

**West Volusia Hospital Authority  
WVHA BOARD OF COMMISSIONERS REGULAR MEETING  
September 23, 2021**

**To commence upon the conclusion of the Final Budget Hearing  
Wayne Sanborn Activity Center, 815 S. Alabama Avenue  
DELAND, FL**

**AGENDA**

1. Call to Order
2. Opening Observance followed by a moment of silence
3. Approval of Proposed Agenda
4. Consent Agenda
  - A. Approval of Minutes Regular Meeting August 19, 2021 (With Errata Sheet attached)
  - B. Approval of Minutes Initial Budget Hearing September 9, 2021
5. Citizens Comments
6. Reporting Agenda
  - A. EBMS August Report – Written Submission
  - B. WVHA miCare Clinics DeLand/Deltona August Report – Written Submission
  - C. The House Next Door (THND) August HealthCard Report – Written Submission
7. Discussion Items
  - A. Commissioner Jennifer Coen Letter Dated 9/14/2021 Re: The Neighborhood Center-Healthcare Navigator Program
  - B. Remove SMA Baker Act Funding Application from the CAC Review Process – Commissioner Coen
  - C. SMA AHCA LIP Match Letter of Agreement (attached)
  - D. Durable Medical Equipment Consideration – Commissioner Accardi
  - E. CAC Sub-Committee Rescheduled Tuesday, November 2, 2021 (Meeting Schedule attached)
  - F. Funding Agreements for 2021-22:
    1. Community Legal Services, Inc. Medical-Legal Partnership program.
    2. Healthy Communities – Kidcare Outreach
    3. Hispanic Health Initiatives, Inc.'s Taking Care of My Health
    4. Rising Against All Odds, Inc. -- HIV/AIDS Outreach and Case Management
    5. Rising Against All Odds, Inc.—Health Card Enrollment & Retention Services
    6. SMA Healthcare – Baker Act Match
    7. SMA Healthcare– Psychiatric/Homeless Program
    8. SMA Healthcare —Level II Residential Treatment
    9. The Healthy Start --Access to Healthcare Services-WIS/NOS Program
    10. The Healthy Start –Family Services Coordinator—Deltona
    11. The House Next Door – Therapeutic/Mental Health Services
    12. The House Next Door—HealthCard Program-Eligibility Determination Services
    13. The Neighborhood Center of West Volusia “Access to Care”
    14. The Neighborhood Center of West Volusia “Health Care Navigator”
    15. Volusia County Health Department—Florida Department of Health (Dental Care)
  - G. Commissioner Brian Soukup – Resignation Letter 9-15-2021 (attached)
  - H. Follow Up Items
    1. Massey Services Wood Destroying Insects Service Agreement – Florida Spot Treatment
8. Finance Report
  - A. August Financials
9. Legal Update
10. Adjournment

## Errata Sheet Changes WVHA August 19, 2021

Added to page 1:

**CAC Members in Attendance:**

Donna Pepin

Patrick Rogers

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

**5:00 P.M.**

DeLand City Hall  
120 S. Florida Avenue, DeLand, FL  
August 19, 2021  
DeLand, Florida

**Those in Attendance:**

Commissioner Voloria Manning  
Commissioner Judy Craig  
Commissioner Jennifer Coen

**Absent:**

Commissioner Brian Soukup  
Commissioner Roger Accardi

**CAC Members in Attendance:**

Donna Pepin  
Patrick Rogers

**Others Present:**

Attorney for the Authority: Theodore Small, Law Office of Theodore W. Small, P.A.  
Accountant for the Authority: Ron Cantlay, Dreggors, Rigsby & Teal, (DRT) P.A.  
Administrative Support: Eileen Long, DRT

**Call to Order**

Chair Manning called the meeting to order. The meeting took place at the DeLand City Hall, located at 120 S. Florida Avenue, DeLand, Florida, having been legally noticed in the Daytona Beach News-Journal, a newspaper of general circulation in Volusia County, commencing at 5:17 p.m. The meeting was opened with a moment of silence followed by The Pledge of Allegiance.

**Approval of Proposed Agenda**

**Motion 085 – 2021** Commissioner Coen motioned to approve the amended agenda as presented. Commissioner Craig seconded the motion. The motion passed by a 3-0-2 vote.

**Consent Agenda**

**Approval of Minutes Budget Workshop Meeting July 15, 2021**  
**Approval of Minutes Regular Meeting July 15, 2021**

**Motion 086 – 2021** Commissioner Coen motioned to approve the consent agenda. Commissioner Craig seconded the motion. The motion passed by a 3-0-2 vote.

## **Citizens Comments**

There were five.

### **Citizens Advisory Committee (CAC), Jacquie Lewis, Sub-Committee Chair Minutes August 3, 2021 (Draft) Chair Jacquie Lewis New Member Orientation (attached)**

CAC Chair Donna Pepin updated the Board regarding the Sub-Committee discussion in Sub-Committee Chair Lewis' absence.

