



C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County

BOARD OF DIRECTORS

September 28, 2022

12:45 P.M.

Meeting Location

1515 N. Flagler Drive, Suite 101

West Palm Beach, FL 33401

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

**BOARD OF DIRECTORS MEETING
AGENDA
September 28, 2022
1515 N. Flagler Drive, Suite 101
West Palm Beach, FL 33401**

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

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

1. **Call to Order – Melissa Mastrangelo, Chair**
 - A. Roll Call
 - B. Affirmation of Mission: To provide compassionate, comprehensive health services to all Palm Beach County residents, through collaboration and partnership, in a culturally sensitive environment.
2. **Agenda Approval**
 - A. Additions/Deletions/Substitutions
 - B. Motion to Approve Agenda
3. **Awards, Introductions and Presentations**
 - A. C.L. Brumback Lantana Clinic Overview
(Elisa Tomas)
4. **Disclosure of Voting Conflict**
5. **Public Comment**
6. **Meeting Minutes**
 - A. **Staff recommends a MOTION TO APPROVE:**
Board Meeting Minutes of August 24, 2022 [Pages 1-10]
7. **Consent Agenda – Motion to Approve Consent Agenda Items**
 - A. **ADMINISTRATION**
 - 7A-1 **RECEIVE AND FILE:**
September 2022 Internet Posting of District Public Meeting
<https://www.hcdpbc.org/resources/public-meetings>
 - 7A-2 **RECEIVE AND FILE:**
Attendance tracking [Page 11]

(Consent Agenda Cont.)

B. FINANCE

- 7B-1 **Staff Recommends a MOTION TO APPROVE:**
District Clinic Holdings, Inc. Financial Report July
2022 YTD
(Candice Abbott) [Pages 12-28]

8. Regular Agenda

A. EXECUTIVE

- 8A-1 **RECEIVE AND FILE:**
Executive Director Informational Update
(Dr. Belma Andric) [Page 29-30]

B. CREDENTIALING

- 8B-1 **Staff Recommends a MOTION TO APPROVE:**
Licensed Independent Practitioner Credentialing and Privileging
(Dr. Charmaine Chibar) [Pages 31-33]

C. QUALITY

- 8C-1 **Staff Recommends a MOTION TO APPROVE:**
Quality Report
(Dr. Charmaine Chibar) [Pages 34-67]

D. OPERATIONS

- 8D-1 **Staff Recommends a MOTION TO APPROVE:**
Operations Report- August 2022
(Marisol Miranda) [Pages 68-71]

9. AVP and Executive Director of Clinic Services Comments

10. Board Member Comments

11. Establishment of Upcoming Meetings

October 26, 2022 (HCD Board Room)
12:45 p.m. Board of Directors

C. L. Brumback Primary Care Clinics
Board of Directors
Meeting Agenda
September 28, 2022

November 29, 2022 (HCD Board Room)

12:45 p.m. Board of Directors

December 13, 2022 (HCD Board Room)

12:45 p.m. Board of Directors

12. Motion to Adjourn

13. Closed Meeting

**District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
8/24/2022**

Present: Mike Smith, Vice-Chair; Julia Bullard, Secretary; Joseph Gibbons, Treasurer; John Casey Mullen; James Elder; Irene Figueroa;

Excused: Melissa Mastrangelo, Chair; Tammy Jackson-Moore; Robert Glass

Staff: Darcy Davis; Dr. Belma Andric; Dr. Hyla Fritsch; Bernabe Icaza; Candice Abbott; Lisa Hogans; Dr. Charmaine Chibar; Alexa Goodwin; David Speciale; Jonathan Dominique; Elba Cespedes; Carolina Foksinski; Beatrice Bittar; Macson Florvil; Shannon Wynn

Minutes Transcribed By: Shannon Wynn

The meeting is scheduled for 12:45 p.m.

Meeting Began at 12:46 p.m.

AGENDA ITEM	DISCUSSION	ACTION
1. Call to Order 1A. Roll Call 1B. Affirmation of Mission	Mr. Smith called the meeting to order. Roll call was taken. Ms. Mastrangelo read the affirmation of mission.	The meeting was called to order at 12:46 p.m.

2. Agenda Approval		
2A. Additions/Deletions/ Substitutions 2B. Motion to Approve Agenda Items	None. Mr. Smith called for approval of the meeting agenda.	VOTE TAKEN: Mr. Joseph Gibbons made a motion to approve the agenda. Mr. John Mullen duly seconded the motion. A vote was called and the motion passed unanimously.
3. Awards, Introductions and Presentations 3A. C.L. Brumback Lake Worth Clinic Overview	Ms. Elba Cespedes presented to the Board the Lake Worth clinic overview.	No action necessary.
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.
6. Meeting Minutes 6A-1 staff Recommends a MOTION TO APPROVE: Board meeting minutes of July 27, 2022	There were no changes or comments to the minutes dated July 27, 2022.	VOTE TAKEN: As presented, Mr. Joseph Gibbons made a motion to approve the Board meeting minutes of July 27, 2022. Mr. John Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.

7. Consent Agenda – Motion to Approve Consent Agenda Items		VOTE TAKEN: Mr. James Elder motioned to approve the consent agenda. Mr. Joseph Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.
7A. ADMINISTRATION		
7A-1. Receive & File: August 2022 Internet Posting of District Public Meeting	The meeting notice was posted.	Receive & File. No further action is necessary.
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Receive & File. No further action is necessary.
7B. FINANCE		
7B-1. Recommends a MOTION TO APPROVE: District Clinic Holdings, Inc. Financial Report June 2022	<p>The June financial statements represent the financial performance through the ninth month of the 2022 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, due from other governments increased by \$297k as a result of revenue recognition for grants and other funding programs.</p> <p>On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$307k). An increase in actual charity care recognized compared to budgeted charity care is contributing to this unfavorable variance. Gross patient revenue YTD was favorable to budget by \$2.9M. Total YTD revenue was unfavorable to budget by (\$126k); this was partially due to a timing difference in grant funds recognized. Operational expenses before depreciation were favorable to budget by \$3.9M due mostly to positive variances in salaries, wages, and benefits of \$2.0M, purchased services of \$256k, medical supplies of \$194k, medical services of \$132k, drugs of \$362k, lease and rental of \$667k, and other expense of \$126k. The total YTD net margin was (\$7.9M) compared to the</p>	VOTE TAKEN: Mr. James Elder motioned to approve the District Clinic Holdings, Inc. Financial Report June 2022 agenda. Mr. Joseph Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.

	<p>budgeted loss of (\$12.4M) resulting in a favorable variance of \$4.5M or (36.6%).</p> <p>Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$707k). The Medical Clinic YTD gross patient revenue was unfavorable to budget by (\$1.8M). The Medical clinic's total YTD revenue was unfavorable to budget by (\$346k). These unfavorable variances resulted from lower net patient revenue than budgeted and a timing difference of revenue recognition for grant funds. Total operating expenses of \$17.6M were favorable to budget of \$21.4M by \$3.8M or 17.7%. The positive variance is mostly due to salaries, wages, and benefits of \$1.9M, purchased services of \$225k, medical supplies of \$238k, medical services of \$132k, drugs of \$362k, repair and maintenance of \$144k, lease and rental of \$619k, and other expense of \$110k. Unanticipated staffing shortages as well as expense timing are driving these favorable variances. Total YTD net margin was favorable to budget by \$4.1M or (36.1%).</p> <p>Net patient revenue YTD for the Dental clinics was favorable to budget by \$367k. Thancee Dental clinics total YTD gross patient revenue was favorable to budget by \$4.7M. An increase in unanticipated patient volume resulted in higher gross revenue, however, increased charity care and contractual allowances unfavorably impacted net patient revenue results. Total YTD operating expenses of \$3.2M were favorable to budget by \$80k. Total YTD net margin was (\$605k) compared to a budgeted loss of (\$993k) for a favorable vari of \$389k or (39.1%).</p>	
8. REGULAR AGENDA		
8A. EXECUTIVE		
8A-1. Receive & File: Executive Director Informational Update	<p>AVP, Executive Director of Clinics and Pharmacy Services resignation</p> <p>In order to reprioritize time with her family, Dr. Fritsch has tendered her letter of resignation effective October 7, 2022.</p>	Receive & File. No further action is necessary.
8B. ADMINISTRATION		
8B-1. Staff Recommends a MOTION TO APPROVE:	<p>This agenda item presents the annual evaluation of Dr. Hyla Fritsch, AVP & Executive Director of Clinic & Pharmacy Services.</p>	VOTE TAKEN: Mr. Joseph Gibbons motioned to approve the Executive Director of Clinic Annual Evaluation agenda. Ms.

<p>Executive Director of Clinic Annual Evaluation</p>	<p>The Bylaws and HRSA Compliance Manual indicate that the annual evaluation of the Executive Director of the Clinics are reviewed and approved by the Board. Evaluation provided under separate cover.</p>	<p>Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
<p>8B-2.Staff Recommends a MOTION TO APPROVE: Health Care District recommendation for an interim replacement of Executive Director</p>	<p>Dr. Hyla Fritsch was appointed by the District Clinic Holdings, Inc., d/b/a C. L. Brumback Primary Clinics (“Clinics”) Board of Directors (“Board”) as the Executive Director in October of 2020. Since that time, she has served the clinics diligently in her role. Dr. Fritsch has submitted her resignation effective October 7, 2022. At this time, we would like to recommend that Dr. Belma Andric be made the interim Executive Director of the Clinics (HRSA Project Director).</p> <p>The Health Care District of Palm Beach County (“HCD”) and the Clinics entered into a co-applicant arrangement in 2012 in order to transition the responsibility for operating the four existing Federally Qualified Health Centers (“FQHC”) from the State of Florida Department of Health to the HCD. In order to maintain the FQHC status and to receive grant funding from the Health Resources and Services Administration (“HRSA”), certain authorities were delegated to the Board as requirements of the HRSA rules and regulations. Several of the key components of these responsibilities include:</p> <ul style="list-style-type: none"> *Establishment of general policies for operating the FQHC's *Approval for the selection and dismissal of the Executive Director *Evaluation of the clinic activities including productivity, patient satisfaction, achievement of project objectives and services utilization patterns *Assuring that the clinics are operated in compliance with applicable federal, state and local laws and regulations *Maintaining infrastructure agreements and contracts regarding sites, services and outreach *Strive for top quartile of Uniform Data System quality awards <p>Also, there is an agreement between the HCD and the Clinics, which further outlines the role of each party in operating the clinics. The HCD has a robust infrastructure that provides necessary operational support and employs the Clinics’ personnel. Additionally, both parties have agreed to jointly review and approve a budget and financial plan each year.</p>	<p>VOTE TAKEN: Mr. Joseph Gibbons motioned to approve the Health Care District recommendation for an interim replacement of Executive Director agenda. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

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

8C. CREDENTIALING

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

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

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

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

Last Name	First Name	Degree	Specialty	Credentialing
Noukelak	Germaine	MD	Internal Medicine	Initial Credentialing
Ali	Bushra	DMD	General Dentistry	Initial Credentialing
Stanek	Ewelina	PA	Physician Assistant	Initial Credentialing

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

VOTE TAKEN: Mr. John Mullen motioned to approve the initial credentialing and privileging agenda of Germaine Noukelak; Bushra Ali; Ewelina Stanek. Mr. Joseph Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.

	<p>HRSA requirements. A Nationally accredited Credentials Verification Organization (CVO) was utilized to verify the elements requiring primary source verification.</p> <p>The C.L. Brumback Primary Care Clinics utilized internal Credentialing staff and the FQHC Medical Director to support the credentialing and privileging process.</p> <p>Germaine Noukelak, MD, joined the Delray Clinic in 2022, specializing in Internal Medicine. She attended Howard University and completed her Residency at Howard University Hospital.</p> <p>Bushra Ali, DMD, joined the Delray clinic in 2022, specializing in General Dentistry. She attended Rutgers, the State University of New Jersey School of Dental Medicine. Dr. Ali has been in practice for one year and is fluent in Arabic and Spanish.</p> <p>Ewelina Stanek, PA, joined the West Palm Beach Clinic in 2022 as a Physician Assistant. She attended the University of New England and is certified as a Physician Assistant by the National Commission on Certification of Physician Assistants. She is fluent in Polish.</p>	
8D. QUALITY		
<p>8D-1. Staff Recommends a MOTION TO APPROVE: Quality Report</p>	<p>This agenda item presents the updated Quality Improvement & Quality Updates:</p> <ul style="list-style-type: none"> • Quality Council Meeting Minutes August 2022 • UDS Report – YTD • Provider Productivity – July 2022 <p>PATIENT SAFETY & ADVERSE EVENTS Patient safety and risk, including adverse events, peer review and chart review, are brought to the board “under separate cover” on a quarterly basis.</p> <p>PATIENT SATISFACTION AND GRIEVANCES Patient relations are to be presented as a separate agenda item.</p>	<p>VOTE TAKEN: Mr. John Mullen made a motion to approve the Quality Reports- as presented. Mr. Joseph Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

	<p>QUALITY ASSURANCE & IMPROVEMENT The cervical cancer screening measure satisfaction rate has improved from 38% to 47% over the past 2 months. The number of patients with missing data decreased from 62% to 54%. This was partly due to the auditing of charts to ensure that pap smears completed in previous years or by outside providers were being counted in the measure.</p> <p>UTILIZATION OF HEALTH CENTER SERVICES Individual monthly provider productivity is stratified by clinic.</p>	
8E. OPERATIONS		
<p>8E-1. Staff Recommends a MOTION TO APPROVE Operations Reports- July 2022</p>	<p>This agenda item provides the following operations reports for July 2022:</p> <p>Clinic Productivity, No Show trended over time and walk-in percentages.</p> <p>In July, the clinics had 10,055 visits which were 1,226 less than the month prior and 1,940 more than July of 2021. 72% of patients were adults and 28% were pediatrics. The Lantana Clinic had the highest volume with 1,810 visits, followed by the Mangonia Clinic with 1,566.</p> <p>Our payer mix for July reflects 57% uninsured, which is 10% lower than the previous month. 38% of patients were Managed Care, which is 10% higher than the previous month. 59% of patients were females, 50% of patients reported as White and 39% reported as Black. Of those patients, 39% reported as Hispanic. Our homeless population is consistent with the prior month at 19%. 70% of those patients reported Doubling Up. 48% of patients reported speaking English, 32% Spanish and 17% Creole. 89% of patients reported as straight. Agricultural workers reported as 5%.</p> <p>Productivity targets were met in Mangonia Adult Medical; Pediatrics in both West Palm Beach and Lantana Clinics; Women’s Health in Lake Worth; Dental in Belle Glade; Behavioral Health in Belle Glade and Substance Use at Mangonia. In the 90% and higher range were Adult Medical in Delray, West Palm Beach, Jupiter, and Lantana; Behavioral Health in Lake Worth as well as Dental in Delray and Lantana.</p> <p>In July, the number of patients who walked in and were seen the same day totaled 1,553, a decrease of 33% from the previous month. 16% of patients</p>	<p>VOTE TAKEN: Mr. Jospheh Gibbons made a motion to approve the Operations Reports- July 2022 as presented. Mr. John Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

	<p>seen in medical were walk-ins and 13% of patients seen in dental were walk-ins. The Mangonia Clinic had the highest volume of walk-ins with 398, followed by the West Palm Beach clinic with 326 walk-ins. The West Palm Beach dental clinic consistently has the highest volume of walk-ins with 146, followed by the Delray Beach dental clinic with 76 walk-ins. The medical clinics' 2022 average walk-in' percentage decreased to 15% and the dental clinic's 2022 average walk-in percentage decreased to 16%.</p> <p>The No-Show rate in July slightly increased to 19%. The Tele no-show rate remains consistent at 9% of the total no-shows in the past 12 months.</p> <p>Mr. Smith and the Board member requested to go paperless moving forward. Only to print the Finance report.</p> <p>Mr. Smith and Board members asked to reduce the information provided by Operations.</p>	
<p>9. AVP and Executive Director of Clinic Services Comments</p>	<p>Shannon Wynn will send the self-evaluation to the Board members via email. Please be on the lookout.</p> <p>Shas Community Initiatives recognized Ms. Tammy Jackson-Moore in a parade and award ceremony.</p>	<p>No action necessary.</p>
<p>10. Board Member Comments</p>	<p>Mr. Gibbons thanked Dr. Fritsch for her service and leadership.</p>	<p>No action necessary.</p>
<p>11. Establishment of Upcoming Meetings</p>	<p><u>September 28, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>October 26, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>November 29, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>December 14, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p>	<p>No action necessary.</p>

12. Motion to Adjourn	There being no further business, the meeting was adjourned at 1:28p.m.	VOTE TAKEN: Mr. Joseph Gibbons made a motion to adjourn. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.
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Minutes Submitted by: _____
Signature **Date**

C. L. Brumback Primary Care Clinics

Board of Directors

Attendance Tracking

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

X= Present

C= Cancel

E= Excused

A= Absent

**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022**

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

2. Summary:

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

3. Substantive Analysis:

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

4. Fiscal Analysis & Economic Impact Statement:

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

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

Reviewed for financial accuracy and compliance with purchasing procedure:

Candice Abbott
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date

6. Recommendation:

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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022

Approved for Legal sufficiency:



Bernabe Icaza
VP & General Counsel



Candice Abbott
VP & Chief Financial Officer



Dr. Belma Andric
VP, CMO & Executive Director Clinical Services

MEMO

To: Finance Committee
From: Candice Abbott
Chief Financial Officer
Date: September 28, 2022

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

The July financial statements represent the financial performance through the tenth month of the 2022 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, cash decreased \$1.2M as a result of normal operations and will be subsidized in future months.

On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$1.1M). An increase in actual charity care recognized compared to budgeted charity care is contributing to this unfavorable variance. Gross patient revenue YTD was favorable to budget by \$2.7M. Total YTD revenue was unfavorable to budget by (\$1.0M), this was partially due to a timing difference in grant funds recognized. Operational expenses before depreciation were favorable to budget by \$4.3M due mostly to positive variances in salaries, wages, and benefits of \$2.2M, purchased services of \$259k, medical supplies of \$179k, medical services of \$155k, drugs of \$411k, repair and maintenance \$170k, lease and rental of \$751k, and other expense of \$143k. Total YTD net margin was (\$9.3M) compared to the budgeted loss of (\$13.7M) resulting in a favorable variance of \$4.3M or (31.6%).

Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$1.5M). The Medical clinics YTD gross patient revenue was unfavorable to budget by (\$2.5M). The Medical clinics total YTD revenue was unfavorable to budget by (\$1.1M). These unfavorable variances resulted from lower net patient revenue than budgeted and a timing difference of revenue recognition for grant funds. Total operating expenses of \$19.5M were favorable to budget of \$23.8M by \$4.2M or 17.9%. The positive variance is mostly due to salaries, wages, and benefits of \$2.1M, purchased services of \$226k, medical supplies of \$217k, medical services of \$155k, drugs of \$411k, repair and maintenance of \$169k, lease and rental of \$697k. Unanticipated staffing shortages as well as expense timing are driving these favorable variances. Total YTD net margin was favorable to budget by \$4.0M or (31.5%).

Net patient revenue YTD for the Dental clinics was favorable to budget by \$266k. The Dental clinics total YTD gross patient revenue was favorable to budget by \$5.1M. An increase in unanticipated patient volume resulted in higher gross revenue, however, increased charity care and contractual allowances unfavorably impacted net patient revenue results. Total YTD operating expenses of \$3.5M were favorable to budget by \$106k. Total YTD net margin was (\$773k) compared to a budgeted loss of (\$1.1M) for a favorable variance of \$304k or (28.2%).

DISTRICT CLINIC HOLDINGS, INC.
COMPARATIVE STATEMENT OF NET POSITION

	<u>Jul 31, 2022</u>	<u>Jun 30, 2022</u>	<u>Increase (Decrease)</u>
Assets			
Cash and Cash Equivalents	(1,923,090)	(695,323)	\$ (1,227,767)
Accounts Receivable, net	2,261,737	2,573,594	(311,857)
Due from Other Governments	3,808,079	3,794,898	13,181
Other Current Assets	283,663	303,256	(19,593)
Net Investment in Capital Assets	2,558,332	2,590,043	(31,712)
Total Assets	<u>\$ 6,988,722</u>	<u>\$ 8,566,468</u>	<u>\$ (1,577,747)</u>
Liabilities			
Accounts Payable	197,742	194,752	2,989
Deferred Revenue	1,339,423	1,345,143	(5,720)
Other Current Liabilities	1,468,988	1,606,702	(137,714)
Non-Current Liabilities	1,315,749	1,284,596	31,153
Total Liabilities	<u>4,321,902</u>	<u>4,431,193</u>	<u>(109,291)</u>
Deferred Inflows of Resources			
Deferred Inflows- Other Post Employment Benefits	<u>\$ 2,177</u>	<u>\$ 2,177</u>	<u>\$ -</u>
Net Position			
Net Investment in Capital Assets	2,558,332	2,590,043	(31,712)
Unrestricted	106,311	1,543,055	(1,436,744)
Total Net Position	<u>2,664,643</u>	<u>4,133,098</u>	<u>(1,468,456)</u>
Total Liabilities, Deferred Inflows of Resources and Net Position	<u>\$ 6,988,722</u>	<u>\$ 8,566,468</u>	<u>\$ (1,577,747)</u>

Note: Amounts may not foot due to rounding.

