsored Programs

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
<i>Sponsored Programs:</i>													
708,996	708,996	0	0.0%	708,996	-	0.0%	7,089,956	7,089,960	4	0.0%	7,089,956	-	0.0%
110,511	125,000	14,489	11.6%	113,692	3,181	2.8%	925,605	1,250,000	324,395	26.0%	1,002,479	76,874	7.7%
-	2,500	2,500	100.0%	10,000	10,000	100.0%	-	25,000	25,000	100.0%	10,000	10,000	100.0%
<b>819,506</b>	<b>836,496</b>	<b>16,990</b>	<b>2.0%</b>	<b>832,687</b>	<b>13,181</b>	<b>1.6%</b>	<b>8,015,561</b>	<b>8,364,960</b>	<b>349,399</b>	<b>4.2%</b>	<b>8,102,435</b>	<b>86,874</b>	<b>1.1%</b>
<i>Direct Operational Expenses:</i>													
8,793	14,121	5,328	37.7%	13,852	5,059	36.5%	92,188	139,288	47,100	33.8%	148,926	56,738	38.1%
3,184	6,279	3,095	49.3%	5,948	2,764	46.5%	31,432	62,318	30,886	49.6%	57,494	26,062	45.3%
-	50	50	100.0%	-	-	0.0%	10	500	491	98.1%	382	373	97.5%
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	55,000	55,000	100.0%
21	454	433	95.3%	-	(21)	0.0%	2,721	4,540	1,819	40.1%	5,279	2,558	48.5%
<b>11,999</b>	<b>20,904</b>	<b>8,905</b>	<b>3</b>	<b>19,800</b>	<b>7,802</b>	<b>39.4%</b>	<b>126,350</b>	<b>206,646</b>	<b>80,296</b>	<b>63.6%</b>	<b>267,081</b>	<b>140,732</b>	<b>52.7%</b>
<b>\$ 831,505</b>	<b>\$ 857,400</b>	<b>\$ 25,895</b>	<b>3.0%</b>	<b>\$ 852,488</b>	<b>\$ 20,983</b>	<b>2.5%</b>	<b>\$ 8,141,910</b>	<b>\$ 8,571,606</b>	<b>\$ 429,696</b>	<b>5.0%</b>	<b>\$ 8,369,516</b>	<b>\$ 227,606</b>	<b>2.7%</b>

### General Fund Statement of Revenues and Expenditures by Month

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Year to Date
<b>Revenues:</b>													
Ad Valorem Taxes	\$ -	\$ 11,309,327	\$ 113,608,685	\$ 3,600,591	\$ 5,167,017	\$ 2,615,797	\$ 6,542,362	\$ 1,355,359	\$ 694,365	\$ 2,403,695	\$ -	\$ -	\$ 147,297,197
Premiums													-
Patient Revenue, Net	38,235	161,158	215,563	195,556	147,541	21,119	131,370	70,129	82,473	456,562	-	-	1,519,706
Intergovernmental Revenue	231,917	231,917	231,917	231,917	927,667	231,917	231,917	231,917	1,021,046	(0)	-	-	3,572,130
Grants	-	-	-	-	-	-	-	-	-	-	-	-	-
Interest Earnings	158,408	147,222	143,533	141,543	125,590	130,224	125,229	101,105	92,911	160,361	-	-	1,326,125
Unrealized Gain/(Loss)-Investments	(206,894)	(66,642)	(51,801)	(139,529)	(266,557)	(162,231)	(33,570)	13,568	(227,144)	103,064	-	-	(1,037,737)
Other Financial Assistance	-	-	-	-	-	5,127,280	(1,649)	-	-	(78,847)	-	-	5,046,784
Other Revenue	63,590	175,729	1,393,054	23,445	68,010	31,159	101,161	46,288	56,816	11,829	-	-	1,971,081
<b>Total Revenues</b>	<b>\$ 285,255</b>	<b>\$ 11,958,710</b>	<b>\$ 115,540,950</b>	<b>\$ 4,053,523</b>	<b>\$ 6,169,267</b>	<b>\$ 7,995,265</b>	<b>\$ 7,096,820</b>	<b>\$ 1,818,366</b>	<b>\$ 1,720,468</b>	<b>\$ 3,056,662</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 159,695,286</b>
<b>Expenditures:</b>													
Salaries and Wages	3,189,482	3,111,543	2,975,420	3,029,754	2,769,394	3,114,176	3,065,449	3,220,980	3,062,132	3,139,718	-	-	30,678,049
Benefits	998,042	911,723	1,212,841	990,225	1,023,711	695,254	895,325	1,090,736	957,740	969,946	-	-	9,745,543
Purchased Services	734,073	758,271	719,752	768,563	641,679	1,107,672	1,255,997	844,966	1,260,989	850,289	-	-	8,942,252
Medical Supplies	13,396	16,488	4,646	2,557	20,441	22,973	11,286	5,736	2,466	4,815	-	-	104,804
Other Supplies	37,422	135,078	69,928	335,691	154,277	600,885	100,693	236,223	156,211	74,382	-	-	1,900,791
Contracted Physician Expense	4,167	4,167	4,167	-	-	-	-	-	-	-	-	-	12,500
Medical Services	819,433	877,365	1,016,722	852,671	865,740	884,162	1,401,501	1,488,764	1,312,402	590,669	-	-	10,109,429
Drugs	(24,554)	(23,726)	4,927	29,404	(36,791)	17,982	69,273	(9,094)	(56,898)	(17,465)	-	-	(46,943)
Repairs & Maintenance	312,118	525,062	547,098	488,808	366,645	571,206	800,267	645,753	844,114	202,979	-	-	5,304,050
Lease & Rental	151,518	145,084	184,407	158,915	176,441	149,002	115,304	155,828	204,730	163,103	-	-	1,604,331
Utilities	9,467	9,523	7,957	7,783	8,286	8,037	8,205	8,424	4,913	13,626	-	-	86,223
Other Expense	416,870	671,743	2,420,049	493,346	610,776	587,704	596,511	498,028	559,661	448,188	-	-	7,302,876
Insurance	52,241	64,556	59,871	58,724	58,399	58,678	58,677	59,583	61,633	65,387	-	-	597,748
Sponsored Programs	772,711	783,439	782,962	755,982	819,287	819,287	821,829	820,619	819,938	819,506	-	-	8,015,561
<b>Total Operational Expenditures</b>	<b>7,486,386</b>	<b>7,990,316</b>	<b>10,010,746</b>	<b>7,972,421</b>	<b>7,478,285</b>	<b>8,637,020</b>	<b>9,200,317</b>	<b>9,066,546</b>	<b>9,190,031</b>	<b>7,325,143</b>	<b>-</b>	<b>-</b>	<b>84,357,213</b>
Net Performance before Overhead Allocations	\$ (7,201,131)	\$ 3,968,394	\$ 105,530,204	\$ (3,918,898)	\$ (1,309,019)	\$ (641,755)	\$ (2,103,498)	\$ (7,248,181)	\$ (7,469,563)	\$ (4,268,481)	\$ -	\$ -	\$ 75,338,073
Overhead Allocations	(1,321,067)	(1,530,952)	(1,808,686)	(1,789,027)	(1,549,725)	(2,231,113)	(1,679,208)	(1,996,680)	(2,036,124)	(1,534,358)	-	-	(17,476,939)
<b>Total Expenses</b>	<b>6,165,320</b>	<b>6,459,365</b>	<b>8,202,060</b>	<b>6,183,394</b>	<b>5,928,560</b>	<b>6,405,907</b>	<b>7,521,110</b>	<b>7,069,866</b>	<b>7,153,907</b>	<b>5,790,786</b>	<b>-</b>	<b>-</b>	<b>66,880,274</b>
<b>Net Margin</b>	<b>\$ (5,880,064)</b>	<b>\$ 5,499,345</b>	<b>\$ 107,338,890</b>	<b>\$ (2,129,871)</b>	<b>\$ 240,706</b>	<b>\$ 1,589,358</b>	<b>\$ (424,290)</b>	<b>\$ (5,251,501)</b>	<b>\$ (5,433,438)</b>	<b>\$ (2,734,123)</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 92,815,013</b>
<b>General Fund Support/ Transfer In (Out)</b>	<b>\$ (3,492,667)</b>	<b>\$ (1,229,915)</b>	<b>\$ (4,572,336)</b>	<b>\$ (1,222,165)</b>	<b>\$ (1,884,241)</b>	<b>\$ (1,253,623)</b>	<b>\$ (957,905)</b>	<b>\$ (7,364,728)</b>	<b>\$ (2,221,363)</b>	<b>\$ (1,421,844)</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ (25,620,787)</b>



General Fund Program Statistics

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Current Year Total	Prior Year Total
<b>Aeromedical</b>														
Patients Transported - Actual	19	29	46	41	44	45	55	49	43	50			421	469
Patients Transported - Budget	50	50	50	60	53	54	50	49	45	47			508	529
Variance	(31)	(21)	(4)	(19)	(9)	(9)	5	-	(2)	3	-	-	(87)	(60)
Actual Hours Available for Service	432	718	729	741	645	722	930	1,116	1,040	1,116			8,189	10,547
Service Hours Utilized	25.0	48.0	70.0	58.0	66.0	68.0	85.0	79.0	66.0	83.0			648	671
Utilization %	5.8%	6.7%	9.6%	7.8%	10.2%	9.4%	9.1%	7.1%	6.3%	7.4%			7.9%	6.4%
# of Flights - Training/Public Education	-	-	-	1	-	1	9	14	13	5			43	44
# of Flights - Maintenance	7	2	5	9	8	6	8	4	8	4			61	89
<b>Trauma</b>														
New Trauma Patients - Actual	375	375	469	449	395	473	440	450	425	461			4,312	3,884
New Trauma Patients - Budget	399	399	399	399	399	399	399	399	399	399			3,990	3,950
Variance	(24)	(24)	70	50	(4)	74	41	51	26	62	-	-	322	(66)
<b>School Health</b>														
Medical Events	23,436	12,837	10,863	16,732	18,970	19,438	23,963	24,864	17,856	-			168,959	208,937
Screenings	15,444	21,308	16,728	21,545	20,858	16,294	23,951	14,492	6,595	-			157,215	122,580
Total Events- Actual	38,880	34,145	27,591	38,277	39,828	35,732	47,914	39,356	24,451	-	-	-	326,174	331,517
Total Events- Budget	44,326	35,717	35,502	43,311	42,584	45,622	52,682	51,278	-	-			351,022	469,744
<b>Pharmacy</b>														
Total Prescriptions Filled at In-House Pharmacies	16,335	12,569	14,010	14,035	14,344	16,178	15,404	14,681	15,762	11,383			144,701	184,435
Total Prescriptions Filled at Retail Pharmacies	48	58	57	37	14	8	2	2	24	36			286	1,815
Total Prescriptions Filled Inhouse/Retail- Actual	16,383	12,627	14,067	14,072	14,358	16,186	15,406	14,683	15,786	11,419	-	-	144,987	186,250
Total Prescriptions Filled- Budget	23,973	20,608	19,946	22,591	20,791	21,344	22,181	20,959	19,436	21,257			213,086	220,128



# **SUPPLEMENTAL INFORMATION**

## **HEALEY CENTER**

# Healey Center Statement of Revenues and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 1,219,939	\$ 1,243,281	\$ (23,342)	(1.9%)	\$ 1,174,093	\$ 45,847	3.9%	<b>Gross Patient Revenue</b>	\$ 12,141,552	\$ 12,192,182	\$ (50,630)	(0.4%)	\$ 11,964,845	\$ 176,706	1.5%	
109,715	91,682	(18,033)	(19.7%)	117,729	8,014	6.8%	Contractual Allowances	955,216	899,073	(56,143)	(6.2%)	1,199,587	244,372	20.4%	
330,834	326,072	(4,762)	(1.5%)	315,536	(15,298)	(4.8%)	Charity Care	3,362,167	3,197,608	(164,559)	(5.1%)	3,146,837	(215,330)	(6.8%)	
13,431	23,110	9,679	41.9%	51,807	38,377	74.1%	Bad Debt	246,645	226,625	(20,020)	(8.8%)	252,395	5,750	2.3%	
453,980	440,864	(13,116)	(3.0%)	485,073	31,093	6.4%	Total Contractuals and Bad Debt	4,564,027	4,323,306	(240,721)	(5.6%)	4,598,819	34,792	0.8%	
<b>765,960</b>	<b>802,417</b>	<b>(36,457)</b>	<b>(4.5%)</b>	<b>689,020</b>	<b>76,939</b>	<b>11.2%</b>	<b>Net Patient Revenue</b>	<b>7,577,524</b>	<b>7,868,876</b>	<b>(291,352)</b>	<b>(3.7%)</b>	<b>7,366,026</b>	<b>211,498</b>	<b>2.9%</b>	
62.79%	64.54%			58.69%			Collection %	62.41%	64.54%			61.56%			
758,333	758,333	0	0.0%	758,333	-	0.0%	PBC Interlocal	7,583,333	7,583,330	3	0.0%	7,583,333	-	0.0%	
-	-	-	0.0%	197,392	(197,392)	(100.0%)	Other Financial Assistance	222,045	-	222,045	0.0%	568,152	(346,107)	(60.9%)	
1,306	2,062	(756)	(36.7%)	141	1,164	824.6%	Other Revenues	11,960	20,620	(8,660)	(42.0%)	28,772	(16,812)	(58.4%)	
759,639	760,395	(756)	(0)	955,866	(196,227)	(20.5%)	Total Other Revenues	7,817,339	7,603,950	213,389	2.8%	8,180,257	(362,918)	(4.4%)	
<b>1,525,599</b>	<b>1,562,812</b>	<b>(37,213)</b>	<b>(2.4%)</b>	<b>1,644,886</b>	<b>(119,288)</b>	<b>(7.3%)</b>	<b>Total Revenues</b>	<b>15,394,863</b>	<b>15,472,826</b>	<b>(77,963)</b>	<b>(0.5%)</b>	<b>15,546,283</b>	<b>(151,420)</b>	<b>(1.0%)</b>	
<i>Direct Operational Expenses:</i>															
1,007,992	1,014,395	6,403	0.6%	1,019,250	11,257	1.1%	Salaries and Wages	9,797,622	9,956,137	158,515	1.6%	9,797,686	64	0.0%	
329,435	366,509	37,074	10.1%	364,306	34,872	9.6%	Benefits	3,385,949	3,634,738	248,789	6.8%	3,540,326	154,377	4.4%	
62,261	57,952	(4,309)	(7.4%)	62,088	(173)	(0.3%)	Purchased Services	537,147	579,520	42,373	7.3%	718,474	181,326	25.2%	
48,758	46,053	(2,705)	(5.9%)	67,451	18,693	27.7%	Medical Supplies	533,488	460,530	(72,958)	(15.8%)	498,801	(34,687)	(7.0%)	
59,469	77,694	18,225	23.5%	48,174	(11,295)	(23.4%)	Other Supplies	666,843	776,940	110,097	14.2%	649,420	(17,423)	(2.7%)	
2,078	1,975	(103)	(5.2%)	1,004	(1,074)	(107.0%)	Contracted Physician Expense	12,085	7,665	(4,420)	(36.6%)	10,291	(1,795)	(17.4%)	
2,578	4,500	1,922	42.7%	5,166	2,589	50.1%	Medical Services	149,079	45,000	(104,079)	(231.3%)	42,865	(106,214)	(247.8%)	
30,238	33,750	3,513	10.4%	27,964	(2,274)	(8.1%)	Drugs	306,586	337,500	30,914	9.2%	256,480	(50,106)	(19.5%)	
25,823	25,426	(397)	(1.6%)	14,786	(11,037)	(74.6%)	Repairs & Maintenance	242,756	254,260	11,504	4.5%	256,169	13,413	5.2%	
1,536	1,290	(246)	(19.1%)	1,300	(236)	(18.2%)	Lease & Rental	13,971	12,900	(1,071)	(8.3%)	11,429	(2,542)	(22.2%)	
37,214	40,875	3,661	9.0%	38,637	1,423	3.7%	Utilities	362,146	408,750	46,604	11.4%	371,295	9,150	2.5%	
9,968	14,429	4,461	30.9%	20,922	10,954	52.4%	Other Expense	95,614	144,290	48,676	33.7%	94,701	(913)	(1.0%)	
7,713	6,889	(824)	(12.0%)	7,480	(233)	(3.1%)	Insurance	70,921	68,890	(2,031)	(2.9%)	57,847	(13,074)	(22.6%)	
1,625,063	1,691,737	66,674	3.9%	1,678,529	53,466	3.2%	Total Operational Expenses	16,174,207	16,699,205	524,998	3.1%	16,305,783	131,576	0.8%	
<b>Net Performance before Depreciation</b>															
<b>(99,465)</b>	<b>(128,925)</b>	<b>29,460</b>	<b>(22.9%)</b>	<b>(33,642)</b>	<b>(65,822)</b>	<b>195.7%</b>	<b>&amp; Overhead Allocations</b>	<b>(779,344)</b>	<b>(1,226,379)</b>	<b>447,035</b>	<b>(36.5%)</b>	<b>(759,500)</b>	<b>(19,844)</b>	<b>2.6%</b>	
79,533	78,333	(1,200)	(1.5%)	78,813	(720)	(0.9%)	Depreciation	792,035	783,330	(8,705)	(1.1%)	784,673	(7,362)	(0.9%)	
<i>Overhead Allocations:</i>															
3,112	2,159	(953)	(44.1%)	1,238	(1,874)	(151.4%)	Risk Mgt	24,168	21,588	(2,581)	(12.0%)	15,214	(8,954)	(58.9%)	
4,905	2,892	(2,012)	(69.6%)	-	(4,905)	0.0%	Internal Audit	22,185	28,921	6,736	23.3%	30,743	8,557	27.8%	
26,223	24,954	(1,269)	(5.1%)	23,375	(2,848)	(12.2%)	Administration	284,279	249,539	(34,740)	(13.9%)	257,864	(26,415)	(10.2%)	
39,741	40,187	446	1.1%	35,984	(3,757)	(10.4%)	Human Resources	427,418	401,868	(25,550)	(6.4%)	371,559	(55,859)	(15.0%)	
31,475	12,947	(18,529)	(143.1%)	12,394	(19,081)	(154.0%)	Legal	155,358	129,465	(25,893)	(20.0%)	121,436	(33,922)	(27.9%)	
2,523	6,043	3,520	58.3%	5,516	2,993	54.3%	Records	54,994	60,434	5,440	9.0%	51,623	(3,371)	(6.5%)	
489	5,171	4,682	90.5%	3,292	2,803	85.2%	Compliance	42,139	51,706	9,568	18.5%	62,808	20,669	32.9%	
4,982	5,261	279	5.3%	-	(4,982)	0.0%	Comm Engage Plan	54,110	52,615	(1,495)	(2.8%)	-	(54,110)	0.0%	
39,632	62,237	22,605	36.3%	-	(39,632)	0.0%	IT Operations	528,960	622,372	93,412	15.0%	-	(528,960)	0.0%	
6,144	6,342	198	3.1%	-	(6,144)	0.0%	IT Security	63,103	63,416	313	0.5%	-	(63,103)	0.0%	
29,674	17,617	(12,057)	(68.4%)	-	(29,674)	0.0%	IT Applications	211,409	176,174	(35,235)	(20.0%)	-	(211,409)	0.0%	
35,124	33,076	(2,048)	(6.2%)	-	(35,124)	0.0%	Security Services	320,874	330,760	9,886	3.0%	-	(320,874)	0.0%	
30,229	23,777	(6,452)	(27.1%)	24,463	(5,766)	(23.6%)	Finance	215,959	237,769	21,810	9.2%	233,929	17,969	7.7%	
4,020	7,552	3,532	46.8%	4,394	375	8.5%	Public Relations	53,670	75,517	21,847	28.9%	69,828	16,158	23.1%	
1,518	6,235	4,716	75.6%	99,808	98,289	98.5%	Information Technology	74,814	62,345	(12,469)	(20.0%)	733,011	658,197	89.8%	
3,074	3,575	502	14.0%	-	(3,074)	0.0%	Corporate Quality	42,872	35,752	(7,120)	(19.9%)	13,180	(29,692)	(225.3%)	
7,647	8,437	789	9.4%	-	(7,647)	0.0%	Project MGMT Office	70,652	84,365	13,713	16.3%	45,519	(25,133)	(55.2%)	
270,511	268,461	(2,050)	(0.8%)	210,463	(60,047)	(28.5%)	Total Overhead Allocations	2,646,965	2,684,606	37,641	1.4%	2,006,712	(640,253)	(31.9%)	
<b>1,975,106</b>	<b>2,038,531</b>	<b>63,424</b>	<b>3.1%</b>	<b>1,967,805</b>	<b>(7,301)</b>	<b>(0.4%)</b>	<b>Total Expenses</b>	<b>19,613,208</b>	<b>20,167,141</b>	<b>553,933</b>	<b>2.7%</b>	<b>19,097,169</b>	<b>(516,039)</b>	<b>(2.7%)</b>	
<b>(449,508)</b>	<b>(475,719)</b>	<b>26,211</b>	<b>(5.5%)</b>	<b>(322,919)</b>	<b>(126,589)</b>	<b>39.2%</b>	<b>Net Margin</b>	<b>(4,218,345)</b>	<b>(4,694,315)</b>	<b>475,970</b>	<b>(10.1%)</b>	<b>(3,550,885)</b>	<b>(667,459)</b>	<b>18.8%</b>	
49,309	-	49,309	0.0%	-	49,309	0.0%	Capital Contributions	140,849	-	140,849	0.0%	-	140,849	0.0%	
<b>\$ 327,221</b>	<b>\$ 399,000</b>	<b>\$ (71,779)</b>	<b>(18.0%)</b>	<b>\$ 244,106</b>	<b>\$ (83,115)</b>	<b>(34.0%)</b>	<b>General Fund Support/Transfer In</b>	<b>\$ 3,285,461</b>	<b>\$ 3,925,000</b>	<b>\$ (639,539)</b>	<b>(16.3%)</b>	<b>\$ 2,766,212</b>	<b>\$ (519,249)</b>	<b>(18.8%)</b>	

