

**West Volusia Hospital Authority
BOARD OF COMMISSIONERS and the CITIZENS ADVISORY
COMMITTEE (CAC) JOINT MEETING
April 20, 2017, 5:00 p.m.
DeLand City Hall Commission Chamber
120 S. Florida Avenue, DeLand, FL
AGENDA**

1. Call to Order
2. Opening Observance followed by a moment of silence
3. Approval of Proposed Agenda
4. Consent Agenda
 - A. Approval of Minutes - Regular Meeting March 16, 2017
5. Citizens Comments
6. Citizens Advisory Committee-Michael Ray, Chair
 - A. CAC Meeting Minutes March 7, 2017
7. Reporting Agenda
 - A. POMCO March 2017 Report - Written Submission
 1. POMCO UMR Acquisition Update 4/7/2017
 - B. FQHC Report - Laurie Asbury, Chief Executive Officer, Northeast Florida Health Services, Inc. (NEFHS) d/b/a Family Health Source (FHS) March 2017 Report
 1. Jan 2017 - March 2017 Pharmacy Self Audit
8. Discussion Items
 - A. Citizens Advisory Committee (CAC) Letter of Appreciation (attached)
 - B. CAC WVHA Funding Applications Received (list attached)
 - C. WVHA HealthCard Pre-Screening Process-informal proposals 2017-2018
 1. The House Next Door
 2. Rising Against All Odds
 - D. WVHA Primary Care Funding Applications 2017-2018
 1. Family Health Source (FHS)
 2. Global Healthcare Systems
 - E. Hill & Hollis Enterprises Website Design-Logo-Brochure-Member Handbook
 - F. Follow Up Items
 1. WVHA Eligibility Guideline Revisions (see POMCO April 20, 2017 Report Submittal and Legal Update-attached)
 2. Potential Specialty Care Network Exclusions (Health Care District of Palm Beach County Exclusions dated May 2012 attached) (see POMCO March Report Submittal attached)
 3. Impact of Increased Enrollment 2017
9. Finance Report
 - A. March Financials
10. Legal Update
11. Commissioner Comments
12. Adjournment

**WEST VOLUSIA HOSPITAL AUTHORITY
WVHA BOARD OF COMMISSIONERS REGULAR MEETING**

DeLand City Hall Commission Chambers

120 S. Florida Avenue, DeLand, FL

March 16, 2017

DeLand, Florida

5:00 pm

Those in Attendance:

Commissioner Ross N. Dickinson

Commissioner Andy Ferrari

Commissioner Judy Craig

Commissioner Barbara Girtman

Absent:

Commissioner Kathie D. Shepard

CAC Members Present:

Michael Ray

Voloria Manning

Others Present:

Attorney for the Authority: Ted Small, Law Office of Theodore W. Small, P.A.

Accountant for the Authority: Ron Cantlay, Dreggors, Rigsby & Teal, P.A. (DRT)

Administrative Support: Eileen Long, DRT

Call to order Regular Meeting

Chair Dickinson called the meeting to order. The meeting took place at DeLand City Hall in the Commission Chambers located at 120 S. Florida Avenue, DeLand, Florida, having been legally noticed in the Daytona Beach News-Journal, a newspaper of general circulation in Volusia County. Chair Dickinson opened the meeting with a moment of silence followed by The Pledge of Allegiance.

Approval of Proposed Agenda

Chair Dickinson requested a motion to approve the amended agenda as presented.

Motion 026 – 2017 Commissioner Ferrari motioned to approve the amended agenda as presented. Commissioner Girtman seconded the motion. The motion passed unanimously.

Consent Agenda

Approval of Minutes – Regular Meeting February 16, 2017

Motion 027 – 2017 Commissioner Girtman motioned to approve the consent agenda. Commissioner Craig seconded the motion. The motion passed unanimously.

Citizens Comments

There were none.

Citizens Advisory Committee (CAC), Michael Ray, Chair

Michael Ray addressed the Board updating them on the outcomes from the Tuesday, March 7, 2017 CAC/Applicant Workshop (draft copy of CAC Minutes, March 7, 2017 attached).

Reporting Agenda

POMCO February 2017 Report – Written Submission

POMCO Announcement – Being acquired by UMR – United Healthcare's Third Party Administrator Business

FQHC Report - Laurie Asbury, CEO

Northeast Florida Health Services, Inc. d/b/a Family Health Source (FHS) February 2017 Report

There was some Board discussion regarding the increase in HealthCard (HC) members that has now exceeded the anticipated HC numbers that the budget was based upon.

Mr. Cantlay explained that DRT is monitoring the budget and a budget amendment was not recommended at this point in time.

Mr. Small addressed the Board in regards to POMCO being acquired by UMR, United Healthcare's Third Party Administrator Business. Mr. Small spoke with Mr. Shawn Jacobs, POMCO and was assured by Mr. Jacobs that he did not anticipate any staffing or service changes. Typically, these transactions do not translate into decisions until after they are finally approved by the regulators, and then cost savings becomes the issue of the day. Mr. Small has asked Mr. Jacobs to send to him communications, announcements or materials that can reassure the WVHA contractually that United Healthcare is willing to honor the obligations under the contract.

Ms. Laurie Asbury, CEO, FHS addressed the Board and introduced the new Board Chair for Northeast Florida Health Systems (NEFHS), Ms. Carmen Rivera-Spelorzi. Ms. Rivera-Spelorzi has experience as a public service sector worker for over 25 years, she is also a patient of FHS, which is a Health Resources and Services Administration (HRSA) requirement, and she is currently working as the Town Clerk for the City of Pierson.

Commissioner Girtman had requested an update from Ms. Livia Gifford, COO, FHS during last month's Board meeting in regards to an increase in specialty care provider referrals. Ms. Gifford was going to bring back clarification during this evening's meeting.

Ms. Long read from page 2 of 7 of the WVHA Meeting Minutes of February 16, 2017 (attached) sharing that discussion with Ms. Asbury, who was absent during the February 16, 2017 WVHA Board Meeting.

Ms. Asbury confirmed that FHS now has a new software for their electronic health records (EHR), the Athena System. This system allows FHS to go from a manual system to a more electronic system/real time system. Therefore, their ability to capture data is more accurate.

Mr. Small wanted the Board to be aware that when the former TPA, HS1 was the contracted TPA, the Board did request of HS1 a report or an example of all of the specialty care

services that would be reimbursable, and which would not be reimbursable. However, the prior Board did not feel that it had the knowledge and competence to be able to select some treatments over others.

Ms. Long recalled HS1 captured this from another special taxing district in South Florida and that special taxing district had imposed limitations within their specialty care network.

Chair Dickinson asked Ms. Long if she could find that and bring it back before the Board and ask POMCO if they could find something comparable.

Contractual Utilization Reports to the WVHA Board of Commissioners

Waylan Niece, Development Director/Housing Director, The Neighborhood Center

Mary Gusky, Administrator, Good Samaritan Clinic

Jo Ann Weatherwax, Dental Program Director, Florida Department of Health

Mr. Waylan Niece, Ms. Mary Gusky, and Ms. Jo Ann Weatherwax addressed the WVHA Board updating their agencies current FYE 2017 contractual utilization. Mr. Niece mistakenly provided FYE 2016 utilization information and apologized stating that he would email to Ms. Long this evening The Neighborhood Center's current FYE 2017 contractual utilization so that Ms. Long could forward that to the WVHA Board. Ms. Gusky and Ms. Weatherwax both expressed their appreciation to the WVHA Board of Commissioners for their continued support.

Tentative Hearing Date Thursday, September 14, 2017 @ 5:15 p.m.

Motion 028 – 2017 Commissioner Ferrari motioned to approve the Tentative Hearing Date of Thursday, September 14, 2017 @ 5:15 p.m. Commissioner Craig seconded the motion. The motion passed unanimously.

Tentative Final Hearing Date Tuesday, September 26, 2017 @ 5:15 p.m.

Motion 029- 2017 Commissioner Ferrari motioned to approve the Tentative Final Hearing Date of Tuesday, September 26, 2017 @ 5:15 p.m. Commissioner Craig seconded the motion. The motion passed unanimously.

Site Visit Write Ups

Hispanic Health Initiative

Global Healthcare Services-Urgent Care

Community Legal Services of Mid-Florida

Ms. Laura Pichardo-Cruz, Attorney, Community Legal Services of Mid-Florida (CLSMF) addressed the Board regarding their site visit write up. She is seeking access to the MyPOMCO website so that they can obtain client identification and HealthCard verification.

There was Board consent that Ms. Long would perform another contractual compliance site visit of CLSMF in the month of June.

Motion 030 – 2017 Commissioner Ferrari motioned for Ms. Long to perform a follow up site visit in June of CLSMF's contractual compliance. Commissioner Girtman seconded the motion. The motion passed unanimously.

Hill & Hollis Marketing Quarterly Update

Mr. Will Hollis, Hill & Hollis (H&H) provided the WVHA Board with their marketing quarterly update (attached).

There was Board consent that they preferred the original WVHA logo and wanted to remove "Caring for Life", adding a two line space inserting the new WVHA mission statement, "Inspired by Life, Driven by Hope."

Motion 031 – 2017 Commissioner Ferrari motioned to keep the current WVHA logo, use a bolder color of blue and replace "Caring for Life" with "Inspired by Hope, Driven by Life." Commissioner Girtman seconded the motion. The motion passed unanimously.

There was further discussion regarding the Facebook (FB) design presented by H&H and Board consent to approve.

Motion 032 – 2017 Commissioner Ferrari motioned to approve the FB design as presented by H&H. Commissioner Girtman seconded the motion. The motion passed unanimously.

Proposed Changes to Eligibility Guidelines (EG)-POMCO Submission

There was Board discussion and the funded community was encouraged to submit any recommendations that they might have in regards to the POMCO proposed changes to the WVHA Eligibility Guidelines. The deadline for any submittals is Tuesday, April 11, 2017 by noon.

Mr. Small added that he and DRT would submit any recommendations that they might have in regards to the POMCO proposed changes to the WVHA Eligibility Guidelines. Further, he shared that Commissioner Shepard suggested adding to the WVHA HealthCard (HC) Application the question, "How did you hear about the WVHA HC Program", and possibly list multiple choice answers to include the choice of "other", allowing the applicants to write in an answer.

WVHA HealthCard adding Quest Diagnostic-Laboratory Services, Florida Hospital DeLand and Florida Hospital Fish Memorial

There was Board discussion and consent that POMCO is authorized to create a new template for the WVHA HC, adding Quest Diagnostics, Florida Hospital DeLand and Florida Hospital Fish Memorial. Rather than POMCO pursuing a mass mail out reissuing the new HC to the entire HC population, but to simply issue the new HC as applicants renew or are approved. The WVHA would assume the cost of creating the new template, but did not want to pursue a mass mail out.

Motion 033 – 2017 Commissioner Girtman motioned to authorize POMCO to create a new HC template adding Quest Diagnostics, Florida Hospital DeLand and Florida Hospital Fish Memorial. The WVHA will absorb the cost of the new template and POMCO should issue

the new template with renewal applicants and new applicants, and not pursue a mass mail out. Commissioner Ferrari seconded the motion. The motion passed unanimously.

WVHA – DRT entering into a Business Associates Agreement

Mr. Small referenced his Legal Update (attached) that covered this topic.

Motion 034 – 2017 Commissioner Craig motioned that the WVHA request that DRT enter into a standard business associates agreement with the WVHA funded agencies prior to the contractual site visits. Commissioner Ferrari seconded the motion. The motion passed unanimously.

POMCO Appeal for denied HealthCard Application (see POMCO February 2017 Report)

There was much discussion regarding the mathematical calculation of the applicant's income. If the Board takes no action then the denial that POMCO issued stands. The Board took no action, therefore the denial stands.

Funding Applications for WVHA Board Member Review-removed from CAC funding review process

Healthy Communities Outreach Services

The House Next Door HealthCard Prescreening Services

Rising Against All Odds HealthCard Prescreening Services

Mr. Small explained that this was covered in his Legal Update (attached) and it was his recommendation that the three agencies listed should be pulled from the CAC review process to be reviewed directly by the Board, as these contracts are effectively administrative services pertaining to enrollment.

Motion 035 – 2017 Commissioner Girtman motioned to remove from the CAC review process Healthy Communities Outreach Services, The House Next Door (THND) HealthCard Prescreening Services and Rising Against All Odds (RAAO) HealthCard Prescreening Services, instead they will be reviewed directly by the WVHA Board of Commissioners. Commissioner Craig seconded the motion. The motion passed unanimously.

Follow Up Items

Impact of Increased Enrollment 2017

Mr. Cantlay reviewed the projections if enrollment continues to increase that could potentially impact the WVHA 2016-2017 budget. This will continue to remain on the WVHA Meeting Agendas and followed closely.

POMCO Member Demographics-Data Trends

These data trends and member demographics were provided to the WVHA Board of Commissioners upon Commissioner Girtman's request during last month's WVHA Board meeting.

There was further discussion regarding HC members who receive inpatient or outpatient hospitals services who have received bills from specialists that are not contracted with POMCO and/or referrals were not obtained and requested clarification as to how this could occur.

There was discussion between Eric Ostarly, CFO, Florida Hospital Fish Memorial and Ms. Laurie Asbury, CEO, FHS explaining different scenarios where this could occur. The Board felt that there should be better collaboration between Florida Hospital DeLand, Florida Hospital Fish Memorial and FHS.

Mr. Small advised the Board that he has had an extended conversation with FHS' Legal Counsel and there are a lot of issues being percolated that he believes that it would be helpful if FHS and the hospitals got together to identify those gaps and come up with a collaborative recommendation as to how it might be fixed.

The Board indicated that they would like the hospitals and FHS to bring back to the Board their collaborative recommendations as to how these gaps might be addressed and fixed. Further, to advise the WVHA Board if additional resources are needed in order to resolve these gaps.

Financial Report

Mr. Ron Cantlay, DRT reviewed for the Board the February financial statements (See attached).

Motion 036 - 2017 Commissioner Girtman motioned to pay bills totaling \$2,204,607.42 (See attached). Commissioner Ferrari seconded the motion. The motion passed unanimously.

Legal Update

Mr. Theodore Small submitted his legal update memorandum dated March 7, 2017 (See attached).

Commissioner Comments

There being no further business to come before the Board, the meeting was adjourned.

Adjournment

Ross Dickinson, Chair

**CITIZENS ADVISORY COMMITTEE MEETING
WEST VOLUSIA HOSPITAL AUTHORITY
DELAND CITY HALL COMMISSION CHAMBER
120 S. FLORIDA AVE., DELAND FL
MARCH 7, 2017
5:15PM
MINUTES**

CAC Members/Attendance:

Michael Ray
Jan Kaumeier
Voloria Manning
Sarah Prado
Dolores Guzman
Krystal Brown
Sandy Adams

CAC Members/Absent:

Alicia Monroe (Excused)

Others Present:

Commissioners Ross Dickinson and Andy Ferrari
Eileen Long, Dreggors, Rigsby & Teal, P.A.

Call to Order

CAC Chair Michael Ray opened the meeting with a moment of silence followed by The Pledge of Allegiance.

Approval of Agenda

Voloria Manning motioned to approve the agenda. Jan Kaumeier seconded the motion. The motion passed unanimously.

Approval of CAC Minutes – February 7, 2017

Voloria Manning motioned to approve the CAC meeting minutes from February 7, 2017. Sarah Prado seconded the motion. The motion passed unanimously.

Review WVHA Meeting Minutes February 16, 2017 (Draft)

Ms. Long explained that the Board minutes were provided to keep the CAC members up to date with the WVHA Board activities.

New CAC member Sandy Adams appointed by Commissioner Andy Ferrari

Chair Michael Ray introduced new Committee member, Sandy Adams to the remainder of the CAC.

Citizens Comments

There were none.

CAC Review/Overview of Funding Applications

CAC Ranking Sheet

WVHA Funding Applications Non-Compliant Worksheet

Funding Application Calendar 2017-2018

Steps in Funding Review Process 2017

Tentatively Scheduled Meetings 2017

Chair Ray reviewed the funding process, the current ranking, and the timeline for the CAC review process. Mr. Ray strongly encouraged all of the applicants to submit their WVHA applications for funding well in advance of the April 7, 2017 noon deadline.

