

West Volusia Hospital Authority
WVHA BOARD OF COMMISSIONERS REGULAR MEETING
July 19, 2018 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 Workshop Meeting June 20, 2019
 - B. Joint Meeting Minutes with the CAC June 20, 2019
5. Citizens Comments
6. Citizens Advisory Committee (CAC), Elmer Holt, Chair
7. Reporting Agenda
 - A. UMR June Report, Donna Lupo, Strategic Account Executive
 - B. FQHC Report, Laurie Asbury, CEO, Northeast Florida Health Services, Inc.
d/b/a/ Family Health Source (FHS) June Report
 - C. The House Next Door (THND) June HealthCard Report
8. Contractual Utilization Reports to the WVHA Board of Commissioners
 - A. Steve Parris, Community Health Manager, Halifax Healthy Communities-Outreach Program
 - B. Gail Hallmon, Operations Director, The House Next Door (THND)-Therapeutic Services
9. Discussion Items
 - A. CAC Applicant Jacquie Lewis (application attached)
 - B. Proposed Millage Rate
 - C. Rising Against All Odds Site Visit Write Up FYE 2019
 - D. Site Visits 2018-2019 - DRT Engagement Letter attached
 1. Family Health Source Consolidated Clinics/Pharmacy/OB
 2. Stewart-Marchman-Act (SMA) Baker Act Services
 3. SMA Residential Treatment Bed Services
 4. Healthy Start Coalition of Flagler & Volusia (HSCFV) WIS/NOS Services and Family Services Coordinator
 - E. Follow-Up Items
 1. Advent Health DeLand (AHD) and Advent Health Fish Memorial (AHFM) Status of Future WVHA Funding
 2. Johnson & Blanton Letter of Agreement/Scope of Work
10. Finance Report
 - A. June Financials
11. Legal Update
12. Commissioner Comments
13. Adjournment

**WEST VOLUSIA HOSPITAL AUTHORITY
WVHA BOARD OF COMMISSIONERS WORKSHOP**

DeLand City Hall
120 S. Florida Avenue, DeLand, Florida
June 20, 2019
4:00 p.m.

Those in Attendance:

Commissioner Dolores Guzman
Commissioner John Hill
Commissioner Judy Craig
Commissioner Voloria Manning
Commissioner Andy Ferrari

CAC Members Present:

Ann Flowers
Lynn Hoganson
Elmer Holt
Donna Pepin
Linda White
Althea Whittaker

CAC Members Absent:

Sarah Prado (Excused)
Alissa Lapinsky (Excused)
Jenneffer Pulapaka (Unexcused)

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 Craig called the meeting to order. The meeting took place at DeLand City Hall, 120 S. Florida Avenue, DeLand, Florida, having been legally noticed in the Daytona Beach News-Journal, a newspaper of general circulation in Volusia County.

Approval of Proposed Agenda

Motion 057 – 2019 Commissioner Guzman motioned to approve the agenda as presented. Commissioner Hill seconded the motion. The motion passed unanimously.

Family Health Source (FHS) Primary Care, OB/GYN and Pharmacy Services FY 2019-2020

Ms. Long advised the Board that Ms. Laurie Asbury, CEO, FHS advised that she was running late but would be in attendance shortly.

WVHA Administrative Services FY 2019-2020

The House Next Door (THND) HealthCard Screening Process

There was not a representative present for THND at the time of their agenda item.

Rising Against All Odds (RAAO) Proposal for Prescreening

Ms. Brenda Flowers, CEO, and Mr. Shannon Sargent, Administrative Services Manager presented to the Board for questioning.

4:18 p.m. Commissioner Andy Ferrari arrived at the meeting.

Commissioner Hill asked Ms. Flowers what was the percentage of clients that she prescreens who ultimately obtain the WVHA HealthCard (HC)?

Ms. Flowers explained that she can only be compensated for those clients who successfully complete and secure the WVHA HC.

Commissioner Hill asked if those clients who are not successful in obtaining the WVHA HC, do they then go on to obtain Medicaid or an alternative health option?

Ms. Flowers replied that they are working with the indigent and marginalized population, therefore, the WVHA HC is most likely their only source for obtaining medical care. They have transitioned approximately 2% over to Medicaid, Medicare or Social Security.

Commissioner Hill asked Ms. Flowers what percentage of those individuals who are tested and subsequently treated for HIV or Hepatitis C and the outcome is they no longer have HIV or Hepatitis C?

Ms. Flowers replied that 80% are linked to care right away and then they get those individuals an appointment with the Health Department. She continued to explain that RAAO is implementing a new 340B program made available through Health Resources and Services Administration (HRSA) and they will partner with an infectious disease provider and the clients can be seen the same day. Further she stated that there is no cure for HIV.

Commissioner Hill clarified his question was in terms of transmission rates being reduced or eradicated.

Ms. Flowers responded that there are no clinicians at RAAO and they hand these patients off for treatment.

Commissioner Ferrari asked Ms. Flowers if once RAAO has completed the prescreening process for a new HC applicant, does that HC member then reapply at THND or do they reapply again through RAAO?

Ms. Flowers replied that RAAO would process the reapplications for eligible HC members.

Family Health Source (FHS) Primary Care, OB/GYN and Pharmacy Services FY 2019-2020

Ms. Laurie Asbury, CEO, FHS arrived at the meeting and presented for Board questioning.

There was Commissioner discussion as to how the WVHA HC members receive their care at FHS.

Ms. Asbury explained that they are not provided with a listing of current HC members and are only made aware of the HC patient population once that HC member contacts FHS and schedules an appointment. The frequency with which the HC members are seen are dictated by their health needs, their medications, and the primary care physicians' recommendations.

Mr. Small acknowledged that Ms. Asbury explained that, as a Federally Qualified Health Center (FQHC), that FHS qualifies for a special Medicaid rate. Does FHS receive any lower rates of reimbursement from any other payer source?

Ms. Asbury relied no.

Commissioner Hill asked Ms. Asbury about their self-pay/sliding-fee-schedule and asked what were those rates?

Ms. Asbury apologized and explained that the sliding-fee-schedule is based upon income which could be as low as \$25.00.

Commissioner Hill continued by stating that the Medicaid rate that the FQHC qualifies for is more than double what a private practitioner is paid by Medicaid. Therefore, he believed that what was being discussed was not a fair comparison when speaking about patients with Medicaid that access healthcare at other locations outside of the FHS clinic. Commissioner Hill suggested that the WVHA should be reimbursing at the private practitioner Medicaid rate of reimbursement rather than the enhanced FQHC Medicaid rate.

Commissioner Ferrari pointed out that FHS also provides the WVHA with the greatly discounted 340B drug program.

There was discussion as to why no other primary care providers are funded by the WVHA.

Mr. Small reminded all that the WVHA formerly and unsuccessfully funded Global Healthcare for primary care services, but because they couldn't make a referral into the 340B Pharmacy, they backed out of the WVHA funding.

Healthy Communities Outreach Services

Mr. Steve Parris, Community Health Manager, Healthy Communities presented to the Board for questioning.

There were no questions.

The House Next Door (THND) HealthCard Screening and Approval Process

Ms. Gail Hallmon, Operations Director, THND presented to the Board for questioning.

Commissioner Ferrari asked Ms. Hallmon how THND's transition process has gone thus far since they took over this process in January of 2019?

Ms. Hallmon expressed that it is going quite well, and she had prepared a report to update the Board during the Joint Meeting that is commencing upon the conclusion of this Workshop Meeting.

Commissioner Hill expressed that he was trying to gain a better understanding of the service that RAAO provides in prescreening of WVHA HC Applications and how that assists THND in their process. Further, what are the costs savings benefits to THND with RAAO's prescreening services?

Ms. Hallmon replied that THND does not reimburse RAAO for their prescreening services. That is a separate contract that RAAO has with the WVHA. RAAO's prescreening does not assist THND in their process as they still have to go through all the same steps in their process to reach a final determination.

Commissioner Hill stated that he was still unclear and was trying to understand the costs savings for the WVHA. If RAAO prescreens the WVHA HC application, that does not help THND with their process?

Ms. Hallmon stated no. She continued by opining that it was more of a benefit for the WVHA and those clients that RAAO reaches through their outreach services.