### Healey Center Statement of Revenues and Expenses by Month

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Year to Date
<b>Gross Patient Revenue</b>	\$ 1,211,900	\$ 1,196,363	\$ 1,226,062	\$ 1,234,757	\$ 1,136,960	\$ 1,266,882	\$ 1,225,395	\$ 1,222,137	\$ 1,201,157	\$ 1,219,939	\$ -	\$ -	\$ 12,141,552
Contractual Allowances	140,804	47,683	111,948	76,057	61,142	74,804	172,011	109,401	51,651	109,715	-	-	955,216
Charity Care	329,734	348,071	317,308	373,912	336,631	408,673	213,188	353,205	350,612	330,834	-	-	3,362,167
Bad Debt	28,647	13,200	-	29,581	64,400	26,339	8,981	41,767	20,301	13,431	-	-	246,645
<b>Total Contractuals and Bad Debt</b>	<b>499,185</b>	<b>408,953</b>	<b>429,256</b>	<b>479,549</b>	<b>462,173</b>	<b>509,815</b>	<b>394,180</b>	<b>504,373</b>	<b>422,563</b>	<b>453,980</b>	<b>-</b>	<b>-</b>	<b>4,564,027</b>
<b>Net Patient Revenue</b>	<b>712,716</b>	<b>787,410</b>	<b>796,806</b>	<b>755,208</b>	<b>674,787</b>	<b>757,067</b>	<b>831,215</b>	<b>717,763</b>	<b>778,594</b>	<b>765,960</b>	<b>-</b>	<b>-</b>	<b>7,577,524</b>
Collections %	58.81%	65.82%	64.99%	61.16%	59.35%	59.76%	67.83%	58.73%	64.82%	62.79%	0.00%	0.00%	62.41%
PBC Interlocal	758,333	758,333	758,333	758,333	758,333	758,333	758,333	758,333	758,333	758,333	-	-	7,583,333
Other Financial Assistance	-	-	-	54,840	27,116	102,299	21,520	-	-	-	-	-	222,045
Other Revenues	10	1,688	822	1,683	146	1,378	2,318	1,003	1,607	1,306	-	-	11,960
<b>Total Other Revenues</b>	<b>758,343</b>	<b>760,021</b>	<b>759,155</b>	<b>814,857</b>	<b>785,595</b>	<b>862,010</b>	<b>782,172</b>	<b>775,606</b>	<b>759,940</b>	<b>759,639</b>	<b>-</b>	<b>-</b>	<b>7,817,339</b>
<b>Total Revenues</b>	<b>1,471,059</b>	<b>1,547,431</b>	<b>1,555,961</b>	<b>1,570,065</b>	<b>1,460,382</b>	<b>1,619,077</b>	<b>1,613,387</b>	<b>1,493,370</b>	<b>1,538,534</b>	<b>1,525,599</b>	<b>-</b>	<b>-</b>	<b>15,394,863</b>
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,142,186	946,754	1,023,941	867,242	895,350	950,798	1,034,001	954,670	974,689	1,007,992	-	-	9,797,622
Benefits	366,476	340,335	375,229	341,963	323,884	311,777	329,967	338,079	328,804	329,435	-	-	3,385,949
Purchased Services	52,581	47,198	48,968	53,954	45,209	59,546	56,398	43,278	67,754	62,261	-	-	537,147
Medical Supplies	37,009	47,907	46,804	51,803	59,416	65,985	46,644	73,985	55,178	48,758	-	-	533,488
Other Supplies	56,764	58,154	81,006	63,121	58,677	78,884	61,678	105,509	43,582	59,469	-	-	666,843
Contracted Physician Expense	1,003	1,205	512	1,214	1,220	1,050	1,590	1,485	729	2,078	-	-	12,085
Medical Services	2,727	39,204	7,717	16,772	9,244	13,542	21,302	25,235	10,757	2,578	-	-	149,079
Drugs	33,777	26,168	30,578	27,747	29,122	35,881	39,275	27,382	26,419	30,238	-	-	306,586
Repairs & Maintenance	19,330	26,782	24,070	39,918	20,018	21,263	34,845	14,482	16,225	25,823	-	-	242,756
Lease & Rental	1,064	1,064	1,340	1,437	1,480	1,482	1,496	1,433	1,639	1,536	-	-	13,971
Utilities	36,885	38,997	32,289	31,471	34,946	36,569	36,401	35,532	41,843	37,214	-	-	362,146
Other Expense	6,781	6,181	7,187	9,855	14,236	3,311	6,828	20,981	10,284	9,968	-	-	95,614
Insurance	6,826	6,826	6,826	6,826	6,826	6,826	6,826	7,713	7,713	7,713	-	-	70,921
<b>Total Operational Expenses</b>	<b>1,763,409</b>	<b>1,586,775</b>	<b>1,686,467</b>	<b>1,513,322</b>	<b>1,499,628</b>	<b>1,586,916</b>	<b>1,677,249</b>	<b>1,649,764</b>	<b>1,585,615</b>	<b>1,625,063</b>	<b>-</b>	<b>-</b>	<b>16,174,207</b>
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(292,350)</b>	<b>(39,344)</b>	<b>(130,506)</b>	<b>56,743</b>	<b>(39,246)</b>	<b>32,161</b>	<b>(63,863)</b>	<b>(156,394)</b>	<b>(47,081)</b>	<b>(99,465)</b>	<b>-</b>	<b>-</b>	<b>(779,344)</b>
Depreciation	78,770	78,571	78,671	79,792	79,365	79,304	79,304	79,402	79,323	79,533	-	-	792,035
<i>Overhead Allocations:</i>													
Risk Mgt	1,499	1,303	1,426	1,414	1,276	3,288	4,613	2,481	3,757	3,112	-	-	24,168
Internal Audit	194	1,949	1,511	1,639	846	929	5,324	1,564	3,325	4,905	-	-	22,185
Administration	17,872	19,459	27,584	36,982	26,826	32,856	33,733	30,876	31,867	26,223	-	-	284,279
Human Resources	36,071	31,182	65,754	40,918	51,387	65,199	2,790	54,785	39,591	39,741	-	-	427,418
Legal	8,027	13,032	11,771	10,312	10,728	19,126	28,947	8,258	13,683	31,475	-	-	155,358
Records	5,309	5,601	6,012	5,571	4,485	6,006	6,055	6,254	7,178	2,523	-	-	54,994
Compliance	3,586	3,789	2,328	5,972	3,862	6,162	(1,432)	7,944	9,439	489	-	-	42,139
Comm Engage Plan	5,033	4,557	5,170	4,932	4,515	4,935	5,531	5,945	8,509	4,982	-	-	54,110
IT Operations	37,850	52,665	52,784	71,980	55,330	81,437	32,834	53,553	50,896	39,632	-	-	528,960
IT Security	5,952	3,961	6,978	5,765	4,652	5,687	5,385	5,697	12,881	6,144	-	-	63,103
IT Applications	1,674	20,112	15,865	21,973	13,177	33,610	30,361	28,682	16,281	29,674	-	-	211,409
Security Services	29,700	29,277	32,295	32,479	29,825	33,011	32,302	34,057	32,803	35,124	-	-	320,874
Finance	22,145	21,188	21,292	22,101	18,247	19,178	17,921	19,488	24,169	30,229	-	-	215,959
Public Relations	8,542	6,215	2,694	3,916	5,702	7,171	4,205	6,907	4,298	4,020	-	-	53,670
Information Technology	7,321	6,514	6,971	8,053	8,369	7,596	8,178	8,695	11,599	1,518	-	-	74,814
Corporate Quality	3,802	5,395	3,693	3,906	4,444	4,621	5,858	3,675	4,404	3,074	-	-	42,872
Project MGMT Office	5,811	6,466	6,743	6,938	6,312	7,119	8,030	8,118	7,468	7,647	-	-	70,652
Managed Care Contract	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total Overhead Allocations</b>	<b>200,388</b>	<b>232,665</b>	<b>270,873</b>	<b>284,852</b>	<b>249,983</b>	<b>337,931</b>	<b>230,636</b>	<b>286,980</b>	<b>282,147</b>	<b>270,511</b>	<b>-</b>	<b>-</b>	<b>2,646,965</b>
<b>Total Expenses</b>	<b>2,042,567</b>	<b>1,898,011</b>	<b>2,036,010</b>	<b>1,877,966</b>	<b>1,828,977</b>	<b>2,004,151</b>	<b>1,987,189</b>	<b>2,016,146</b>	<b>1,947,085</b>	<b>1,975,106</b>	<b>-</b>	<b>-</b>	<b>19,613,208</b>
<b>Net Margin</b>	<b>(571,508)</b>	<b>(350,580)</b>	<b>(480,049)</b>	<b>(307,901)</b>	<b>(368,594)</b>	<b>(385,074)</b>	<b>(373,802)</b>	<b>(522,776)</b>	<b>(408,551)</b>	<b>(449,508)</b>	<b>-</b>	<b>-</b>	<b>(4,218,345)</b>
<b>Capital Contributions</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>General Fund Support/ Transfer In</b>	<b>\$ 492,738</b>	<b>\$ 272,009</b>	<b>\$ 386,429</b>	<b>\$ 264,266</b>	<b>\$ 226,339</b>	<b>\$ 295,719</b>	<b>\$ -</b>	<b>\$ 737,549</b>	<b>\$ 283,191</b>	<b>\$ 327,221</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 3,285,461</b>





Census	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Current Year Total	Prior Year Total
Admissions	17	7	13	9	10	5	8	8	6	7			90	104
Discharges	10	6	12	9	7	6	11	8	7	6			82	119
Average Daily Census	110	115	115	115	113	117	117	115	116	115			115	116
Budget Census	118	118	118	118	118	118	118	118	118	118			118	118
Occupancy % (120 licensed beds)	92%	96%	96%	96%	94%	97%	98%	96%	97%	96%			96%	97%
<b>Days By Payor Source:</b>														
Medicaid	-	-	-	-	-	-	-	-	-	-			-	367
Managed Care Medicaid	2,381	2,314	2,386	2,375	2,181	2,399	2,386	2,378	2,339	2,475			23,614	24,874
Medicare	103	186	179	144	98	87	108	145	131	98			1,279	950
Private Pay	-	-	-	-	-	23	30	31	59	40			183	8
Hospice	62	60	62	62	56	62	60	36	3	3			466	450
Charity	858	898	930	987	938	1,052	929	979	957	964			9,492	8,574
<b>Total Resident Days</b>	<b>3,404</b>	<b>3,458</b>	<b>3,557</b>	<b>3,568</b>	<b>3,273</b>	<b>3,623</b>	<b>3,513</b>	<b>3,569</b>	<b>3,489</b>	<b>3,580</b>			<b>35,034</b>	<b>35,223</b>



# **SUPPLEMENTAL INFORMATION**

## **LAKESIDE MEDICAL CENTER**

## Lakeside Medical Center Statement of Revenues and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 4,647,633	\$ 3,196,342	\$ 1,451,291	45.4%	\$ 5,184,733	\$ (537,100)	(10.4%)	\$ 43,523,048	\$ 37,290,411	\$ 6,232,637	16.7%	\$ 45,006,667	\$ (1,483,619)	(3.3%)
6,671,987	6,773,688	(101,701)	(1.5%)	5,567,650	1,104,337	19.8%	70,543,273	79,025,848	(8,482,575)	(10.7%)	67,514,407	3,028,866	4.5%
<b>11,319,620</b>	<b>9,970,030</b>	<b>1,349,590</b>	<b>13.5%</b>	<b>10,752,382</b>	<b>567,238</b>	<b>5.3%</b>	<b>114,066,321</b>	<b>116,316,259</b>	<b>(2,249,938)</b>	<b>(1.9%)</b>	<b>112,521,074</b>	<b>1,545,247</b>	<b>1.4%</b>
9,829,453	6,542,973	(3,286,480)	(50.2%)	6,853,067	(2,976,386)	(43.4%)	84,612,119	76,334,178	(8,277,941)	(10.8%)	74,976,541	(9,635,578)	(12.9%)
79,893	262,353	182,460	69.5%	347,391	267,498	77.0%	2,131,132	3,060,761	929,629	30.4%	2,324,407	193,275	8.3%
(808,897)	930,160	1,739,057	187.0%	1,143,261	1,952,157	170.8%	5,322,884	10,851,792	5,528,908	50.9%	17,162,483	11,839,598	69.0%
\$ 9,100,449	\$ 7,735,486	\$ (1,364,963)	(17.6%)	\$ 8,343,719	\$ (756,730)	(9.1%)	\$ 92,066,136	\$ 90,246,731	\$ (1,819,405)	(2.0%)	\$ 94,463,431	\$ 2,397,295	2.5%
163,652	143,224	20,428	14.3%	121,724	41,928	34%	1,520,971	1,432,240	88,731	6.2%	1,217,238	303,733	25.0%
<b>2,382,822</b>	<b>2,377,768</b>	<b>5,054</b>	<b>0.2%</b>	<b>2,530,387</b>	<b>(147,565)</b>	<b>(5.8%)</b>	<b>23,521,157</b>	<b>27,501,768</b>	<b>(3,980,611)</b>	<b>(14.5%)</b>	<b>19,274,881</b>	<b>4,246,276</b>	<b>22.0%</b>
21.05%	23.85%			23.53%			20.62%	23.64%		17.13%			
-	195	(195)	(100.0%)	-	-	0.0%	163,733	1,950	161,783	8,296.6%	1,501,380	(1,337,647)	(89.1%)
15,220,570	961,678	14,258,892	1,482.7%	812,976	14,407,594	1,772.2%	16,596,860	5,202,097	11,394,763	219.0%	3,956,874	12,639,985	319.4%
12,430	12,992	(562)	(4.3%)	11,462	968	8.4%	206,753	129,920	76,833	59.1%	196,091	10,661	5.4%
15,233,000	974,865	14,258,135	1,462.6%	824,438	14,408,562	1,747.7%	16,967,345	5,333,967	11,633,378	218.1%	5,654,346	11,313,000	200.1%
<b>17,615,822</b>	<b>3,352,633</b>	<b>14,263,189</b>	<b>425.4%</b>	<b>3,354,825</b>	<b>14,260,997</b>	<b>425.1%</b>	<b>40,488,502</b>	<b>32,835,735</b>	<b>7,652,767</b>	<b>23.3%</b>	<b>24,929,227</b>	<b>15,559,275</b>	<b>62.4%</b>
<i>Direct Operational Expenses:</i>													
1,725,387	1,722,993	(2,394)	(0.1%)	1,646,672	(78,715)	(4.8%)	16,390,174	16,955,252	565,078	3.3%	16,630,171	239,997	1.4%
448,660	478,159	29,499	6.2%	462,246	13,586	2.9%	4,559,180	4,745,800	186,620	3.9%	4,604,490	45,311	1.0%
268,939	261,079	(7,860)	(3.0%)	323,429	54,490	16.8%	2,851,516	2,603,013	(248,503)	(9.5%)	3,215,957	364,441	11.3%
97,252	133,852	36,600	27.3%	115,942	18,689	16.1%	1,202,824	1,267,283	64,459	5.1%	1,539,482	336,657	21.9%
114,802	96,826	(17,976)	(18.6%)	110,092	(4,710)	(4.3%)	1,209,247	954,039	(255,208)	(26.8%)	834,191	(375,056)	(45.0%)
691,766	696,223	4,457	0.6%	747,940	56,174	7.5%	6,865,009	6,962,230	97,221	1.4%	7,382,252	517,243	7.0%
62,974	86,845	23,871	27.5%	136,442	73,468	53.8%	1,135,075	822,235	(312,840)	(38.0%)	998,070	(137,004)	(13.7%)
81,978	68,056	(13,922)	(20.5%)	123,068	41,089	33.4%	578,372	680,560	102,188	15.0%	1,466,255	887,883	60.6%
48,050	52,239	4,189	8.0%	56,811	8,761	15.4%	502,290	522,390	20,100	3.8%	584,170	81,880	14.0%
52,131	74,667	22,536	30.2%	70,815	18,684	26.4%	622,432	746,670	124,238	16.6%	657,183	34,750	5.3%
49,754	71,062	21,308	30.0%	56,356	6,602	11.7%	600,651	710,620	109,969	15.5%	356,053	(244,598)	(68.7%)
16,754	16,660	(94)	(0.6%)	17,227	474	2.7%	166,271	166,600	329	0.2%	148,490	(17,781)	(12.0%)
3,658,446	3,758,661	100,215	2.7%	3,867,039	208,593	5.4%	36,683,042	37,136,692	453,650	1.2%	38,416,763	1,733,722	4.5%
<b>Net Performance before</b>													
13,957,376	(406,028)	14,363,404	(3,537.5%)	(512,214)	14,469,590	(2,824.9%)	3,805,461	(4,300,957)	8,106,418	(188.5%)	(13,487,536)	17,292,997	(128.2%)
<b>Depreciation &amp; Overhead Allocations</b>													

## Lakeside Medical Center Statement of Revenues and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
264,298	258,333	(5,965)	(2.3%)	257,052	(7,246)	(2.8%)	Depreciation	2,607,095	2,583,330	(23,765)	(0.9%)	2,571,071	(36,024)	(1.4%)
<i>Overhead Allocations:</i>														
6,910	4,794	(2,116)	(44.1%)	2,763	(4,147)	(150.1%)	Risk Mgt	53,668	47,938	(5,731)	(12.0%)	33,959	(19,709)	(58.0%)
68,161	55,191	(12,970)	(23.5%)	-	(68,161)	0.0%	Rev Cycle	551,603	551,912	310	0.1%	-	(551,603)	0.0%
10,891	6,422	(4,469)	(69.6%)	-	(10,891)	0.0%	Internal Audit	49,265	64,224	14,959	23.3%	68,622	19,357	28.2%
58,231	55,413	(2,818)	(5.1%)	52,177	(6,054)	(11.6%)	Administration	631,277	554,133	(77,144)	(13.9%)	575,587	(55,690)	(9.7%)
51,669	52,249	580	1.1%	46,666	(5,003)	(10.7%)	Human Resources	555,710	522,491	(33,219)	(6.4%)	481,854	(73,856)	(15.3%)
69,894	28,749	(41,145)	(143.1%)	27,665	(42,230)	(152.6%)	Legal	344,992	287,493	(57,499)	(20.0%)	271,063	(73,929)	(27.3%)
5,603	13,420	7,817	58.3%	12,312	6,710	54.5%	Records	122,122	134,202	12,080	9.0%	115,230	(6,892)	(6.0%)
1,085	11,482	10,397	90.5%	7,347	6,262	85.2%	Compliance	93,574	114,820	21,246	18.5%	140,196	46,622	33.3%
11,064	11,684	620	5.3%	-	(11,064)	0.0%	Comm Engage Plan	120,159	116,837	(3,322)	(2.8%)	-	(120,159)	0.0%
88,007	138,205	50,198	36.3%	-	(88,007)	0.0%	IT Operations	1,174,622	1,382,054	207,433	15.0%	-	(1,174,622)	0.0%
13,643	14,082	439	3.1%	-	(13,643)	0.0%	IT Security	140,128	140,822	695	0.5%	-	(140,128)	0.0%
260,981	127,038	(133,943)	(105.4%)	-	(260,981)	0.0%	IT Applications	1,314,436	1,270,379	(44,057)	(3.5%)	-	(1,314,436)	0.0%
40,142	37,801	(2,341)	(6.2%)	-	(40,142)	0.0%	Security Services	366,713	378,011	11,298	3.0%	-	(366,713)	0.0%
(61,300)	202,669	263,969	130.2%	-	61,300	0.0%	IT EPIC	1,481,064	2,026,694	545,630	26.9%	-	(1,481,064)	0.0%
67,127	52,800	(14,328)	(27.1%)	54,604	(12,523)	(22.9%)	Finance	479,565	527,996	48,431	9.2%	522,161	42,596	8.2%
8,926	16,770	7,843	46.8%	9,809	883	9.0%	Public Relations	119,181	167,696	48,514	28.9%	155,866	36,685	23.5%
3,372	13,845	10,473	75.6%	222,784	219,413	98.5%	Information Technology	166,134	138,445	(27,689)	(20.0%)	1,636,181	1,470,047	89.8%
6,825	7,939	1,114	14.0%	-	(6,825)	0.0%	Corporate Quality	95,202	79,391	(15,811)	(19.9%)	29,419	(65,783)	(223.6%)
16,982	18,734	1,753	9.4%	-	(16,982)	0.0%	Project MGMT Office	156,892	187,343	30,451	16.3%	101,605	(55,288)	(54.4%)
-	7,848	7,848	100.0%	6,781	6,781	100.0%	Managed Care Contract	37,902	78,477	40,575	51.7%	84,056	46,154	54.9%
728,215	877,136	148,921	17.0%	442,909	(285,306)	(64.4%)	Total Overhead Allocations	8,054,208	8,771,359	717,151	8.2%	4,215,797	(3,838,411)	(91.0%)
4,650,958	4,894,130	243,172	5.0%	4,567,000	(83,959)	(1.8%)	Total Expenses	47,344,345	48,491,381	1,147,036	2.4%	45,203,632	(2,140,713)	(4.7%)
\$ 12,964,864	\$ (1,541,497)	\$ 14,506,361	(941.1%)	\$ (1,212,175)	\$ 14,177,038	(1,169.6%)	Net Margin	\$ (6,855,842)	\$ (15,655,646)	\$ 8,799,804	(56.2%)	\$ (20,274,405)	\$ 13,418,562	(66.2%)
194,209	-	194,209	0.0%	47,657	146,552	307.5%	Capital Contributions	465,119	-	465,119	0.0%	338,995	126,124	37.2%
\$ -	\$ 2,281,000	\$ (2,281,000)	(100.0%)	\$ -	\$ -	0.0%	General Fund Support/ Transfer In	\$ -	\$ 13,426,000	\$ (13,426,000)	(100.0%)	\$ 17,686,103	\$ 17,686,103	100.0%

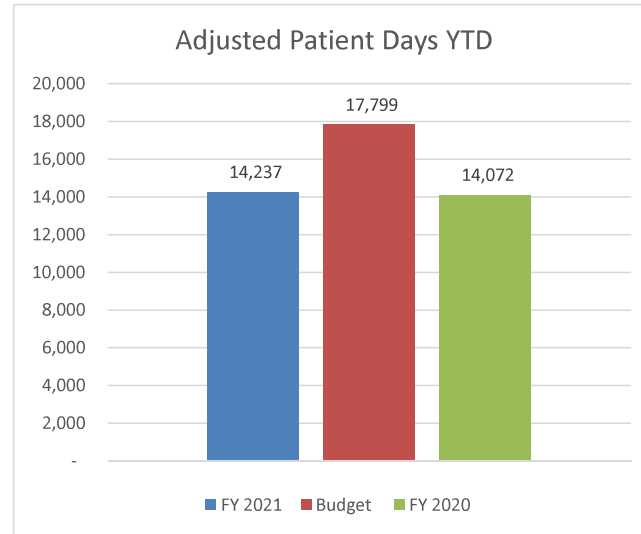
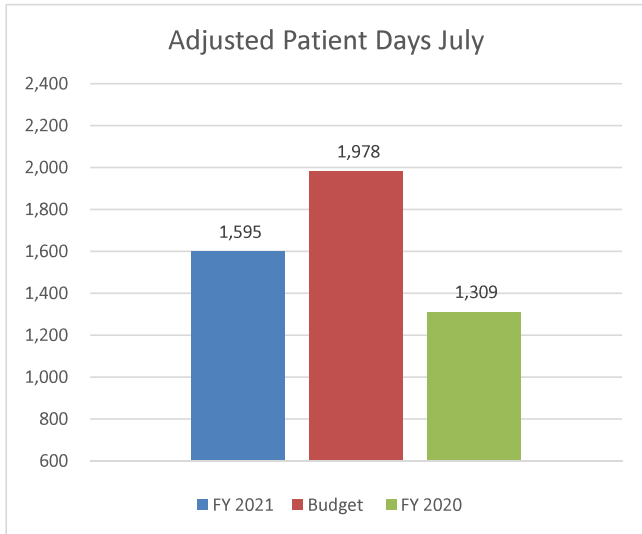
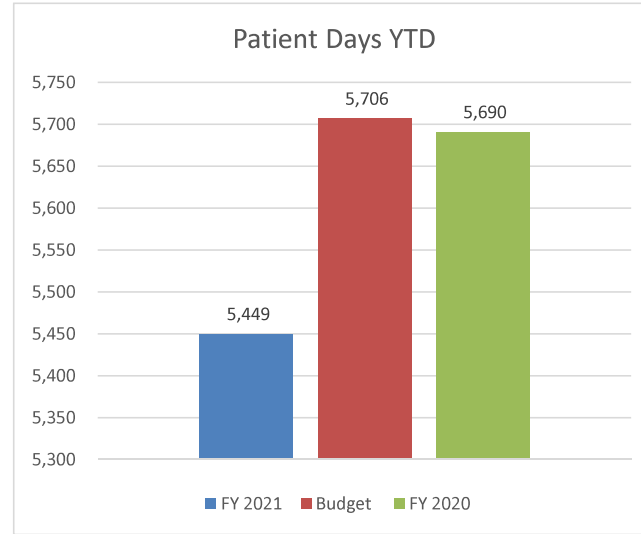
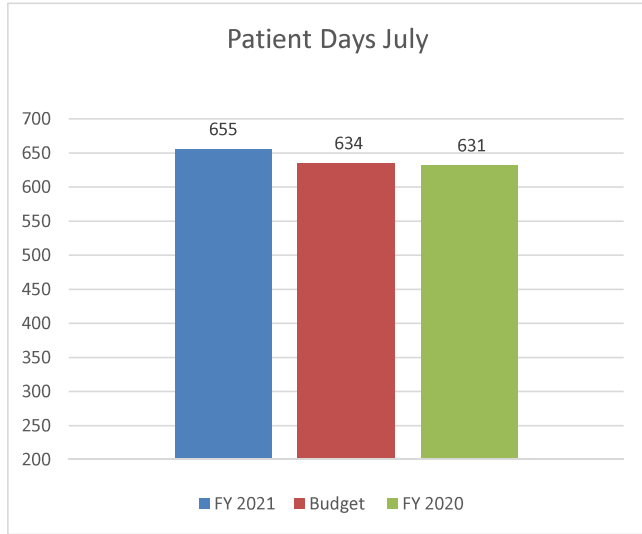
**Lakeside Medical Center Statement of Revenues and Expenses by Month**