Commissioner Ferrari and Dickinson both expressed that they were present during tonight's CAC meeting to provide any assistance that might be needed.

Ms. Krystal Brown arrived to the meeting at 5:33 p.m.

Chair Ray stressed to the applicants that the more articulate that they can be in their funding applications and how clearly they make a connection to direct medical care or direct access to medical care is very important. Mr. Ray explained that the WVHA would not be able to fund access to food, or access to housing, etc.

Commissioner Dickinson pointed out two things that he felt were important for the applicants to consider: 1) show a clear line that provides direct medical care or access to medical care, and 2) in the application for funds, do not request more dollars than you actually can expend.

There was consensus from the entire CAC Committee that all applicants should strive to get their application for funding delivered well before the deadline and be sure to provide all of the copies, one original plus 17 copies. Further, the request for funding needs to be very clear and to the point and the budget should not reflect more than a 10% request for administrative costs.

Chair Ray further emphasized that the WVHA is the payer of last resort to ensure that qualified indigent WVHA citizens have access to healthcare, in order to avoid an emergency room (ER) visit or an acute episode, or something catastrophic, in an attempt to save money. If the applicants can tie the services that they are going to provide to outcomes; how their agency is going to save WVHA dollars by providing those services, this would help the CAC to understand their programs and how it fits into the budget for the WVHA.

Review of Application

CAC Chair Michael Ray opens with a brief explanation of Application Process and review of Funding Application

Applicant Workshop-Question & Answer session between applicants and CAC Members

There was discussion between the CAC and the agency representatives present in helping the applicants understand the funding process and the purpose of the WVHA in providing access to medical care or direct medical care. There was additional discussion in regards to the funding application itself.

There was much discussion in regards to obtaining comparable rates of reimbursement for each applicant's fee-for-service from Medicaid, Medicare, private insurance, etc.

Commissioner Dickinson advised the agency representatives to seek out those comparable rates with Florida Medicaid, Medicare, private insurance, and partner with other WVHA funded agencies, etc.

Ms. Long believed that the agencies who underwent fee-for-service rates of reimbursement negotiations with Attorney Ted Small were to have taken the time between those negotiations and this new funding cycle to secure those comparable rates.

There was further discussion regarding the applicants obtaining comparable rates of reimbursement from Medicaid, Medicare and other insurance carriers.

Ms. Laurie Asbury, CEO, Northeast Florida Health Systems (NEFHS) volunteered to assist those agencies who were finding it difficult to obtain comparable rates of reimbursement with Medicaid, Medicare, private insurance, etc.

CAC Comments

The Committee, overall, reminded all potential WVHA funding applicants to turn in their one original funding application and 17 additional copies well in advance of the deadline.

Adjournment

There being no further business before the Committee, the meeting was adjourned.

Michael Ray, CAC Chair



POMCO

April 20, 2017

Submission Report for WVHA Board Members

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Enrollment Processing

Applications Received by Fiscal Year for the Period of 10/1/2016 to Present

Applications Received 10/01/2016 - Present

FiscalYr	Month Received	APPROVED	DENIED	PENDING	Grand Total	Approval Percentage
FY1617	201610	236	46	0	282	83.69%
	201611	204	46	0	250	81.60%
	201612	281	64	0	345	81.45%
	201701	335	54	0	389	86.12%
	201702	323	31	11	365	88.49%
	201703	260	12	46	318	81.76%
	201704				0	0.00%
	201705				0	0.00%
	201706				0	0.00%
	201707				0	0.00%
Grand Total		1639	253	57	1949	84.09%

Fiscal Year	Applications Processed	Average Approval Percentage
FY1516	2670	82.28%
FY1617	1949	84.09%
Based on Fiscal year		

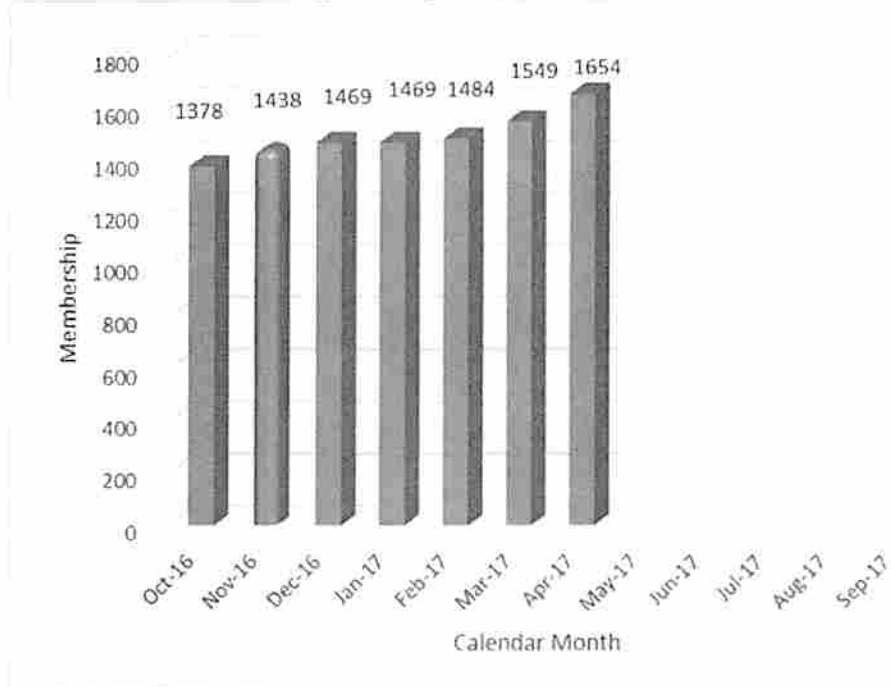
Applications Processed by Fiscal Year – Approval Percentage

Enrollment Applications – Denial Summary Report

Period	Approved		Denied		Pending		Total
	Apps	Pctg	Apps	Pctg	Apps	Pctg	
FY1617	1639	84.09%	253	12.98%	57	2.92%	1949
201610	236	83.69%	46	16.31%	0	0.00%	282
Active Eligible	236	100.00%		0.00%		0.00%	236
Declined - Member exceeds asset level		0.00%	3	100.00%		0.00%	3
Declined - Member Exceeds Income Level		0.00%	8	100.00%		0.00%	8
Declined - MEMBER HAS MEDICAID COVERAGE		0.00%	1	100.00%		0.00%	1
Declined - Not Elig for Plan		0.00%	15	100.00%		0.00%	15
Declined - REQUIRED DOCUMENTATION MISSING		0.00%	18	100.00%		0.00%	18
Terminated - Member has medicaid coverage		0.00%	1	0.00%		0.00%	1
201611	204	81.60%	46	18.40%	0	0.00%	250
Active Eligible	204	100.00%		0.00%		0.00%	204
Declined - Member Exceeds Income Level		0.00%	14	100.00%		0.00%	14
Declined - Not Elig for Plan		0.00%	8	100.00%		0.00%	8
Declined - Req'd Documentation Missing		0.00%	23	100.00%		0.00%	23
Declined - Member has other coverage		0.00%	1	100.00%		0.00%	1
201612	281	81.45%	64	18.55%	0	0.00%	345
Active Eligible	281	100.00%		0.00%		0.00%	281
Declined - ACA PREM COST <8% INCOME		0.00%	2	100.00%		0.00%	2
Declined - MEMBER EXCEEDS INCOME LEVEL		0.00%	9	100.00%		0.00%	9
Declined - MEMBER HAS MEDICAID COVERAGE		0.00%	1	100.00%		0.00%	1
Declined - Member Exceeds Asset Level		0.00%	2	100.00%		0.00%	2
Declined - Member has other coverage		0.00%	2	100.00%		0.00%	2
Declined - Not Elig for Plan		0.00%	12	100.00%		0.00%	12
Declined - Req'd Documentation Missing		0.00%	36	0.00%		0.00%	36
201701	335	86.12%	54	13.88%	0	0.00%	389
Active Eligible	335	324.00%		0.00%		0.00%	335
Declined - MEMBER EXCEEDS INCOME LEVEL		0.00%	17	100.00%		0.00%	17
Declined - ACA PREM COST <8% INCOME		0.00%	2	100.00%		0.00%	2
Declined - MEMBER HAS MEDICAID COVERAGE		0.00%	5	100.00%		0.00%	5
Declined - MEMBER HAS OTHER COVERAGE		0.00%	1	100.00%		0.00%	1
Declined - MEMBER OOS AREA		0.00%	1	100.00%		0.00%	1
Declined - Not Elig for Plan		0.00%	3	100.00%		0.00%	3
Declined - Req'd Documentation Missing		0.00%	25	100.00%		0.00%	25
Pending - Multiple Reasons		0.00%		100.00%		0.00%	0
201702	323	88.49%	31	8.49%	11	3.01%	365
Active Eligible	323	100.00%		0.00%		0.00%	323
Declined - Member Exceeds Asset Level		0.00%	1	100.00%		0.00%	1
Declined - Member Exceeds Income Level		0.00%	12	100.00%		0.00%	12
Declined - MEMBER HAS MEDICAID COVERAGE		0.00%	5	100.00%		0.00%	5
Declined - Not Elig for Plan		0.00%	2	100.00%		0.00%	2
Declined - Req'd Documentation Missing		0.00%	11	100.00%		0.00%	11
Pending - Multiple Reasons		0.00%		0.00%	11	100.00%	11
201703	260	81.76%	12	3.77%	46	14.47%	318
Active Eligible	260	100.00%		0.00%		0.00%	260
Active - Unknown		0.00%	1	100.00%		0.00%	1
Declined - Member Exceeds Income Level		0.00%	8	100.00%		0.00%	8
Declined - MEMBER HAS MEDICAID COVERAGE		0.00%	2	100.00%		0.00%	2
Declined - MEMBER HAS OTHER COVERAGE		0.00%	1	100.00%		0.00%	1
Declined - Req'd Documentation Missing		0.00%		100.00%		0.00%	0
Pending - Multiple Reasons		0.00%		0.00%	46	100.00%	46

Note that because patients can and do become eligible and/or terminate every day of the month, when reporting by month, the most current status only will be reflected on the monthly reports. If a member is approved but then is denied/termed in the same or subsequent month, the status of denied/termed will be reported and the approved status will be removed.

WVHA Health Card Program Eligibility – by Calendar Month – as of April 1, 2017

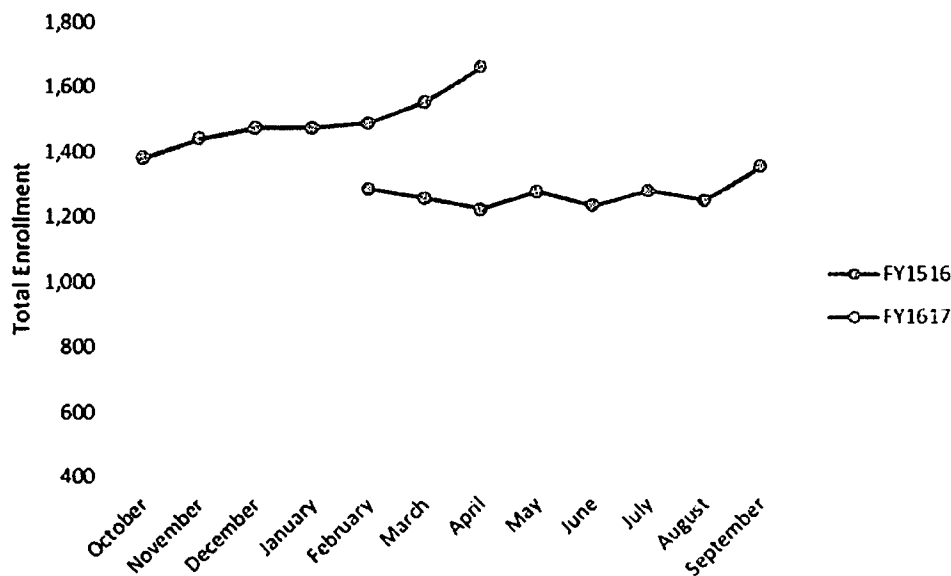


Eligibility reported above reflects eligibility as of the first of each month.

As of April 1, 2017, total program eligibility was 1,654 patients.

WVHA Enrollment by Fiscal Year – as of April 1, 2017

WVHA Enrollment By Fiscal Year	
Month of Fiscal Year	FY1617
October	1,378
November	1,438
December	1,469
January	1,469
February	1,484
March	1,549
April	1,654
May	
June	
July	
August	
September	
Grand Total	10,441



Enrollment Trend Update

Heath Card Application Submission & Approval Trends

Given the recent 3-month trend of significant increase in eligible Health Card members, POMCO has reviewed specifics on the trends as compared to the same period last year. Given the open enrollment period (November 1st through January 31st) to apply for individual health coverage, tax credits and subsidies under the Affordable Care Act (ACA), we expect to see an increase in applications during that period. However there are notable increases in the number of applications received relative to the 2017 ACA open enrollment period vs. 2016. The chart below illustrates the number of applications received during the months of January, February and March comparing 2016 vs. 2017.

We noticed that although the approval rates during those months remained relatively the same, the number of applications submitted in 2017 vs. 2016 have been significantly higher; notably as high as a 37% increase from the February 2016 application submissions vs. February 2017.

	2016 Approval	2017 Approval	2016 New Apps	2017 New Apps	2016 Avg. Daily Submission	2017 Avg. Daily Submission
January	85%	86%	335	389	Not available	15
February	88%	88%	266	365	9	17
March	80%	82%	293	318	11	16

Medical and Prescription Drug Claim Data

Pharmacy Claims by Fiscal Year by Service Month (Month Prescription Filled)

Month	FY1617				
	Drug Costs	Dispensing	Total Costs	Total	Avg
		Fee Less Copayments		Rx's Filled	Cost Per Rx
October	\$21,581.37	\$32,676.00	\$54,257.37	2,334	\$23.25
November	\$19,925.44	\$34,818.00	\$54,743.44	2,487	\$22.01
December	\$24,589.10	\$38,794.00	\$63,383.10	2,771	\$22.87
January	\$19,912.78	\$39,018.00	\$58,930.78	2,787	\$21.14
February	\$44,939.84	\$36,792.00	\$81,731.84	2,628	\$31.10
March					
April					
May					
June					
July					
August					
September					
Grand Total	\$130,948.53	\$182,098.00	\$313,046.53	13,007	\$24.07

Combined Medical Costs (as of Claims Payment through 3/31/2017)

Fiscal Year	Hospital	Lab	PCP	Specialty	Facility Physicians	Pharmacy	Total Costs	Member Months	Overall Per Member Per Month (PMPM)	Hospital PMPM	Lab PMPM	PCP PMPM	Specialty PMPM	Pharmacy PMPM
FY1617	\$2,894,815.60	\$166,254.89	\$242,372.80	\$1,756,278.47	\$127,220.90	\$373,016.16	\$5,559,958.82	8,972	\$619.70	\$322.65	\$18.53	\$27.01	\$195.75	\$41.58
October	\$436,938.88	\$22,404.35	\$59,210.80	\$242,154.19	\$25,870.70	\$59,969.63	\$846,548.55	1,378	\$614.33	\$317.08	\$16.26	\$42.97	\$175.73	\$43.52
November	\$296,882.47	\$28,933.91	\$44,819.95	\$246,468.41	\$29,728.18	\$54,257.37	\$701,090.29	1,438	\$487.55	\$206.46	\$20.12	\$31.17	\$171.40	\$37.73
December	\$540,201.66	\$12,404.58	\$33,630.75	\$210,398.02	\$16,425.65	\$54,743.44	\$867,804.10	1,469	\$590.74	\$367.73	\$8.44	\$22.89	\$143.23	\$37.27
January	\$465,786.02	\$18,547.79	\$36,006.75	\$280,856.84	\$6,621.01	\$63,383.10	\$871,201.51	1,484	\$587.06	\$313.87	\$12.50	\$24.26	\$189.26	\$42.71
February	\$441,337.13	\$37,520.22	\$15,499.75	\$344,625.79	\$15,506.77	\$58,930.78	\$913,420.44	1,549	\$589.68	\$284.92	\$24.22	\$10.01	\$222.48	\$38.04
March	\$713,669.44	\$46,444.04	\$53,204.80	\$431,775.22	\$33,068.59	\$81,731.84	\$1,359,893.93	1,654	\$822.18	\$431.48	\$28.08	\$32.17	\$261.05	\$49.41
Grand Total	\$2,894,815.60	\$166,254.89	\$242,372.80	\$1,756,278.47	\$127,220.90	\$373,016.16	\$5,559,958.82	8,972	\$619.70	\$322.65	\$18.53	\$27.01	\$195.75	\$41.58

Medical and pharmacy costs are reported on a paid basis

PCP Encounter Claims by Clinic by Month (as of Claims Payment through 3/31/2017)

Month	FY1617				Total
	NEFHS Deland	NEFHS Deltona	NEFHS Pierson	NEFHS Stone Street	
October	7	225	298	0	530
November	28	152	224	0	404
December	83	76	135	0	294
January	65	135	112	0	312
February	37	89	29	0	155
March	191	85	198	0	474
Grand Total	411	762	996	0	2,169

PCP encounter claims are reported on a paid basis

Notes:

This report includes three fund report cycles (instead of the usual two). For the period of 2/18/2017 through 3/31/2017:

- 1st run: 2/18/2017 through 3/6/2017
- 2nd run: 3/7/2017 through 3/16/2017
- 3rd run: 3/17/2017 through 3/31/2017



A UnitedHealthcare Company

April 7, 2017

Dear Valued Customer,

We are pleased to announce that UnitedHealthcare and POMCO have completed our agreement to integrate our third-party administration businesses. Together, we will continue to drive our shared focus on offering solutions to customers who prefer high-quality, affordable solutions to medical and workers compensation administration.