District Clinics Holdings, Inc. Statement of Revenues and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2022

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
1,851,922	2,062,023	(210,101)	(10.2%)	492,172	1,359,750	276.3%	21,600,769	18,883,681	2,717,088	14.4%	18,361,856	3,238,913	17.6%
Gross Patient Revenue							Gross Patient Revenue						
380,666	489,906	109,240	22.3%	1,306,229	925,563	70.9%	4,793,038	4,502,318	(290,720)	(6.5%)	5,784,279	991,241	17.1%
950,302	707,709	(242,593)	(34.3%)	46,809	(903,493)	(1,930.2%)	9,088,704	6,445,985	(2,642,719)	(41.0%)	6,051,107	(3,037,597)	(50.2%)
383,449	333,493	(49,956)	(15.0%)	(33,070)	(416,519)	1,259.5%	3,555,842	3,077,906	(477,936)	(15.5%)	2,829,559	(726,282)	(25.7%)
1,714,417	1,531,108	(183,309)	(12.0%)	1,319,968	(394,449)	(29.9%)	17,437,584	14,026,209	(3,411,375)	(24.3%)	14,664,946	(2,772,638)	(18.9%)
55,614	498,059	(442,445)	(88.8%)	732,601	(676,986)	(92.4%)	4,116,706	4,564,881	(448,175)	(9.8%)	5,300,426	(1,183,720)	-22%
193,120	1,028,974	(835,854)	(81.2%)	(95,195)	288,315	(302.9%)	8,279,891	9,422,353	(1,142,462)	(12.1%)	8,997,336	(717,445)	(8.0%)
10.43%	49.90%			-19.34%			38.33%	49.90%		49.00%			
1,266,054	1,310,452	(44,398)	(3.4%)	1,403,407	(137,353)	(9.8%)	12,460,594	13,104,520	(643,926)	(4.9%)	8,634,268	3,826,326	44.3%
5,720	-	5,720	0.0%	80,496	(74,776)	(92.9%)	875,885	-	875,885	0.0%	911,935	(36,050)	(4.0%)
4,320	10,533	(6,213)	(59.0%)	1,823	2,497	137.0%	2,667	99,089	(96,422)	(97.3%)	73,646	(70,979)	(96.4%)
1,276,095	1,320,985	(44,890)	(3.4%)	1,485,726	(209,631)	(14.1%)	13,339,146	13,203,609	135,537	1.0%	9,619,849	3,719,296	38.7%
1,469,214	2,349,959	(880,745)	(37.5%)	1,390,530	78,684	5.7%	21,619,037	22,625,962	(1,006,925)	(4.5%)	18,617,185	3,001,851	16.1%
<i>Direct Operational Expenses:</i>							<i>Direct Operational Expenses:</i>						
1,412,965	1,555,309	142,344	9.2%	1,315,072	(97,893)	(7.4%)	14,514,147	16,151,339	1,637,192	10.1%	14,403,018	(111,129)	(0.8%)
410,711	447,295	36,584	8.2%	401,983	(8,728)	(2.2%)	4,097,497	4,614,740	517,243	11.2%	4,059,528	(37,970)	(0.9%)
23,396	26,096	2,700	10.3%	109,493	86,096	78.6%	558,312	817,335	259,023	31.7%	1,030,108	471,796	45.8%
99,807	84,107	(15,700)	(18.7%)	46,960	(52,847)	(112.5%)	592,414	770,981	178,567	23.2%	532,407	(60,007)	(11.3%)
10,186	118,633	108,447	91.4%	89,909	79,722	88.7%	323,632	443,694	120,062	27.1%	220,279	(103,353)	(46.9%)
45,369	68,341	22,972	33.6%	63,843	18,474	28.9%	480,077	635,517	155,440	24.5%	633,206	153,129	24.2%
44,174	93,131	48,957	52.6%	54,509	10,335	19.0%	455,113	866,043	410,930	47.4%	599,599	144,486	24.1%
25,319	52,542	27,223	51.8%	153,420	128,100	83.5%	355,102	525,420	170,318	32.4%	221,384	(133,718)	(60.4%)
98,523	182,777	84,254	46.1%	101,103	2,580	2.6%	1,046,999	1,797,859	750,860	41.8%	1,043,525	(3,474)	(0.3%)
7,887	8,554	667	7.8%	7,549	(339)	(4.5%)	73,225	85,328	12,103	14.2%	71,354	(1,872)	(2.6%)
46,176	63,106	16,930	26.8%	24,966	(21,210)	(85.0%)	466,700	610,060	143,360	23.5%	263,036	(203,664)	(77.4%)
5,819	4,028	(1,791)	(44.5%)	4,026	(1,793)	(44.5%)	45,640	40,280	(5,360)	(13.3%)	37,044	(8,596)	(23.2%)
2,230,333	2,703,919	473,586	17.5%	2,372,830	142,498	6.0%	23,008,860	27,358,596	4,349,736	15.9%	23,114,487	105,628	0.5%
(761,118)							(761,118)						
(353,960)							(353,960)						
(407,158)							(407,158)						
115.0%							115.0%						
(982,300)							(982,300)						
221,182							221,182						
(22.5%)							(22.5%)						
Overhead Allocations							Overhead Allocations						
(1,389,823)							(1,389,823)						
(4,732,634)							(4,732,634)						
3,342,811							3,342,811						
(70.6%)							(70.6%)						
(4,497,302)							(4,497,302)						
3,107,479							3,107,479						
(69.1%)							(69.1%)						

District Clinics Holdings, Inc. Statement of Revenues and Expenses

FOR THE TENTH MONTH ENDED JULY 31, 2022

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
31,712	40,833	9,121	22.3%	31,098	(613)	(2.0%)	Depreciation	315,999	408,330	92,331	22.6%	315,701	(298)	(0.1%)
<i>Overhead Allocations:</i>														
-	5,619	5,619	100.0%	4,167	4,167	100.0%	Risk Mgt	67,426	56,188	(11,238)	(20.0%)	32,431	(34,995)	(107.9%)
136,865	211,204	74,339	35.2%	255,603	118,738	46.5%	Rev Cycle	1,604,843	2,112,045	507,202	24.0%	2,068,509	463,666	22.4%
2,043	4,830	2,787	57.7%	6,583	4,540	69.0%	Internal Audit	16,207	48,298	32,091	66.4%	29,778	13,571	45.6%
29,299	29,602	303	1.0%	20,056	(9,244)	(46.1%)	Home Office Facilities	281,455	296,018	14,563	4.9%	181,747	(99,708)	(54.9%)
39,561	42,204	2,643	6.3%	34,474	(5,087)	(14.8%)	Administration	428,419	422,043	(6,376)	(1.5%)	380,855	(47,564)	(12.5%)
48,056	59,861	11,805	19.7%	46,879	(1,177)	(2.5%)	Human Resources	518,314	598,608	80,294	13.4%	505,600	(12,715)	(2.5%)
14,079	24,187	10,107	41.8%	40,541	26,462	65.3%	Legal	168,989	241,868	72,878	30.1%	206,826	37,836	18.3%
2,901	4,453	1,552	34.9%	3,387	486	14.3%	Records	30,731	44,532	13,801	31.0%	73,817	43,086	58.4%
3,947	8,934	4,986	55.8%	656	(3,291)	(501.7%)	Compliance	59,568	89,336	29,768	33.3%	56,561	(3,007)	(5.3%)
8,832	8,679	(153)	(1.8%)	6,688	(2,145)	(32.1%)	Comm Engage Plan	83,388	86,792	3,404	3.9%	72,631	(10,757)	(14.8%)
62,937	77,132	14,195	18.4%	53,197	(9,741)	(18.3%)	IT Operations	790,500	771,316	(19,184)	(2.5%)	710,007	(80,494)	(11.3%)
11,108	13,542	2,433	18.0%	8,247	(2,862)	(34.7%)	IT Security	116,838	135,417	18,579	13.7%	84,701	(32,137)	(37.9%)
49,515	50,742	1,227	2.4%	(19,562)	(69,077)	353.1%	IT Applications	466,206	507,422	41,216	8.1%	398,813	(67,394)	(16.9%)
48,676	64,734	16,058	24.8%	50,177	1,501	3.0%	Security Services	529,877	647,344	117,466	18.1%	458,391	(71,486)	(15.6%)
145,474	171,319	25,845	15.1%	(37,053)	(182,527)	492.6%	IT EPIC	1,813,900	1,713,190	(100,710)	(5.9%)	895,238	(918,663)	(102.6%)
34,492	32,082	(2,410)	(7.5%)	40,576	6,083	15.0%	Finance	311,982	320,819	8,838	2.8%	289,876	(22,106)	(7.6%)
6,073	7,670	1,598	20.8%	5,395	(677)	(12.5%)	Public Relations	59,523	76,701	17,178	22.4%	72,040	12,517	17.4%
13,345	12,663	(682)	(5.4%)	1,680	(11,665)	(694.4%)	Information Technology	98,235	126,627	28,393	22.4%	99,598	1,363	1.4%
7,861	7,714	(148)	(1.9%)	3,677	(4,184)	(113.8%)	Corporate Quality	76,046	77,136	1,090	1.4%	57,097	(18,949)	(33.2%)
10,558	15,014	4,456	29.7%	10,265	(293)	(2.9%)	Project MGMT Office	115,556	150,144	34,588	23.0%	94,835	(20,721)	(21.8%)
-	-	-	0.0%	-	-	0.0%	Managed Care Contract	-	-	-	0.0%	6,415	6,415	100.0%
675,625	852,184	176,559	20.7%	535,632	(139,993)	(26.1%)	Total Overhead Allocations	7,638,005	8,521,843	883,838	10.4%	6,775,766	(862,239)	(12.7%)
2,937,670	3,596,936	659,267	18.3%	2,939,561	1,891	0.1%	Total Expenses	30,962,863	36,288,769	5,325,906	14.7%	30,205,955	(756,909)	(2.5%)
\$ (1,468,455)	\$ (1,246,977)	\$ (221,478)	17.8%	\$ (1,549,031)	\$ 80,575	(5.2%)	Net Margin	\$ (9,343,827)	\$ (13,662,807)	\$ 4,318,980	(31.6%)	\$ (11,588,769)	\$ 2,244,942	(19.4%)
-	42,740	42,740	100.0%	-	-	0.0%	Capital	15,628	1,115,550	1,099,922	98.6%	-	(15,628)	0.0%
\$ -	\$ 1,248,887	\$ 1,248,887	100.0%	\$ -	\$ -	0.0%	General Fund Support/ Transfer In	\$ 7,924,615	\$ 14,370,054	\$ 6,445,439	44.9%	\$ 9,987,030	\$ 2,062,414	20.7%

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

FOR THE TENTH MONTH ENDED JULY 31, 2022

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
982,642	1,652,931	(670,289)	(40.6%)	491,470	491,172	99.9%	12,867,435	15,371,089	(2,503,654)	(16.3%)	13,459,550	(592,116)	(4.4%)
Gross Patient Revenue													
168,804	414,911	246,107	59.3%	753,443	584,639	77.6%	2,172,583	3,858,397	1,685,814	43.7%	4,052,591	1,880,008	46.4%
493,660	518,066	24,406	4.7%	40,838	(452,822)	(1,108.8%)	4,927,680	4,817,656	(110,024)	(2.3%)	4,337,864	(589,816)	(13.6%)
273,916	300,766	26,850	8.9%	(64,319)	(338,236)	525.9%	2,485,617	2,796,901	311,284	11.1%	2,348,653	(136,964)	(5.8%)
936,381	1,233,743	297,362	24.1%	729,962	(206,419)	(28.3%)	9,585,881	11,472,954	1,887,073	16.4%	10,739,108	1,153,227	10.7%
Total Contractuals and Bad Debts													
30,558	404,475	(373,917)	(92.4%)	531,889	(501,331)	(94.3%)	2,924,138	3,761,333	(837,195)	(22.3%)	3,687,656	(763,518)	(20.7%)
76,820	823,663	(746,843)	(90.7%)	293,397	(216,577)	(73.8%)	6,205,692	7,659,468	(1,453,776)	(19.0%)	6,408,099	(202,407)	(3.2%)
7.82%	49.83%			59.70%			48.23%	49.83%		47.61%			
Net Patient Revenue													
1,095,239	1,103,321	(8,082)	(0.7%)	1,254,605	(159,366)	(12.7%)	10,721,242	11,033,210	(311,968)	(2.8%)	7,496,110	3,225,132	43.0%
5,720	-	5,720	0.0%	7,163	(1,443)	(20.1%)	761,423	-	761,423	0.0%	753,884	7,539	1.0%
4,320	10,533	(6,213)	(59.0%)	1,823	2,497	137.0%	2,467	99,089	(96,622)	(97.5%)	73,646	(71,179)	(96.7%)
Grant Funds													
Other Financial Assistance													
Other Revenue													
1,105,280	1,113,854	(8,574)	(0.8%)	1,263,590	(158,311)	(12.5%)	11,485,132	11,132,299	352,833	3.2%	8,323,641	3,161,491	38.0%
Total Other Revenues													
1,182,100	1,937,517	(755,417)	(39.0%)	1,556,987	(374,888)	(24.1%)	17,690,824	18,791,767	(1,100,943)	(5.9%)	14,731,739	2,959,084	20.1%
Total Revenues													
<i>Direct Operational Expenses:</i>													
1,176,792	1,316,402	139,610	10.6%	1,121,241	(55,551)	(5.0%)	12,196,213	13,807,796	1,611,583	11.7%	12,191,384	(4,830)	(0.0%)
345,627	379,124	33,497	8.8%	340,790	(4,838)	(1.4%)	3,432,779	3,938,862	506,083	12.8%	3,434,720	1,941	0.1%
21,996	23,182	1,186	5.1%	106,950	84,954	79.4%	540,687	767,146	226,459	29.5%	1,007,662	466,975	46.3%
88,839	68,469	(20,370)	(29.8%)	35,964	(52,875)	(147.0%)	419,392	636,711	217,319	34.1%	406,741	(12,652)	(3.1%)
9,698	114,331	104,633	91.5%	15,827	6,129	38.7%	283,385	400,674	117,289	29.3%	144,316	(139,069)	(96.4%)
45,369	68,341	22,972	33.6%	63,843	18,474	28.9%	480,077	635,517	155,440	24.5%	633,206	153,129	24.2%
44,174	93,131	48,957	52.6%	54,509	10,335	19.0%	455,113	866,043	410,930	47.4%	599,590	144,477	24.1%
24,827	50,392	25,565	50.7%	151,801	126,974	83.6%	334,782	503,920	169,138	33.6%	211,169	(123,613)	(58.5%)
76,033	154,020	77,987	50.6%	78,733	2,700	3.4%	816,945	1,513,879	696,934	46.0%	819,480	2,535	0.3%
6,233	6,945	712	10.2%	5,545	(689)	(12.4%)	56,711	69,354	12,643	18.2%	54,299	(2,412)	(4.4%)
44,076	59,171	15,095	25.5%	24,504	(19,572)	(79.9%)	445,207	570,710	125,503	22.0%	230,271	(214,937)	(93.3%)
5,729	3,940	(1,789)	(45.4%)	3,938	(1,790)	(45.5%)	44,756	39,400	(5,356)	(13.6%)	36,497	(8,259)	(22.6%)
Insurance													
1,889,394	2,337,448	448,054	19.2%	2,003,645	114,252	5.7%	19,506,049	23,750,012	4,243,964	17.9%	19,769,335	263,287	1.3%
Total Operational Expenses													
(707,294)	(399,931)	(307,363)	76.9%	(446,658)	(260,636)	58.4%	(1,815,225)	(4,958,245)	3,143,020	(63.4%)	(5,037,596)	3,222,371	(64.0%)
Net Performance before Depreciation & Overhead Allocations													

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

FOR THE TENTH MONTH ENDED JULY 31, 2022

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
24,267	31,250	6,983	22.3%	24,106	(162)	(0.7%)	Depreciation	241,143	312,500	71,357	22.8%	243,211	2,068	0.9%
<i>Overhead Allocations:</i>														
-	4,830	4,830	100.0%	3,573	3,573	100.0%	Risk Mgt	57,954	48,295	(9,659)	(20.0%)	27,818	(30,136)	(108.3%)
116,597	179,927	63,330	35.2%	215,800	99,203	46.0%	Rev Cycle	1,367,178	1,799,267	432,089	24.0%	1,746,395	379,217	21.7%
1,756	4,151	2,395	57.7%	5,647	3,891	68.9%	Internal Audit	13,930	41,513	27,583	66.4%	25,544	11,614	45.5%
26,496	26,770	274	1.0%	18,059	(8,437)	(46.7%)	Home Office Facilities	254,527	267,697	13,170	4.9%	163,651	(90,876)	(55.5%)
34,004	36,276	2,272	6.3%	29,470	(4,535)	(15.4%)	Administration	368,237	362,757	(5,480)	(1.5%)	326,600	(41,637)	(12.7%)
41,141	51,247	10,106	19.7%	40,525	(616)	(1.5%)	Human Resources	443,734	512,474	68,740	13.4%	437,266	(6,468)	(1.5%)
12,102	20,789	8,687	41.8%	34,587	22,486	65.0%	Legal	145,251	207,892	62,641	30.1%	177,228	31,978	18.0%
2,494	3,828	1,334	34.9%	2,905	412	14.2%	Records	26,414	38,276	11,862	31.0%	63,321	36,907	58.3%
3,393	7,679	4,286	55.8%	563	(2,830)	(502.9%)	Compliance	51,200	76,787	25,586	33.3%	48,519	(2,681)	(5.5%)
7,592	7,460	(132)	(1.8%)	5,737	(1,855)	(32.3%)	Comm Engage Plan	71,674	74,600	2,926	3.9%	62,304	(9,371)	(15.0%)
54,096	66,297	12,201	18.4%	45,633	(8,463)	(18.5%)	IT Operations	679,455	662,966	(16,490)	(2.5%)	609,054	(70,402)	(11.6%)
9,548	11,639	2,091	18.0%	7,074	(2,474)	(35.0%)	IT Security	100,425	116,394	15,969	13.7%	72,658	(27,768)	(38.2%)
42,560	43,614	1,054	2.4%	(16,780)	(59,340)	353.6%	IT Applications	400,716	436,142	35,426	8.1%	342,107	(58,609)	(17.1%)
41,433	55,101	13,669	24.8%	42,670	1,238	2.9%	Security Services	451,028	551,015	99,987	18.1%	389,813	(61,214)	(15.7%)
125,039	147,253	22,214	15.1%	(31,785)	(156,823)	493.4%	IT EPIC	1,559,094	1,472,531	(86,563)	(5.9%)	767,947	(791,146)	(103.0%)
29,647	27,575	(2,072)	(7.5%)	34,806	5,159	14.8%	Finance	268,156	275,752	7,596	2.8%	248,659	(19,497)	(7.8%)
5,219	6,593	1,373	20.8%	4,628	(591)	(12.8%)	Public Relations	51,161	65,926	14,765	22.4%	61,797	10,635	17.2%
11,470	10,884	(586)	(5.4%)	1,416	(10,055)	(710.3%)	Information Technology	84,435	108,839	24,404	22.4%	85,345	910	1.1%
6,757	6,630	(127)	(1.9%)	3,100	(3,657)	(118.0%)	Corporate Quality	65,364	66,300	937	1.4%	48,924	(16,440)	(33.6%)
9,075	12,905	3,830	29.7%	8,805	(270)	(3.1%)	Project MGMT Office	99,323	129,052	29,729	23.0%	81,350	(17,973)	(22.1%)
-	-	-	0.0%	-	-	0.0%	Managed Care Contract	-	-	-	0.0%	5,416	5,416	100.0%
580,418	731,447	151,030	20.6%	456,433	(123,985)	(27.2%)	Total Overhead Allocations	6,559,258	7,314,475	755,217	10.3%	5,791,717	(767,542)	(13.3%)
2,494,079	3,100,145	606,067	19.5%	2,484,184	(9,895)	(0.4%)	Total Expenses	26,306,450	31,376,987	5,070,537	16.2%	25,804,264	(502,186)	(1.9%)
\$ (1,311,979)	\$ (1,162,628)	\$ (149,351)	12.8%	\$ (927,196)	\$ (384,783)	41.5%	Net Margin	\$ (8,615,626)	\$ (12,585,220)	\$ 3,969,594	(31.5%)	\$ (11,072,524)	\$ 2,456,898	(22.2%)
-	37,740	37,740	100.0%	-	-	0.0%	Capital	15,628	985,550	969,922	98.4%	-	(15,628)	0.0%
\$ -	\$ 1,169,122	\$ 1,169,122	100.0%	\$ -	\$ -	0.0%	General Fund Support/ Transfer In	\$ 7,319,275	\$ 13,258,305	\$ 5,939,030	44.8%	\$ 9,025,566	\$ 1,706,291	18.9%