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Year to Date
Inpatient Revenue	\$ 3,895,448	\$ 3,985,552	\$ 4,894,393	\$ 5,375,408	\$ 4,888,944	\$ 3,711,527	\$ 4,068,366	\$ 4,344,014	\$ 3,711,764	\$ 4,647,633	\$ -	\$ -	\$ 43,523,048
Outpatient Revenue	6,740,835	6,028,589	6,198,016	7,082,417	7,029,810	7,654,520	8,078,614	7,708,593	7,349,892	6,671,987	-	-	70,543,273
<b>Gross Patient Revenue</b>	<b>10,636,282</b>	<b>10,014,140</b>	<b>11,092,409</b>	<b>12,457,825</b>	<b>11,918,754</b>	<b>11,366,047</b>	<b>12,146,980</b>	<b>12,052,607</b>	<b>11,061,656</b>	<b>11,319,620</b>	-	-	<b>114,066,321</b>
Contractual Allowances	7,259,800	7,895,305	8,141,013	8,438,082	8,347,527	7,816,726	7,398,405	9,105,485	10,380,325	9,829,453	-	-	84,612,119
Charity Care	2,324,516	46,637	(2,173,316)	-	435,829	239,491	269,109	625,052	283,920	79,899	-	-	2,131,132
Bad Debt	1,255,741	(3,319,432)	2,119,861	1,479,938	534,278	4,000,320	(154,532)	2,227,125	(2,011,520)	(808,897)	-	-	5,322,884
Total Contractuals and Bad Debt	\$ 10,840,057	\$ 4,622,510	\$ 8,087,558	\$ 9,918,020	\$ 9,317,635	\$ 12,056,537	\$ 7,512,982	\$ 11,957,662	\$ 8,652,725	\$ 9,100,449	\$ -	\$ -	\$ 92,066,136
Other Patient Revenue	142,009	142,009	523,423	142,009	142,009	148,119	173,857	147,432	(203,550)	163,652	-	-	1,520,971
<b>Net Patient Revenue</b>	<b>(61,765)</b>	<b>5,533,640</b>	<b>3,528,275</b>	<b>2,681,814</b>	<b>2,743,129</b>	<b>(542,370)</b>	<b>4,807,855</b>	<b>242,377</b>	<b>2,205,381</b>	<b>2,382,822</b>	-	-	<b>23,521,157</b>
Collection %	-0.58%	55.26%	31.81%	21.53%	23.02%	-4.77%	39.58%	2.01%	19.94%	21.05%	0.00%	0.00%	20.62%
Grant Funds	81,867	-	-	40,933	13,644	-	27,289	-	-	-	-	-	163,733
Other Financial Assistance	-	-	-	498,853	257,463	285,015	130,107	-	204,852	15,220,570	-	-	16,596,860
Other Revenue	25,133	16,319	44,660	14,514	26,237	15,021	(11,951)	15,493	48,896	12,430	-	-	206,753
Total Other Revenues	107,000	16,319	44,660	554,300	297,345	300,035	145,445	15,493	253,748	15,233,000	-	-	16,967,345
<b>Total Revenues</b>	<b>45,235</b>	<b>5,549,959</b>	<b>3,572,935</b>	<b>3,236,114</b>	<b>3,040,473</b>	<b>(242,335)</b>	<b>4,953,300</b>	<b>257,870</b>	<b>2,459,129</b>	<b>17,615,822</b>	-	-	<b>40,488,502</b>
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,839,260	1,564,927	1,661,704	1,533,257	1,533,530	1,564,709	1,698,291	1,605,193	1,663,916	1,725,387	-	-	16,390,174
Benefits	482,565	450,228	487,782	451,141	449,552	427,860	448,384	455,307	457,699	448,660	-	-	4,559,180
Purchased Services	289,929	232,220	247,375	236,978	323,285	333,093	242,137	304,400	363,162	268,939	-	-	2,851,516
Medical Supplies	91,738	132,622	142,210	115,484	117,523	118,985	218,183	210,739	(111,911)	97,252	-	-	1,202,824
Other Supplies	39,537	92,922	139,625	127,356	137,179	207,278	146,454	65,774	138,321	114,802	-	-	1,209,247
Contracted Physician Expense	663,185	660,448	717,386	823,931	692,946	356,973	950,197	764,286	543,889	691,766	-	-	6,865,009
Drugs	77,901	104,180	158,282	144,236	167,869	119,501	106,164	114,424	79,544	62,974	-	-	1,135,075
Repairs & Maintenance	46,164	49,242	47,833	67,816	54,356	55,489	74,846	42,353	58,296	81,978	-	-	1,378,372
Lease & Rental	52,258	50,554	68,444	58,805	32,799	44,541	51,391	45,580	49,870	48,050	-	-	502,290
Utilities	68,800	72,412	76,840	48,908	51,859	61,833	70,491	54,911	64,247	52,131	-	-	622,432
Other Expense	46,086	97,638	36,172	71,181	33,600	110,255	52,335	2,492	101,138	49,754	-	-	600,651
Insurance	16,573	16,573	16,573	16,573	16,573	16,573	16,573	16,754	16,754	16,754	-	-	166,271
Total Operational Expenses	3,713,996	3,523,966	3,810,226	3,695,666	3,611,070	3,487,089	4,075,445	3,682,213	3,424,924	3,658,446	-	-	36,683,042
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(3,668,761)</b>	<b>2,025,993</b>	<b>(237,291)</b>	<b>(459,552)</b>	<b>(570,596)</b>	<b>(3,729,424)</b>	<b>877,855</b>	<b>(3,424,343)</b>	<b>(965,796)</b>	<b>13,957,376</b>	-	-	<b>3,805,461</b>
Depreciation	258,659	261,436	259,965	259,804	259,804	260,086	260,673	261,186	261,185	264,298	-	-	2,607,095
<i>Overhead Allocations:</i>													
Risk Mgt	3,328	2,893	3,167	3,141	2,834	7,301	10,244	5,509	8,342	6,910	-	-	53,668
Rev Cycle	57,418	47,266	51,614	51,149	45,293	52,592	56,572	60,795	60,742	68,161	-	-	551,603
Internal Audit	432	4,328	3,356	3,639	1,878	2,062	11,824	3,472	7,383	10,891	-	-	49,265
Administration	39,687	43,211	61,254	82,122	59,571	72,961	74,909	68,565	70,764	58,231	-	-	631,277
Human Resources	46,898	40,541	85,490	53,200	66,812	84,769	3,628	71,230	51,474	51,669	-	-	555,710
Legal	17,825	28,940	26,138	22,898	23,823	42,472	64,280	18,337	30,384	69,894	-	-	344,992
Records	11,788	12,438	13,351	12,371	9,959	13,338	13,445	13,889	15,940	5,603	-	-	122,122
Compliance	7,963	8,414	5,170	13,263	8,575	13,683	(3,179)	17,641	20,959	1,085	-	-	93,574
Comm Engage Plan	11,177	10,119	11,482	10,953	10,026	10,959	12,282	13,202	18,896	11,064	-	-	120,159
IT Operations	84,051	116,950	117,213	159,840	122,867	180,840	72,912	118,920	113,021	88,007	-	-	1,174,622
IT Security	13,217	8,797	15,495	12,803	10,330	12,630	11,958	12,651	28,605	13,643	-	-	140,128
IT Applications	31,724	170,938	256,322	112,810	99,879	126,396	33,403	114,178	107,803	260,981	-	-	1,314,436
Security Services	33,943	33,460	36,909	37,119	34,086	37,726	36,917	38,923	37,489	40,142	-	-	366,713
IT EPIC	79,716	88,644	108,508	135,518	112,323	297,967	227,468	234,401	257,819	(61,300)	-	-	1,481,064
Finance	49,176	47,050	47,282	49,078	40,521	42,586	39,797	43,276	53,670	67,127	-	-	479,565
Public Relations	18,969	13,802	5,983	8,697	12,663	15,924	9,338	15,337	9,544	8,926	-	-	119,181
Information Technology	16,257	14,465	15,480	17,883	18,584	16,867	18,161	19,308	25,757	3,372	-	-	166,134
Budget & Decision Support	-	-	-	-	-	-	-	-	-	-	-	-	-
Corporate Quality	8,444	11,980	8,200	8,673	9,869	10,262	13,008	8,161	9,780	6,825	-	-	95,202
Project MGMT Office	12,904	14,358	14,974	15,408	14,016	15,808	17,831	18,028	16,584	16,982	-	-	156,892
Managed Care Contract	7,116	6,835	7,346	7,112	6,476	3,001	17	-	-	-	-	-	37,902
Total Overhead Allocations	552,033	725,428	894,736	817,675	710,384	1,060,147	724,813	895,822	944,957	728,215	-	-	8,054,208
<b>Total Expenses</b>	<b>4,524,688</b>	<b>4,510,830</b>	<b>4,964,927</b>	<b>4,773,145</b>	<b>4,581,257</b>	<b>4,807,322</b>	<b>5,060,931</b>	<b>4,839,221</b>	<b>4,631,066</b>	<b>4,650,958</b>	-	-	<b>47,344,345</b>
<b>Net Margin</b>	<b>\$ (4,479,453)</b>	<b>\$ 1,039,129</b>	<b>\$ (1,391,992)</b>	<b>\$ (1,537,031)</b>	<b>\$ (1,540,783)</b>	<b>\$ (5,049,657)</b>	<b>\$ (107,631)</b>	<b>\$ (4,581,351)</b>	<b>\$ (2,171,938)</b>	<b>\$ 12,964,864</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ (6,855,842)</b>
Capital Contributions	-	-	-	-	17,000	28,848	53,502	-	171,561	194,209	-	-	465,119
General Fund Support/ Transfer In	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

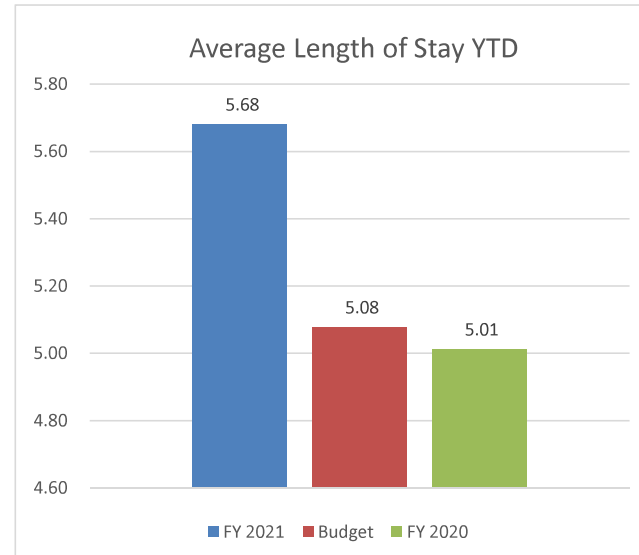
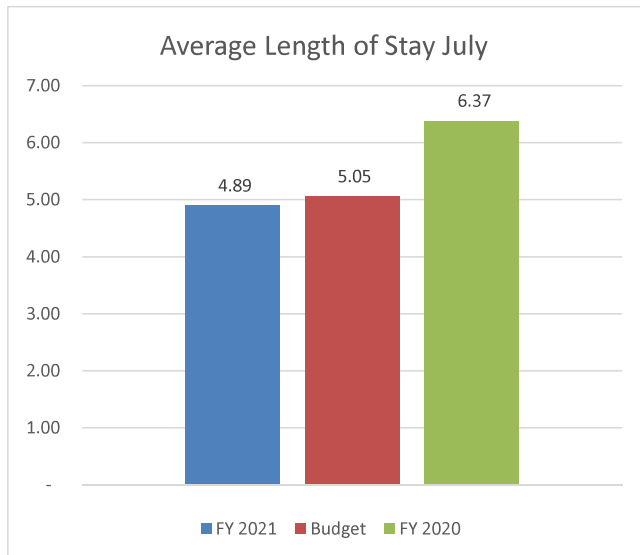
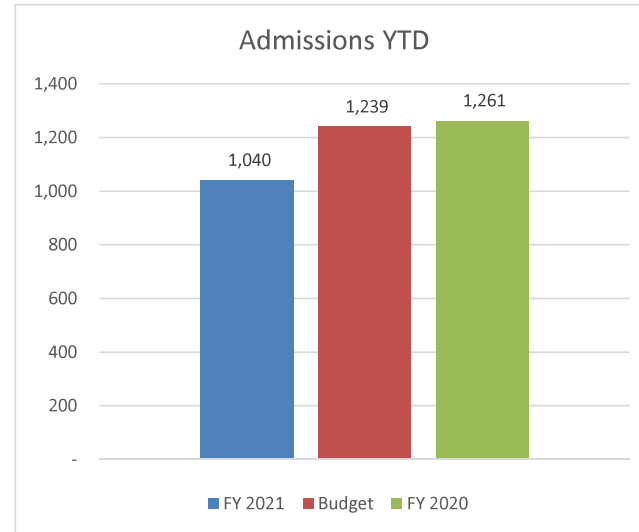
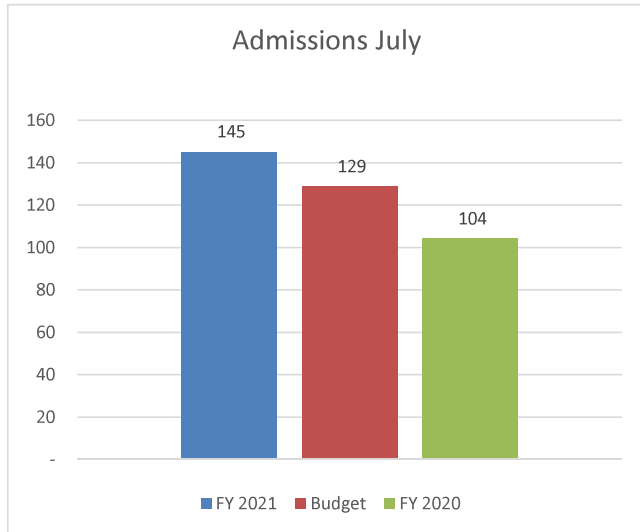
**Lakeside Medical Center  
Statistical Information**

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Current Year Total	YTD Budget Total	% Var to Budget	Prior YTD Total
<b>Admissions</b>																
Newborn	10	9	3	5	4	4	7	10	9	11	-	-	72	115	(37.1%)	132
Pediatrics	3	2	3	2	3	3	11	6	3	6	-	-	42	53	(21.1%)	48
Adult	101	77	88	100	98	69	85	94	86	128	-	-	926	1,071	(13.6%)	1,081
<b>Total</b>	<b>114</b>	<b>88</b>	<b>94</b>	<b>107</b>	<b>105</b>	<b>76</b>	<b>103</b>	<b>110</b>	<b>98</b>	<b>145</b>	<b>-</b>	<b>-</b>	<b>1,040</b>	<b>1,239</b>	<b>(16.1%)</b>	<b>1,261</b>
<b>Adjusted Admissions</b>	<b>311</b>	<b>221</b>	<b>213</b>	<b>248</b>	<b>256</b>	<b>233</b>	<b>308</b>	<b>305</b>	<b>292</b>	<b>353</b>			<b>2,740</b>	<b>3,865</b>	<b>(29.1%)</b>	<b>3,296</b>
<b>Patient Days</b>																
Med Surg 2nd and 3rd Floor (14 beds)	41	39	28	84	119	30	30	30	26	115	-	-	542	843	(35.7%)	900
Pediatrics (12 beds)	17	22	30	27	11	10	34	15	13	13	-	-	192	285	(32.6%)	280
Telemetry (22 beds)	243	222	394	402	349	247	269	312	288	327	-	-	3,053	2,810	8.6%	2,768
ICU (6 beds)	126	142	163	154	157	143	147	135	108	166	-	-	1,441	1,352	6.6%	1,329
Obstetrics (16 beds)	29	25	13	18	11	17	18	31	25	34	-	-	221	416	(46.8%)	413
<b>Total (70 beds)</b>	<b>456</b>	<b>450</b>	<b>628</b>	<b>685</b>	<b>647</b>	<b>447</b>	<b>498</b>	<b>523</b>	<b>460</b>	<b>655</b>	<b>-</b>	<b>-</b>	<b>5,449</b>	<b>5,706</b>	<b>(4.5%)</b>	<b>5,690</b>
<b>Adjusted Acute Patient Days</b>	<b>1,245</b>	<b>1,131</b>	<b>1,423</b>	<b>1,588</b>	<b>1,577</b>	<b>1,369</b>	<b>1,487</b>	<b>1,451</b>	<b>1,371</b>	<b>1,595</b>			<b>14,237</b>	<b>17,799</b>	<b>(20.0%)</b>	<b>14,072</b>
<b>Other Key Inpatient Statistics</b>																
Occupancy Percentage	21%	0.2143	0.2894	0.3157	0.3301	0.2060	0.2371	0.2410	0.2190	0.3018	-	-	21%	27%	(20.5%)	27%
Average Daily Census (excl. newborns)	14.7	15.0	20.3	22.1	23.1	14.4	16.6	16.9	15.3	21.1	-	-	18.0	18.7	(4.2%)	18.6
Average Daily Census (incl. newborns)	15.4	15.8	20.6	22.6	23.5	14.8	17.2	17.7	15.9	22.1	-	-	18.6	19.9	(6.6%)	19.8
Average Length of Stay (excl newborns)	4.38	5.70	6.90	6.72	6.41	6.21	5.19	5.23	5.17	4.89	-	-	5.68	5.08	11.9%	5.01
Average Length of Stay (incl newborns)	4.19	5.40	6.81	6.55	6.26	6.04	5.00	4.98	4.87	4.72	-	-	5.48	4.87	12.6%	4.79
Case Mix Index- Medicare	1.9433	1.7109	1.3353	2.4190	1.5160	1.9575	1.4246	1.5021	1.8288	2.1165	-	-	1.7754			1.5763
Case Mix Index- Medicaid	0.5706	2.1950	2.4349	1.7665	1.6697	0.7644	0.8969	0.6547	0.3407	0.7633	-	-	1.2057			1.4082
Case Mix Index- All Payers	1.3453	1.5504	1.6374	2.0162	1.6634	1.5066	1.6564	1.2173	1.3335	1.2836	-	-	1.5210			1.3092
<b>Emergency Room and Outpatients</b>																
ER Admissions	59	34	48	48	58	44	50	49	51	100	-	-	541	658	(17.8%)	730
ER Visits	1,367	1,269	1,292	1,502	1,396	1,629	1,707	1,647	1,522	1,649	-	-	14,980	15,189	(1.4%)	16,569
Outpatient Visits	280	235	247	213	258	213	329	313	276	364	-	-	2,728	1,912	42.7%	3,146
ER and Outpatient Visits	1,647	1,504	1,539	1,715	1,654	1,842	2,036	1,960	1,798	2,013	-	-	17,708	17,101	3.5%	19,715
Observation Patient Stays	219	202	169	182	206	236	245	185	201	147	-	-	1,992	2,866	(30.5%)	2,334
<b>Surgery and Other Procedures</b>																
Inpatient Surgeries	24	31	30	28	32	28	46	39	37	20	-	-	315	329	(4.4%)	341
Outpatient Surgeries	7	6	10	5	9	2	5	6	5	3	-	-	58	29	98.5%	37
Endoscopies	19	9	11	14	13	16	20	13	6	6	-	-	127	141	(10.0%)	117
Radiology Procedures	2,280	1,983	2,163	2,449	2,356	2,640	2,641	2,518	2,444	2,162	-	-	23,636	21,946	7.7%	22,086
Lab Charges	14,701	14,408	15,963	18,014	17,243	15,960	17,635	16,948	15,721	12,182	-	-	158,775	167,622	(5.3%)	159,365
<b>Staffing</b>																
Paid FTE	281.61	273.82	271.52	270.27	280.54	273.60	248.28	275.39	276.28	284.85	-	-	273.62	291.95	(6.3%)	295.92
Paid FTE per Adjusted Occupied Bed	7.01	7.27	5.91	5.28	4.98	6.20	5.01	5.88	6.05	5.54	-	-	5.83	4.99	16.9%	6.41
<b>Operational Performance</b>																
Gross Revenue Per Adj Pat Day	8,543	8,857	7,794	7,847	7,556	8,303	8,169	8,306	8,069	7,096			8,054	7,098	13.5%	8,005
Net Revenue Per Adj Pat Day	(50)	4,894	2,479	1,689	1,739	(396)	3,234	167	1,609	2,573			2,242	1,677	33.7%	2,508
Salaries & Benefits as % of Net Pat Revenue	-3759%	36%	61%	74%	72%	-367%	45%	850%	96%	53%			83%	80%	4.2%	62%
Labor Cost per Adj Pat Day	1,865	1,782	1,510	1,250	1,257	1,456	1,444	1,420	1,548	1,363			1,489	1,313	13.4%	1,525
Total Expense Per Adj Pat Day	2,983	3,117	2,677	2,328	2,289	2,547	2,741	2,538	2,498	2,293			2,601	2,246	15.8%	2,752

### LAKESIDE MEDICAL CENTER Inpatient

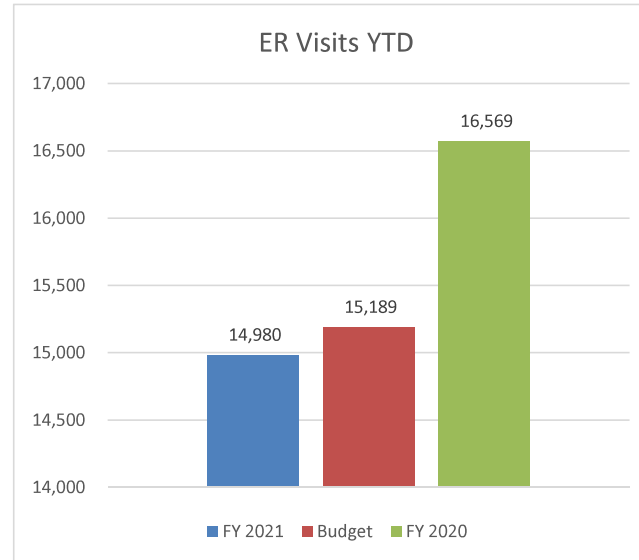
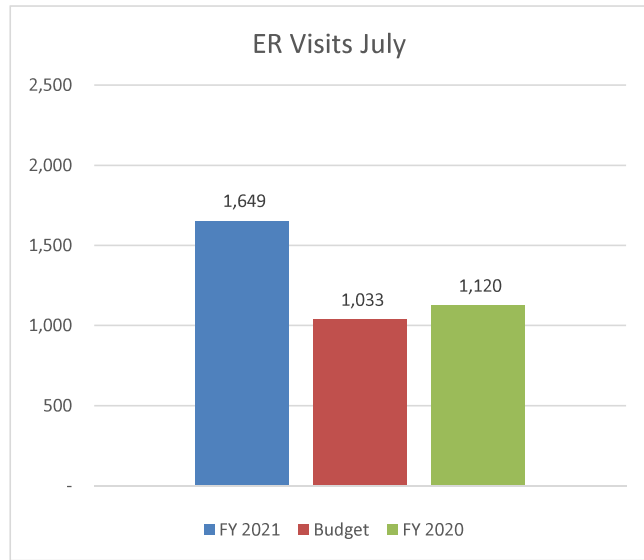
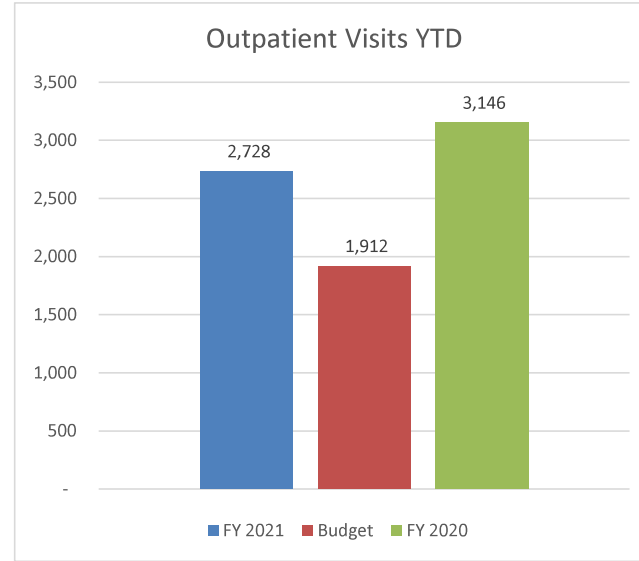
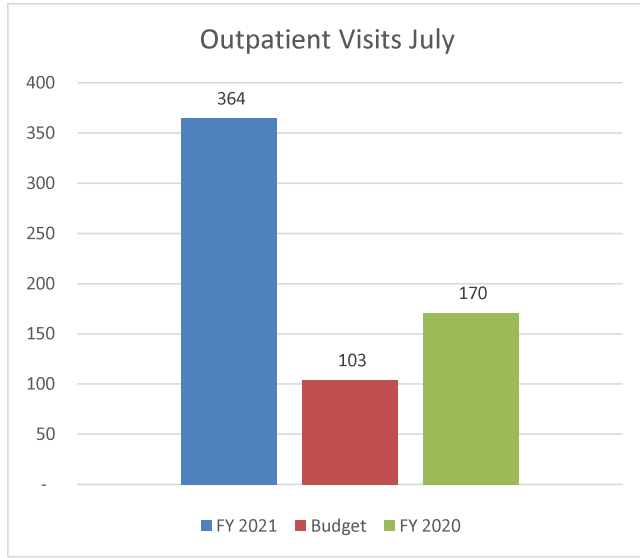


