

**WEST VOLUSIA HOSPITAL AUTHORITY**  
**BOARD OF COMMISSIONERS**  
**REGULAR MEETING**  
**May 16, 2024**  
**5:00 PM**  
**Sanborn Center**  
**815 S. Alabama Avenue, DeLand, FL**  
**AGENDA**

1. Call to Order
2. Pledge of Allegiance Followed by a Moment of Silence
3. Approval of Proposed Agenda
4. Consent Agenda:
  - A. Approval of Minutes - Regular Meeting April 18, 2024
5. Citizens Comments – Comments are limited to three minutes per speaker.
6. Citizens Advisory Committee – Chair Lyda Kiser – Verbal Update on April 23<sup>rd</sup> Q & A Meeting and May 7th Preliminary Ranking Meeting
7. Annual Contractual Utilization Reports to the WVHA Board of Commissioners
  - A. Jennifer Stephenson of SMA Healthcare
  - B. Brenda Flowers of Rising Against All Odds
8. Reporting Agenda:
  - A. EBMS April Report – Written Submission
  - B. WVHA miCare Clinic DeLand/Deltona April Report – Written Submission
  - C. The House Next Door (THND) April HealthCard Report
  - D. Emergency Services 1st Quarter of 2024 (January – March)
    1. Halifax Health | UF Health – Medical Center of Deltona
    2. Advent Health DeLand & Advent Health Fish Memorial
    3. EMPros
9. Discussion Items:
  - A. Request from THND for FY 2023-2024 Funding Increase of \$3,961.92 for Eligibility Health Card Screening Services (Tabled on 4/18/24)
  - B. Healthy Start Self-Assessment of FY 2022-2023 Programs
    1. Annual Contractual Utilization Report to the WVHA Board of Commissioners – Thalia Smith, Program Director for Healthy Start Coalition of Flagler & Volusia Counties (tabled on 4/18/24)
  - C. Board Review of Administrative Applications
    1. Halifax Healthy Communities
    2. THND HealthCard Program
    3. RAO Prescreening Services
10. Follow Up Item – Eligibility Guidelines
11. Administrator Report
12. Finance Report
  - A. April Financials
  - B. Approval of Disbursements – Check Register & Estimated Expenditures
13. Legal Update
14. Upcoming Meetings – CAC Final Ranking May 21<sup>st</sup> & Joint Meeting June 20<sup>th</sup>
15. Adjournment

If any person decides to appeal any decision made by the WVHA with respect to any matter considered at this meeting or hearing he/she will need a record of the proceedings, and for such purpose he/she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based (FS 286.0105). Individuals with disabilities needing assistance to participate in any of these proceedings should contact the WVHA Administrator at least three (3) working days in advance of the meeting date and time at (386) 626-4870.

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

Sanborn Center Ballroom B  
815 S. Alabama Avenue, DeLand, FL  
April 18, 2024  
5:00 PM

**Those in Attendance:**

Commissioner Voloria Manning  
Commissioner Judy Craig  
Commissioner Jennifer Coen  
Commissioner Roger Accardi

**Absent:**

Commissioner Donna Pepin

**Others Present:**

Attorney for the Authority: Theodore Small, Law Office of Theodore W. Small, P.A.  
WVHA Administrator Stacy Tebo

**Call to Order**

Chair Coen called the meeting to order. The meeting took place at the Sanborn Center Ballroom B, located at 815 S. Alabama Ave., DeLand, Florida, having been legally noticed in the Daytona Beach News-Journal, a newspaper of general circulation in Volusia County, commencing at 5:08 p.m. The meeting was opened with The Pledge of Allegiance followed by a moment of silence.

**Approval of Proposed Agenda**

**Motion 022 – 2024** Commissioner Accardi moved to approve the amended agenda as presented. Commissioner Craig seconded the motion. The motion passed 4-0-1.

**Consent Agenda – Approval of Minutes**

**Joint Meeting held March 21, 2024**

**Motion 023 – 2024** Commissioner Manning moved to approve the Consent Agenda. Commissioner Craig seconded the motion. The motion passed 4-0-1.

**Citizen Comments**

Rakeem “Ray” Ford introduced himself and announced his candidacy for the WVHA Board of Commissioners.

Rosemarie Latham announced her candidacy for Florida House of Representatives District 29.

Jennifer Stephenson of SMA Healthcare updated the Board on the recent Health & Human Services Summit. She also announced the groundbreaking of SMA’s new facility on May 21<sup>st</sup> on Stone Street in DeLand

**Annual Contractual Utilization Report to the WVHA Board of Commissioners – Thalia Smith, Program Director for Healthy Start Coalition of Flagler & Volusia Counties**

Ms. Smith outlined the program goals of the Family Services Coordinator, examples of services, the number of clients served, and the client characteristics.

Commissioner Manning asked Ms. Smith to explain the performance measure on page six stating that 100% of cases were screened for West Volusia residency.

Commissioner Craig voiced concern regarding a coverage gap for newborns. Ms. Smith explained the challenges associated with Medicaid over the last year.

Ms. Smith explained the purpose of the CARE Specialist, program goals, activities, performance measures, clients served, and the client characteristics. She briefly listed other Healthy Start programs.

Commissioner Craig asked that the Board not accept the report into the record until the next meeting when Healthy Start presents their self-audit of FY 2022-2023. The other Board members agreed.

### **Reporting Agenda**

**EBMS March Report – Written Submission**

**WVHA miCare Clinic DeLand/Deltona March Report – Written Submission**

**2024 Quarter Two Report (Jan – March)**

**The House Next Door (THND) March Application Processing Report**

miCare Practice Manager Gretchen Soto highlighted the main points for the March monthly report and quarter two. She entertained questions from Commissioner Manning and Commissioner Accardi regarding prescriptions. There was discussion regarding health card membership trending upward.

Gail Hallmon from THND introduced the new COO, Tabitha White, and the new Health Card Program Director, Chris Booker.

All reports were received into the written record.

### **Discussion Items**

#### **Request for Lien Reduction from John Lawes at Dan Newlin Injury Attorneys**

Ms. Tebo explained that letters are received from attorneys periodically when a card member is involved in a lawsuit, and WVHA asserts its right to subrogation for payments made on behalf of a card member. She said that this lawsuit was settled for \$10,000, and the attorney is asking WVHA to accept \$1,000 in lieu of the total amount paid for medical care related to the injury.

Attorney Small stated that the eligibility guidelines provide for WVHA's right to subrogation; that WVHA pays for health care, but if a card member sues for damages related to an accident or some other claim and receives a settlement for reimbursement of health care, they are not entitled to the reimbursement; that there are other entities that too have subrogation rights in this instance; that the attorney must make us aware of the settlement amount; that these are funds that WVHA had not anticipated being reimbursed; that the attorney is taking less than what he is statutorily entitled to; and that he recommends that the Board accept the request.

**Motion 024 – 2024** Commissioner Accardi moved to accept the request from John Lawes for a reduction in the lien to \$1,000 and authorize the Chair's signature on the letter. Commissioner Manning seconded the motion. The motion passed 4-0-1.

Roll call:

Commissioner Accardi	Yes
Commissioner Craig	Yes
Commissioner Manning	Yes
Commissioner Coen	Yes

## **Request from THND for FY 2023-2024 Funding Increase of \$3,961.92 for Eligibility Health Card Screening Services and Amended FY 24/25 Budget Request**

Ms. Hallmon explained that they were notified of a rent increase by the new owners for the Deltona location in Justin Square; that the increase begins in July; and that the amount would cover the increase for the last three months of the fiscal year. She added that the rent increase would also affect their proposed budget for the next fiscal year. She said they would look for other locations in Deltona, but the rate was not an unreasonable commercial rate. She noted that the owners had split the total increase into two years: one increase will be instituted this July, and the next increase would happen in July 2025.

Attorney Small voiced concern that if the Board established a precedent for approving increases based on unanticipated expenses, it would open them up to receiving numerous requests from various agencies. Ms. Hallmon stated that THND has two contracts; that one is a fee-for-service agreement, and they would not ask for an increase to the therapy contract; and that she believed the card screening services agreement is different. She added that it was written based on actual cost. Attorney Small said that if the Board is inclined to approve the request, he advised that it be tabled so that THND can put in writing why this agreement should be treated differently than the other contracts.

### **Citizen Comments**

Executive Director of Healthy Start, Sarah Papert, stated that they would withdraw their two funding requests for next year, and she would provide something to the Board in writing.

There was discussion regarding The House Next Door bringing back a formal letter. Ms. Hallmon stated that the increase would not go into effect until July.

**Motion 025 – 2024** Commissioner Craig moved to table the request until the next meeting. Commissioner Manning seconded the motion. The motion passed 4-0-1.

### **Resignation of CAC Member Christian Brown 3/25/24 & Letter of Appreciation**

The Board expressed their sadness that Mr. Brown will be leaving the committee.

**Motion 026 – 2024** Commissioner Accardi moved to approve the letter of appreciation and authorize the Chair's signature. Commissioner Manning seconded the motion. The motion passed 4-0-1.

### **Appointment of CAC Member Wakia Muhammad – Commissioner Manning**

Commissioner Manning said that Ms. Muhammad has experience in the healthcare field, insurance, and administration. She added that she would be valuable to the Board and the CAC.

**Motion 027 – 2024** Commissioner Craig moved to appoint Wakia Muhammad to the CAC. Commissioner Accardi seconded the motion. The motion passed 4-0-1.

### **Eligibility Guidelines**

Attorney Small urged the Board to look through the guidelines in advance of June when they are finalized. He noted that they had not been amended substantially in the past few years since they had been perfected. He advised that the point of the three-month window is for everyone to provide thoughtful reflection to their most important policy. He emphasized that when they were being developed there was great consideration given to budgetary implications of any changes. He



recommended that if they had any suggested changes, they should seek out advice from himself, James Moore & Co, THND, EBMS, or Ms. Tebo.

Chair Coen encouraged input from citizens as well.

## **Administrator Report**

Ms. Tebo informed the Board that there were flyers on the table for the Community Health Needs Assessment survey, and the survey would remain open through July. She advised agencies to pick up extra copies for distribution to the public. She informed the Board that she had been working on quotes for a generator at the DeLand clinic, and she had received one quote thus far. She explained that the reason for it would be to power a portion of the DeLand clinic to protect the refrigerated medications and vaccines.

## **Finance Report**

### **March Financials**

#### **Approval of Disbursements – Check Register & Estimated Expenditures**

Ms. Tebo outlined the financials and estimated expenditures for the Board. Chair Coen noted interest income is already at eighty percent, and they should have a cushion by the end of the year.

**Motion 028 – 2024** Commissioner Accardi moved to approve, authorize, and warrant the payment of the bills outlined in the check register presented by James Moore & Co and estimated expenditures for the next month totaling \$4,732,603. Commissioner Manning seconded the motion. The motion passed 4-0-1.

## **Legal Update**

Attorney Small pointed out that an update had been emailed from John Mullen regarding the Medicaid Match litigation and they are in process of submitting proposed orders to the judge.

There being no further business to come before the Board, the meeting was adjourned at 6:46 p.m.

Adjournment

Jennifer Coen, Chair



# **FY 23-24 SMA Utilization Report**



# Residential Treatment Services

## **Service Description:**

SMA Healthcare provides residential substance use treatment to residents of the WVHA service area at Deland Men's Residential Treatment (DMRT). DMRT is a 54 bed, male-only, long-term treatment facility focusing on treatment for primary substance use and co-occurring mental health disorders.

Services provided include individual and group therapy, relapse prevention, job skills, family education, sober support meetings, and more.

FY 23-24 WVHA funding is \$550,000.

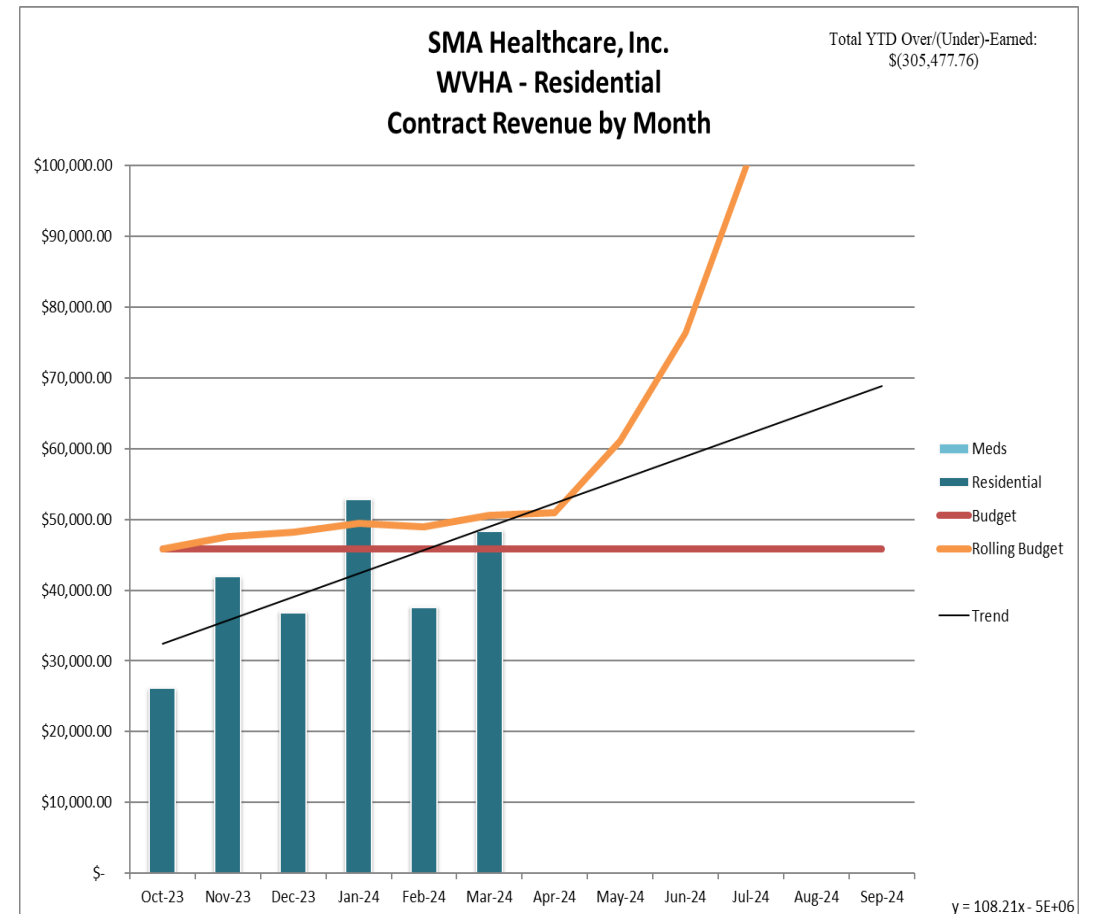


# Residential Treatment Services

**Numbers of Persons Served: 56**

**Utilization:\$244,522.24 (44%)**

**Plan to improve utilization trend:  
Program to increase overall census, thus  
anticipating a larger % of WVHA clients**





# Outpatient Psychiatric Services

## **Service Description:**

Uninsured individuals typically seek out or are referred to care at an emergency room for psychiatric services. SMA provides psychiatric services and physical health screenings at SMA's Calvin Street clinic and on-site at Deland Men's Residential Treatment. SMA also partners with MiCare, Deland, to provide onsite services one day per week to members seeking psychiatric services. Providing accessible services prevents the deterioration of an individual's mental and/or physical health thereby decreasing the need for emergency room visits and hospitalization.

Services provided include: psychiatric evaluation and treatment planning; psychotropic medication prescription and management; mental health therapy; crisis intervention, including initiation of Baker Acts; medication prescriptions for clients filled through the SMA Pharmacy. Funding from this grant is used to cover the cost of medications from initial prescription through Patient Assistance Program (PAP) approval along with any co-pays.

FY 23-24 WVHA funding is \$90,000.

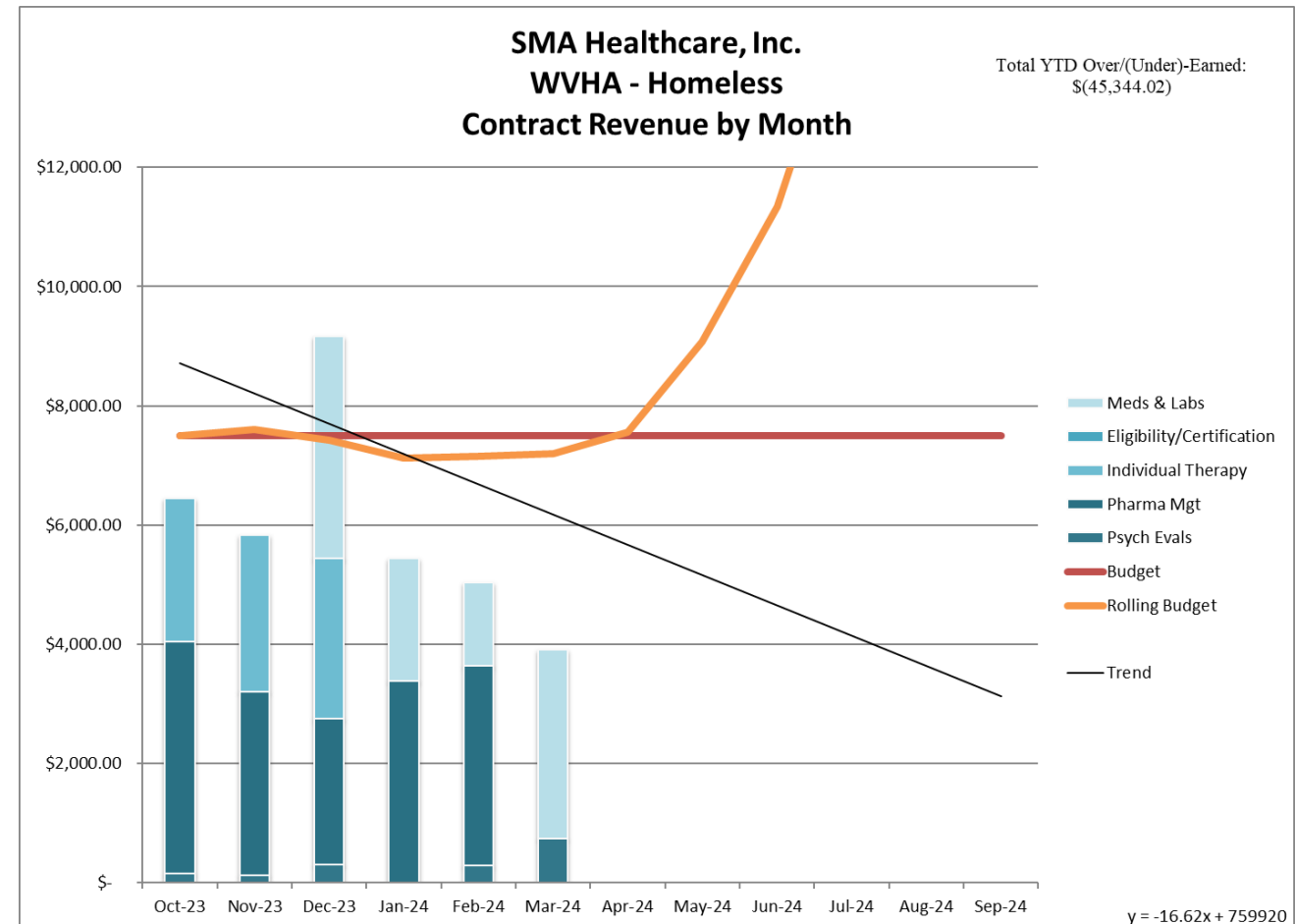


# Outpatient Psychiatric Services

**Number of Persons Served: 173**

**Utilization: \$44,655.98 (49.6%)**

**Plan to improve utilization trend:  
SMA will utilize a therapist from  
another program to provide this  
service until a full-time therapist  
is hired**





# Emergency Behavioral Health Services

## Service Description:

SMA Healthcare's Chet Bell Crisis Center houses three distinct units:

- The Emergency Screening Unit provides public access to crisis services via a face-to-face assessment 24 hours per day
- The Crisis Stabilization Unit offers 30 beds for people who need acute psychiatric care
- The Detox Unit has 19 beds for people who need a medically monitored detoxification from addictive substances

Each unit is staffed around the clock with registered nurses, behavioral health technicians, and clinical staff working under the supervision of a physician. A psychiatrist and or psychiatric APRN assesses clients seven days a week and is available by phone 24 hours per day, including weekends and holidays.

FY 23-24 WVHA funding is \$300,000.