Commissioner Hill continued by asking Ms. Hallmon about a previous conversation he had with her in which she stated that 81% of HC Applicants are renewal applicants. He asked if the process was different or more streamlined as a renewal versus a new applicant?

Ms. Hallmon explained that the process is the same whether it's a new applicant or a renewal applicant, as the same verifications have to be performed for either a new applicant or a renewal applicant.

Commissioner Hill asked if this process could be streamlined?

Ms. Hallmon replied only if the WVHA Board changes their Eligibility Guidelines (EG's).

Commissioner Hill stated that the application process sounds pretty labor intensive. He had two last questions; first, what are the total dollar amounts that THND has been reimbursed on average?

Ms. Hallmon explained that their WVHA contract includes 250 applications per month, anything over that 250 per month is billed at \$18.00 each, anything under that 250 per month is reduced by \$18.00 each. THND has been going over the 250 applications almost every month. She has taken the total administrative dollars that THND has received

through the month of May 2019 and divided that by the number of applications they have processed and that total averaged \$122.00 per application.

Commissioner Hill continued on to his last question; how does the application differ if a person shows up with a letter of attestation from the Farm Workers Association?

Ms. Hallmon explained that they do not have to apply for Medicaid because they do not qualify for Medicaid and they do not have to present with a social security card, because they do not have one.

Ms. Graciela Acosta, Supervisor HealthCard Program, THND explained further that the letter is attesting to the WVHA that this consumer does not have a social security number and therefore does not have to apply for the Affordable Care Act (ACA) coverage or Medicaid because they do not qualify for either program. Further, the letter of attestation certifies that they are residents of the taxing district.

Chair Craig asked how is the rapport between THND and UMR?

Both Ms. Hallmon and Ms. Acosta stated that they have good lines of communication and response times with UMR.

Commissioner Manning asked if the WVHA should reconsider the duration of the eligibility for individual HC members based upon the high percentage of renewal applicants per Ms. Hallmon's earlier statement.

Ms. Hallmon stated that Medicaid extends eligibility for one year versus the WVHA at six months.

Emergency Medicine Professionals (EMPros)

Chair Craig asked CAC Chair Elmer Holt if he would address the Board in regards to the Committees rationale in sending the EMPros funding application back to the Board to make a final determination.

Mr. Holt explained that there was a majority opinion, not a unanimous opinion, that this topic be reversed back to the Board. He believed that the challenge was that there were too many moving parts in regards to contractual relationships. He further stated that the Committee received very valuable information from Dr. Hill regarding the history with the hospitals and their employed hospitalists. The WVHA funds were being used to pay hospitalists and then the emergency room physicians and that there was some perceived priority given to the hospitalists. In closing, the Committee believed that the emergency physicians should be paid for the services that they provide.

Mr. Eric Ostarly, CFO, Advent Fish Memorial wanted the Board to understand where the hospitals stood on this matter. The hospitals are a pass thorough entity in this contract with the WVHA; they pass on the payments to the hospitalists and the emergency room physicians (EMPros). The hospitals are strictly the "middleman" for this contract. There are no other payments made to EMPros outside of this agreement. There is no priority given to these payments. Payments are made as claims are submitted. There have been some recent delays in payments from UMR, as previously stated.

Commissioner Hill wanted to clear this up a little better for the Board because he didn't believe the entire picture was being presented. The hospitalists are employed by Advent Health. EMPros had been told, after a conversation he had with Dr. Charles Duva, Managing Partner, EMPros, that it may come April of any given year that there is no more money allotted for their services because that money had already been spent paying the hospitalists who are, again, employed by Advent Health. If a WVHA HC member is seen in the emergency room (ER), EMPros can go potentially 7 or 8 months and not get paid for treating that patient, based upon the physician services WVHA budget being exhausted at any given time. The hospitalists, until several years ago, were not employed by the hospitals. He asked if the hospitals were taking these budgeted dollars and paying the hospitalists directly as a direct line item payment or is this a bundled payment as a part of their employment agreement with the hospitals?

Mr. Ostarly replied that this contract with the WVHA reimburses both the hospitalists and EMPros. The claims are submitted in an Excel spreadsheet as they are incurred. These claims are currently split roughly 50/50 and there is no priority given the hospitalist claims. There is more volume on the EMPros side but lower rates of reimbursement; there is lower volume on the hospitalist side but higher rates of reimbursement.

Commissioner Hill wanted to stress his point that the hospitals employ the hospitalists, they do not employ EMPros.

Mr. Ostarly agreed.

Commissioner Hill asked if it was fair to say that the dollar amount that was allocated for the emergency room physicians has been reduced, historically, because now the hospitals are using the money to pay the hospitals own hospitalists?

Mr. Ostarly responded that, "the distribution of the dollars could be different, yes" but that's not intentional by the hospitals.

Commissioner Hill stated that the point he was trying to make was not that "it could be different", rather, it is different. You have an emergency room group that staffs your emergency room (ER) 24 hours a day, 7 days per week, 365 days per year and the reimbursement to them has gone down, historically, from the hospitals, because now the hospitals are paying their own line item to employed hospitalists. Commissioner Hill took it a step further, using himself as an example, and if he was a hospitalist employed by the hospital the check that the hospital is paid by the WVHA does not go to him as a hospitalist, but that check goes to the hospital.

Mr. Ostarly explained that the payment does not go to the hospital it goes directly to the hospitalist.

Commissioner Hill asked if this WVHA payment goes directly to the individual hospitalists on top of their employment agreement with the hospital?

Mr. Ostarly said yes on top of their employment agreement.

Commissioner Hill asked why is that? If they are employed by the hospitals, why are they being paid on top of that employee salary as opposed to the physicians that are not employed by the hospitals?

Mr. Ostarly responded that he was not prepared to respond to this inquiry today.

Commissioner Hill asked when was this ever decided? Because the hospitals are sending a message to physicians that are serving the indigent patient that if they are not employed by the hospitals they are out of luck.

Mr. Ostarly admitted that he would like for the hospitals to get out of the middle of this contract.

Commissioner Ferrari asked how long has this contract has been in existence?

Mr. Ostarly responded since about 2007.

Commissioner Ferrari asked how much is EMPros compensated?

Mr. Ostarly said around \$65.00 per visit.

Commissioner Ferrari asked that the hospitalists receive \$300.00 per admission, not per day?

Mr. Ostarly responded \$300.00 per admission.

Mr. Ostarly continued to state that, from a hospital perspective, they would be agreeable to allocate some of those budgeted dollars to help solve this matter.

Commissioner Hill was concerned and wanted to avoid the radiologists, general surgeons, urologists, etc. coming before this Commission requesting direct funding from the WVHA.

Commissioner Hill further stated that he was impressed that the hospitals were willing to allocate some of that WVHA physician services funding to EMPros, as he too was in support of that.

Mr. Small wanted to state that it would be very unusual for this Board to disassociate the institution where the physician is working and providing services from the contracting in terms of that reimbursement. Every other entity that is receiving WVHA funding, they receive the funding and in turn pay their own medical providers. He was concerned with the hospital stepping out of their role of supervising their own institution and paying the people who they choose to work in their ER. Federal law requires them to staff their ER and have physicians reimbursed. He cautioned the Board to really think this thorough before taking that step.

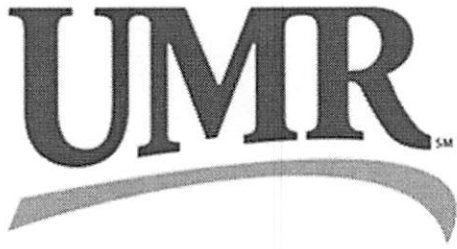
Chair Craig agreed with Attorney Small and believed that this Board had no business of going into the business of employing the doctors that work in the hospital.