Over several decades, POMCO has built a strong presence in Central and Upstate New York. POMCO's market-based solutions combined with UnitedHealthcare's technological and health care support capabilities will help better serve businesses and consumers throughout the region. POMCO's current location in the City of Syracuse will serve as one of UnitedHealthcare's service hubs in the Northeast.

We are excited about the opportunities our partnership will bring to the market and will share more details with you as we begin to bring our two organizations together. If you have any questions regarding our new partnership, we encourage you to contact your POMCO account management team.

Thank you for being a valued partner. We look forward to working with you as we further our commitment to our members and customers.

Sincerely,

Don Napier
POMCO

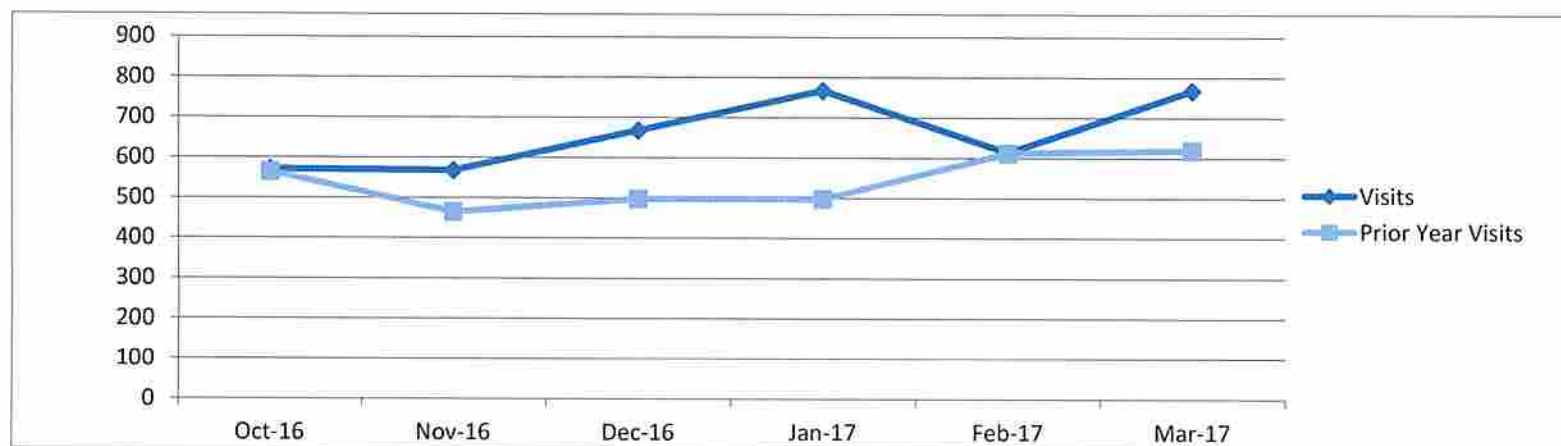
Jay Anliker
UMR President & CEO



Northeast Florida Health Services
March-17

Patient Visits

	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
Visits	570	567	667	766	613	766
Prior Year Visits	564	464	498	498	612	619

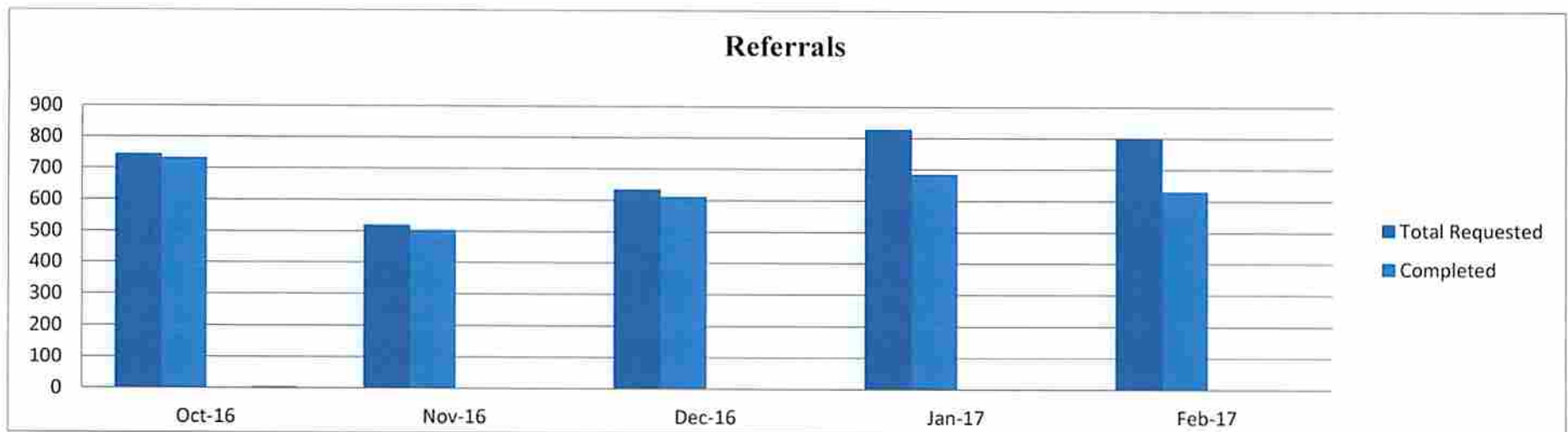


Patient Visits by Location

Location	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
Deland Medical	220	245	334	345	280	385
Deltona Medical	250	234	298	331	261	296
Pierson Medical	100	78	35	90	72	85
Total	570	567	667	766	613	766

Referrals

	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Feb-17
NEFHS Providers		228	273	551	207	218
Specialty Providers		290	359	274	428	580
Total		518	632	825	635	798
Outstanding NEFHS Providers	13	17	23	34	19	22
Outstanding Specialty Providers				108	74	148
Completed	730	501	609	683	542	628
Total Requested	743	518	632	825	635	798



* Speciality Provider referrals are referrals that NEHFS PCP has sent as a consult to another specialist as a consult

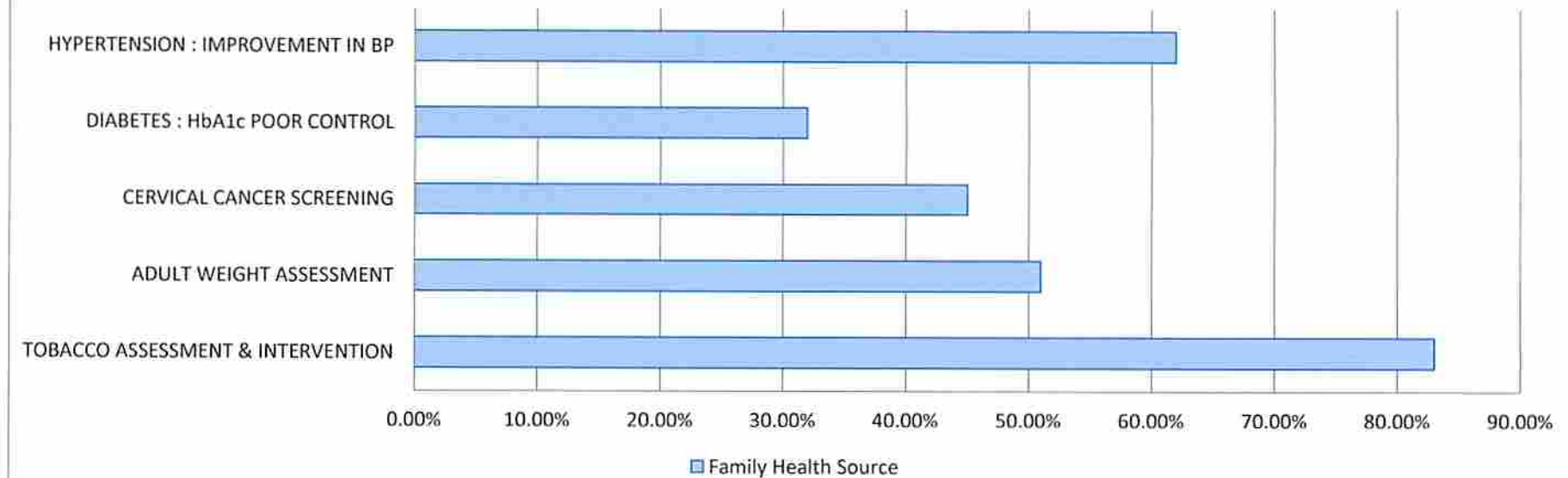
Appointment Times

Location	Provider	Appointments
Pierson	Kessack	Same Day
DeLand	Smith	Same Day
DeLand	Johnson	Same Day
Deltona	Rodriguez	Same Day
Deltona	Macalua	Same Day
Deltona	Mancini	Same Day
Pediatrics	Rojas-Sanchez	Same Day
Pediatrics	Desouza	Same Day

UDS Measures

Clinical Measure	Family Health
TOBACCO ASSESSMENT & INTERVENTION	83.00%
ADULT WEIGHT ASSESSMENT	51.00%
CERVICAL CANCER SCREENING	45.00%
DIABETES : HbA1c POOR CONTROL	32.00%
HYPERTENSION : IMPROVEMENT IN BP	62.00%

UDS Measurements



Staffing Metrics

	Jan-17	Feb-17
Total Active Employees	73	68
Turnover: Clinical Employees-MA's	2	5

FAMILY

Health  Source

WVHA Perscription Audit
January 2017 - March 2017

	<u>January 2017</u>	<u>February 2017</u>	<u>March 2017</u>	<u>Total</u>
Total Scripts	1,835	2,085	2,085	6,005
Script Sample	20	20	20	60
Specialist Scripts	3	1	4	8
Total Acute Scripts	7	9	6	22
Total Chronic Scripts	10	10	10	30
Total Rx Filled Incorrectly	0	0	0	0

* All 30 chronic scripts written and filled for 90 days or more.

Total Chronic Script in Lot
Scripts filled in error

0

Rx Fill Fee
Total Overage

\$15.00

\$0.00



West Volusia Hospital Authority

April 20, 2017

Ms. Janice Kaumeier
699 Winterberry Trail
DeLand, FL 32724

Re: Letter of Appreciation

Dear Ms. Kaumeier,

The WVHA Board of Commissioners would like to express their appreciation for the remarkable services rendered by you as an active member of the Citizens Advisory Committee (CAC).

Your dedication to the CAC and your input has been invaluable. Now that you have stepped down, we want to express our appreciation for all you have done in our behalf. Your efforts in volunteering with this committee impressed both the WVHA Board and your fellow CAC members.

All the best to you and your family in the coming years.

Regards,

Ross Dickinson, WVHA Chair

2017-2018 Funding Applications received by date and time

Agency name-CAC Review	Date		Amount		Difference	FYE 2016	YTD Actual	Difference
	Received	Time	Requested	Last Year	+/-	Budget	2016	+/-
Community Legal Services of Mid-Florida (CLSMF)	3/23/2017	4:37 PM	76,931.00	80,000.00	-3,069.00	0.00	0.00	0.00
Florida Department of Health Dental Services	3/27/2017	11:40 AM	300,000.00	300,000.00	0.00	145,000.00	7,446.00	137,554.00
SMA Baker Act Services	4/5/2017	4:55 PM	425,000.00	425,000.00	0.00	400,000.00	400,000.00	0.00
SMA Residential Treatment Beds	4/5/2017	4:55 PM	650,000.00	450,000.00	200,000.00	450,000.00	450,000.00	0.00
SMA Homeless-Psychiatric Services	4/5/2017	4:55 PM	110,257.00	78,336.00	31,921.00	78,336.00	78,336.00	0.00
SMA ARNP @ THND	4/5/2017	4:55 PM	7,000.00	7,000.00	0.00	7,000.00	3,856.00	3,144.00
The House Next Door Therapeutic Services	4/6/2017	1:45 PM	181,975.00	181,975.00	0.00	181,975.00	76,727.00	105,248.00
The Neighborhood Center Outreach Services	4/6/2017	2:55 PM	100,000.00	70,000.00	30,000.00	50,000.00	50,000.00	0.00
Healthy Start Coalition of Flagler & Volusia (HSCFV) Family Servcies	4/7/2017	8:11 AM	68,862.00	68,900.00	-38.00	68,918.00	40,076.00	28,842.00
HSCFV WIS/NOS Services	4/7/2017	8:11 AM	73,500.00	73,500.00	0.00	73,566.00	58,290.00	15,276.00
Global Healthcare Systems Urgent Care	4/7/2017	9:34 AM	200,000.00	324,000.00	-124,000.00	313,600.00	18,866.00	294,734.00
Hispanic Health Initiative Outreach-Educational Services	4/7/2017	10:20 AM	191,000.00	100,000.00	91,000.00	0.00	0.00	0.00
Rising Against All Odds HIV/AIDS Outreach Services	4/7/2017	11:09 AM	280,265.00	210,000.00	70,265.00	176,012.00	176,012.00	0.00
Totals			2,664,790.00	2,368,711.00	296,079.00	1,944,407.00	1,359,609.00	584,798.00

New Agency Applicants	Date		Amount		Difference
	Received	Time	Requested	Last Year	+/-
Community Life Center Outreach Services	4/6/2017	1:40 PM	40,000.00	0.00	40,000.00
Affordable Financial Services	4/7/2017	9:48 AM	65,000.00	0.00	65,000.00
Checkmate Services International	4/7/2017	10:48 AM	163,600.00	0.00	163,600.00
Healthy Start Coalition of Flagler & Volusia (HSCFV) Outreach Proposal (2)	4/7/2017	11:38 AM	49,725.00	0.00	49,725.00
Deltona Firefighters Foundation Access to Healthcare Services	4/7/2017	11:40 AM	104,410.00	0.00	104,410.00
Sub-Total			422,735.00	0.00	422,735.00

Primary Care/Administrative Applications-Board of Commissioner Review	Date		Amount		Difference	FYE 2016	YTD Actual	Difference
	Received	Time	Requested	Last Year	+/-	Budget	2016	+/-
Healthy Communities Outreach Services	3/15/2017	2:39 PM	72,036.00	72,036.00	0.00	72,536.00	68,238.00	4,298.00
Good Samaritan Clinic	4/5/2017	11:35 AM	79,747.00	82,712.00	-2,965.00	110,000.00	65,512.00	44,488.00
The House Next Door HealthCard Prescreening Services	4/6/2017	1:45 PM	189,742.00	143,737.00	46,005.00	143,737.00	136,252.00	7,485.00
Family Health Source	4/7/2017	9:11 AM	1,608,362.00	1,448,938.00	159,424.00	1,545,606.00	1,437,247.00	108,359.00
Global Health Care Systems Primary Care	4/7/2017	9:34 AM	150,000.00	313,600.00	-163,600.00	313,600.00	18,866.00	294,734.00
Rising Against All Odd HealthCard Prescreening Services	4/7/2017	11:09 AM	34,005.00	36,359.00	-2,354.00	3,900.00	576.00	3,324.00
Sub-Total			2,133,892.00	2,097,382.00	36,510.00	2,189,379.00	1,726,691.00	462,688.00

Combined Totals			5,221,417.00	4,466,093.00	755,324.00	4,133,786.00	3,086,300.00	1,047,486.00
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**Nurturing Families
Building Communities**

The House Next Door

*Serving
Volusia and Flagler Counties*

Administrative Offices
804 North Woodland Blvd.
DeLand, FL 32720
386-734-7571
386-734-0252 (fax)

DeLand Counseling Center
121 W. Pennsylvania Ave.
DeLand, FL 32720
Counseling: 386-738-9169
Programs: 386-734-2236
386-943-8823 (fax)

Deltona Counseling Center
840 Deltona Blvd., Suite K
Deltona, FL 32725
Counseling and Programs:
386-860-1776
386-860-6006 (fax)



Commitment • Integrity • Accountability



West Volusia Hospital Authority
March 31, 2017

Proposal for Prescreening for WVHA HealthCare Application

The House Next Door proposes to provide assistance to West Volusia residents applying for the WHVA HealthCare to include:

- Assistance in understanding all required documentation
- An initial screening to assure basic eligibility
- Assistance in applying for insurance at the Affordable Health Care site and for Medicaid.
- Assistance in completing the application and reviewing for completeness prior to submitting application to POMCO

The House Next Door will make copies for the clients at no charge to the client, assist in follow-ups for any applications termed 'pending' and ensure timely submission of applications (within one business day). The House Next Door will scan applications into the POMCO system, hold the applications for 90 days and then destroy them.