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

FOR THE TENTH MONTH ENDED JULY 31, 2022

	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Portable Clinic Dental Clinic	Total
Gross Patient Revenue	-	2,994,904	2,753,784	1,508,674	1,327,875	2,268	8,587,505
Contractual Allowances	-	1,039,518	613,785	304,448	627,855	761	2,586,367
Charity Care	-	1,269,398	1,709,421	683,274	465,302	149	4,127,544
Bad Debt	-	414,801	184,901	278,686	149,331	(17)	1,027,701
Total Contractual Allowances and Bad Debt	-	2,723,716	2,508,107	1,266,408	1,242,488	893	7,741,612
Other Patient Revenue	-	426,195	326,167	222,902	207,597	209	1,183,069
Net Patient Revenue	-	697,383	571,844	465,167	292,983	1,584	2,028,962
Collection %	-	23.29%	20.77%	30.83%	22.06%	69.84%	23.63%
Grant Funds	243,758	664,959	417,555	189,879	223,201	-	1,739,352
Other Financial Assistance	31,403	41,216	29,937	-	11,905	-	114,462
Other Revenue	-	-	200	-	-	-	200
Total Other Revenues	275,161	706,174	447,693	189,879	235,107	-	1,854,014
Total Revenues	275,161	1,403,557	1,019,537	655,046	528,090	1,584	3,882,976
<i>Direct Operational Expenses:</i>							
Salaries and Wages	377,128	880,265	522,683	251,335	286,523	-	2,317,934
Benefits	115,129	225,694	133,462	94,531	95,902	-	664,718
Purchased Services	-	3,206	2,886	1,589	9,943	-	17,624
Medical Supplies	-	63,900	46,143	35,891	27,087	-	173,021
Other Supplies	283	17,197	8,510	9,159	5,098	-	40,247
Repairs & Maintenance	-	6,297	8,199	3,913	1,911	-	20,320
Lease & Rental	-	91,917	54,553	55,985	27,600	-	230,055
Utilities	-	4,175	3,655	656	8,028	-	16,515
Other Expense	5,550	7,003	5,067	2,848	1,024	-	21,493
Insurance	-	-	-	-	884	-	884
Total Operational Expenses	498,090	1,299,654	785,159	455,906	464,002	-	3,502,811
Net Performance before Depreciation & Overhead Allocations	(222,929)	103,903	234,378	199,140	64,089	-	380,165
Depreciation	-	25,771	9,457	8,095	31,533	-	74,856
<i>Overhead Allocations:</i>							
Risk Mgt	937	3,073	2,115	2,144	1,202	-	9,472
Rev Cycle	-	85,578	58,891	59,717	33,479	-	237,665
Internal Audit	225	739	508	515	289	-	2,277
Home Office Facilities	26,928	-	-	-	-	-	26,928
Administration	5,957	19,525	13,436	13,625	7,639	-	60,182
Human Resources	5,919	26,439	18,546	17,757	5,919	-	74,580
Legal	2,350	7,702	5,300	5,374	3,013	-	23,739
Records	427	1,401	964	977	548	-	4,317
Compliance	828	2,715	1,868	1,894	1,062	-	8,368
Comm Engage Plan	1,159	3,800	2,615	2,652	1,487	-	11,714
IT Operations	10,991	36,027	24,792	25,140	14,094	-	111,045
IT Security	1,625	5,325	3,664	3,716	2,083	-	16,413
IT Applications	6,482	21,247	14,622	14,827	8,312	-	65,490
Security Services	-	28,392	19,538	19,812	11,107	-	78,849
IT EPIC	25,221	82,669	56,889	57,687	32,341	-	254,807
Finance	4,338	14,219	9,785	9,922	5,563	-	43,825
Public Relations	828	2,713	1,867	1,893	1,061	-	8,361
Information Technology	1,366	4,477	3,081	3,124	1,752	-	13,799
Corporate Quality	1,057	3,466	2,385	2,418	1,356	-	10,683
Project MGMT Office	1,607	5,266	3,624	3,675	2,060	-	16,233
Total Overhead Allocations	98,245	354,772	244,491	246,871	134,368	-	1,078,746
Total Expenses	596,335	1,680,198	1,039,107	710,871	629,902	-	4,656,413
Net Margin	\$ (321,173)	\$ (276,640)	\$ (19,570)	\$ (55,826)	\$ (101,812)	\$ 1,584	\$ (773,438)
Capital	-	-	-	-	-	-	-
General Fund Support/ Transfer In	\$ 605,340	-	-	-	-	-	605,340

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

FOR THE TENTH MONTH ENDED JULY 31, 2022

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
793,278	409,092	384,186	93.9%	702	792,576	112,918.6%	Gross Patient Revenue	8,587,505	3,512,592	5,074,913	144.5%	3,751,394	4,836,111	128.9%
194,320	74,995	(119,325)	(159.1%)	552,786	358,466	64.8%	Contractual Allowances	2,586,367	643,921	(1,942,446)	(301.7%)	1,731,688	(854,679)	(49.4%)
440,355	189,643	(250,712)	(132.2%)	5,971	(434,384)	(7,275.5%)	Charity Care	4,127,544	1,628,329	(2,499,215)	(153.5%)	1,713,243	(2,414,301)	(140.9%)
69,482	32,727	(36,755)	(112.3%)	31,249	(38,233)	(122.3%)	Bad Debt	1,027,701	281,005	(746,696)	(265.7%)	480,907	(546,794)	(113.7%)
704,156	297,365	(406,791)	(136.8%)	590,006	(114,151)	(19.3%)	Total Contractuals and Bad Debts	7,741,612	2,553,255	(5,188,357)	(203.2%)	3,925,838	(3,815,774)	(97.2%)
15,557	93,584	(78,027)	(83.4%)	200,712	(185,155)	(92.2%)	Other Patient Revenue	1,183,069	803,548	379,521	47.2%	1,612,770	(429,701)	(26.6%)
104,678	205,311	(100,633)	(49.0%)	(388,592)	493,271	(126.9%)	Net Patient Revenue	2,028,962	1,762,885	266,077	15.1%	1,438,326	590,635	41.1%
13.20%	50.19%			-55362.94%			Collection %	23.63%	50.19%		38.34%			
170,815	207,131	(36,316)	(17.5%)	148,802	22,013	14.8%	Grant Funds	1,739,352	2,071,310	(331,958)	(16.0%)	1,138,158	601,194	52.8%
-	-	-	0.0%	73,333	(73,333)	(100.0%)	Other Financial Assistance	114,462	-	114,462	0.0%	158,051	(43,589)	(27.6%)
-	-	-	0.0%	-	-	0.0%	Other Revenue	200	-	200	0.0%	-	200	0.0%
170,815	207,131	(36,316)	(17.5%)	222,135	(51,320)	(23.1%)	Total Other Revenues	1,854,014	2,071,310	(217,296)	(10.5%)	1,296,209	557,805	43.0%
275,493	412,442	(136,949)	(33.2%)	(166,457)	441,950	(265.5%)	Total Revenues	3,882,976	3,834,195	48,781	1.3%	2,734,535	1,148,441	42.0%
							<i>Direct Operational Expenses:</i>							
236,172	238,907	2,735	1.1%	193,830	(42,342)	(21.8%)	Salaries and Wages	2,317,934	2,343,543	25,609	1.1%	2,211,634	(106,300)	(4.8%)
65,084	68,171	3,087	4.5%	61,193	(3,891)	(6.4%)	Benefits	664,718	675,878	11,160	1.7%	624,807	(39,911)	(6.4%)
1,400	2,914	1,514	51.9%	2,542	1,142	44.9%	Purchased Services	17,624	50,189	32,565	64.9%	22,445	4,821	21.5%
10,968	15,638	4,670	29.9%	10,996	28	0.3%	Medical Supplies	173,021	134,270	(38,751)	(28.9%)	125,666	(47,355)	(37.7%)
488	4,302	3,814	88.6%	74,082	73,594	99.3%	Other Supplies	40,247	43,020	2,773	6.4%	75,963	35,716	47.0%
493	2,150	1,657	77.1%	1,618	1,126	69.6%	Repairs & Maintenance	20,320	21,500	1,180	5.5%	10,215	(10,105)	(98.9%)
22,490	28,757	6,267	21.8%	22,370	(120)	(0.5%)	Lease & Rental	230,055	283,980	53,925	19.0%	224,045	(6,009)	(2.7%)
1,654	1,609	(45)	(2.8%)	2,004	350	17.5%	Utilities	16,515	15,974	(541)	(3.4%)	17,055	540	3.2%
2,100	3,935	1,835	46.6%	462	(1,638)	(354.7%)	Other Expense	21,493	39,350	17,857	45.4%	32,765	11,272	34.4%
90	88	(2)	(2.6%)	88	(3)	(3.0%)	Insurance	884	880	(4)	(0.5%)	547	(337)	(61.6%)
340,939	366,471	25,532	7.0%	369,185	28,246	7.7%	Total Operational Expenses	3,502,811	3,608,584	105,773	2.9%	3,345,152	(157,659)	(4.7%)
							Net Performance before							
(65,446)	45,971	(111,417)	(242.4%)	(535,642)	470,197	(87.8%)	Depreciation & Overhead Allocations	380,165	225,611	154,554	68.5%	(610,617)	990,782	(162.3%)

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

FOR THE TENTH MONTH ENDED JULY 31, 2022

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
7,444	9,583	2,139	22.3%	6,993	(452)	(6.5%)	74,856	95,830	20,974	21.9%	72,490	(2,366)	(3.3%)
<i>Overhead Allocations:</i>													
-	789	789	100.0%	594	594	100.0%	9,472	7,893	(1,579)	(20.0%)	4,613	(4,859)	(105.3%)
20,269	31,278	11,009	35.2%	39,803	19,535	49.1%	237,665	312,778	75,113	24.0%	322,115	84,450	26.2%
287	678	391	57.7%	936	649	69.3%	2,277	6,785	4,508	66.4%	4,234	1,957	46.2%
2,803	2,832	29	1.0%	1,997	(806)	(40.4%)	26,928	28,321	1,393	4.9%	18,096	(8,832)	(48.8%)
5,557	5,929	371	6.3%	5,005	(553)	(11.0%)	60,182	59,286	(896)	(1.5%)	54,255	(5,927)	(10.9%)
6,915	8,613	1,699	19.7%	6,354	(561)	(8.8%)	74,580	86,134	11,554	13.4%	68,334	(6,247)	(9.1%)
1,978	3,398	1,420	41.8%	5,954	3,976	66.8%	23,739	33,976	10,238	30.1%	29,597	5,859	19.8%
408	626	218	34.9%	482	74	15.4%	4,317	6,256	1,939	31.0%	10,496	6,179	58.9%
555	1,255	700	55.8%	93	(461)	(494.5%)	8,368	12,549	4,182	33.3%	8,042	(326)	(4.0%)
1,241	1,219	(22)	(1.8%)	951	(290)	(30.5%)	11,714	12,192	478	3.9%	10,327	(1,387)	(13.4%)
8,841	10,835	1,994	18.4%	7,564	(1,277)	(16.9%)	111,045	108,350	(2,695)	(2.5%)	100,953	(10,092)	(10.0%)
1,560	1,902	342	18.0%	1,173	(388)	(33.1%)	16,413	19,023	2,610	13.7%	12,043	(4,369)	(36.3%)
6,956	7,128	172	2.4%	(2,781)	(9,737)	350.1%	65,490	71,280	5,790	8.1%	56,706	(8,784)	(15.5%)
7,243	9,633	2,390	24.8%	7,507	263	3.5%	78,849	96,329	17,480	18.1%	68,578	(10,271)	(15.0%)
20,435	24,066	3,631	15.1%	(5,268)	(25,704)	487.9%	254,807	240,660	(14,147)	(5.9%)	127,291	(127,516)	(100.2%)
4,845	4,507	(339)	(7.5%)	5,769	924	16.0%	43,825	45,067	1,242	2.8%	41,216	(2,609)	(6.3%)
853	1,077	224	20.8%	767	(86)	(11.2%)	8,361	10,774	2,413	22.4%	10,243	1,882	18.4%
1,875	1,779	(96)	(5.4%)	264	(1,610)	(609.4%)	13,799	17,788	3,988	22.4%	14,253	454	3.2%
1,104	1,084	(21)	(1.9%)	578	(527)	(91.1%)	10,683	10,836	153	1.4%	8,173	(2,509)	(30.7%)
1,483	2,109	626	29.7%	1,459	(24)	(1.6%)	16,233	21,091	4,859	23.0%	13,484	(2,748)	(20.4%)
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	999	999	100.0%
95,208	120,737	25,529	21.1%	79,199	(16,008)	(20.2%)	1,078,746	1,207,368	128,622	10.7%	984,049	(94,697)	(9.6%)
443,591	496,791	53,200	10.7%	455,377	11,786	2.6%	4,656,413	4,911,782	255,368	5.2%	4,401,691	(254,722)	(5.8%)
\$ (168,098)	\$ (84,349)	\$ (83,749)	99.3%	\$ (621,834)	\$ 453,737	(73.0%)	\$ (773,438)	\$ (1,077,587)	\$ 304,149	(28.2%)	\$ (1,667,156)	\$ 893,718	(53.6%)
-	5,000	5,000	100.0%	-	-	0.0%	-	130,000	130,000	100.0%	-	-	0.0%
\$ -	\$ 79,765	\$ 79,765	100.0%	\$ -	\$ -	0.0%	\$ 605,340	\$ 1,111,749	\$ 506,409	45.6%	\$ 961,464	\$ 356,124	37.0%

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

FOR THE TENTH MONTH ENDED JULY 31, 2022

	Portable Behavioral Health	West Palm Beach Behavioral Health	Lantana Behavioral Health	Delray Behavioral Health	Belle Glade Behavioral Health	Lewis Center Behavioral Health	West Boca Behavioral Health	Mangonia Behavioral Health	Lake Worth Behavioral Health	Total
Gross Patient Revenue	-	(58)	207	40	(90)	(7,325)	-	152,939	117	145,829
Contractual Allowances	-	127	51	-	(278)	19,867	16	14,306	-	34,088
Charity Care	-	12	57	-	146	704	-	32,541	19	33,480
Bad Debt	-	(24)	81	41	561	13,389	-	28,420	55	42,523
Total Contractual Allowances and Bad Debt	-	114	189	41	430	33,960	16	75,267	74	110,091
Other Patient Revenue	-	-	-	-	104	522	-	8,873	-	9,499
Net Patient Revenue	-	(172)	18	(1)	(415)	(40,764)	(16)	86,545	43	45,237
Collection %	-	296.05%	8.79%	-3.48%	460.16%	556.47%	0.00%	56.59%	36.68%	31.02%
Grant Funds	-	-	-	-	-	-	-	-	-	-
Other Financial Assistance	-	-	-	-	-	-	-	-	-	-
Other Revenue	-	-	-	-	-	-	-	-	-	-
Total Other Revenues	-	-	-	-	-	-	-	-	-	-
Total Revenues	-	(172)	18	(1)	(415)	(40,764)	(16)	86,545	43	45,237
<i>Direct Operational Expenses:</i>										
Salaries and Wages	-	-	-	-	-	-	-	-	-	-
Benefits	-	-	-	-	-	-	-	-	-	-
Purchased Services	-	-	-	-	-	-	-	-	-	-
Medical Supplies	-	-	-	-	-	-	-	-	-	-
Other Supplies	-	-	-	-	-	-	-	-	-	-
Repairs & Maintenance	-	-	-	-	-	-	-	-	-	-
Lease & Rental	-	-	-	-	-	-	-	-	-	-
Utilities	-	-	-	-	-	-	-	-	-	-
Other Expense	-	-	-	-	-	-	-	-	-	-
Insurance	-	-	-	-	-	-	-	-	-	-
Total Operational Expenses	-	-	-	-	-	-	-	-	-	-
Net Performance before Depreciation & Overhead Allocations	-	(172)	18	(1)	(415)	(40,764)	(16)	86,545	43	45,237
Depreciation	-	-	-	-	-	-	-	-	-	-
<i>Overhead Allocations:</i>										
Risk Mgt	-	-	-	-	-	-	-	-	-	-
Rev Cycle	-	-	-	-	-	-	-	-	-	-
Internal Audit	-	-	-	-	-	-	-	-	-	-
Home Office Facilities	-	-	-	-	-	-	-	-	-	-
Administration	-	-	-	-	-	-	-	-	-	-
Human Resources	-	-	-	-	-	-	-	-	-	-
Legal	-	-	-	-	-	-	-	-	-	-
Records	-	-	-	-	-	-	-	-	-	-
Compliance	-	-	-	-	-	-	-	-	-	-
Comm Engage Plan	-	-	-	-	-	-	-	-	-	-
IT Operations	-	-	-	-	-	-	-	-	-	-
IT Security	-	-	-	-	-	-	-	-	-	-
IT Applications	-	-	-	-	-	-	-	-	-	-
Security Services	-	-	-	-	-	-	-	-	-	-
IT EPIC	-	-	-	-	-	-	-	-	-	-
Finance	-	-	-	-	-	-	-	-	-	-
Public Relations	-	-	-	-	-	-	-	-	-	-
Information Technology	-	-	-	-	-	-	-	-	-	-
Corporate Quality	-	-	-	-	-	-	-	-	-	-
Project MGMT Office	-	-	-	-	-	-	-	-	-	-
Total Overhead Allocations	-	-	-	-	-	-	-	-	-	-
Total Expenses	-	-	-	-	-	-	-	-	-	-
Net Margin	\$ -	\$ (172)	\$ 18	\$ (1)	\$ (415)	\$ (40,764)	\$ (16)	\$ 86,545	\$ 43	\$ 45,237
Capital	-	-	-	-	-	-	-	-	-	-
General Fund Support/ Transfer In	\$ -	-	-	25	-	-	-	-	-	-

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

FOR THE TENTH MONTH ENDED JULY 31, 2022

Current Month								Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
-	-	-	0.0%	-	-	0.0%	Depreciation	-	-	-	0.0%	-	-	0.0%
<i>Overhead Allocations:</i>														
-	-	-	0.0%	-	-	0.0%	Risk Mgt	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Rev Cycle	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Internal Audit	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Home Office Facilities	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Administration	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Human Resources	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Legal	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Records	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Compliance	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Comm Engage Plan	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT Operations	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT Security	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT Applications	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Security Services	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	IT EPIC	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Finance	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Public Relations	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Information Technology	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Corporate Quality	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Project MGMT Office	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Managed Care Contract	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Total Overhead Allocations	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Total Expenses	-	-	-	0.0%	-	-	0.0%
\$ 11,621	\$ -	\$ 11,621	0.0%	\$ -	\$ 11,621	0.0%	Net Margin	\$ 45,237	\$ -	\$ 45,237	0.0%	\$ -	\$ 45,237	0.0%
-	-	-	0.0%	-	-	0.0%	Capital	-	-	-	0.0%	-	-	0.0%
\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	0.0%	General Fund Support/ Transfer In	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	0.0%