Commissioner Comments

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

Adjournment,

Judy Craig, Chair



UMR

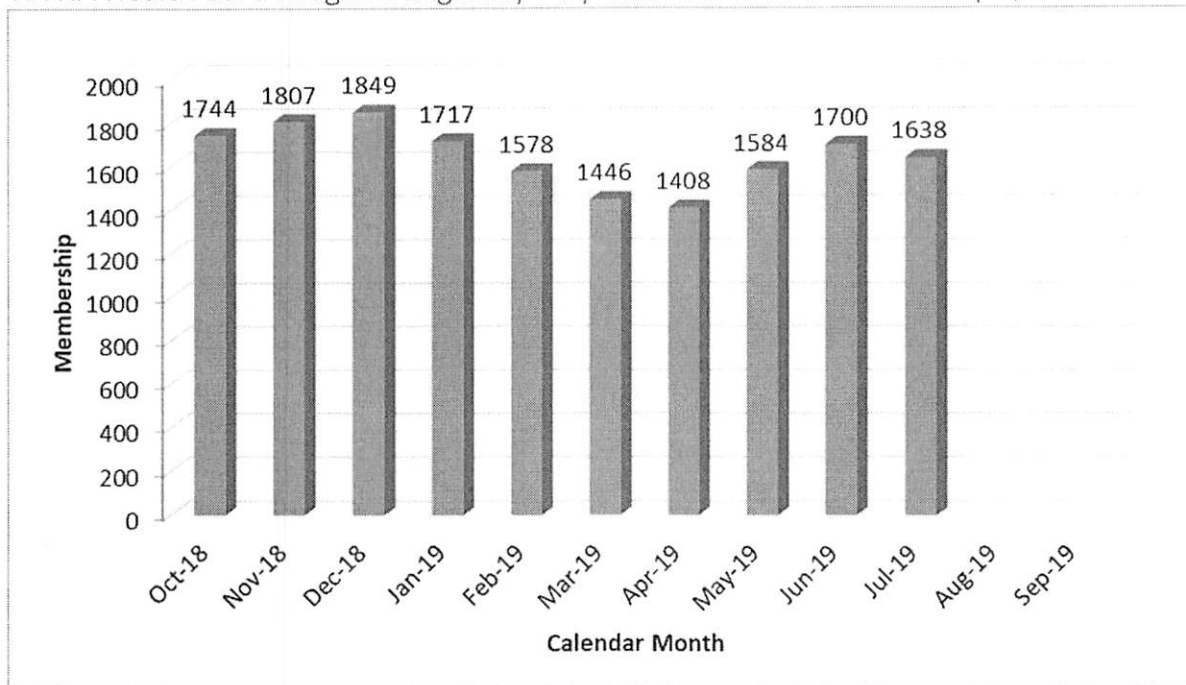
July 18, 2019

Submission Report for WVHA Board Members

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WVHA Health Card Program Eligibility – by Calendar Month – as of July 1, 2019

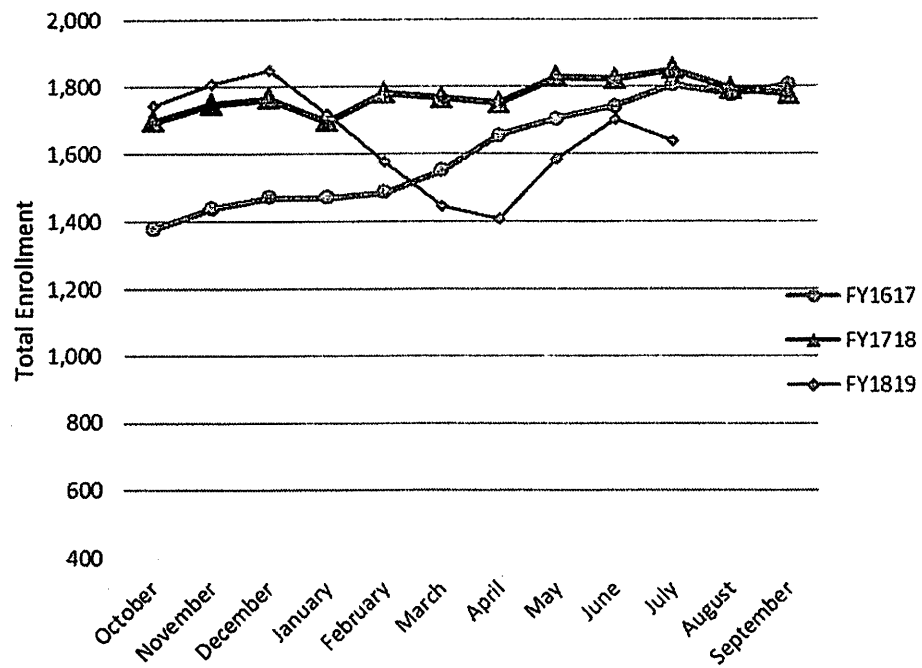


Eligibility reported above reflects eligibility as of the first of each month.

As of July 1, 2019, total program eligibility was 1,638 patients.

WVHA Enrollment by Fiscal Year – as of July 1, 2019

WVHA Enrollment By Fiscal Year	
Month of Fiscal Year	FY1819
October	1,744
November	1,807
December	1,849
January	1,717
February	1,578
March	1,446
April	1,408
May	1,584
June	1,700
July	1,638
August	
September	
Grand Total	16,471



WVHA Enrollment by Zip Code – as of July 1, 2019

WVHA Enrollment by Zip Code by Month					
Zip Code	May-19	Jun-19	Jul-19	Aug-19	Sep-19
32102	5	5	5		
32130	62	62	53		
32180	106	106	97		
32190	19	19	20		
32706	2	2	2		
32713	64	64	60		
32720	362	362	327		
32721	4	4	3		
32724	285	285	286		
32725	334	334	336		
32728	3	3	3		
32732	1	1	0		
32738	294	294	288		
32744	26	26	25		
32753	1	1	1		
32759	1	1	1		
32763	113	113	112		
32764	15	15	15		
32774	3	3	2		
32762	1	0	0		
32763	107	113	112		
32764	13	15	15		
32774	3	3	2		

Medical and Prescription Drug Claim Data

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

	FY1819				
Month	Drug Costs	Dispensing Fee Less Copayments	Total Costs	Total Rx's Filled	Avg Cost Per Rx
October	\$55,005.45	\$7,661.22	\$62,666.67	3,451	\$18.16
November	\$55,658.13	\$7,008.54	\$62,666.67	3,157	\$19.85
December	\$85,000.00	\$4,502.16	\$89,502.16	2,027	\$44.15
January	\$66,232.60	\$4,930.62	\$71,163.22	2,221	\$32.04
February	\$53,124.87	\$5,151.28	\$58,276.15	2,324	\$25.08
March	\$35,517.40	\$4,886.40	\$40,403.80	2,220	\$18.20
April	\$128,722.39	\$5,223.66	\$62,690.09	2,353	\$26.64
May	\$117,732.26	\$5,170.39	\$62,690.09	2,329	\$26.92
June					
July					
August					
September					
Grand Total	\$596,993.10	\$44,534.27	\$510,058.85	20,082	\$25.40

Combined Medical Costs (as of Claims Payment through 6/30/2019)