### LAKESIDE MEDICAL CENTER Inpatient

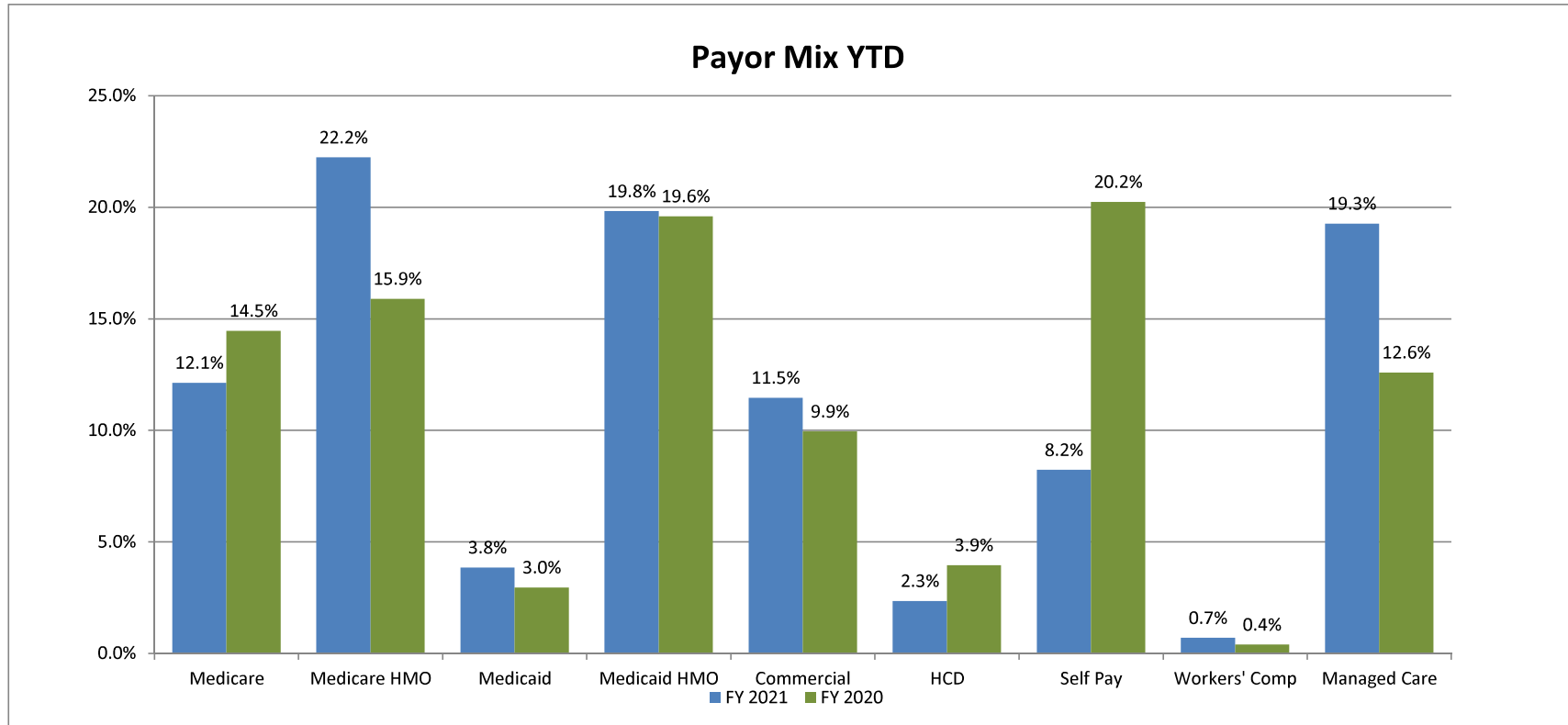




### LAKESIDE MEDICAL CENTER Outpatient



## LAKESIDE MEDICAL CENTER Revenue





# **SUPPLEMENTAL INFORMATION**

## **PRIMARY CARE CLINICS**

# Primary Care Clinics Statement of Revenues and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
1,642,906	1,250,820	392,086	31.3%	1,451,817	191,089	13.2%	18,361,678	12,373,970	5,987,708	48.4%	15,049,213	3,312,466	22.0%
<b>Gross Patient Revenue</b>							<b>18,361,678</b>						
1,306,229	222,654	(1,083,575)	(486.7%)	329,147	(977,082)	(296.9%)	5,784,279	2,224,513	(3,559,766)	(160.0%)	2,795,300	(2,988,979)	(106.9%)
46,809	486,717	439,908	90.4%	516,395	469,586	90.9%	6,051,107	4,846,517	(1,204,590)	(24.9%)	5,638,461	(412,646)	(7.3%)
(33,070)	171,224	204,294	119.3%	293,790	326,859	111.3%	2,829,559	1,729,936	(1,099,623)	(63.6%)	2,617,872	(211,688)	(8.1%)
<b>Total Contractuals and Bad Debts</b>							<b>14,664,946</b>						
1,319,968	880,595	(439,373)	(49.9%)	1,139,331	(180,637)	(15.9%)	14,664,946	8,800,966	(5,863,980)	(66.6%)	11,051,633	(3,613,313)	(32.7%)
732,778	382,571	350,207	91.5%	159,491	573,287	359.4%	5,300,604	3,767,408	1,533,196	40.7%	3,847,653	1,452,951	38%
<b>Net Patient Revenue</b>							<b>8,997,336</b>						
1,055,716	752,796	302,920	40.2%	471,977	583,739	123.7%	8,997,336	7,340,412	1,656,924	22.6%	7,845,232	1,152,104	14.7%
64.26%	60.18%			32.51%			49.00%	59.32%		52.13%			
<b>Collection %</b>							<b>49.00%</b>						
1,403,407	42,249	1,361,158	3,221.8%	1,607,165	(203,758)	(12.7%)	8,634,268	7,402,405	1,231,863	16.6%	6,403,798	2,230,470	34.8%
80,496	145,876	(65,380)	(44.8%)	259,050	(178,555)	(68.9%)	911,935	4,749,712	(3,837,777)	(80.8%)	1,622,871	(710,936)	(43.8%)
1,823	45,034	(43,211)	(96.0%)	4,752	(2,929)	(61.6%)	73,646	450,340	(376,694)	(83.6%)	71,294	2,352	3.3%
<b>Grant Funds</b>							<b>9,619,849</b>						
1,485,726	233,159	1,252,567	537.2%	1,870,968	(385,242)	(20.6%)	9,619,849	12,602,457	(2,982,608)	(23.7%)	8,097,963	1,521,887	18.8%
<b>Total Other Revenues</b>							<b>12,602,457</b>						
2,541,441	985,955	1,555,486	157.8%	2,342,945	198,497	8.5%	18,617,185	19,942,869	(1,325,684)	(6.6%)	15,943,195	2,673,990	16.8%
<b>Total Revenues</b>							<b>18,617,185</b>						
<i>Direct Operational Expenses:</i>													
1,315,072	1,460,073	145,001	9.9%	1,437,972	122,900	8.5%	14,403,018	14,404,231	1,213	0.0%	13,912,179	(490,839)	(3.5%)
401,983	386,441	(15,542)	(4.0%)	397,791	(4,191)	(1.1%)	4,059,528	3,841,283	(218,245)	(5.7%)	3,768,317	(291,210)	(7.7%)
109,493	46,342	(63,151)	(136.3%)	50,292	(59,201)	(117.7%)	1,030,108	551,211	(478,897)	(86.9%)	744,365	(285,743)	(38.4%)
46,960	119,202	72,242	60.6%	85,145	38,186	44.8%	532,407	1,180,765	648,358	54.9%	380,087	(152,320)	(40.1%)
89,909	26,518	(63,391)	(239.0%)	33,418	(56,490)	(169.0%)	220,279	265,280	45,001	17.0%	150,051	(70,229)	(46.8%)
63,843	81,724	17,881	21.9%	142,201	78,357	55.1%	633,206	807,488	174,282	21.6%	834,733	201,528	24.1%
54,509	59,024	4,515	7.6%	72,180	17,671	24.5%	599,599	583,203	(16,396)	(2.8%)	819,170	219,571	26.8%
153,420	9,629	(143,791)	(1,493.3%)	15,685	(137,734)	(878.1%)	221,384	96,290	(125,094)	(129.9%)	285,229	63,845	22.4%
101,103	166,968	65,865	39.4%	119,189	18,086	15.2%	1,043,525	1,302,219	258,694	19.9%	1,136,042	92,517	8.1%
7,549	7,341	(208)	(2.8%)	5,209	(2,339)	(44.9%)	71,354	73,410	2,056	2.8%	49,486	(21,868)	(44.2%)
24,966	38,973	14,007	35.9%	24,110	(855)	(3.5%)	263,036	405,315	142,279	35.1%	249,531	(13,505)	(5.4%)
4,026	4,334	308	7.1%	3,716	(310)	(8.3%)	37,044	43,340	6,296	14.5%	25,241	(11,803)	(46.8%)
<b>Total Operational Expenses</b>							<b>23,114,487</b>						
2,372,830	2,406,569	33,739	1.4%	2,386,910	14,080	0.6%	23,114,487	23,554,035	439,548	1.9%	22,354,431	(760,056)	(3.4%)
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>							<b>(4,497,302)</b>						
168,611	(1,420,614)	1,589,225	(111.9%)	(43,965)	212,576	(483.5%)	(4,497,302)	(3,611,166)	(886,136)	24.5%	(6,411,236)	1,913,934	(29.9%)

# Primary Care Clinics Statement of Revenues and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
31,098	17,334	(13,764)	(79.4%)	20,412	(10,686)	(52.4%)	Depreciation	315,701	173,340	(142,361)	(82.1%)	185,903	(129,798)	(69.8%)
<i>Overhead Allocations:</i>														
4,167	2,875	(1,292)	(44.9%)	1,631	(2,536)	(155.5%)	Risk Mgt	32,431	28,749	(3,682)	(12.8%)	20,049	(12,382)	(61.8%)
255,603	206,967	(48,636)	(23.5%)	-	(255,603)	0.0%	Rev Cycle	2,068,509	2,069,671	1,162	0.1%	1,162,953	(905,557)	(77.9%)
6,583	3,852	(2,732)	(70.9%)	-	(6,583)	0.0%	Internal Audit	29,778	38,516	8,737	22.7%	40,512	10,734	26.5%
20,056	19,768	(287)	(1.5%)	21,199	1,143	5.4%	Home Office Facilities	181,747	197,685	15,938	8.1%	191,321	9,574	5.0%
34,474	33,232	(1,242)	(3.7%)	30,804	(3,670)	(11.9%)	Administration	380,855	332,320	(48,535)	(14.6%)	339,813	(41,042)	(12.1%)
46,879	47,193	315	0.7%	38,708	(8,171)	(21.1%)	Human Resources	505,600	471,933	(33,667)	(7.1%)	399,686	(105,914)	(26.5%)
40,541	17,241	(23,300)	(135.1%)	16,333	(24,209)	(148.2%)	Legal	206,826	172,414	(34,412)	(20.0%)	160,029	(46,796)	(29.2%)
3,387	8,048	4,662	57.9%	7,269	3,882	53.4%	Records	73,817	80,482	6,665	8.3%	68,029	(5,788)	(8.5%)
656	6,886	6,230	90.5%	4,338	3,682	84.9%	Compliance	56,561	68,860	12,298	17.9%	82,768	26,207	31.7%
6,688	7,007	319	4.6%	-	(6,688)	0.0%	Comm Engage Plan	72,631	70,069	(2,562)	(3.7%)	-	(72,631)	0.0%
53,197	82,884	29,687	35.8%	-	(53,197)	0.0%	IT Operations	710,007	828,835	118,828	14.3%	-	(710,007)	0.0%
8,247	8,445	199	2.4%	-	(8,247)	0.0%	IT Security	84,701	84,453	(248)	(0.3%)	-	(84,701)	0.0%
(19,562)	40,421	59,983	148.4%	-	19,562	0.0%	IT Applications	398,813	404,209	5,396	1.3%	-	(398,813)	0.0%
50,177	47,251	(2,926)	(6.2%)	-	(50,177)	0.0%	Security Services	458,391	472,514	14,122	3.0%	-	(458,391)	0.0%
(37,053)	121,543	158,596	130.5%	-	37,053	0.0%	IT EPIC	895,238	1,215,434	320,196	26.3%	-	(895,238)	0.0%
40,576	31,665	(8,911)	(28.1%)	32,237	(8,338)	(25.9%)	Finance	289,876	316,646	26,770	8.5%	308,272	18,396	6.0%
5,395	10,057	4,661	46.4%	5,791	395	6.8%	Public Relations	72,040	100,569	28,529	28.4%	92,020	19,980	21.7%
1,680	8,303	6,623	79.8%	131,527	129,847	98.7%	Information Technology	99,598	83,028	(16,570)	(20.0%)	965,963	866,365	89.7%
3,677	4,761	1,084	22.8%	-	(3,677)	0.0%	Corporate Quality	57,097	47,611	(9,486)	(19.9%)	17,368	(39,729)	(228.7%)
10,265	11,235	971	8.6%	-	(10,265)	0.0%	Project MGMT Office	94,835	112,352	17,518	15.6%	59,985	(34,850)	(58.1%)
-	1,328	1,328	100.0%	2,054	2,054	100.0%	Managed Care Contract	6,415	13,283	6,868	51.7%	25,461	19,046	74.8%
535,632	720,963	185,331	25.7%	291,890	(243,742)	(83.5%)	Total Overhead Allocations	6,775,766	7,209,632	433,866	6.0%	3,934,229	(2,841,536)	(72.2%)
<b>2,939,561</b>	<b>3,144,866</b>	<b>205,305</b>	<b>6.5%</b>	<b>2,699,213</b>	<b>(240,348)</b>	<b>(8.9%)</b>	<b>Total Expenses</b>	<b>30,205,955</b>	<b>30,937,007</b>	<b>731,052</b>	<b>2.4%</b>	<b>26,474,564</b>	<b>(3,731,391)</b>	<b>(14.1%)</b>
<b>\$ (398,119)</b>	<b>\$ (2,158,911)</b>	<b>\$ 1,760,792</b>	<b>(81.6%)</b>	<b>\$ (356,268)</b>	<b>\$ (41,852)</b>	<b>11.7%</b>	<b>Net Margin</b>	<b>\$ (11,588,769)</b>	<b>\$ (10,994,138)</b>	<b>\$ (594,631)</b>	<b>5.4%</b>	<b>\$ (10,531,369)</b>	<b>\$ (1,057,400)</b>	<b>10.0%</b>
-	45,000	45,000	100.0%	(6,816)	(6,816)	100.0%	Capital	-	802,210	802,210	100.0%	6,460	6,460	100.0%
<b>\$ -</b>	<b>\$ 2,197,000</b>	<b>\$ 2,197,000</b>	<b>100.0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>General Fund Support/ Transfer In</b>	<b>\$ 9,987,030</b>	<b>\$ 11,807,000</b>	<b>\$ 1,819,970</b>	<b>15.4%</b>	<b>\$ 10,587,867</b>	<b>\$ 600,837</b>	<b>5.7%</b>

### Primary Care Clinics Statement of Revenues and Expenses by Month

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Year to Date
<b>Gross Patient Revenue</b>	<b>1,842,091</b>	<b>1,535,619</b>	<b>1,685,042</b>	<b>1,321,289</b>	<b>1,595,963</b>	<b>1,870,757</b>	<b>2,230,803</b>	<b>2,066,863</b>	<b>2,570,345</b>	<b>1,642,906</b>	-	-	<b>18,361,678</b>
Contractual Allowances	509,972	470,624	453,962	303,580	404,818	543,358	562,148	464,663	764,925	1,306,229	-	-	5,784,279
Charity Care	158,009	-	1,751,178	434,796	538,927	530,618	809,796	782,187	998,787	46,809	-	-	6,051,107
Bad Debt	788,060	799,873	(860,761)	338,348	289,586	402,163	405,392	368,549	331,418	(33,070)	-	-	2,829,559
<b>Other Patient Revenue</b>	<b>414,367</b>	<b>286,936</b>	<b>350,651</b>	<b>704,172</b>	<b>439,031</b>	<b>439,031</b>	<b>905,685</b>	<b>513,976</b>	<b>513,976</b>	<b>732,778</b>	-	-	<b>5,300,604</b>
<b>Net Patient Revenue</b>	<b>800,416</b>	<b>552,056</b>	<b>691,315</b>	<b>948,737</b>	<b>801,664</b>	<b>833,649</b>	<b>1,359,153</b>	<b>965,440</b>	<b>989,190</b>	<b>1,055,716</b>	-	-	<b>8,997,336</b>
Collections %	43.45%	35.95%	41.03%	71.80%	50.23%	44.56%	60.93%	46.71%	38.48%	64.26%	0.00%	0.00%	49.00%
Grant Funds	104,059	-	130,321	2,271,653	(629,521)	974,299	1,566,400	1,488,547	1,325,105	1,403,407	-	-	8,634,268
Other Financial Assistance	-	-	588,890	-	179,158	5,710	27,883	19,439	10,358	80,496	-	-	911,935
Other Revenue	9,732	1,689	3,302	809	26,487	13,061	14,654	1,578	513	1,823	-	-	73,646
<b>Total Other Revenues</b>	<b>113,791</b>	<b>1,689</b>	<b>722,512</b>	<b>2,272,462</b>	<b>(423,876)</b>	<b>993,070</b>	<b>1,608,937</b>	<b>1,509,564</b>	<b>1,335,976</b>	<b>1,485,726</b>	-	-	<b>9,619,849</b>
<b>Total Revenues</b>	<b>914,207</b>	<b>553,745</b>	<b>1,413,827</b>	<b>3,221,199</b>	<b>377,788</b>	<b>1,826,719</b>	<b>2,968,090</b>	<b>2,475,004</b>	<b>2,325,166</b>	<b>2,541,441</b>	-	-	<b>18,617,185</b>
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,612,557	1,177,306	1,310,859	1,482,538	1,423,741	1,551,730	1,629,754	1,480,781	1,418,683	1,315,072	-	-	14,403,018
Benefits	394,482	358,883	404,282	407,085	420,732	406,226	427,189	429,489	409,178	401,983	-	-	4,059,528
Purchased Services	35,150	59,503	33,586	71,484	37,746	151,018	248,133	165,470	118,524	109,493	-	-	1,030,108
Medical Supplies	19,841	24,253	46,148	84,529	35,626	41,196	28,620	27,504	177,731	46,960	-	-	532,407
Other Supplies	2,686	4,538	8,638	12,332	32,280	4,195	13,176	25,786	26,739	89,909	-	-	220,279
Medical Services	92,709	55,338	56,152	45,535	47,251	80,848	55,468	61,653	74,408	63,843	-	-	633,206
Drugs	82,365	73,242	60,219	55,947	59,708	49,636	62,547	51,857	49,570	54,509	-	-	599,599
Repairs & Maintenance	6,725	4,061	3,703	7,491	3,518	6,010	14,332	5,264	16,859	153,420	-	-	221,384
Lease & Rental	105,605	104,935	96,815	102,475	102,093	106,287	97,843	125,417	100,952	101,103	-	-	1,043,525
Utilities	5,024	10,320	7,438	6,515	6,285	6,819	7,229	6,933	7,242	7,549	-	-	71,354
Other Expense	26,726	23,914	19,350	30,184	26,817	25,554	52,110	12,164	21,251	24,966	-	-	263,036
Insurance	3,716	3,716	2,892	4,649	3,331	3,331	3,331	4,026	4,026	4,026	-	-	37,044
<b>Total Operational Expenses</b>	<b>2,387,586</b>	<b>1,900,008</b>	<b>2,050,081</b>	<b>2,310,763</b>	<b>2,199,128</b>	<b>2,432,851</b>	<b>2,639,732</b>	<b>2,396,345</b>	<b>2,425,163</b>	<b>2,372,830</b>	-	-	<b>23,114,487</b>
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(1,473,379)</b>	<b>(1,346,263)</b>	<b>(636,254)</b>	<b>910,436</b>	<b>(1,821,340)</b>	<b>(606,132)</b>	<b>328,358</b>	<b>78,659</b>	<b>(99,997)</b>	<b>168,611</b>	-	-	<b>(4,497,302)</b>
Depreciation	20,995	42,335	31,665	31,896	31,706	31,593	31,592	31,525	31,296	31,098	-	-	315,701
<i>Overhead Allocations:</i>													
Risk Mgt	2,012	1,749	1,914	1,899	1,713	4,413	6,192	3,330	5,042	4,167	-	-	32,431
Rev Cycle	215,318	177,247	193,553	191,807	169,849	197,221	212,145	227,981	227,784	255,603	-	-	2,068,509
Internal Audit	261	2,616	2,029	2,200	1,135	1,246	7,147	2,099	4,462	6,583	-	-	29,778
Home Office Facilities	17,338	17,140	20,876	18,248	17,620	20,104	9,531	18,817	22,018	20,056	-	-	181,747
Administration	23,989	26,119	37,026	49,639	36,008	44,102	45,279	41,444	42,774	34,474	-	-	380,855
Human Resources	42,681	36,896	77,803	48,416	60,805	77,147	3,301	64,825	46,846	46,879	-	-	505,600
Legal	10,774	17,493	15,799	13,841	14,400	25,673	38,855	11,084	18,366	40,541	-	-	206,826
Records	7,126	7,518	8,070	7,478	6,020	8,062	8,127	8,395	9,635	3,387	-	-	73,817
Compliance	4,813	5,086	3,125	8,017	5,183	8,271	(1,922)	10,663	12,669	656	-	-	56,561
Comm Engage Plan	6,756	6,116	6,940	6,621	6,060	6,624	7,424	7,980	11,422	6,688	-	-	72,631
IT Operations	50,805	70,691	70,850	96,616	74,267	109,310	44,072	71,882	68,316	53,197	-	-	710,007
IT Security	7,989	5,317	9,366	7,739	6,244	7,634	7,228	7,647	17,290	8,247	-	-	84,701
IT Applications	23,045	40,862	27,197	44,176	20,639	34,133	93,419	84,463	50,443	(19,562)	-	-	398,813
Security Services	42,428	41,825	46,136	46,399	42,607	47,158	46,146	48,653	46,862	50,177	-	-	458,391
IT EPIC	48,185	53,582	65,588	81,914	67,894	180,108	137,495	141,685	155,840	(37,053)	-	-	895,238
Finance	29,725	28,440	28,580	29,666	24,493	25,741	24,055	26,159	32,441	40,576	-	-	289,876
Public Relations	11,466	8,342	3,617	5,257	7,654	9,625	5,644	9,271	5,769	5,395	-	-	72,040
Information Technology	9,827	8,743	9,357	10,810	11,233	10,196	10,978	11,671	15,104	1,680	-	-	99,598
Corporate Quality	5,104	7,241	4,957	5,242	5,965	6,203	7,863	4,933	5,912	3,677	-	-	57,097
Project MGMT Office	7,800	8,679	9,051	9,313	8,472	9,555	10,778	10,897	10,025	10,265	-	-	94,835
Managed Care Contract	1,205	1,157	1,243	1,204	1,096	508	3	-	-	-	-	-	6,415
<b>Total Overhead Allocations</b>	<b>568,646</b>	<b>572,859</b>	<b>643,078</b>	<b>686,500</b>	<b>589,359</b>	<b>833,035</b>	<b>723,759</b>	<b>813,878</b>	<b>809,020</b>	<b>535,632</b>	-	-	<b>6,775,766</b>
<b>Total Expenses</b>	<b>2,977,227</b>	<b>2,515,202</b>	<b>2,724,824</b>	<b>3,029,159</b>	<b>2,820,193</b>	<b>3,297,479</b>	<b>3,395,083</b>	<b>3,241,748</b>	<b>3,265,479</b>	<b>2,939,561</b>	-	-	<b>30,205,955</b>
<b>Net Margin</b>	<b>\$ (2,063,020)</b>	<b>\$ (1,961,457)</b>	<b>\$ (1,310,997)</b>	<b>\$ 192,040</b>	<b>\$ (2,442,405)</b>	<b>\$ (1,470,760)</b>	<b>\$ (426,994)</b>	<b>\$ (766,744)</b>	<b>\$ (940,313)</b>	<b>\$ (398,119)</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ (11,588,769)</b>
Capital	-	13,568	3,078	(16,646)	-	-	-	-	-	-	-	-	-
<b>General Fund Support/ Transfer In</b>	<b>2,042,025</b>	<b>-</b>	<b>3,228,001</b>	<b>-</b>	<b>700,000</b>	<b>-</b>	<b>-</b>	<b>4,017,004</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>\$ 9,987,030</b>