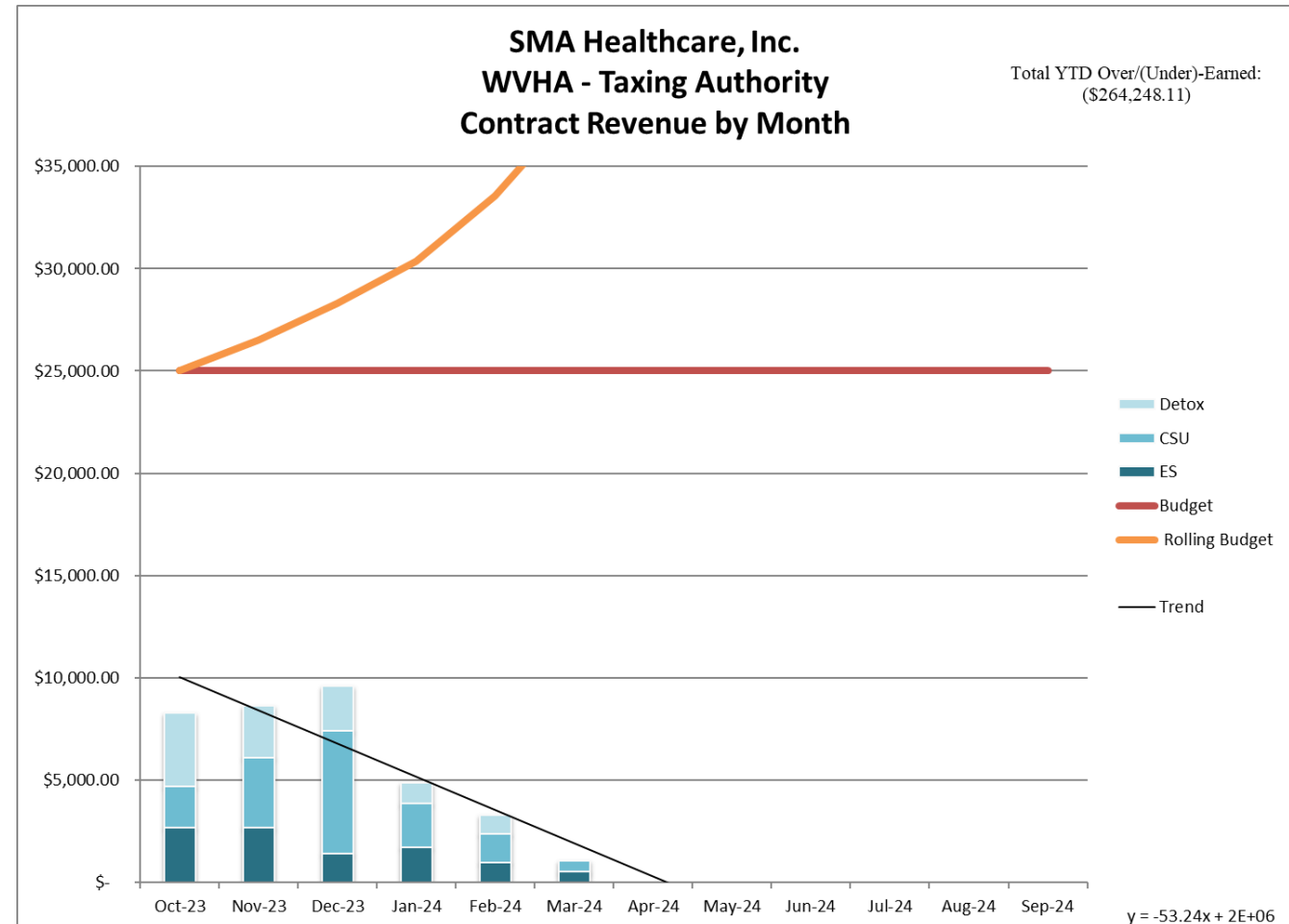


# Emergency Behavioral Health Services

**Numbers of Persons Served: 162**

**Utilization: \$35,751.89 (12%)**

**Plan to improve utilization trend:  
Senior Director will collaborate  
with front desk team to reiterate  
importance of asking about/obtaining  
WVHA eligibility info and will resume  
monthly chart audits**







# Intergovernmental Transfer/Low Income Pool (LIP)

The Low-Income Pool (LIP) provides government support to providers for the costs of uncompensated charity care for low-income individuals who are uninsured. Funding for the LIP program comes from intergovernmental transfers (IGTs) and federal matching funds.

SMA utilizes funds provided by the WVHA for Residential and Emergency Services for this purpose. WVHA and AHCA have a contracted letter of agreement that allows AHCA to invoice the WVHA for these funds directly. SMA is able to leverage this and receives match funding from AHCA.

- FY 21-22: WVHA IGT (\$257,582) + AHCA match (\$528,448) = \$786,030 (67.23% match)
- FY 22-23: WVHA IGT (\$265,285) + AHCA match (\$493,758) = \$759,041 (65.05% match)
- FY 23-24: WVHA IGT (\$850,000) + AHCA match (\$1,171,931) = \$2,021,931 (57.96% match)

SMA is hoping to be able to continue to utilize both the Residential and Emergency Services Contracts next year as well for the IGT funds for AHCA so that we can continue to maximize the funding received from WVHA.



# Coming Soon!

**West Volusia Outpatient Center**  
**1251 N. Stone St, DeLand**

Anticipated Completion—Summer 2025

Groundbreaking  
May 21, 2024, 9am





Transforming Lives Through Hope and  
Healing

QUESTIONS?



## 2023-2024 HIV/HC Program utilization Report

Brenda Flowers, Founder/CEO

# Our Diversity Is Our Strength (What we do)

We stand on common ground with those we serve. Our services support the overall health of our West Volusia Community, the State of Florida, and the nation. Through RAAO's outreach services we are able to provide coordinated and comprehensive managed care diverting costs from emergency rooms saving an estimated \$3,394 per ER visit.

RAAO is addressing the barriers and the gaps in access to care for nontraditional residents who have limited to no access to traditional healthcare services as a result of these barriers.

We build "bridges to health equity" with local medical providers, pharmacies, partner agencies, and the local and state health department(s) to ensure those living in West Volusia County have every opportunity to access quality healthcare.

Many of the clients RAAO serve, absolutely would not be in care if not for our team of dedicated HIV Testers, Counselors, and Case Managers. Our diverse team allows us the ability to provide culturally relevant awareness and services to the hard to reach populations that otherwise would not be receiving care.

# Background information

- ❑ RAAO is committed to serving the indigent and underserved populations by promoting health equity and bridging the gap in healthcare through:
  - HIV/AIDS awareness, counseling , and testing;
  - Linkage to prevention services (PrEP/PEP), treatment, and care;
  - Case management/other support services: medical/DMV transportation, WVHA HC enrollment, mail/phone services, cost for state documents-ID/SS Card, and Birth Certificates,
  - Reduction of behavioral, structural, and systemic barriers to healthcare access, including HIV stigma.

# Targeted Population (TP)

- Groups that are disproportionately affected.
- Indigent and underserved individuals with socio-economic and demographic barriers
- At-risk and hard-to-reach populations who also experience higher stigma and discrimination
- Young people aged 16-24
- Women and girls
- People Living With HIV (PLWH) who are not in care
- Newly diagnosed HIV cases

# Barriers to HIV Care and Treatment

- ❑ RAAO addresses the following barriers to healthcare in our TP:
  - Lack of social support
  - Lack of insurance and transportation due to financial hardship.
  - HIV/AIDS stigma/myths and misconceptions
  - Drug and substance abuse
  - Lack of knowledge and awareness of fundamental rights,
  - Issues related to race, gender, sexuality, and age barriers
  - Homelessness and/unstable housing
  - High healthcare cost



# Strategies for RAAO's service delivery

- ❑ RAAO's program is guided by national strategic goal of “ending HIV” through:
  - Increased HIV/AIDS awareness and education of TP
  - Increased access to HIV prevention services (e.g., condoms, PrEP, and PEP)
  - Timely linkage to treatment and care of newly diagnosed HIV clients.
  - Increased retention in care and adherence to HIV treatment through case follow-up and effective case management services
  - Increased workforce diversity to ensure delivery of inclusive and culturally appropriate HIV services
  - Mental health support through motivational counseling

# Outcomes of service delivery from Oct. 2023-April 2024.

□ Service outcomes are reported based on the following variables/measures:

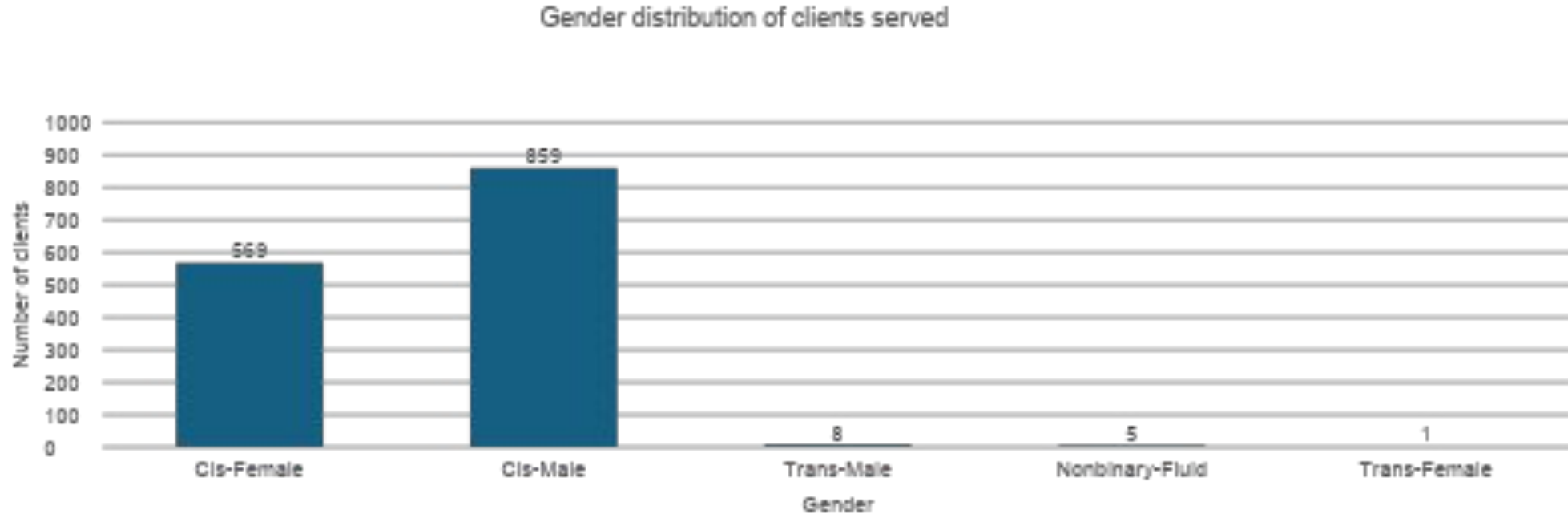
- Distribution of demographic characteristics is presented by Gender, Race/ethnicity, and Age Group
- Service delivered by units, unit cost, and total amount reimbursed.

Charts and graphs are provided to visualize the outcomes for clarity.

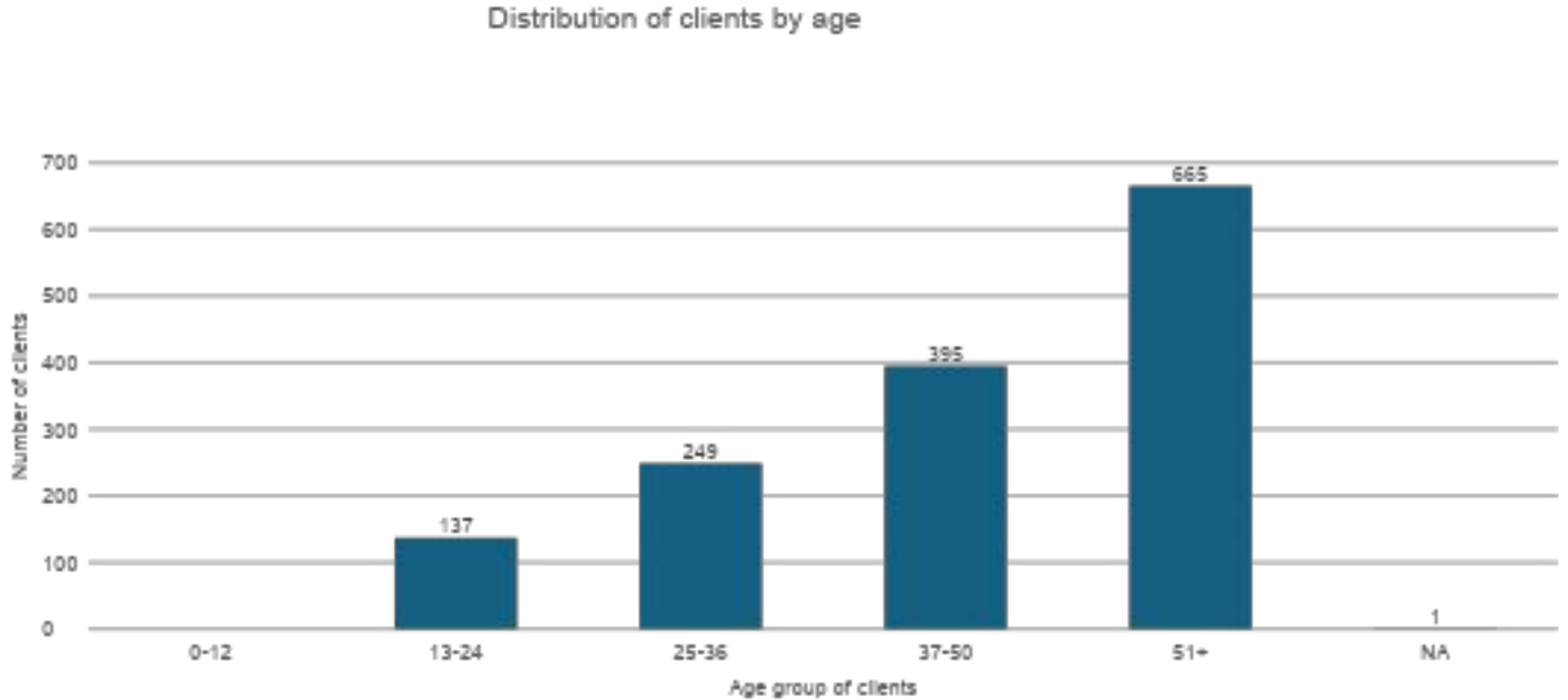
# Demographics of Population served from Oct. 2023-April 2024.

- ❑ Out of 1442 clients served, 59.57% (859) were cis-males, then cis-females 39.45% (569), trans-males 0.6%(8), nonbinary-fluid 0.35% (5), and trans-females 0.07% (1).
- ❑ Based on age, most clients were 51 years and older 45.96% (665), then those aged 37-50 years 27.30% (395), 25-36 years 17.20% (249), and 13-24 years 9.5% (137).
- ❑ Based on race/ethnicity, Caucasians accounted for 55.95% (803), then Blacks/African Americans 28.23% (413), Latinx 12.71% (181), multi-racial 1.52 % (22), Native American 0.65% (9), Asian American 0.51% (7), and Caribbean 0.43% (6).

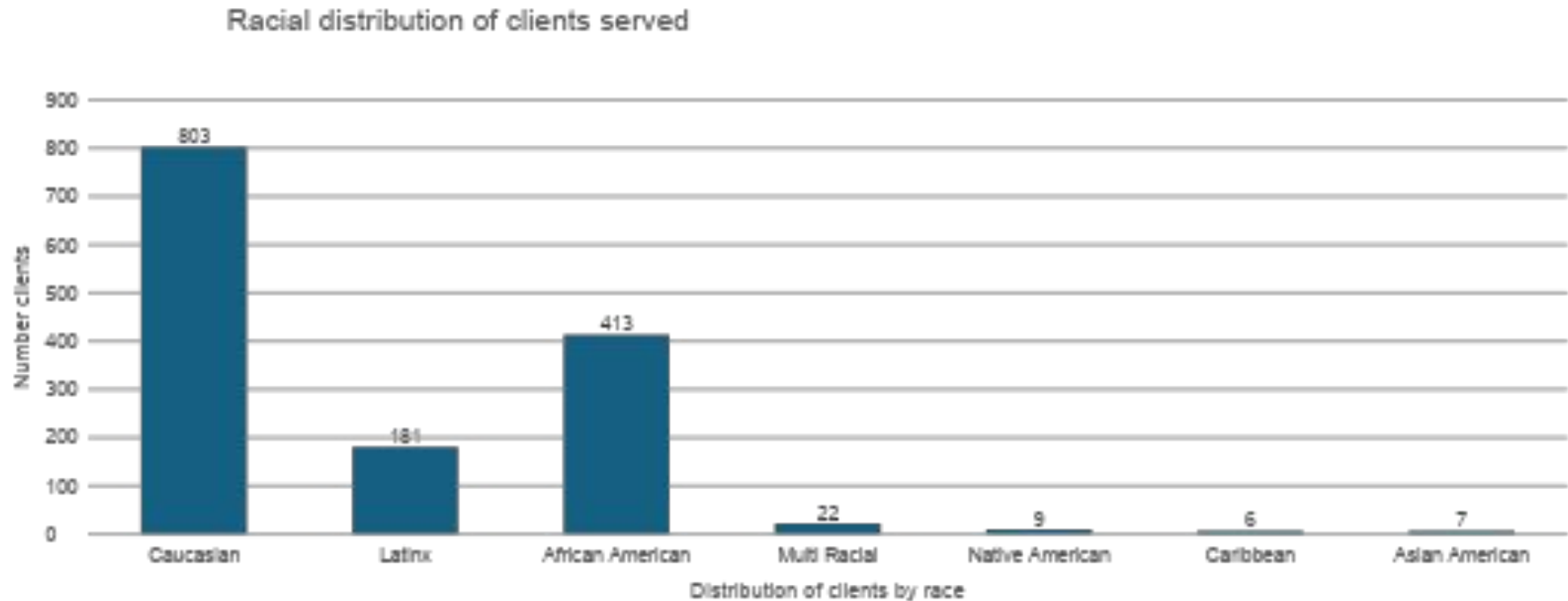
# Distribution of clients served from Oct. 2023-April 2024 by Gender.



# Distribution of clients served from Oct. 2023-April 2024 by Age.



# Distribution of clients served from Oct. 2023-April 2024 by Race/Ethnicity.



# **Reimbursement by service delivered for 2023/2024.**

Pursuant to Service Agreement, RAAO has been able to provide case management/transportation, Health behavior/education, and HIV counseling/Testing services:

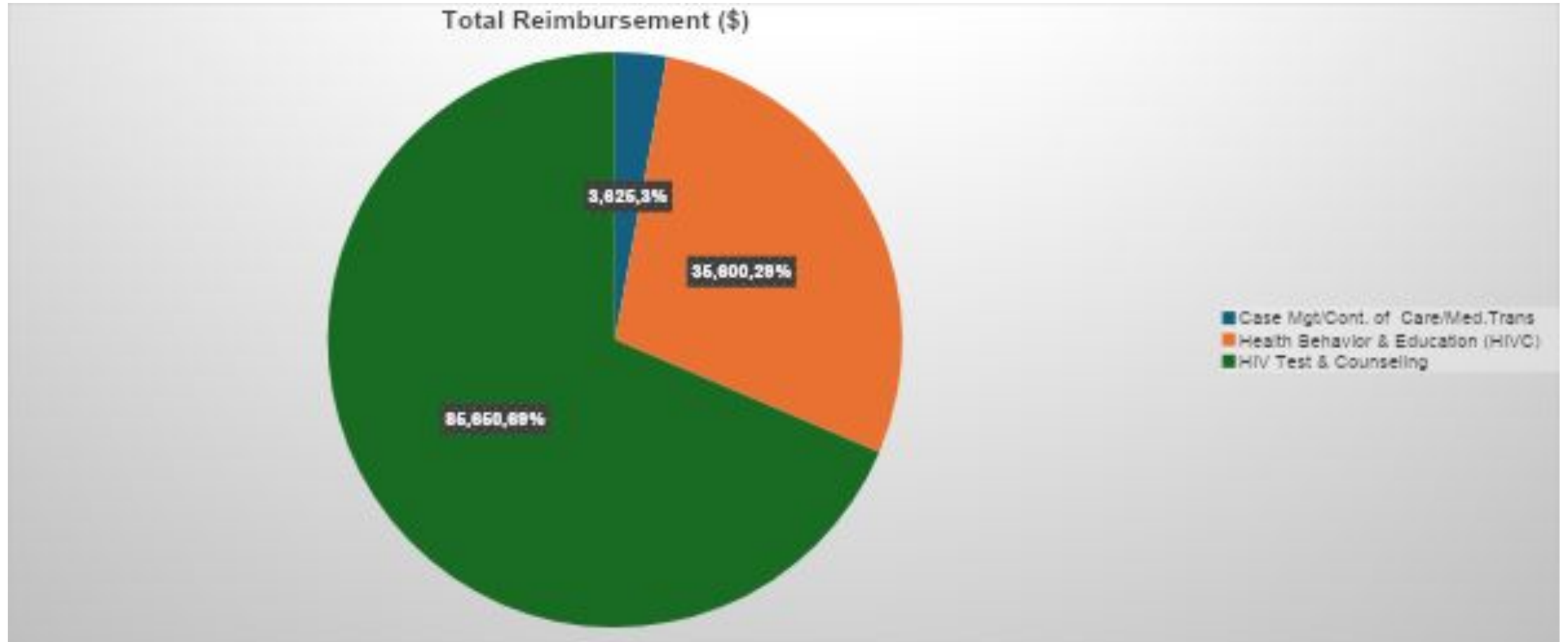
- From October 2023 to date, RAAO has provided 571 units of HIV counseling/Testing services, followed by 356 units of Health behavior/education, and 145 units of case management/transportation.
- The total amount reimbursed by WVHA for each of these services is presented in Table 1 and chart x in the following slides.