Services will be provided at the following three sites:

- The House Next Door **DeLand** Administrative site
804 N. Woodland Blvd. Monday – Friday
- The House Next Door **Deltona** Counseling Center
840K Deltona Blvd. (Justin Square) Monday – Friday
- **Pierson** Farm Workers Association
111 Fountain Drive Monday

In addition to assisting residents apply for the services, The House Next Door will support WVHA community outreach by participating in community.

The House Next Door will continue to work closely with POMCO and WVHA staff to smooth the application process for clients, as well with all agencies funded by the Hospital Authority.

As requested by the Board of Commissioners last year, we have assessed the actual costs of processing the applications. Based on our analysis, the cost per client is \$50.34. We are averaging 316 clients a month for a total of 3,800 a year. The total cost for the year is \$191,292 of which we are requesting \$189,742. Please see attached budget.

Respectfully,

visit our website at
www.thehousenextdoor.org


Stephen R. Sally/CEO

The House Next Door nurtures and empowers families to help build stronger communities.

Proposed Program Budget			
Fiscal Year 17-18			
Revenue	Amount	% of Program Revenue	
Federal			
State	-	0%	
County	-	0%	
Other Local Funding			
United Way	-	0%	
In-Kind Contributions	1,550	1%	
3rd Party Reimbursements	-	0%	
Fees	-	0%	
Medicaid	-	0%	
Other (List)	-	0%	
Amount Requested from the WVHA	189,742	99%	
TOTAL REVENUE	191,292	100%	
Program Operation Expenses	Total Expense	Amount Requested From WVHA	% of Funding
Salaries and Benefits	152,950	151,711	80%
Contracted Services	-	-	0%
Administrative and Other Services	38,343	38,032	20%
Food Services	-	-	0%
Medical	-	-	0%
Pharmacy	-	-	0%
Other		-	0%
TOTAL	191,292	189,742	100%

WVHA FY 14-15 BUDGET NARRATIVE

Position Title	Salaries	Fringe
Operations Director	12,482	2,743
Site Supervisor	2,080	555
Health Card Specialist	25,180	9,055
Health Card Specialist	24,747	9,001
Health Card Specialist	24,574	8,980
Health Card Specialist	24,574	8,980
	\$113,636	\$39,314

Fringe Benefits: Fringe benefits are calculated at the following rates:

FICA @ 7.65%; Unemployment Tax @ 1.36%;

Workers Compensation @ 1.86% x Employee Wage

Health and Life Insurance @ \$484.18/full time FTE; and 3% Pension Match

	Proposed
Rent: Deltona Office - 2 offices at 64.68/Month, 200sqft @ 7.76/sqft plus Pierson Rent \$50/month. Storage and Shredding	3,152
Travel: Mileage expense @ .50/mile, and travel, to and from Pearson once a week	
Staff Training	500
Equipment Rental: Copy/Sacn/Fax machines rental expense at the DeLand and Deltona locations, plus maintenance agreement fees	5,500
Professional Fees: Audit fees and licensed Psychiatrist fees	
Membership and Dues	
Insurance: Property and D&O	1,200
Telephones: Local, Long Distance, Cell Phones, Internet at DeLand and Deltona locations	2,500
Utilities: Electric and Water at DeLand and Deltona locations	3,000
Repairs & Maintenance: Expenses related to building and equipment at DeLand and Deltona locations	800
Supplies: Office, Housekeeping, Educational and Client Supplies	1,200
Equipment - Laptop for mobile sites	1,200
Licenses & Permits	0
Depreciation	0
In-Kind Rent: DeLand and Pierson locations	1,550
Miscellaneous Expense: Background checks, Postage, Application pickup & Disposal	350
Administrative & Quality Assurance: Based on Revenue Distribution	17,390
Total Other Expense	38,343
Total Personnel and Other Expense	\$191,292

Mission of your Agency:

The mission of Rising Against All Odds, Inc. is to create and foster a West Volusia community awareness of blood borne pathogens (HIV and Sickle Cell Disease) by providing free education, testing, counseling and supportive services.

SECTION I – PROPOSAL (See Appendix A)

A. Identify why funds are being requested and how funds will be used:

RAAO is requesting funds to assist West Volusia residents in applying for and securing the WVHA HealthCard. RAAO will transfer the responsibility of the application process from the applicant to our highly skilled representatives whose sole focus will be to ensure applications are completed with appropriate documents gathered.

Many of the residents that receive services from RAAO do not have computer skills; and frequently have a limited reading comprehension level. RAAO staff will assist the resident in completing the application; securing a current picture ID; applying or renewing their Food Stamps; and completing the Affordable Care Act (ACA) application. RAAO will be responsible for submitting the completed HealthCard application with all attachments to the House Next Door. The House Next Door will notify RAAO of those applications accepted and denied. If the application is denied, the applicant will be immediately contacted to secure the requested information for resubmittal of the application.

RAAO has determined that the same amount of time is required to complete a HealthCard application regardless of it being a first time applicant or 3 time renewal. All backup information must be dated within 30 days of the application submittal.

B. Describe your target population (the specific segment of the serviceable population you will be serving – i.e. children, seniors, pregnant, etc) in West Volusia:

Services will be provided to all residents of West Volusia regardless of race, religion, sex, sexual orientation or housing arrangements. All applicants must meet the guidelines identified and approved by the West Volusia Hospital Authority Commissioners. Priority will be given to West Volusia residents who are tested for blood borne pathogens and the homeless to enable them to access medical care and other community services.

C. Estimate the total number of people that will be served for the proposed budget year:

160

D. What measurable (i.e. outcomes that can be evaluated) outcomes/goals will this service address

1. 95% of the submitted applications will be immediately accepted by the House Next Door.

E. Describe the outcome measures your agency uses to assess if the goals are met

1. If industry standards are used, identify source: N/A
 - a.) What was your agency's rating against this standard(s): _____
2. If questionnaires were used: N/A
 - a) Last year how many questionnaires were completed: _____
 - b) Number of valid complaints issued _____
 - c) Please attach summary of results.
3. If your agency uses any other monitoring method please explain methodology and outcome:

NAME: Rising Against All Odds, Inc.

A HealthCard registry is maintained documenting when the client started the application and when it was accepted and approved by the House Next Door. A demographic report is compiled each month to maintain service statistical information.

SECTION II - AGENCY ORGANIZATION

A. Administrative and/or Financial Personnel provide organizational chart and qualifications related to their role in providing oversight and fiduciary responsibilities

Brenda Flowers-Dally, Founder/Chief Executive Officer

As the Founder of Rising Against All Odds, Ms. Flowers brings a wealth of community support, and invaluable experience providing fiduciary oversight and the programmatic direction of organization. Brenda's persistence, patience and perception has been essential in for the growth and strategies of RAAO. Overall responsibilities include development of community partnerships for comprehensive services, providing oversight for development and expansion of organization. She shares the responsibility of fiduciary decisions, and program development with her Board of Directors.

Brenda is responsible for developing a community partnership with Easter Seals, implementing Sickle Cell Education for West Volusia residents. Ms. Flowers is certified as an HIV Educator/Counselor and Facilitator and Sickle Cell Educator. Her over 20 years of service work experience includes; Residential Victim's Advocate for Women's Abuse Shelter, Recovery and Treatment Support Technician, Public Speaker on HIV/AIDS and American Red Cross Certified Health Educator. She is an Oxford House alumni, West Volusia County NAACP Health Chair, member Spring Hill Neighborhood Association and member Electrolyte Charity Organization. Brenda is an United States Army Veteran working in Finance and Accounting during her enlistment time. As she has served her country, she has served her community.

As a civilian she has continued to serve her country while working for Department of Defense, Department of Transportation, and Department of Veteran Affairs. She has gained over 20 years work experience while working for Federal, State and Local Governmental agencies in Human Resources, Accounting and Enrollment and Eligibility. Service work experience includes; Residential Victim's Advocate for Women's Abuse Shelter, and a Recovery & Treatment Support, and American Red Cross Certified Health Educator. She is an Oxford House alumni, West Volusia County NAACP Health Chair, member Spring Hill Neighborhood Association and member Electrolyte Charity Organization.

Robert Lampkin- Chair

Robert Lumpkin-License Clinical Social Worker: Mr. Lampkin recently retired after 27 years of working with the Dept Of Defense as a LCSW, Family Support Program Manager and Behavior Health Manager. During his time with Department of Defense, Mr. Lampkin specialized in the Prevention Education and Treatment of Domestic Violence; Sexual Assault Prevention and Intervention, and provided services to Exceptional Family Member in the military. Mr. Lampkin managed the Family Support programs, focusing on Family Resiliency and Support. He also managed Behavioral Health Programs with focused of soldiers and family readiness. Robert Lampkin Jr is a graduate of Florida A&M University Tallahassee, Fla. He attended FAMU on a Varsity Football Scholarship while he majored in Sociology and minored in Criminal Justice and Casework, graduating in 1969. He also receive his Diploma in Advance Clinical Social Worker from the American Board of Clinical Social Worker in 1989. He went on to attend the Delphi University Scholz of Social Work in Garden City, NY, graduating in 1978. The same year he

NAME: Rising Against All Odds, Inc.

received his LCSW, Licensed Clinical Social Worker from the New York State Dept of Higher Education. Mr. Lampkin was trained as an Addiction Therapist at Phoenix House Therapeutic Community, NY before relocating to Rotterdam Holland to assist in the development of the therapeutic community concept in Europe.

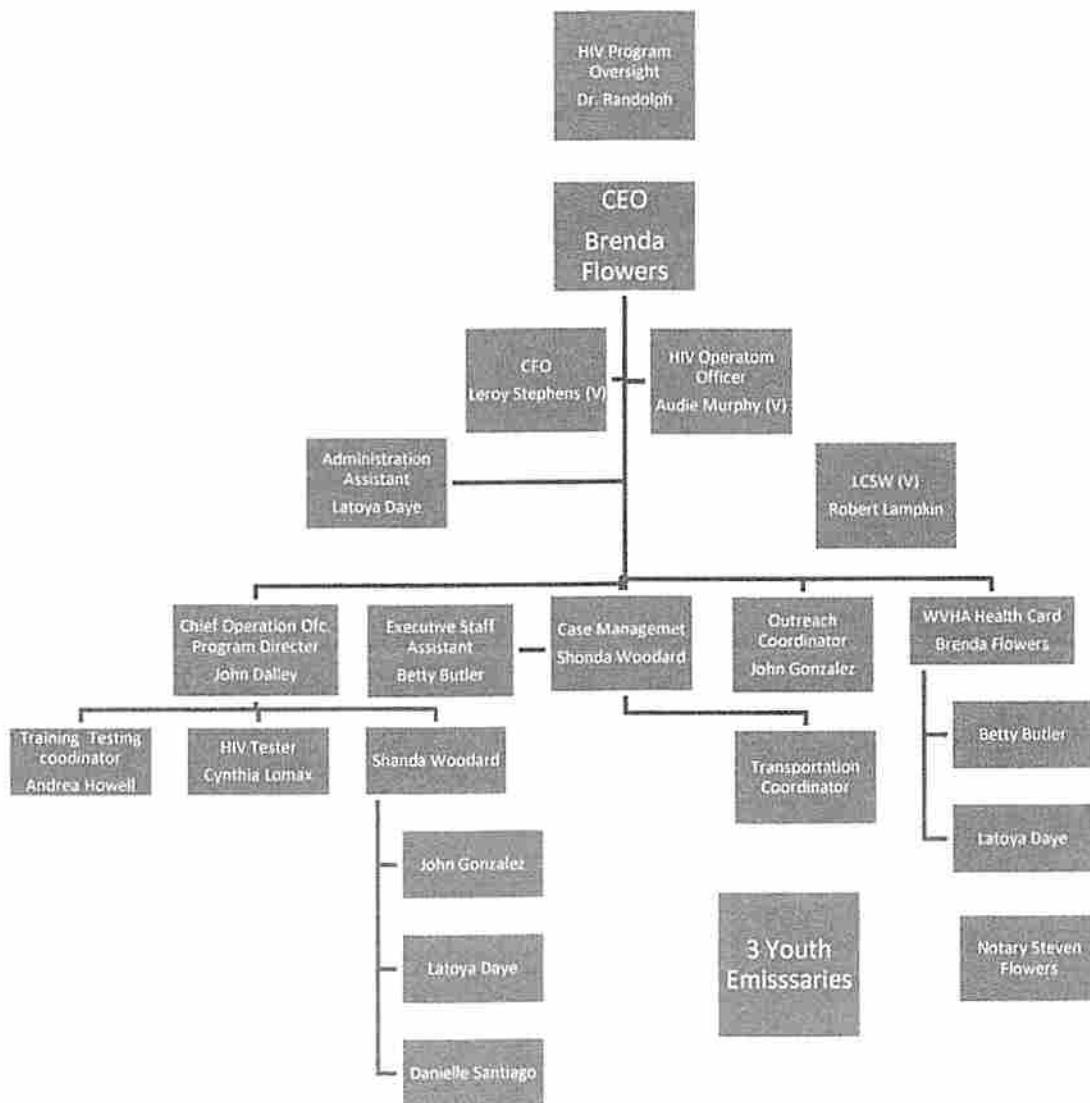
Sean King-Vice Chairman -

Mr King attended Morehouse College, DeVry University, and Keller graduate School of Management where he received a Finance/ BS Degree in Business Administration and a MBA in Management concentration Project Management. Mr. King has worked with several fortune 500 companies such as Delta Airlines, Chiquita International, First North American National Bank, Maple Leaf Corporation and currently Medtronic Medical Devices in Deland Florida. Mr. King over the years have served in various organizations such as United States Public Interest Research Group(USPIRG), Small Business Administration (SBA), Atlanta's One Stop Capital Shop, National Association for the Advancement of Colored People (NAACP), Rising Against All Odds (RAAO), Caribbean American Chamber of Commerce, SCORE, C.A.T.A.L.Y.S.T (Mentoring Program), and Sprint Hill PH Lodge 65 AF & AM. Founder MANN UP Mentoring Program. Mr. King continues to be a positive impact for this community.