### Primary Care Clinics - Medical Statement of Revenues and Expenses by Location

FOR THE TENTH MONTH ENDED JULY 31, 2021

	Clinic Administration	West Palm Beach Clinic	Lantana Clinic	Delray Clinic	Belle Glade Clinic	Lewis Center	Lake Worth Clinic	Jupiter Clinic	West Boca Clinic	Subxone Clinic	Mobile Warrior	Mobile Van Scout	Mobile Van Hero	Total
<b>Gross Patient Revenue</b>	-	1,903,808	3,009,537	1,363,056	1,090,513	1,284,681	2,254,800	969,490	1,259,180	958,956	7,558	-	-	14,101,577.85
Contractual Allowances	-	573,044	926,628	299,325	281,397	240,818	702,363	315,748	522,046	216,231	(25,008)	-	-	4,052,591
Charity Care	-	583,305	890,683	448,418	267,251	491,615	860,214	262,194	222,722	307,438	4,024	-	-	4,337,864
Bad Debt	-	313,891	392,704	230,189	203,192	450,522	162,421	97,971	78,611	402,446	16,707	-	-	2,348,653
Total Contractual Allowances and Bad Debt	-	1,470,241	2,210,015	977,931	751,840	1,182,956	1,724,998	675,913	823,378	926,115	(4,277)	-	-	10,739,108
Other Patient Revenue	-	735,526	833,785	426,648	233,032	289,070	481,832	176,999	232,050	219,990	59,402	-	-	3,687,834
<b>Net Patient Revenue</b>	-	1,169,093	1,633,307	811,773	571,706	390,795	1,011,634	470,577	667,852	252,331	71,237	-	-	7,050,304
Collection %	0.00%	61.41%	54.27%	59.56%	52.43%	30.42%	44.87%	48.54%	53.04%	26.31%	94.256%	0.00%	0.00%	50.00%
Grant Funds	2,413,146	769,754	1,049,998	497,746	477,450	215,543	756,369	315,833	336,523	535,148	146,057	(54,507)	37,050	7,496,110
Other Financial Assistance	349,232	3,629	132,235	763	(6,990)	6,530	(24,746)	12,267	(4,079)	(23,024)	31,226	131,246	145,595	753,884
Other Revenue	10,833	10,809	7,038	12,141	12,282	58	6,687	3,236	10,534	13	-	15	-	73,646
Total Other Revenues	2,773,210	784,192	1,189,271	510,650	482,742	222,130	738,311	331,336	342,979	512,138	177,283	76,754	182,645	8,323,641
<b>Total Revenues</b>	<b>2,773,210</b>	<b>1,953,285</b>	<b>2,822,578</b>	<b>1,322,422</b>	<b>1,054,448</b>	<b>612,925</b>	<b>1,749,944</b>	<b>801,913</b>	<b>1,010,831</b>	<b>764,469</b>	<b>248,521</b>	<b>76,754</b>	<b>182,645</b>	<b>15,373,944</b>
<i>Direct Operational Expenses:</i>														
Salaries and Wages	3,310,021	1,362,632	1,796,714	879,792	802,113	356,388	1,446,774	555,101	598,686	779,336	223,064	42,912	37,850	12,191,384
Benefits	881,390	383,313	502,266	259,864	237,996	103,027	418,740	148,693	175,990	221,698	82,156	8,921	10,668	3,434,720
Purchased Services	663,119	36,896	84,620	33,278	39,646	13,877	50,710	24,859	32,046	21,001	2,537	2,537	2,537	1,007,662
Medical Supplies	78,230	43,842	51,570	28,565	33,846	53,592	17,146	14,564	14,564	35,158	7,174	928	1,072	406,741
Other Supplies	47,835	7,332	28,249	18,827	3,451	2,870	3,567	6,280	6,686	6,460	1,949	6,745	4,066	144,316
Medical Services	24,050	74,250	135,347	69,696	46,801	25,034	140,322	37,364	61,061	19,282	-	-	-	633,206
Drugs	-	265,392	179,417	80,470	48,610	-	15,230	1,798	6,752	586	1,302	-	33	599,590
Repairs & Maintenance	147,824	3,077	3,205	3,088	4,409	2,017	21,346	2,580	5,797	4,166	10,053	2,495	1,113	211,169
Lease & Rental	-	107,499	140,603	74,072	68,789	230	222,042	67,605	98,956	39,298	160	55	170	819,480
Utilities	-	3,678	3,481	997	16,596	1,956	10,966	6,955	5,434	4,235	-	-	-	54,299
Other Expense	126,861	13,504	24,777	8,375	5,164	5,017	15,776	3,734	7,833	8,718	5,031	3,923	1,556	230,271
Insurance	-	4,775	4,265	3,625	1,810	332	2,383	1,206	1,459	767	6,579	3,934	5,361	36,497
Total Operational Expenses	5,279,330	2,306,190	2,954,515	1,460,650	1,309,231	564,340	2,388,913	873,321	1,015,262	1,140,704	340,004	72,449	64,426	19,769,335
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(2,506,120)</b>	<b>(352,905)</b>	<b>(131,937)</b>	<b>(138,227)</b>	<b>(254,784)</b>	<b>48,585</b>	<b>(638,968)</b>	<b>(71,408)</b>	<b>(4,432)</b>	<b>(376,235)</b>	<b>(91,483)</b>	<b>4,304</b>	<b>118,219</b>	<b>(4,395,391)</b>
Depreciation	4,844	11,708	12,232	1,332	57,630	271	3,701	2,286	3,996	1,535	62,500	11,570	69,605	243,211
<i>Overhead Allocations:</i>														
Risk Mgt	5,407	3,014	5,218	2,258	1,839	821	3,291	1,156	1,440	1,965	590	407	414	27,818
Rev Cycle	-	234,837	406,608	175,921	143,300	64,014	256,443	90,048	112,224	153,094	45,963	31,682	32,260	1,746,395
Internal Audit	4,972	2,766	4,790	2,072	1,688	754	3,021	1,061	1,322	1,803	541	373	380	25,544
Home Office Facilities	163,651	-	-	-	-	-	-	-	-	-	-	-	-	163,651
Administration	62,987	35,448	61,376	26,555	21,631	9,663	38,709	13,592	16,940	23,109	6,938	4,782	4,869	326,600
Human Resources	114,823	53,487	61,100	34,262	28,552	13,324	47,776	15,228	19,034	30,645	7,614	5,710	5,710	437,266
Legal	33,462	19,205	33,569	14,489	11,804	5,268	21,119	7,415	9,241	12,610	3,785	2,606	2,655	177,228
Records	12,325	6,857	11,873	5,137	4,185	1,869	7,488	2,630	3,277	4,471	1,342	925	942	63,321
Compliance	9,444	5,254	9,098	3,936	3,206	1,432	5,738	2,015	2,511	3,425	1,028	709	722	48,519
Comm Engage Plan	12,127	6,747	11,682	5,055	4,117	1,839	7,368	2,587	3,224	4,399	1,321	910	927	62,304
IT Operations	118,547	65,958	114,203	49,411	40,248	17,979	72,027	25,292	31,520	42,999	12,910	8,899	9,061	609,054
IT Security	14,142	7,869	13,624	5,895	4,801	2,145	8,593	3,017	3,760	5,130	1,540	1,062	1,081	72,658
IT Applications	66,588	37,049	64,148	27,754	22,608	10,099	40,458	14,206	17,705	24,153	7,251	4,998	5,089	342,107
Security Services	18,008	49,997	86,566	37,453	30,508	13,628	54,596	19,171	23,892	32,594	9,785	6,745	6,868	389,813
IT EPIC	149,475	83,166	143,997	62,301	50,749	22,670	90,817	31,890	39,743	54,217	16,277	11,220	11,424	767,947
Finance	48,400	26,929	46,626	20,173	16,432	7,340	29,406	10,326	12,869	17,555	5,271	3,633	3,699	248,659
Public Relations	12,028	6,692	11,587	5,013	4,084	1,824	7,308	2,566	3,198	4,363	1,310	903	919	61,797
Information Technology	16,114	9,248	16,165	6,978	5,685	2,537	10,170	3,571	4,450	6,072	1,823	1,255	1,279	85,345
Corporate Quality	9,237	5,303	9,256	4,001	3,260	1,455	5,832	2,048	2,552	3,482	1,045	720	733	48,924
Project MGMT Office	15,834	8,810	15,254	6,600	5,376	2,402	9,620	3,378	4,210	5,743	1,724	1,189	1,210	81,350
Managed Care Contract	-	728	1,261	546	444	199	795	279	348	475	143	98	100	5,416
Total Overhead Allocations	887,571	669,366	1,128,002	495,809	404,517	181,263	720,576	251,476	313,462	432,304	128,201	88,826	90,343	5,791,717
<b>Total Expenses</b>	<b>6,171,746</b>	<b>2,987,265</b>	<b>4,094,749</b>	<b>1,957,791</b>	<b>1,771,379</b>	<b>745,874</b>	<b>3,113,190</b>	<b>1,127,083</b>	<b>1,332,720</b>	<b>1,574,543</b>	<b>530,705</b>	<b>172,845</b>	<b>224,374</b>	<b>25,804,264</b>
<b>Net Margin</b>	<b>\$ (3,398,536)</b>	<b>\$ (1,033,980)</b>	<b>\$ (1,272,171)</b>	<b>\$ (635,369)</b>	<b>\$ (716,931)</b>	<b>\$ (132,949)</b>	<b>\$ (1,363,246)</b>	<b>\$ (325,170)</b>	<b>\$ (321,889)</b>	<b>\$ (810,074)</b>	<b>\$ (282,184)</b>	<b>\$ (96,091)</b>	<b>\$ (41,730)</b>	<b>\$ (10,430,319)</b>
Capital	-	-	-	-	-	-	-	-	-	-	-	-	-	-
General Fund Support/ Transfer In	\$ 9,025,566	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,025,566

### Primary Care Clinics- Medical Statement of Revenue and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
1,133,498	977,659	155,839	15.9%	1,386,659	(253,161)	(18.3%)	Gross Patient Revenue	14,101,578	9,612,096	4,489,482	46.7%	12,549,527	1,552,051	12.4%
753,443	177,949	(575,494)	(323.4%)	317,985	(435,458)	(136.9%)	Contractual Allowances	4,052,591	1,772,305	(2,280,286)	(128.7%)	2,370,288	(1,682,303)	(71.0%)
40,838	329,921	289,083	87.6%	469,434	428,596	91.3%	Charity Care	4,337,864	3,259,984	(1,077,880)	(33.1%)	4,188,478	(149,386)	(3.6%)
(64,319)	153,484	217,803	141.9%	287,826	352,145	122.3%	Bad Debt	2,348,653	1,553,320	(795,333)	(51.2%)	2,440,555	91,902	3.8%
729,962	661,354	(68,608)	(10.4%)	1,075,245	345,283	32.1%	Total Contractuals and Bad Debts	10,739,108	6,585,609	(4,153,499)	(63.1%)	8,999,321	(1,739,787)	(19.3%)
532,066	283,355	248,711	87.8%	183,300	348,766	190.3%	Other Patient Revenue	3,687,834	2,762,619	925,215	33.5%	2,785,796	902,038	32.4%
935,602	599,660	335,942	56.0%	494,714	440,888	89.1%	Net Patient Revenue	7,050,304	5,789,106	1,261,198	21.8%	6,336,002	714,302	11.3%
82.54%	61.34%			35.68%			Collection %	50.00%	60.23%		50.49%			
1,254,605	35,507	1,219,098	3,433.4%	1,366,361	(111,756)	(8.2%)	Grant Funds	7,496,110	6,099,270	1,396,840	22.9%	5,388,046	2,108,064	39.1%
7,163	145,876	(138,714)	(95.1%)	217,069	(209,907)	(96.7%)	Other Financial Assistance	753,884	4,749,712	(3,995,828)	(84.1%)	1,420,571	(666,686)	(46.9%)
1,823	45,034	(43,211)	(96.0%)	4,752	(2,929)	(61.6%)	Other Revenue	73,646	450,340	(376,694)	(83.6%)	71,294	2,352	3.3%
1,263,590	226,417	1,037,173	458.1%	1,588,182	(324,592)	(20.4%)	Total Other Revenues	8,323,641	11,299,322	(2,975,681)	(26.3%)	6,879,911	1,443,730	21.0%
2,199,192	826,077	1,373,115	166.2%	2,082,896	116,296	5.6%	Total Revenues	15,373,944	17,088,428	(1,714,484)	(10.0%)	13,215,912	2,158,032	16.3%
<i>Direct Operational Expenses:</i>														
1,121,241	1,235,227	113,986	9.2%	1,205,642	84,401	7.0%	Salaries and Wages	12,191,384	12,186,221	(5,163)	(0.0%)	11,578,083	(613,301)	(5.3%)
340,790	329,808	(10,982)	(3.3%)	333,273	(7,517)	(2.3%)	Benefits	3,434,720	3,278,743	(155,977)	(4.8%)	3,127,936	(306,784)	(9.8%)
106,950	43,174	(63,776)	(147.7%)	42,615	(64,336)	(151.0%)	Purchased Services	1,007,662	519,248	(488,414)	(94.1%)	655,655	(352,007)	(53.7%)
35,964	106,243	70,279	66.1%	29,869	(6,094)	(20.4%)	Medical Supplies	406,741	1,049,777	643,036	61.3%	201,005	(205,736)	(102.4%)
15,827	19,093	3,266	17.1%	29,130	13,303	45.7%	Other Supplies	144,316	190,930	46,614	24.4%	138,722	(5,594)	(4.0%)
63,843	81,724	17,881	21.9%	142,201	78,357	55.1%	Medical Services	633,206	807,488	174,282	21.6%	834,733	201,528	24.1%
54,509	58,960	4,451	7.5%	72,111	17,603	24.4%	Drugs	599,590	582,539	(17,051)	(2.9%)	818,951	219,361	26.8%
151,801	7,308	(144,493)	(1,977.2%)	11,115	(140,686)	(1,265.8%)	Repairs & Maintenance	211,169	73,080	(138,089)	(189.0%)	249,101	37,932	15.2%
78,733	140,299	61,566	43.9%	93,797	15,065	16.1%	Lease & Rental	819,480	1,067,679	248,199	23.2%	884,311	64,831	7.3%
5,545	6,008	463	7.7%	4,045	(1,499)	(37.1%)	Utilities	54,299	60,080	5,781	9.6%	39,178	(15,121)	(38.6%)
24,504	33,480	8,976	26.8%	22,680	(1,824)	(8.0%)	Other Expense	230,271	348,880	118,609	34.0%	225,291	(4,980)	(2.2%)
3,938	4,293	355	8.3%	3,675	(263)	(7.2%)	Insurance	36,497	42,930	6,433	15.0%	24,903	(11,594)	(46.6%)
2,003,645	2,065,617	61,972	3.0%	1,990,154	(13,491)	(0.7%)	Total Operational Expenses	19,769,335	20,207,595	438,260	2.2%	18,777,869	(991,466)	(5.3%)
195,547	(1,239,540)	1,435,087	(115.8%)	92,742	102,805	110.9%	Net Performance before Depreciation & Overhead Allocations	(4,395,391)	(3,119,167)	(1,276,224)	40.9%	(5,561,957)	1,166,565	(21.0%)



### Primary Care Clinics- Medical Statement of Revenue and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
24,106	12,917	(11,189)	(86.6%)	15,379	(8,727)	(56.7%)	Depreciation	243,211	129,170	(114,041)	(88.3%)	137,390	(105,821)	(77.0%)
<i>Overhead Allocations:</i>														
3,573	2,464	(1,110)	(45.0%)	1,341	(2,232)	(166.4%)	Risk Mgt	27,818	24,636	(3,182)	(12.9%)	16,488	(11,330)	(68.7%)
215,800	174,743	(41,057)	(23.5%)	-	(215,800)	0.0%	Rev Cycle	1,746,395	1,747,433	1,039	0.1%	944,673	(801,721)	(84.9%)
5,647	3,301	(2,347)	(71.1%)	-	(5,647)	0.0%	Internal Audit	25,544	33,006	7,462	22.6%	33,317	7,772	23.3%
18,059	17,713	(345)	(2.0%)	18,946	887	4.7%	Home Office Facilities	163,651	177,132	13,481	7.6%	170,987	7,337	4.3%
29,470	28,478	(991)	(3.5%)	25,333	(4,137)	(16.3%)	Administration	326,600	284,780	(41,819)	(14.7%)	279,456	(47,144)	(16.9%)
40,525	40,768	243	0.6%	31,688	(8,838)	(27.9%)	Human Resources	437,266	407,684	(29,582)	(7.3%)	327,195	(110,072)	(33.6%)
34,587	14,775	(19,812)	(134.1%)	13,432	(21,156)	(157.5%)	Legal	177,228	147,749	(29,479)	(20.0%)	131,605	(45,623)	(34.7%)
2,905	6,897	3,992	57.9%	5,978	3,073	51.4%	Records	63,321	68,969	5,647	8.2%	55,946	(7,376)	(13.2%)
563	5,901	5,338	90.5%	3,567	3,004	84.2%	Compliance	48,519	59,009	10,490	17.8%	68,067	19,548	28.7%
5,737	6,005	268	4.5%	-	(5,737)	0.0%	Comm Engage Plan	62,304	60,045	(2,259)	(3.8%)	-	(62,304)	0.0%
45,633	71,027	25,394	35.8%	-	(45,633)	0.0%	IT Operations	609,054	710,266	101,213	14.2%	-	(609,054)	0.0%
7,074	7,237	163	2.3%	-	(7,074)	0.0%	IT Security	72,658	72,372	(286)	(0.4%)	-	(72,658)	0.0%
(16,780)	34,638	51,419	148.4%	-	16,780	0.0%	IT Applications	342,107	346,385	4,278	1.2%	-	(342,107)	0.0%
42,670	40,184	(2,486)	(6.2%)	-	(42,670)	0.0%	Security Services	389,813	401,840	12,027	3.0%	-	(389,813)	0.0%
(31,785)	104,156	135,941	130.5%	-	31,785	0.0%	IT EPIC	767,947	1,041,560	273,613	26.3%	-	(767,947)	0.0%
34,806	27,135	(7,671)	(28.3%)	26,511	(8,295)	(31.3%)	Finance	248,659	271,348	22,689	8.4%	253,517	4,858	1.9%
4,628	8,618	3,990	46.3%	4,762	134	2.8%	Public Relations	61,797	86,182	24,385	28.3%	75,675	13,878	18.3%
1,416	7,115	5,699	80.1%	108,165	106,749	98.7%	Information Technology	85,345	71,150	(14,195)	(20.0%)	794,390	709,045	89.3%
3,100	4,080	980	24.0%	-	(3,100)	0.0%	Corporate Quality	48,924	40,801	(8,123)	(19.9%)	14,283	(34,641)	(242.5%)
8,805	9,628	823	8.5%	-	(8,805)	0.0%	Project MGMT Office	81,350	96,280	14,929	15.5%	49,331	(32,020)	(64.9%)
-	1,122	1,122	100.0%	1,668	1,668	100.0%	Managed Care Contract	5,416	11,215	5,799	51.7%	20,682	15,266	73.8%
456,433	615,984	159,551	25.9%	241,391	(215,041)	(89.1%)	Total Overhead Allocations	5,791,717	6,159,842	368,125	6.0%	3,235,612	(2,556,105)	(79.0%)
2,484,184	2,694,518	210,335	7.8%	2,246,924	(237,259)	(10.6%)	Total Expenses	25,804,264	26,496,607	692,343	2.6%	22,150,871	(3,653,393)	(16.5%)
\$ (284,991)	\$ (1,868,441)	\$ 1,583,450	(84.7%)	\$ (164,028)	\$ (120,963)	73.7%	Net Margin	\$ (10,430,319)	\$ (9,408,179)	\$ (1,022,141)	10.9%	\$ (8,934,959)	\$ (1,495,361)	16.7%
-	45,000	45,000	100.0%	(6,816)	(6,816)	100.0%	Capital	-	802,210	802,210	100.0%	6,460	6,460	100.0%
\$ -	\$ 1,910,000	\$ 1,910,000	100.0%	\$ -	\$ -	0.0%	General Fund Support/ Transfer In	\$ 9,025,566	\$ 10,255,000	\$ 1,229,434	12.0%	\$ 9,172,408	\$ 146,842	1.6%

**Primary Care Clinics- Dental Statement of Revenues and Expenses by Location**

FOR THE TENTH MONTH ENDED JULY 31, 2021

	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Total
<b>Gross Patient Revenue</b>	-	1,593,496	1,613,586	607,059	445,960	4,260,100
Contractual Allowances	-	571,109	732,575	200,461	227,542	1,731,688
Charity Care	-	798,978	469,780	316,843	127,640	1,713,243
Bad Debt	-	119,225	293,055	46,399	22,227	480,907
Total Contractual Allowances and Bad Debt	-	1,489,313	1,495,411	563,704	377,409	3,925,838
Other Patient Revenue	-	706,036	349,809	254,860	302,065	1,612,770
<b>Net Patient Revenue</b>	-	810,219	467,983	298,215	370,616	1,947,033
Collection %	-	50.85%	29.00%	49.12%	83.11%	45.70%
Grant Funds	117,730	432,799	254,003	249,494	84,132	1,138,158
Other Financial Assistance	(1,389)	64,763	(5,826)	87,485	13,018	158,051
Other Revenue	-	-	-	-	-	-
Total Other Revenues	116,341	497,562	248,177	336,979	97,150	1,296,209
<b>Total Revenues</b>	<b>116,341</b>	<b>1,307,780</b>	<b>716,160</b>	<b>635,194</b>	<b>467,766</b>	<b>3,243,241</b>
<i>Direct Operational Expenses:</i>						
Salaries and Wages	299,952	772,883	458,318	494,051	186,429	2,211,634
Benefits	78,656	228,657	121,345	136,333	59,816	624,807
Purchased Services	-	4,830	5,948	4,028	7,639	22,445
Medical Supplies	-	42,752	39,502	25,099	18,313	125,666
Other Supplies	488	45,716	14,462	7,811	7,487	75,963
Drugs	-	-	7	2	-	9
Repairs & Maintenance	-	2,801	2,615	2,468	2,331	10,215
Lease & Rental	-	91,917	54,383	50,995	26,750	224,045
Utilities	-	3,637	4,001	1,517	7,899	17,055
Other Expense	1,394	13,295	8,194	6,777	3,106	32,765
Insurance	-	-	-	-	547	547
Total Operational Expenses	380,489	1,206,488	708,775	729,082	320,318	3,345,152
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(264,148)</b>	<b>101,292</b>	<b>7,385</b>	<b>(93,888)</b>	<b>147,448</b>	<b>(101,911)</b>
Depreciation	-	19,468	9,363	8,433	35,226	72,490
<i>Overhead Allocations:</i>						
Risk Mgt	479	1,621	1,028	1,001	484	4,613
Rev Cycle	-	126,306	80,105	77,970	37,733	322,115
Internal Audit	440	1,488	944	918	445	4,234
Home Office Facilities	18,096	-	-	-	-	18,096
Administration	5,633	19,066	12,092	11,769	5,696	54,255
Human Resources	5,710	25,506	14,276	17,131	5,710	68,334
Legal	3,073	10,403	6,592	6,423	3,107	29,597
Records	1,090	3,688	2,339	2,277	1,102	10,496
Compliance	835	2,826	1,792	1,745	844	8,042
Comm Engage Plan	1,072	3,629	2,302	2,240	1,084	10,327
IT Operations	10,482	35,475	22,499	21,899	10,598	100,953
IT Security	1,250	4,232	2,684	2,613	1,264	12,043
IT Applications	5,888	19,927	12,638	12,301	5,953	56,706
Security Services	-	26,890	17,054	16,600	8,033	68,578
IT EPIC	13,216	44,730	28,369	27,613	13,363	127,291
Finance	4,279	14,484	9,186	8,941	4,327	41,216
Public Relations	1,063	3,599	2,283	2,222	1,075	10,243
Information Technology	1,480	5,010	3,174	3,093	1,496	14,253
Corporate Quality	849	2,873	1,820	1,774	858	8,173
Project MGMT Office	1,400	4,738	3,005	2,925	1,416	13,484
Managed Care Contract	-	392	248	242	117	999
Total Overhead Allocations	76,335	356,883	224,430	221,695	104,706	984,049
<b>Total Expenses</b>	<b>456,825</b>	<b>1,582,839</b>	<b>942,567</b>	<b>959,210</b>	<b>460,250</b>	<b>4,401,691</b>
<b>Net Margin</b>	<b>\$ (340,484)</b>	<b>\$ (275,059)</b>	<b>\$ (226,407)</b>	<b>\$ (324,016)</b>	<b>\$ 7,516</b>	<b>\$ (1,158,450)</b>
<b>Capital</b>	-	-	-	-	-	-
<b>General Fund Support/ Transfer In</b>	<b>\$ 961,464</b>	<b>54</b>	-	-	-	<b>961,464</b>