**Table 1: 2023/2024 HIV Program Service Reimbursement.**

Type of service	Units	Unit cost	Total Reimbursement
Case Mgmt / Cont of Care / Trans	145	25.00	\$3,625.00
Health Behavior & Education	356	100.00	\$35,600.00
HIV Test / Counseling - Individual	571	150.00	\$85,650.00
<b>Total</b>			<b>\$124,875.00</b>



# Pie Chart for 2023/2024 HIV Program Service Reimbursement



# HIV Test Results

In the period beginning October 2023 and ending March 2024, RAAO conducted a total of 641 individual HIV tests with counseling (HIVT). Of those 641 tests, three were reactive and required confirmatory testing by our lab partners. This represents a positivity rate of around 0.5% of HIV tests performed by RAAO.

All clients who receive a reactive HIV test are referred to RAAO RX for rapid disease treatment and management regardless of the client's financial, social, or health insurance status.



# WVHA Health Card Pre-Screening Program

RAAO's pre-screening service brings health equity to the socially disregarded population, who often require additional structure to reduce the barriers of the application process. RAAO's program increases access to the underrepresented, marginalized, economically disadvantaged, or socially excluded individuals.

RAAO's outreach efforts allow RAAO to provide hands-on, direct participant assistance to the hard to reach community members and assist with obtaining eligibility documents. RAAO continues to bridge the gaps in care within West Volusia to decrease health disparities and accelerate health equity.

RAAO will continue to collaborate with other agencies to address the barriers, such as lack of employment, housing, education, health care, public safety and nutrition, all of which are factors that adversely affect health outcomes.

**Table 1: 2023/2024 HC Program Service Reimbursement.**

Month	Billable units	Nonbillable units	Total Reimbursement (\$)
Oct-2023	21	22	\$4032.00
Nov-2023	21	19	\$4032.00
Dec-2023	10	14	\$1920.00
Jan-2024	26	16	\$4992.00
Feb-2024	22	11	\$4224.00
Mar-2024	32	10	\$6144.00
Apr-2024	34	40	\$6,528.00
<b>Total</b>	<b>166</b>	<b>132</b>	<b>\$31872.00</b>

# Summary of RAAO's HIV/HC Programs Accomplishments in 2023-2024

- ❑ Out of \$167,682.00 WVHA funding allocated to RAAO's HIV program, we have used \$124, 875.00 on service delivery of which:
  - 571 units of HIV Test / Counseling cost \$85,650.
  - 356 units of Health Behavior & Education cost \$35, 600.00
  - 145 units of Case Mgt / Cont. of Care / Trans cost \$3,625.00
  - Total balance from allocated fund =  $$(167,682 - 124,875) = \$42,807.$

# Summary of RAAO's HC Programs Accomplishments in 2023-2024

- Out of \$ **81,452.00** WVHA funding allocated to RAAO's HC program, we have used \$ 31,872.00 on delivering 166 billable services at \$192 per unit cost.
- Total balance from allocated fund =  $\$(81,452.00 - 31,872.00) = \$ 49,580.$
- During this period, RAAO worked with 132 additional clients reach eligibility for the health card, which are not billed to the WVHA

# Some of Our Partners

**Pablo Pella, MD**

Infectious Disease Specialist



Deltona Pharmacy



STETSON  
UNIVERSITY



THE  
NEIGHBORHOOD  
*Center*



The Farmworker  
Association of  
Florida, Inc.

# Unmet Needs of our Target Population

- Increasing homelessness and thereby high need for more housing.
- Increasing number Injection drug use and other substance abuse
- Increasing need for medical care access for HIV positive/other STIs cases and associated opportunistic diseases.
- Rising rates of unemployment and support services
- Growing need for medical insurance coverage hence need for workforce to increase WVHA Health Card enrollment.



# Client's recent reviews

“Excellent customer service. The staff goes over and beyond to help you. They also take the time to listen to you and help you, to the best of their ability. Thank you again for all you do for our community. You are much appreciated.” Elizabeth Peters.

"didn't take long for them to help me out. they gave me an address when I was homeless and needed one. And I believe they're the only place in Deland that does that. They also do free HIV testing there with a swab and health care too I think" Tonga Manu.

RAAO has maintained a 100% compliance on it's site visits.



EBMS

APRIL 2024

Submission Report for  
WVHA Board Members

# Table of Contents

Executive Summary Current Month & YTD .....1

PCORI Membership Count (*Enrollment by Month*).....5

Enrollment Counts by Postal Code .....6

Tier Census .....7

Benefit Analysis Summary Current Month & YTD.....9

Summary of Claims Paid by Location.....11

Paid Amount by PCP Encounters Current Month & YTD.....13

Claims paid by Month .....14



# Executive Summary for 00532

Client:

West Volusia Hospital Authority

Department: All

Paid Dates:

4/1/2024 to 4/30/2024

Benefit Plan: All

Location:

All

TIN: All

Plan Experience Summary			Cash Flow Summary		Disallowed Charges by Category		
Claim Counts	5528		Charges	\$6,284,282	Disallowed Category	Amount	% of Gross
Claim Type	Total Paid	Per EE/Mo	less Disallowed	\$5,507,546	Addl Info Not Provided	\$294,008	4.68%
Medical	\$767,579	\$544	Allowed	\$776,736	Duplicate Charges	\$1,015,024	16.15%
Professional	\$353,210	\$250	less Member	\$7,092	Plan Limitations	\$1,199,252	19.08%
Facility	\$414,368	\$293	less Adjustments	\$2,065	Cost Savings	\$2,996,965	47.69%
PBM	\$0	\$0	Paid Benefit	\$767,579	UCR Reductions	\$566	0.01%
<b>Total Plan Paid:</b>	<b>\$767,579</b>	<b>\$544</b>	plus Admin Costs	\$293,620	Other	\$1,732	0.03%
			<b>Total Plan Paid:</b>	<b>\$1,061,198</b>	<b>Total:</b>	<b>\$5,507,546</b>	<b>87.64%</b>

Census										
Census Date:	Male	Female	Total	Male	Female	Male	Female	Total	Total	Total
4/30/2024	Emp	Emp	Employees	Spouse	Spouse	Dep	Dep	Medical	Dental	Vision
0 to 19	37	35	72	0	0	0	0	72	0	0
20 to 25	27	48	75	0	0	0	0	75	0	0
26 to 29	36	23	59	0	0	0	0	59	0	0
30 to 39	115	114	229	0	0	0	0	229	0	0
40 to 49	155	163	318	0	0	0	0	318	0	0
50 to 59	174	226	400	0	0	0	0	400	0	0
60 to 64	85	93	178	0	0	0	0	178	0	0
65 and Older	28	53	81	0	0	0	0	81	0	0
<b>Totals</b>	<b>657</b>	<b>755</b>	<b>1412</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1412</b>	<b>0</b>	<b>0</b>
<b>Average Age</b>	<b>45.28</b>	<b>46.73</b>	<b>46.05</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>46.05</b>	<b>0.00</b>	<b>0.00</b>

Top Paid			Plan Payment by Age & Claimant Type			
Name	Claim Count	Paid	Census Date: 4/30/2024	Employee	Spouse	Dependent
Adventhealth Deland	71	\$103,625	0 to 19	\$4,825	\$0	\$0
Halifax Hospital Medical	18	\$97,899	20 to 25	\$31,602	\$0	\$0
Florida Cancer Specialists	117	\$96,414	26 to 29	\$20,460	\$0	\$0
Adventhealth Fish	72	\$86,062	30 to 39	\$58,306	\$0	\$0
Medical Center Of Deltona	33	\$67,940	40 to 49	\$95,897	\$0	\$0
PHPTS Of Ormond Beach	2	\$35,514	50 to 59	\$340,319	\$0	\$0
Medical Center Of Deltona	28	\$27,070	60 to 64	\$162,081	\$0	\$0
Quest Diagnostics Tampa	343	\$21,573	65 and Older	\$54,088	\$0	\$0
Quest Diagnostics Nichols	98	\$18,010	<b>Totals</b>	<b>\$767,579</b>	<b>\$0</b>	<b>\$0</b>
06 Radiology Associates	128	\$15,584				

Claims Paid by Month		Average Lag & Average Spend (rolling 12 months)			
October 23	\$598,474	Product	Avg Paid per Day	Avg Lag Days	Lag Dollars
November 23	\$486,358	Medical	\$20,590	45	\$926,550
December 23	\$460,092	Vision	\$0	13	\$0
January 24	\$743,884	RX	\$7	54	\$378
February 24	\$473,664	<b>Total:</b>			<b>\$926,928</b>
March 24	\$840,187				
April 24	\$767,579				
<b>Total:</b>	<b>\$4,370,238</b>				



# Executive Summary for 00532

Client: West Volusia Hospital Authority  
Paid Dates: 4/1/2024 to 4/30/2024  
Location: All  
Department: All  
Benefit Plan: All  
TIN: All

Benefit Analysis								
Benefit Category	Line Counts	Charges	Disallowed	Allowed	Member	Adjustments	Plan Paid	% of Total
AMBULANCE	4	\$1,640	\$1,640	\$0	\$0	\$0	\$0	0.00%
ANESTHESIA	59	\$72,202	\$52,363	\$19,839	\$0	\$0	\$19,839	2.58%
CHIROPRACTIC	21	\$828	\$500	\$328	\$70	\$0	\$258	0.03%
COVID-19	2	\$102	\$102	\$0	\$0	\$0	\$0	0.00%
DIALYSIS	87	\$1,234,210	\$1,219,684	\$14,526	\$0	\$0	\$14,526	1.89%
DME/APPLIANCE	3	\$1,251	\$1,251	\$0	\$0	\$0	\$0	0.00%
EMERG ROOM CHRGS	401	\$898,955	\$790,070	\$108,885	\$1,212	\$0	\$107,673	14.03%
HOSPICE CARE	4	\$3,685	\$3,685	\$0	\$0	\$0	\$0	0.00%
INELIGIBLE	533	\$897,393	\$897,393	\$0	\$0	\$0	\$0	0.00%
INPATIENT PHYS	368	\$87,225	\$56,834	\$30,391	\$0	\$0	\$30,391	3.96%
IP HOSP CHARGES	40	\$1,008,374	\$872,302	\$136,072	\$750	\$0	\$135,322	17.63%
MEDICAL MISC	5	\$480	\$367	\$113	\$20	\$0	\$93	0.01%
OFFICE VISIT	384	\$101,498	\$66,121	\$35,377	\$2,760	\$0	\$32,617	4.25%
OP PHYSICIAN	297	\$212,336	\$186,640	\$25,697	\$584	\$0	\$25,113	3.27%
OTHER	2	\$779	\$779	\$0	\$0	\$2,065	-\$2,065	-0.27%
OUTPAT HOSP	30	\$16,757	\$8,712	\$8,045	\$193	\$0	\$7,852	1.02%
PSYCHIATRIC	50	\$12,557	\$6,783	\$5,774	\$240	\$0	\$5,534	0.72%
RADIATION /CHEMO	72	\$263,347	\$180,428	\$82,919	\$9	\$0	\$82,910	10.80%
SUBS ABUSE	8	\$126,205	\$83,752	\$42,453	\$0	\$0	\$42,453	5.53%
SURG FACILITY	66	\$500,453	\$377,866	\$122,587	-\$250	\$0	\$122,837	16.00%
SURGERY	38	\$10,789	\$7,227	\$3,562	\$0	\$0	\$3,562	0.46%
SURGERY IP	35	\$80,142	\$58,302	\$21,839	\$0	\$0	\$21,839	2.85%
SURGERY OP	34	\$76,609	\$64,384	\$12,226	\$0	\$0	\$12,226	1.59%
THERAPY	291	\$32,195	\$25,803	\$6,392	\$490	\$0	\$5,902	0.77%
URGENT CARE	8	\$3,484	\$2,470	\$1,014	\$200	\$0	\$814	0.11%
WELLNESS	321	\$47,951	\$38,853	\$9,098	\$0	\$0	\$9,098	1.19%
XRAY/ LAB	2776	\$592,835	\$503,237	\$89,598	\$814	\$0	\$88,784	11.57%
<b>Totals:</b>	<b>5939</b>	<b>\$6,284,282</b>	<b>\$5,507,546</b>	<b>\$776,736</b>	<b>\$7,092</b>	<b>\$2,065</b>	<b>\$767,579</b>	



# Executive Summary for 00532

Client:

West Volusia Hospital Authority

Department: All

Paid Dates:

10/1/2023 to 4/30/2024

Benefit Plan: All

Location:

All

TIN: All

Plan Experience Summary			Cash Flow Summary		Disallowed Charges by Category		
Claim Counts	45800		Charges	\$39,546,429	Disallowed Category	Amount	% of Gross
Claim Type	Total Paid	Per EE/Mo	less Disallowed	\$35,105,458	Addl Info Not Provided	-\$874,367	-2.21%
Medical	\$4,369,070	\$442	Allowed	\$4,440,971	Duplicate Charges	\$1,767,174	4.47%
Professional	\$1,808,309	\$183	less Member	\$70,343	Plan Limitations	\$10,808,883	27.33%
Facility	\$2,560,761	\$259	less Adjustments	\$390	Cost Savings	\$22,991,349	58.14%
PBM	\$1,168	\$0	Paid Benefit	\$4,370,238	UCR Reductions	\$7,708	0.02%
Vision	\$0	\$0	plus Admin Costs	\$2,045,255	Other	\$404,710	1.02%
<b>Total Plan Paid:</b>	<b>\$4,370,238</b>	<b>\$442</b>	<b>Total Plan Paid:</b>	<b>\$6,415,492</b>	<b>Total:</b>	<b>\$35,105,458</b>	<b>88.77%</b>

Census										
Census Date:	Male	Female	Total	Male	Female	Male	Female	Total	Total	Total
4/30/2024	Emp	Emp	Employees	Spouse	Spouse	Dep	Dep	Medical	Dental	Vision
0 to 19	37	35	72	0	0	0	0	72	0	0
20 to 25	27	48	75	0	0	0	0	75	0	0
26 to 29	36	23	59	0	0	0	0	59	0	0
30 to 39	115	114	229	0	0	0	0	229	0	0
40 to 49	155	163	318	0	0	0	0	318	0	0
50 to 59	174	226	400	0	0	0	0	400	0	0
60 to 64	85	93	178	0	0	0	0	178	0	0
65 and Older	28	53	81	0	0	0	0	81	0	0
<b>Totals</b>	<b>657</b>	<b>755</b>	<b>1412</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1412</b>	<b>0</b>	<b>0</b>
<b>Average Age</b>	<b>45.28</b>	<b>46.73</b>	<b>46.05</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>46.05</b>	<b>0.00</b>	<b>0.00</b>

Top Paid			Plan Payment by Age & Claimant Type			
Name	Claim Count	Paid	Census Date: 4/30/2024	Employee	Spouse	Dependent
Adventhealth Deland	510	\$653,086	0 to 19	\$51,341	\$0	\$0
Halifax Hospital Medical	93	\$638,924	20 to 25	\$120,944	\$0	\$0
Adventhealth Fish	450	\$439,868	26 to 29	\$66,630	\$0	\$0
Medical Center Of Deltona	145	\$401,021	30 to 39	\$398,502	\$0	\$0
Florida Cancer Specialists	662	\$318,928	40 to 49	\$728,605	\$0	\$0
Deland Dialysis	274	\$187,621	50 to 59	\$1,885,384	\$0	\$0
Quest Diagnostics Tampa	2420	\$150,869	60 to 64	\$805,796	\$0	\$0
Wellness Avenue Surgery	191	\$89,049	65 and Older	\$313,037	\$0	\$0
06 Radiology Associates	735	\$83,580	<b>Totals</b>	<b>\$4,370,238</b>	<b>\$0</b>	<b>\$0</b>
Quest Diagnostics Nichols	451	\$77,640				

Claims Paid by Month		Average Lag & Average Spend (rolling 12 months)			
October 23	\$598,474	Product	Avg Paid per Day	Avg Lag Days	Lag Dollars
November 23	\$486,358	Medical	\$20,590	45	\$926,550
December 23	\$460,092	Vision	\$0	13	\$0
January 24	\$743,884	RX	\$7	54	\$378
February 24	\$473,664	<b>Total:</b>			<b>\$926,928</b>
March 24	\$840,187				
April 24	\$767,579				
<b>Total:</b>	<b>\$4,370,238</b>				



# Executive Summary for 00532

Client:

West Volusia Hospital Authority

Department: All

Paid Dates:

10/1/2023 to 4/30/2024

Benefit Plan: All

Location:

All

TIN: All

Benefit Analysis								
Benefit Category	Line Counts	Charges	Disallowed	Allowed	Member	Adjustments	Plan Paid	% of Total
AMBULANCE	28	\$33,035	\$33,035	\$0	\$0	\$0	\$0	0.00%
ANESTHESIA	384	\$499,838	\$434,435	\$65,403	\$0	\$0	\$65,403	1.50%
CHIROPRACTIC	90	\$5,201	\$3,297	\$1,904	\$440	\$0	\$1,464	0.03%
COVID-19	9	\$1,073	\$1,073	\$0	\$0	\$0	\$0	0.00%
DIALYSIS	437	\$7,141,739	\$6,911,891	\$229,848	\$0	\$0	\$229,848	5.26%
DME/APPLIANCE	60	\$30,015	\$30,015	\$0	\$0	\$0	\$0	0.00%
EMERG ROOM CHRGS	2682	\$5,439,323	\$4,833,173	\$606,151	\$18,763	\$0	\$587,388	13.44%
HOME HEALTH CARE	4	\$1,866	\$1,815	\$51	\$0	\$0	\$51	0.00%
HOSPICE CARE	5	-\$23,405	-\$23,405	\$0	\$0	\$0	\$0	0.00%
INELIGIBLE	2768	\$3,770,514	\$3,770,514	\$0	\$0	\$0	\$0	0.00%
INPATIENT PHYS	1699	\$450,783	\$331,556	\$119,227	\$0	\$0	\$119,227	2.73%
IP HOSP CHARGES	346	\$9,821,393	\$8,760,435	\$1,060,957	\$5,150	\$0	\$1,055,807	24.16%
MATERNITY	16	\$36,000	\$36,000	\$0	\$0	\$0	\$0	0.00%
MEDICAL MISC	97	\$16,517	\$15,240	\$1,278	\$176	\$0	\$1,102	0.03%
OFFICE VISIT	4461	\$699,717	\$422,589	\$277,127	\$22,030	\$0	\$255,097	5.84%
OP PHYSICIAN	1444	\$707,572	\$585,607	\$121,965	\$2,492	\$0	\$119,473	2.73%
OTHER	1058	\$12,513	\$11,990	\$523	\$10	\$390	\$124	0.00%
OUTPAT HOSP	107	\$72,305	\$55,120	\$17,184	\$562	\$0	\$16,622	0.38%
PSYCHIATRIC	640	\$161,307	\$87,281	\$74,026	\$2,736	\$0	\$71,290	1.63%
RADIATION /CHEMO	413	\$1,192,037	\$914,711	\$277,326	\$18	\$0	\$277,309	6.35%
REHAB	1	\$32,611	\$29,215	\$3,396	\$0	\$0	\$3,396	0.08%
SUBS ABUSE	36	\$595,270	\$497,113	\$98,157	\$0	\$0	\$98,157	2.25%
SURG FACILITY	543	\$3,882,422	\$3,245,512	\$636,911	\$7,675	\$0	\$629,236	14.40%
SURGERY	1048	\$274,855	\$236,945	\$37,910	\$0	\$0	\$37,910	0.87%
SURGERY IP	140	\$298,429	\$241,730	\$56,699	\$0	\$0	\$56,699	1.30%
SURGERY OP	207	\$275,005	\$217,058	\$57,947	\$0	\$0	\$57,947	1.33%
THERAPY	1921	\$225,293	\$160,908	\$64,385	\$5,040	\$0	\$59,345	1.36%
URGENT CARE	45	\$13,942	\$10,351	\$3,591	\$750	\$0	\$2,841	0.07%
VISION	3	\$429	\$429	\$0	\$0	\$0	\$0	0.00%
WELLNESS	3284	\$354,661	\$270,778	\$83,883	\$4	\$0	\$83,879	1.92%
XRAY/ LAB	23145	\$3,524,169	\$2,979,049	\$545,120	\$4,498	\$0	\$540,622	12.37%
<b>Totals:</b>	<b>47121</b>	<b>\$39,546,429</b>	<b>\$35,105,458</b>	<b>\$4,440,971</b>	<b>\$70,343</b>	<b>\$390</b>	<b>\$4,370,238</b>	