LeRoy Stephens Treasurer -

Mr. Stevens holds a Bachelor's of Science degree in Accounting from Rutgers University in New Jersey and a Master's of Global Management from the University of Phoenix in Arizona. HIS CONDUIT; Creating opportunities and overcoming obstacles. LeRoy continues to have provided financial restructuring for accountability and fiduciary oversight. Mr. Stevens specialty is in Financial Reporting. LeRoy Stephens encompasses more than 25 years of experience in the Financial Service Industry with a productive and successful record of accomplishments in Accounting, Risk Management, Financial Reporting, Business Management and Internal Control. LeRoy has worked over the years to build several business relationships where he was instrumental in training and business development of the staff, Project Management, Process and Policy documentation, Expense reduction with a focus on providing the highest quality of service and results for management and customers.

Stephane Kabadi- Secretary- Stephane was born in 1979 in Congo (DR) and moved to France (Paris) in 1980. Since then Paris has become his home. He earned a Bachelors Degree in Computer Management in 1998 and since has worked for top major French companies. Stephane moved to the United States in February 2013 and founded a full-service IT consulting company, Mokonzy IT, Inc. based in Palm Coast FL in 2014. Monkonzy IT offers specialized, highly customized virtualization technology solutions for small, medium and large businesses as well as residential services. Monkonzy IT aims to provide clients with all-inclusive, high quality services on servers, desktops and applications virtualization, including server installation and migration, network design and implementation, security audits and vulnerability assessments, disaster recovery planning, office relocation and preventative maintenance.



B. Medical and/or Professional Personnel list the education, experience, qualifications and describe the roles of personnel involved in providing the direct service to be funded by WVHA.

Brenda Flowers, CEO (In-Kind)

Responsible for oversight and audit of WVHA Applications for compliance with Hospital Authority guidelines, Assists resident in completing HealthCard application including securing picture ID or Birth Certificate, arrange transportation for residents to secure needed paperwork, complete Food Stamp application and completes Affordable Care Act application as needed.

Betty Butler, Program Development Coordinator & Case Manager Supervisor. (5 hrs per week)
Generate demographic reports for HIV and Pre-Screening services. Provide Supervision to Case Managers for WVHA Health Card Applications; oversight for HealthCard Registry prior to submission to House Next Door. Assists resident in completing HealthCard application including securing picture ID or Birth Certificate, arrange transportation for resident to secure needed paperwork, completes Food Stamp/Medicaid application and completes Affordable Care Act application as needed. Approximately 30 years program development and administrative experience in nonprofit services.

Vacant - (40 hours)

Screen residents for eligibility for the WVHA HealthCard. Assists resident in completing HealthCard application including: transportation for resident to secure needed paperwork, Food Stamp application and completes Affordable Care Act application. Refers resident to community resources based upon identified needs. Katherine has approximately 15 years of Case Management experience.

Tommy Williams, Transportation (2 hours)

Provides transportation for resident to secure needed paperwork for WVHA applications as requested by Case Managers. Assist clients in outlying areas or those with medical, physical barriers to care to get to medical and other appointments relating to continuum of care as requested by Case Managers. Army Veteran

SECTION III – FUNDING**Proposed Program Budget**

Complete this section only for the program for which funds are being requested. The West Volusia Hospital Authority prior to finalization of the funding agreement may request a copy of the Agency Operating Budget.

Program Revenue (Program associated with WVHA funding request only)	Amount	% Of Program Revenue**
Federal		
State		
County		
Other Local Funding (list)		
In-Kind Contributions	\$ 12,516	27 %
3 rd Party Reimbursements		
Fees		
Medicaid/Medicare		
Other (list anything over 10% of Program Revenue)		
Amount Requested from the WVHA	\$ 34,005	73%
TOTAL REVENUE *	\$ 46,521	100%

Request brief narrative... Program Expenses (Program associated with WVHA funding request only)	Amount	% Of Program Expenses **
Salaries and benefits	\$ 36,618	77%
Contracted services		
Administrative and other services	\$ 7,803	18%
Medical	\$ 300	< 1%
Pharmacy	\$ 1,800	4%
Other (list anything over 10% of Program Expense)		
TOTAL EXPENSE *	\$ 46,521	100%

*** TOTAL REVENUE MUST EQUAL TOTAL EXPENSES**

**** % COLUMN MUST TOTAL 100%**

NAME: Rising Against All Odds, Inc.

- A. Describe any upcoming opportunities for receiving matching and/or other funding whether through federal and state governmental funds other than WVHA funding that may become available to support or reduce WVHA financial support of this program in the future.**

RAAO is researching funding opportunities to support program services.

- B. What attempts have you made to locate other funding sources or partners to meet this program's needs?**

A proposal was recently submitted to City of DeLand for CDBG funds. Although the Committee was very interested in the services, Spring Hill Community Center is the designated receiver of the available funding.

We will be applying for other local and federal funding.

- C. If the funding that the agency is requesting from the WVHA is dependent in any way upon another agency's support or activities, show substantiation and identity of that relationship.**

RAAO is dependent upon the House Next Door's availability of scheduled appointments to receive completed applications, number of applications staff are willing to accept at appointment, and approval of all HealthCard applications in order for RAAO to be paid for assisting the client.

- D. Describe how your agency can save the WVHA taxpayers money:**

Residents receiving a HealthCard will be able to access on-going and preventative healthcare as opposed to ER visits for treatment. This reduces the cost of healthcare in the community as well as promoting a healthier lifestyle for the client.

BUDGET NARRATIVE

Attach, in narrative form, an explanation and justification of all line items listed for this program of service using the following guidelines. All items should be addressed. Indicate N/A where appropriate and explain why not applicable.

Personnel: List each person who will be employed with position title, description and salary, payroll taxes and cost of benefits for each position.

Name	Position title	Description	Salary	Payroll taxes	Benefits cost
Brenda Flowers-Dally	CEO	In-Kind overall budget & program supervision	\$ 3,250 yr	\$ 231	-0-
Betty Butler	Supervisor	Supervise staff; review all apps	\$ 3,900 yr	\$ 277	-0-
Vacant	Case Manager	Assist client to complete HealthCard application	\$26,000 yr	\$1,846	-0-
Tommy Williams	Transporter	38% In-KInd drive client to dr appts	\$ 1,040	\$ 74	-0-

Contracted Services:

Justify services provided under subcontracts and explain why agency staff cannot perform them.

NONE

Administrative and Other Services: All In-KInd Services

Client Picture ID/Drivers License	15@ \$27 each	\$ 405
Client Birth Certificates	15@ \$42 ea	\$ 638
Vehicle Maintenance In-KInd		\$1,200
Vehicle Gas for 52 trips In-KInd	52@ \$ 5	\$ 260
Office Supplies In-KInd		\$2,000
Administration In-KInd		\$3,300

Medical: In-Kind

Describe how these services are provided and how cost is determined.

FHS Primary Care Physician visits	\$ 300
-----------------------------------	--------

Pharmacy: In-Kind

Describe how these services are provided and how cost is determined.

Prescription Costs while client is waiting for HealthCard	\$1,800
---	---------

Other: Include any expected costs not listed above. Provide clear justification for each item.

NONE

NAME: Rising Against All Odds, Inc.

AGENCY ATTESTATION FORM

AGENCY: Rising Against All Odds, Inc.

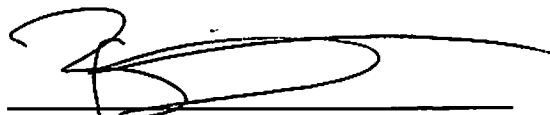
SERVICE NAME: HealthCard Pre-Screening

TO COMPLY WITH WEST VOLUSIA HOSPITAL AUTHORITY APPLICATION REQUIREMENTS FOR FUNDING OF MEDICAL SERVICES FOR FISCAL YEAR 2017-2018, THE ABOVE REFERENCED AGENCY OR CORPORATION ATTESTS THAT:

1. **INCORPORATION.** Applicant is a governmental agency or a corporation registered with the Office of Secretary of State for the State of Florida.
2. **NEGOTIATION.** Applicant is aware that a mutually agreed written funding agreement is necessary before any approved funding can be disbursed and the applicant will recognize that the West Volusia Hospital Authority reserves the right to disapprove funding if it deems any proposed modification of its standard funding agreement as unacceptable. The applicant may request a sample of this standard funding agreement by contacting the WVHA Attorney.
3. **SERVICE AVAILABILITY.** Services will be made available on a nondiscriminatory basis regardless of race, religion, color, sex, national origin, age, handicap or marital status.
4. **DOCUMENTS.** Applicant will submit the following documents by NOON on April 7, 2017 with all other parts of the completed application:
 - a) Basic Financial Statements, Audit Reports and Management Letter from an independent audit for the previous fiscal year (if an audit was performed) or most current financial statement if no audit was performed
 - b) A copy of all licenses that are legally required for Applicant to perform proposed services.
 - c) If tax exempt, a Tax Exempt Determination Letter from the Internal Revenue Service or signed letter from CPA verifying exempt filing status
 - d) Fire and Health Inspection Certificates for service site(s) (if applicable)
 - e) Certificates of insurance
5. **BACKGROUND CHECK.** All employees of the agency working directly with children or vulnerable adults must have a background screening completed through the abuse registry prior to working directly with children or vulnerable adults.
6. **FISCAL CONDITIONS.** Circle the appropriate response to each of the following questions:
 - a) Yes ☒ No Has your agency ever had a contract canceled for cause?
 - b) Yes ☒ No Does your organization owe any repayment of funds to any funding sources?
 - c) Yes ☒ No Has your organization declared bankruptcy or had any assets attached by any court within the last 3 years?

If the answer to any of the questions stated above is "yes", please attach a written explanation.

FAILURE TO CERTIFY AND COMPLY WITH THE ABOVE REQUIREMENTS MAY RESULT IN PROGRAM FUNDS BEING DENIED AND, IF ALLOCATED, BEING WITHDRAWN, REALLOCATED, OR DELAYED.



(Chief Agency Officer)

4/5/17

(Date)

Brenda Flowers-Dalley

(Type Name/Title)

(Date)



(Authorized Agency Countersignature)

4/5/17

(Date)

Robert Lampkin, LCSW, Board President

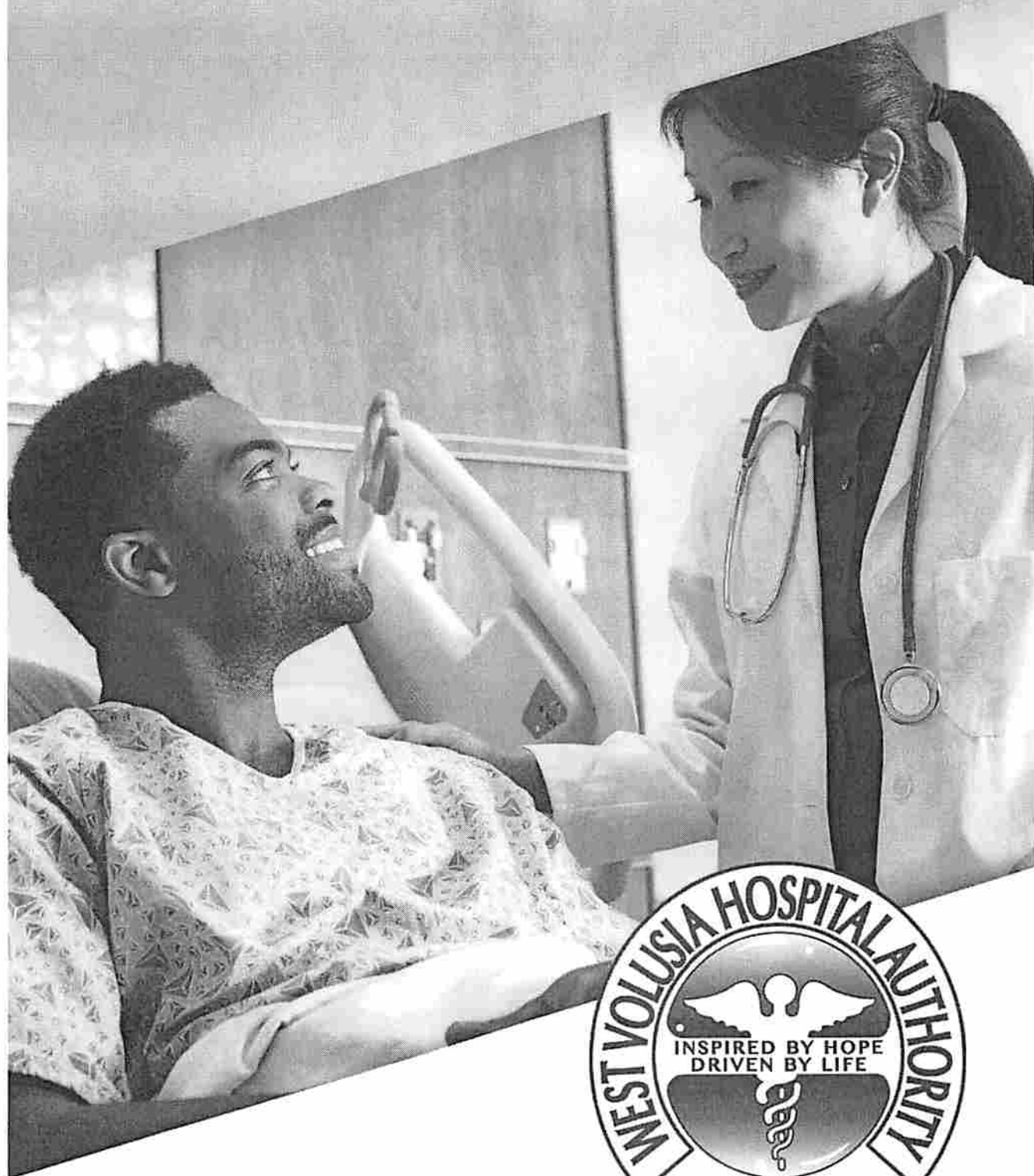
(Type Name/Title)

4/5/17

(Date)

WVHA

MEMBER HANDBOOK



Learn more at:

westvolusiahospitalauthority.org

Follow Us:



WELCOME TO THE

WEST VOLUSIA HOSPITAL AUTHORITY HEALTH CARD!

We want you to get the most from your West Volusia Hospital Authority HealthCard coverage. Please read this Member Handbook carefully. It will help you understand your coverage and how your West Volusia Hospital Authority HealthCard plan works.

The West Volusia Hospital Authority Board goal is to serve your health care needs and help keep you healthy.



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Funded Agencies

Introduction

The West Volusia Hospital Authority Board has established a Health Care program for clients who are in need of medical services, who do not have the ability to pay and are residents of the West Volusia Hospital Authority Taxing District.

The West Volusia Hospital Authority Board provides a source of funding for indigent and medically needy residents in the West Volusia Hospital Authority Taxing District to maximize the health and well-being of the residents, by providing comprehensive planning and coordination of health care service. Because WVHA will be your payor of last resort, WVHA will be "subrogated" to any rights you (or your family member) have to get your medical costs paid by another person or insurer. This right of subrogation applies when you are sick or injured as a result of the act or omission of another person or party. Subrogation means WVHA has a right to recover any payments made to you or your family member by a third party (for example, a defendant in a lawsuit or an insurance company) because of an injury or illness caused by that third party. If you or your family member receives benefits under the HealthCard program and you or your family member have a right to recover damages to get those costs paid by someone else, then you must reimburse WVHA for benefits paid if you later recover those damages. After reimbursing WVHA, any remainder of the damages recovered will be yours. WVHA's recovery will not be reduced because you or your family member has not received the full damages claimed, unless WVHA agrees to a reduction in writing or that reduction is a pro rata portion of your legal costs.

Contact Information

*Family Health Source
DeLand Location*
844 W Plymouth Ave.
DeLand, FL 32720
P: 386.738.2422
F: 386.738.2423

*Family Health Source
Deltona Location*
2160 Howland Blvd. #110
Deltona, FL 32738
P: 386.532.0515
F: 386.532.0516

*Family Health Source
Pierson Location*
216 N. Frederick St.
Pierson, FL 32180
P: 386.749.9449
F: 386.749.9447

Enrollment

Criteria for Eligibility

- You must have two (2) acceptable documents to prove your identity.
- You must reside within the West Volusia Taxing District for at least 3 months immediately preceding the enrollment application date. If you are homeless, you need proof of residency for 1 month.
- Your income and assets must be equal or below the West Volusia Hospital Board approved percentage of the Federal Poverty Level Guidelines for a family size unit size.
- You cannot have any health care coverage.