Medical and pharmacy costs are reported on a paid basis

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
FY1819	\$4,398,811.94	\$331,434.04	\$707,190.59	\$2,482,648.51	\$107,678.12	\$510,058.85	\$8,537,822.05	14,833	\$575.60	\$296.56	\$22.34	\$47.68	\$167.37	\$34.39
October	\$14,319.08	\$64,081.46	\$124,186.81	\$351,047.84	\$0.00	\$62,666.67	\$616,301.86	1,744	\$353.38	\$8.21	\$36.74	\$71.21	\$201.29	\$35.93
November	\$64,583.26	\$26,032.33	\$74,964.35	\$186,963.92	\$0.00	\$62,666.67	\$415,210.53	1,807	\$229.78	\$35.74	\$14.41	\$41.49	\$103.47	\$34.68
December	\$261,035.64	\$65,053.76	\$91,409.27	\$305,262.72	\$0.00	\$89,502.16	\$812,263.55	1,849	\$439.30	\$141.18	\$35.18	\$49.44	\$165.10	\$48.41
January	\$1,068,458.10	\$23,389.99	\$53,066.17	\$287,311.72	\$39,478.62	\$71,163.22	\$1,542,867.82	1,717	\$898.58	\$622.28	\$13.62	\$30.91	\$167.33	\$41.45
February	\$2,464,398.16	\$36,655.51	\$1,991.59	\$287,643.00	\$0.00	\$58,276.15	\$2,848,964.41	1,578	\$1,805.43	\$1,561.72	\$23.23	\$1.26	\$182.28	\$36.93
March	\$385,346.04	\$34,197.22	\$64,117.36	\$250,263.73	\$23,710.35	\$40,403.80	\$798,038.50	1,446	\$551.89	\$266.49	\$23.65	\$44.34	\$173.07	\$27.94
April	-\$301,802.24	\$30,259.72	\$156,056.93	\$250,402.07	\$0.00	\$62,690.09	\$197,606.57	1,408	\$140.35	-\$214.35	\$21.49	\$110.84	\$177.84	\$44.52
May	\$107,230.45	\$28,429.68	\$95,876.69	\$377,100.46	\$44,489.15	\$62,690.09	\$715,816.52	1,584	\$451.90	\$67.70	\$17.95	\$60.53	\$238.07	\$39.58
June	\$335,243.45	\$23,334.37	\$45,521.42	\$186,653.05	\$0.00		\$590,752.29	1,700	\$347.50	\$197.20	\$13.73	\$26.78	\$109.80	\$0.00
July							\$0.00							
August							\$0.00							
September							\$0.00							
Grand Total	\$4,398,811.94	\$331,434.04	\$707,190.59	\$2,482,648.51	\$107,678.12	\$510,058.85	\$8,537,822.05	14,833	\$575.60	\$296.56	\$22.34	\$47.68	\$167.37	\$34.39

PCP Encounter Claims by Clinic by Month (as of Claims Payment through 6/30/2019)

	FY1819					
Month	NEFHS Deland	NEFHS Deltona	NEFHS Pierson	NEFHS Stone Street	NEFHS Daytona	Total
October	453	511	158	0	19	1,141
November	274	358	85	0	4	721
December	338	296	121	0	13	768
January	197	233	55	0	11	496
February	33	26	8	0	3	70
March	174	238	103	0	10	525
April	668	634	161	0	17	1,480
May	247	269	67	0	7	590
June	634	643	173	0	15	1,465
July						0
August						0
September						0
Grand Total	3,018	3,208	931	0	99	7,256

PCP encounter claims are reported on a paid basis

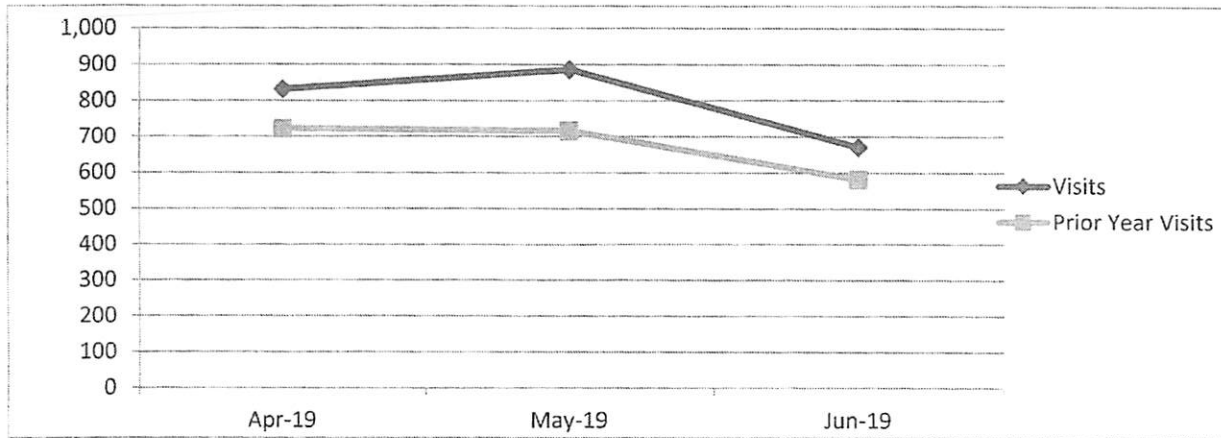
Specialty Care Services by Specialty – Top 25 (June, 2019)

SPECIALTY CARE SERVICES BY SPECIALTY - TOP 25 FOR JUNE					
Order	SPECIALTY	Unique Patients	Claim Volume	Paid	Cost Per Patient
1	Hematology Oncology	23	58	\$ 23,608.07	\$ 407.04
2	Cardiovascular Diseases	21	27	\$ 13,874.93	\$ 513.89
3	Internal Medicine	48	73	\$ 13,706.31	\$ 187.76
4	Physical & Occupational Therapy	40	138	\$ 11,240.14	\$ 81.45
5	Obstetrics & Gynecology	26	29	\$ 11,198.84	\$ 386.17
6	Radiology	181	272	\$ 11,137.32	\$ 40.95
7	Ophthalmology	48	53	\$ 10,629.75	\$ 200.56
8	Oncology	12	29	\$ 9,722.91	\$ 335.27
9	Pulmonary Medicine	28	73	\$ 9,577.36	\$ 131.20
10	Surgery Center	12	13	\$ 8,862.05	\$ 681.70
11	Gastroenterology	42	48	\$ 8,701.58	\$ 181.28
12	Anesthesiology	48	52	\$ 6,939.59	\$ 133.45
13	Pain Management	37	43	\$ 6,928.16	\$ 161.12
14	Orthopedic Surgery	33	51	\$ 6,512.63	\$ 127.70
15	Family Practice	33	54	\$ 4,810.29	\$ 89.08
16	Urology	14	16	\$ 3,371.91	\$ 210.74
17	Podiatry	14	20	\$ 2,577.88	\$ 128.89
18	Nurse Anesthetist	17	18	\$ 2,550.62	\$ 141.70
19	Infectious Diseases	19	23	\$ 2,463.40	\$ 107.10
20	Nurse Practitioner	30	31	\$ 2,393.12	\$ 77.20
21	General Surgery	7	10	\$ 1,911.86	\$ 191.19
22	Counselor / Therapist	18	24	\$ 1,805.78	\$ 75.24
23	Optometry	16	19	\$ 1,711.01	\$ 90.05
24	Nephrology	10	34	\$ 1,637.23	\$ 48.15
25	Neurology	15	16	\$ 1,430.68	\$ 89.42

Northeast Florida Health Services
June-19

Patient Visits

	Apr-19	May-19	Jun-19
Visits	832	886	671
Prior Year Visits	722	716	582



Patient Visits by Location

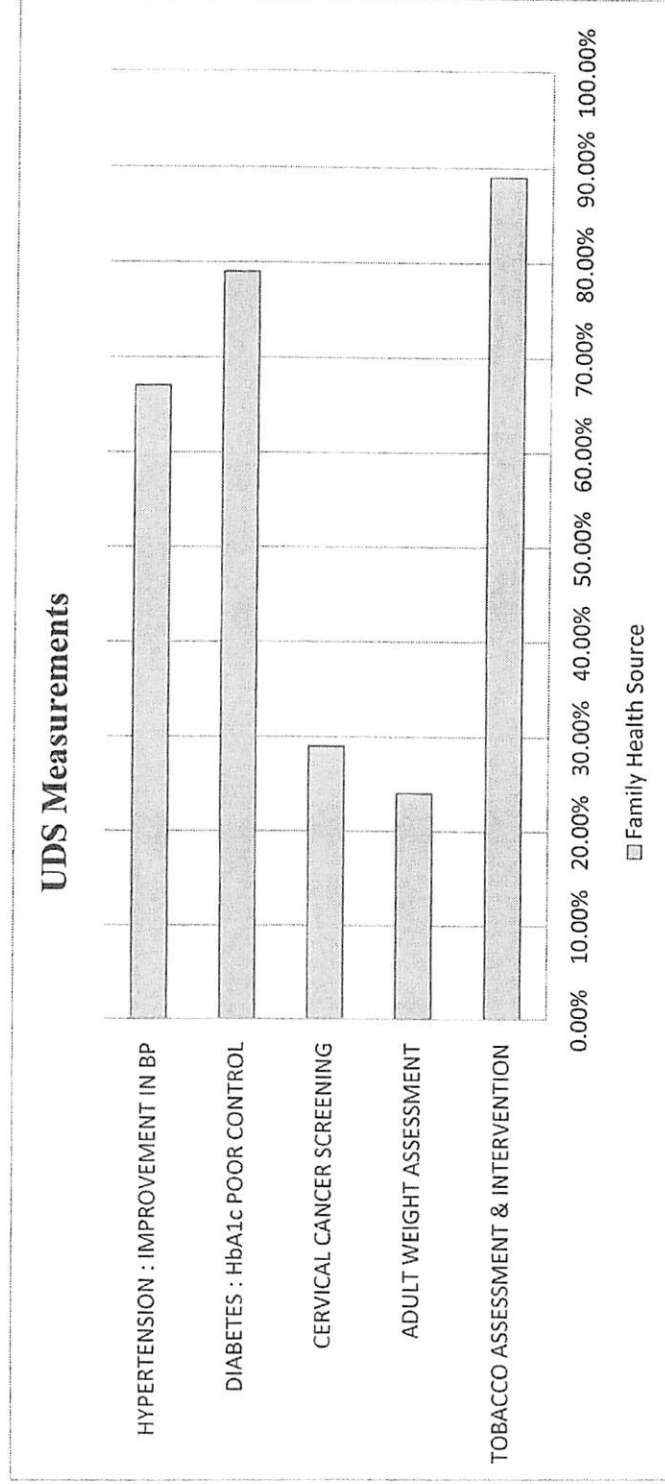
Location	Apr-19	May-19	Jun-19
Deland Medical	373	381	315
Deltona Medical	348	378	233
Pierson Medical	98	119	114
Daytona	13	8	9
Total	832	886	671