	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
Clinic Visits - Adults and Pediatrics																
West Palm Beach	1,394	1,108	1,197	1,288	1,315	1,515	1,413	1,331	1,397	1,098			13,056	16,699	(21.8%)	10,287
Delray	477	563	541	473	500	631	636	606	722	591			5,740	12,201	(53.0%)	7,172
Lantana	1,821	1,554	1,450	1,408	1,721	1,764	1,662	1,553	1,839	1,767			16,539	15,747	5.0%	15,475
Belle Glade	691	610	688	648	692	835	688	718	715	718			7,003	8,224	(14.8%)	5,759
Lewis Center	488	507	432	245	358	286	304	348	147	94			3,209	2,521	27.3%	6,331
Lake Worth & Women's Health Care	1,334	1,119	1,180	1,054	1,223	1,270	1,062	1,056	1,105	950			11,353	13,722	(17.3%)	11,128
Jupiter Clinic	447	410	438	494	485	554	515	565	556	528			4,992	5,045	(1.1%)	5,043
West Boca & Women's Health Care	407	305	366	407	392	356	301	345	325	242			3,446	8,612	(60.0%)	6,594
St Ann Place	-	-	44	96	53	71	44	40	49	44			441	516	(14.5%)	-
Clb Mob 1 Warrior	658	1,415	941	169	23	33	-	-	-	-			3,239	1,506	115.1%	368
Clb Mob 2 Scout	416	365	756	575	426	200	-	7	-	-			2,745	832	229.9%	559
Clb Mob 3 Hero	178	331	2,467	1,955	39	20	11	-	-	55			5,056	832	507.7%	592
Mangonia Park	128	197	272	196	162	285	314	365	47	-			1,966	5,370	(63.4%)	3,241
Total Clinic Visits	8,439	8,484	10,772	9,008	7,389	7,820	6,950	6,934	6,902	6,087	-	-	78,785	91,311	(13.7%)	72,549
Dental Visits																
West Palm Beach	736	762	831	776	754	864	824	904	969	839			8,259	8,117	1.7%	4,296
Lantana	708	891	1,032	774	953	1,018	812	773	755	685			8,401	6,366	32.0%	4,809
Delray	439	391	373	415	400	536	405	455	499	403			4,316	5,889	(26.7%)	1,527
Belle Glade	338	357	340	331	406	417	356	436	476	441			3,898	3,163	23.2%	1,126
Lake Worth	-	-	-	-	-	-	-	-	-	-			-	-	0.0%	-
West Boca	-	-	-	-	-	-	-	-	-	-			-	-	0.0%	-
Total Dental Visits	2,221	2,401	2,576	2,296	2,513	2,835	2,397	2,568	2,699	2,368	-	-	24,874	23,535	5.7%	11,758
Total Medical and Dental Visits	10,660	10,885	13,348	11,304	9,902	10,655	9,347	9,502	9,601	8,455	-	-	103,659	114,846	(9.7%)	84,307
Mental Health Counselors (non-billable)																
West Palm Beach	103	106	103	117	144	303	197	148	178	148			1,547	1,550	(0.2%)	57
Delray	69	114	135	136	143	205	162	166	119	163			1,412	1,209	16.8%	149
Lantana	-	-	-	-	-	-	-	-	-	-			-	5,101	(100.0%)	43
Belle Glade	71	81	86	81	51	128	102	130	121	105			956	550	73.8%	252
Mangonia Park	511	320	326	403	458	404	333	344	47	-			3,146	954	229.8%	3,318
Lewis Center	866	787	845	907	890	927	917	997	130	-			7,266	2,188	232.1%	6,253
Lake Worth	179	162	120	184	170	227	177	192	207	175			1,793	1,635	9.7%	150
Jupiter	-	-	-	-	-	-	-	-	-	-			-	-	0.0%	-
West Boca	-	-	-	-	-	-	-	4	-	-			4	-	0.0%	-
Mobile Van	-	-	-	-	-	-	-	-	-	-			-	825	(100.0%)	-
Total Mental Health Screenings	1,799	1,570	1,615	1,828	1,856	2,194	1,888	1,981	802	591	-	-	16,124	14,012	15.1%	10,222
GRAND TOTAL	12,459	12,455	14,963	13,132	11,758	12,849	11,235	11,483	10,403	9,046	-	-	124,238	138,858	(11.7%)	104,529

**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022**

1. Description: Executive Director Informational Update

2. Summary:

Medical Respite

3. Substantive Analysis:

Medical Respite Training

- The Clinic Team attended Medical training on September 8th, 2022. James Green and Wendy Tippett of Palm Beach County medical respite services division were also in attendance.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Candice Abbott
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date Approved

6. Recommendation:

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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022

Approved for Legal sufficiency:

Bernabe Icaza

Bernabe Icaza
VP & General Counsel

Belma Andric

Dr. Belma Andric
VP, CMO & Executive Director Clinical Services

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022

1. Description: Licensed Independent Practitioner Credentialing and Privileging

2. Summary:

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

3. Substantive Analysis:

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

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

Last Name	First Name	Degree	Specialty	Credentialing
Wilmot	Althea	APRN	Nurse Practitioner	Initial Credentialing
Finley	Nicole	APRN	Nurse Practitioner	Initial Credentialing
Lara Suarez	Maria	APRN	Nurse Practitioner	Initial Credentialing

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

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

Althea Wilmot, APRN, joined the West Palm Beach clinic in 2022 as a Family Nurse Practitioner. She attended the University of St. Augustine for Health Sciences and is certified as Family Nurse Practitioner by the American Nurses Credentialing Center. She has been in practice for one (1) year.

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022

Nicole Finley, APRN, joined the Lake Worth clinic in 2022 as a Women’s Health Nurse Practitioner. She attended Old Dominion University and is certified as a Women’s Health Nurse Practitioner by the National Certification Corporation. She has been in practice for four years.

Maria Lara Suarez, APRN, joined the Jupiter clinic in 2022 as a Family Nurse Practitioner. She attended Miami Regional University and is certified as Family Nurse Practitioner by the American Academy of Nurse Practitioners.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Candice Abbott
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date Approved


6. Recommendation:

Staff recommends the Board approve the Initial Credentialing and privileging of Althea Wilmot, APRN, Family Medicine Nurse Practitioner.

Staff recommends the Board approve the Initial Credentialing and privileging of Nicole Finley, APRN, Women’s Health Nurse Practitioner.

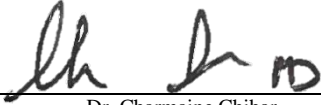
Staff recommends the Board approve the Initial Credentialing and privileging of Maria Lara Suarez, APRN, Family Medicine Nurse Practitioner.

Approved for Legal sufficiency:



Bernabe Icaza
VP & General Counsel

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022



Dr. Charmaine Chibar
FQHC Medical Director



Dr. Belma Andric
VP, CMO & Executive Director Clinical Services

**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022**

1. Description: Quality Report

2. Summary:

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

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

3. Substantive Analysis:

PATIENT SAFETY & ADVERSE EVENTS

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

PATIENT SATISFACTION AND GRIEVANCES

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

QUALITY ASSURANCE & IMPROVEMENT

- **Colorectal cancer screening:** Our FIT Test Return rates are increasing across our business units. Our highest return rates were at Belle Glade (61%), Boca Raton (49%), and Lantana (49%).
- **Breast Cancer Screening:** To improve our breast cancer screening rate, the Nurse Educator followed up with patients that had not completed the mammogram screening to find out why. We found that patients missed their screenings for various reasons, including but not limited to: Not being aware of the order, insurance doesn’t cover, time restrictions, forgetting, time restrictions, and others. As a result of these findings, we will work on clarifying the process to make it easier for patients to schedule and follow through with their mammogram orders.

UTILIZATION OF HEALTH CENTER SERVICES

Individual monthly provider productivity is stratified by clinic.

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022

N/A

Candice Abbott
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date Approved

6. Recommendation:

Staff recommends the Board approve the updated Quality Report.

Approved for Legal sufficiency:



Bernabe Icaza
VP & General Counsel



Dr. Charmaine Chibar
FQHC Medical Director



Dr. Belma Andric
VP, CMO & Executive Director Clinical Services

Quality Council Meeting Minutes

Date: September 6, 2022

Time: 9:00AM – 11:00AM

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

Excused: Irene Garcia – Dental Quality Coordinator; Dr. John Cucuras – FQHC Dental Director; Dr. Valena Grbic, Medical Director, District Cares; Carolina Foksinski, Operations Process Manager;

Minutes by: Jonathan Dominique

<u>AGENDA ITEM</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>																																														
UTILIZATION																																																		
OPERATIONS	<p>Productivity The Clinics continue to see an increase in overall total billable visits since the start of the pandemic,</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th colspan="6">Productivity August 2022</th> </tr> <tr> <th rowspan="2">Service Line</th> <th colspan="2">Target</th> <th colspan="2">Seen</th> <th rowspan="2">% of Goal</th> </tr> <tr> <th>AM</th> <th>PM</th> <th>AM</th> <th>PM</th> </tr> </thead> <tbody> <tr> <td>Adult Care</td> <td>2,962</td> <td>1,752</td> <td>2,990</td> <td>1,531</td> <td>96%</td> </tr> <tr> <td>Pediatrics</td> <td>928</td> <td>571</td> <td>1,111</td> <td>585</td> <td>113%</td> </tr> <tr> <td>Women’s Health</td> <td>330</td> <td>198</td> <td>319</td> <td>145</td> <td>88%</td> </tr> <tr> <td>Behavioral Health</td> <td>568</td> <td>354</td> <td>398</td> <td>446</td> <td>92%</td> </tr> <tr> <td>Substance Use Disorder</td> <td>610</td> <td>374</td> <td>623</td> <td>377</td> <td>102%</td> </tr> </tbody> </table>	Productivity August 2022						Service Line	Target		Seen		% of Goal	AM	PM	AM	PM	Adult Care	2,962	1,752	2,990	1,531	96%	Pediatrics	928	571	1,111	585	113%	Women’s Health	330	198	319	145	88%	Behavioral Health	568	354	398	446	92%	Substance Use Disorder	610	374	623	377	102%	Productivity dashboard is in the process of being revamped. Will eliminate fields and introduce more areas for TOT		
Productivity August 2022																																																		
Service Line	Target		Seen		% of Goal																																													
	AM	PM	AM	PM																																														
Adult Care	2,962	1,752	2,990	1,531	96%																																													
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Dental	1,251	766	1,192	604	89%
Dental Hygiene	417	249	329	330	99%
Residents	471	205	371	203	85%
Total	7,537	4,469	7,333	4,221	96%

Medical Payer Mix

Self-Pay – 52%
 Managed Care – 40%
 Pending Medicaid – 3%
 Medicare – 2%
 Medicaid – 3%

Dental Payer Mix

Self-Pay – 49%
 Managed Care – 48%
 Medicaid – 3%
 Medicare – 0%
 Pending Medicaid – 0%

The highest ordered POC test was finger sticks. Urine drug screens, fentanyl, and A1C followed after. 30-39 age group is the highest group for our POC tests at 23% of our patient populations with POC orders. There are still concerns with duplicates in available panels.

Saturday dental productivity is currently at 105% productivity overall, however, Delray will not be opened on Saturdays due to 50% productivity.

Majority of providers are at 90% productivity or Higher (96% overall). Residents are performing at 85% of their

9/4/22

	<p>target. Pediatric providers are at 113% of their target. Women’s Health is at 88% whilst Behavioral health is at 92% productivity. Substance use performance is at 102%. Hygiene performing at 96%.</p> <p><i>(Clinic productivity report with graphs were presented.)</i></p>	<p>Marisol and Rocio are in the process of recreating the templates as Dr. Dorce-Medard and Dr. Taheri have changed the provider schedules for the rest of the year.</p>	<p>Marisol / Rocio</p>	
	<p><u>Walk-ins</u> Medical</p> <ul style="list-style-type: none"> • Scheduled: 7,538 (83%) • Walk-Ins: 1,562 (17%) <p>Dental:</p> <ul style="list-style-type: none"> • Scheduled: 2,074 (84%) • Walk-Ins: 381 (16%) <p>Mangonia had the highest number of medical walk-ins and West Palm Beach had the highest number of dental walk-ins. Patients that are scheduled</p>			
	<p><u>No Show Rates</u> No Show rates have maintained and are at a rate of 19% (same as last month) ; however, down 6% from this time last year.</p> <p>Telehealth visits make up 8% of our total no-shows.</p> <p><i>(Report with graph presented.)</i></p>			

PATIENT RELATIONS				
GRIEVANCES, COMPLAINTS & COMPLIMENTS	<p><u>Patient Relations Dashboard</u></p> <p>For July 2022, there were a total of 12 Patient Relations Occurrences that occurred between 6 Clinics and Clinic Administration. Of the 12 occurrences, there was 1 Grievance and 11 Complaints. The top 4 categories were Care & Treatment, Finance, Communication, and Medical Records. The top subcategory was Billing Issues with 3 occurrences. This was followed by Competency of Staff, Inappropriate Care and Poor Communication with 2 occurrences in each. There was also a total of 50 compliments received across 5 Clinics and Clinic Administration.</p> <p><i>(Patient Relations Report & Patient Relations Dashboard with Graphs presented.)</i></p>			
SURVEY RESULTS	<p><u>Patient Satisfaction Survey – July 2022</u></p> <p>For July 2022 there were 401 surveys completed which is an 8% increase from the previous month. The top 5 and lowest 5 scored-questions were presented. Of the surveys completed, 75% were scored as Excellent /Very Good (Promoters) and 7% of the surveys were scored as Fair/Poor (Detractors). Promoters improved by 4% and detractors scores decreased by 4% when compared to last month. Survey data indicates that 74% were completed by Females and 26% Male. Patients prefer to be seen in the mornings at the beginning of the week. Most surveys (37%) were completed by patients after their first visit to the practice. Surveys were received for all locations and Departments with Lantana Primary Care receiving the most amount of surveys. Percent of surveys received</p>	<p>David to follow with vendor to inquire about trending over time.</p> <p>Ivonne to follow with David to see the possibilities of merging reports</p> <p>Marisol to review Reports with Clinic Supervisors</p>	<p>David</p> <p>Ivonne</p> <p>Marisol</p>	<p>10/4/22</p> <p>10/4/22</p> <p>10/4/22</p>

	<p>compared to total services provided were reported. Promoter and Detractor scores presented by clinic. Year to date trends over time reported. Areas of opportunity (highest % detractors) include:</p> <p>Wait time exam room</p> <ul style="list-style-type: none"> • Lantana Dental - 23% (decreased from 60%) • WPB PCC – 34% (decreased from 39%) • Lake Worth PCC – 18% (decreased from 27%) • Lantana PCC – 15% (decreased from 25%) <p>Wait time reception</p> <ul style="list-style-type: none"> • WPB Primary – 25% (decreased from 36%) • WPB Dental – 23% (decreased from 27%) • Lake Worth Primary – 7% decreased from 27%) • Lantana Dental – 18% (decreased from 20%) • Jupiter PCC – 33% (increased from 14%) • Lake Worth WH – 31% (increased from 6%) <p>Informed about delays during the visit</p> <ul style="list-style-type: none"> • Mangonia Park – 33% (decreased from 50%) • Lantana Dental – 25% (decreased from 40%) • WPB Primary – 18.8% (decreased from 39%) • WPB Dental – 9% (decreased from 35%) • Delray Primary – 33% (decreased from) 35% • Lantana Primary - 3% (decreased from 22%) • Jupiter Primary 18% (decreased from 21%) <p>Ability to contact After Hours</p> <ul style="list-style-type: none"> • WPB Dental – 5.9% (decreased from 50%) • WPB Primary – 5% (decreased from 37%) • Lantana Primary – 15% (decreased from 24%) • Mangonia BH – 50% 			
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	<ul style="list-style-type: none"> • Lewis PCC – 50% <p>Phone calls answered promptly</p> <ul style="list-style-type: none"> • Delray PCC – 32% (increased from 19%) • Mangonia BH – 30% (increased from 0%) • Lantana Dental – 18.2% (decreased from 40%) • Lake Worth WH – 31% (increase from 6%) • WPB Primary – 25% (decreased from 39%) • WPB Dental – 23% (decreased from 32%) <p>Breakdown of scores; Benchmarks with like organizations; and Patient Comments by Clinic / Department presented. PDCA’s are being implemented to improve scores for 2022 <i>(Patient Satisfaction Survey PowerPoint presented.)</i></p>			
<p>OUTBOUND CALL CAMPAIGNS</p>	<p><u>Provider Reschedules:</u> In August 2022, The Clinic Service Center contacted 323 patients to reschedule their appointment. This was due to the provider on PTO, provider unavailable, provider resignation, and provider on Jury Duty. This was a 21% decrease from the previous month where we rescheduled 652 patients.</p> <p><u>Scheduling Initiatives – Improving Patient Access</u> In August 2022 the CSC team offered 81 patients a sooner appointment at another location. Of the 81 patients, 54 were scheduled for a sooner appointment at another clinic:</p> <ul style="list-style-type: none"> • 50 patients were scheduled at the Boca Clinic • 2 patients were scheduled in the Delray Clinic 			

	<ul style="list-style-type: none"> • 1 patient scheduled at Lake Worth Clinic • 1 patient scheduled at Jupiter Clinic <p><u>After Hours Call Return Summary Report – August 2022</u> In August 2022, the Clinic Service Center returned 140 calls received from the After-Hours service. This was a 6% decrease from the previous month. After hours calls by Type, by Clinic, and by Department presented. Of the 140 after hours calls received 25 (18%) of the calls were paged out to the on-call provider for a clinical issue. All clinical issues were paged out. Trends over time reported.</p> <p><u>Outbound Campaigns</u></p> <p><i>HPV 3rd Dose – West Palm Beach Clinic</i> In August 2022, The Clinic Service Center contacted patients who had not received their 3rd Dose of the HPV vaccine for the West Palm Beach Clinic. Of the 9, 6 were scheduled for an appointment.</p> <p><i>HPV 3rd Dose – Belle Glade Clinic</i> In August 2022, The Clinic Service Center contacted 2 patients who had not received their 3rd Dose of the HPV vaccine for the Belle Glade Clinic. Of the 2 called, both were scheduled for an appointment.</p> <p><i>Promise Fund</i> In August 2022, The Clinic Service Center contacted the patients who are part of the Promise Found of Florida. Of the 5 called, all were scheduled for an appointment.</p> <p><i>(Outbound Campaign PowerPoint presented.)</i></p>			
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<p>NEXT THIRD AVAILABLE</p>	<p><u>Next Third Available</u> The Next Third Available (NTA) report as of August 31, 2022 was presented by Clinic location and included all Departments associated and clinics. The report excludes “same day” appointment slots that are available each clinic Monday thru Friday. Monthly data and Trends over time data presented for each clinic and service line. An “decrease” is an improvement in NTA, whereas an “increase” is a lengthening of days wait for an appointment. Covering providers (*) are excluded from the analysis. Trends over time presented.</p> <p><u>Women’s Health:</u> LW: between 0 and 28 days. Decreased from last month (4/30 days) – Dr. Prophet added. BG: 12 days wait. Decreased from last month (27 days)</p> <p><u>Belle Glade PCC*:</u> Providers: between 13 and 32 days wait. Increased compared to last month (12/46 days wait) Residents: between 9 and 46. Increased from last month (3/48 days wait)</p> <p><u>Boca PCC:</u> Between 0 and 2 days wait. Decreased compared to last month (2/127 days wait)</p> <p><u>Delray Beach PCC:</u> Between 1 and 25 days wait. Decreased compared to last month (11/61 days wait)</p> <p><u>Jupiter PCC:</u> Between 49 and 101 days wait. Increased compared to last month (28/127 days wait)</p>			
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<p>Lake Worth PCC: Between 33 and 80 days wait. Decreased from last month (54/68 days wait)</p> <p>Lantana PCC: Adults: Between 7 and 81 days wait. Increased from last month (28/81 days wait) Peds: Between 16 and 34 days wait. Increased from last month (12/36 days wait) Lewis Center PCC: Five (5) day wait. Increase from last month (2 days). Covering provider is an outlier at 101 days. Mangonia Park PCC: Between 4 and 10 days wait. Increased from last month (2/6 days wait)</p> <p>WPB PCC: Adults: Between 4 and 57 days wait. Decreased compared to last month (5/76 days wait) Peds: Between 15 and 23 days wait. Decreased from last month (21/24 days wait)</p> <p>Behavioral Health: Mangonia Park: Between 0 and 44 days wait. Decreased compared to last month (0/70 days wait) All Other Locations: 0 to 1 day. Same as last month</p> <p>Dental: New Adult (Comps) BG: 0 days wait DB: 41 days wait. Increased by 41 days WPB: Between 17/52 days wait. Decreased from last month New Peds (Comps)</p>			
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	<p>BG: 0 day wait. Decreased from last month DB: 8 days wait. Increased from last month (days) LAN: Between 1/41 days wait. Same as last month WPB: 57 days wait. Decreased from last month (61 days wait)</p> <p>Dental Procedures BG: 0 days wait. Decreased from last month DB: 0 days wait. Decreased from last month LAN: Between 0 and 1 days wait. Decreased from last month WPB: Between 0 and 2 days wait. Decreased from last month</p> <p>Hygiene: BG: Between 1/52 days wait. Decreased from last month DB: Between 0/102 days wait. Decreased from last month LAN: Between 0/1 days wait. Same as last month WPB: Between 0/1 day wait. Decreased from last month <i>(Third Next Available PowerPoint presented.)</i></p>			
QUALITY				
QUALITY AUDITS				
	<p><u>STANSON BPA REPORT</u> Since Stanson went live, the BPA has fired a total of 91 times.</p>			
MEDICAL	<p><u>Hemoglobin A1C/Point of Care Testing</u> Shows:</p>			