Effective Date of Member Coverage

The effective date of your application is the date that WVHA Certifying Agency receives the application from your clinic.

The Emergency Room (ER) or hospital discharge date if the application was submitted to WVHA prescreening agency within fifteen (15) business days of ER visit date or the hospital discharge date.

Length of Coverage

The WVHA Health Card is usually approved for a six (6) months period. WVHA reserves the right to issue short term eligibility periods for special circumstances to be determined by WVHA Certifying Agent.

Re-application after a denial

If your situation changes, you can reapply twenty-one (21) days after the denial letter date.

Renewal

Your WVHA Health Card is renewable. You can renew your health card 30 days prior to the expiration date of your existing Health Card. If you reapply and a lapse of time occurs within thirty (30) days of your expiration date, the dates will be adjusted to avoid a lapse in coverage. You will need to meet all of the criteria of the initial application in order to renew your card.

Termination

WVHA certifying Agency may terminate your participation to the program if evidence of the following is discovered:

1. Providing false information by evidence of submission or omission
2. Failure to keep appointments
3. Abusive or disruptive behavior
4. Inappropriate or excessive use of Emergency Room Services
5. Inappropriate or excessive use of other provided services, including altered RX Prescriptions
6. Illegal possession of firearms or weapons
7. Physical or verbal threats
8. Enrollment in a Health Insurance Plan
9. Eligible for Medicaid

If terminated for reasons 1, 3, 4, 5, 6, or 7 individuals are ineligible for future consideration.

Your entire family may be terminated if evidence of the following is discovered:

1. Providing false information by evidence of submission or omission.
2. Income Exceeds guidelines
3. Assets exceed guidelines

If terminated for reason 1, entire family unit is ineligible for future consideration.

Public Assistance Fraud

West Volusia Hospital Authority reserves the right to verify all information. Verification includes but is not limited to income, assets, credit, and employment. This may be accomplished at anytime during the application process, enrollment or after benefits have been assigned.

If any information is discovered to be false or altered in any way, WVHA may deny the application or disenroll the member and recover any charges previously adjusted under this program. Any member or applicant denied for falsification or omission of information may be prohibited from ever applying again.

WEST VOLUSIA HOSPITAL AUTHORITY HEALTH CARD!

WVHA

HealthCard Program

Member ID :

Member:



PCP:

PCP PHONE:

Effective Date:

Termination Date:

PCP SPC HOSP ER RX

COPAYS

All Services Require PCP Referral for Payment

Please contact the member's Primary Care Physician prior to rendering services.

Participating Providers Submit Claims To:

POMCO
PO Box 8329
Syracuse, NY 13217
Payer ID# 18111
Provider Only Claims Inquiries 1-844-344-8308

Pharmacy:
Ritter's Towne Pharmacy
120 E New York Ave
DeLand, FL 32724
386-734-8868

Laboratory Services:
Quest Diagnostic
Labs Only

Hospital Services:
Florida Hospital DeLand
Florida Hospital Fish Memorial

This card is for identification only and guarantees neither coverage nor payment.

WVHA Health Identification Card

- 1. Member Number**
Your personal Health card Program identification (ID) number. You will need this number when you call to make appointments for any covered medical services.
- 2. Member Name**
The name of the person covered by the WVHA Health Card.
- 3. Member Address**
Physical address of the patient.
- 4. Primary Care Physician (PCP) Name**
The name of your PCP. Your PCP will provide your health care and tell you where you will go to receive health care services.
- 5. Primary Care Physician (PCP) Phone**
The direct telephone number of your PCP.
- 6. Effective Date**
The day your health benefits begin with the WVHA Health Card Program.
- 7. Termination Date**
The date your health benefits finish with the WVHA Health Card Program.
- 8. Co-Pays**
This is the co-payment that you need to pay when you visit your PCP, a Specialist, Pharmacy, Hospital, and Emergency Room Services.

Carry Your Identification Card (ID) At All Times

Show your WVHA Program ID Card every time you go to a doctor, pharmacy, laboratory or hospital. If you lose your card, please contact your Clinic.

Lost or stolen cards, Changes or Corrections

If your WVHA Health ID Card becomes lost or stolen, you will not lose your covered services. Call your Clinic right away to get a new card. You must also call your clinic if you need to make changes or corrections to your WVHA ID Card.

Access to Care

The Referral Process

The Primary Care Physician (PCP) is the Clinic where you will receive your medical services. They will direct and coordinate all of your Covered Medical Services. Whenever a Medically Necessary Covered Medical Service is needed and cannot be provided by your PCP, your PCP will suggest and choose the appropriate Contracted Provider, such as a specialist or ancillary Provider. Referrals to Contracted Providers must be arranged and approved by your PCP.

Out of Network Specialty Providers

If you go to see a provider that is not contracted by WVHA Program, you will have to pay any resulting medical bills. Your referrals **MUST** be approved by your PCP.

Non-Emergency Hospital Care

If you need to go to the hospital, follow these steps:

1. The only Hospitals approved by the WVHA Program are Florida Hospital Fish Memorial and Florida Hospital DeLand.
2. Hospital services, including inpatient (overnight stay) or outpatient (one day only), need to be approved by your PCP. WVHA Program will approve claims payment for covered services at participating hospitals only.
3. Show your Plan Identification Card (ID) when you are admitted to the hospital.

Billing for Services

Your ID card instructs providers and hospitals to submit bills directly to WVHA Program Billing Agency. You will only have to pay for your co-payments.

Payment of Co-payments

In your Identification Card, you will notice that you are, in some instances, required to pay part of the cost of some service. Your Co-payment must be paid directly to the Provider.

Covered Services

You may receive covered medical services which are performed, prescribed, or referred by your Primary Care Physician. The WVHA Program may include, but not be limited to, preventive health services, community nursing services, ambulatory care, outpatient services, hospital services, trauma health services, and rehabilitative services, as feasible.

Preventive Health Care

Includes well-child care from birth, periodic health evaluations and immunizations for pediatric and adults. Services will be provided by your PCP

Specialist Visits

Covered when approved by your PCP and with participating providers.

Ambulatory Outpatient Services

Covered when approved by your PCP and performed in a participating hospital (Florida Hospital Fish Memorial and Florida Hospital DeLand)

Hospital Admissions

Covered at a participating hospital (Florida Hospital Fish Memorial and Florida Hospital DeLand)

Laboratory Services

Covered only at Quest Diagnostic Laboratory

Pharmacy Benefits

Medication listed in the Preferred Drug List only

Dental Services

Dental services available with participating Dentists

Mental Health

Covered when approved by your PCP and with participating providers

Funded Agencies

Community Legal
Services of Mid-Florida
315 Magnolia Avenue
Sanford, FL 32771
386-222-0280

Family Health Source-
Primary Care
844 W. Plymouth Ave.
DeLand, FL 32720
386-738-2488

Family Health Source-
Primary Care
2160 Howland Blvd.#110
Deltona, FL 32738
386-532-0515

Family Health Source-
Primary Care
216 N. Frederick St.
Pierson, FL 32180
386-749-9449

Florida Hospital DeLand
701 W. Plymouth Ave.
DeLand, FL 32720
386-943-4522

Florida Hospital Fish Me-
morial
1055 Saxon Blvd.
Orange City, FL 32763
386-917-5000

Florida Department of Health
Dental
120 E. New York Ave. Suite E
DeLand, FL 32724
386-736-5194

Global Health Care Systems
Primary Care & Urgent Care
1133 Saxon Blvd.
Orange City, FL 32763
386-878-4137

Good Samaritan Clinic
Primary Care/Dental
136 E. Plymouth Avenue
DeLand, FL 32724
386-738-6990

Halifax Healthy Communities
1688 W. Granada Blvd.
Ormond Beach, FL 32174
386-323-0000

Healthy Start Coalition of
Flagler and Volusia
2345 Providence Blvd.
Deltona, FL 32725
386-561-9628

Hispanic Health Initiative
70 Spring Vista Drive, Unit 2
DeBary, FL 32713
386-320-0110

Rising Against All Odds
340 S. Woodland Blvd.
DeLand, FL 32720
386-202-4209

Stewart-Marchman-Act
(SMA)
Behavioral Health Care
Residential Treatment Beds
1251 N. Stone Street
DeLand, FL 32720
386-236-3166

SMA Homeless/Psychiatric
Services
105 W. Calvin Street
DeLand, FL 32720
386-254-1104

SMA Baker Act Services
1150 Red John Drive
Daytona Beach, FL 32124
386-254-1227

The House Next Door
804 N. Woodland Blvd.
DeLand, FL 32720
386-626-4745

The Neighborhood Center
434 S. Woodland Blvd.
DeLand, FL 32720
386-734-8120

INSPIRED BY LIFE, DRIVEN BY HOPE.



How to get the WVA Health Card

How to get the WVA Health Card



Our Community Partners



Downloaded from <http://ajph.org/> on November 10, 2015

4012 K. L. DEBORD AND J. A. J. HANSEN

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[illegible]

WELCOME TO WEST VOLUNIA HOSPITAL AUTHORITY



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 E-mail us
 at info@mcgraw-hill.com
 or call 1-800-394-9753
 (386) 734-9441
 Fax to: 407-706-0800



POMCO

April 20, 2017

Language Updates to March 16, 2017 Submission - Eligibility
Guidelines Recommended Changes for WVHA Board Review and
Approval

POMCO is in agreement with the recommended language changes and typos noted by Attorney Small to our initial submission of March 16, 2017. The agreed upon recommended language changes and corrected typos are highlighted below.



Recommended Change: Question 6.2 on Assessment Form

Overview

On question 6.2 of the assessment form, page 28, add request for 8 most recent weeks of paystubs.

- **Current Question:** Have you lost your job in the last 8 weeks? If yes, please provide DCF Verification of Employment/Loss of Income Form.
- **Proposed Question:** Have you lost your job in the last 8 weeks? If yes, please provide your *8 most recent weeks of paystubs* or DCF Verification of Employment/Loss of Income Form

Reason for Recommendation

Previously the assessment form only asked the applicant to supply a DCF income form, however many applicants have valid paystubs that they could also submit. POMCO believes it is in the best interest of the program if paystubs are provided whenever they are available because a hand-written form results in more room for error and therefore invalid calculation of income.

Recommended Change: Question 6.3 of Assessment Form

Overview

Question 6.3 of assessment form, page 28, currently asks for a work calendar, we would like to replace work calendar with 'Most Recent Tax Return' and 'Quarterly Financial Statement'.

- **Current Question:** Are you self-employed? If yes, please provide 8 week WVHA Work Calendar, or last quarter's business financial statement.
- **Current Eligibility Guideline** (Page 16, #20): "Self-employment Income. Defined as the amount of "net profit (loss)" as reported on tax return Form 1040 Schedule C, line 31. The WVHA Enrollment Certifying Agent may request supporting documentation for deductions not in line with industry standards. Deductions for personal expenses and wages will be adjusted accordingly. (Include last Quarter Financial Statements, bank settlements and most recent Tax Return)"
- **Proposed Question:** Are you self-employed? If yes, please provide most recent *tax return* (complete with all schedules/forms) or *quarterly self-employment statement*.

Reason for Recommendation

This is so that the request for documentation matches what the eligibility guidelines state.



Recommended Change: Replace Work Calendar Throughout with a Quarterly Financial Statement

Overview

The guidelines state a quarterly financial statement is acceptable. However, applicants are not submitting the statement because the assessment form does not request one. In addition, the program did not have a template to provide for this. The prior work calendars are not a complete statement of what ones self-employment status or profits are. Therefore, we created a quarterly financial form for the applicant to submit that will replace the work calendar.

Reason for Recommendation

Work calendars are not a complete picture of one's self-employment income. The previous work calendar form did not ask pertinent information such as the business name and address. The proposed new quarterly financial statement is a more inclusive form for someone who is applying as a self-employed individual. It asks important financial questions and requires the applicant to attest more information, therefore resulting in an accurate calculation of income for qualification purposes under this program.

Recommended Change: Update Verification of Support Form

Overview

Remove directions under 5.3 and 5.4 of the Verification of Support form. Provide an instructions section on the Verification of Support form.

Reason for Recommendation

The sentences under questions 5.3 and 5.4 were causing confusion to all parties and miscalculations of income. For example, household expenses were being included where the applicant did not reside. We are replacing the prior sentences with an instruction section for questions #'s: 5.3, 5.4, and 5.5.



Recommended Change: Update Language Regarding Health Coverage Exclusions

Overview

POMCO would like to update the health coverage exclusions to identify two programs as acceptable to be enrolled in when applying for the WVHA Health Card program.

- **Page 5 of Eligibility Guidelines:** "WVHA is the payer of last resort and assists patients with no medical benefits. Patients that have health coverage are excluded from the program. Certain programs, such as 'Aids Drugs Assistance Program' (ADAP), that are targeted to offer limited services towards one specific disease, will not disqualify an applicant from the WVHA Health Card program because such programs are not considered inclusive medical benefits. "

Reason for Recommendation

Patients with other health coverage are excluded from the program. The Board previously approved the following programs to not be considered as health coverage, 'Aids Drugs Assistance Program' (ADAP) and Family Planning programs.

Recommended Change: Add Language to Assets Section Regarding Jointly Owned Assets When a Victim of Domestic Violence

Overview

POMCO would like to exclude jointly owned property from the asset calculation when the applicant no longer resides in the homestead on the basis of domestic violence.

Eligibility Guidelines: Section 11.03 Procedures; Assets Excluded (Page 19)

- i. Assets that are jointly owned by an applicant who is deemed a victim of domestic violence can be excluded when that asset is jointly owned with the accused and the applicant is no longer residing in the homestead.
 - i. Official court documentation, such as a restraining order, must be supplied as proof that the applicant is a victim of domestic violence.
 - ii. The WVHA Health Card program will require a certified statement from a court official or a notarized statement from the applicant attesting that the applicant is unable to liquidate the subject asset because of a domestic violence situation.

Reason for Recommendation

An applicant attesting to be a victim of domestic violence with property co-ownership is likely unable to liquidate the asset in fear it would put them in danger with the accused. Therefore if the asset can not be readily liquidated and if the applicant is no longer residing in the homestead we feel that the property asset should be excluded under these circumstances. Based on our estimates we don't expect more than 5 instances of these specific circumstances per year and therefore would not result in significant increase in approved health card applicants.



Recommended Change: Add Language to Assets Section for Adding Family Loans in Asset Calculations Regarding Encumbrances.

Overview

To clarify the language relative to the determination of equity value of real property in regards to what may or may not be subtracted as encumbrances.

Eligibility Guidelines: Section 11.03 Procedures; Assets to be considered (Page 19 #2b)

- Equity value of real property other than homestead. The value is verified by the county appraiser of the county in which the property is located. The equity value is determined by subtracting the amount of any encumbrances from the value of the asset. The encumbrances subtracted from the property value [for the purpose of the asset calculation under this program] must be tied to the property through formalized legal obligation. Generally this is a recorded lien or mortgage where the financial institution retains the title to a property until the borrower repays the amount, in turn prohibiting the owner from exercising full control over their property (i.e. receiving payment from a buyer when selling or transferring the title). *An unrecorded loan provided to the property owner [for example a loan from a friend or family member] is not considered an encumbrance for asset amount determination.*

Reason for Recommendation

Based on a previous application appeal where there was a loan from a relative that was not deemed an encumbrance to be subtracted from the asset calculation.

Recommended Change: Question 8.4 of Assessment Form

Overview

On question 8.4 of the assessment form, page 29, add language requesting the date the property was sold or transferred as well as supporting documentation.