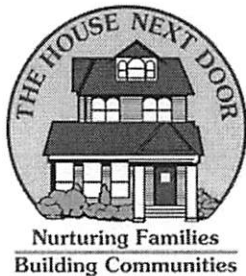
Appointment Times

Location	Provider	Appointments
Daytona	Johnson	Same Day
Daytona	Fuller	Same Day
DeLand	Fabian	Same Day
DeLand	Sauls	Same Day
DeLand	Smith	Same Day
DeLand	Hoblick	Same Day
DeLand	Sanchez	Same Day
DeLand	Vasanji	Same Day
Deltona	Rodriguez	Same Day
Deltona	Macalua	Same Day
Deltona	Mancini	Same Day
Pierson	Roberson	Same Day
Pierson	Brown (Locum)	Same Day

UDS Measures

Clinical Measures for the month of May 2019	Family Health
TOBACCO ASSESSMENT & INTERVENTION	89.00%
ADULT WEIGHT ASSESSMENT	24.00%
CERVICAL CANCER SCREENING	29.00%
DIABETES : HbA1c POOR CONTROL	79.00%
HYPERTENSION : IMPROVEMENT IN BP	67.00%





WVHA ENROLLMENT

June 2019

1. Total number of initial screenings	244
2. Total number of pending assisted applications	44
3. Number of applications processed	229
A. Number of approved applications	200
B. Number of pended applications	17
C. Number of denied applications	12
D. Errors in processing – no charge	

APPLICATION FOR THE WVHA CITIZENS ADVISORY COMMITTEE

NAME: Jacquelyn (Jacquie) Lewis

ADDRESS: 100 Fallen Timber Trail
DeLand, FL 32724

PHONE: 386/804.5673

EMAIL: Jacquelyn.Lewis@att.net

BIO:

As a native Floridian, I moved with my family from Miami, FL to the DeLand area nearly 20 years ago and have had the pleasure to serve on various boards and committees during my time here.

In addition to serving as the Donor Development Director for Central Florida Blood Bank I was employed by Adventist Health Systems Florida Hospital as a Physician Liaison for Volusia/Flagler. Additionally, I served as a Representative for CentraHealth Network (the marketing and public relations arm of AHS) and as a Physician Recruiter for Florida Physicians Medical Group (the Physician Employment component of AHS.)

I've served as a board member of MainStreet DeLand, Sands Theater Association and Museum of Florida Art and on numerous committees that benefitted our community including Fall Festival of the Arts, Krewe of Amalee, Krewe Nouveau, Pierson Medical Center, Good Samaritan Health Clinic and the Florida Hospital DeLand and Fish Community Advisory Boards.

I currently work with a Global NGO based in Paris and cover Medical Schools and Residency Training Programs in South America and Spain, when needed along with dabbling in various community and environmental efforts.

It would be a pleasure to serve on the West Volusia Hospital Citizens Advisory Committee and I thank you in advance for your consideration.



Dreggors, Rigsby & Teal, P.A.

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1006 N. Woodland Boulevard ■ DeLand, FL 32720

(386) 734-9441  www.drtpa.com

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Ann J. Rigsby, CPA/CFP™

Parke S. Teal, CPA/PFS (1954-2011)

Ronald J. Cantlay, CPA/CFP™

Robin C. Lennon, CPA

John A. Powers, CPA

June 26, 2019

Board of Commissioners
West Volusia Hospital Authority
PO Box 940
DeLand, FL 32720

Re: Rising Against All Odds (RAAO) HIV/Aids Outreach Services

We have performed the procedures detailed in our engagement letter for grantee site visits, dated January 17, 2019, which were agreed to by West Volusia Hospital Authority (WVHA) Board of Commissioners, solely to assist you with respect to funding agreement compliance of Rising Against All Odds (RAAO) HIV/Aids Outreach Services for the year ending September 30, 2019. WVHA provides reimbursement of a flat fee of \$100.00 of Active Street Outreach services to individual Program Participants, to include at least one-half hour of individualized preventative education and counseling and testing if consented; a health and behavioral education flat fee capped at \$50.00 per Program Participant for providing at least one-half hour (30 minutes) of one-on-one health and behavioral education and coaching using evidence based curricula and strategies; a flat rate of \$75.00 to each Program Participant who actually receives one-on-one testing and counseling contemporaneously with the group class; and a fee of \$25.00 per half hour for up to four hours of Comprehensive Case Management services for a Program Participant. The sufficiency of these procedures is solely the responsibility of those parties specified in the report. Consequently, we make no representation regarding the sufficiency of the procedures described below, either for the purpose for which this report has been requested or for any other purpose.

Our procedures and findings are below:

1. Inquire and document as to the grantee's monitoring procedures with respect to contract compliance.

MEMBERS

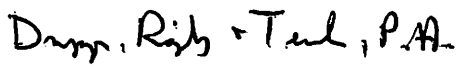
- a. Each month RAAO provides to WVHA a list of clients who received services during the prior month. This de-identified list includes the client's city of residence, the date services were rendered, and the units of service billed in half hour, one hour, or multiple hour increments.
 - b. RAAO personnel complete a residency checklist form with information obtained from the patient. This form is completed at time of the first encounter.
 - c. RAAO multiplies the units of service, typically one hour up to four hours, to calculate the invoice total.
2. Select a sample of transactions and test compliance with contract provisions.
- a. May 2019 was chosen, as directed by the WVHA Board of Commissioners during the November 15, 2018 Regular Meeting, for test procedures. A de-identified list of client visits was provided, two hundred thirty-one (231) client events.
 - b. From the individual list of client visits, ten percent (10%) were selected for compliance review (23 clients) for proof of identification and residency. From this list:
 - i. RAAO provided supporting medical files of all selected clients for review. All twenty-three (23) service dates were verified.
 - ii. RAAO provided proof of test results/counseling service forms for all selected clients for review. Twenty-three (23) files contained testing results/counseling services.
 - iii. Of the twenty-three (23) files sampled, one hundred percent (100%) of the files tied back to the client ID numbers presented on the original invoice.
 - iv. Of the twenty-three (23) files sampled, four (4) files did not contain approved proof of identification (ID). One (1) file contained an ID created by The Neighborhood Center; one (1) file contained a Volusia County Booking ID; one (1) file contained Department of Corrections Booking ID; and one (1) file contained a State of Texas Mugshot Booking ID. Eighty-three percent (83%) contained approved proof of identification.
 - v. Of the twenty-three (23) files sampled, ten (10) files were assigned an address of 312 S. Woodland Blvd. which is

the physical location for RAAO. Of those ten (10) files each had the WVHA Homeless Verification Form signed by The Neighborhood Center (TNC). One-hundred percent (100%) of the ten (10) had proof of West Volusia residency as attested to by TNC and according to the WVHA Eligibility Guidelines Revised 6/21/2018.