## Primary Care Clinics- Dental Statement of Revenues and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
509,408	273,161	236,247	86.5%	65,158	444,250	681.8%	4,260,100	2,761,874	1,498,226	54.2%	2,499,686	1,760,415	70.4%
552,786	44,705	(508,081)	(1,136.5%)	11,161	(541,625)	(4,852.7%)	1,731,688	452,208	(1,279,480)	(282.9%)	425,012	(1,306,676)	(307.4%)
5,971	156,796	150,825	96.2%	46,961	40,990	87.3%	1,713,243	1,586,533	(126,710)	(8.0%)	1,449,983	(263,260)	(18.2%)
31,249	17,740	(13,509)	(76.2%)	5,964	(25,286)	(424.0%)	480,907	176,616	(304,291)	(172.3%)	177,317	(303,590)	(171.2%)
590,006	219,241	(370,765)	(169.1%)	64,086	(525,920)	(820.6%)	3,925,838	2,215,357	(1,710,481)	(77.2%)	2,052,312	(1,873,526)	(91.3%)
200,712	99,216	101,496	102.3%	(23,809)	224,521	(943.0%)	1,612,770	1,004,789	607,981	60.5%	1,061,857	550,913	51.9%
<b>120,114</b>	<b>153,136</b>	<b>(33,022)</b>	<b>(21.6%)</b>	<b>(22,737)</b>	<b>142,851</b>	<b>(628.3%)</b>	<b>1,947,033</b>	<b>1,551,306</b>	<b>395,727</b>	<b>25.5%</b>	<b>1,509,231</b>	<b>437,802</b>	<b>29.0%</b>
23.58%	56.06%			-34.90%			45.70%	56.17%		60.38%			
148,802	6,742	142,060	2,107.1%	240,805	(92,003)	(38.2%)	1,138,158	1,303,135	(164,977)	(12.7%)	1,015,752	122,406	12.1%
73,333	-	73,333	0.0%	41,981	31,352	74.7%	158,051	-	158,051	0.0%	202,300	(44,249)	(21.9%)
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
222,135	6,742	215,393	3,194.8%	282,786	(60,650)	(21.4%)	1,296,209	1,303,135	(6,926)	(0.5%)	1,218,052	78,157	6.4%
<b>342,249</b>	<b>159,878</b>	<b>182,371</b>	<b>114.1%</b>	<b>260,049</b>	<b>82,201</b>	<b>31.6%</b>	<b>3,243,241</b>	<b>2,854,441</b>	<b>388,800</b>	<b>13.6%</b>	<b>2,727,282</b>	<b>515,959</b>	<b>18.9%</b>
<i>Direct Operational Expenses:</i>													
193,830	224,846	31,016	13.8%	232,330	38,500	16.6%	2,211,634	2,218,010	6,376	0.3%	2,334,097	122,463	5.2%
61,193	56,633	(4,560)	(8.1%)	64,518	3,326	5.2%	624,807	562,540	(62,267)	(11.1%)	640,381	15,574	2.4%
2,542	3,168	626	19.7%	7,677	5,135	66.9%	22,445	31,963	9,518	29.8%	88,710	66,265	74.7%
10,996	12,959	1,963	15.1%	55,276	44,280	80.1%	125,666	130,988	5,322	4.1%	179,082	53,416	29.8%
74,082	7,425	(66,657)	(897.7%)	4,288	(69,794)	(1,627.7%)	75,963	74,350	(1,613)	(2.2%)	11,328	(64,635)	(570.6%)
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
-	64	64	100.0%	69	69	100.0%	9	664	655	98.6%	219	210	95.8%
1,618	2,321	703	30.3%	4,571	2,952	64.6%	10,215	23,210	12,995	56.0%	36,128	25,913	71.7%
22,370	26,669	4,299	16.1%	25,392	3,022	11.9%	224,045	234,540	10,495	4.5%	251,731	27,686	11.0%
2,004	1,333	(671)	(50.3%)	1,164	(840)	(72.1%)	17,055	13,330	(3,725)	(27.9%)	10,308	(6,747)	(65.5%)
462	5,493	5,031	91.6%	1,430	968	67.7%	32,765	56,435	23,670	41.9%	24,240	(8,525)	(35.2%)
88	41	(47)	(113.7%)	41	(47)	(115.7%)	547	410	(137)	(33.5%)	339	(209)	(61.6%)
369,185	340,952	(28,233)	(8.3%)	396,756	27,571	6.9%	3,345,152	3,346,440	1,288	0.0%	3,576,562	231,410	6.5%
<b>Net Performance before</b>													
<b>(26,936)</b>	<b>(181,074)</b>	<b>154,138</b>	<b>(85.1%)</b>	<b>(136,707)</b>	<b>109,771</b>	<b>(80.3%)</b>	<b>(101,911)</b>	<b>(491,999)</b>	<b>390,088</b>	<b>(79.3%)</b>	<b>(849,280)</b>	<b>747,369</b>	<b>(88.0%)</b>

## Primary Care Clinics- Dental Statement of Revenues and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
6,993	4,417	(2,576)	(58.3%)	5,033	(1,959)	(38.9%)	Depreciation	72,490	44,170	(28,320)	(64.1%)	48,513	(23,977)	(49.4%)
<i>Overhead Allocations:</i>														
594	411	(183)	(44.4%)	290	(304)	(105.0%)	Risk Mgt	4,613	4,113	(500)	(12.2%)	3,561	(1,052)	(29.5%)
39,803	32,224	(7,580)	(23.5%)	-	(39,803)	0.0%	Rev Cycle	322,115	322,238	123	0.0%	218,279	(103,836)	(47.6%)
936	551	(385)	(69.9%)	-	(936)	0.0%	Internal Audit	4,234	5,510	1,276	23.2%	7,196	2,962	41.2%
1,997	2,055	58	2.8%	2,253	256	11.4%	Home Office Facilities	18,096	20,553	2,457	12.0%	20,333	2,237	11.0%
5,005	4,754	(251)	(5.3%)	5,471	467	8.5%	Administration	54,255	47,540	(6,715)	(14.1%)	60,357	6,102	10.1%
6,354	6,425	71	1.1%	7,021	667	9.5%	Human Resources	68,334	64,249	(4,085)	(6.4%)	72,491	4,158	5.7%
5,954	2,466	(3,488)	(141.4%)	2,901	(3,053)	(105.2%)	Legal	29,597	24,665	(4,933)	(20.0%)	28,424	(1,173)	(4.1%)
482	1,151	670	58.2%	1,291	810	62.7%	Records	10,496	11,513	1,018	8.8%	12,083	1,587	13.1%
93	985	892	90.5%	770	677	87.9%	Compliance	8,042	9,851	1,808	18.4%	14,701	6,659	45.3%
951	1,002	52	5.1%	-	(951)	0.0%	Comm Engage Plan	10,327	10,024	(303)	(3.0%)	-	(10,327)	0.0%
7,564	11,857	4,293	36.2%	-	(7,564)	0.0%	IT Operations	100,953	118,569	17,616	14.9%	-	(100,953)	0.0%
1,173	1,208	36	2.9%	-	(1,173)	0.0%	IT Security	12,043	12,081	38	0.3%	-	(12,043)	0.0%
(2,781)	5,782	8,564	148.1%	-	2,781	0.0%	IT Applications	56,706	57,824	1,118	1.9%	-	(56,706)	0.0%
7,507	7,067	(439)	(6.2%)	-	(7,507)	0.0%	Security Services	68,578	70,674	2,096	3.0%	-	(68,578)	0.0%
(5,268)	17,387	22,656	130.3%	-	5,268	0.0%	IT EPIC	127,291	173,874	46,583	26.8%	-	(127,291)	0.0%
5,769	4,530	(1,240)	(27.4%)	5,726	(43)	(0.8%)	Finance	41,216	45,298	4,081	9.0%	54,755	13,539	24.7%
767	1,439	672	46.7%	1,029	261	25.4%	Public Relations	10,243	14,387	4,144	28.8%	16,344	6,101	37.3%
264	1,188	923	77.8%	23,362	23,097	98.9%	Information Technology	14,253	11,878	(2,375)	(20.0%)	171,573	157,320	91.7%
578	681	103	15.2%	-	(578)	0.0%	Corporate Quality	8,173	6,811	(1,362)	(20.0%)	3,085	(5,088)	(164.9%)
1,459	1,607	148	9.2%	-	(1,459)	0.0%	Project MGMT Office	13,484	16,073	2,588	16.1%	10,654	(2,830)	(26.6%)
-	207	207	100.0%	386	386	100.0%	Managed Care Contract	999	2,068	1,069	51.7%	4,779	3,780	79.1%
79,199	104,979	25,780	24.6%	50,499	(28,701)	(56.8%)	Total Overhead Allocations	984,049	1,049,790	65,741	6.3%	698,617	(285,432)	(40.9%)
455,377	450,348	(5,029)	(1.1%)	452,288	(3,089)	(0.7%)	Total Expenses	4,401,691	4,440,400	38,709	0.9%	4,323,693	(77,998)	(1.8%)
\$ (113,128)	\$ (290,470)	\$ 177,342	(61.1%)	\$ (192,239)	\$ 79,111	(41.2%)	Net Margin	\$ (1,158,450)	\$ (1,585,959)	\$ 427,509	(27.0%)	\$ (1,596,410)	\$ 437,961	(27.4%)
-	-	-	0.0%	-	-	0.0%	Capital	-	-	-	0.0%	-	-	0.0%
\$ -	\$ 287,000	\$ 287,000	100.0%	\$ -	\$ -	0.0%	General Fund Support/ Transfer In	\$ 961,464	\$ 1,552,000	\$ 590,536	38.1%	\$ 1,415,459	\$ 453,995	32.1%



Clinic Visits - Adults and Pediatrics	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
	West Palm Beach	1,227	929	1,068	836	879	1,119	1,138	1,007	1,173	911			10,287	5,722	79.8%
Delray	1,061	883	989	776	582	723	600	541	560	457			7,172	6,177	16.1%	8,144
Lantana	1,738	1,282	1,379	1,374	1,480	1,638	1,799	1,695	1,832	1,258			15,475	15,859	(2.4%)	13,882
Belle Glade	616	395	661	451	555	656	622	566	616	621			5,759	4,158	38.5%	5,748
Lewis Center	786	695	807	662	696	685	584	541	648	227			6,331	1,640	286.0%	2,113
Lake Worth & Women's Health Care	1,153	979	958	907	953	1,339	1,206	1,222	1,409	1,002			11,128	6,870	62.0%	10,319
Jupiter Clinic	602	407	468	450	527	656	501	415	533	484			5,043	3,731	35.2%	3,488
West Boca & Women's Health Care	786	679	730	641	666	798	741	637	562	354			6,594	4,155	58.7%	5,944
Clb Mob 1 Warrior	16	-	-	1	-	-	-	-	-	351			368	124	196.8%	1,087
Clb Mob 2 Scout	-	-	-	-	-	-	-	-	-	559			559	124	350.8%	-
Clb Mob 3 Hero	-	-	-	-	-	-	-	-	-	592			592	124	377.4%	-
Mangonia Park	259	203	198	224	261	447	508	523	554	64			3,241	1,204	-	1,578
Mangonia Park-Substance	-	-	-	-	-	-	-	-	-	-			-	1,592	(100.0%)	2,338
<b>Total Clinic Visits</b>	<b>8244</b>	<b>6,452</b>	<b>7,258</b>	<b>6,322</b>	<b>6,599</b>	<b>8,061</b>	<b>7,699</b>	<b>7,147</b>	<b>7,887</b>	<b>6,880</b>	-	-	<b>72,549</b>	<b>51,480</b>	<b>40.9%</b>	<b>66,484</b>
<b>Dental Visits</b>																
West Palm Beach	467	334	427	172	159	179	693	691	705	469			4,296	4,254	1.0%	5,258
Lantana	447	358	473	466	495	558	553	423	561	475			4,809	6,319	(23.9%)	3,009
Delray	-	-	-	-	-	-	306	480	403	338			1,527	3,020	(49.4%)	3,171
Belle Glade	-	-	-	2	-	-	201	270	346	307			1,126	1,649	(31.7%)	2,081
<b>Total Dental Visits</b>	<b>914</b>	<b>692</b>	<b>900</b>	<b>640</b>	<b>654</b>	<b>737</b>	<b>1,753</b>	<b>1,864</b>	<b>2,015</b>	<b>1,589</b>	-	-	<b>11,758</b>	<b>15,242</b>	<b>(22.9%)</b>	<b>13,519</b>
<b>Total Medical and Dental Visits</b>	<b>9158</b>	<b>7,144</b>	<b>8,158</b>	<b>6,962</b>	<b>7,253</b>	<b>8,798</b>	<b>9,452</b>	<b>9,011</b>	<b>9,902</b>	<b>8,469</b>	-	-	<b>84,307</b>	<b>66,722</b>	<b>26.4%</b>	<b>80,003</b>
<b>Key Ratios</b>																
Collection Ratio													11%			
Bad debt write off as a percentage of total billing													0%			
Collections per visit													10			
Charges Per Visit													183			
Percentage of A/R less than 120 days													7%			
Days in AR													55			
<b>Mental Health Counselors (non-billable)</b>																
West Palm Beach	-	2	-	1	-	-	-	-	-	54			57	751	(92.4%)	1,330
Delray	60	41	22	1	3	2	-	-	1	19			149	614	(75.7%)	835
Lantana	-	36	2	-	1	-	-	3	1	-			43	2,484	(98.3%)	4,089
Belle Glade	26	18	41	21	14	21	18	15	11	67			252	282	(10.6%)	810
Mangonia Park	458	205	225	214	205	311	441	387	409	463			3,318	1,090	204.4%	1,823
Lewis Center	308	381	544	678	709	838	729	625	677	764			6,253	1,050	495.5%	1,219
Lake Worth	12	-	1	-	-	-	-	-	-	137			150	794	(81.1%)	1,196
Jupiter	-	-	-	-	-	-	-	-	-	-			-	-	0.0%	1
West Boca	-	-	-	-	-	-	-	-	-	-			-	-	0.0%	11
Mobile Van	-	-	-	-	-	-	-	-	-	-			-	402	(100.0%)	362
<b>Total Mental Health Screenings</b>	<b>864</b>	<b>683</b>	<b>835</b>	<b>915</b>	<b>932</b>	<b>1,172</b>	<b>1,188</b>	<b>1,030</b>	<b>1,099</b>	<b>1,504</b>	-	-	<b>10,222</b>	<b>7,467</b>	<b>36.9%</b>	<b>11,676</b>



# **SUPPLEMENTAL INFORMATION**

## **MEDICAID MATCH FUND**

# Medicaid Match Statement of Revenues and Expenditures

FOR THE TENTH MONTH ENDED JULY 31, 2021

Current Month								Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
491,667	491,666	1	0.0%	491,667	-	0.0%	PBC Interlocal	4,916,667	4,916,660	7	0.0%	4,916,667	-	0.0%
1	107	(106)	(98.9%)	11	(10)	(88.9%)	Other revenue	25	1,070	(1,045)	(97.7%)	1,003	(978)	(97.5%)
<b>491,668</b>	<b>491,773</b>	<b>(105)</b>	<b>(0.0%)</b>	<b>491,678</b>	<b>(10)</b>	<b>(0.0%)</b>	<b>Total Revenue</b>	<b>4,916,692</b>	<b>4,917,730</b>	<b>(1,038)</b>	<b>(0.0%)</b>	<b>4,917,669</b>	<b>(978)</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%	Contracted Physician Expense	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Medical Services	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Drugs	-	-	-	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%
1,407,924	1,485,814	77,890	5.2%	1,449,573	41,649	2.9%	Other Expense	14,454,085	14,531,971	77,886	0.5%	14,204,652	(249,434)	(1.8%)
-	-	-	0.0%	-	-	0.0%	Insurance	-	-	-	0.0%	-	-	0.0%
1,407,924	1,485,814	77,890	5.2%	1,449,573	41,649	2.9%	Total Operational Expenses	14,454,085	14,531,971	77,886	0.5%	14,204,652	(249,434)	(1.8%)
<b>Net Performance before Overhead</b>														
<b>(916,256)</b>	<b>(994,041)</b>	<b>77,785</b>	<b>(7.8%)</b>	<b>(957,896)</b>	<b>41,639</b>	<b>(4.3%)</b>	<b>Allocations</b>	<b>(9,537,394)</b>	<b>(9,614,241)</b>	<b>76,847</b>	<b>(0.8%)</b>	<b>(9,286,982)</b>	<b>(250,411)</b>	<b>2.7%</b>
<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%	Legislative Affairs	-	-	-	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%	Finance	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Communications	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Information Technology	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Total Overhead Allocations	-	-	-	0.0%	-	-	0.0%
<b>1,407,924</b>	<b>1,485,814</b>	<b>77,890</b>	<b>5.2%</b>	<b>1,449,573</b>	<b>41,649</b>	<b>2.9%</b>	<b>Total Expenses</b>	<b>14,454,085</b>	<b>14,531,971</b>	<b>77,886</b>	<b>0.5%</b>	<b>14,204,652</b>	<b>(249,434)</b>	<b>(1.8%)</b>
<b>(916,256)</b>	<b>(994,041)</b>	<b>77,785</b>	<b>(7.8%)</b>	<b>(957,896)</b>	<b>41,639</b>	<b>(4.3%)</b>	<b>Net Margin</b>	<b>(9,537,394)</b>	<b>(9,614,241)</b>	<b>76,847</b>	<b>(0.8%)</b>	<b>(9,286,982)</b>	<b>(250,411)</b>	<b>(2.7%)</b>
<b>\$ 916,256</b>	<b>\$ 994,041</b>	<b>\$ (77,785)</b>	<b>(7.8%)</b>	<b>\$ 957,896</b>	<b>(41,639)</b>	<b>(4.3%)</b>	<b>Total Transfers In</b>	<b>\$ 9,537,393</b>	<b>\$ 9,614,241</b>	<b>\$ (76,848)</b>	<b>(0.8%)</b>	<b>\$ 9,286,982</b>	<b>\$ 250,411</b>	<b>2.7%</b>

### Medicaid Match Statement of Revenues and Expenditures by Month

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Year to Date
Patient Revenue	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
PBC Interlocal	491,667	491,667	491,667	491,667	491,667	491,667	491,667	491,667	491,667	491,667	-	-	4,916,667
Other revenue	3	1	-	8	5	2	2	2	1	1	-	-	25
<b>Total Revenue</b>	<b>491,669</b>	<b>491,668</b>	<b>491,667</b>	<b>491,674</b>	<b>491,672</b>	<b>491,669</b>	<b>491,669</b>	<b>491,669</b>	<b>491,668</b>	<b>491,668</b>	-	-	<b>4,916,692</b>
<i>Direct Operational Expenses:</i>													
Salaries and Wages	-	-	-	-	-	-	-	-	-	-	-	-	-
Benefits	-	-	-	-	-	-	-	-	-	-	-	-	-
Purchased Services	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical Supplies	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Supplies	-	-	-	-	-	-	-	-	-	-	-	-	-
Contracted Physician Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical Services	-	-	-	-	-	-	-	-	-	-	-	-	-
Drugs	-	-	-	-	-	-	-	-	-	-	-	-	-
Repairs & Maintenance	-	-	-	-	-	-	-	-	-	-	-	-	-
Lease & Rental	-	-	-	-	-	-	-	-	-	-	-	-	-
Utilities	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Expense	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,449,573	1,407,924	-	-	14,454,085
Insurance	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total Operational Expenses</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,407,924</b>	-	-	<b>14,454,085</b>
<b>Net Performance before Overhead Allocations</b>	<b>(957,904)</b>	<b>(957,906)</b>	<b>(957,907)</b>	<b>(957,899)</b>	<b>(957,902)</b>	<b>(957,904)</b>	<b>(957,905)</b>	<b>(957,905)</b>	<b>(957,905)</b>	<b>(916,256)</b>	-	-	<b>(9,537,393)</b>
<i>Overhead Allocations:</i>													
Risk Mgt	-	-	-	-	-	-	-	-	-	-	-	-	-
Rev Cycle	-	-	-	-	-	-	-	-	-	-	-	-	-
Internal Audit**	-	-	-	-	-	-	-	-	-	-	-	-	-
Legislative Affairs	-	-	-	-	-	-	-	-	-	-	-	-	-
Administration**	-	-	-	-	-	-	-	-	-	-	-	-	-
Human Resources	-	-	-	-	-	-	-	-	-	-	-	-	-
Legal	-	-	-	-	-	-	-	-	-	-	-	-	-
Records	-	-	-	-	-	-	-	-	-	-	-	-	-
Compliance**	-	-	-	-	-	-	-	-	-	-	-	-	-
Finance	-	-	-	-	-	-	-	-	-	-	-	-	-
Communications	-	-	-	-	-	-	-	-	-	-	-	-	-
Information Technology	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total Overhead Allocations</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>Total Expenses</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,449,573</b>	<b>1,407,924</b>	-	-	<b>14,454,085</b>
<b>Net Margin</b>	<b>(957,904)</b>	<b>(957,906)</b>	<b>(957,907)</b>	<b>(957,899)</b>	<b>(957,902)</b>	<b>(957,904)</b>	<b>(957,905)</b>	<b>(957,905)</b>	<b>(957,905)</b>	<b>(916,256)</b>	-	-	<b>(9,537,393)</b>
<b>Total Transfers In</b>	<b>\$ 957,904</b>	<b>\$ 957,906</b>	<b>\$ 957,907</b>	<b>\$ 957,899</b>	<b>\$ 957,902</b>	<b>\$ 957,904</b>	<b>\$ 957,905</b>	<b>\$ 957,905</b>	<b>\$ 957,905</b>	<b>\$ 916,256</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 9,537,393</b>



**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Good Health Foundation Tax Form 990**

**2. Summary:**

This agenda item presents the tax form 990 filing for the Good Health Foundation.


**3. Substantive Analysis:**

The District’s external auditors, RSM US LLP, completed the tax filing for the fiscal year ended September 30, 2020.

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
  
 \_\_\_\_\_  
 VP & Chief Financial Officer

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

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

\_\_\_\_\_  
 N/A  
 Date Approved

**6. Recommendation:**

Staff recommends the Board receive and file the tax form 990 for the Good Health Foundation, Inc.

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

Approved for Legal sufficiency:

DocuSigned by:  
*bernabe leaza*  
-----  
01306600479...  
VP & General Counsel

DocuSigned by:  
*candice abbott*  
-----  
F6321005127...  
VP & Chief Financial Officer

DocuSigned by:  
*Darcy Davis*  
-----  
7D853389A479...  
Chief Executive Officer

Form **8879-EO**

# IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2019, or fiscal year beginning OCT 1, 2019, and ending SEP 30, 2020

# 2019

Department of the Treasury  
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**  
▶ **Go to [www.irs.gov/Form8879EO](http://www.irs.gov/Form8879EO) for the latest information.**

Name of exempt organization

Employer identification number

GOOD HEALTH FOUNDATION, INC.

65-0541467

Name and title of officer

EDWARD SABIN

CHAIR

## Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>97,091.</u>
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b	

## Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize RSM US LLP to enter my PIN 12345  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ *Edward Sabin* Date ▶ AUGUST 12, 2021

## Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

50888953719

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ RSM US LLP Date ▶ 08/06/21

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2019)

\*\* PUBLIC DISCLOSURE COPY \*\*

Form **990**  
(Rev. January 2020)  
Department of the Treasury  
Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**  
Open to Public Inspection

**A** For the **2019** calendar year, or tax year beginning **OCT 1, 2019** and ending **SEP 30, 2020**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization GOOD HEALTH FOUNDATION, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1515 N FLAGLER DR. 101 City or town, state or province, country, and ZIP or foreign postal code WEST PALM BEACH, FL 33401 <b>F</b> Name and address of principal officer: EDWARD SABIN SAME AS C ABOVE	<b>D</b> Employer identification number 65-0541467 <b>E</b> Telephone number (561)659-1270 <b>G</b> Gross receipts \$ 97,091. <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ N/A		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: 2006
		<b>M</b> State of legal domicile: FL

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: GOOD HEALTH FOUNDATION WAS ORGANIZED TO PROVIDE PHILANTHROPIC RESOURCES FOR THE HEALTH CARE		
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	8
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	8
<b>5</b>	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	<b>5</b>	0
<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	8
<b>7 a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0.
<b>7 b</b>	Net unrelated business taxable income from Form 990-T, line 39	<b>7b</b>	0.
<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
<b>9</b>	Program service revenue (Part VIII, line 2g)	190,837.	97,091.
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	606.	0.
<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.
<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	191,443.	97,091.
<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	244,255.	871,486.
<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
<b>16 b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,815.	3,685.
<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	247,070.	875,171.
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	-55,627.	-778,080.
<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
<b>21</b>	Total liabilities (Part X, line 26)	1,228,723.	448,123.
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	2,520.	0.
<b>22</b>		1,226,203.	448,123.