PCORI Membership Count

Block of Business ID: EBMSI  
Client ID: 00532

Eligibility Date: : 1/1/2024 to 4/30/2024

Month-Year	Employee Count	Dependent Count	Total Member
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00532-West Volusia Hospital Authority

1/1/2024	1445	0	1445
2/1/2024	1454	0	1454
3/1/2024	1487	0	1487
4/1/2024	1484	0	1484

Total Member Days

1,467.50





# Enrollment Counts by City and State

Block of Business ID: EBMSI  
Client ID: 00532

As Of Date: 4/30/2024

City, State	Employee Count	Dependent Count	Total Count
De Leon Springs, FL	102	0	102
Debary, FL	36	0	36
Deland, FL	687	0	687
Deltona, FL	339	0	339
Enterprise, FL	2	0	2
Lake Helen, FL	15	0	15
Orange City, FL	89	0	89
Osteen, FL	8	0	8
Pierson, FL	82	0	82
Seville, FL	34	0	34
Total	1394	0	1394



# Tier Census by Product 4/1/2024

Block of Business ID: EBMSI  
Client ID: 00532  
Status: A,C,NC,R,V

Products: MM,DE,VI

## 00532 : West Volusia Hospital Authority

Medical	Status	Coverage Level	Total Members	Male Members	Female Members	Male Spouses	Female Spouses	Male Dependents	Female Dependents	Total Enrolled
	Active	Employee Only	1377	635	742	0	0	0	0	1377
		Subtotal for Active:	1377	635	742	0	0	0	0	1377
		Total for Medical:	1377	635	742	0	0	0	0	1377



# Tier Census by Product 4/15/2024

Block of Business ID: EBMSI  
Client ID: 00532  
Status: A,C,NC,R,V

Products: MM,DE,VI

## 00532 : West Volusia Hospital Authority

Medical	Status	Coverage Level	Total Members	Male Members	Female Members	Male Spouses	Female Spouses	Male Dependents	Female Dependents	Total Enrolled
	Active	Employee Only	1396	649	747	0	0	0	0	1396
		Subtotal for Active:	1396	649	747	0	0	0	0	1396
		Total for Medical:	1396	649	747	0	0	0	0	1396



## Benefit Analysis Summary

Block of Business ID: EBMSI  
Client ID: 00532  
Paid Date: 4/1/2024 to 4/30/2024

	Line Count	Charge	Ineligible	Cost Savings	Allowed	Patient Responsibility	Adjustments	Paid	% Paid
00532-West Volusia Hospital Authority									
AMBULANCE	4	1,640.00	1,640.00	0.00	0.00	0.00	0.00	0.00	0.00%
ANESTHESIA	59	72,201.70	11,834.20	40,528.44	19,839.06	0.00	0.00	19,839.06	2.58%
CHIROPRACTIC	21	827.78	237.78	262.05	327.95	70.00	0.00	257.95	0.03%
COVID-19	2	101.70	101.70	0.00	0.00	0.00	0.00	0.00	0.00%
DIALYSIS	87	1,234,209.93	1,023,395.27	196,288.86	14,525.80	0.00	0.00	14,525.80	1.89%
DME/APPLIANCE	3	1,251.00	1,251.00	0.00	0.00	0.00	0.00	0.00	0.00%
EMERG ROOM...	401	898,954.75	96,050.68	694,019.39	108,884.68	1,211.60	0.00	107,673.08	14.03%
HOSPICE CARE	4	3,684.79	3,684.79	0.00	0.00	0.00	0.00	0.00	0.00%
INELIGIBLE	533	897,392.92	897,392.92	0.00	0.00	0.00	0.00	0.00	0.00%
INPATIENT PHYS	368	87,225.00	9,687.00	47,146.91	30,391.09	0.00	0.00	30,391.09	3.96%
IP HOSP CHARGES	40	1,008,374.18	203,847.36	668,455.08	136,071.74	750.00	0.00	135,321.74	17.63%
MEDICAL MISC	5	480.00	0.00	367.32	112.68	20.00	0.00	92.68	0.01%
OFFICE VISIT	384	101,497.91	11,759.10	54,361.62	35,377.19	2,760.00	0.00	32,617.19	4.25%
OP PHYSICIAN	297	212,336.35	69,106.99	117,532.61	25,696.75	583.57	0.00	25,113.18	3.27%
OTHER	9	779.00	0.00	779.00	0.00	0.00	2,065.37	-2,065.37	-0.27%
OUTPAT HOSP	30	16,757.24	1,029.43	7,682.32	8,045.49	193.28	0.00	7,852.21	1.02%
PSYCHIATRIC	50	12,557.39	4,500.00	2,283.07	5,774.32	240.00	0.00	5,534.32	0.72%
RADIATION /CHEMO	72	263,346.91	49,543.91	130,883.79	82,919.21	8.84	0.00	82,910.37	10.80%
SUBS ABUSE	8	126,205.00	46,540.00	37,211.68	42,453.32	0.00	0.00	42,453.32	5.53%
SURG FACILITY	66	500,452.99	20,918.13	356,947.43	122,587.43	-250.00	0.00	122,837.43	16.00%
SURGERY	38	10,789.24	508.00	6,719.14	3,562.10	0.00	0.00	3,562.10	0.46%
SURGERY IP	35	80,141.56	3,240.00	55,062.48	21,839.08	0.00	0.00	21,839.08	2.85%
SURGERY OP	34	76,609.41	4,225.00	60,158.61	12,225.80	0.00	0.00	12,225.80	1.59%
THERAPY	291	32,195.04	12,067.00	13,736.20	6,391.84	490.00	0.00	5,901.84	0.77%
URGENT CARE	8	3,484.00	0.00	2,469.61	1,014.39	200.00	0.00	814.39	0.11%
WELLNESS	321	47,950.90	2,454.29	36,399.05	9,097.56	0.00	0.00	9,097.56	1.19%
XRAY/ LAB	2776	592,835.34	35,387.22	467,849.79	89,598.33	814.43	0.00	88,783.90	11.57%
Totals for 00532	5946	6,284,282.03	2,510,401.77	2,997,144.45	776,735.81	7,091.72	2,065.37	767,578.72	

Requested by: ReportScheduler from p316 data [P316]

Generated at: 05:04:05 on 01 May 2024



# Benefit Analysis Summary

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 10/1/2023 to 4/30/2024

	Line Count	Charge	Ineligible	Cost Savings	Allowed	Patient Responsibility	Adjustments	Paid	% Paid
00532-West Volusia Hospital Authority									
AMBULANCE	28	33,034.50	33,034.50	0.00	0.00	0.00	0.00	0.00	0.00%
ANESTHESIA	384	499,838.08	101,027.78	333,407.11	65,403.19	0.00	0.00	65,403.19	1.50%
CHIROPRACTIC	90	5,201.14	1,273.28	2,023.69	1,904.17	440.00	0.00	1,464.17	0.03%
COVID-19	9	1,072.95	1,072.95	0.00	0.00	0.00	0.00	0.00	0.00%
DIALYSIS	437	7,141,739.34	1,591,507.06	5,320,384.15	229,848.13	0.00	0.00	229,848.13	5.26%
DME/APPLIANCE	60	30,015.45	30,015.45	0.00	0.00	0.00	0.00	0.00	0.00%
EMERG ROOM...	2682	5,439,323.35	649,284.43	4,183,888.16	606,150.76	18,762.78	0.00	587,387.98	13.44%
HOME HEALTH CARE	4	1,866.06	1,794.06	20.57	51.43	0.00	0.00	51.43	0.00%
HOSPICE CARE	5	-23,405.21	-23,405.21	0.00	0.00	0.00	0.00	0.00	0.00%
INELIGIBLE	2768	3,770,513.62	3,770,513.62	0.00	0.00	0.00	0.00	0.00	0.00%
INPATIENT PHYS	1699	450,783.03	145,662.46	185,893.26	119,227.31	0.00	0.00	119,227.31	2.73%
IP HOSP CHARGES	346	9,821,392.70	3,080,083.74	5,680,351.58	1,060,957.38	5,150.00	0.00	1,055,807.38	24.16%
MATERNITY	16	36,000.00	36,000.00	0.00	0.00	0.00	0.00	0.00	0.00%
MEDICAL MISC	97	16,517.18	4,904.18	10,335.43	1,277.57	176.04	0.00	1,101.53	0.03%
OFFICE VISIT	4461	699,716.72	61,568.16	361,021.21	277,127.35	22,030.00	0.00	255,097.35	5.84%
OP PHYSICIAN	1444	707,571.56	124,213.65	461,393.15	121,964.76	2,491.59	0.00	119,473.17	2.73%
OTHER	1125	12,513.00	8,167.00	3,822.74	523.26	10.00	454.87	58.39	0.00%
OUTPAT HOSP	107	72,304.75	17,197.23	37,923.08	17,184.44	562.30	0.00	16,622.14	0.38%
PSYCHIATRIC	640	161,307.16	53,937.17	33,343.64	74,026.35	2,736.00	0.00	71,290.35	1.63%
RADIATION /CHEMO	413	1,192,036.83	123,430.10	791,280.44	277,326.29	17.68	0.00	277,308.61	6.35%
REHAB	1	32,611.00	0.00	29,215.01	3,395.99	0.00	0.00	3,395.99	0.08%
SUBS ABUSE	36	595,269.62	346,507.53	150,605.20	98,156.89	0.00	0.00	98,156.89	2.25%
SURG FACILITY	543	3,882,422.42	424,887.88	2,820,623.93	636,910.61	7,675.00	0.00	629,235.61	14.40%
SURGERY	1048	274,854.67	22,200.00	214,744.69	37,909.98	0.00	0.00	37,909.98	0.87%
SURGERY IP	140	298,429.08	55,089.02	186,640.95	56,699.11	0.00	0.00	56,699.11	1.30%
SURGERY OP	207	275,005.47	20,659.96	196,398.13	57,947.38	0.00	0.00	57,947.38	1.33%
THERAPY	1921	225,293.13	39,494.03	121,413.78	64,385.32	5,040.00	0.00	59,345.32	1.36%
URGENT CARE	45	13,942.00	2,290.00	8,061.29	3,590.71	750.00	0.00	2,840.71	0.07%
VISION	3	429.00	429.00	0.00	0.00	0.00	0.00	0.00	0.00%
WELLNESS	3284	354,661.11	9,605.14	261,172.97	83,883.00	4.48	0.00	83,878.52	1.92%
XRAY/ LAB	23145	3,524,169.08	401,186.67	2,577,862.80	545,119.61	4,497.61	0.00	540,622.00	12.37%
<b>Totals for 00532</b>	<b>47188</b>	<b>39,546,428.79</b>	<b>11,133,630.84</b>	<b>23,971,826.96</b>	<b>4,440,970.99</b>	<b>70,343.48</b>	<b>454.87</b>	<b>4,370,172.64</b>	



# Summary of Claims Paid By Location

Block of Business ID: EBMSI  
Client ID: 00532

Paid Date: 4/1/2024 to 4/30/2024

Description	Claims	Medical	Dental	Vision	Prescription	Disability	Total Paid
00532-West Volusia Hospital Authority							
DeLand	2	0.00	0.00	0.00	0.00	0.00	0.00
miCareDeLand	1463	419,849.32	0.00	0.00	0.00	0.00	419,849.32
miCareDelton	1061	340,032.99	0.00	0.00	0.00	0.00	340,032.99
miCarePierse	56	7,696.41	0.00	0.00	0.00	0.00	7,696.41
N/A	25	0.00	0.00	0.00	0.00	0.00	0.00
00532 Totals:	2607	767,578.72	0.00	0.00	0.00	0.00	767,578.72



# Summary of Claims Paid By Location

Block of Business ID: EBMSI  
Client ID: 00532

Paid Date: 10/1/2023 to 4/30/2024

Description	Claims	Medical	Dental	Vision	Prescription	Disability	Total Paid
00532-West Volusia Hospital Authority							
DeLand	4	0.00	0.00	0.00	0.00	0.00	0.00
miCareDeLand	10748	2,242,460.09	0.00	0.00	1,167.78	0.00	2,243,627.87
miCareDelton	7956	1,988,836.05	0.00	0.00	0.00	0.00	1,988,836.05
miCarePierse	691	137,773.88	0.00	0.00	0.00	0.00	137,773.88
N/A	170	0.00	0.00	0.00	0.00	0.00	0.00
00532 Totals:	19569	4,369,070.02	0.00	0.00	1,167.78	0.00	4,370,237.80



Top Providers by Paid Amount for Tins: '204552956'

Block of Business ID: EBMSI  
Client ID: 00532

Paid Date: 10/1/2023 to 4/30/2024

Tin	NPI	Provider	City	State	Specialty	Claim Count	Billed Charges	Over UCR	PPO Discount	Allowed	Plan Paid	Patient Resp
20-4552956	1942540356	Micare LLC	Billings	MT	Clinic	2804	0.00	0.00	0.00	0.00	0.00	0.00





## CLAIMS PAID BY MONTH

Paid Date: 10/1/23 to 4/30/24

Location Name	Month	Hospital	Laboratory	PCP	Specialty	Facility Physician	Total Claims Count	Total Paid Claims	Total Fixed Costs	Employee Count	PEPM Cost/ Employee	Hospital PEPM	Lab PEPM	PCP PEPM	Specialty PEPM	Facility PEPM
00532 - West Volusia Hospital Authority																
DeLand	03-2024	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	2	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
DeLand	04-2024	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	2	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	<b>Subtotal:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>4</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>0</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
miCareDeLand	10-2023	\$91,816.35	\$13,613.00	\$0.00	\$124,891.59	\$0.00	1532	\$230,320.94	\$0.00	852	\$270.33	\$107.77	\$15.98	\$0.00	\$146.59	\$0.00
miCareDeLand	11-2023	\$103,725.42	\$16,686.73	\$0.00	\$141,229.30	\$0.00	1683	\$261,641.45	\$0.00	860	\$304.23	\$120.61	\$19.40	\$0.00	\$164.22	\$0.00
miCareDeLand	12-2023	\$175,720.86	\$13,167.09	\$0.00	\$114,600.83	\$0.00	1275	\$303,488.78	\$0.00	851	\$356.63	\$206.49	\$15.47	\$0.00	\$134.67	\$0.00
miCareDeLand	01-2024	\$243,901.78	\$24,175.34	\$0.00	\$176,646.00	\$0.00	1967	\$444,723.12	\$0.00	881	\$504.79	\$276.85	\$27.44	\$0.00	\$200.51	\$0.00
miCareDeLand	02-2024	\$71,806.12	\$22,274.00	\$0.00	\$99,965.61	\$0.00	1425	\$194,045.73	\$0.00	889	\$218.27	\$80.77	\$25.06	\$0.00	\$112.45	\$0.00
miCareDeLand	03-2024	\$241,567.35	\$26,119.63	\$0.00	\$119,295.43	\$0.00	1349	\$386,982.41	\$0.00	916	\$422.47	\$263.72	\$28.51	\$0.00	\$130.24	\$0.00
miCareDeLand	04-2024	\$257,898.22	\$26,472.69	\$0.00	\$135,478.41	\$0.00	1460	\$419,849.32	\$0.00	926	\$453.40	\$278.51	\$28.59	\$0.00	\$146.30	\$0.00
	<b>Subtotal:</b>	<b>\$1,186,436.10</b>	<b>\$142,508.48</b>	<b>\$0.00</b>	<b>\$912,107.17</b>	<b>\$0.00</b>	<b>10691</b>	<b>\$2,241,051.75</b>	<b>\$0.00</b>	<b>6175</b>	<b>\$362.92</b>	<b>\$192.14</b>	<b>\$23.08</b>	<b>\$0.00</b>	<b>\$147.71</b>	<b>\$0.00</b>
miCareDelton	10-2023	\$240,491.90	\$15,991.46	\$0.00	\$99,201.08	\$0.00	1115	\$355,684.44	\$0.00	514	\$691.99	\$467.88	\$31.11	\$0.00	\$193.00	\$0.00
miCareDelton	11-2023	\$65,021.78	\$10,271.43	\$0.00	\$122,627.30	\$0.00	1052	\$197,920.51	\$0.00	510	\$388.08	\$127.49	\$20.14	\$0.00	\$240.45	\$0.00
miCareDelton	12-2023	\$71,875.83	\$8,055.61	\$0.00	\$61,840.26	\$0.00	945	\$141,771.70	\$0.00	508	\$279.08	\$141.49	\$15.86	\$0.00	\$121.73	\$0.00
miCareDelton	01-2024	\$117,945.03	\$16,983.57	\$0.00	\$150,796.76	\$0.00	1455	\$285,725.36	\$0.00	498	\$573.75	\$236.84	\$34.10	\$0.00	\$302.80	\$0.00
miCareDelton	02-2024	\$96,426.24	\$16,099.63	\$0.00	\$130,012.33	\$0.00	1239	\$242,538.20	\$0.00	499	\$486.05	\$193.24	\$32.26	\$0.00	\$260.55	\$0.00
miCareDelton	03-2024	\$302,299.51	\$19,039.70	\$0.00	\$103,823.64	\$0.00	1071	\$425,162.85	\$0.00	504	\$843.58	\$599.80	\$37.78	\$0.00	\$206.00	\$0.00
miCareDelton	04-2024	\$146,279.01	\$17,121.37	\$0.00	\$176,632.61	\$0.00	1060	\$340,032.99	\$0.00	493	\$689.72	\$296.71	\$34.73	\$0.00	\$358.28	\$0.00
	<b>Subtotal:</b>	<b>\$1,040,339.30</b>	<b>\$103,562.77</b>	<b>\$0.00</b>	<b>\$844,933.98</b>	<b>\$0.00</b>	<b>7937</b>	<b>\$1,988,836.05</b>	<b>\$0.00</b>	<b>3526</b>	<b>\$564.05</b>	<b>\$295.05</b>	<b>\$29.37</b>	<b>\$0.00</b>	<b>\$239.63</b>	<b>\$0.00</b>
miCarePierso	10-2023	\$818.41	\$2,657.79	\$0.00	\$8,992.74	\$0.00	101	\$12,468.94	\$0.00	71	\$175.62	\$11.53	\$37.43	\$0.00	\$126.66	\$0.00
miCarePierso	11-2023	\$14,410.74	\$1,318.11	\$0.00	\$9,658.89	\$0.00	116	\$25,387.74	\$0.00	69	\$367.94	\$208.85	\$19.10	\$0.00	\$139.98	\$0.00
miCarePierso	12-2023	\$3,296.82	\$1,053.55	\$0.00	\$9,312.94	\$0.00	93	\$13,663.31	\$0.00	65	\$210.20	\$50.72	\$16.21	\$0.00	\$143.28	\$0.00
miCarePierso	01-2024	\$5,225.70	\$2,055.00	\$0.00	\$6,154.71	\$0.00	124	\$13,435.41	\$0.00	66	\$203.57	\$79.18	\$31.14	\$0.00	\$93.25	\$0.00
miCarePierso	02-2024	\$20,676.75	\$2,033.97	\$0.00	\$14,369.69	\$0.00	125	\$37,080.41	\$0.00	66	\$561.82	\$313.28	\$30.82	\$0.00	\$217.72	\$0.00
miCarePierso	03-2024	\$17,087.07	\$1,344.64	\$0.00	\$9,609.95	\$0.00	76	\$28,041.66	\$0.00	67	\$418.53	\$255.03	\$20.07	\$0.00	\$143.43	\$0.00
miCarePierso	04-2024	\$2,653.34	\$2,037.08	\$0.00	\$3,005.99	\$0.00	56	\$7,696.41	\$0.00	65	\$118.41	\$40.82	\$31.34	\$0.00	\$46.25	\$0.00
	<b>Subtotal:</b>	<b>\$64,168.83</b>	<b>\$12,500.14</b>	<b>\$0.00</b>	<b>\$61,104.91</b>	<b>\$0.00</b>	<b>691</b>	<b>\$137,773.88</b>	<b>\$0.00</b>	<b>469</b>	<b>\$293.76</b>	<b>\$136.82</b>	<b>\$26.65</b>	<b>\$0.00</b>	<b>\$130.29</b>	<b>\$0.00</b>
N/A	10-2023	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	58	\$0.00	\$294,578.05	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
N/A	11-2023	\$1,408.34	\$0.00	\$0.00	\$0.00	\$0.00	40	\$1,408.34	\$314,356.68	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
N/A	12-2023	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	17	\$0.00	\$318,022.05	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
N/A	01-2024	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	6	\$0.00	\$275,272.53	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
N/A	02-2024	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	12	\$0.00	\$274,436.64	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
N/A	03-2024	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	9	\$0.00	\$274,969.04	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
N/A	04-2024	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	25	\$0.00	\$293,619.68	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	<b>Subtotal:</b>	<b>\$1,408.34</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>167</b>	<b>\$1,408.34</b>	<b>\$2,045,254.67</b>	<b>0</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
	<b>Total:</b>	<b>\$2,292,352.57</b>	<b>\$258,571.39</b>	<b>\$0.00</b>	<b>\$1,818,146.06</b>	<b>\$0.00</b>	<b>19490</b>	<b>\$4,369,070.02</b>	<b>\$2,045,254.67</b>	<b>10170</b>	<b>\$630.71</b>	<b>\$225.40</b>	<b>\$25.42</b>	<b>\$0.00</b>	<b>\$178.78</b>	<b>\$0.00</b>