- vi. Of the twenty-three (23) clients, one (1) client was billed for six (6) units of comprehensive care at a fee of \$25.00 per half hour. This was a typo as the client's service time in was 4:15 p.m. and service end was listed as 5:45; this should have been entered as service end time of 4:45 p.m. causing an over-billing of \$100.00. Ms. Brenda Flowers self-reported this billing error and has since refunding the Authority \$100.00 the same day of the contractual site visit review with RAAO check #2103.
3. Prepare a written report summarizing the results with recommendations to the Board of Commissioners.
- a. The Utilization Report which details clients served and demographic data with respect to those clients, which RAAO provides to the WVHA, does not meet the requirements for the listing of the zip codes, of Section 7 of the funding agreement.
 - b. Recommend that RAAO include not only the city of residence, but also the zip codes, per Section 7 of the funding agreement.
 - c. RAAO's client files appeared to be complete and organized when reviewed for verification of services provided.
 - d. Recommend that RAAO does not interrupt their regular business operations in order to accommodate this contractual site visit review per Section 8 of the funding agreement, "Grantee shall allow a member of the Authority or a representative of the Authority to review the internal records and operations of Grantee, unannounced but in a reasonable manner and with best efforts to minimize disruption of Grantees operations".

We were not engaged to, and did not conduct an audit, the objective of which would be the expression of an opinion, on the specified elements, accounts, or items. Accordingly, we do not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of the specified users listed above and is not intended to be and should not be used by anyone other than those specified parties.



Dreggors, Rigsby & Teal, P.A.



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July 18, 2019

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

This letter documents our agreement, as administrators for the West Volusia Hospital Authority, to perform these agreed-upon procedures related to grantee site visits for the fiscal year of 2018-19. The procedures are enumerated below. We will meet with you as needed to discuss the agreed-upon procedures, results, and other issues that may arise.

- Inquire and document as to the grantee's monitoring procedures with respect to contract compliance.
- Select a sample of transaction and test compliance with contract provisions.
- Prepare a written report summarizing the results with recommendations to the Board of Commissioners.

Our engagement to apply agreed-upon procedures will be conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants. The sufficiency of the procedures is solely the responsibility of those parties specified in the report. Consequently, we make no representation regarding the sufficiency of the procedures described above either for the purpose for which this report has been requested or for any other purpose. If, for any reason, we are unable to complete the procedures, we will describe any restrictions on the performance of the procedures in our report, or will not issue a report as a result of this engagement.

Because the agreed-upon procedures listed above do not constitute an examination, we will not express an opinion on financial statements. In addition, we have no obligation to perform any procedures beyond those listed above.

MEMBERS

We will submit a report listing the procedures performed and our findings. This report is intended solely for the use of West Volusia Hospital Authority and should not be used by anyone other than this specified party. Our report will contain a paragraph indicating that had we performed additional procedures, other matters might have come to our attention that would have been reported to you. The documentation for this engagement is the property of Dreggors, Rigsby & Teal, P.A. and constitutes confidential information. If requested, access to such attest documentation will be provided under the supervision of Dreggors, Rigsby & Teal, P.A. personnel. Furthermore, upon request, we may provide copies of selected documentation to West Volusia Hospital Authority. West Volusia Hospital Authority may intend, or decide, to distribute the copies or information contained therein to others at their own discretion.

Our fee for these services will be based upon our prevailing standard hourly rates for the particular staff employed.

We appreciate the opportunity to assist you and believe this letter accurately summarizes the significant terms of our engagement. If you have any questions, please let us know. If you agree with the terms of our engagement as described in this letter, please sign the enclosed copy and return it to us. If the need for additional procedures arises, our agreement with you will need to be revised. It is customary for us to enumerate these revisions in an addendum to this letter.

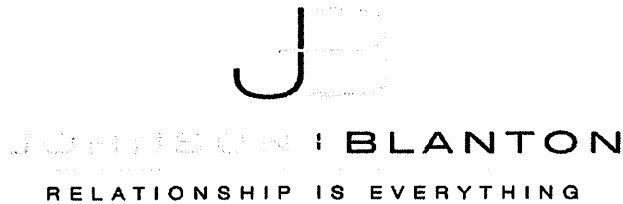
Acknowledged:



Dreggors, Rigsby & Teal, P.A.

West Volusia Hospital Authority

Date



July 18, 2019

Judith L. Craig, Board Chair
West Volusia Hospital Authority
c/o Dreggors, Rigsby and Teal, P. A.
1006 North Woodland Boulevard
Deland, Florida 32720

LETTER OF AGREEMENT

This shall serve as a letter of agreement between West Volusia Hospital Authority and Johnson & Blanton for the purposes of legislative and governmental representation.

Johnson & Blanton will regularly inform West Volusia Hospital Authority of all related activities and will work on projects and issues as directed. We will also be available for attendance at related meetings and will provide any type of reports or updates as determined necessary by West Volusia Hospital Authority. We will take a pro-active approach in the tracking and monitoring of all pertinent legislation and work to plan strategies which would benefit West Volusia Hospital Authority.

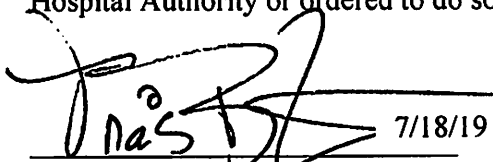
Scope of Work:

- Attached document provides detailed explanation.

West Volusia Hospital Authority agrees to contract with Johnson & Blanton for a retainer in the amount of \$60,000.00, paid in equal monthly payments (\$5,000.00). Johnson & Blanton will be reimbursed for all reasonable expenses incurred on West Volusia Hospital Authority behalf with prior approval. These include related travel expenses (*solely, mileage if required to attend a board meeting*), and annual lobbyist registration fees (\$45/lobbyist, but this is only done at renewal not initial registration).

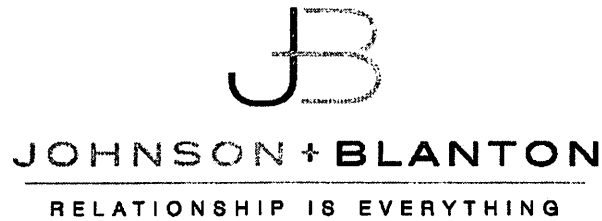
This agreement shall be for a period July 18, 2019 through June 30, 2020. Either party may terminate this agreement, provided all parties are given forty-five days prior written notice.

CONFIDENTIALITY. Johnson & Blanton will treat any and all information, communications, or materials of West Volusia Hospital Authority as confidential and will not disclose or divulge same unless otherwise directed or authorized by West Volusia Hospital Authority or ordered to do so by a court of competent jurisdiction.



Travis Blanton Date 7/18/19

Judith L. Craig, Board Chair Date



To: The West Volusia Hospital Authority Board

Cc: Theodore Small, Esquire, Legal Counsel

From: Darrick D. McGhee, Sr.
Vice President, Johnson & Blanton, LLC.

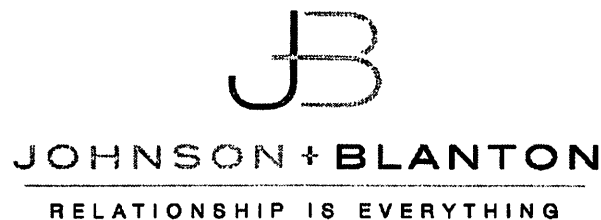
Re: Necessary Board Required Approvals and Detailed Timeline Breakdown & Proposed Steps (Scope of Work)

Johnson & Blanton, LLC. (Team JB) considers it a great honor and privilege to be entrusted by the West Volusia Hospital Authority to provide lobbyist representation. We are one of Tallahassee's most respected lobbying firms, representing a variety of corporate and non-profit clients in Florida government. Nowhere will you find the depth and breadth of experience than through the professionals at our firm. With over 50 years of combined senior level positions held in Florida government, state agencies, and political organizations, we have not only led the discussion on public policy and legislative issues impacting Florida businesses, but have had a seat at the table in forming the debate. This aforementioned experience will be put into action to work toward a successful conclusion on behalf of the West Volusia Hospital Authority. Below, please find: 1). Four necessary board required approvals; and 2). *A Detailed Timeline Breakdown & Proposed Steps (Scope of Work)*.