<p>The diabetes measure data for January-July 2022 shows that our patients are currently controlled at 71% while 27% are uncontrolled (from 3,434 diabetic patients total) and 2 % of patients need data. HRSA goal is to have 67% of patients with controlled diabetes. There were 2886 POC A1Cs done (84% of Diabetic Patients). There was an increase of A1c POC testing compared to 82% in the previous month. The majority of controlled patients had 85% and uncontrolled 87% patients had the A1c done at POC vs. lab. The 68 (2%) of patients with no data were from West Palm Beach Clinic (28 patients, 26%), Belle Glade Clinic (11 patients 16%), Lantana Clinic (8 patients , 12%) and Lake Worth Clinic (5 patients, 7%) - have highest percentage of untested patients up to July. 43 (63%) patients who did not have data, had already a future appointment, 23 (37%) patients did not have a scheduled a future appointment with primary care.</p>																																										
<p><u>Colorectal Cancer Screening</u></p> <p>Colorectal cancer screening YTD - JULY 2022</p> <table border="1"> <thead> <tr> <th rowspan="2">Clinics</th> <th rowspan="2">Eligible Population</th> <th rowspan="2">Satisfied</th> <th colspan="4">Needs Data</th> </tr> <tr> <th colspan="2"># Patients with FIT Test Ordered</th> <th colspan="2"># Missed Patients</th> </tr> </thead> <tbody> <tr> <td>Belle Glade</td> <td>871</td> <td>375 43%</td> <td>379</td> <td>44%</td> <td>117</td> <td>13%</td> </tr> <tr> <td>Boca</td> <td>498</td> <td>250 50%</td> <td>192</td> <td>39%</td> <td>56</td> <td>11%</td> </tr> <tr> <td>Delray Beach</td> <td>986</td> <td>382 39%</td> <td>542</td> <td>55%</td> <td>62</td> <td>6%</td> </tr> <tr> <td>Jupiter</td> <td>753</td> <td>280 37%</td> <td>301</td> <td>40%</td> <td>172</td> <td>23%</td> </tr> </tbody> </table>	Clinics	Eligible Population	Satisfied	Needs Data				# Patients with FIT Test Ordered		# Missed Patients		Belle Glade	871	375 43%	379	44%	117	13%	Boca	498	250 50%	192	39%	56	11%	Delray Beach	986	382 39%	542	55%	62	6%	Jupiter	753	280 37%	301	40%	172	23%			
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Lake Worth	1155	476 41%	568 49%	111 10%			
Lantana	1123	458 41%	558 50%	107 10%			
Lewis Center	114	7 6%	71 62%	36 32%			
Mangonia Park	168	31 18%	109 65%	28 17%			
Mobile	33	0 0%	26 79%	7 21%			
West Palm Beach	1200	483 40%	594 50%	123 10%			
Total		2743	3371 48%	849 12%			
		39%	4220	61%			
<p>Satisfied: 2743 (39%) Needs Data: 4220 (61%)</p> <p>Patients are still being missed and team plans to address this.</p>							
<p><u>FIT Test</u> Return rates are increasing all across our business units. Our highest return rates were at Belle Glade (61%), Boca Raton (49%), and Lantana (49%).</p> <p>Belle Glade, Lantana and West Palm Beach are leading the charge in Point of Care FIT Tests.</p> <p>(Report with graph presented.)</p>							

	<p><u>Cervical Cancer Screening</u> Satisfied: 3926(47%) Needs Data: 4376 (53%)</p>			
	<p><u>Breast Cancer Screening</u> Satisfied screenings – 1983 patients (52%). Unsatisfied Screenings – 1832 patients (48%).</p> <ul style="list-style-type: none"> • Not Met with order – 1419 patients (77%). • Not Met (Patient Missed) – 413 patients (33%) <p>Jan-July: Satisfaction improved from 51% to 52% while the number of patients not met with order decreased from 49% to 48%.</p> <p>Patients that did not meet the criteria were followed up with by Nurse Educator and found that many patients missed their screenings for various reasons including but not limited to : Not being aware of the order, insurance doesn't cover, time restrictions, forgetting, time restrictions, other.</p>	<p>Team will work on clarifying the process in order to make it easier for patients to schedule and follow through with their mammogram orders.</p>	<p>Dr. Chibar / Dr. Warren</p>	<p>10/4/22</p>
DENTAL	<p><u>Dental Sealants</u> 95% (417; n=439) [Jan-July 2022] 98% (113; n=115) [July 2022]</p>			
	<p><u>Same Day Extractions</u> (Limited Exams) Limited Exams (n= 292) Same Day Extractions: 126 (43% n=292) YTD Same Day Extractions 1,377</p>			

<p>Returns (Follow-Up): Patients with a future extraction appointment type—32 (11% n=292)</p> <p>Returned within 21 days for extraction</p> <p>22 (69% n=32)</p> <p>Antibiotics Given: Patients without a future extraction appointment type</p> <p>71 (24% n=292)</p> <p>Extraction not needed: non-emergent</p> <p>63 (22% n=292)</p>			
<p>MDI/WHO – July 2022</p> <ul style="list-style-type: none"> – Total Pediatric Patients 162 <ul style="list-style-type: none"> ○ Have Dental Home 67 (41%; n=162) ○ No Dental Home 95 (59%; n=162)) <ul style="list-style-type: none"> No MDI 2 (2%; n=95) MDI 93 (98% n=95) WHO 30 (32% n=93) No WHO 63 (68% n=93) <p>Patients seen by Pediatric Dentists</p> <p>25(83%; n=30)</p>	<p>Meeting to be scheduled to discuss MDI workflow, program, and team needs</p>	<p>Nancy / Marisol / Hyla / Dr. Andric</p>	<p>10/4/22</p>
<p>HPV</p> <p>YTD Number of eligible patients (n=1504)</p> <p>Distribution of patient doses goes as follows (597 vaccines from Jan-July 2022)</p> <ul style="list-style-type: none"> • Dose 1 – 384 • Dose 2 – 179 • Dose 3 – 34 	<p>FQHC Medical Director and Associate Medical Director will reevaluate the current workflow and re train providers on documenting consents / refusals.</p> <p>FQHC Director will also look into spike in west palm beach clinic.</p>	<p>Dr. Chibar</p> <p>Dr. Chibar</p>	<p>10/4/22</p> <p>10/4/22</p>

	<p>There were 422 patients seen that were previously vaccinated for HPV</p> <p>456 Patients were Seen with No HPV vaccine or refusal consent on file. There has been an increase in patients from ages 9-11.</p>	<p>Team will place physical copies of the consents / refusals in the patient rooms. Marisol will ensure that her staff are responsible for maintaining inventory</p>	<p>Dr. Chibar / Lisa / Marisol</p>	<p>10/4/22</p>
<p>BEHAVIORAL HEALTH</p>	<p>SBIRT: 153 SBIRTs completed in July as opposed to 95 completed in June</p> <p>There appears to be a problem in epic where the SBIRTs are being completed but are not being captured by the EPIC EHR. This is why the number of SBIRTs has fallen off tremendously in the last couple of months.</p>	<p>Team is working with EPIC to find a solution to the problem.</p>	<p>Dr. Phillips / Andrea / EPIC Team</p>	<p>10/4/22</p>
<p>NURSING</p>	<p>Higher Level of Care</p> <p>51 ER referrals/49 patients were sent to the ER in July. The breakdown of the referrals is:</p> <ul style="list-style-type: none"> – WH- 4 (8%) – Peds- 13 (25%) – Adult- 29 (57%) – Adult Crisis- 3 (6%) – Urgent Care- 2 (4%) (this order was D/C. Shouldn't see in Aug) – Peds Crisis-0 <p>There were 2 patients with multiple orders in July; one adult and one peds. Upon review of the chart, the adult patient received the ER referral in error. The second referral was appropriate and was a Crisis Stabilization referral. Pediatric duplicate referrals from Dr. Clarke were</p>			

<p>unrelated diagnosis and were 26 days apart for 2 different diagnosis.</p> <p>ADULT REFERRALS- Dr. Perez (also in June), Dr. Florez (also in June) and Rebecca Koopman were the top producers of adult referrals for July, all with 3 referrals each. WPB had the highest number of adult ER referrals with 9 (31%). Lake Worth, Belle Glade and Mangonia had the second highest number of referrals by clinic- 5 each clinic.</p> <p>HOSPITAL REFERRAL- These are from the WH department.</p> <p>PEDS REFERRALS- highest producer was Dr. Clarke- 7 (54%) of the peds referrals. Dr. Lazaro had 1, Dr. Marzouca had 4, Dr. Normil-Smith had 1.</p> <p>The incorrect referral type was used 6 times for a pediatric referral, all by the same pediatrician- Dr. Clarke.</p> <p>URGENT CARE/ER REFERRAL- This referral type was discontinued in the month of July and removed from the Provider preference list. We should not continue to see this referral type used moving forward in August data.</p> <p>Inter-clinic transport should be reflected in the data for August.</p>			
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QUALITY METRICS

UDS July 2022

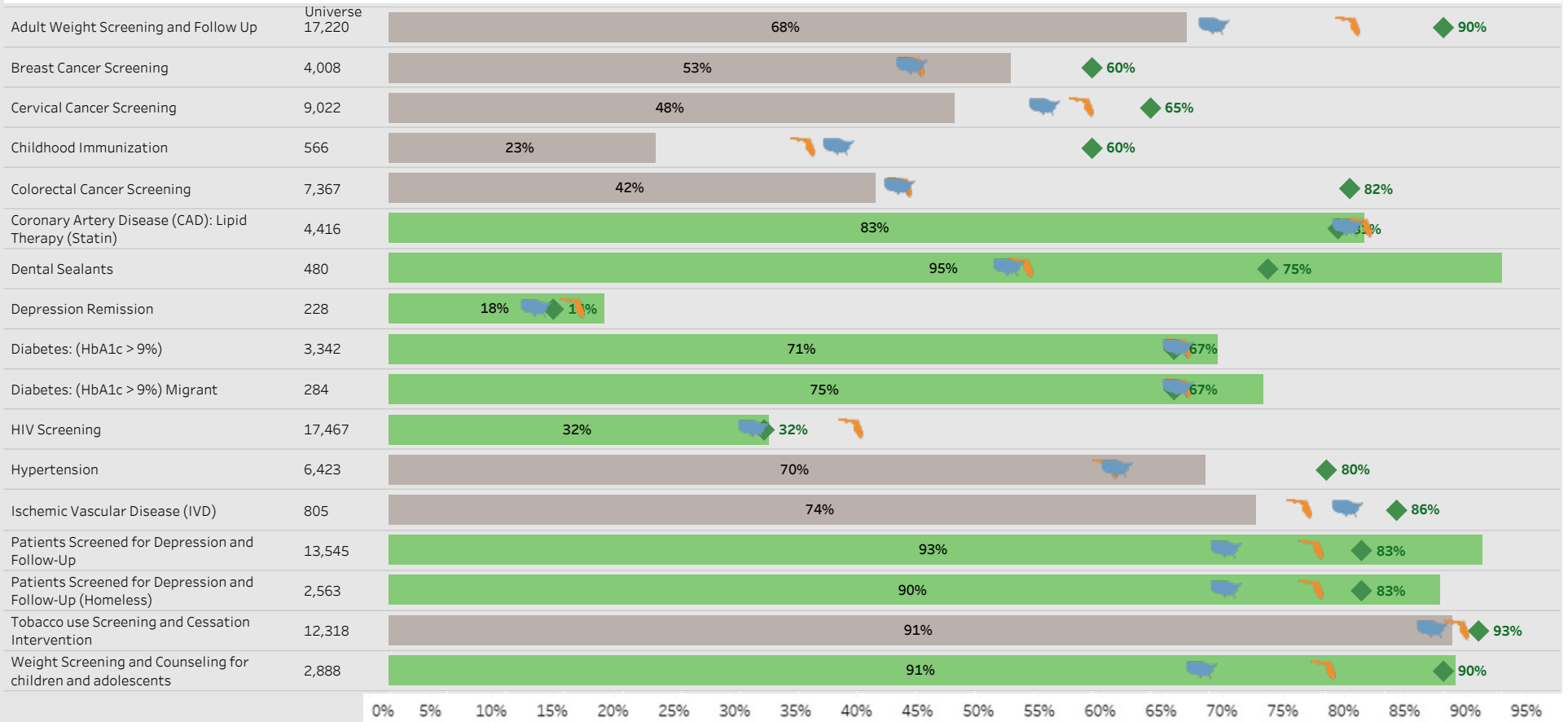
Of the 16 UDS Measures: 8 Exceeded/Met the HRSA Goal and 8 were short of the HRSA Goal (*Clinic Score/ HRSA Goal / Healthy People Goal*)

Medical UDS Report	Adult Weight screening and follow up: (68% / 90%)			
	Breast Cancer Screening: (53%/60%)			
	Cervical Cancer Screening: (48% /65%)			
	Childhood immunization: (23% / 60%)			
	Colorectal Cancer Screening: (42% / 82%)			
	Coronary Artery Disease CAD: (83% / 81%)			
	Dental Sealants: (95% / 75%)			
	Depression Remission: (18% / 14%)			
	Diabetes: (71% / 67%)			
	HIV Screening: (32% / 32%)			
	Hypertension: (70% / 80%)			
	Ischemic Vascular Disease (IVD): (74% / 86%)			
	Depression screening: (93% / 83%)			
	Depression screening (Homeless): (90% / 83%)			
	Tobacco use screening & cessation: (91% / 93%)			
	Weight assessment, Children & Adolescent: (91% /90%)			

Meeting Adjourned: 12:30PM

OVERALL PERFORMANCE

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



PRODUCTIVITY REPORT AUG 2022

ALL PROVIDERS

AS 08/31/2022 Based on Completed Appointments

<51%

>=51% and < 80%

>= 80% and <100%

>= 100%

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen		% Monthly Target Achieved		Daily Average
			AM	PM	Total	AM	PM	Total		
ALFONSO PUENTES, RAMIRO	17	21.0	219	133	352	211	113	324	92%	15.4
BUI, THY	17	23.0	239	147	386	260	140	400	104%	17.4
CASTIGLIA, SARAH	9 **	16.5	124	77	201	76	37	113	56%	6.8
DABU, DARNEL	17	21.0	223	136	359	220	121	341	95%	16.2
DORCE-MEDARD, JENNIFER	17	1.0	18	0	18	19	0	19	106%	19.0
FERNANDEZ SANCHEZ, MARCO A.	15	22.5	210	124	334	255	137	392	117%	17.4
FLOREZ, GLORIA MATILDE	17	22.0	216	134	350	201	117	318	91%	14.5
HARBERGER, SENECA	17	18.5	188	120	308	183	99	282	92%	15.2
JEAN-JACQUES, FERNIQUE	15	23.5	219	130	349	250	105	355	102%	15.1
KOOPMAN, REBECCA SUE	15	17.0	157	94	251	168	96	264	105%	15.5
LAM, MINH DAI	15	12.0	119	58	177	141	56	197	111%	16.4
LANGLEY, TAMARA	8 ** First 2 weeks /15	13.5	100	61	161	62	37	99	61%	7.3
NAVARRO, ELSY	15	14.5	139	76	215	143	60	203	94%	14.0
PEREZ, DANIEL JESUS	9 Belle Glade * / 17	13.5	59	72	131	66	65	131	100%	9.7
PHILISTIN, KETELY	15	13.0	121	70	191	111	56	167	87%	12.8
PIERRE LOUIS, JOANN	15	16.0	156	82	238	169	62	231	97%	14.4
SHOAF, NOREMI	15	4.5	45	24	69	48	22	70	101%	15.6
ST VIL, CARLINE	15	13.5	122	76	198	129	73	202	102%	15.0
STANEK, EWELINA	8 ** First 2 weeks /15	3.0	10	11	20	6	6	12	59%	4.0
TAHERI, NERGESS T.	7 Belle Glade * / 17	14.0	70	31	101	72	31	103	102%	7.4
WARREN, SANDRA	17	2.0	23	7	30	14	5	19	63%	9.5
WILKINSON, SARAH	15	23.0	182	114	296	164	93	257	87%	11.2
ZITO, AMALINETTE	17	1.5	27	0	27	22	0	22	81%	14.7
ADULT CARE TOTALS		330.0	2989	1773	4762	2,990	1,531	4,521	95%	

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

RESIDENTS										
PY1	6	35.5	124	76	200	124	88	212	106%	6.0
PY2	10	15.5	130	30	160	97	31	128	80%	8.3
PY3	14	24.5	217	99	315	150	84	234	74%	9.6
RESIDENTS TOTAL		75.5	471	205	675	371	203	574	85%	

PEDIATRIC CARE										
CLARKE-AARON, NOELLA	17	21.5	220	140	360	241	146	387	107%	18.0
CHIBAR, CHARMAINE	17	1.5	20	7	27	21	0	21	77%	14.0
DESSALINES, DUCLOS	17	17.5	179	113	292	222	110	332	114%	19.0
LAZARO RIVERA, NANCY	17	17.0	179	106	285	233	115	348	122%	20.5
MARZOUCA, KISHA F.	17	15.5	159	99	258	177	95	272	110%	17.5
NORMIL-SMITH, SHERLOUNE	17	17.0	169	113	282	217	119	336	119%	19.8
PEDIATRIC CARE TOTALS		90	928	578	1505	1,111	585	1,696	113%	

WOMEN'S HEALTH CARE										
CASANOVA, JENNIFER	15	21.0	167	93	260	150	69	219	84%	10.4
FERWERDA, ANA	17	3.0	33	14	46	28	8	36	78%	12.0
PROPHETE, JOYCE	9 ** First 2 weeks / 17	21.5	179	109	288	141	68	209	73%	9.7
WOMEN'S HEALTH CARE TOTALS		45.5	379	216	594	319	145	464	78%	

**Avg New Provider

BEHAVIORAL HEALTH										
LEQUERICA ZIEMBA, ADRIANA DEL CA	6	17.5	64	38	103	58	63	121	118%	6.9
CALDERON, NYLSA	10	20.0	120	80	200	63	110	173	87%	8.7
JONES, KIARA	10	19.5	123	70	193	112	78	190	98%	9.7
LUCCHESI, KAREN	10	17.5	106	66	172	60	82	142	83%	8.1
CUSIMANO, ANGELA	12	21.5	155	99	254	105	113	218	86%	10.1
BEHAVIORAL HEALTH TOTALS		96	568	354	922	398	446	844	92%	

SUBSTANCE ABUSE DISORDER										
PHILLIPS, COURTNEY	8	16.0	74	46	120	55	33	88	73%	5.5
HIRSCH, KAREN	6	16.0	56	36	92	47	35	82	90%	5.1
MILETA, SNJEZANA	10	23.0	142	85	227	116	85	201	89%	8.7
MITCHELL, ANGELA DENISE	10	18.0	113	68	181	121	71	192	106%	10.7
REXACH, CLAUDIA	10	21.5	129	82	211	162	74	236	112%	11.0
LAWRENCE, MELISSA MONIQUE	10	19.0	118	70	188	122	79	201	107%	10.6
SUBSTANCE ABUSE DISORDER TOTALS		113.5	631	388	1018	623	377	1,000	98%	

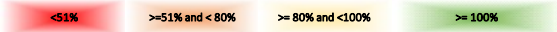
DENTAL										
ALWEHAIB, ARWA	12 First 2 week s / 16	18.5	168	106	274	203	95	298	109%	16.1
ALI, BUSHRA	8 ** First weeks	4.5	19	16	35	16	15	31	88%	6.9
BOWEN, BEVERLY ANNE	12 First 2 week s / 16	21.5	194	113	307	166	108	274	89%	12.7
CUCURAS, JOHN N	16	6.0	58	38	96	58	18	76	79%	12.7
SEMINARIO, ADA	12 First 2 week s / 16	22.0	194	119	313	159	79	238	76%	10.8
SOFIANOS JR, MICHAEL	12 First 2 week s / 16	21.0	186	113	299	218	89	307	103%	14.6
SILVA, MICHELLE	12	13.5	100	62	161	108	51	159	99%	11.8
ZANGENEH, YASMINE	12 First 2 week s / 16	20.5	182	117	299	131	74	205	69%	10.0
WILLIAMS, RICHARD	12 First 2 week s / 16	17.5	155	98	253	133	75	208	82%	11.9
DENTAL TOTALS		145.0	1255	782	2038	1,192	604	1,796	88%	

**Avg New Provider

DENTAL HYGIENE										
MOZER NASCIMENTO, ARIANNE	8	21.5	104	66	170	95	74	169	100%	7.9
HARDCASTLE, CORINA	8	13.0	61	40	101	52	35	87	86%	6.7
MASON, SHERRY	8	22.5	109	69	178	89	76	165	93%	7.3
PETERSEN, PATRICE	8 / 16 MDI	15.0	144	74	218	93	145	238	109%	15.9
DENTAL HYGIENE TOTALS		72.0	417	249	666	329	330	659	99%	

GRAND TOTAL		967.5	7637	4544	12181	7,333	4,221	11,554	95%	
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PRODUCTIVITY REPORT AUG 2022