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer EDWARD SABIN, CHAIR Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Print/Type preparer's name JULIANA KREUL	Preparer's signature Date 08/13/21
	Firm's name ▶ RSM US LLP Firm's address ▶ 7351 OFFICE PARK PLACE MELBOURNE, FL 32940-8229	Check <input type="checkbox"/> if self-employed PTIN P01204534 Firm's EIN ▶ 42-0714325 Phone no. 321-751-6200

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [ ]

1 Briefly describe the organization's mission: THE FOUNDATION'S MISSION IS TO ADVANCE THE HEALTH OF RESIDENTS AND VISITORS IN PALM BEACH COUNTY THROUGH ACCESS TO LOCAL QUALITY HEALTH CARE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 871,486. including grants of \$ 871,486. ) (Revenue \$ ) TO SUPPORT THE PRIMARY CARE PROGRAM OF LAKESIDE MEDICAL CENTER AND PROVIDE MOBILE CARE WHERE IT'S MOST URGENTLY NEEDED

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 871,486.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....		X
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O .....	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....		

**Part V** Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		0
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>	X
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>	
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>	X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>	X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>	
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>	X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	X



Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included on line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official; b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed FL
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[ ] Own website [X] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
THE ORGANIZATION - (561)659-1270
1515 N FLAGLER DR., NO. 101, WEST PALM BEACH, FL 33401

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ED SABIN CHAIR	1.00	X		X				0.	0.	0.
(2) LESLIE B DANIELS DIRECTOR	1.00	X						0.	0.	0.
(3) NANCY BANNER, ESQUIRE DIRECTOR	1.00	X						0.	0.	0.
(4) JOSEPH BERGERON TREASURER	1.00	X						0.	0.	0.
(5) MICHAEL J. BURKE SECRETARY	1.00	X						0.	0.	0.
(6) RICHARD SARTORY DIRECTOR	1.00	X						0.	0.	0.
(7) MARK MARCIANO DIRECTOR	1.00	X						0.	0.	0.
(8) JOSEPH GIBBONS DIRECTOR	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes subtotal rows 1b, 1c, and 1d.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for 'NONE'.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	97,091.		
	g	Noncash contributions included in lines 1a-1f	1g	\$		
	<b>h Total. Add lines 1a-1f</b>			97,091.		
Program Service Revenue			Business Code			
	2 a					
	b					
	c					
	d					
	e					
	f	All other program service revenue				
<b>g Total. Add lines 2a-2f</b>						
Other Revenue	3		Investment income (including dividends, interest, and other similar amounts)			
	4		Income from investment of tax-exempt bond proceeds			
	5		Royalties			
	6 a	6a	(i) Real			
			(ii) Personal			
	b	6b	Less: rental expenses			
	c	6c	Rental income or (loss)			
	d			Net rental income or (loss)		
	7 a	7a	(i) Securities			
			(ii) Other			
	b	7b	Less: cost or other basis and sales expenses			
	c	7c	Gain or (loss)			
d			Net gain or (loss)			
8 a		8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18			
b		8b	Less: direct expenses			
c			Net income or (loss) from fundraising events			
9 a		9a	Gross income from gaming activities. See Part IV, line 19			
b		9b	Less: direct expenses			
c			Net income or (loss) from gaming activities			
10 a		10a	Gross sales of inventory, less returns and allowances			
b		10b	Less: cost of goods sold			
c			Net income or (loss) from sales of inventory			
Miscellaneous Revenue			Business Code			
	11 a					
	b					
	c					
	d	All other revenue				
<b>e Total. Add lines 11a-11d</b>						
<b>12 Total revenue. See instructions</b>			97,091.	0.	0.	0.

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	863,799.	863,799.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....	7,687.	7,687.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....				
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....				
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits .....				
<b>10</b> Payroll taxes .....				
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....				
<b>c</b> Accounting .....	2,625.		2,625.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....	1,060.		1,060.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
<b>12</b> Advertising and promotion .....				
<b>13</b> Office expenses .....				
<b>14</b> Information technology .....				
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....				
<b>17</b> Travel .....				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....				
<b>20</b> Interest .....				
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....				
<b>23</b> Insurance .....				
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> _____				
<b>b</b> _____				
<b>c</b> _____				
<b>d</b> _____				
<b>e</b> All other expenses _____				
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	875,171.	871,486.	3,685.	0.
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	
	<b>2</b> Savings and temporary cash investments .....	1,228,723.	<b>2</b>	443,904.
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	4,219.
	<b>4</b> Accounts receivable, net .....		<b>4</b>	
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b>		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b>		<b>10c</b>
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	1,228,723.	<b>16</b>	448,123.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	2,520.	<b>17</b>	0.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	2,520.	<b>26</b>	0.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	54,191.	<b>27</b>	50,507.
	<b>28</b> Net assets with donor restrictions .....	1,172,012.	<b>28</b>	397,616.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	1,226,203.	<b>32</b>	448,123.
	<b>33</b> Total liabilities and net assets/fund balances .....	1,228,723.	<b>33</b>	448,123.

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	97,091.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	875,171.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-778,080.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	1,226,203.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	448,123.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? \_\_\_\_\_  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? \_\_\_\_\_  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? \_\_\_\_\_  
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? \_\_\_\_\_
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits \_\_\_\_\_

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization: GOOD HEALTH FOUNDATION, INC. Employer identification number: 65-0541467

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions.
11 An organization organized and operated exclusively to test for public safety.
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s).
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s).
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s).
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	2,520.	650.	150,500.	190,837.	97,091.	441,598.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	2,520.	650.	150,500.	190,837.	97,091.	441,598.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						337,442.
<b>6 Public support.</b> Subtract line 5 from line 4.						104,156.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>7</b> Amounts from line 4 .....	2,520.	650.	150,500.	190,837.	97,091.	441,598.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	3,263.	5,086.	8,741.	606.	0.	17,696.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						459,294.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	22.68 %
<b>15</b> Public support percentage from 2018 Schedule A, Part II, line 14 .....	<b>15</b>	16.68 %
<b>16a 33 1/3% support test - 2019.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 33 1/3% support test - 2018.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2018.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ..... ►

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2018 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2018 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ►

**b 33 1/3% support tests - 2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ►

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ..... ►

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described in (a) above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>1</b>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>1</b>		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>2</b>		
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
<b>2a</b>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2019

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in <b>Part VI</b> ). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in <b>Part VI</b> ). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
7 <b>Excess distributions carryover to 2020.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.  
(See instructions.)

PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:

THE FOUNDATION CONTINUES A BONA FIDE PROGRAM FOR SOLICITATION OF FUNDS

FROM THE GENERAL PUBLIC. IN 2017, THE FOUNDATION RECOMMITTED AND

INCREASED ITS EFFORTS TO RAISE FUNDS FROM THE GENERAL PUBLIC TO ACCOMPLISH

ITS MISSION OF ADVANCING THE HEALTH OF THE COMMUNITY OF PALM BEACH COUNTY.

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Name of the organization

GOOD HEALTH FOUNDATION, INC.

Employer identification number

65-0541467

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).



Name of organization  GOOD HEALTH FOUNDATION, INC.	Employer identification number  65-0541467
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  GOOD HEALTH FOUNDATION, INC.	Employer identification number  65-0541467
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization  GOOD HEALTH FOUNDATION, INC.	Employer identification number  65-0541467
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2019**

**Open to Public Inspection**

**Name of the organization** GOOD HEALTH FOUNDATION, INC. **Employer identification number** 65-0541467

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment \_\_\_\_\_%
  - b Permanent endowment \_\_\_\_\_%
  - c Term endowment \_\_\_\_\_%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes    | No |
|--|--------|----|
| (i) Unrelated organizations  | 3a(i)  |    |
| (ii) Related organizations   | 3a(ii) |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 0.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	97,091.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>		
<b>b</b>	Donated services and use of facilities	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	97,091.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	0.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	97,091.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	875,171.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>		
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	875,171.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	875,171.

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE FOUNDATION EVALUATES ITS UNCERTAIN TAX POSITIONS IN ACCORDANCE WITH

ASC TOPIC 740, INCOME TAXES, WHICH STATES THAT MANAGEMENT'S DETERMINATION

OF THE TAXABLE STATUS OF AN ENTITY, INCLUDING ITS STATUS AS A NONPROFIT

ENTITY, IS A TAX POSITION SUBJECT TO THE STANDARDS REQUIRED FOR ACCOUNTING

FOR UNCERTAINTY IN INCOME TAXES. MANAGEMENT DOES NOT BELIEVE THAT THE

FOUNDATION HAS ANY SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD BE

MATERIAL TO THE FINANCIAL STATEMENTS. THE FOUNDATION IS NO LONGER SUBJECT

TO EXAMINATIONS BY U.S. TAX AUTHORITIES FOR TAX YEARS PRIOR TO 2017.





**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Name of the organization GOOD HEALTH FOUNDATION, INC. Employer identification number 65-0541467

**Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
DISTRICT CLINIC HOLDINGS INC. DBA: CL BRUMBACK PRIMARY CARE CLINICS - 1515 N FLAGLER DR SUITE 101 - WEST PALM BEACH, FL 33401	45-5591655	GOV	50,147.	0.			MOBILE HEALTH CLINIC
DISTRICT HOSPITAL HOLDINGS INC. DBA: LAKESIDE MEDICAL CENTER - 39200 HOOKER HWY - BELLE GLADE, FL 33430	35-2226306	GOV	813,652.	0.			CAPITAL ASSET PURCHASES AND IMPROVEMENTS AND THE DIABETES OUTREACH INITIATIVES

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2.

3 Enter total number of other organizations listed in the line 1 table 0.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2019)

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
ASSIST WITH FINANCIAL HARDSHIPS	4	7,687.	0.		

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

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**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

GOOD HEALTH FOUNDATION, INC.

Employer identification number

65-0541467

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

DISTRICT OF PALM BEACH COUNTY, FLORIDA.

FORM 990, PART I, LINE 1:

TO PROMOTE AND SUPPORT THE HEALTHCARE OF THE CITIZENS OF PALM BEACH

COUNTY, AND ITS SURROUNDING AREAS THROUGH GRANTS, GIFTS, AND CHARITABLE

CONTRIBUTIONS.

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF THE TAX RETURN IS PROVIDED TO ALL MEMBERS OF THE GOVERNING BODY

FOR REVIEW PRIOR TO FILING OF THE TAX RETURN.

FORM 990, PART VI, SECTION B, LINE 12C:

CONFLICT OF INTEREST FORMS ARE COLLECTED FROM ALL BOARD MEMBERS UPON

INSTALLATION, AT ANNUAL INTERVALS AND WITHIN 10 DAYS OF ENGAGING IN NEW

ACTIVITIES THAT MAY PRESENT A CONFLICT. FORMS ARE FORWARDED TO THE

COMPLIANCE DEPARTMENT OF THE HEALTH CARE DISTRICT OF PALM BEACH COUNTY,

WHERE POTENTIAL CONFLICTS ARE IDENTIFIED AND NECESSARY INVESTIGATIONS ARE

CONDUCTED. A HOTLINE NUMBER IS MAINTAINED BY THE DISTRICT THAT IS DEDICATED

TO REPORTING ACTUAL OR SUSPECTED POLICY VIOLATIONS.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: THE HEALTH CARE DISTRICT'S ANNUAL FINANCIAL REPORT (AFR)

INCLUDES THE FINANCIAL STATEMENT OF THE FOUNDATION, THE AFR AND THE

FOUNDATION'S AUDIT REPORT ARE AVAILABLE TO VIEW AND TO PRINT ON THE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization GOOD HEALTH FOUNDATION, INC.	Employer identification number 65-0541467
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DISTRICT'S WEBSITE. A COPY CAN ALSO BE OBTAINED BY CALLING OR WRITING TO  
 THE FOUNDATION - ALL CONTACT INFORMATION IS FOUND IN THE AFR. THE  
 FOUNDATION IS SUBJECT TO FLORIDA OPEN RECORDS AND SUNSHINE LAW. ALL  
 DOCUMENTS ARE AVAILABLE UPON REQUEST TO THE DISTRICT.

FORM 990, PART XII, LINE 2C:

EXPLANATION: THE RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF THE  
 ENTITY'S FINANCIAL STATEMENTS IS HELD BY THE FINANCE & AUDIT COMMITTEE.  
 THE FINANCE & AUDIT COMMITTEE PROVIDES ADDITIONAL GUIDANCE AND  
 OVERSIGHT. THE RESPONSIBILITY FOR SELECTION OF AN INDEPENDENT  
 ACCOUNTANT INVOLVES MULTIPLE COMMITTEES AND INITIATES WITH AN RFP  
 SELECTION COMMITTEE, WHO PROPOSES A PROCUREMENT RECOMMENDATION THAT  
 MUST THEN BE ACCEPTED OR REJECTED BY THE FINANCE & AUDIT COMMITTEE.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

Open to Public Inspection

Name of the organization: **GOOD HEALTH FOUNDATION, INC.**  
Employer identification number: **65-0541467**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
HEALTH CARE DISTRICT OF PALM BEACH COUNTY - 65-0145123, 1515 N FLAGLER DR SUITE 101, WEST PALM BEACH, FL 33401	PROMOTE HEALTHCARE IN PALM BEACH COUNTY	FLORIDA	GOVERNMENTAL ORGANIZATION		HEALTH CARE DISTRICT OF PALM BEACH COUNTY		X
CL BRUMBACK PRIMARY CARE CLINICS - 45-5591655, 1515 N FLAGLER DR SUITE 101, WEST PALM BEACH, FL 33401	PROMOTE HEALTHCARE IN PALM BEACH COUNTY	FLORIDA	GOVERNMENTAL ORGANIZATION		HEALTH CARE DISTRICT OF PALM BEACH COUNTY		X
LAKESIDE MEDICAL CENTER - 35-2226306 39200 HOOKER HWY BELLE GLADE, FL 33430	PROMOTE HEALTHCARE IN PALM BEACH COUNTY	FLORIDA	GOVERNMENTAL ORGANIZATION		HEALTH CARE DISTRICT OF PALM BEACH COUNTY		X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2019

**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....		X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CL BRUMBACK PRIMARY CARE CLINICS	B	50,147. FMV	
(2) LAKESIDE MEDICAL CENTER	B	813,652. FMV	
(3)			
(4)			
(5)			
(6)			





**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for providing supplemental information.

Form **8868**  
(Rev. January 2020)

# Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<b>Type or print</b>	Name of exempt organization or other filer, see instructions.  GOOD HEALTH FOUNDATION, INC.	Taxpayer identification number (TIN)  65-0541467
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1515 N FLAGLER DR., NO. 101	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WEST PALM BEACH, FL 33401	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

THE ORGANIZATION

- The books are in the care of ▶ 1515 N FLAGLER DR., NO. 101 - WEST PALM BEACH, FL 33401  
Telephone No. ▶ (561) 659-1270 Fax No. ▶
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until AUGUST 16, 2021, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning OCT 1, 2019, and ending SEP 30, 2020.

2 If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see instructions.**

Form **8868** (Rev. 1-2020)

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Medical Staff Appointment(s) for Lakeside Medical Center**

**2. Summary:**

The agenda item represents the practitioner(s) recommended for Medical Staff appointment by the Medical Executive Committee of Lakeside Medical Center.

**3. Substantive Analysis:**

The practitioner(s) listed below satisfactorily completed the credentialing and privileging process and met the standards set forth within the approved Medical Staff Bylaws. The credentialing and privileging process ensures that all Medical Staff meet specific criteria and standards of professional qualifications; this criterion includes, but is not limited to:

- Current licensure
- Relevant education, training and experience
- Current clinical and professional competence
- Health fitness and ability to perform requested privileges
- Malpractice history and liability insurance coverage
- Immunization status; and
- Applicable life support training

Last Name	First Name	Degree	Specialty	Appointment	Privileges
Alonso	Dayne	PA	Physician Assistant	Initial Appointment	Allied Health Professional
Hinson	Rashida	PA	Physician Assistant	Initial Appointment	Allied Health Professional
Lewis	Tamika	APRN	Nurse Practitioner	Initial Appointment	Allied Health Professional
Llanura	Claire	APRN	Nurse Practitioner	Initial Appointment	Allied Health Professional
McCartney	Megan	PA	Physician Assistant	Initial Appointment	Allied Health Professional
Oliscat	Gesie	APRN	Nurse Practitioner	Initial Appointment	Allied Health Professional
Orozco	Carolina	APRN	Nurse Practitioner	Initial Appointment	Allied Health Professional
Sequeira	Jessica	APRN	Nurse Practitioner	Initial Appointment	Allied Health Professional
Smith	Michele	APRN	Nurse Practitioner	Initial Appointment	Allied Health Professional
Wallace	Matthew	MD	Emergency Medicine	Initial Appointment	Provisional
Chine	Harrison	MD	Emergency Medicine	Initial Appointment	Provisional
Gomez	Rolando	MD	Obstetrics & Gynecology	Initial Appointment	Provisional

## HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE JOINT MEETING September 16, 2021

Meze	Mezeda	DO	Emergency Medicine	Initial Appointment	Provisional
Moore	Robin	MD	Emergency Medicine	Initial Appointment	Provisional
Curzi	Derrick	CRNA	Certified Registered Nurse Anesthetist	Reappointment	Allied Health Professional
Snook	Crista	CRNA	Certified Registered Nurse Anesthetist	Reappointment	Allied Health Professional
Abbas	Rahat	MD	Internal Medicine/Hospice Palliative Care	Reappointment	Active
Abouekde	Danny	DO	Family Medicine	Reappointment	Active
Assar	Mahdieh	MD	Radiology	Reappointment	Active
Fein	Steven	MD	Hematology/Oncology	Reappointment	Active
Jun	Aaron	MD	Radiology	Reappointment	Active
Kulatunga	Sudhira	MD	Pediatrics	Reappointment	Active
Lepoff	David	DO	Family Medicine	Reappointment	Active
Morales	Maria	MD	Obstetrics & Gynecology	Reappointment	Active
Oshier	Joseph	MD	Pediatrics	Reappointment	Active
Rios	Luis	MD	Pediatrics	Reappointment	Active

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
*Candice Abbott*  
\_\_\_\_\_  
Candice Abbott  
VP & Chief Financial Officer

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

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

\_\_\_\_\_  
N/A  
Date Approved

# HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE JOINT MEETING September 16, 2021

## 6. Recommendation:

Staff recommends the Board approve the Medical Staff Appointment(s) for Lakeside Medical Center.

Approved for Legal sufficiency:

DocuSigned by:  
*Bernabe Arza*  
0290 Bernabe Arza  
VP & General Counsel

DocuSigned by:  
*Belma Andric*  
18103480145 MD  
Chief Medical Officer

DocuSigned by:  
*Darcy Davis*  
7A5BE532-4BD2-4FBB-A712-909261E24F1A  
Chief Executive Officer

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Recredentialing and Privileging of Healey Center Practitioner**

**2. Summary:**

The below practitioner is recommended for approval by the Chief Medical Officer:

Last Name	First Name	Credentials	Specialty
Salazar	Armando	MD	Family Medicine

**3. Substantive Analysis:**

The practitioner has satisfactorily completed the recredentialing and privileging process. The credentialing and privileging process ensures that all facility practitioners meet specific criteria and standards of professional qualifications. This criterion includes, but is not limited to:

- Current licensure
- Relevant education, training and experience
- Current clinical competence
- Health fitness, or ability to perform the requested privileges
- Malpractice history (NPDB query)

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

The Healey Center utilized internal Credentialing staff and the Chief Medical Officer to support the credentialing and privileging process.

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

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

# HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE JOINT MEETING September 16, 2021

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
*Candice Abbott*  
Candice Abbott  
VP & Chief Financial Officer

## 5. Reviewed/Approved by Committee:

N/A  
Committee Name

N/A  
Date Approved

## 6. Recommendation:

Staff recommends the Board approve the recredentialing and privileging of the Healey Center practitioner.

Approved for Legal sufficiency:

DocuSigned by:  
*Bernabe Icaza*  
Bernabe Icaza  
VP & General Counsel

DocuSigned by:  
*Belma Andric*  
Belma Andric MD  
Chief Medical Officer

DocuSigned by:  
*Darcy Davis*  
Darcy Davis  
Chief Executive Officer

**HEALTH CARE DISTRICT BOARD & FINANCE AND AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Low Income Pool Participation for Palm Beach County Federally Qualified Health Centers**

**2. Summary:**

This agenda item presents the Board with a request to approve providing a Local Intergovernmental Transfer (IGT) for the Palm Beach County Federally Qualified Health Centers for their participation in the 2021-22 Low Income Pool Program.

**3. Substantive Analysis:**

Through an agreement with the Centers for Medicare and Medicaid Services (CMS), the State of Florida administers the Low Income Pool (LIP) Program to reimburse health services for uninsured populations. These health care expenditures may be incurred by the State, by hospitals, federally qualified health centers, community behavioral health providers, or by other provider types for uncompensated care that includes charity care for the uninsured.

The funding for the LIP Program is a shared funding between the State, local tax dollars and the federal government. Local governments, such as counties, hospital taxing districts and other agencies are able to provide funding for the non-federal share of the statewide LIP distributions.

The District has been presented with an opportunity to provide the Local IGT to the State for the 2021-22 LIP program year that will enable the State to draw down additional federal funding for Palm Beach County Federally Qualified Health Centers (FQHC). Under the LIP proposal, FQHCs in Palm Beach County stand to receive significant funding if the full local IGT match is provided.

Table 1 below identifies the required District Contribution (IGT), the State/Federal Match, and the FQHC Benefit for the FQHCs in Palm Beach County.



## HEALTH CARE DISTRICT BOARD & FINANCE AND AUDIT COMMITTEE JOINT MEETING September 16, 2021

Table 1

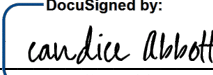
Provider Name	LIP IGTs Provided by District	State/Federal Match Contribution	Total FQHC LIP Benefits
C.L. Brumback Primary Clinics (FQHC)*	1,009,228	1,580,529	2,589,757
Florida Community Health Center *	833,755	1,305,724	2,139,479
FoundCare (FQHC)*	808,349	1,265,936	2,074,285
Genesis Community Health (FQHC)*	51,562	80,750	132,312
<b>Total</b>	<b>2,702,894</b>	<b>4,232,939</b>	<b>6,935,833</b>

\*FQHC amounts derived from FACHC 2021-22 LIP Model.

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

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	Up to \$2,702,894	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
  
 VP & Chief Financial Officer

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

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

N/A  
 \_\_\_\_\_  
 Date Approved

**HEALTH CARE DISTRICT BOARD & FINANCE AND AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**6. Recommendation:**

Staff recommends the Board approve funding the 2021-22 Low Income Pool Program IGT funding for the FQHCs listed in Table 1 and authorize the CEO to execute the required agreements.

Approved for Legal sufficiency:

DocuSigned by:  
*Bernabe Icaza*  
Bernabe Icaza...  
VP & General Counsel

DocuSigned by:  
*Candice Abbott*  
Candice Abbott...  
VP & Chief Financial Officer

DocuSigned by:  
*Darcy Davis*  
Darcy Davis...  
Chief Executive Officer

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Local Provider Participation Fund for the Directed Payment Program– Palm Beach County**

**2. Summary:**

This agenda item presents the Board with an overview of the Health Care District of Palm Beach County's (HCD) role as the administrator of the Local Provider Participation Fund (LPPF) for the Medicaid Directed Payment Program as requested by PBC Board of Commissioners.

**3. Substantive Analysis:**

As background, Florida's Legislature gave the state's AHCA authority to implement the Directed Pay Program (DPP) through Intergovernmental Transfers (IGT) earlier this year. The County has the opportunity to provide IGTs to support the DPP, which was recently approved by the Centers for Medicare & Medicaid Services (CMS). The Medicaid DPP must be approved by the CMS and must also be authorized by the Florida Legislature annually. The Board of County Commissioners approved the Ordinance August 26<sup>th</sup> 2021 establishing a Local Provider Participation Fund (LPPF) for the DPP to be solely funded by assessments on privately-owned real property used as a hospital.