### Parameters

Beginning Location:

Ending Location:

Paid Date: 10/1/2023-4/30/2024

Reporting Period: CLIENTYTD

Location: 000-zzzzz

\*\* Census Count Comments: Membership is counted per location, per department, or per

**From:** [Sue Wayte](#)  
**To:** [Stacy Tebo](#)  
**Cc:** [Darik J. Croft](#); [Gretchen Soto](#); [Kristi Jones](#)  
**Subject:** April miCare Report  
**Date:** Tuesday, May 7, 2024 11:44:20 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[WVHA Deland and Deltona - April 2024 Utilization Report\(1\).docx](#)  
[WVHA Deland and Deltona - April 2024 Utilization Report\(1\).pdf](#)

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Good morning, Stacy,

Attached is the April Utilization and Operational reports. Below is a summary of the April report:

Operations:

- Overall utilization for April was 87%, with DeLand at 93% and Deltona at 80%.
- No show rates are 7% for DeLand and 5% for Deltona.
- There were 933 visits in DeLand last month, including 318 medication pick-ups and 30 med pick-ups from the PAP program.
- There were 648 visits in Deltona in April, this included 262 medication pick-ups and 19 med pick-ups from the PAP program.
- There were 52 new patients first visits last month and 104, physicals between the Male/Female & Wellness visits.
- Member migration for April was 51%.

PAP(Pharmacy Assistance Program):

- There was a total of 342 applications approved last month, with a further 14 pending or pending submittal.
- There was an avoided cost of \$183,020 for April.
- Annual projections for cost avoidance - \$2,196,624.

Please let me know if you have any questions around the April reports.

Best,

**Sue Wayte**

*Senior Account Executive – miCare Health Centers*



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# WVHA miCare Clinic Deland and Deltona

## April 2024 Report

### miCare Utilization

Deland	Total Available Hours	Total Utilized Hours	% Of Total Available Hours
2024	237	220	93%

Deltona	Total Available Hours	Total Utilized Hours	% Of Total Available Hours
2024	164	132	80%

	Total Available Hours	Total Utilized Hours	% Of Total Available Hours
2024	401	352	87%

**Total Hours Available:** Total hours available for members to schedule, minus scheduled Admin Time

**% Total Utilized Hours:** Total time that has been scheduled (including “no-shows” since this time was unavailable for other members to schedule an appointment

### Key Insights:

- The Utilization measures Physician Assistant/Nurse Practitioner time available to provide direct patient care.
- The Utilization measures the clinician’s scheduled availability to the amount of time used to meet patient appointments.
- Between the two clinics 87% of the available clinician capacity was used for scheduled appointments; 13% of clinician time was available for walk-ins and other patient care activities.
- “No Shows” is where patients didn’t attend their scheduled clinic appointment.
  - DeLand - 7%
  - Deltona - 5%

Such no shows create systematic “waste” since this scheduled appointment slot was not available to other health card members.

- Administrative Time (chart reviews, medication follow-ups, referrals, provider-to-provider communication; etc.) represents approx. 2% of total capacity and is in line with industry standard for this type of patient care model.



## Visit Type Utilization

WVHA miCare Clinic Total Visits for DeLand			
Clinic Services	Number of visits	%	Notes
Total Provider visits	375	40%	Schedulable patient activities
Total Labs	202	22%	Schedulable patient activities
Total Nurse Visits	8	1%	Schedulable patient activities
Total medication pick-up	318		Don't have a visit type and are not scheduled appointments
Total PAP med pick-up	30		Don't have a visit type and are not scheduled appointments
<b>Total Visits</b>	<b>933</b>		

### DeLand

- There was a total of 585 clinic visits at the DeLand clinic in April plus 318 medication pick-ups and an additional 30 med pick-ups from the PAP program.
- There were 39 **new patients** that established care at the DeLand clinic last month.
- There were 60 **Physicals** in April – Male/Female Wellness – Established Patients

WVHA miCare Clinic Total Visits for Deltona			
Clinic Services	Number of visits	%	Notes
Total Provider visits	244	40%	Schedulable patient activities
Total Labs	110	22%	Schedulable patient activities
Total Nurse Visits	13	1%	Schedulable patient activities
Total medication pick-up	262		Don't have a visit type and are not scheduled appointments
Total PAP med pick-up	19		Don't have a visit type and are not scheduled appointments
<b>Total Visits</b>	<b>648</b>		

### Deltona

- There was a total of 367 clinic visits at the Deltona clinic in April plus 262 medication pick-ups from Deltona as well as 19 med pick-ups from the PAP program.
- There were 13 **new patients** that established care at the Deltona clinic last month.
- There were 44 **Physicals** in April – Male/Female Wellness – Established Patients



## miCare Member Migration

April 2024

	Total Unique Patients with Appointments	Total Eligible Membership	Penetration of Membership (%)
<b>Total</b>	724	1,429	51%

\*The data above represents unique members who have completed clinic visits or lab appointments. Several health card members have had multiple encounters for the month.

## PAP (Pharmacy Assistance Program)- WVHA Health Card Members

- The data below demonstrates pharmacy cost avoided for the WVHA for prescribed branded medications.
- WVHA health card members can qualify for manufacture discounts and the ability to receive prescription branded medications with no out of pocket expense to health card members
- The WVHA miCare Clinic care coordinators work with patients to complete the necessary paperwork to qualify for the PAP (Pharmacy Assistance Program) through the pharmaceutical company.

	April 2024	
<b>PAP Summary 4/1/2024- 4/30/2024</b>		
Application Approved	342	\$174,663
Application Pending Approval	8	\$4,787
Application Started but Not Submitted	6	\$3,570
<b>Totals</b>	<b>356</b>	<b>\$183,020</b>
	(Active Applications)	Monthly Savings for <b>April</b>

### Key Insights:

- 580 medications were picked up between both sites.
- 49 PAP medications were picked between the two locations.
- 350 patients had applications for pharmacy assistance programs last month.
- WVHA avoided \$183,020 of the cost for branded medication in April.
- Projected annual cost avoided \$2,196,624.



**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)

Flagler Counseling  
Center  
25 N Old Kings Road #7B  
Palm Coast, FL 32137  
386-738-9169  
386-943-8823

S. Daytona Counseling Center  
1000 Big Tree  
Road Daytona  
Beach, FL  
32114 386-301-  
4073  
386-492-7638 (fax)



CREDIBILITY • INTEGRITY • ACHIEVEMENT



May 1, 2024

West Volusia Hospital Authority

## Monthly Enrollment Report

In the month of April there were 200 appointments to assist with new applications and 66 appointments to assist with pended applications from March-April. For a total of 266 Interviews with clients.

224 applications were submitted for verification and enrollment. Of these, 224 were processed by the end of the month includes the roll overs 0 from previous month) leaving the balance of 0 to roll over into May 2024 for approval.

Of the 224 that were processed, 205 were approved and 5 were denied. There were 14 pended remaining.

Currently applications are being processed, approved and the client enrolled in 7 business days. Current enrollment with EBMS is taking up to 7-14 days to appear active in system.

How did clients hear about Program: HND-161/Halifax/FL Hospital-5 Advent Health-4/RAAO-34/Other-9/SMA-6/NBC-1/Health Dept-2/Healthy Start-2

### Outreach Efforts:

- Attended West Volusia Community Partners meeting.
- Reached out to all clients due to renew with a reminder phone call as well as the reminder letter.
- Communicating with Partners working together to better service the community
- Meeting with new organizations that can possibly benefit from the health Card to partner up with them.
- Attending Events

Respectfully submitted by Gail Hallmon

## **Halifax Health Quarterly Report to West Volusia Hospital Authority**

Halifax Health continues to provide exceptional care for WVHA cardholders. The Halifax Health case management teams continue to work with MiCare to ensure hospital inpatients are transitioned appropriately. Halifax Health continues to support WVHA members by providing an expansive list of services within the WVHA district.

The Halifax Health | UF Health Medical Center of Deltona is Deltona's only full-service hospital. With a six-story medical facility that includes a 24-hour emergency room, surgical operating rooms, the latest in diagnostic equipment and plentiful hospital rooms, along with a two-story medical office annex available to service WVHA member needs.

The Halifax Health | UF Medical Center of Deltona provides the following services and more: Cardiology, Gastroenterology, Pediatrics, Infusion Therapy, Radiology, Psychiatry, and Primary Care. Expect new services to be added at the Halifax Health | UF Medical Center of Deltona to better serve patients within the WVHA district as we will inform WVHA as announcements become public.

*[The remainder of this page is intentionally left blank. See next pages for statistics.]*

		WVHA Member Patient Type		
	Month	Inpatient	Outpatient	Grand Total
2022	Jan	8	30	38
	Feb	6	26	32
	Mar	5	33	38
	Apr	5	33	38
	May	5	33	38
	Jun	1	32	33
	Jul	3	28	31
	Aug	3	27	30
	Sep	6	23	29
	Oct	5	22	27
	Nov	5	26	31
	Dec	1	26	27
	<b>2022 Total</b>	<b>53</b>	<b>339</b>	<b>392</b>
2023	Jan	6	31	37
	Feb	3	25	28
	Mar	5	22	27
	Apr	6	32	38
	May	2	18	20
	Jun	5	20	25
	Jul	1	15	16
	Aug	6	23	29
	Sep	2	33	35
	Oct	7	28	35
	Nov	2	23	25
	Dec	5	26	31
	<b>2023 Total</b>	<b>50</b>	<b>296</b>	<b>346</b>
2024	Jan	9	17	26
	Feb	8	27	35
	Mar	10	31	41
	Apr	2	34	36
	<b>2024 Total</b>	<b>29</b>	<b>109</b>	<b>138</b>



## WVHA Members Served by Halifax Health Physicians 2023

Specialty	Visits
Emergency Medicine	269
Hospitalist	257
Cardiovascular Disease	126
Critical Care: Intensive	88
Psychiatry	72
Hematology/Oncology	61
Family Medicine	53
Wound Care	43
Infectious Disease	35
Internal Medicine	33
Gastroenterology	32
General Practice	31
Cardiology	28
Phys. Med. & Rehab.	28
Gynecological/Oncology	15
Pulmonary Disease	11
Neurology	9
Palliative Care	6
Ophthalmology	6
Clinical Cardiac Electrophysiology	5
Urology	5
Medical Oncology	4
Radiation Oncology	2
Pulmonary Critical Care	2
Transplant Surgery	2
<b>Total</b>	<b>1,223</b>

## WVHA Members Served by Halifax Health Physicians 2024

Specialty	Visits
Hospitalist	146
Emergency Medicine	101
Cardiovascular Disease	50
Wound Care	43
Family Medicine	21
Pulmonary Disease	18
Hematology/Oncology	15
General Surgery	15
Critical Care: Intensive	14
Psychiatry	13
Infectious Disease	13
General Practice	13
Gastroenterology	12
Cardiology	11
Pediatric Medicine	8
Phys. Med. & Rehab.	6
Neurology	6
Internal Medicine	4
Gynecological/Oncology	1
Pulmonary Critical Care	1
<b>Total</b>	<b>511</b>

Age Mix		
	Patients	Percent
<20	27	5%
20-29	73	13%
30-39	111	19%
40-49	195	34%
50-59	297	51%
60-69	151	26%
70-79	15	3%
80+	4	1%
<b>Total</b>	<b>873</b>	<b>100%</b>

<b>ER Times – All Patient Types</b>	<b>Arrival to Discharge/Admit Minutes</b>	<b>Arrival to Provider Minutes</b>
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Halifax Health | UF Health Deltona

188

23

<b>Left Without Being Seen by Provider – All Patient Types</b>	<b>Patients</b>	<b>Percent</b>
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Halifax Health | UF Health Deltona

49

0.94%

<b><u>Medical Center of Deltona</u></b>	<b><u>JULY 2022</u></b>	<b><u>JULY 2023</u></b>	<b><u>JULY 2024</u></b>
<b><u>Patient Experience (HCAHPS Top Box %)</u></b>			
Overall Hospital Rating 0-10	66%	69%	69%
Willingness to Recommend Hospital	71%	66%	71%
<b><u>Hospital Compare Healthcare Associated Infections (Raw Patient Count)</u></b>			
MRSA	1	1	
CDiff	0	1	1
CLABSI	0	0	0
CAUTI	1	0	1
SSI (Colo)	1	1	0
SSI (Hyst)	N/A	0	N/A

*\*N/A – Procedure was not performed during reporting timeframe*

## **AdventHealth DeLand Quality Indicators for West Volusia Hospital Authority**

**May 2024**

- A. Fully accredited by The Joint Commission- [www.jointcommission.org](http://www.jointcommission.org)
- B. Rated A by The Leapfrog Group in Spring 2024 and Top hospital for 2023-  
[www.leapfroggroup.org](http://www.leapfroggroup.org)
- C. No separate specific ER department accreditation
- D. **Customer Satisfaction:** <https://www.medicare.gov>  
Completed surveys-955 Response rate- 20%.

**Patients who reported that their nurses "Always" communicated well: 77%.**

National average: 79%

Florida average: 74%

**Patients who reported that their doctors "Always" communicated well: 75%.**

National average: 79%

Florida average: 74%

**Patients who reported that they "Always" received help as soon as they wanted: 58%.**

National average: 66%

Florida average: 59%

**Patients who reported that the staff "Always" explained about medicines before giving it to them: 61%.**

National average: 62%

Florida average: 56%

**Patients who reported that their room and bathroom were "Always" clean: 73%.**

National average: 72%

Florida average: 68%

**Patients who reported that the area around their room was "Always" quiet at night: 50%.**

National average: 62%

Florida average: 56%

**Patients who reported that YES, they were given information about what to do during their recovery at home: 86%.**

National average: 86%

Florida average: 82%

**Patients who "Strongly Agree" they understood their care when they left the hospital: 50%.**

National average: 52%

Florida average: 47%

**Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).**

66%

National average: 71%

Florida average: 65%

**Patients who reported YES, they would definitely recommend the hospital.**

64%

National average: 69%

Florida average: 65%

**E. Emergency Department Metrics**

- a. Door to Provider:
  - i. (CY 2022) Average: 15 minutes
  - ii. (CY2023) Average: 12 minutes
- b. Door to Discharge:
  - i. (CY2022) Average: 169 minutes
  - ii. (CY2023) Average: 157 minutes
- c. Left Without Being Seen %
  - i. (CY 2022): 1.5%
  - ii. (CY 2023): 0.7%

**F. Annual tracking of Healthcare Associated Infections (Hospital Compare / January 2024):**

- a. Catheter-associated Urinary Tract Infection (CAUTI) Outcome Measure: 0.000
- b. Clostridium difficile Infection (CDI) Outcome Measure: 0.252
- c. Central line-associated Bloodstream Infection (CLABSI) Outcome Measure: 0.294
- d. Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure: 1.073
- e. Surgical Site Infection (SSI) for Abdominal Hysterectomy and Colon Procedures Outcome Measure: Not available

- G. LeapFrog Healthcare Associated Infections published 5/1/2024. Scores are published twice annually.**

Additional publicly reported data is available at

<https://ratings.leapfroggroup.org/facility/details/10-0045/adventhealth-deland-deland-fl>



Healthcare-Associated Infections

Infection in the Blood

Hospitals should have fewer than expected central-line associated blood stream infections.

Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC’s National Healthcare Safety Network (NHSN) to compare the number of infections that happened at this hospital to the number of infections expected for this hospital, given various factors. A number lower than one means fewer infections than expected; a number more than one means more infections than expected.



This hospital’s standardized infection ratio (SIR) is: **0.304**

Infection in the Urinary Tract

Hospitals should have fewer than expected catheter-associated urinary tract infections.

Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC’s National Healthcare Safety Network (NHSN) to compare the number of infections that actually happened at this hospital to the number of infections expected for this hospital, given various factors. A number lower than one means fewer infections than expected; a number more than one means more infections than expected.



This hospital’s standardized infection ratio (SIR) is: **0.000**

This hospital’s

MRSA Infection

Hospitals should have fewer than expected antibiotic resistant bacterial infections. Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC’s National Healthcare Safety Network (NHSN) to compare the number of infections that happened at this hospital to the number of infections expected for this hospital, given various factors. A number lower than one means fewer infections than expected; a number more than one means more infections than expected.

## SOME ACHIEVEMENT



### Surgical Site Infection After Colon Surgery

Hospitals should have fewer than expected surgical site infections after major colon surgery.

Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections that actually happened at this hospital to the number of infections expected for this hospital, given various factors. A number lower than one means fewer infections than expected; a number more than one means more infections than expected.