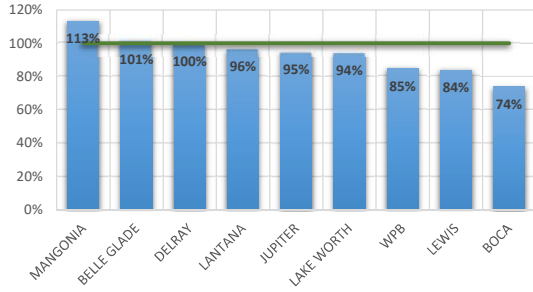


ALL CLINICS

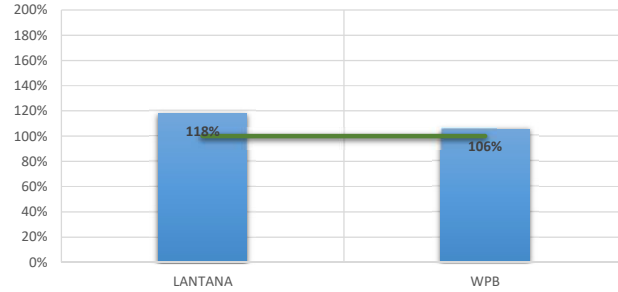
AS 08/31/2022 Based on Completed Appointments

Category	Target for the Month			Total for the Month Seen			% Monthly Target Achieved
	AM	PM	Total	AM	PM	Total	
AS 08/31/2022							
ADULT CARE	2,989	1,773	4,762	2,990	1,531	4,521	95%
PEDIATRIC CARE	928	578	1,505	1,111	585	1,696	113%
WOMEN'S HEALTH CARE	379	216	594	319	145	464	78%
BEHAVIORAL HEALTH	568	354	922	398	446	844	92%
SUBSTANCE ABUSE DISORDER	631	388	1,018	623	377	1,000	98%
DENTAL HEALTH	1,255	782	2,038	1,192	604	1,796	88%
DENTAL HYGIENE	417	249	666	329	330	659	99%
RESIDENTS	471	205	675	371	203	574	85%
Grand Total	7,637	4,544	12,181	7,333	4,221	11,554	95%

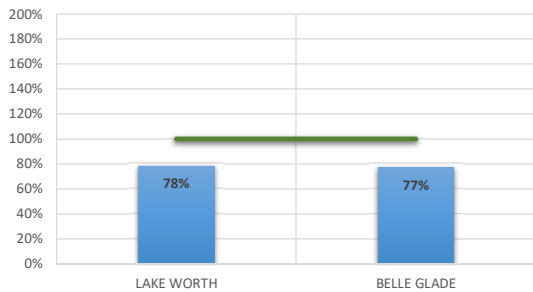
Adult Care



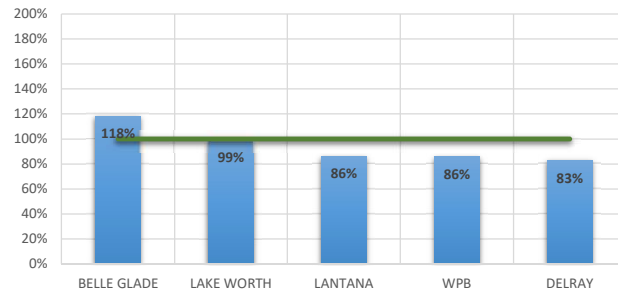
Pediatric Care



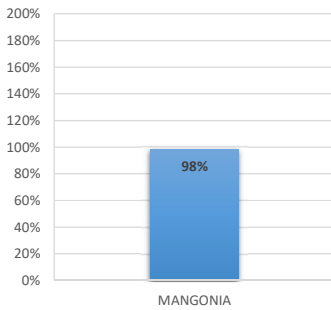
Women's Health Care



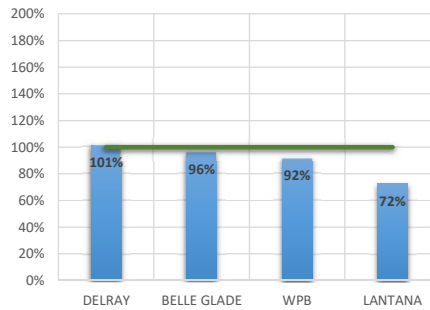
Behavioral Health



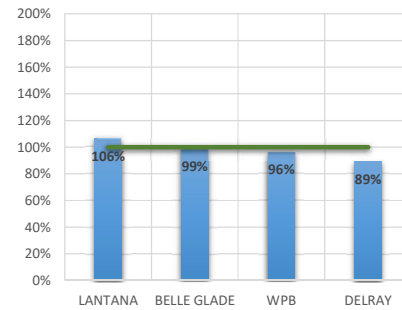
Substance Abuse Disorder



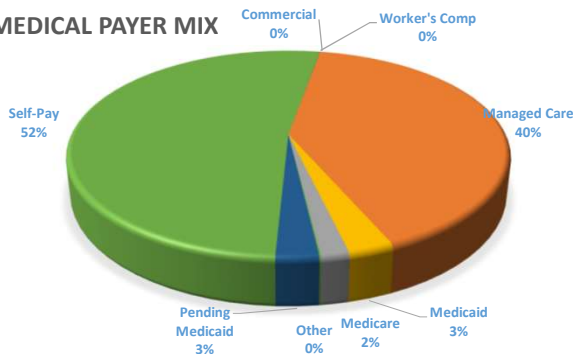
Dental



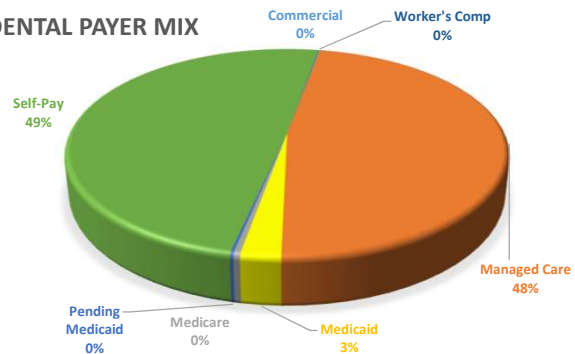
Dental Hygiene



MEDICAL PAYER MIX



DENTAL PAYER MIX



ADULT CARE

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

ALFONSO PUENTES, RAMIRO	83%	95%	77%	90%	80%	87%	96%	94%	90%	92%	92%
BUI, THY										105%	104%
DABU, DARNEL	90%	99%	82%	83%	83%	91%	102%	102%	97%	93%	95%
DORCE-MEDARD, JENNIFER	89%	67%	111%	111%	67%	67%	83%	133%	83%	100%	106%
CASTIGLIA, SARAH										100%	56%
FLOREZ, GLORIA MATILDE	99%	98%	78%	91%	93%	95%	87%	90%	94%	93%	91%
HARBERGER, SENECA				100%	100%	100%	100%	100%	95%	83%	92%
JEAN-JACQUES, FERNIQUE	96%	106%	96%	96%	102%	87%	100%	102%	105%	101%	102%
KOOPMAN, REBECCA SUE	62%	70%	63%	69%	98%	87%	86%	99%	111%	112%	105%
LAM, MINH DAI	125%	116%	108%	108%	104%	104%	106%	107%	113%	115%	111%
LANGLEY, TAMARA										100%	61%
PIERRE LOUIS, JOANN	89%	100%	81%	95%	97%	95%	105%	97%	97%	89%	97%
NAVARRO, ELSY	92%	103%	93%	92%	103%	97%	97%	99%	101%	99%	94%
PEREZ, DANIEL JESUS				81%	95%	97%	88%	86%	100%	91%	100%
PHILISTIN, KETELY	91%	98%	87%	101%	102%	90%	92%	88%	99%	99%	87%
WILKINSON, SARAH								55%	79%	76%	87%
FERNANDEZ SANCHEZ, MARCO A.	149%	168%	118%	76%	100%	83%	83%	95%	111%	109%	117%
SHOAF, NOREMI	88%	95%	87%	96%	91%	97%	99%	101%	98%	95%	101%
ST VIL, CARLINE	77%	92%	98%	83%	87%	84%	92%	95%	101%	85%	102%
WARREN, SANDRA	78%	100%	70%		100%	85%	100%	68%	74%	89%	63%
ZITO, AMALINNETTE	100%	89%	81%	104%	100%	100%	92%	122%	85%	64%	81%
RESIDENTS				75%	64%	72%	71%	78%	75%	68%	85%

PEDIATRIC CARE		Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
CLARKE-AARON, NOELLA		92%	89%	85%	89%	97%	98%	104%	102%	111%	118%	107%	
CHIBAR, CHARMAINE		61%	100%	100%	100%				100%	108%	100%	77%	
DESSALINES, DUCLOS		120%	126%	108%	107%	121%	119%	113%	121%	109%	119%	114%	
LAZARO RIVERA, NANCY		130%	136%	113%	115%	128%	128%	120%	126%	117%	119%	122%	
MARZOUCA, KISHA F.		90%	88%	85%	99%	95%	101%	100%	110%	110%	130%	110%	
NORMIL-SMITH, SHERLOUNE		116%	106%	106%	108%	113%	112%	106%	116%	98%	115%	119%	

WOMEN'S HEALTH CARE		Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
CASANOVA, JENNIFER		107%	133%	107%	121%	137%	123%	120%	134%	143%	114%	84%	
FERWERDA, ANA		110%	102%	84%	92%	114%	106%	99%	103%	122%	91%	78%	

BEHAVIORAL HEALTH		Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
CALDERON, NYLSA		90%	97%	84%	92%	97%	91%	91%	93%	99%	89%	87%	
JONES, KIARA		98%	101%	89%	96%	98%	100%	99%	98%	104%	97%	98%	
GREEN, ASHLEY							118%	105%	61%		80%		
LUCCHESI, KAREN		43%	67%	65%	70%	89%	86%	95%	83%	92%	83%	83%	
CUSIMANO, ANGELA			116%	50%	70%	79%	89%	75%	71%	81%	82%	86%	
LEQUERICA ZIEMBA, ADRIANA DEL CA		79%	84%	84%	90%	109%	113%	105%	137%	105%	114%	118%	

SUBSTANCE ABUSE CARE		Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22
DRAYTON, RENEISHA							105%	92%	118%	105%	108%		
HIRSCH, KAREN		86%	98%	81%	70%	131%	117%	105%	115%	122%	86%	90%	
MILETA, SNJEZANA		93%	124%	100%	93%	93%	96%	86%	109%	81%	98%	89%	
MITCHELL, ANGELA DENISE		110%	105%	93%	94%	92%	97%	85%	114%	106%	106%	106%	
LAWRENCE, MELISSA MONIQUE			129%	89%	103%	125%	105%	105%	121%	103%	84%	107%	
PHILLIPS, COURTNEY		153%	53%	87%	166%	121%	132%	100%	94%	109%	116%	73%	

DENTAL

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

ALWEHAIB, ARWA	100%	105%	89%	97%	104%	104%	99%	99%	113%	108%	109%
CUCURAS, JOHN N	90%	140%	96%	102%	113%	94%	103%	106%	103%		79%
BOWEN, BEVERLY ANNE								110%	74%	87%	89%
SEMINARIO, ADA	75%	112%	94%	77%	102%	90%	90%	78%	87%	87%	76%
SILVA, MICHELLE	78%	102%	81%	92%	108%	94%	89%	97%	92%	103%	99%
SOFIANOS JR, MICHAEL						101%	106%	96%	85%	100%	103%
ZANGENEH, YASMINE	70%	107%	80%	73%	104%	82%	80%	97%	86%	83%	69%
WILLIAMS, RICHARD	63%	95%	78%	70%	84%	82%	83%	84%	81%	83%	82%
PARRISH, ROSARIO								116%	96%	95%	
HARDCASTLE, CORINA	78%	89%	88%	83%	88%	92%	94%	96%	98%	100%	86%
MASON, SHERRY	60%	78%	59%	69%	72%	89%	84%	89%	76%	87%	93%
GONZALEZ, NANCY		63%	75%			98%	106%	150%			
PETERSEN, PATRICE	54%	83%	90%	88%	111%	100%	102%	108%	101%	96%	109%



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
PEREZ, DANIEL JESUS	9	10.0	19	52	71	21	48	69	98%	6.9
TAHERI, NERGESS T.	7	14.0	70	31	101	72	31	103	102%	7.4
DORCE-MEDARD, JENNIFER	17	1.0	18	0	18	19	0	19	106%	19.0
ADULT CARE TOTALS		25.0	107	83	190	112	79	191	101%	

RESIDENTS										
PY1	8	35.5	124	76	200	124	88	212	106%	6.0
PY2	12	15.5	130	30	160	97	31	128	80%	8.3
PY3	12	24.5	217	99	315	150	84	234	74%	9.6
RESIDENTS TOTALS		75.5	471	205	675	371	203	574	85%	

WOMEN'S HEALTH CARE										
FERWERDA, ANA	17	2.5	31	14	44	26	8	34	77%	13.6
WOMEN'S HEALTH CARE TOTALS		2.5	31	14	44	26	8	34	77%	

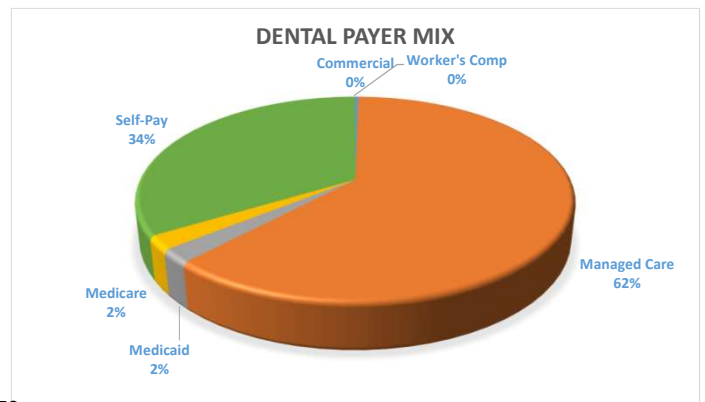
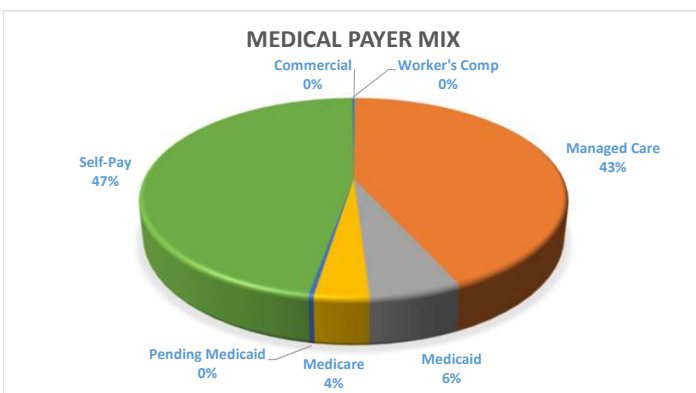
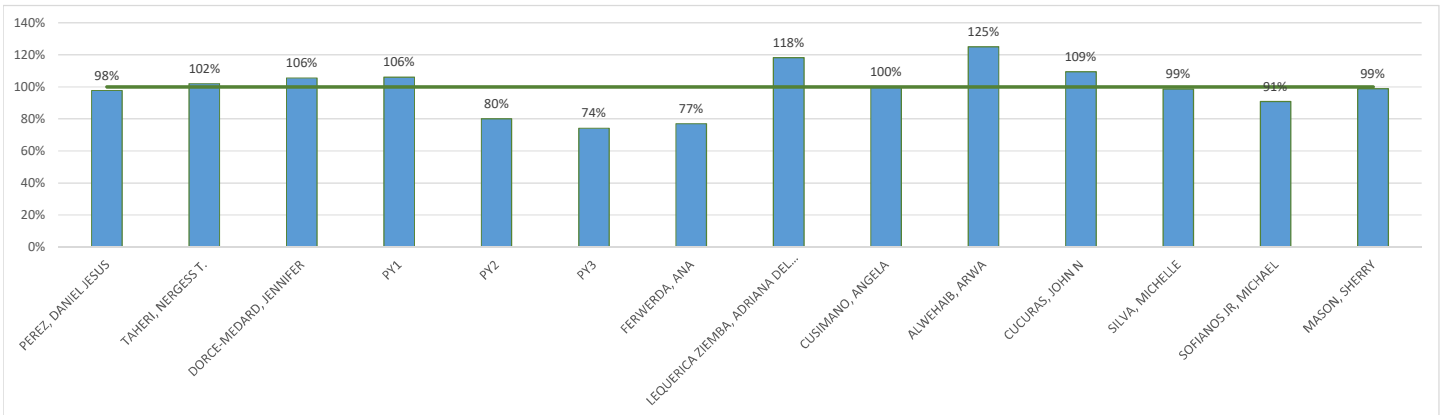
BEHAVIORAL HEALTH										
LEQUERICA ZIEMBA, ADRIANA DEL	6	16.5	64	36	101	57	62	119	118%	7.2
CUSIMANO, ANGELA	12	0.5	0	1	1	0	1	1	100%	2.0
BEHAVIORAL HEALTH TOTALS		17	64	37	102	57	63	120	118%	

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

DENTAL										
ALWEHAIB, ARWA	16	0.5	8	0	8	10	0	10	125%	20.0
CUCURAS, JOHN N	16	0.5	0	6	6	0	7	7	109%	14.0
SILVA, MICHELLE	12	13.5	100	62	161	108	51	159	99%	11.8
SOFIANOS JR, MICHAEL	12 First 2 weeks / 16	8.5	86	51	138	86	39	125	91%	14.7
DENTAL TOTALS		23.0	194	119	313	204	97	301	96%	

DENTAL HYGIENE										
MASON, SHERRY	8	8.5	43	26	69	43	25	68	99%	8.0
DENTAL HYGIENE TOTALS		8.5	43	26	69	43	25	68	99%	

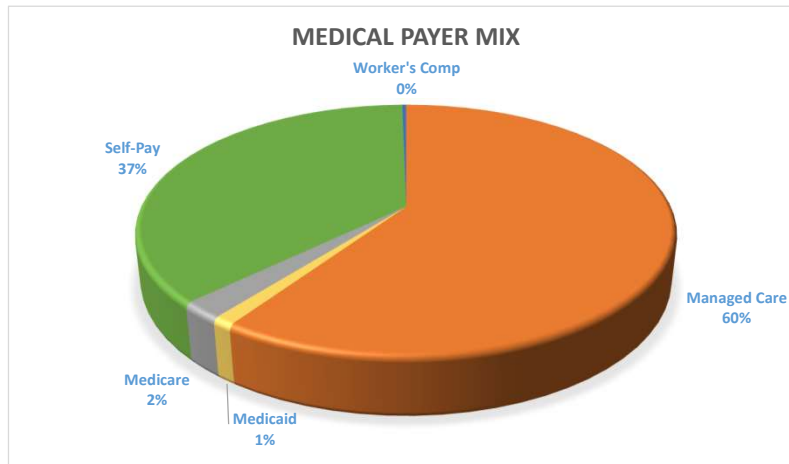
GRAND TOTAL										
		151.5	910	483	1,393	813	475	1,288	92%	



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
WILKINSON, SARAH	13	22.5	177	114	291	157	93	250	86%	11.1
CASTIGLIA, SARAH	12	16.5	124	77	201	76	37	113	56%	6.8
ADULT CARE TOTALS		39.0	301	191	492	233	130	363	74%	

SUBSTANCE ABUSE DISORDER										
SUBSTANCE ABUSE DISORDER TOTALS										
		0.0	0	0	0	0	0	0		

GRAND TOTAL		39.0	301	191	492	233	130	363	74%	
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AS 08/31/2022 Based on Completed Appointments

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
HARBERGER, SENECA	17	19	188	120	308	183	99	282	92%	15.2
LAM, MINH DAI	15	12	119	58	177	141	56	197	111%	16.4
ST VIL, CARLINE	14	10.5	95	58	153	100	56	156	102%	14.9
ADULT CARE TOTALS		41	403	235	638	424	211	635	100%	