The DPP helps hospitals recoup Medicaid shortfalls by unlocking additional federal funds. The DPP is a local option that allows local governments to establish a non-ad valorem (non-property tax) special assessment that is charged solely to private hospitals. Revenue generated through this special assessment is placed into an LPPF and is then matched with federal funds to provide Florida's hospitals with the supplemental Medicaid reimbursement. This helps to ensure that the non-federal share is paid by the hospitals, rather than by individuals or businesses with no ties to Medicaid.

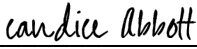
The County has requested that the HCD administer the LPPF on behalf of the County in exchange for an administrative fee not to exceed \$300,000. After AHCA finalizes its modeling of the non-federal share needed to fund the DPP, HCD will be required to notify the local hospitals of their respective non-ad valorem assessment amounts and collect the funds in the LPPF. HCD will then be required to remit the assessed funds to the state. Any revenue collected in excess of the assessment due to the state will be held in the LPPF and carried over to the following year.

## HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE JOINT MEETING September 16, 2021

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

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	Up to \$300,000	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
  
 \_\_\_\_\_  
6370299455217...  
 VP & Chief Financial Officer

### 5. Reviewed/Approved by Committee:


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


\_\_\_\_\_  
 N/A  
 Date Approved

### 6. Recommendation:

Staff recommends the Board authorize the CEO to execute the required agreements with AHCA.

Approved for Legal sufficiency:

DocuSigned by:  
  
 \_\_\_\_\_  
0290002044793  
 VP & General Counsel

DocuSigned by:  
  
 \_\_\_\_\_  
F6370299455217  
 VP & Chief Financial Officer

DocuSigned by:  
  
 \_\_\_\_\_  
7D3833892478...  
 Chief Executive Officer

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Medicaid Directed Payment Program– Lakeside Medical Center**

**2. Summary:**

This agenda item presents the Board with a request to approve funding the Intergovernmental Transfer (IGT) required for participation in the 2021-22 Medicaid Directed Payment Program (DPP).

**3. Substantive Analysis:**

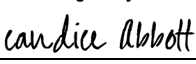
AHCA received the authority to implement the Directed Pay Program (DPP) through Intergovernmental Transfers (IGT) earlier this year. The District has the opportunity to provide an IGT to support the DPP for Lakeside Medical Center (Lakeside).

It is the intent of the DPP to offset hospitals’ Medicaid shortfalls and improve the quality of care provided to the Florida Medicaid population. Most hospitals will see this funding through increased Medicaid Managed Care reimbursement rates. As Lakeside does not have a broad enough Medicaid Managed Care base to receive the full Medicaid shortfall funding through increased rates, Lakeside would receive a lump sum payment later in the year after the IGT is complete.

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

	<b>Amount</b>	<b>Budget</b>
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	\$4,810,567	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	\$1,623,716	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
  
 \_\_\_\_\_  
6374209D8867...  
 VP & Chief Financial Officer

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

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

\_\_\_\_\_  
 N/A  
 Date Approved

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**6. Recommendation:**

Staff recommends the Board approve funding the 2021-22 DPP IGT for Lakeside Medical Center and authorize the CEO or CFO to execute the required agreements.

Approved for Legal sufficiency:

DocuSigned by:  
*Bernabe Icaza*  
-----  
30065021479...  
VP & General Counsel

DocuSigned by:  
*Cardie Abbott*  
-----  
63110021221...  
VP & Chief Financial Officer

DocuSigned by:  
*Darcy Davis*  
-----  
7D40538921473...  
Chief Executive Officer

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Indirect Medical Education Program**

**2. Summary:**

This agenda item presents the Board with a request to approve funding the Intergovernmental Transfer (IGT) required for participation in the retroactive 2020-2021 and the current 2021-22 Indirect Medical Education Program (IME).

**3. Substantive Analysis:**

The IME Program was established to provide additional payments to hospitals with graduate medical education programs, as listed in the General Appropriations Act, Laws of Florida 2021-036.

The District has the opportunity to provide an IGT to support participation in the IME Program for Lakeside Medical Center (Lakeside) as illustrated in Table 1 below.


Table 1

IME Program Year	1/1/2021- 6/30/2021	7/1/2021- 6/30/2022	Total
District IGT	253,036	377,713	630,749
Match Funding	404,131	523,744	927,875
<b>Total IME Benefit</b>	<b>657,167</b>	<b>901,457</b>	<b>1,558,624</b>

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

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	\$1,558,624	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	\$630,749	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
  
 Candice Abbott  
 VP & Chief Financial Officer

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

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

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

N/A  
\_\_\_\_\_  
Date Approved

**6. Recommendation:**

Staff recommends the Board approve funding the retroactive 2020-2021 and the current 2021-22 IME IGT for Lakeside Medical Center and authorize the CEO or CFO to execute the required agreements.

Approved for Legal sufficiency:

DocuSigned by:  
*Bernabe Icaza*  
\_\_\_\_\_  
02601632014479...  
VP & General Counsel

DocuSigned by:  
*Candice Abbott*  
\_\_\_\_\_  
F67011934201...  
VP & Chief Financial Officer

DocuSigned by:  
*Darcy Davis*  
\_\_\_\_\_  
7248334841179...  
Chief Executive Officer



# HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE

## JOINT MEETING

### September 16, 2021

#### 1. Description: Internal Audit Update

#### 2. Summary:

Internal Audit will provide an update on the status of the Internal Audit Work Plan for FY21, a summary of the completed reviews for Vendor Risk Management and an update from the Internal Control Committee.

#### 3. Substantive Analysis:

An update of the Internal Audit Work Plan for FY21 is below, noting the projects that are Complete, In Progress, In Planning and Deferred for FY21 by both in-house Internal Audit and the co-sourced firm, Cherry Bekaert. Completed since the June 23, 2021 meeting is the Vendor Risk Management Review. A summary of the report including the objectives of the review, and a listing of the action plans, based on risk, with action plan owners and due dates are below.

#### Status of FY21 Internal Audit Work Plan

Project	Description	Status
<b>Epic Implementation Review</b>	Cherry Bekaert was engaged to perform a pre-implementation review.	Complete
<b>CARES Act Assistance</b>	Cherry Bekaert was engaged to assist management in grant compliance and reporting.	Complete
<b>Change Management</b>	In-house IA will provide guidance to management to develop best practices.	In Planning
<b>Business Continuity Plans</b>	Will assist management in review of process.	In Progress
<b>Clinical Documentation &amp; Coding of Services</b>	In-House IA to work with management to determine a plan for ongoing auditing and monitoring of Clinical Documentation and Coding	Complete
<b>Vendor Risk and Vendor Management</b>	In-House IA and ICC to further develop and implement a Vendor Risk and Vendor Management process.	Complete
<b>340 B Effectiveness</b>	In-House IA will do mock audit	Deferred <sup>1</sup>
<b>Conflict of Interest Policy and Process Review</b>	In-House IA finalized report and worked with management in identifying action plan, owners and timeline of deliverables	Complete
<b>Policy Process review</b>	In-House IA will review process	Deferred <sup>2</sup>
<b>Sanction Screening review</b>	In-House IA finalized report and worked with management in identifying action plan, owners and timeline of deliverables	Complete
<b>CCP Vendor Review: Policies and Credentialing</b>	A review of CCP policies (Credentialing, Provider Operations, Claims, Compliance and Utilization Management) and a Credentialing audit for provision of outsourced services to District Cares and Trauma was performed. Both reviews were provided to CCP for their review and input.	Complete

The 340B Effectiveness Review is Deferred, pending outcome of Pharmacy Services review in process. Will be reassessed with  
<sup>1</sup> FY22 Risk Assessment

The Policy Process review is Deferred, as a new resource has been hired to coordinate the policy process, updates to system  
<sup>2</sup> are occurring, and policy governance is being reassessed. Will be reassessed with FY22 Risk Assessment.

## HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE JOINT MEETING September 16, 2021

Internal Audit worked with Health Care District (HCD) Vendor Risk Vendor Management (VRM) Steering Committee composed of members of management in the areas of Finance, Purchasing, Legal, IT Security, Compliance, Project Management, and Risk Management to review HCD current practices against best practices of the Vendor Risk and Vendor Management lifecycle in the following phases:

- Planning
- Due diligence
- Contract negotiation
- Ongoing monitoring
- Termination

The objectives of this review were to document the work that the internal team performed and this report summarizes the conclusions and recommendations based on this review, including outlines of a draft framework to consider establishing.

The review includes recommendations to improve the achievement of management objectives which are rated as follows:

Rating	Definition
High Risk	This risk severely impacts achieving objectives.
Medium Risk	This risk moderately impacts achieving objectives.
Low Risk	This risk has a low risk for achieving objectives.

Rating	Finding	Action Plan	Owner and Due Date
High	Develop a formalized process to identify Critical Third-Party Vendors	The VRM Steering Committee will create and document a formalized process to identify Critical Vendors and to develop criteria for further types of risk assessments and additional monitoring of critical vendors.	VRM Steering Committee, October 31, 2021
High	Develop Consistent Criteria for Obtaining Business Associate Agreement (BAA) in the	The VRM Steering Committee will develop consistent criteria for obtaining a BAA, in conjunction with Legal and Compliance for the VRM Process for Vendor Classification, and Vendor Due Diligence, prior to contracting. Additionally, a process to ensure	VRM Steering Committee, October 31, 2021

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

Rating	Finding	Action Plan	Owner and Due Date
	VRM Process, and Ensure it is Applied	regular review of vendor contracts will be developed to ensure that all appropriate BAA's are in effect.	
High	IT Security Questionnaire Should be Updated, a Risk Ranking Criteria should be developed, with Mitigation Plans Documented, and a Regular Review Performed	The VRM Steering Committee will work with the IT Security Manager and additional IT Resources to update the IT Security Questionnaire (to the newest standards including but not limited to SSAE18) and ensure that the IT Security Questionnaire becomes embedded in the VRM process during Vendor Classification (to identify the type of service and whether the survey is required) and during Vendor Due Diligence to ensure completion and review prior to contract finalization. Additionally, the VRM Resource(s) will ensure that a regular review is performed to ensure vendors comply.	VRM Steering Committee, February 28, 2022
Medium	Centralization of VRM Process and Assign Responsibility to Leadership group	Senior Leadership to centralize the HCD VRM process and assign a Leadership group to manage VRM.	Candice Abbott, VP and Chief Financial Officer September 31, 2021
Medium	VRM Steering Committee to implement a manual process for VRM and continue to	The VRM Steering Committee will develop a manual process to manage VRM, and continue to fine tune the Functional Needs Assessment in the event that leadership determines an automated solution can be	VRM Steering Committee December 31, 2021

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

Rating	Finding	Action Plan	Owner and Due Date
	refine Functional Needs Assessment	researched.	
Medium	Further Define, Develop, and Document the Vendor Risk Assessment Framework in Policies and Procedures	The VRM Steering Committee will further define, develop and document the vendor risk assessment framework, and implement the Vendor Risk assessment process prior to contracting.	VRM Steering Committee, January 31, 2022
Medium	Develop an SOC Requirement Process as Part of VRM Due Diligence	The VRM Steering Committee will develop a SOC report process as part of the VRM Due Diligence process. The need to request a SOC report will be included in the Vendor Classification process, dependent on the type of service provided. The VRM Steering Committee and the IT Security Manager will continue to work with the vendor to resolve any issues identified within the report prior to contract finalization and will work with the Legal department to develop appropriate contract language to include in the applicable service provider contracts.	VRM Steering Committee, January 31, 2022
Medium	Determine Requirement to Perform Exclusion Screening on Contracted	The VRM Steering Committee will work with Compliance and Legal to review the regulations and develop the criteria for what types of third-party contractors should have their associates either screened by the	VRM Steering Committee, February 28, 2022

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
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September 16, 2021**

Rating	Finding	Action Plan	Owner and Due Date
	Provider Employees	HCD, or by the vendor, or whether contract language as noted should be included. The result of the review will be included in the VRM Due Diligence process and embedded in the Vendor Classification process.	
Medium	Vendor Access to Facilities to be Reviewed and Included in VRM Process	The VRM Steering Committee will perform a review of current HCD Vendor Access policies and procedures across the HCD, and make recommendations for improvement and additional scrutiny of vendor employees, based on the type of access they require. These guidelines will become part of the VRM Vendor Classification process, and will be implemented in the VRM Due Diligence. HCD Vendor Access policies and procedures will be developed.	VRM Steering Committee, March 31, 2022
Medium	Contract Routing Process to be Updated with VRM Process	The VRM Steering Committee will ensure that the current contract routing process is reviewed and updated as the VRM Process is developed.	VRM Steering Committee, March 31, 2022
Medium	Requirement for Development of SLA's and KPI's Prior to Contracting	The VRM Steering Committee will develop and document guidelines by vendor type for the business owners to utilize to develop SLA's and KPI's, and will assist business owners during the contracting process to identify vendor specific SLA's and KPI's for each contract.	VRM Steering Committee, March 31, 2022

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

Rating	Finding	Action Plan	Owner and Due Date
Medium	Develop Guidelines for Ongoing Monitoring of Vendors	The VRM Steering Committee will develop standards and processes to required ongoing review of vendors, based on vendor type and specific to contracts for all vendors. These will be integrated into the VRM Program, and will include a requirement for an evaluation at contract term. Additionally, it will be necessary to integrate Vendor Monitoring into the HCD Business Continuity Program.	VRM Steering Committee, March 31, 2022
Low	Formalize the VRM Program	The identified Leadership group will ensure that the VRM Steering Committee will develop the VRM program, with board oversight and senior leadership support, with defined policies and procedures, integration into data sources, and internal and external communication protocols developed.	VRM Steering Committee, December 31, 2021
Low	Classify Vendors by Type and Update Forms and Systems to Include Vendor Type	The VRM Steering Committee will further refine the classification of vendors and create a classification for business owners to utilize. The VRM Steering Committee will update the fields in the vendor master, the required forms and systems, and will perform a review of the vendor master file.	VRM Steering Committee, January 31, 2022
Low	Develop VRM workflows by Vendor Type	The VRM Steering Committee to create VRM workflows for vendors based on the type of vendor and the	VRM Steering Committee,

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
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Rating	Finding	Action Plan	Owner and Due Date
	and type of Access to Data, Systems and Facilities	type of access.	January 31, 2022
Low	Develop Risk Response Framework	The VRM Steering Committee will develop a Risk Response framework and document a formalized process.	VRM Steering Committee, February 28, 2022
Low	Perform Review of All Due Diligence of Vendors and Form Single Repository	The VRM Steering Committee will review the process for due diligence of vendors, and will determine the roles and responsibilities of the appropriate parties involved in the process, with consideration for automation, where possible, and to avoid duplication of efforts.	VRM Steering Committee, February 28, 2022
Low	Establish VRM Guidelines for Vendor Selection	The VRM Steering Committee will review the EPMO Vendor Selection Guidelines and expand upon them for a resource for business owners as they work to engage new vendors.	VRM Steering Committee, March 31, 2022
Low	Require Vendor Termination Plan in Contract and Checklist	The VRM Steering Committee will develop guidelines for vendor off-boarding to include contract language and checklists, and will ensure that all vendor relationships include a plan for termination.	VRM Steering Committee, March 31, 2022

An update from the Internal Control Committee (ICC) is as follows:

ICC continues to meet monthly with recent areas of focus to include:

- A sub-group of ICC met regularly for Vendor Risk Management project

## HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE JOINT MEETING September 16, 2021

- Fraud Risk Assessment brainstorming and risk analysis continues
- Continuous monitoring of risks, and updating internal audit work plan
- New members have been orientated in the areas of Compliance and Human Resources
- Planning is starting for the FY22 Risk Assessment and Internal Audit Workplan
- The search for a firm to co-source Internal Audit on an as-needed basis is in process

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
*Candice Abbott*  
\_\_\_\_\_  
Candice Abbott  
VP & Chief Financial Officer

### 5. Reviewed/Approved by Committee:

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

\_\_\_\_\_  
N/A  
Date Approved

### 6. Recommendation:

Staff recommends the Board receive and file the Internal Audit Update.

Approved for Legal sufficiency:

DocuSigned by:  
*Bernabe Icaza*  
\_\_\_\_\_  
Bernabe Icaza  
VP & General Counsel

DocuSigned by:  
*Betsy Bittar*  
\_\_\_\_\_  
Betsy Bittar  
Senior Internal Auditor

DocuSigned by:  
*Candice Abbott*  
\_\_\_\_\_  
Candice Abbott  
VP & Chief Financial Officer



**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Lease Agreement - Delray Primary Care Clinic**

**2. Summary:**

We respectfully request the approval of the lease agreement to move the existing Delray Beach clinic to 200 Congress Park Dr, Suite 100, Delray Beach, FL 33445.

**3. Substantive Analysis:**

Staff is respectfully requesting the approval of the lease agreement to move the existing Delray Beach clinic to 200 Congress Park Dr, Suite 100, Delray Beach, FL 33445, which is located across the street from our existing clinic. Once improvements are completed in approximately nine months, we would move our current Delray Beach Clinic services to this new location.

Although this would be a cost increase proportional with increased space, we would be better positioned to ensure the clinic could accommodate social distancing. Additionally, the increased area would allow us to provide Substance Use Disorder services at this clinic, allowing better access to addiction services in the southern end of our county.

Other qualitative benefits of the new location include convenient access to Delray Medical Center, which is located close to where many of our existing patients live.

**Programming:**

- 11,874 rentable square feet
- Services Include: Medical, Dental, Behavioral Health, SUD (New) and Pharmacy
- 1 Large Shared Waiting Room and 1 SUD Waiting Room
- 14 Exam or Counselling Rooms
- Triage Room
- 6 Dental Chairs
- 1 Large Group Therapy Room
- 3 Shared WorkSpaces and Additional Nursing Work Areas
- Centralized Registration for Medical and Dental and Additional Registration for SUD
- Support Staff Space for Certified Application Counselors and Referral Coordinators
- Ample Storage and Staff Areas

**Lease Summary:**

- \$30,674.50 total monthly rent (base rent + operating expense)
- \$0 - No prepaid rent due upon lease execution
- \$32,668.34 deposit due at execution of the lease
- 2.5% base rent annual increase


## HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE JOINT MEETING September 16, 2021

- Ten years and three months with the first three months rent abatement

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

	Amount	Budget
Capital Requirements	\$286,000	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	\$60,000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Expenditures	\$240,876	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
  
 Candice Abbott  
 VP & Chief Financial Officer

### 5. Reviewed/Approved by Committee:


CL Brumback Primary Care Clinic Board  
 Committee Name

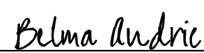
08/25/2021  
 Date Approved

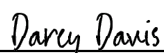
### 6. Recommendation:

Staff recommends the Board Approve the request for Lease Agreement - Delray Primary Care Clinic.

Approved for Legal sufficiency:

DocuSigned by:  
  
 Bernabe Icaza  
 VP & General Counsel

DocuSigned by:  
  
 Belma Andric, M.D.  
 Chief Medical Officer

DocuSigned by:  
  
 Darcy Davis  
 Chief Executive Officer

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Lease Agreement - West Boca Primary Care Clinic**

**2. Summary:**

We respectfully request the approval of the lease agreement to move the existing West Boca site to 9960 S Central Park Blvd, Suite 450, Boca Raton, FL 33428.

**3. Substantive Analysis:**

Staff is respectfully requesting the approval of the lease agreement to move the existing West Boca site to 9960 S Central Park Blvd, Suite 450, Boca Raton, FL 33428, which is located two miles from our existing clinic. Once improvements are completed in approximately six months, we would move our current West Boca Clinic services to this new location.

Although this would be a cost increase proportional to increased space, we would be better positioned to ensure the clinic could accommodate social distancing.

Other qualitative benefits of the new location include convenient access to West Boca Medical Clinic, near where many of our existing patients live.

**Programming:**

- 4,671 rentable square feet
- Services Include: Medical and Behavioral Health
- 1 Large Shared Waiting Room
- 10 Exam or Counseling Rooms
- Triage Room
- Large Shared Work Space and Additional Nurse/MA Work Area
- Centralized Registration for Medical and Behavioral Health
- Support Staff Space for Certified Application Counselor and Referral Coordinator
- Ample Storage and Staff Areas

**Lease Summary:**

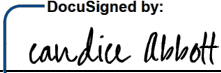
- \$13,281.21 total monthly rent (base rent + operating expense)
- \$0 - No prepaid rent due upon lease execution
- \$13,561.47 deposit due at execution of the lease
- 2.5% base rent annual increase
- Ten years and four months with the first four months rent abatement

## HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE JOINT MEETING September 16, 2021

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

	Amount	Budget
Capital Requirements	\$68,588	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Expenditures	\$174,814	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
  
 \_\_\_\_\_  
Candice Abbott  
 VP & Chief Financial Officer

### 5. Reviewed/Approved by Committee:

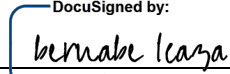
CL Brumback Primary Care Clinic Board  
 \_\_\_\_\_  
 Committee Name

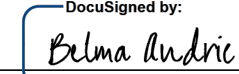
08/25/2021  
 \_\_\_\_\_  
 Date Approved

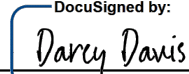
### 6. Recommendation:

Staff recommends the Board Approve the request for Lease Agreement - West Boca Primary Care Clinic.

Approved for Legal sufficiency:

DocuSigned by:  
  
 \_\_\_\_\_  
Bernabe Icaza  
 VP & General Counsel

DocuSigned by:  
  
 \_\_\_\_\_  
Belma Andric  
 Chief Medical Officer

DocuSigned by:  
  
 \_\_\_\_\_  
Darcy Davis  
 Chief Executive Officer

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

**1. Description: Lease Agreement - Mangonia Primary Care Clinic**

**2. Summary:**

We respectfully request the approval of the lease agreement to move the existing Mangonia clinic to 2051 N 45<sup>th</sup> Street, Suite 300, West Palm Beach, FL 33407.

**3. Substantive Analysis:**

Staff is respectfully requesting the approval of the lease agreement to move the existing Mangonia clinic to 2051 N 45<sup>th</sup> Street, Suite 300, West Palm Beach, FL 33407, which is located on the same campus as our existing clinic. Once improvements are completed in approximately six months, we would move our current Mangonia services to this new location.

Although this would be a cost increase proportional to increased space, we would be better positioned to ensure the clinic could accommodate social distancing. Additionally, the increased space would allow us to have an onsite District pharmacy to sublease their space.

**Programming:**

- 5,776 rentable square feet
- Services: Medical, Behavioral Health, SUD, Pharmacy (New)
- 1 Shared Waiting Room and 1 SUD Waiting Room
- 8 Exam or Counselling Rooms
- 1 Centering or Exam Room
- 1 Large Group Therapy Room
- Patient Lounge Area and Self Care Area (New) Including Shower and Clothes Cabinets
- 2 Shared WorkSpaces and Additional Nursing / MA Work Areas
- Centralized Registration for All Services
- Support Staff Space for Certified Application Counselor and Referral Coordinator
- Ample Storage and Staff Areas

**Lease Summary:**

- \$12,943.06 total monthly rent (base rent + operating expense)
- \$28,947.39 prepaid rent, representing base rent for first and last months of lease term
- \$16,004.33 deposit due at execution of the lease
- 3.0% base rent annual increase
- Ten years and six months with the first six months rent abatement

**HEALTH CARE DISTRICT BOARD AND FINANCE & AUDIT COMMITTEE  
JOINT MEETING  
September 16, 2021**

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

	<b>Amount</b>	<b>Budget</b>
Capital Requirements	\$174,000	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	\$65,600	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Expenditures	\$121,708	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:  
*Candice Abbott*  
\_\_\_\_\_  
Candice Abbott  
VP & Chief Financial Officer

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

CL Brumback Primary Care Clinic Board  
\_\_\_\_\_  
Committee Name

08/25/2021  
\_\_\_\_\_  
Date Approved

**6. Recommendation:**

Staff recommends the Board Approve the request for Lease Agreement - Mangonia Primary Care Clinic.

Approved for Legal sufficiency:

DocuSigned by:  
*Bernabe Leaza*  
\_\_\_\_\_  
Bernabe Leaza  
VP & General Counsel

DocuSigned by:  
*Belma Andric*  
\_\_\_\_\_  
Belma Andric, MD  
Chief Medical Officer

DocuSigned by:  
*Darcy Davis*  
\_\_\_\_\_  
Darcy Davis  
Chief Executive Officer