**ACHIEVED THE STANDARD**

This hospital's standardized infection ratio (SIR) is: **0.000**

## AdventHealth Fish Memorial Quality Indicators for West Volusia Hospital Authority

May 2024

- A. Fully accredited by The Joint Commission- [www.jointcommission.org](http://www.jointcommission.org)
- B. Rated A by The Leapfrog Group [www.leapfroggroup.org](http://www.leapfroggroup.org)
- C. No separate specific ER department accreditation
- D. **Customer Satisfaction:** Hospital Compare- Completed surveys-955 response rate- 20%. **Patients who reported that their nurses "Always" communicated well: 79%.**

National average: 79%

Florida average: 74%

**Patients who reported that their doctors "Always" communicated well: 75%.**

National average: 79%

Florida average: 74%

**Patients who reported that they "Always" received help as soon as they wanted: 68%. National average: 66%**

Florida average: 59%

**Patients who reported that the staff "Always" explained about medicines before giving it to them: 61%.**

National average: 62%

Florida average: 56%

**Patients who reported that their room and bathroom were "Always" clean: 72%.**

National average: 72%

Florida average: 68%

**Patients who reported that the area around their room was "Always" quiet at night: 67%.**

National average: 62%

Florida average: 56%

**Patients who reported that YES, they were given information about what to do during their recovery at home: 85%.**

National average: 86%

Florida average: 82%

**Patients who "Strongly Agree" they understood their care when they left the hospital: 52%.**

National average: 52%

Florida average: 47%

**Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).**

71%

National average: 71%

Florida average: 65%

**Patients who reported YES, they would definitely recommend the hospital. 70%**

National average: 69%

Florida average: 65%

**E. Emergency Department Metrics:**

- a. Door to Provider:
  - i. (CY 2022) Average: 19 minutes
  - ii. (CY2023) Average: 19 minutes
- b. Door to Discharge:
  - i. (CY2022) Average: 166 minutes
  - ii. (CY2023) Average: 148 minutes
- c. Left Without Being Seen %
  - i. (CY 2022): 1.5%
  - ii. (CY 2023): 0.90%
- d. Left Without Being Seen/Day
  - i. (CY2022) Average: 2.75
  - ii. (CY2023) Average: 1.62

**F. Annual tracking of Healthcare Associated Infections (Hospital Compare / January 2024):**

- a. Catheter-associated Urinary Tract Infection (CAUTI) Outcome Measure: 0.533
- b. Clostridium difficile Infection (CDI) Outcome Measure: 0.204
- c. Central line-associated Bloodstream Infection (CLABSI) Outcome Measure: 0.656
- d. Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure: 0.947
- e. Surgical Site Infection (SSI) for Abdominal Hysterectomy and Colon Procedures Outcome Measure: Not available

**G. Leapfrog Healthcare Associated Infections published 5/1/2024. Scores are published twice annually.**

Additionally, publicly reported data is available at  
[AdventHealth Fish Memorial | Ratings | Leapfrog Group](#)



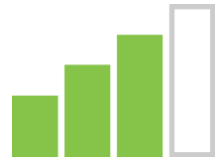


Measure name	Leapfrog's Standard	Hospital's Progress
<b>C. difficile Infection</b>	<p>Hospitals should have fewer than expected colon infections from C. diff bacteria.</p> <p>Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections that actually happened at this hospital to the number of infections expected for this hospital, given various factors. A number lower than one means fewer infections than expected; a number more than one means more infections than expected.</p> <p>This hospital's standardized infection ratio (SIR) is: <b>0.158</b></p>	 <p><b>ACHIEVED THE STANDARD</b></p>
<b>Infection in the Blood</b>	<p>Hospitals should have fewer than expected central-line associated blood stream infections.</p> <p>Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections that actually happened at this hospital to the number of infections expected for this hospital, given various factors. A number lower than one means fewer infections than expected; a number more than one means more infections than expected.</p> <p>This hospital's standardized infection ratio (SIR) is: <b>1.253</b></p>	 <p><b>LIMITED ACHIEVEMENT</b></p>
<b>Infection in the Urinary Tract</b>	<p>Hospitals should have fewer than expected catheter-associated urinary tract infections.</p> <p>Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections that actually happened at this hospital to the number of infections expected for this hospital, given various factors. A number lower than one means fewer infections than expected; a number more than one means more infections than expected.</p> <p>This hospital's standardized infection ratio (SIR) is: <b>0.529</b></p>	 <p><b>CONSIDERABLE ACHIEVEMENT</b></p>

## MRSA Infection

Hospitals should have fewer than expected antibiotic resistant bacterial infections.

Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections that actually happened at this hospital to the number of infections expected for this hospital, given various factors. A number lower than one means fewer infections than expected; a number more than one means more infections than expected.



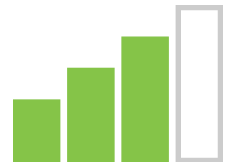
**CONSIDERABLE  
ACHIEVEMENT**

This hospital's standardized infection ratio (SIR) is: **0.502**

## Surgical Site Infection After Colon Surgery

Hospitals should have fewer than expected surgical site infections after major colon surgery.

Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections that actually happened at this hospital to the number of infections expected for this hospital, given various factors. A number lower than one means fewer infections than expected; a number more than one means more infections than expected.



**CONSIDERABLE  
ACHIEVEMENT**

This hospital's standardized infection ratio (SIR) is: **0.423**

**From:** [Elizabeth LaFond](#)  
**To:** [Stacy Tebo](#)  
**Cc:** [Maureen France](#); [AMBS, JENNIFER](#)  
**Subject:** RE: Quarterly reporting  
**Date:** Tuesday, May 7, 2024 11:23:29 AM  
**Attachments:** [image002.png](#)  
[image003.png](#)

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Stacy-

Below please find the information regarding visits, charges and payments received for 1Q 2024 DOS for Empros. Please note all other metric information requested is housed on AdventHealth's systems and will be reported by AdventHealth. We are only reporting information provided by our billing company.

Visits:	202
Total Charges:	\$357,907
Total Pmts Recd	\$22,381.41 (as of 5/6/24)

If you have any questions, please let me know.

Thank you-

**Elizabeth LaFond**  
**Controller**



emergency medicine professionals, p.a.

[Elizabeth.lafond@emprosonline.com](mailto:Elizabeth.lafond@emprosonline.com)

1530 Cornerstone Blvd.

Suite 120

Daytona Beach, FL 32117

Office: 386.310.3521

Fax: 386.310.2106

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April 29, 2024

WVHA Commissioners

RE: Request for additional funding to cover rental increase

## The House Next Door

*Serving  
Volusia and Flagler Counties*

Administrative Offices  
804 North Woodland Blvd.  
DeLand, FL 32720  
386-734-7571

DeLand Service Center  
114 South Alabama Avenue  
DeLand, FL 32724  
386-738-9169

Flagler Service Center  
160 Cypress Point Parkway  
Palm Coast, FL 32164  
386-738-9169

Deltona WVHA Office  
840 Deltona Blvd., Suite K  
Deltona, FL 32725  
386-232-2055

We are currently paying \$1,179.36, which we have budgeted for July - Sept is \$3538.08. As of July 1<sup>st</sup> we will have a new lease. For the three months we will be paying \$15 per sq ft (2,000) which is \$7,500 for the three months. The difference from what we already have budgeted for those three months is \$3,961.92. This is the amount we are asking to increase our current by.

The proposed increase poses a significant financial challenge for our organization, potentially impacting our ability to maintain our services at their current level. The Health Card Enrollment Program is an expense reimbursement contract which does not allow for additional available funds in the program for such unforeseen increases.

We will continue to search for a less expensive rental facility. If there are any savings those funds will be passed back to WVHA.

Thank you for your consideration.



CREDIBILITY • INTEGRITY • ACHIEVEMENT



visit our website at  
[www.thehnd.com](http://www.thehnd.com)



**Self Audit Report to  
West Volusia Hospital Authority (WVHA)  
of Funding Agreements for  
Prenatal, Postpartum, & Infant Access to Health Care Services  
Fiscal Year: Oct 1, 2022 to Sep 30, 2023**

**May 16, 2024**

***Mission:***

***To bring people and resources together to support the needs and well-being of our families.***

## Overview/Timeline of Self Audit Process

- The Contractual Site Visit Review Write Ups FYE 2023 for the HSCFV **CARE Specialist Outreach and Family Services Coordination** Agreements were discussed at WVHA Board of Commissioners & Citizens Advisory Committee Joint Meeting on March 21, 2024
- After discussing the reports, the **Commissioners voted to require HSCFV to perform a self-audit** of both programs and report back to the Board at their May meeting.
- Attorney Small stated that a “critical component of the self-study would be to evaluate the amount of time the client was living in West Volusia.”
- The Commissioners **also voted to authorize James Moore & Co to perform an additional site visit** at their discretion.
- Immediately following the March meeting, **HSCFV staff began developing a process to review all 405 Unique Clients** served by the two programs during the 12-month period for FYE 2023.
- Also following the March meeting, **JMCO began additional testing and made several follow-up data requests** to HSCFV staff.
- Utilizing the **Well Family System Database**, each client was looked up individually by case ID (LPID) to review documents that were retained electronically by HSCFV.
- **All available documentation was reviewed** – including documents that are acceptable per WVHA Eligibility Guidelines and other documents outside of those Guidelines.
- A **limitation** of the Well Family System is if the client has subsequently moved out of Volusia County, we no longer have access to their records.
- Results of the search were compiled in an excel spreadsheet to include details on **residency, identification, income, Medicaid or insurance, Family Placement Intake Forms, and/or client referral source**.
- As residency (the amount of time clients lived in WV) was determined to be critical to the study, **all data points are cross referenced against residency**.

**Overview of Funding Agreements (Reimbursement Rate & Screening)  
Prenatal, Postpartum, & Infant Access to Health Care Services**

**Family Services Coordination**

**\$76,331.00**

4.2. Reimbursement Rate. Grantee shall be reimbursed for access to healthcare services provided to Program Participants (as defined in Paragraph 6) by Family Services Coordinator ("FSC") at the following rates: (i) an all-inclusive capitated **rate of \$401.74 per Program Participant** who receives the FSC services as specifically described in the Application for Funding, including, but not limited to, **assistance in application for Medicaid Managed Care (MMC), food stamps, and cash assistance through DCF ACCESS, assist in navigating to application sites to obtain the WVHS Health Card, provide information and/or referral to WIC program, Healthy Start and other needed services, provide a referral for women to receive post-partum interconception health care or to parents of children for pediatric care.** In no event shall the annual aggregate Reimbursement provided to Grantee by the Authority under this Agreement be required to exceed the annual Funding Limit ( as defined above).

**CARE Specialist Outreach**

**\$81,560.00**

4.2 Reimbursement Rate. Grantee shall be reimbursed for access to healthcare services provided to Program Participants (as defined in Paragraph 6) by a Coordinating Advocacy Resources & Education ("CARE") Specialist at the following rates: (i) **a fee of \$39.21 per hour of CARE Specialist services** as specifically described in the Application for Funding, including **contacting pregnant women upon referral to assess service needs,** ensuring that infants in the Neonatal Intensive Care Unit at local hospitals have a pediatric medical provider, attempting to engage mothers in the Healthy Start program, encouraging and providing breastfeeding support to mothers, providing relevant information about health care options, developing Individualized Plan of Care, contacting and collaborating with relevant health care providers and **providing immediate referrals to appropriate health care providers.** In no event shall the annual aggregate Reimbursement provided to Grantee by the Authority under this Agreement be required to exceed the annual Funding Limit (as defined above).

## Overview of Funding Agreements (Reimbursement Rate & Screening)

### Continued

#### Family Services Coordination

6. **Screening.** Grantee shall encourage potential Program Participants to apply for a **WVHA Health Card which would make a current enrollee automatically eligible to become a Program Participant** as well as to receive hospital care, primary care, specialty care and pharmacy benefits at any provider who has signed a funding agreement with WVHA to provide such services to Health Card members. **Alternatively**, in order to qualify individuals for Program Participation, **Grantee shall screen individuals for residency, identification, income and assets eligibility** through collection and examination of the documents and information as the Authority may from time to time require, **as set forth in the WEST VOLUSIA HOSPITAL AUTHORITY HEALTHCARD PROGRAM ELIGIBILITY GUIDELINES AND PROCEDURES**, Revised June 17, 2021. The Authority reserves the right to amend these Screening Requirements with an effective date fifteen (15) days after Grantee has been provided a copy of the amended Screening Requirements.

#### CARE Specialist Outreach

6. **Screening.** WVHA is the payer of last resort and assists residents with no medical benefits. Residents that have health coverage are ineligible for Program Participation. Certain programs, such as 'Aids Drugs Assistance Program' (ADAP) that are targeted to offer limited services towards one specific disease, will not disqualify a resident from Program Participation because such programs are not considered inclusive medical benefits. **In order to meet Program Participant qualification under this Agreement, Grantee shall screen Program Participants only to confirm their identity and residency in the Tax District** through collection and examination of the documents and information as the Authority may from time to time require, based on Article VII ("WVHA Residency"), Article VIII ("WVHA Identification"), Section 12.06 Appendix F ("Homeless Verification Form") **of the WEST VOLUSIA HOSPITAL AUTHORITY HEALTH CARD PROGRAM ELIGIBILITY GUIDELINES AND PROCEDURES**, Revised June 17, 2021. The Authority reserves the right to amend these Screening Requirements with an effective date fifteen (15) days after Grantee has been provided a copy of the amended Screening Requirements.



## WVHA Healthcard Program Eligibility Guidelines & Procedures (2021)

### RESIDENCY

APPLICANT LIVES WITH OTHERS **OR** RENTS/OWNS (Two (2) Documents required):

- WVHA Verification of Support ([Section 12.07](#))
- Vehicle Registration
- Children registered in West Volusia Schools
- Mail received by applicant in West Volusia County for three (3) month period. (i.e. government correspondence, USPO change of address, court documents, other bills) If mail sent to a P.O. Box, the applicant's physical address must be noted in document. If online bills are provided they must include Date (Billing Period), Name, & Address.
- Property tax bill
- Mortgage payment
- Lease Agreement/Contract
- WVHA Verification of Rent ([Section 12.08](#))
- Utility bills

### IDENTIFICATION

#### Section 8.02 Policy

Every applicant must provide copies of two (2) acceptable documents (one must be a photo I.D.) to prove his/her identity. Identification must be current.

#### Section 8.03 Procedures

The following define acceptable documentation for proving identification.

- a. Birth Certificate
- b. Florida Picture Identification Card (Such as Florida Driver's License with West Volusia address)
- c. Social Security Card
- d. The Farmworker Association of Florida, Inc. (Photo Identification with correct address)
- e. Passport
- f. Certificate or official document that includes name, address, and social security number (such as a tax form or social security document).
- g. Alien Registration receipt card, (Green card, Form I-151 or I-551)
- h. Any government issued photo identification

## WVHA Healthcard Program Eligibility Guidelines & Procedures (2021)

### INCOME

1. Income verification is accomplished by submitting copies of the
  - a. Most recent individual income tax return, Form 1040 and W-2's for all wage earners in household
  - b. Recent paystubs- Eight (8) weeks prior or Florida DCF Verification of Employment/Loss of Income Form from current employer and/or Year to Date for all jobs.
    1. If applicant has recently lost their job, the Loss of Income Section of the DCF Verification of Employment/Loss of Income Form must be completed.
  - c. Bank Statements (previous three (3) months) include all pages
  - d. Medicaid Denial Letter or proof of Medicaid application and date of application. (Clinics, specialists, pharmacy and hospitals should check for Medicaid eligibility each time a patient presents for services, even if the patient has a current WVHA Health Card). Applicants unable to provide documentation of citizenship will be exempt from applying for Medicaid.
  - e. Unemployment/Worker's Compensation Statement. Applicants unable to provide documentation of citizenship will be exempt from applying for unemployment benefits.
  - f. Child Support/Alimony
  - g. Social Security Benefits for any family member
  - h. Pensions/Retirements/Interest
  - i. Veterans Benefits
  - j. Any settlements, court ordered or otherwise. Evidence of amount and duration of all settlements are required.
  - k. Other appropriate supporting documents.
  - l. Self-Employment
    1. Bank Statements for all business accounts for the last 3 (three) months; all pages must be included
    2. Previous Year's Business Tax Return-complete w/attachments/schedules
    3. Most recent self-employment quarterly financial statement

## WVHA Healthcard Program Eligibility Guidelines & Procedures (2021)

### ASSETS

In order to be considered, an asset must first be “available” to the applicant or family unit. An asset is available if the applicant or member of the family unit has the right, authority or power to liquidate the property or his share of the property. The following assets, if “available,” must be considered toward the asset limit:

#### 2. Assets to be considered

- a. Checking and saving accounts- the value of a checking or savings account excludes amounts deposited in the four (4) weeks prior to application because such funds are counted as income.
- b. 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.
- c. Cash surrender value of life insurance, if the combined face value of all policies owned by the family unit exceeds \$1,500.
- d. Additional automobiles or motor vehicles- applicant should provide either the N.A.D.A. Book value or the vehicle registration and mileage. Otherwise, the WVHA Enrollment Certifying Agent will assign value at the average N.A.D.A. value of the vehicle.
- e. Recreational vehicles-With value determined by a statement from a commercial seller of such vehicles and verified by photocopies of registration.
- f. Trusts. With value based on the principal of the trust and verified by a statement from the Trustee.
- g. Stocks, bonds and other investment assets. With value verified by the value listed in stock value of newspaper or statement from other reliable sources.

## Family Services Coordination – Audit Results Detail

RESIDENCY (cross referenced against all other screenings)			IDENTIFICATION			INCOME			PAYER INFO		FAMILY INTAKE FORM
			Met Doc. Req.	At Least 1 Doc.	No Detail	Met Doc. Req.	At Least 1 Doc.	No Detail	Medicaid	Private Ins	Yes
Met Documentation Requirement per Healthcard Program Eligibility Guidelines & Procedures for Res.	0	0%									
At Least 1 Residency Document	35	18%	5%	12%	2%	4%	11%	4%	10%	1%	18%
Documented “Attempt” Residency*	76	40%	1%	1%	38%	1%	1%	38%	25%	6%	40%
No Residency Detail in WFS	79	42%	4%	5%	32%	4%	3%	35%	26%	1%	33%
<b>Total</b>	<b>190</b>	<b>100%</b>	<b>9%</b>	<b>18%</b>	<b>72%</b>	<b>9%</b>	<b>14%</b>	<b>76%</b>	<b>61%</b>	<b>7%</b>	<b>92%</b>

## Family Services Coordination – Audit Results Summary

### Residency

- 0% met WVHA requirement
- 18% had one document

### Income

- 9% met document requirement
- 14% had one document

### Payer Info

- 61% connected to Medicaid
- 7% connected to private insurance/marketplace

### Identification

- 9% met document requirement
- 18% had one document

### Assets

- No records available

### Family Intake Form

- **92% completed & documented**

\*starting in April 2023, records began including a memo that staff requested/attempted to collect documentation

CARE Specialist Outreach – Audit Results Detail									
RESIDENCY (cross referenced against all other screenings)			IDENTIFICATION			PAYER INFO		REFERRAL	
			Met Doc. Req.	At Least 1 Doc.	No Detail	Medicaid	Private Ins	Yes	
Met Documentation Requirement per Healthcard Program Eligibility Guidelines & Procedures for Res.	0	0%							
At Least 1 Residency Document	9	4.2%			4.2%	4.2%			
Residency Attestation Form*	21	9.8%			9.8%	9.8%			
Documented “Attempt” Residency*	46	21.4%			21.4	14%	.5%		
No Residency Detail in WFS	139	64.7%	.9%	17.7%	46%	49.8%	.9%		
<b>Total</b>	<b>215</b>	<b>100%</b>	<b>1%</b>	<b>18%</b>	<b>81%</b>	<b>78%</b>	<b>7%</b>	<b>100%</b>	

### CARE Specialist Outreach – Audit Results Summary

#### Residency

- 0% met WVHA requirement
- 14% had one doc or client attest

#### Identification

- 1% met document requirement
- 18% had one document

#### Payer Info

- 78% with Medicaid ID
- 1% with private insurance/marketplace

#### Referral Sources - 100% of Clients are Referred to CARE Specialist Outreach from:

DCF 47%      Local Hospital 30%      Local NPO/CBO 23%

\*starting in April 2023, records began including either a “client attestation form” or a memo that staff requested/attempted to collect documentation

# Utilization Reports

**West Volusia Hospital Authority (WVHA) Funding Contracts**  
**Fiscal Year: Oct 1, 2022 to Sep 30, 2023**

**Prenatal, Post-partum & Infant Access To Health Care Services:**

***#1) Family Services Coordinator***

***#2) CARE Specialist (Coordinating Advocacy Resources & Education)***



# **UTILIZATION REPORT #1**

## **WVHA FUNDING AGREEMENT ACCESS TO HEALTH CARE SERVICES FOR**

**PRENATAL, POST-PARTUM & INFANT BY  
FAMILY SERVICES COORDINATOR**

**OB/GYN OFFICE & VIRTUAL, TELEPHONIC**





# FY22-23 FSC (Family Services Coordinator)

## UTILIZATION REPORT

WVHA Funding contract for October 1, 2022 to September 30, 2023

**Total Amount of Contract for Family Services Coordinator = \$76,331.00**

### **Program Goals:**

*The Family Services Coordinator (FSC) to serves to provide assistance in*

- Completing the application for Medicaid Managed Care (MMC), food stamps, and cash assistance through DCF ACCESS,
- Navigating to application sites to obtain the WVHA HealthCard,
- Connecting to the WIC program, Healthy Start and other needed services,
- Connecting pregnant, post-partum and interconception women to health care and to parents of children for pediatric care.