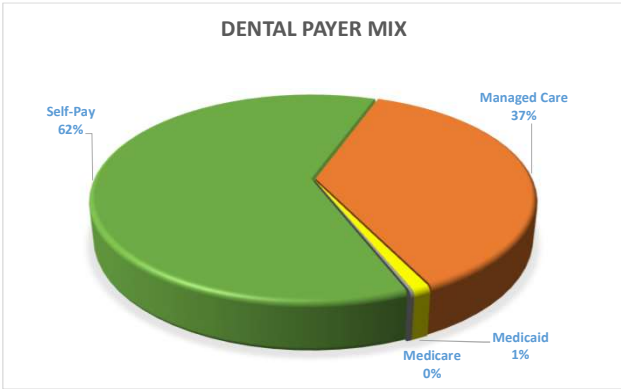
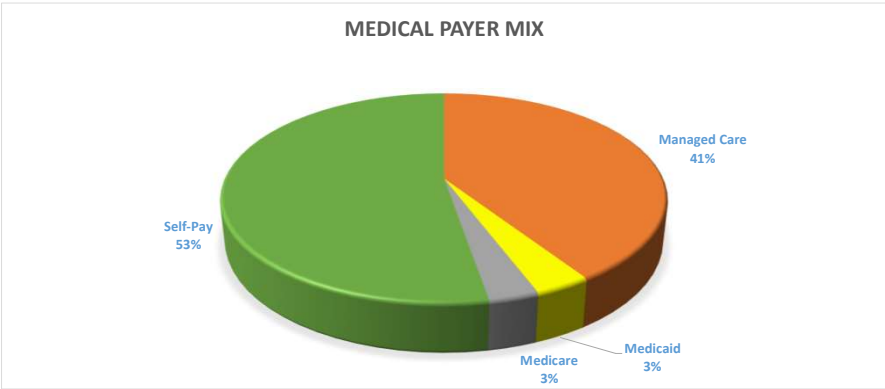
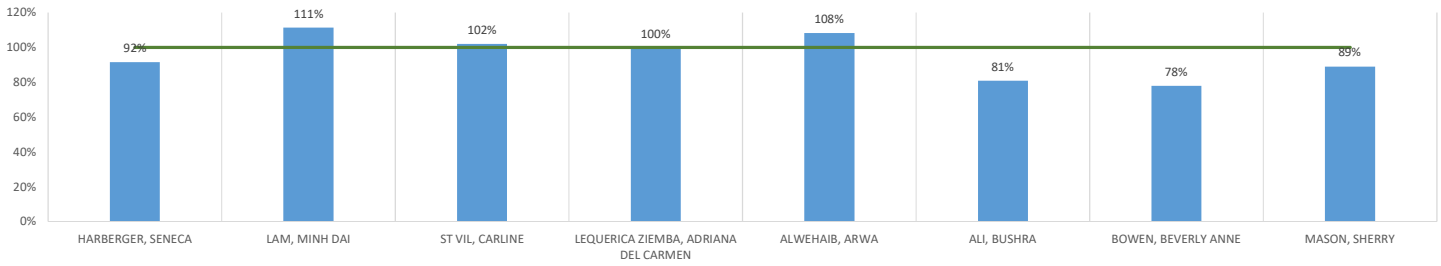
BEHAVIORAL HEALTH										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
LEQUERICA ZIEMBA, ADRIANA DEL CARMEN	6	0.5	0	1	1	0	1	1	100%	2.0
LUCCHESI, KAREN	10	17.5	106	66	172	60	82	142	83%	8.1
BEHAVIORAL HEALTH TOTALS		18.0	106	67	173	60	83	143	83%	

SUBSTANCE ABUSE DISORDER										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
SUBSTANCE ABUSE DISORDER TOTALS		0	0	0	0	0	0	0		

DENTAL										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
ALWEHAIB, ARWA	15	18	160	106	266	193	95	288	108%	16.0
ALI, BUSHRA	8	3.5	14	13	27	11	11	22	81%	6.3
BOWEN, BEVERLY ANNE	12	4.5	36	19	55	22	21	43	78%	9.6
DENTAL TOTALS		26	210	138	348	226	127	353	101%	

DENTAL HYGIENE										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
MASON, SHERRY	8	14	65	44	109	46	51	97	89%	6.9
DENTAL HYGIENE TOTALS		14	65	44	109	46	51	97	89%	

GRAND TOTAL										
Provider	Daily Target	Days Worked	AM	PM	Total	AM	PM	Total	% Monthly Target Achieved	Daily Average
GRAND TOTAL		99	784	484	1,268	756	472	1,228	97%	



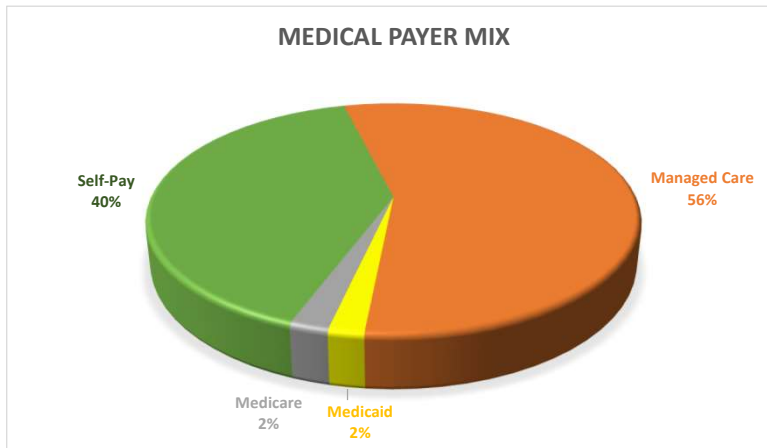
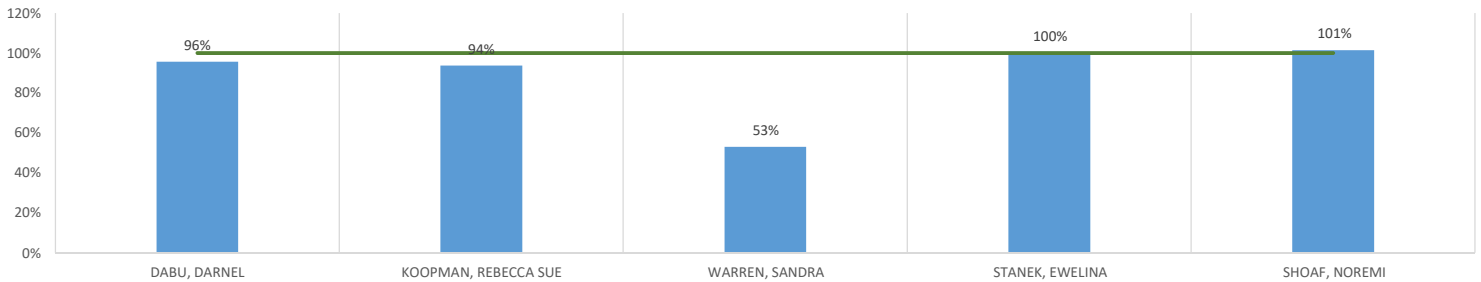
AS 08/31/2022 Based on Completed Appointments

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
DABU, DARNEL	17	20.5	214	136	350	214	121	335	96%	16.3
KOOPMAN, REBECCA SUE	14	10.0	86	58	144	79	56	135	94%	13.5
WARREN, SANDRA	17	1.0	10	7	17	4	5	9	53%	9.0
STANEK, EWELINA	1	0.5	0	1	1	0	1	1	100%	2.0
SHOAF, NOREMI	15	4.5	45	24	69	48	22	70	101%	15.6
ADULT CARE TOTALS		36.5	356	225	581	345	205	550	95%	

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

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

GRAND TOTAL		36.5	356	225	581	345	205	550	95%	
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ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
ALFONSO PUENTES, RAMIRO	17	21.0	219	133.2	352.2	211	113	324	92%	15.4
PIERRE LOUIS, JOANN	15	16.0	156.4	81.6	238	169	62	231	97%	14.4
PHILISTIN, KETELY	15	0.5	8	0	8	9	0	9	113%	18.0
ADULT CARE TOTALS		37.5	383	215	598	389	175	564	94%	

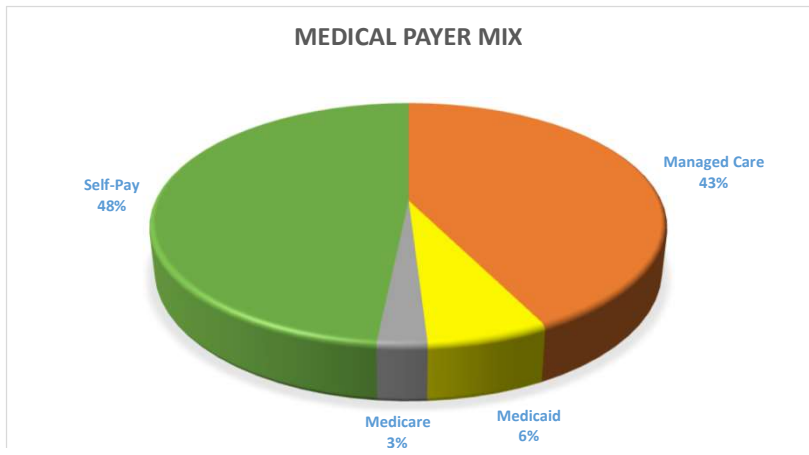
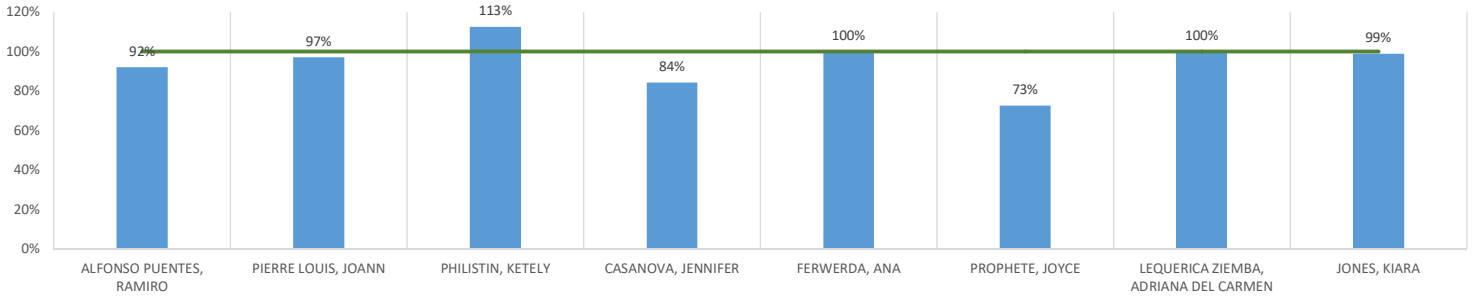
WOMEN'S HEALTH CARE										
CASANOVA, JENNIFER	15	21	167.4	92.6	260	150	69	219	84%	10.4
FERWERDA, ANA	17	0.5	2	0	2	2	0	2	100%	4.0
PROPHETE, JOYCE	8 ** First 2 weeks / 17	21.5	178.6	109.4	288	141	68	209	73%	9.7
WOMEN'S HEALTH CARE TOTALS		43	348	202	550	293	137	430	78%	

**Avg New Provider

BEHAVIORAL HEALTH										
LEQUERICA ZIEMBA, ADRIANA DEL	6	0.5	0	1	1	1	0	1	100%	2.0
JONES, KIARA	10	19	117.6	70.4	188	108	78	186	99%	9.8
BEHAVIORAL HEALTH TOTALS		19.5	118	71	189	109	78	187	99%	

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

GRAND TOTAL		100.0	849	488	1,337	791	390	1,181	88%	
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ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
PEREZ, DANIEL JESUS	17	3.5	40	20	60	45	17	62	103%	17.7
JEAN-JACQUES, FERNIQUE	15	23.5	219	130	349	250	105	355	102%	15.1
NAVARRO, ELSY	15	14.5	139	76	215	143	60	203	94%	14.0
ST VIL, CARLINE	15	3.0	27	18	45	29	17	46	102%	15.3
STANEK, EWELINA	8 ** First 2 weeks /15	2.5	10	10	19	6	5	11	57%	4.4
LANGLEY, TAMARA	8 ** First 2 weeks /15	4.5	27	13	40	17	8	25	63%	5.6
ADULT CARE TOTALS		51.5	462	266	728	490	212	702	96%	

PEDIATRIC CARE										
DESSALINES, DUCLOS	17	17.5	179	113	292	222	110	332	114%	19.0
CHIBAR, CHARMAINE	17	0.5	10	0	10	9	0	9	88%	18.0
LAZARO RIVERA, NANCY	17	17	179	106	285	233	115	348	122%	20.5
NORMIL-SMITH, SHERLOUNE	17	17	169	113	282	217	119	336	119%	19.8
PEDIATRIC CARE TOTALS		52	538	332	870	681	344	1,025	118%	

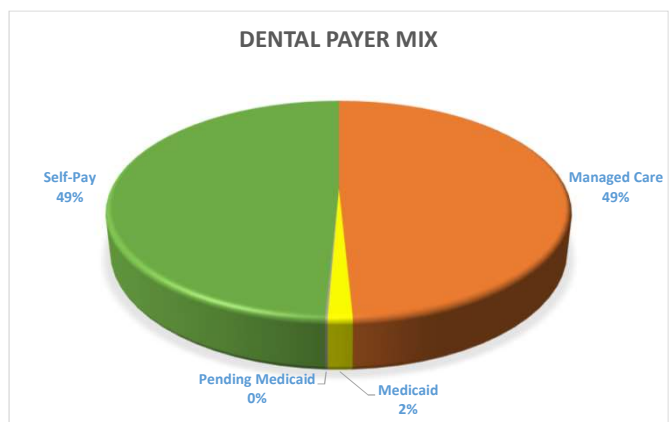
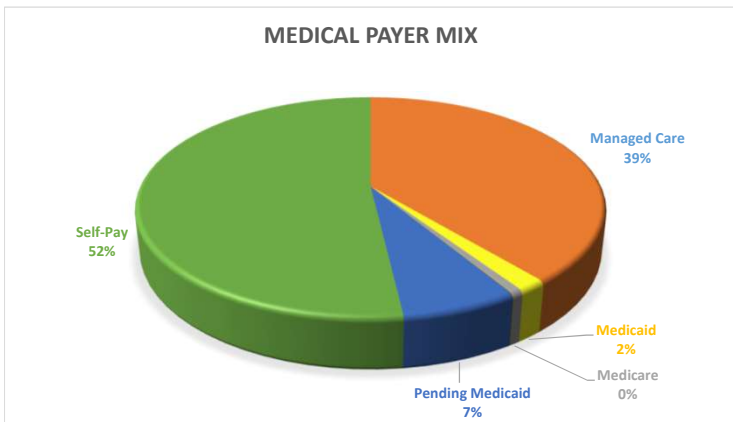
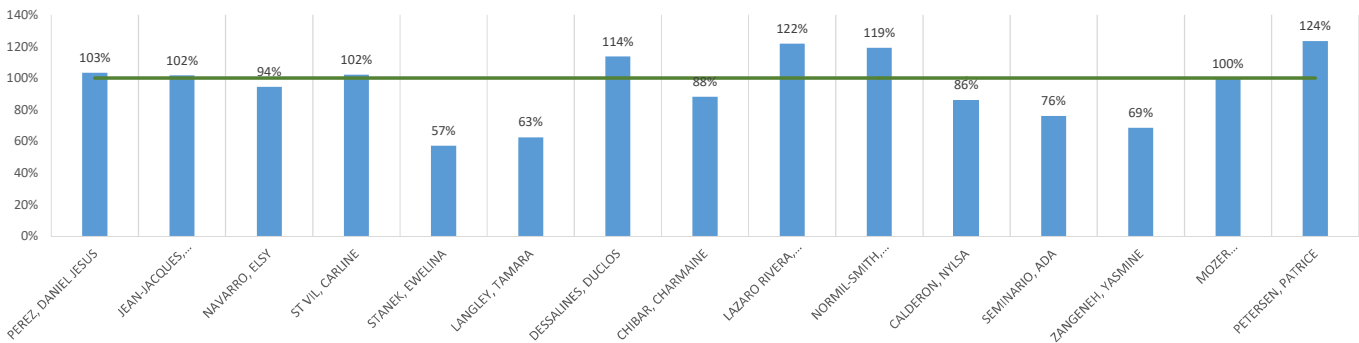
BEHAVIORAL HEALTH										
CALDERON, NYLSA	10	20	120	80	200	63	109	172	86%	8.6
BEHAVIORAL HEALTH TOTALS		20	120	80	200	63	109	172	86%	

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

DENTAL										
SEMINARIO, ADA	12 First 2 week s / 16	22	194	119	313	159	79	238	76%	10.8
ZANGENEH, YASMINE	12 First 2 week s / 16	20.5	182	117	299	131	74	205	69%	10.0
DENTAL TOTALS		42.5	376	236	612	290	153	443	72%	

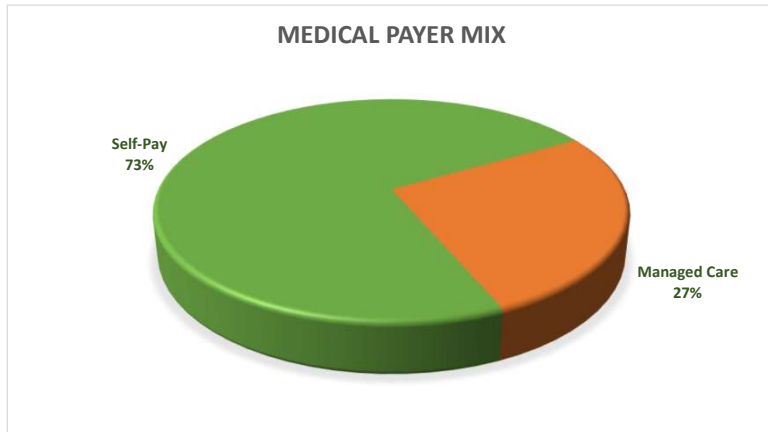
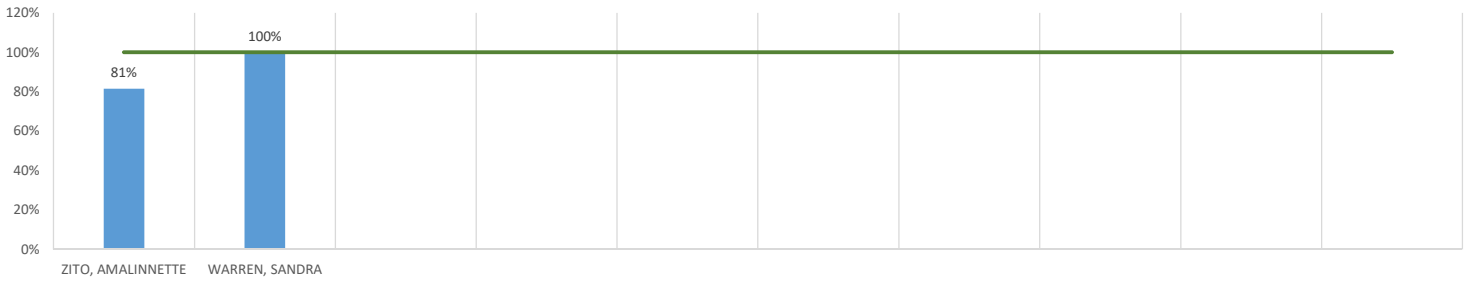
DENTAL HYGIENE										
MOZER NASCIMENTO, ARIANNE	8	21.5	104	66	170	95	74	169	100%	7.9
PETERSEN, PATRICE	16	4.0	48	19	67	26	57	83	124%	20.8
DENTAL HYGIENE TOTALS		25.5	152	85	237	121	131	252	106%	

GRAND TOTAL										
		191.5	1,649	999	2,647	1,645	949	2,594	98%	



AS 08/31/2022 Based on Completed Appointments

ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
ZITO, AMALINNETTE	17	1.5	27	0	27	22	0	22	81%	14.7
WARREN, SANDRA	17	0.5	4	0	4	4	0	4	100%	8.0
ADULT CARE TOTALS		2	31	0	31	26	0	26	84%	
BEHAVIORAL HEALTH										
BEHAVIORAL HEALTH TOTALS		0	0	0	0	0	0	0		
SUBSTANCE ABUSE DISORDER										
SUBSTANCE ABUSE CARE TOTALS		0	0	0	0	0	0	0		
GRAND TOTAL		2	31	0	31	26	0	26	84%	



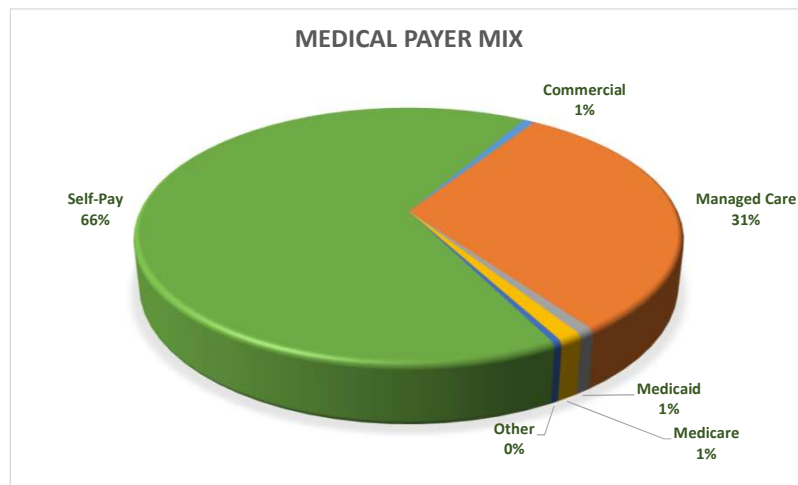
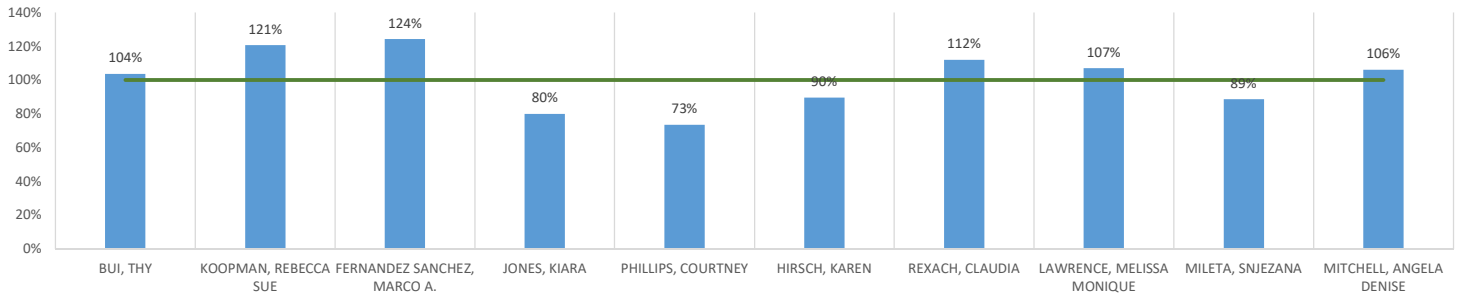


ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
BUI, THY	17	23.0	239	147	386	260	140	400	104%	17.4
KOOPMAN, REBECCA SUE	15	7.0	71	36	107	89	40	129	121%	18.4
FERNANDEZ SANCHEZ, MARCO A.	15	18.0	165	100	265	215	114	329	124%	18.3
ADULT CARE TOTALS		48.0	476	282	758	564	294	858	113%	

BEHAVIORAL HEALTH										
JONES, KIARA	10	0.5	5	0	5	4		4	80%	8.0
BEHAVIORAL HEALTH TOTALS		0.5	5	0	5	4	0	4	80%	

SUBSTANCE ABUSE DISORDER										
PHILLIPS, COURTNEY	7	16.0	74	46	120	55	33	88	73%	5.5
HIRSCH, KAREN	6	16.0	56	36	92	47	35	82	90%	5.1
REXACH, CLAUDIA	25	3.0	129	82	211	162	74	236	112%	78.7
LAWRENCE, MELISSA MONIQUE	10	19.0	118	70	188	122	79	201	107%	10.6
MILETA, SNJEZANA	10	23.0	142	85	227	116	85	201	89%	8.7
MITCHELL, ANGELA DENISE	10	18.0	113	68	181	121	71	192	106%	10.7
SUBSTANCE ABUSE CARE TOTALS		95.0	631	388	1,018	623	377	1,000	98%	

GRAND TOTAL		143.5	1,111	670	1,782	1,191	671	1,862	105%	
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WEST PALM BEACH PRODUCTIVITY REPORT AUG 2022

AS 08/31/2022 Based on Completed Appointments



ADULT CARE										
Provider	Daily Target	Days Worked	Target for the Month			Total for the Month Seen			% Monthly Target Achieved	Daily Average
			AM	PM	Total	AM	PM	Total		
FLOREZ, GLORIA MATILDE	16	22.0	216	134	350	201	117	318	91%	14.5
DABU, DARNEL	17	0.5	9	0	9	6	0	6	67%	12.0
PHILISTIN, KETELY	15	12.5	113	70	183	102	56	158	86%	12.6
FERNANDEZ SANCHEZ, MARCO A.	15	4.5	45	24	69	40	23	63	91%	14.0
LANGLEY, TAMARA	13	9.0	73	48	121	45	29	74	61%	8.2
WARREN, SANDRA	17	0.5	9	0	9	6	0	6	67%	12.0
WILKINSON, SARAH	10	0.5	5	0	5	7	0	7	140%	14.0
ADULT CARE TOTALS		49.5	470	276	746	407	225	632	85%	

PEDIATRIC CARE										
CLARKE-AARON, NOELLA	17	21.5	220	140	360	241	146	387	107%	18.0
CHIBAR, CHARMAINE	17	1	10	7	17	12	0	12	71%	12.0
MARZOUCIA, KISHA F.	17	15.5	159	99	258	177	95	272	110%	17.5
PEDIATRIC CARE TOTALS		38	389	246	635	430	241	671	106%	

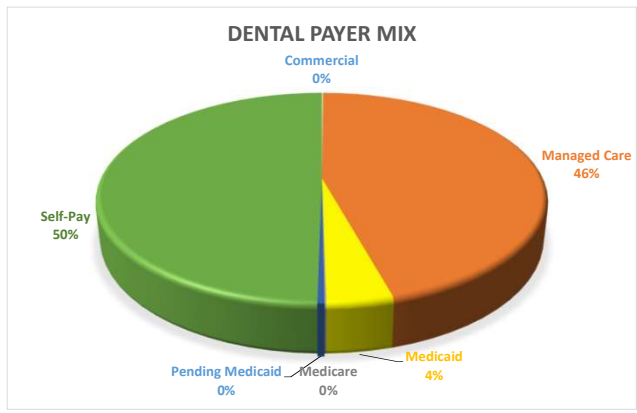
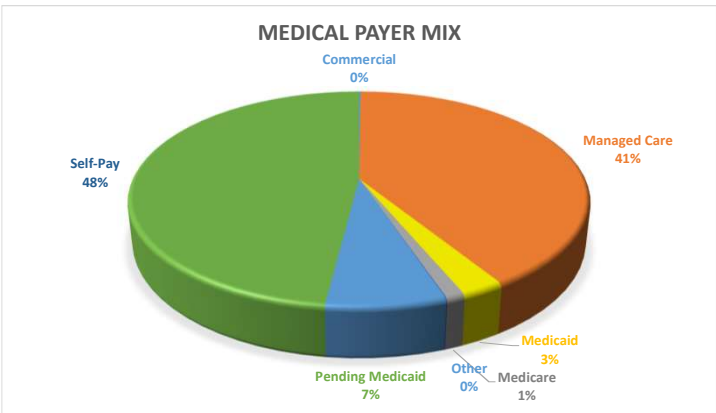
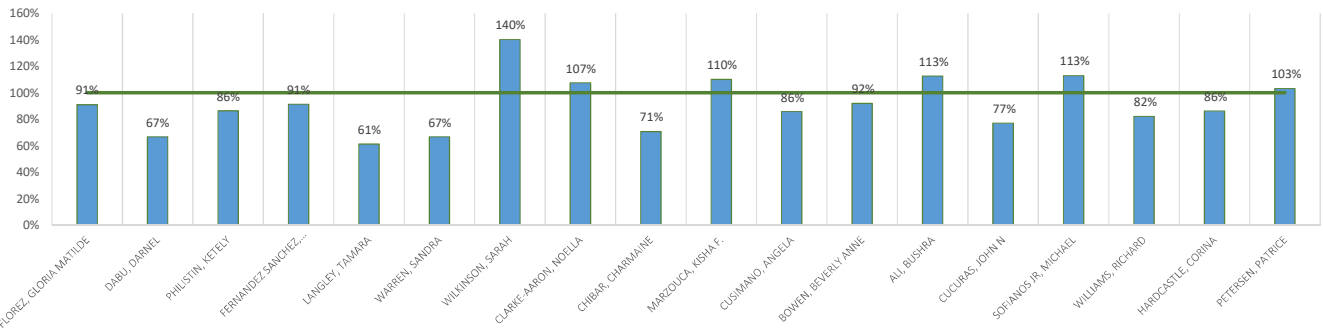
BEHAVIORAL HEALTH										
CUSIMANO, ANGELA	12	21.0	155	98	253	105	112	217	86%	10.3
BEHAVIORAL HEALTH TOTALS		21	155	98	253	105	112	217	86%	

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

DENTAL										
BOWEN, BEVERLY ANNE	12 First 2 week s / 16	17.0	158	94	252	144	87	231	92%	13.6
ALI, BUSHRA	8 ** First weeks	1.0	5	3	8	5	4	9	113%	9.0
CUCURAS, JOHN N	16	5.5	58	32	90	58	11	69	77%	12.5
SOFIANOS JR, MICHAEL	12 First 2 week s / 16	12.5	100	62	161	132	50	182	113%	14.6
WILLIAMS, RICHARD	12 First 2 week s / 16	17.5	155	98	253	133	75	208	82%	11.9
DENTAL TOTALS		53.5	475	289	764	472	227	699	92%	

DENTAL HYGIENE										
HARDCASTLE, CORINA	8	13.0	61	40	101	52	35	87	86%	6.7
PETERSEN, PATRICE	8 / 16 MDI	11.0	96	54	150	67	88	155	103%	14.1
DENTAL HYGIENE TOTALS		24.0	157	95	251	119	123	242	96%	

GRAND TOTAL		186.0	1,646	1,003	2,650	1,533	928	2,461	93%	
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DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022

1. Description: Operations Reports – August 2022

2. Summary:

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

- Clinic Productivity, Payor Mix and Demographics

3. Substantive Analysis:

In August, the clinics had 11,440 visits which were 1,340 more than the month prior and 1,609 more than August of 2021. 40% of patients were adults in Primary Care, 15% in Pediatrics and 21% in Dental. The Mangonia Clinic had the highest volume with 1,852 visits, followed by Lantana with 1,810 visits.

Our payer mix for August reflects 55% uninsured, which is 2% lower than the previous month. 39% of patients were Managed Care and 4% Medicaid.

60% of patients were female. 51% of patients reported as White and 39% as Black. Of those patients, 56% reported as Hispanic. Our homeless population increased from the previous month to 20.5%. Agricultural workers remain consistent at 5.7%.

In August, the average English speaking was reported at 53%, 30% Spanish and 14% Creole. Patient population languages spoken vary between clinics.

- In our Lantana Clinic, Spanish was the prominent language at 44%
- The highest percentage of Creole-speaking patients were in the Lantana Clinic at 26%
- Jupiter, Boca and Mangonia have the lowest percentages of Creole-speaking
- The Boca clinic has the highest percentage of Portuguese-speaking patients at 15%
- 97% of the patients in Mangonia reported as English speaking

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:

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
September 28, 2022

N/A

Candice Abbott
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date Approved

6. Recommendation:

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

Approved for Legal sufficiency:



Bernabe Icaza
VP & General Counsel



Marisol Miranda
Director of Clinic Operations



Dr. Belma Andric
VP, CMO & Executive Director Clinical Services

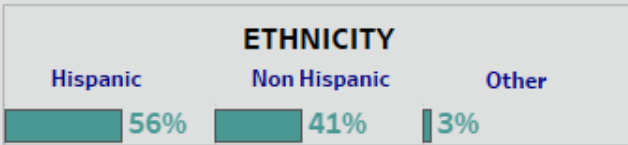
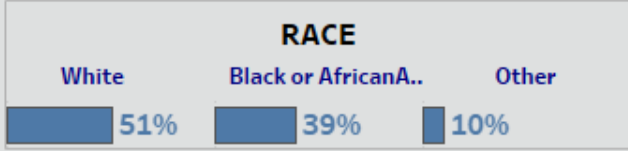
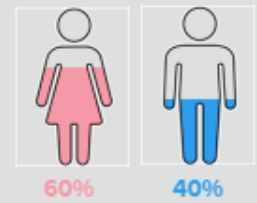
Unique Patients
7,833

Patient Visits
11,440

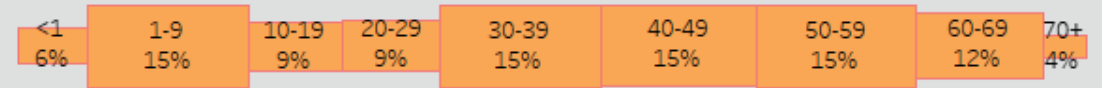
Monthly Productivity August 2022



DEMOGRAPHICS



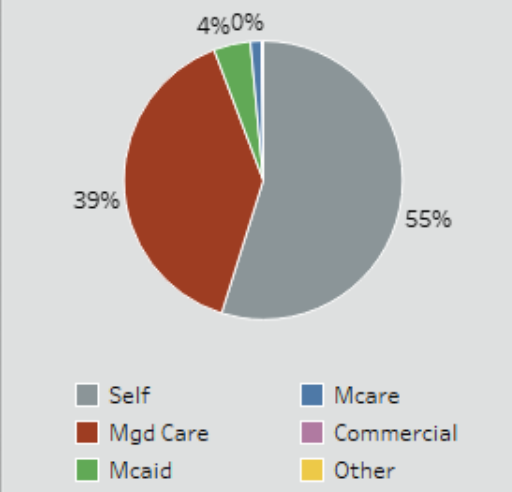
AGE GROUP



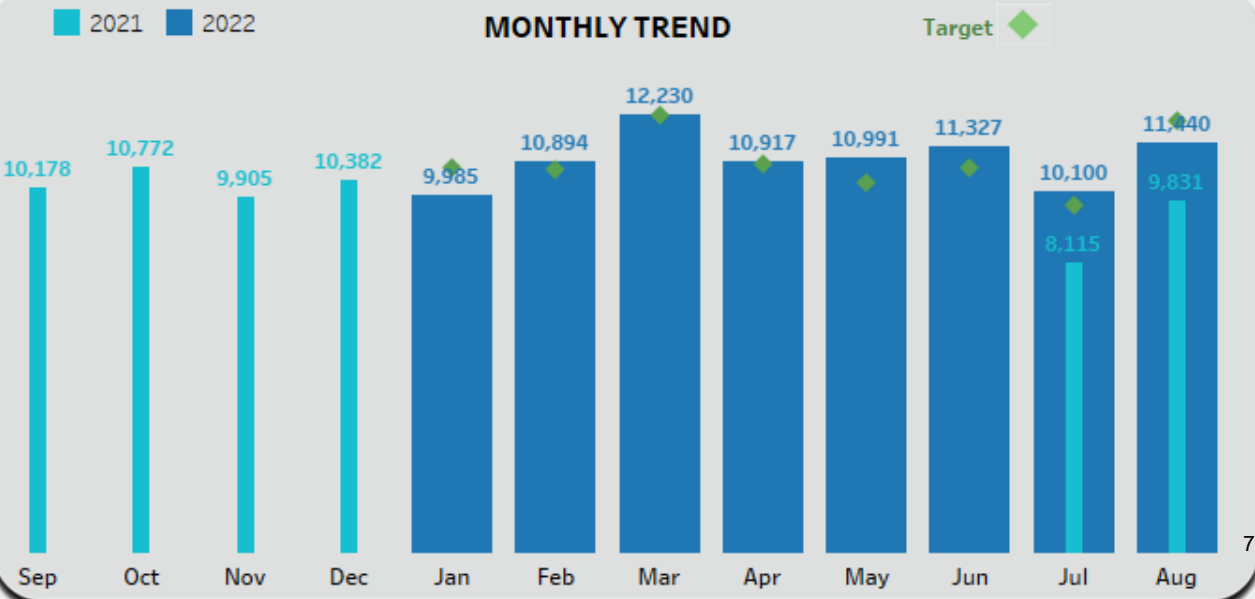
VISIT TYPE

	In Person	Tele Health	Total
Adult	99.6%	0.4%	4,597
Residency Program	99.8%	0.2%	500
OB/GYN	100.0%		463
Pediatric	100.0%		1,696
BH Integration	78.8%	21.2%	744
BH Addiction	86.7%	13.4%	898
Psychiatry	70.3%	29.7%	91
Dental	100.0%		2,451
Total	97.2%	2.8%	11,440

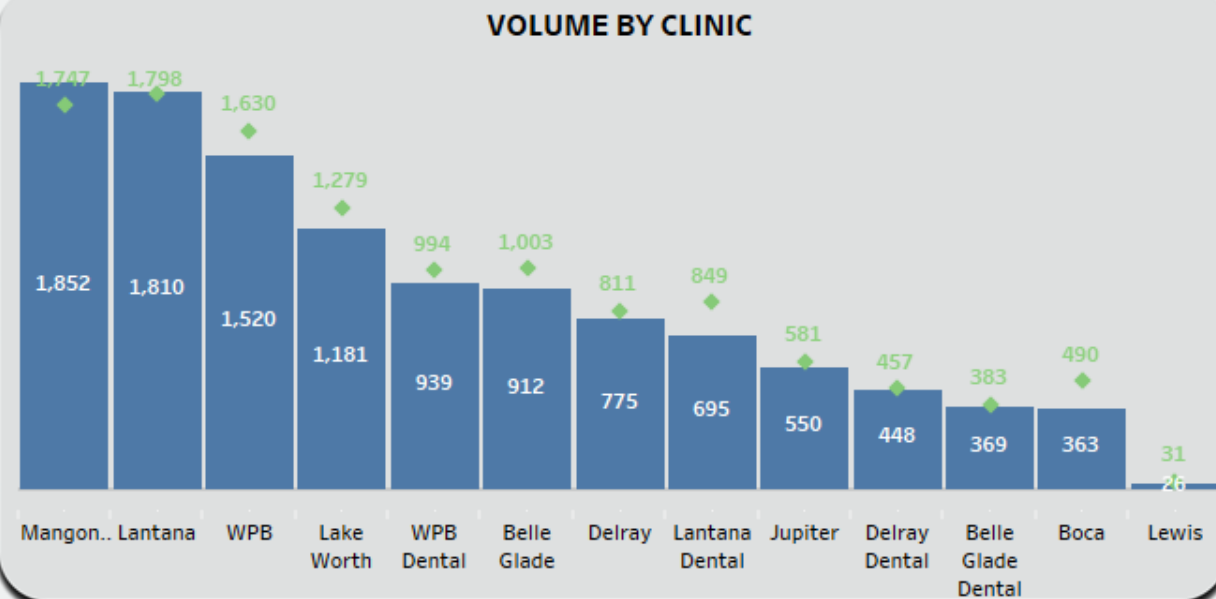
PAYOR MIX



MONTHLY TREND

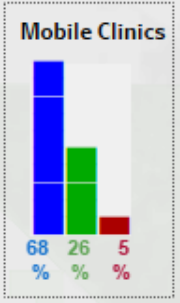


VOLUME BY CLINIC

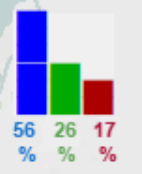


LANGUAGE BREAKDOWN BY CLINIC

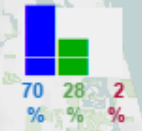
8/1/2021 - 8/31/2022



Belle Glade



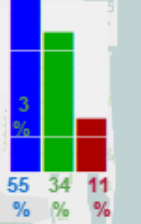
Jupiter



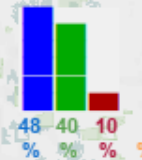
Mangonia/Lewis



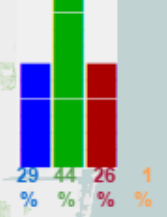
WPB



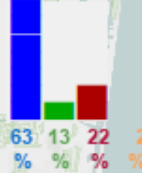
Lake Worth



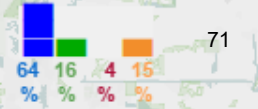
Lantana



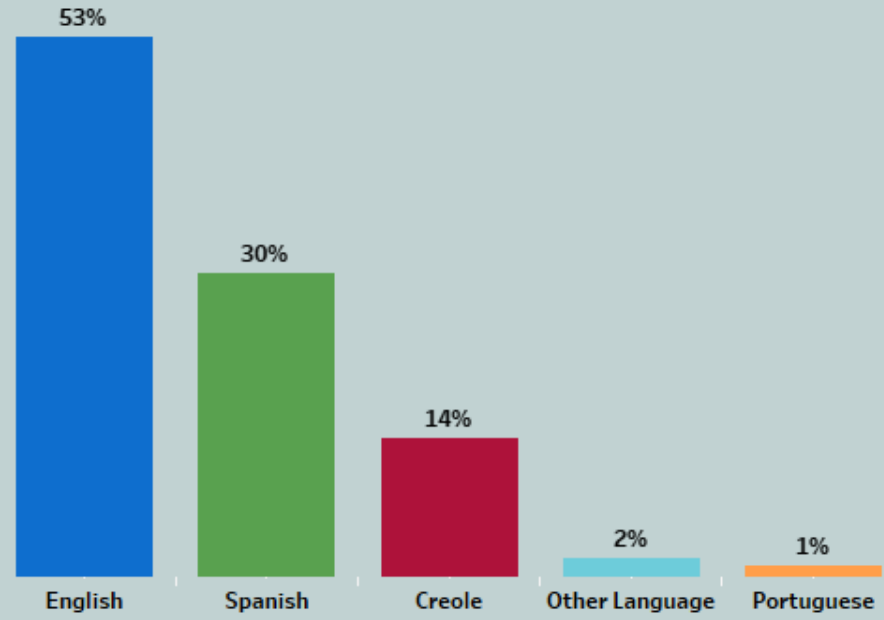
Delray



Boca



- English
- Spanish
- Creole
- Other Language
- Portuguese





C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County