I. Four necessary board required approvals

After discussions with the Attorney for WVHA, the following Board authorizations appear necessary to retain Johnson & Blanton, LLC. and allow us to proceed with the desired representation of WVHA:

- 1. Approve the Board Chair to sign the accompanying Letter of Agreement in which WVHA retains Johnson & Blanton, LLC on the terms mutually agreed;**
- 2. Designate an administrative staff person to approve the lobbyist registration for Johnson & Blanton, LLC. lobbyists; and**
 - o Legally, in Florida, every lobbyist has to register to represent a Principal organization (i.e. West Volusia Hospital Authority) before the Executive Branch and the Legislative Branch. This registration is handled through an online portal - <https://floridalobbyist.gov>. The Office Manager for Johnson & Blanton, LLC. would include the necessary information in the portal. As a result, an electronic message will be sent to a designated person to approve the lobbyists for Johnson & Blanton, LLC. can and will represent West Volusia Hospital Authority.
- 3. Approve below proposed Scope of Work for Johnson & Blanton, LLC to explore and pursue potential legislative solutions to eliminate or reduce the obligation of hospital districts to pay incremental tax to existing CRAs, particularly those that have extended or will extend their original expiration date.**
- 4. Designate an individual who will be the key point of contact for Johnson & Blanton, LLC. lobbyists to contact and/or consult with when decisions have to be made about legislation or any other pertinent matters leading up, during, and after the 2020 Legislative Session.**
 - o This person will need to be someone whom the board empowers to serve as the point of contact for Johnson & Blanton, LLC. to converse with regularly about pertinent matters to WVHA during the 2020 Legislative Session, and whom they trust to consult with them (the Board) when appropriate.
 - o The WVHA Attorney has indicated that because WVHA does not have any employees and Board members would not be able to consult with each other outside of public meetings, the designated individual would need to be one of the contracted professionals at DRT or himself who is empowered to make decisions after due consultation.



II. A Detailed Timeline Breakdown & Proposed Steps (Scope of Work)

Upon Signature/First 3 months (July '19 – September '19)

- Upon a contractual agreement and signature on the Letter of Agreement, we will converse with the designated individual, as approved under section I:4 (above), to talk through proposed legislation for the 2020 Legislative Session.
- With Legislative Committee Weeks beginning in September, we must do the following:
 - Work on draft legislation for the 2020 Legislative Session.
 - Make contact with each legislative member of the Volusia County Legislative Delegation to make them aware of the concern and need for legislation.
 - Discuss desired bill sponsors; make contact with those persons; and secure them.
 - *Have "said" legislation filed in both Chambers.*
 - Converse with the appropriate legislative committee staff, in both the House and Senate, on the legislation and its intent.
 - Identify proponents and opponents of our legislation, and determine what, if any, steps should be taken to utilize (proponents) or address (opponents) them.

Next 3 Months (October '19 – December '19)

- Converse again with the designated individual, as approved under section I:4 (above), to talk through the 2020 Legislative Session strategy.
 - Important Note: Weekly calls can, will, and should be scheduled to make sure all parties are kept informed.
- Converse again with the appropriate legislative committee staff, in both the House and Senate, on the legislation.
 - These conversations will be ongoing throughout the Legislative Session.
- Meet with key legislator leaders in the House and Senate to brief them on the legislation, as well as secure favorable committee references.
- Work to have our filed legislation placed on the committee agenda during one of (preferably multiple) the scheduled Legislative Committee Weeks. The schedule is as follows:
 - September 16-20, 2019;
 - October 14-18, 2019;
 - October 21-25, 2019;
 - November 4-8, 2019;
 - November 12-15, 2019; and
 - December 9-13, 2019.
- If necessary, have members of the Board and/or the designated individual, as approved under section I:4 (above), come to Tallahassee for meetings with legislators, and hopefully speak on the record in support of our bill. Schedule a meeting with the appropriate staff of the Executive Office of Governor Ron DeSantis to fully brief them on the legislation.
- Schedule a meeting with the Department of Economic Opportunity to discuss the legislation.
 - The Department has statutory authority over CRAs.

Following 3 months after that (January '20 – March '20)

- With the 2020 Legislative Session scheduled to convene on Tuesday, January 14, by this time in our timeline, our legislation has been officially filed as a bill in both the House and Senate (with bill numbers).
- The hope would be to have had our bill heard at least once in both respective Chambers as we head into Legislative Session.
 - If the bill has not be heard in one or both Chambers by the start of the Legislative Session, this is not deemed to be a failure nor a setback.



JOHNSON + BLANTON

RELATIONSHIP IS EVERYTHING

- If necessary, have members of the Board and/or the designated individual, as approved under section I:4 (above), again come to Tallahassee for additional meetings with legislators, and hopefully speak on the record in support of our bill.

Final 3 months (April '20 – June '20)

- By this time, we are post-2020 Legislative Session. With success:
 - We are now in conversations with the Executive Office of Governor Ron DeSantis recommending that he signs the bill into law (versus a veto).

**West Volusia Hospital Authority
Financial Statements
June 30, 2019**



Dreggors, Rigsby & Teal, P.A.

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Certified Public Accountant | Registered Investment Advisor

1006 N. Woodland Boulevard ■ DeLand, FL 32720

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Victoria A. Kizma, CPA

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John A. Powers, CPA

Ann J. Rigsby, CPA/PFS/CFP®

Melissa J. Trickey, 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 June 30, 2019 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

July 01, 2019

MEMBERS

West Volusia Hospital Authority

Balance Sheet

Modified Cash Basis

June 30, 2019

Assets

Current Assets

Petty Cash	\$	100.00
Intracoastal Bank - Money Market		10,262,255.13
Intracoastal Bank - Operating		553,473.12
Mainstreet Community Bank - MM		7,023,270.23
Taxes Receivable		92,073.00
Total Current Assets		17,931,171.48

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		18,554,829.91

Liabilities and Net Assets

Current Liabilities

Security Deposit		5,110.00
Deferred Revenue		88,660.00
Total Current Liabilities		93,770.00

Net Assets

Unassigned Fund Balance		10,444,019.53
Restricted Fund Balance		208,000.00
Nonspendable Fund Balance		621,658.43
Net Income Excess (Deficit)		7,187,381.95
Total Net Assets		18,461,059.91
Total Liabilities and Net Assets	\$	18,554,829.91

West Volusia Hospital Authority
Statement of Revenue and Expenditures
Modified Cash Basis
Budget and Actual
For the 1 Month and 9 Months Ended June 30, 2019