# ANNUAL UTILIZATION REPORT (FSC)

## Report for Oct 1, 2022 – Sep 30, 2023



- Face-to-face, virtual and telephonic assistance for ACCESS to health and human services
- “Warm” Referrals to resources (i.e., Career Source, Early Learning Coalition, FindHelp, Help Me Grow, The House Next Door and other WVHA funded agencies)
- Referrals to eligible home-visiting programs:
  - Healthy Start Care Coordination
  - Healthy Families
  - Early Head Start
  - Nurse Home Visiting
- The Healthy Start Coalition of Flagler/Volusia counties received **3,512** referrals for residents of West Volusia (**2,495 w/Medicaid**) and successfully contacted and completed **1,977** Initial Intakes



# **ANNUAL UTILIZATION REPORT (FSC)**

**Report for Oct 1, 2022 – Sep 30, 2023**

<b><u>WVHA FSC Billable Unique Clients</u></b>	<b><u>Number</u></b>
Pregnant	79
Post Partum	49
<u>Infants (0-3 years old)</u>	<u>62</u>
<b>Total</b>	<b>190</b>

**WVHA Funding Amount for FSC: \$76,331.00**

# FY22-23 FSC (Family Services Coordinator)

## Performance Measures:

- 100% cases were screened for West Volusia residency
- 100% of referred cases received an initial contact within 5 business days
- 100% of cases received assistance in accessing DCF ACCESS in-person, virtually and/or telephonically as applicable
- 74% of cases were eligible and received a completed initial intake

### FAMILY SERVICES COORDINATOR PARTICIPANT NEEDS SUMMARY

*Time Period: Oct 1, 2022 – Sept 30, 2023*

- **190** Finding Health Insurance (Medicaid/ACA/WVHA Card)
- **79** Access to Prenatal Care/Family Planning/Primary Care
- **62** Access to Pediatric Care/Primary Care

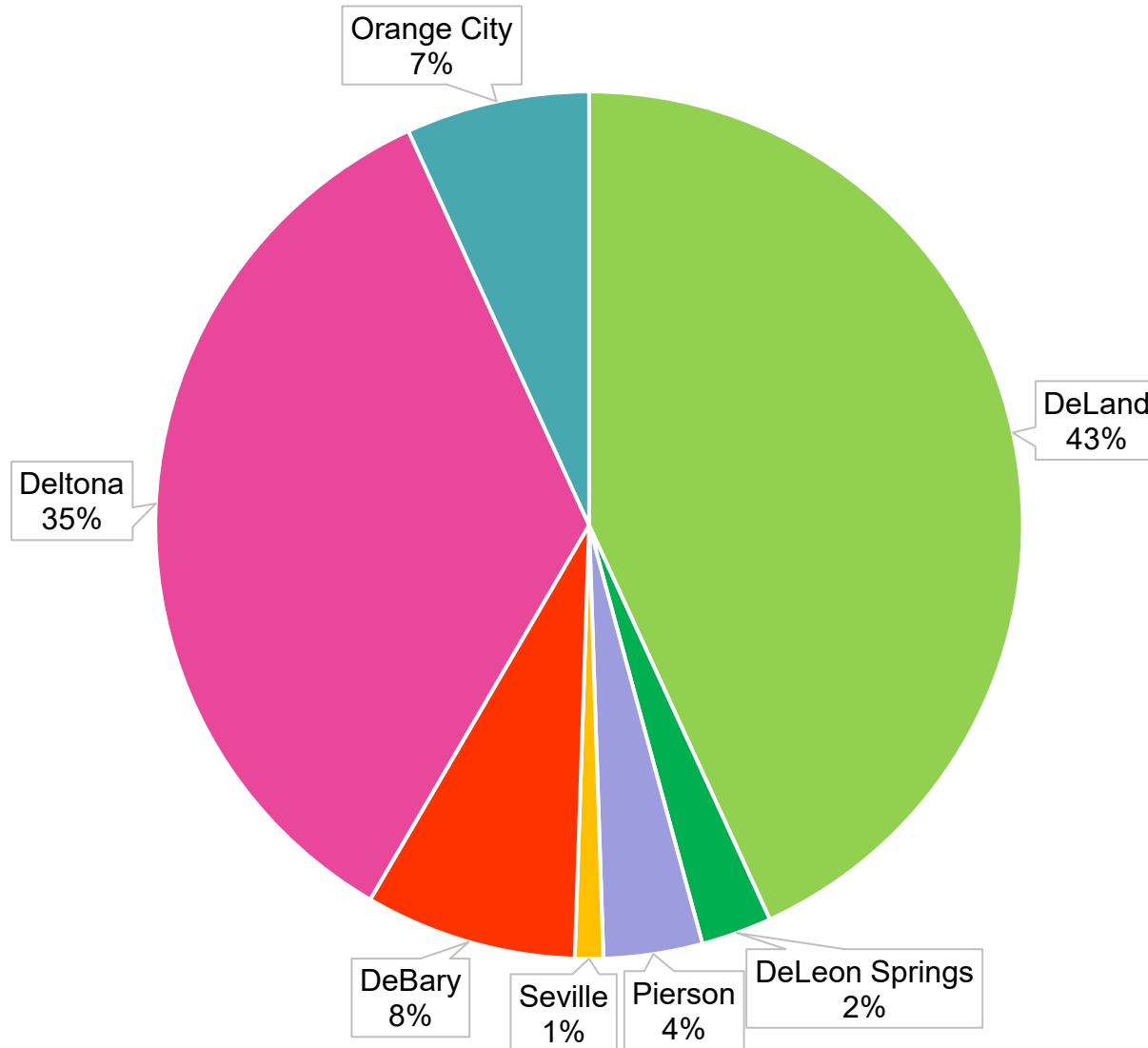


# FY22-23 FSC Client Characteristics

Client Characteristics	Total Clients (FY22-23)
<b>Age</b>	
<b>0-5</b>	<b>62</b>
<b>6-10</b>	<b>0</b>
<b>11-17</b>	<b>3</b>
<b>18-29</b>	<b>62</b>
<b>30-54</b>	<b>63</b>
<b>55-64</b>	<b>0</b>
<b>Not Documented</b>	<b>0</b>
<b>Gender</b>	
<b>Male</b>	<b>26</b>
<b>Female</b>	<b>164</b>
<b>Race</b>	
<b>White</b>	<b>74</b>
<b>Black/African American</b>	<b>13</b>
<b>Other</b> <small>Includes: Asian/Pacific Islander, American Indian, Other</small>	<b>103</b>
<b>Residence</b>	
<b>DeLand 32720, 32721, 32722, 32723, 32724</b>	<b>82</b>
<b>DeLeon Springs 32130</b>	<b>5</b>
<b>Pierson 32180</b>	<b>7</b>
<b>Seville 32190</b>	<b>2</b>
<b>DeBary 32713, 32753</b>	<b>15</b>
<b>Deltona 32725, 32728, 32738, 32739</b>	<b>66</b>
<b>Orange City 32763, 32774</b>	<b>13</b>
<b>Osteen 32764</b>	<b>0</b>
<b>TOTAL SERVED BY TIME PERIOD</b>	<b>190</b>

# FY22-23 FSC Client Characteristics

FSC (Client Characteristics - Residence)



## **UTILIZATION REPORT #2**

**WVHA FUNDING AGREEMENT  
ACCESS TO HEALTH CARE SERVICES  
FOR  
PRENATAL, POST-PARTUM & INFANT BY  
CARE Specialist (Coordinating Advocacy  
Resources & Education)  
SERVING WEST VOLUSIA RESIDENTS**



# FY22-23 CARE Specialist

## UTILIZATION REPORT

WVHA Funding contract for October 1, 2022 to September 30, 2023

**Total Amount of Contract for CARE Specialist Services = \$81,560.00**

### **Program Goals:**

*The CARE Specialist provides outreach by*

- Contacting pregnant women upon referral to assess service needs,
- Ensuring that infants in the Neonatal Intensive Care Unit at local hospitals have a pediatric medical provider,
- Attempting to engage mothers in the Healthy Start programs
- Encouraging and providing breastfeeding support to mothers
- Providing relevant information about health care options,
- Developing Individualized Plan of Care,
- Contacting and collaborating with relevant health care providers
- Providing immediate referrals to appropriate health care providers.





# **ANNUAL UTILIZATION REPORT (CRS)**

## **Report for Oct 1, 2022 – Sep 30, 2023**



- Face-to-face, virtual and telephonic outreach
- Completes a Plan of Safe Care
- Referrals to eligible home-visiting programs:
  - Healthy Start Care Coordination, Healthy Families
  - Early Head Start, Nurse Home Visiting
- Provides linkages to the following within 72 hours of hospital discharge:
  - Breastfeeding support
  - Specialized parenting services
  - Postpartum depression screening
  - Pediatric care/medical home
  - Children's Medical Services as appropriate
- “Warm” Referrals to resources (i.e., Career Source, Early Learning Coalition, FindHelp, Help Me Grow, The House Next Door and other WVHA funded agencies)





# FY22-23 CARE Specialist

## **Performance Measures:**

- 100% cases were screened for West Volusia residency
- 100% of referred cases received an initial contact within 5 business days
- 95% of women and infants accepting CARE Specialist services completed an assessment
- 92% of women and infants accepting CARE Specialist services with a completed assessment completed a Plan of Safe Care
- 69% of infant cases accepting services had documented follow-up with a pediatric provider
- 95% of women and infants accepting CARE Specialist services completed an assessment





# **ANNUAL UTILIZATION REPORT (CRS)**

**Report for Oct 1, 2022 – Sep 30, 2023**

<b><u>WVHA CRS Billable Unique Clients</u></b>	<b><u>Number</u></b>
Pregnant	23
Post Partum	95
<u>Infants (0-3 years old)</u>	<u>97</u>
<b>Total</b>	<b>215</b>

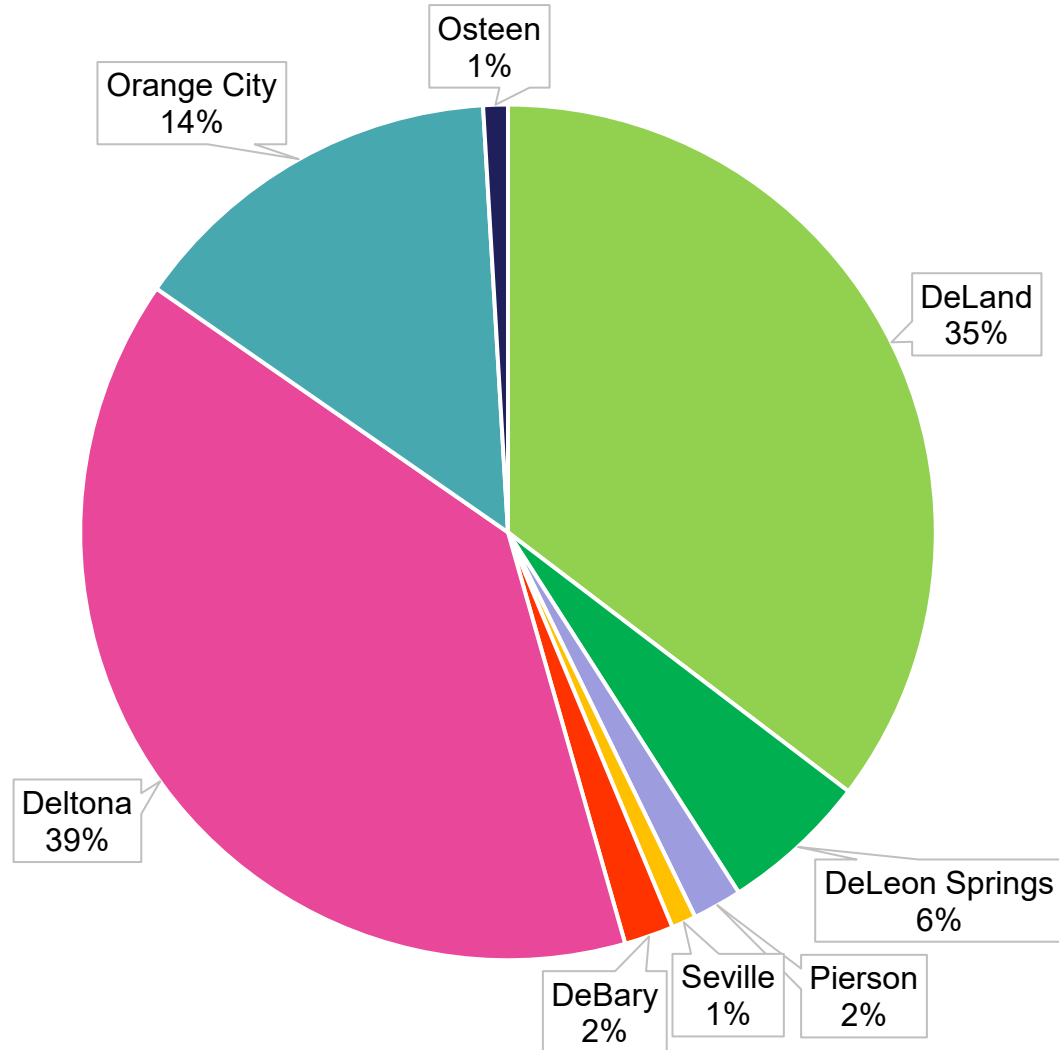
**WVHA Funding Amount for CRS: \$81,560.00**

# FY22-23 CARE Specialist Client Characteristics

Client Characteristics	Total Clients (FY22-23)
<b>Age</b>	
<b>0-5</b>	<b>97</b>
<b>6-10</b>	<b>0</b>
<b>11-17</b>	<b>9</b>
<b>18-29</b>	<b>63</b>
<b>30-54</b>	<b>46</b>
<b>55-64</b>	<b>0</b>
<b>Not Documented</b>	<b>0</b>
<b>Gender</b>	
<b>Male</b>	<b>60</b>
<b>Female</b>	<b>155</b>
<b>Race</b>	
<b>White</b>	<b>88</b>
<b>Black/African American</b>	<b>50</b>
<b>Other</b> <small>Includes: Asian/Pacific Islander, American Indian, Other</small>	<b>77</b>
<b>Residence</b>	
<b>DeLand 32720, 32721, 32722, 32723, 32724</b>	<b>76</b>
<b>DeLeon Springs 32130</b>	<b>12</b>
<b>Pierson 32180</b>	<b>4</b>
<b>Seville 32190</b>	<b>2</b>
<b>DeBary 32713, 32753</b>	<b>4</b>
<b>Deltona 32725, 32728, 32738, 32739</b>	<b>84</b>
<b>Orange City 32763, 32774</b>	<b>31</b>
<b>Osteen 32764</b>	<b>2</b>
<b>TOTAL SERVED BY TIME PERIOD</b>	<b>215</b>

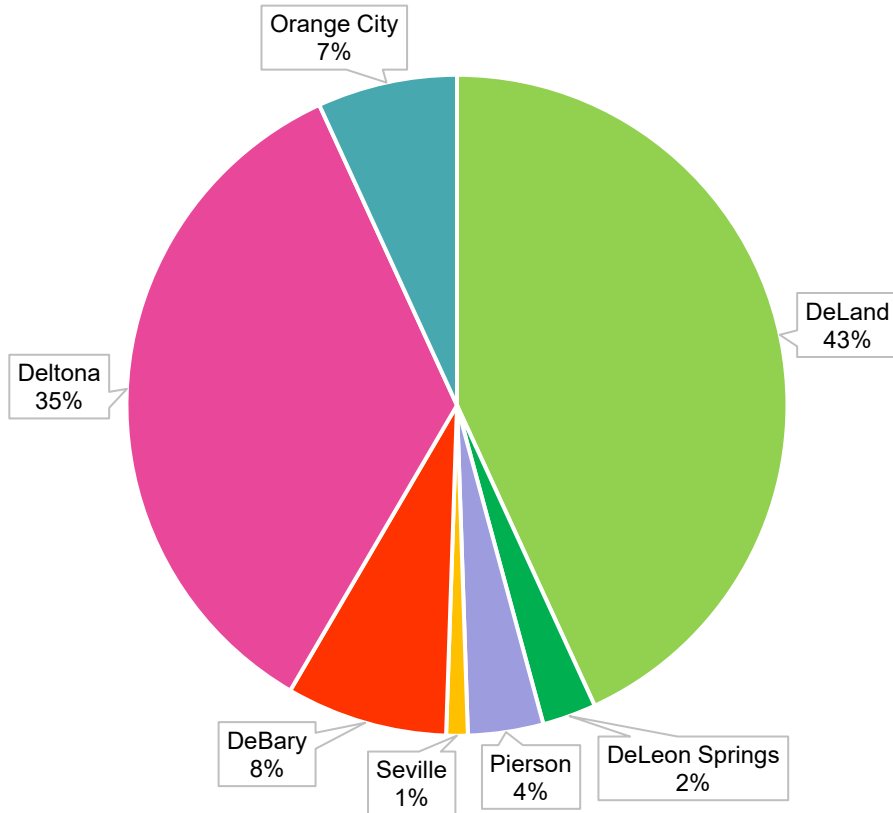
# FY22-23 CARE Specialist Client Characteristics

CARE Specialist (Client Characteristics - Residence)

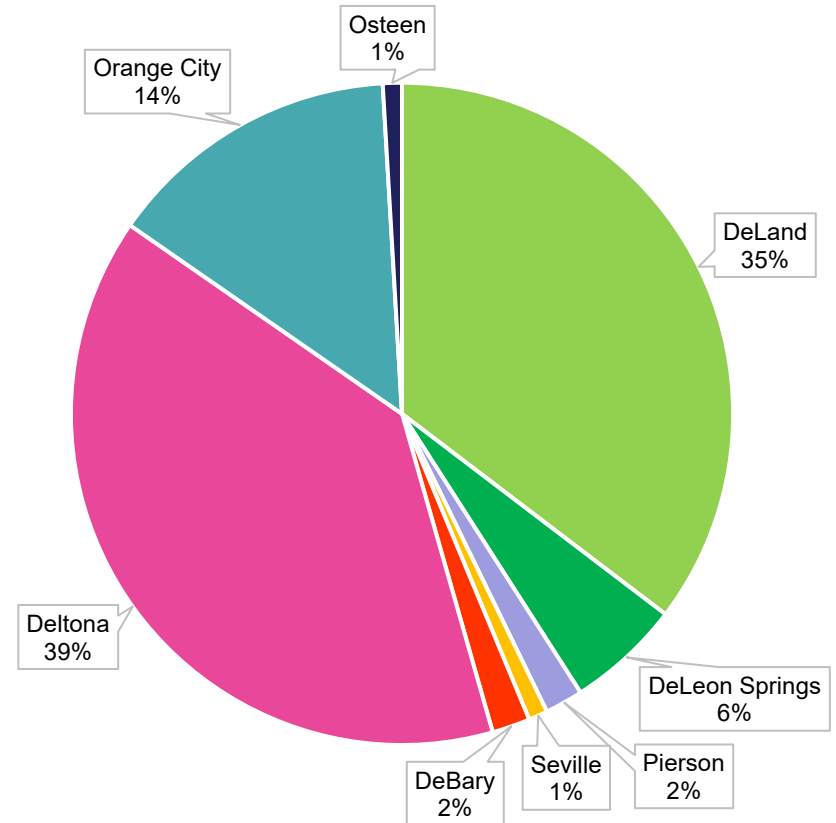


# FY22-23 CARE Specialist & FSC Client Characteristics

**FSC** (Client Characteristics - Residence)



**CARE Specialist** (Client Characteristics - Residence)





# Related Activities



- Outreach and coordination with to delivery hospitals with Level II & III NICU's
- Participation in the **West Volusia Hospital Collaborative** Meeting and coordination with other WVHA funded agencies
- Coordination with **Dr. Rawji** for clinic support through identification and coordination of services
- Participation in the **Substance Exposed Newborn (SEN)** Task Force and weekly SEN Staffings with the **Department of Children and Families (DCF)**
- Coordination with DCF in the completing **Plans of Safe Care** in accordance with the CARA Federal Legislation and DCF Operational Procedure 170-8.
- Coordination with other WVHA partners to ensure collaboration with other related services for **HIV, legal support, medical care, mental health services, and health education**
- Participation in the **Florida Perinatal Quality Collaborative** to promote successful outcomes for these very high-risk women and infants. (MORE – Maternal Opioid Reduction Effort)
- Coordination with medical providers for **detox for pregnant and post partum women.**
- Participation in **statewide maternal and child health collaborative** to better coordinate services

# Other Services

- Healthy Start Doulas - G.R.O.W. Doula Model
  - a non-medical professional trained to support mothers and families with physical, emotional, and evidence-based information before, during, and after birth
  - Currently 13 trained doulas
- Parent Partners
  - Parents with lived experience support parents who have an open child dependency case
- Fatherhood Engagement
  - offers education, training, and support to help men become responsible, engaged, and empowered fathers

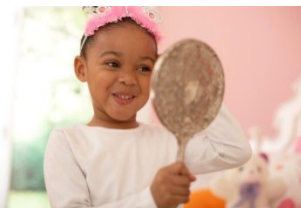


GUIDANCE. RESOURCE. OPENHEARTED. WISDOM.