- Current Question: Have you sold or transferred title to any property in the last 3 years? If yes, please list all the properties, including lots.
- Proposed Question: Have you sold or transferred title to any property in the last 3 years? If yes, please list all the properties, including lots and *supply supporting documentation as proof of this sale.*

Reason for Recommendation

Previously the assessment form only asked the applicant to provide a list of all the properties including lots. POMCO is requesting the date of the sale/transfer to be captured on the assessment form as well as supporting documentation to determine if the sale occurred within the past year. This information will allow POMCO to do further research to determine if money was provided to the applicant and if it still remains an asset or if it should be considered income.

username password

Exclusions

- All costs associated with the collection and preservation of sperm for artificial insemination.
- Allergy testing and immunotherapy.
- Alternative and holistic health care services.
- Ambulance Services.
- Amniocentesis.
- Any medical service provided or received outside of Palm Beach County will not be considered for reimbursement by the Health Care District of Palm Beach County unless authorized by the Health Care District.
- Any patient treated in a hospital while under arrest by, in custody of, being guarded by a law enforcement officer, or under house arrest.
- Any service provided or received without having been prescribed, directed or authorized by the Health Care District, except in cases of emergency.
- Any services in connection with education and treatment for learning or developmental disabilities.
- Bone Stimulators.
- Care or treatment of anorexia or bulimia.
- Chelation therapy.
- Chiropractic treatment or services.
- Complications related to non-covered services.
- Cosmetic, medical, surgical, and non-surgical treatments and procedures provided primarily for cosmetic purposes, which shall include but are not limited to: (1) surgery to the upper and lower eyelid; (2) penile implant; (3) augmentation mammoplasty; (4) reduction mammoplasty for male or female or other cosmetic procedures to the breast, (5) removal of breast implants, except in post mastectomy surgery; (6) full or partial face lift; (7) dermabrasion or chemical exfoliation; (8) scar revision, (9) otoplasty; (10) surgical lift, stretch, or reduction of the abdomen, buttocks, thighs, or upper arm; (11) silicone injections to any part of the body; (12) rhinoplasty; (13) hair transplant; and (14) tattoo removal.
- Cost of services performed by another institutional facility while you are hospitalized in a facility.
- Custodial, domiciliary, convalescent or rest care and care in a skilled nursing facility.
- Diabetic shoes.
- Dialysis for chronic renal failure after the 90th day of treatment from first day of dialysis treatment; dialysis treatments within the home.
- ECP (External Counter Pulsation).
- Experimental medical, surgical or psychiatric procedures and pharmacological regimes that are not generally accepted by the medical community or the Health Care District.
- External defibrillator vest.
- Eye glasses or contact lenses.
- Fertility or infertility testing, artificial insemination or invitro fertilization, embryo transplantation, human chorionic gonadotropin (HCG) injections or reversal of sterilization procedure.
- Foot care, such as removal of warts, corns, or calluses, including, but not limited to, podiatric treatment of bunions, toenails, flat feet, fallen arches, hammertoes, and chronic foot strain, unless determined to be acute and medically necessary or resulting from acute injury.
- Gastric stapling, gastric bypass, gastric banding, and other surgical experimental or investigational procedures for the treatment of obesity, weight loss and/or weight management. Diet or nutritional programs and any variants thereof or exercise programs.

- Genetic testing, counseling and other related services.
- Health or beauty aids, or hair analysis.
- Hearing aids.
- Immunizations required for travel and physical examinations needed for employment, insurance, or governmental licensing.
- Joint replacements - limit one (1) per calendar year.
- Medical or rehabilitation services related to the abuse of or addiction to alcohol, drugs, or other substances.
Mental or Behavioral Health services including any services related to the abuse of alcohol, drugs, or other substances.
- Occupational, physical, and/or speech therapy unless prescribed by a physician and as it relates to a medical condition.
- Orthodontic services or procedures, periodontal surgery, cast crowns, cast post or core, cast bridges, inlays or onlays, porcelain or resin laminate veneers, space maintainers, implants, or any cosmetic dental procedures.
- Orthotics (except for joint immobilization).
- Pain management.
- Private duty nursing services.
- Prosthetics - limit one (1) prosthetic per limb per lifetime.
- Repair of prosthetic or other DME obtained prior to eligibility.
- Sclera therapy.
- Services associated with aiding a patient in the home, such as homemaker, domestic or maid service.
- Services in connection with long term care, chronic care, or nursing home care.
- Services provided by a family member.
- Services provided in a hospital setting when the member leaves against medical advice (AMA).
- Services received as a result of an illegal act. Any injury resulted from being arrested by, in custody of, being guarded by a law enforcement officer or under house arrest.
- Services received prior to your eligibility effective date or after the termination date.
- Sex change operations or any sex change related services including services for sexual transformation or sexual dysfunction or inadequacies.
- Suicide, attempted suicide, or self-inflicted injury.
- Transplants and any related service to transplants, including transplant donor expenses, or stem cell transplant.
- Transportation.
- Travel, whether or not recommended by a physician.
- Treatment and/or repair of chronic congenital abnormalities.
- Treatment for acne or non symptomatic lesions, which may include but are not limited to warts, moles, nevi, lipomas, or cysts.
- Treatment for conditions covered by Workers' Compensation laws.
- Treatment for military service-connected disabilities for which the Veterans Administration and military hospital system provides care to which the member is legally entitled and when such facilities are reasonably available within the service area.
- Treatment of Temporomandibular Joint Disease (TMJ).
- Treatment of varicose veins of the extremities.
- Urgent care clinic services.
- Vision training, eye exercises, orthoptics, or surgery performed primarily to correct or improve myopia.
- Wound VAC.

WVHA
Projection For Selected Accounts for Increase in Enrollment

DREGGORS, RIGSBY & TEAL

	ANNUAL BUDGET	Year to Date Annualized	25% Enrollment Increase	Budget Required for 2018 Specialty Care with 25% Increase	50% Enrollment Increase	Budget Required for 2018 Specialty Care with 50% Increase
Specialty Care	2,919,675.00	4,108,380.44	1,027,095.11	5,135,475.55	2,054,190.22	6,162,570.66
Northeast Florida Health Services	1,448,938.00	1,151,117.28	287,779.32		575,558.64	
TPA Services	400,000.00	488,515.00	122,128.75		244,257.50	
	4,768,613.00	5,748,012.72	1,437,003.18		2,874,006.36	
Over Budget at Annualized Projection		979,399.72				

West Volusia Hospital Authority
Financial Statements
March 31, 2017



Dreggors, Rigsby & Teal, P.A.

Advisors for Life

Certified Public Accountants | Registered Investment Advisor

1006 N. Woodland Boulevard ■ DeLand, FL 32720

(386) 734-9441 ■ www.drtcpa.com

James H. Dreggors, CPA
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John A. Powers, CPA

To the Board of Commissioners
West Volusia Hospital Authority
P. O. Box 940
DeLand, FL 32720-0940

Management is responsible for the accompanying balance sheet (modified cash basis) of West Volusia Hospital Authority, as of March 31, 2017 and the related statement of revenues and expenditures - budget and actual (modified cash basis) for the month then ended and year-to-date, in accordance with accounting principles generally accepted in the United States of America. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the financial statements nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on these financial statements.

The accompanying supplemental information contained in Schedules I and II is presented for purposes of additional analysis and is not a required part of the basic financial statements. This information is the representation of management. The information was subject to our compilation engagement; however, we have not audited or reviewed the supplementary information and, accordingly, do not express an opinion, a conclusion, nor provide any assurance on such supplementary information.

Management has elected to omit substantially all of the disclosures required by accounting principles generally accepted in the United States of America. If the omitted disclosures were included in the financial statements, they might influence the user's conclusions about the Authority's financial position, results of operations, and cash flows. Accordingly, the financial statements are not designed for those who are not informed about such matters.

We are not independent with respect to West Volusia Hospital Authority.

Dreggors, Rigsby & Teal, P.A.

Dreggors, Rigsby & Teal, P.A.
Certified Public Accountants
DeLand, FL

April 03, 2017

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Certified Public Accountants

West Volusia Hospital Authority
Balance Sheet
Modified Cash Basis
March 31, 2017

Assets

Current Assets

Petty Cash	\$ 100.00
Intracoastal Bank - Money Market	4,250,807.75
Intracoastal Bank - Operating	500,030.33
Mainstreet Community Bank - MM	10,015,669.70
Taxes Receivable	126,422.00
Total Current Assets	14,893,029.78

Fixed Assets

Land	145,000.00
Buildings	422,024.71
Building Improvements	350,822.58
Equipment	251.78
Total Fixed Assets	918,099.07
Less Accum. Depreciation	(296,440.64)
Total Net Fixed Assets	621,658.43

Other Assets

Deposits	2,000.00
Total Other Assets	2,000.00
Total Assets	15,516,688.21

Liabilities and Net Assets

Current Liabilities

Security Deposit	5,110.00
Deferred Revenue	109,445.00
Total Current Liabilities	114,555.00

Net Assets

Unassigned Fund Balance	6,630,697.70
Restricted Fund Balance	208,000.00
Assigned Fund Balance	5,464,554.00
Nonspendable Fund Balance	621,658.43
Net Income Excess (Deficit)	2,477,223.08
Total Net Assets	15,402,133.21
Total Liabilities and Net Assets	\$ 15,516,688.21

West Volusia Hospital Authority
Statement of Revenue and Expenditures
Modified Cash Basis
Budget and Actual
For the 1 Month and 6 Months Ended March 31, 2017

	<u>ANNUAL BUDGET</u>	<u>CURRENT PERIOD ACTUAL</u>	<u>YEAR TO DATE ACTUAL</u>	<u>BUDGET BALANCE</u>
Revenue				
Ad Valorem Taxes	12,500,000.00	288,771.35	11,343,891.11	1,156,108.89
Investment Income	65,000.00	5,591.83	29,908.33	35,091.67
Rental Income	67,301.00	5,608.42	33,650.52	33,650.48
Other Income	0.00	0.00	24,779.18	(24,779.18)
Total Revenue	<u>12,632,301.00</u>	<u>299,971.60</u>	<u>11,432,229.14</u>	<u>1,200,071.86</u>
Healthcare Expenditures				
Adventist Health Systems	5,575,949.00	766,786.10	3,377,133.74	2,198,815.26
Northeast Florida Health Services	1,448,938.00	96,187.58	575,558.64	873,379.36
Specialty Care	2,919,675.00	526,484.68	2,054,190.22	865,484.78
County Medicaid Reimbursement	2,197,953.00	182,706.67	1,096,240.02	1,101,712.98
The House Next Door	181,975.00	7,730.28	46,347.00	135,628.00
The Neighborhood Center	70,000.00	3,132.50	44,436.68	25,563.32
Rising Against All Odds	210,000.00	21,879.34	130,787.86	79,212.14
Community Legal Services	80,000.00	1,239.58	1,883.61	78,116.39
Hispanic Health Initiatives	100,000.00	5,700.00	12,400.00	87,600.00
Florida Dept of Health Dental Svcs	300,000.00	11,429.53	48,824.02	251,175.98
Good Samaritan	82,712.00	5,163.50	26,211.00	56,501.00
Global Healthcare System	350,000.00	1,308.00	9,494.80	340,505.20
Stewart Marchman - ACT	960,336.00	97,986.92	499,697.97	460,638.03
Health Start Coalition of Flagler & Volusia	142,400.00	10,739.16	71,214.16	71,185.84
H C R A	819,612.00	3,856.22	79,300.42	740,311.58
Other Healthcare Costs	936,847.00	0.00	0.00	936,847.00
Total Healthcare Expenditures	<u>16,376,397.00</u>	<u>1,742,330.06</u>	<u>8,073,720.14</u>	<u>8,302,676.86</u>
Other Expenditures				
Advertising	112,000.00	17,085.58	63,098.48	48,901.52
Annual Independent Audit	15,500.00	0.00	15,500.00	0.00
Building & Office Costs	6,500.00	521.44	5,265.29	1,234.71
General Accounting	68,100.00	4,232.50	34,587.25	33,512.75
General Administrative	65,100.00	4,167.50	25,452.50	39,647.50
Legal Counsel	120,000.00	4,580.00	33,490.00	86,510.00
Special Accounting	5,000.00	0.00	0.00	5,000.00
City of DeLand Tax Increment District	40,000.00	0.00	38,304.00	1,696.00
Tax Collector & Appraiser Fee	500,000.00	5,775.30	267,354.50	232,645.50
TPA Services	400,000.00	57,619.50	244,257.50	155,742.50
Eligibility / Enrollment	85,745.00	10,626.00	24,003.00	61,742.00
Healthy Communities	72,036.00	5,352.78	33,913.98	38,122.02
Application Screening	205,477.00	12,817.08	79,683.61	125,793.39
Workers Compensation Claims	15,000.00	0.00	15,155.81	(155.81)
Other Operating Expenditures	10,000.00	148.75	1,220.00	8,780.00
Total Other Expenditures	<u>1,720,458.00</u>	<u>122,926.43</u>	<u>881,285.92</u>	<u>839,172.08</u>

See Accountants' Compilation Report

West Volusia Hospital Authority
Statement of Revenue and Expenditures
Modified Cash Basis
Budget and Actual
For the 1 Month and 6 Months Ended March 31, 2017

	<u>ANNUAL BUDGET</u>	<u>CURRENT PERIOD ACTUAL</u>	<u>YEAR TO DATE ACTUAL</u>	<u>BUDGET BALANCE</u>
Total Expenditures	<u>18,096,855.00</u>	<u>1,865,256.49</u>	<u>8,955,006.06</u>	<u>9,141,848.94</u>
Excess (Deficit)	<u><u>(5,464,554.00)</u></u>	<u><u>(1,565,284.89)</u></u>	<u><u>2,477,223.08</u></u>	<u><u>(7,941,777.08)</u></u>

West Volusia Hospital Authority
Schedule I - Healthcare Expenditures
Modified Cash Basis
Budget and Actual
For the 1 Month and 6 Months Ended March 31, 2017

	<u>ANNUAL BUDGET</u>	<u>CURRENT PERIOD ACTUAL</u>	<u>YEAR TO DATE ACTUAL</u>	<u>BUDGET BALANCE</u>
Healthcare Expenditures				
Adventist Health Systems				
Florida Hospital DeLand	2,675,474.50	352,648.43	1,405,946.06	1,269,528.44
Florida Hospital Fish Memorial	2,675,474.50	364,983.35	1,838,050.99	837,423.51
Florida Hospital DeLand - Physicians	112,500.00	22,884.45	63,780.11	48,719.89
Florida Hospital Fish - Physicians	112,500.00	26,269.87	69,356.58	43,143.42
Northeast Florida Health Services				
NEFHS - Pharmacy	688,938.00	58,930.78	291,284.32	397,653.68
NEFHS - Obstetrics	30,000.00	1,356.25	12,817.75	17,182.25
NEFHS - Consolidated Primary Care Clinics	730,000.00	35,900.55	271,456.57	458,543.43
Specialty Care				
Specialty Care Services	2,612,610.00	474,608.38	1,866,176.43	746,433.57
Laboratory Services	307,065.00	51,876.30	188,013.79	119,051.21
County Medicaid Reimbursement	2,197,953.00	182,706.67	1,096,240.02	1,101,712.98
Florida Dept of Health Dental Svcs	300,000.00	11,429.53	48,824.02	251,175.98
Good Samaritan				
Good Samaritan Health Clinic	25,000.00	1,863.50	10,591.00	14,409.00
Good Samaritan Dental Clinic	57,712.00	3,300.00	15,620.00	42,092.00
Global Healthcare System				
Global Health Care	150,000.00	1,064.00	8,242.80	141,757.20
Global Healthcare System Urgent Care	200,000.00	244.00	1,252.00	198,748.00
The House Next Door	181,975.00	7,730.28	46,347.00	135,628.00
The Neighborhood Center	70,000.00	3,132.50	44,436.68	25,563.32
Rising Against All Odds	210,000.00	21,879.34	130,787.86	79,212.14
Community Legal Services	80,000.00	1,239.58	1,883.61	78,116.39
Hispanic Health Initiatives	100,000.00	5,700.00	12,400.00	87,600.00
Stewart Marchman - ACT				
SMA - ARNP Services at THND	7,000.00	492.00	1,971.50	5,028.50
SMA - Homeless Program	78,336.00	7,529.03	41,571.43	36,764.57
SMA - Residential Treatment	450,000.00	66,104.00	301,170.55	148,829.45
SMA - Baker Act - Match	425,000.00	23,861.89	154,984.49	270,015.51
Health Start Coalition of Flagler & Volusia				
HSCFV - Outreach	73,500.00	5,659.20	36,218.88	37,281.12
HSCFV - Fam Services	68,900.00	5,079.96	34,995.28	33,904.72
HCRA				
H C R A - In County	400,000.00	3,856.22	36,572.62	363,427.38
H C R A - Outside County	419,612.00	0.00	42,727.80	376,884.20
Other Healthcare Costs	936,847.00	0.00	0.00	936,847.00
Total Healthcare Expenditures	16,376,397.00	1,742,330.06	8,073,720.14	8,302,676.86