	<u>Annual Budget</u>	<u>Current Period Actual</u>	<u>Year To Date Actual</u>	<u>Budget Balance</u>
Revenue				
Ad Valorem Taxes	20,194,000	625,675	20,220,584	(26,584)
Investment Income	55,000	12,377	108,763	(53,763)
Reimbursement - SDTF	0	70,060	70,060	(70,060)
Rental Income	70,968	5,692	51,228	19,740
Total Revenue	<u>20,319,968</u>	<u>713,804</u>	<u>20,450,635</u>	<u>(130,667)</u>
Healthcare Expenditures				
Adventist Health Systems	5,848,544	500,040	4,715,818	1,132,726
Northeast Florida Health Services	1,932,281	108,212	1,102,894	829,387
Specialty Care	4,375,000	209,987	2,431,110	1,943,890
County Medicaid Reimbursement	2,385,000	195,966	1,763,698	621,302
The House Next Door	120,000	5,753	67,489	52,511
The Neighborhood Center	70,000	6,575	59,400	10,600
Community Life Center Outreach Services	20,000	0	550	19,450
Rising Against All Odds	235,000	17,275	117,408	117,592
Community Legal Services	76,931	9,607	51,635	25,296
Hispanic Health Initiatives	75,000	5,300	40,450	34,550
Florida Dept of Health Dental Svcs	200,000	15,092	153,461	46,539
Good Samaritan	60,000	0	0	60,000
Stewart Marchman - ACT	925,336	75,960	911,568	13,768
Health Start Coalition of Flagler & Volusia	142,359	12,617	96,098	46,261
H C R A	819,612	53,126	193,123	626,489
Other Healthcare Costs	863,412	0	0	863,412
Total Healthcare Expenditures	<u>18,148,475</u>	<u>1,215,510</u>	<u>11,704,702</u>	<u>6,443,773</u>
Other Expenditures				
Advertising	5,000	174	4,679	321
Annual Independent Audit	16,000	0	16,100	(100)
Building & Office Costs	6,500	237	2,947	3,553
General Accounting	68,100	3,150	43,309	24,791
General Administrative	65,100	6,824	35,273	29,827
Legal Counsel	70,000	5,060	40,070	29,930
Special Accounting	5,000	0	0	5,000
City of DeLand Tax Increment District	100,000	0	64,265	35,735
Tax Collector & Appraiser Fee	603,880	12,493	614,465	(10,585)
TPA Services	500,000	7,025	432,433	67,567
Eligibility / Enrollment	30,000	0	4,221	25,779
Healthy Communities	72,036	7,293	46,478	25,558
Application Screening				
Application Screening - THND	317,872	32,220	203,981	113,891
Application Screening - RAAO	34,005	4,032	33,024	981
Application Screening - SMA	3,000	0	84	2,916
Workers Compensation Claims	25,000	0	13,429	11,571
Other Operating Expenditures	250,000	0	3,795	246,205
Total Other Expenditures	<u>2,171,493</u>	<u>78,508</u>	<u>1,558,553</u>	<u>612,940</u>
Total Expenditures	<u>20,319,968</u>	<u>1,294,018</u>	<u>13,263,255</u>	<u>7,056,713</u>
Excess (Deficit)	<u>0</u>	<u>(580,214)</u>	<u>7,187,380</u>	<u>(7,187,380)</u>

See Accountants' Compilation Report

West Volusia Hospital Authority
Schedule I - Healthcare Expenditures
Modified Cash Basis
Budget and Actual
For the 1 Month and 9 Months Ended June 30, 2019

	Annual Budget	Current Period Actual	Year To Date Actual	Budget Balance
Healthcare Expenditures				
Adventist Health Systems				
Florida Hospital DeLand	2,811,772	236,609	2,418,471	393,301
Florida Hospital Fish Memorial	2,811,772	263,431	2,189,669	622,103
Florida Hospital DeLand - Physicians	112,500	0	57,826	54,674
Florida Hospital Fish - Physicians	112,500	0	49,852	62,648
Northeast Florida Health Services				
NEFHS - Pharmacy	752,281	62,690	510,234	242,047
NEFHS - Obstetrics	30,000	1,806	34,538	(4,538)
NEFHS - Primary Care	1,150,000	43,715	558,121	591,879
Specialty Care	4,375,000	209,987	2,431,110	1,943,890
County Medicaid Reimbursement	2,385,000	195,966	1,763,698	621,302
Florida Dept of Health Dental Svcs	200,000	15,092	153,461	46,539
Good Samaritan				
Good Samaritan Health Clinic	30,000	0	0	30,000
Good Samaritan Dental Clinic	30,000	0	0	30,000
The House Next Door	120,000	5,753	67,489	52,511
The Neighborhood Center	70,000	6,575	59,400	10,600
Community Life Center Outreach Services	20,000	0	550	19,450
Rising Against All Odds	235,000	17,275	117,408	117,592
Community Legal Services	76,931	9,607	51,635	25,296
Hispanic Health Initiatives	75,000	5,300	40,450	34,550
Stewart Marchman - ACT				
SMA - Homeless Program	75,336	7,088	61,569	13,767
SMA - Residential Treatment	550,000	52,645	550,000	0
SMA - Baker Act - Match	300,000	16,227	300,000	0
Health Start Coalition of Flagler & Volusia				
HSCFV - Outreach	73,500	6,503	38,627	34,873
HSCFV - Fam Services	68,859	6,114	57,472	11,387
HCRA				
H C R A - In County	400,000	46,167	169,437	230,563
H C R A - Outside County	419,612	6,959	23,686	395,926
Other Healthcare Costs	863,412	0	0	863,412
Total Healthcare Expenditures	18,148,475	1,215,509	11,704,703	6,443,772

West Volusia Hospital Authority
Schedule II - Statement of Revenue and Expenditures
Modified Cash Basis
For the 1 Month and 9 Months Ended June 30, 2019 and June 30, 2018

	1 Month Ended June 30, 2019	1 Month Ended June 30, 2018	9 Months Ended June 30, 2019	9 Months Ended June 30, 2018
Revenue				
Ad Valorem Taxes	625,675	731,686	20,220,584	20,060,013
Investment Income	12,377	6,144	108,763	46,024
Reimbursement - SDTF	70,060	0	70,060	0
Rental Income	5,692	5,692	51,228	51,228
Other Income	0	0	0	203
Total Revenue	<u>713,804</u>	<u>743,522</u>	<u>20,450,635</u>	<u>20,157,468</u>
Healthcare Expenditures				
Adventist Health Systems	500,040	451,494	4,715,818	5,186,144
Northeast Florida Health Services	108,212	131,280	1,102,894	1,153,703
Specialty Care	209,987	280,287	2,431,110	2,279,950
County Medicaid Reimbursement	195,966	185,652	1,763,698	1,670,870
The House Next Door	5,753	7,871	67,489	66,962
The Neighborhood Center	6,575	8,075	59,400	51,150
Community Life Center Outreach Services	0	0	550	15,925
Rising Against All Odds	17,275	18,750	117,408	141,075
Community Legal Services	9,607	2,922	51,635	22,759
Hispanic Health Initiatives	5,300	6,025	40,450	62,350
Deltona Firefighters Foun Access to Hlth	0	0	0	661
Florida Dept of Health Dental Svcs	15,092	9,664	153,461	186,155
Good Samaritan	0	3,585	0	30,684
Stewart Marchman - ACT	75,960	73,876	911,568	588,593
Health Start Coalition of Flagler & Volusia	12,617	12,147	96,098	94,631
H C R A	53,126	27,599	193,123	105,859
Total Healthcare Expenditures	<u>1,215,510</u>	<u>1,219,227</u>	<u>11,704,702</u>	<u>11,657,471</u>
Other Expenditures				
Advertising	174	325	4,679	2,542
Annual Independent Audit	0	0	16,100	15,800
Building & Office Costs	237	225	2,947	3,698
General Accounting	3,150	4,154	43,309	38,957
General Administrative	6,824	6,141	35,273	42,921
Legal Counsel	5,060	4,050	40,070	41,030
City of DeLand Tax Increment District	0	0	64,265	69,746
Tax Collector & Appraiser Fee	12,493	14,591	614,465	541,013
TPA Services	7,025	46,256	432,433	331,653
Eligibility / Enrollment	0	0	4,221	31,731
Healthy Communities	7,293	7,207	46,478	45,643
Application Screening				
Application Screening - THND	32,220	15,812	203,981	126,495
Application Screening - RAAO	4,032	2,880	33,024	19,584
Application Screening - SMA	0	0	84	2,379
Workers Compensation Claims	0	0	13,429	21,730
Other Operating Expenditures	0	0	3,795	1,634
Total Other Expenditures	<u>78,508</u>	<u>101,641</u>	<u>1,558,553</u>	<u>1,336,556</u>

West Volusia Hospital Authority
Schedule II - Statement of Revenue and Expenditures
Modified Cash Basis
For the 1 Month and 9 Months Ended June 30, 2019 and June 30, 2018

	1 Month Ended June 30, 2019	1 Month Ended June 30, 2018	9 Months Ended June 30, 2019	9 Months Ended June 30, 2018
Total Expenditures	<u>1,294,018</u>	<u>1,320,868</u>	<u>13,263,255</u>	<u>12,994,027</u>
Excess (Deficit)	<u><u>(580,214)</u></u>	<u><u>(577,346)</u></u>	<u><u>7,187,380</u></u>	<u><u>7,163,441</u></u>