Working together to keep moms, babies and families safe, healthy, and happy for a **STRONG** future!







## **Response to Proposal for WVHA Eligibility Determination and Enrollment for the Health Card**

The House Next Door is submitting a proposal to the West Volusia Hospital Authority for the Eligibility Determination and Enrollment Process for the West Volusia Hospital Authority Health Card.

### **Experience & Qualifications**

The House Next Door has successfully contracted with the West Volusia Hospital Authority (WVHA) for over twenty years, without ever being out of contract compliance.

This year is the ninth year that The House Next Door has successfully performed the 'pre-application' screening for the WVHA and is the fifth for performing the certification and enrollment process. In this time there has never been a grievance or complaint filed against the agency.

The House Next Door currently holds 14 contracts with 10 funders. We are in good standing with all our funders and are in the process of renewing many of our contracts.

The House Next Door is accredited by The Council on Accreditation, which is an international, independent, nonprofit, human service accrediting organization. Management and Financial processes are among the standards that are part of accreditation. The House Next Door has received unconditional accreditation for the past 12 years.

The House Next Door is experienced in understanding eligibility and compliance beyond our own services. We provide the monitoring for the Child Care Food Program for the Department of Health in five Counties. This oversight assures that all federal child nutrition guidelines are met, that monies earned through the program are spent on food items, verification of meals billed, and prevent fraudulent practices. Dollars earned by the providers are paid to HND and we in turn disburse them to the providers monthly. This contract has been renewed annually since 2008.

The House Next Door maintains an internal computer network system that is HIPPA compliant and is backed up daily.

### **Scope of Work**

#### **Screening Process:**

The House Next Door will continue to provide:

- The screening process for the applications in DeLand and Deltona
- Assistance in applying for ACA and Medicaid as well as printing online bills as needed
- A cohesive unit (Screening and Certification) to assure a minimum pended rate



- Outreach and follow-up for applicants with pended applications to assist in understanding what needs to be submitted and to meet timelines
- Information on the program at community events and fairs that we participate in as an agency
- Technical support regarding the process to partner agencies

### **Certification Process:**

The House Next Door will:

- Verify proof of residency in the WVHA taxing district.
- Verify assets
- Verify income is within the established limits
- Verify the applicant does not have Medicaid or other coverage and is not eligible for them
- Request additional information from the screeners as needed for clarification in addition to sending letters to applicants if screeners are unable to provide the information needed
- Keep screeners well informed on the verification process and any changes that may occur

### **Approval Process:**

The House Next Door will:

- Notify the third-party administrator daily of new or renewed clients. Notification will be done electronically
- Issue letters of acceptance or denial to the applicants

The House Next Door uses an established appeal process for applicants that have been denied. The appeal must be in writing and submitted to the HND administrative office within 60 days. A written response will be made to the applicant within 90 days.

The House Next Door's established Grievance Procedure will be used for any client complaints regarding services or the Health Card staff. Please see attached.

- The House Next Door will maintain an electronic database of all applications and the outcome. Files will be maintained for seven years. Access to other authorized agencies of the WVHA Health Card program will be provided as directed by the West Volusia Hospital Authority Board.

In the past year, we screened 2,900 applicants with 2,853 applications approved. To accomplish this staff held 3,392 face to face appointments. We provided services in both DeLand and Deltona. We are currently in the process of exploring providing services in Pierson.

### **Outcome Measures:**



- 90% or better approval rate
- 100% adherence to guidelines
- 99% timely processing of application (within 30 days)

All outcomes were met in the past year.

**Reports Provided:**

- Applications by unduplicated numbers
- Number and types of appeal and complaints from members or applicants
- Outreach activities

All reports were provided accurately and timely in the past year.



**Budget:**

<b><u>Proposed Program Budget</u></b>			
<b><u>Fiscal Year 24-25</u></b>			
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.			
<b>Revenue</b>	<b>Amount</b>	<b>% of Program Revenue</b>	
Federal	\$ -	0%	
State	-	0%	
County	-	0%	
Other Local Funding		0%	
United Way	-	0%	
In-Kind Contributions	8,585	2%	
3rd Party Reimbursements	-	0%	
Fees	-	0%	
Medicaid	-	0%	
Other (List)	-	0%	
<b>Amount Requested from the WVHA</b>	<b>563,761</b>	<b>99%</b>	
<b>TOTAL REVENUE</b>	<b>\$ 572,347</b>	<b>100%</b>	
<b>Program Operation Expenses</b>	<b>Total Expense</b>	<b>Amount Requested From WVHA</b>	<b>% of Funding</b>
Salaries and Benefits	\$ 406,423	\$ 400,326	71%
Contracted services		-	0%
Administrative and other services	\$ 165,924	\$ 163,435	29%
Medical		-	0%
Pharmacy		-	0%
Other (list anything over 10% of Program Expense)		-	0%
<b>Total Expense *</b>	<b>\$ 572,347</b>	<b>\$ 563,761</b>	<b>100%</b>



## WVHA FY 24-25 BUDGET NARRATIVE

### Personnel Expenses

Position Title	FTE's	Salaries	Fringe	Total
Dir of Cx Services	20.28%	\$ 15,354	1,891	17,245
Health Card Supervisor	100.00%	\$ 43,805	13,309	57,113
Health Card Certifier	100.00%	\$ 36,774	11,351	48,125
Health Card Specialist	100.00%	\$ 31,366	3,024	34,391
Health Card Certifier	100.00%	\$ 36,234	12,389	48,622
Health Card Specialist	100.00%	\$ 31,366	3,965	35,332
Health Card Specialist	100.00%	\$ 33,530	4,228	37,758
Health Card Specialist	100.00%	\$ 33,530	3,222	36,752
Health Card Admin Assistant	100.00%	\$ 30,285	10,757	41,042
Health Card Admin Assistant	100.00%	\$ 30,285	11,666	41,951
IT	10.00%	\$ 6,448	1,643	8,092
	<b>9.30</b>	<b>\$328,977</b>	<b>\$77,445</b>	<b>\$406,423</b>

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

FICA @ 7.65%, Unemployment Tax @ .97%, and Workers Compensation @ 1.50%

Health and Life Insurance @ \$659.86/Month

Retirement matched at a maximum of 3% for participating employees

### Operating Expenses

<b>Rent:</b> Deltona Office - \$2,500 per Month (\$15 per sq ft 2000) for 9 months Oct through June. Then from July - Sept \$3,666.67 per month (\$22 per sq ft 2000) for 3 months, Deland FTE 2 or 16% of \$3414.45 per month; annual medical records storage estimated at \$1200.76	\$ 41,256
<b>Utilities:</b> Electric and Water at DeLand and Deltona locations	5,394
<b>Repairs &amp; Maintenance:</b> Expenses related to building at DeLand and Deltona locations	551
<b>Professional Fees:</b> Audit fees and Housekeeping	12,051
<b>Travel:</b> Mileage expense @ .50/mile, and travel, to and from service sites weekly	300
<b>Staff Training</b>	2,000
<b>Equipment</b> - Computers and office equipment	7,110
<b>Equipment Rental:</b> Copy/Scan/Fax machines rental expense at the DeLand and Deltona locations, plus maintenance agreement fees	5,355
<b>Subcontracted Expenses:</b> Technology and software support	0
<b>Insurance:</b> Professional/Property/General Liability	3,780
<b>Communications:</b> Local, Long Distance, Cell Phones, Internet at DeLand and Deltona locations	9,180
<b>Supplies:</b> Office, Housekeeping, Educational and Client Supplies	2,622
<b>In-Kind Rent:</b> Deltona and DeLand	8,524



<b>Other Operating Expenses:</b> Licenses/Permits/Dues, Recruitment, Background, Postage, Other Professional Fees	9,600
<b>Administrative &amp; Quality Assurance:</b> Based on Revenue Distribution	58,200
<b>Total Other Expense</b>	<b>165,924</b>
<b>Total Personnel and Other Expense</b>	<b>\$572,347</b>
<b>Cost per application</b>	\$167.35
<b>Cost per application/WVHA</b>	\$164.84
<b>Number of applications to be processed: 285/Month</b>	3,420

*Explanation of Increase in cost:*

Most of the budget increase is in computers and rent. We had a significant rent increase in Justin Square. For almost 20 years we were given an extremely generous discount by Larry Kent. Mr. Kent died in 2019 and his children honored his agreement with us. However, they have sold the property, and the new owners are moving us to the market rate. Our rent is increasing from \$8.50 per square foot to \$15, with another increase to \$22 next year.

Department computers are five years old and in need of replacement.

Other increases are pass-through increases in copiers and the phone system.

<b><u>Proposed Program Budget</u></b>			
<b><u>Fiscal Year 24-25</u></b>			
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.			
<b>Revenue</b>	<b>Amount</b>	<b>% of Program Revenue</b>	
Federal	\$ -	0%	
State	-	0%	
County	-	0%	
Other Local Funding		0%	
United Way	-	0%	
In-Kind Contributions	8,585	2%	
3rd Party Reimbursements	-	0%	
Fees	-	0%	
Medicaid	-	0%	
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Contracted services		-	0%
Administrative and other services	\$ 165,924	\$ 163,435	29%
Medical		-	0%
Pharmacy		-	0%
Other (list anything over 10% of Program Expense)		-	0%
<b>Total Expense *</b>	<b>\$ 572,347</b>	<b>\$ 563,761</b>	<b>100%</b>

## WVHA FY 24-25 BUDGET NARRATIVE

### **Personnel Expenses**

<b>Position Title</b>	<b>FTE's</b>	<b>Salaries</b>	<b>Fringe</b>	<b>Total</b>
Dir of Cx Services	20.28%	\$ 15,354	1,891	17,245
Health Card Supervisor	100.00%	\$ 43,805	13,309	57,113
Health Card Certifier	100.00%	\$ 36,774	11,351	48,125
Health Card Specialist	100.00%	\$ 31,366	3,024	34,391
Health Card Certifier	100.00%	\$ 36,234	12,389	48,622
Health Card Specialist	100.00%	\$ 31,366	3,965	35,332
Health Card Specialist	100.00%	\$ 33,530	4,228	37,758
Health Card Specialist	100.00%	\$ 33,530	3,222	36,752
Health Card Admin Assistant	100.00%	\$ 30,285	10,757	41,042
Health Card Admin Assistant	100.00%	\$ 30,285	11,666	41,951
IT	10.00%	\$ 6,448	1,643	8,092
	<b>9.30</b>	<b>\$328,977</b>	<b>\$77,445</b>	<b>\$406,423</b>

#### **Fringe benefits are calculated at the following rates:**

FICA @ 7.65%, Unemployment Tax @ .97%, and Workers Compensation @ 1.50%

Health and Life Insurance @ \$659.86/Month

Retirement matched at a maximum of 3% for participating employees

### **Operating Expenses**

**Rent:** Deltona Office - \$2,500 per Month (\$15 per sq ft 2000)for 9 months Oct through June. Then from July - Sept \$3,666.67 per month (\$22 per sq ft 2000) for 3 months, Deland FTE 2 or 16% of \$3414.45 per month; annual medical records storage estimated at \$1200.76

**Utilities:** Electric and Water at DeLand and Deltona locations 5,394

**Repairs & Maintenance:** Expenses related to building at DeLand and Deltona locations 551

**Professional Fees:** Audit fees and Housekeeping 12,051

**Travel:** Mileage expense @ .50/mile, and travel, to and from service sites weekly 300

**Staff Training** 2,000

**Equipment** - Computers and office equipment 7,110

**Equipment Rental:** Copy/Scan/Fax machines rental expense at the DeLand and Deltona locations, plus maintenance agreement fees 5,355

**Subcontracted Expenses:** Technology and software support 0

**Insurance:** Professional/Property/General Liability 3,780

**Communications:** Local, Long Distance, Cell Phones, Internet at DeLand and Deltona locations 9,180

**Supplies:** Office, Housekeeping, Educational and Client Supplies 2,622

**In-Kind Rent:** Deltona and DeLand 8,524

**Other Operating Expenses:** Licenses/Permits/Dues, Recruitment, Background, Postage, Other Professional Fees 9,600

**Administrative & Quality Assurance:** Based on Revenue Distribution 58,200

**Total Other Expense** **165,924**

**Total Personnel and Other Expense** **\$572,347**

**Cost per application** \$167.35

**Cost per application/WVHA** \$164.84

**Number of applications to be processed: 285/Month** 3,420



Section 9.04 Procedures (Page 16 eligibility guidelines)

19. Insurance Payments- Clarified what type of insurance.

Section 10.03 Procedures (Page 19 eligibility guidelines)

2. Assets to be considered-c. **Cash surrender value of life insurance**, if the combined face value of all policies owned by the family unit exceeds \$1,500. Clarify if this means it is for all life insurances even ones that do not pay out until person passes away?

THE CURRENT GUIDELINES REQUIRE THAT SUCH CASH VALUES BE CONSIDERED AS AN AVAILABLE ASSET, BUT THIS SEEMS LIKE AN AREA WORTHY OF FURTHER CONSIDERATION BY THE BOARD FOR POTENTIAL MODIFICATION (e.g., ESTABLISHING SOME THRESHOLD MINIMUM VALUE OF THE CASH VALUE SUCH AS MORE THAN 10,000 (NOT SURE WHAT AMOUNT MAKES SENSE) TO DETER POTENTIAL APPLICANTS FOR HIDING LIQUID ASSETS IN HUGE WHOLE LIFE POLICIES

**WEST VOLUSIA HOSPITAL AUTHORITY**

**FINANCIAL STATEMENTS**

**APRIL 30, 2024**



## ACCOUNTANTS' COMPILATION REPORT

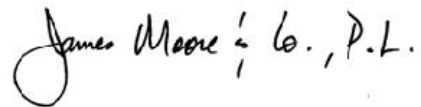
To the Board of Commissioners,  
West Volusia Hospital Authority:

Management is responsible for the accompanying financial statements of West Volusia Hospital Authority (the Authority), which comprise the balance sheet – modified cash basis as of April 30, 2024, and the related statement of revenue and expenditures budget and actual – modified cash basis for the one month and year to date period then ended 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 the completeness of the information provided by management. We do not express an opinion, a conclusion, nor provide any form of assurance on these financial statements.

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.

DeLand, Florida  
May 16, 2024



**WEST VOLUSIA HOSPITAL AUTHORITY  
BALANCE SHEET - MODIFIED CASH BASIS  
APRIL 30, 2024**

**ASSETS**

Ameris Bank - operating	\$ 1,219,448
Ameris Bank - MM	9,937,549
Ameris Bank - payroll	45,601
Mainstreet Community Bank - EBMS operational escrow	200,000
Mainstreet Community Bank - MM	5,685,706
Surety Bank - MM	1,580,399
Mainstreet Community Bank - Certificates of deposit	5,587,959
Prepaid items and deposits	2,000
<b>Total Assets</b>	<b><u><u>\$ 24,258,662</u></u></b>

**FUND BALANCE**

<b>Total Fund Balance</b>	<b><u><u>\$ 24,258,662</u></u></b>
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See accountants' compilation report.

**WEST VOLUSIA HOSPITAL AUTHORITY**  
**STATEMENT OF REVENUES AND EXPENDITURES BUDGET AND ACTUAL - MODIFIED CASH BASIS**  
**FOR THE ONE MONTH AND SEVEN MONTHS ENDED APRIL 30, 2024**

	One Month Period Actual	Year to Date Actual	Annual Budget	Amount Remaining Budget Balance	Percent Budget Used
<b>Revenues</b>					
Ad valorem taxes	\$ 271,522	\$ 14,953,769	\$ 15,700,000	\$ 746,231	95%
Interest income	51,268	369,431	400,000	30,569	92%
Other income	-	102,184	-	(102,184)	0%
Total revenues	<u>322,790</u>	<u>15,425,384</u>	<u>16,100,000</u>	<u>674,616</u>	<u>96%</u>
<b>Expenditures</b>					
Healthcare expenditures					
Hospitals					
Halifax Hospital	326,747	851,713			
AdventHealth	278,493	853,423			
Total hospitals	<u>605,240</u>	<u>1,705,136</u>	3,000,000	1,294,864	57%
Specialty Care Services					
Specialty Care - ER	11,056	37,641			
Specialty Care - Non-ER	542,409	1,916,716			
Total Specialty Care Services	<u>553,465</u>	<u>1,954,357</u>	3,500,000	1,545,643	56%
Emergency Room Care	152,524	498,635	1,000,000	501,365	50%
Primary Care	487,789	1,404,013	2,500,000	1,095,987	56%
Pharmacy	56,442	224,842	900,000	675,158	25%
Florida Dept of Health Dental Svcs	13,715	82,288	150,000	67,712	55%
Hispanic Health Initiatives	7,100	39,900	75,000	35,100	53%
Community Legal Services	6,179	41,303	105,833	64,530	39%
Rising Against All Odds	19,775	103,175	167,683	64,508	62%
HSCFV - Outreach	-	34,191	81,560	47,369	42%
HSCFV - Fam Services	-	31,737	76,331	44,594	42%
The House Next Door	3,957	15,508	45,000	29,492	34%
SMA - Homeless Program	4,991	44,656	90,000	45,344	50%
SMA - Residential Treatment	523,875	550,000	550,000	-	100%
SMA - Baker Act - Match	291,725	300,000	300,000	-	100%
County Medicaid Reimbursement	468,401	1,639,403	2,810,405	1,171,002	58%
H C R A - In County	5,006	37,432	400,000	362,568	9%
H C R A - Outside County	-	2,363	400,000	397,637	1%
The Neighborhood Center	13,975	67,575	125,000	57,425	54%
Healthy Communities Kid Care Outreach	4,711	31,890	72,203	40,313	44%
Other Healthcare Expenditures	-	-	95,872	95,872	0%
Total healthcare expenditures	<u>3,218,870</u>	<u>8,808,404</u>	<u>16,444,887</u>	<u>7,636,483</u>	<u>54%</u>
Personnel services					
Regular salaries and wages	5,587	39,114	67,556	28,442	58%
FICA	427	3,223	5,168	1,945	62%
Retirement	758	5,308	9,843	4,535	54%
Life and Health Insurance	887	5,450	12,000	6,550	45%
Workers Compensation Claims	11,546	68,986	25,000	(43,986)	276%
Total personnel services	<u>19,205</u>	<u>122,081</u>	<u>119,567</u>	<u>(2,514)</u>	<u>102%</u>

See accountants' compilation report.

**WEST VOLUSIA HOSPITAL AUTHORITY**  
**STATEMENT OF REVENUES AND EXPENDITURES BUDGET AND ACTUAL - MODIFIED CASH BASIS**  
**FOR THE ONE MONTH AND SEVEN MONTHS ENDED APRIL 30, 2024**

	<b>One Month Period Actual</b>	<b>Year to Date Actual</b>	<b>Annual Budget</b>	<b>Amount Remaining Budget Balance</b>	<b>Percent Budget Used</b>
Other expenditures					
Legal Counsel	12,037	35,775	70,000	34,225	51%
Outside Legal Counsel	5,000	30,311	40,311	10,000	75%
Outside Legislative Advisory	6,000	42,000	72,000	30,000	58%
Audit	-	-	20,500	20,500	0%
General Accounting - Recurring	9,500	57,000	114,000	57,000	50%
General Accounting - Nonrecurring	2,059	9,641	10,000	359	96%
Application Screening - THND	43,799	258,399	521,989	263,590	50%
Application Screening - RAAO	6,144	25,344	86,746	61,402	29%
TPA Services (EBMS)	70,077	238,342	500,000	261,658	48%
Building Repairs	10,526	21,013	100,000	78,987	21%
Advertising	140	2,180	10,000	7,820	22%
Other Operating Expenditures	431	14,072	15,000	928	94%
Tax Collector & Appraiser Fee	48,673	468,290	650,000	181,710	72%
City of DeLand Tax Increment District	-	124,098	125,000	902	99%
Total other expenditures	<u>214,386</u>	<u>1,326,465</u>	<u>2,335,546</u>	<u>1,009,081</u>	<u>57%</u>
<b>Total expenditures</b>	<u>3,452,461</u>	<u>10,256,950</u>	<u>18,900,000</u>	<u>8,643,050</u>	<u>54%</u>
<b>Excess (deficiency) of revenues over expenditures</b>	<u><u>\$ (3,129,671)</u></u>	<u><u>\$ 5,168,434</u></u>	<u><u>\$ (2,800,000)</u></u>	<u><u>\$ (7,968,434)</u></u>	<u><u>-185%</u></u>

See accountants' compilation report.