West Volusia Hospital Authority
Schedule II - Statement of Revenue and Expenditures
Modified Cash Basis
For the 1 Month and 6 Months Ended March 31, 2017 and March 31, 2016

	1 Month Ended March 31, 2017	1 Month Ended March 31, 2016	6 Months Ended March 31, 2017	6 Months Ended March 31, 2016
Revenue				
Ad Valorem Taxes	288,771.35	469,147.77	11,343,891.11	11,422,976.42
Investment Income	5,591.83	6,198.98	29,908.33	30,691.50
Rental Income	5,608.42	5,573.00	33,650.52	33,438.00
Other Income	0.00	0.00	24,779.18	68.00
Total Revenue	<u>299,971.60</u>	<u>480,919.75</u>	<u>11,432,229.14</u>	<u>11,487,173.92</u>
Healthcare Expenditures				
Adventist Health Systems	766,786.10	447,537.14	3,377,133.74	1,868,189.07
Northeast Florida Health Services	96,187.58	218,495.97	575,558.64	705,719.18
Specialty Care	526,484.68	164,067.93	2,054,190.22	1,067,846.86
County Medicaid Reimbursement	182,706.67	175,195.50	1,096,240.02	1,051,173.00
The House Next Door	7,730.28	0.00	46,347.00	23,024.36
The Neighborhood Center	3,132.50	2,180.22	44,436.68	14,660.10
Rising Against All Odds	21,879.34	13,314.00	130,787.86	61,819.34
Community Legal Services	1,239.58	0.00	1,883.61	0.00
Hispanic Health Initiatives	5,700.00	0.00	12,400.00	0.00
Florida Dept of Health Dental Svcs	11,429.53	0.00	48,824.02	0.00
Good Samaritan	5,163.50	6,448.50	26,211.00	41,393.00
Global Healthcare System	1,308.00	784.00	9,494.80	896.00
Stewart Marchman - ACT	97,986.92	35,202.37	499,697.97	360,902.64
Health Start Coalition of Flagler & Volusia	10,739.16	10,167.34	71,214.16	29,390.88
H C R A	3,856.22	(18,343.92)	79,300.42	103,285.01
Total Healthcare Expenditures	<u>1,742,330.06</u>	<u>1,055,049.05</u>	<u>8,073,720.14</u>	<u>5,328,299.44</u>
Other Expenditures				
Advertising	17,085.58	2,451.36	63,098.48	8,317.94
Annual Independent Audit	0.00	3,100.00	15,500.00	13,100.00
Building & Office Costs	521.44	384.00	5,265.29	1,899.65
General Accounting	4,232.50	3,566.50	34,587.25	29,941.00
General Administrative	4,167.50	6,903.75	25,452.50	30,458.75
Legal Counsel	4,580.00	6,920.00	33,490.00	50,010.00
City of DeLand Tax Increment District	0.00	0.00	38,304.00	24,299.00
Tax Collector & Appraiser Fee	5,775.30	9,382.95	267,354.50	279,971.62
TPA Services	57,619.50	133,637.00	244,257.50	331,113.00
Eligibility / Enrollment	10,626.00	798.00	24,003.00	22,553.00
Healthy Communities	5,352.78	5,048.57	33,913.98	33,552.58
Application Screening	12,817.08	0.00	79,683.61	41,358.32
Workers Compensation Claims	0.00	0.00	15,155.81	15,389.78
Other Operating Expenditures	148.75	2,767.50	1,220.00	16,509.41
Total Other Expenditures	<u>122,926.43</u>	<u>174,959.63</u>	<u>881,285.92</u>	<u>898,474.05</u>

West Volusia Hospital Authority
Schedule II - Statement of Revenue and Expenditures
Modified Cash Basis

For the 1 Month and 6 Months Ended March 31, 2017 and March 31, 2016

	1 Month Ended March 31, 2017	1 Month Ended March 31, 2016	6 Months Ended March 31, 2017	6 Months Ended March 31, 2016
Total Expenditures	<u>1,865,256.49</u>	<u>1,230,008.68</u>	<u>8,955,006.06</u>	<u>6,226,773.49</u>
Excess (Deficit)	<u>(1,565,284.89)</u>	<u>(749,088.93)</u>	<u>2,477,223.08</u>	<u>5,260,400.43</u>

LEGAL UPDATE MEMORANDUM

TO: WVHA Board of Commissioners

DATE: April 11, 2017

FROM: Theodore W. Small, Jr.

RE: West Volusia Hospital Authority - Update for April 20, 2017 Regular Meeting

Summarized below are updates on active legal matters/issues for which some new information has become available since my last legal update dated March 7, 2017. This Memorandum will not reflect updates on matters resolved by a final vote of the Board and thereby already summarized in the 3/16/17 Meeting Minutes.

I. WVHA Health Card Program Eligibility Guidelines. [See new info. in italics and bold]

[Refer back to Legal Update Memorandum dated 4/9/14, 7/19/14, 9/17/14, 11/12/14, 2/11/15, 6/10/2015, 10/7/15, 11/11/15, 3/9/16 and 4/12/16 for additional background details.]

From the inception, the Guidelines were adopted from a legal perspective to establish uniform, fair and non-discriminatory standards to comply with the Enabling Legislation's requirement that tax dollars are spent on primarily individuals who are both "residents" of the Tax District and who are "indigent" as defined within the Guidelines.

It is noteworthy that currently the Guidelines are utilized by WVHA in two distinct ways which are often confused by providers, potential providers and applicants for funding:

1. First, they are utilized by WVHA's third party administrator ("TPA"), currently POMCO, as the governing rules for determining who is eligible to receive a WVHA Health Card. Once deemed eligible by POMCO, an applicant receives a Health Card (effective usually for 6 months) which automatically makes them eligible to receive hospital care, primary care, dental care, specialty care and pharmacy benefits at any provider who has signed a funding agreement to provide such services to those who are currently enrolled in the Health Card Program;
2. Second, the Guidelines are incorporated in whole or part as the governing rules for a funded agency to qualify some of their individual clients to become eligible for WVHA reimbursement (at the contracted rate) for services at that agency only. Even though these individuals are generally required to provide the same information, including proof that they have applied for the ACA and that they are not qualified for Medicaid or other affordable private health insurance, the individuals who qualify through these funded agencies do not receive a Health Card and therefore are NOT automatically eligible to receive other healthcare services available at other funded agencies, the hospitals, specialty care providers, pharmacy benefits, etc.

For the next round of overall revisions to the Eligibility Guidelines, Counsel will consult with POMCO and develop a joint recommendation regarding Commissioner Dickinson's concern about the potential overbreadth of "any encumbrances" in the current Eligibility Guidelines concerning what encumbrances will be considered by POMCO when evaluating the equity value of real property. See Eligibility Guidelines Revised 6/16/2016, Section 11:03 Procedures (2. Assets to be considered; b. Equity value of real property other than homestead. The value is verified by the property appraiser of the county in which the property is located. The equity value is determined by subtracting the amount of any encumbrances from the value of the asset).

Counsel anticipates POMCO revising its "Suggested Schedule and Process of WVHA Eligibility Guideline Recommended Changes" to reflect the Board's consensus guidance upon review of the initial draft during the November 17th meeting, including: 1. the addition of DRT and Board members themselves as proposers of EG changes and 2. establishment of an annual EG review schedule starting with a presentation by POMCO of a compilation of proposed changes in March and then after Board review, deliberation and voting by May Regular Meeting, the newly amendments would take effect in June of each year; provided however, the Board would consider amending the EGs more frequently than annually where it is demonstrated by POMCO and/or other proposers that that such exceptional action is necessary to fulfill the public purposes of WVHA.

Counsel has reviewed Pomco's compilation entitled "POMCO March 16, 2017 Eligibility Guidelines Recommended Changes for WVHA Board Review and Approval" and at this time, counsel would have no legal concerns with the Board's approval of all these proposed changes. It should be noted that there is a typo on page 2 in the Overview section; "8 years" should read "8 weeks" in both versions of the question. The following clarifications to proposed language are suggested:

- 1. Regarding the new insert to Section 11.03 concerning victims of domestic violence, rewrite: Assets that are jointly owned by an applicant who is deemed a victim of domestic violence can be excluded when that asset is jointly owned with the accused and the applicant is no longer residing in the homestead.*
 - a. Official court documentation, such as a restraining order, must be supplied as proof that the applicant is a victim of domestic violence.*
 - b. The WVHA Health Card program will require a certified statement from a court official or notarized statement from the applicant attesting that the applicant is unable to liquidate the subject asset because of a domestic violence situation.*
- 2. Regarding assets to be considered "encumbered" under Section 11.03, insert the word "recorded" before lien or mortgage on line 5 of proposal and replace "A private or informal" on line 7 with "An unrecorded".*

In addition, counsel reminds the Board about the consensus reached to collect data on how applicants are hearing about the Health Card program by inserting a question at the beginning of the application: How did you first hear about the WVHA Health Card Program? The Board did not determine what the exact multiple choice question, but counsel suggests something to the effect: a. internet or WVHA webpage; b. printed

advertisement or flyer; c. announcement during a public meeting; d. one of these other entities (circle one): FHD or FHFM hospitals; House Next Door; Rising Against All Odds; The Neighborhood Center; Healthy Start; Hispanic Health; or e. Other (please specify):_____ The choices could be simplified by not naming all the entities and instead state that choice as "d. from the following provider or organization (specify):_____ "

II. Formal Notice of Potential Claim for Damages against WVHA corporately and Chair Ferrari individually by Travis McBride and Central Florida Mental Health Associates, LLC. [See new info. in italics and bold]

[Refer back to Legal Update Memorandum dated 6/10/15 and 8/12/15 for additional background details.]

In a second certified letter to Counsel dated 5/19/2015, McBride's attorney (Gary J. Boynton, Esq. of Winter Park) notified WVHA that McBride and his company intend to sue Chair Ferrari individually and WVHA "corporately". Regarding the basis for the threatened lawsuit, this second letter modifies the original notice by including the following dates of alleged damage:

"The nature of the claim includes, but is not limited to, defamation, slander and interference with their contractual relationship. The onset of these damages began on June 22, 2014 and again on 07/24/14, 07/25/14, 08/22/14, 08/24/14, 08/25/14, 03/11/15, and continuing."

Based on public record search and shared information from Commissioner Ferrari, Attorney Boynton filed the threatened lawsuit on June 16, 2016 against Andy Ferrari individually and West Volusia Hospital Authority as defendants. The Case is pending in the Volusia County Circuit Court (civil) and it has been assigned to Judge Randell H. Rowe. The docket reflects that a 20-day summons was issued for WVHA, but Ms. Long has confirmed that this summons has not been served upon WVHA at its official address. The Complaint available online reveals that Travis McBride is alleging two counts ("tortious interference with a business relationship" and "deceptive and unfair and trade practices") against both WVHA and Ferrari and one count of "defamation" against Ferrari individually. In layman's terms, both counts against WVHA contend that WVHA is liable because Ferrari made statements or took actions that caused harm to Central Florida Mental Health Associates ("CFMHA") while he was acting as the "agent", "servant" or "employee" of WVHA.

As previously authorized by the Board, Counsel intends to vigorously defend these claims against WVHA once it has been properly served. Counsel will depend on DRT to notify Counsel as soon as it receives the summons so that an appropriate response can be filed within the 20-day time limit. Counsel was copied on a letter from the County of Volusia's Legal Department notifying CFMHA's attorney that he had misdirected a summons to the Chair of the County Council instead of directing it to the actual named co-defendant, WVHA. Counsel has been contacted by Attorney Boynton's legal assistant acknowledging that the summons was erroneously served on the Chair of the County Council. Counsel advised the legal assistant that WVHA insists upon formal service of such matters and directed the legal assistant to <http://westvolusiahospitalauthority.org/> in order to obtain contact information.

It is also noteworthy that Attorney Tanner Andrews has notified Counsel that he has entered an appearance as defense counsel to represent Commissioner Ferrari individually in this lawsuit. Attorney Andrews has also made Counsel aware that on December 6, 2016, Attorney Boynton filed Suggestion of Bankruptcy on behalf of Mr. McBride but to date the trustee in the federal bankruptcy case has not entered an appearance to assert any rights to the case as a potential asset of the bankruptcy estate. Attorney Andrews has made Counsel aware that McBride's personal bankruptcy case resulted in discharge with the bankruptcy trustee ignoring the lawsuit as an asset, and that on March 1st Central Florida Mental Health Associates notified the Circuit Court that it filed for Chapter 7 bankruptcy protection on January 30, 2017.

III. Workers Compensation Case. *[See new info. in italics and bold]*

[Refer back to Legal Update Memorandum dated 1/7/15, 5/8/13, 11/7/12, 8/10/12, 3/10/15 and 2/10/16 for additional background details.]

Contrary to most common sense expectations, the Authority--which terminated its last employees in 2006 and sold the hospitals in 2000--remains liable on periodic "tail" treatment claims for injuries to its former hospital employees. Since 2000, these treatment claims have been processed (assessed for relationship to original injury and eligibility for payment determined) by Adventist Health System's Worker's Compensation Department ("Adventist"). Adventist has retained specialized worker's compensation counsel (Jeffrey J. Branham of the firm of Dean, Ringers, Morgan & Lawton, P.A.) to handle any of the specialized legal matters that come up from time to time. The undersigned oversees the separately retained counsel by reviewing and giving provisional approval for Adventist to pay their bills. Of the many worker's compensation claims that were active in 2000, by 2007 only one former hospital workers continues to actively treat and submit substantial claims.

The Adventist Claims Manager, Rhonda Fletcher, who is responsible for this one remaining claim provided Counsel with an update on the current status of Adventist's periodic filings to the State's Special Disability Trust Fund ("SDTF") for reimbursement of WVHA's payments on behalf of this one remaining claimant who is 81 years old. Ms. Fletcher with counsel from Attorney Branham submitted the latest request to SDTF on September 8, 2016 seeking on behalf of WVHA reimbursement at 100% of its payments of \$62,859.89 which WVHA has reimbursed to Adventists since the last request to continue treatments for this claimant. SDTF's published turnaround on such requests is 36 months, but it has generally processed payments within a year if it doesn't find any errors on the request. Counsel has notified DRT of this anticipated reimbursement so that it can be tracked appropriately on all accounting records.

IV. General Compliance with the Sunshine Law:

The Government in the Sunshine Law, section 286.011, Florida Statutes, provides in pertinent part:

'All meetings of any board or commission . . . of any agency or authority of any county, municipal corporation, or political subdivision . . . at which official acts are to be taken are declared to be public meetings open to the public at all times, and no resolution, rule, or formal action shall be considered binding except as taken or made at such meeting.'

It is impossible to summarize all relevant points of the Sunshine Law, but please note that courts uniformly interpret this provision as prohibiting two or more members of the same board or commission from discussing any matter on which foreseeable action will be taken by the public board or commission. (If your discussion with another board member concerns personal or business matters unrelated to the Authority, the Sunshine Law does not apply)

Please note that the Sunshine Law DOES apply to "off-the record" chats during meetings or during breaks, written correspondence, telephone conversations and e-mails exchanges between two or more board members if such communication concerns matters likely to come before the Board. It also prohibits nonmembers (staff, lawyers, accountants, and members of the public) from serving as liaisons between Board members concerning matters likely to come before the Board.

Please note that as the Board's attorney, Counsel's role is to assist the aggregate Board with legal compliance, not to provide individualized legal opinions to a particular board member. For specific questions concerning your own compliance, please direct those inquiries to the Florida Commission on Ethics. Their website can be found at <http://www.ethics.state.fl.us/>. Although their website material suggests the need for a written inquiry, each individual Board member is a "public officer" and thereby has the right to obtain informal telephone advice on common questions at (850) 488-7864.