## **Reporting Agenda**

**EBMS July Report – Written Submission**

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

**The House Next Door (THND) July HealthCard Report – Written Submission**

## **Contractual Utilization Reports to the WVHA Board of Commissioners**

**Hispanic Health Initiative (HHI), Josephine Mercado, Executive Director and/or  
Peter Willems, Director of Operations**

Mr. Peter Willems, HHI, Director of Operations updated the Board on the progress that they are making in resuming services in the community post-pandemic restrictions.

**Community Legal Services of Mid-Florida (CLSMF), Christina Russo Walters,  
Attorney**

Ms. Christina Russo Walters, Attorney, CLSMF updated the Board on their 2020-2021 utilization and the additional progress they have made in hospital debt forgiveness with Halifax Medical Center on behalf of 4 WVHA HealthCard members is in excess of \$42,000.00.

## **Discussion Items**

**Attorney Eric Romano – Update Opioid Litigations  
Mallinckrodt PLC Bankruptcy Plan – Approve or Object**

**Motion 087 – 2021** Commissioner Craig motioned to authorize Attorney Small to work with Attorney Eric Romano and the Litigation Team's Executive Committee on behalf of the WVHA Board of Commissioners and to approve the Mallinckrodt PLC Bankruptcy Plan if that is the recommendation of the Executive Committee. Commissioner Coen seconded the motion. The motion passed by a 3-0-2 vote.

**CAC Nominee, Christian Brown/Chair Manning (application attached)**



**Motion 088 – 2021** Commissioner Coen motioned to appoint Christian Brown to the CAC as Chair Manning's appointee. Commissioner Craig seconded the motion. The motion passed by a 3-0-2 vote.

**SMA Baker Act AHCA LIP Match opportunity roughly \$257,000.00 (Eric Horst email dated 8/6/2021 attached)**

**Motion 089 – 2021** Commissioner Craig motioned to commit in concept to participate in the LIP Match Program on behalf of SMA, up to \$300,000.00 paid to the Agency for Healthcare Administration (AHCA) subject to the final agreement being reviewed and approved by WVHA's Legal Counsel and the Board of Commissioners. Commissioner Coen seconded the motion. The motion passed by a 3-0-2 vote.

**Review Proposed Budget 2021-2022  
2021-2022 CAC Ranking Recommendations**

There was Board discussion regarding giving Attorney Small a 10% raise, that they determined would be raising his hourly rate from \$200.00 per hour to \$225.00 per hour.

**Motion 090 – 2021** Commissioner Craig motioned to increase Attorney Small's hourly rate from \$200.00 per hour to \$225.00 per hour. Commissioner Manning seconded the motion. The motion passed by a 3-0-2 vote.

Former Commissioner Guzman submitted an email dated August 19, 2021 asking for it to be read into the record. Ms. Long read it into the public record and it has been attached as a part of the public record.

**Site Visit Expanded Site Visit Write Ups  
The Neighborhood Center (TNC) Healthcare Navigator Program  
TNC Deficiency Analysis 8-13-2020 (attached)**

There was much Board discussion regarding ways that TNC could go back and try to gather the missing income and asset support and going further TNC should have all of their Healthcare Navigator Clients apply for and qualify for the WVHA HealthCard before submitting any invoices for reimbursement to the WVHA.

**Motion 091 – 2021** Commissioner Craig motioned that this matter will be tabled until the WVHA October 2021 Meeting to allow TNC to come back before the Board to bring back a report writing up what they have done to try and supply the missing information dating back to the inception of this program and at that time the Board will consider and discuss what the consequences will be. Commissioner Coen seconded the motion. The motion passed by a 3-0-2 vote.

**SMA Homeless/Psychiatric Services Program**

Mr. Cantlay explained that the SMA Homeless/Psychiatric Services Program Site Visit review contained no findings.

**WVHA miCare DeLand Clinic – Authorizing miCare to Manage Building and Maintenance Matters-Budget Line-Item Building & Office Costs**

Mr. Small explained that this was covered in his Legal Update (attached) and that there is sufficient authority in the WVHA/miCare Clinics Agreement to authorize miCare to handle the operational matters involving building maintenance and repairs. There was no further Board action required.

**Termite Pest Control Proposals**

**Aaron Pest Control (attached)**

**Massey Services 2 Proposals (attached)**

**Orkin 3 Proposals (attached)**

**Motion 092 – 2021** Commissioner Craig motioned to accept the two Massey Pest Control, comprehensive treatment proposals. Commissioner Coen seconded the motion.

There was much discussion regarding costs that would be incurred over a 10-year period, with Commissioner Coen leaning toward only approving the one Massey Pest Control proposal that provides baiting, Subterranean Termite Treatment and Formosan Termite Treatments at \$750.00 for the initial treatment and \$325.00 for annual treatments.

The motion died with a 2-1-2 vote, with Commissioner Coen opposing.

**Motion 093 – 2021** Commissioner Coen motioned to approve the Massey Pest Control proposal that provides baiting, Subterranean Termite Treatment and Formosan Termite Treatments at \$750.00 for the initial treatment and \$325.00 for annual treatments. Commissioner Craig seconded the motion.

Commissioner Craig reserved the right to bring back the second Massey Termite Proposal for Wood Treatment, Drywood Termites and Powderpost Beetles at \$540.00 for the initial treatment and \$100.00 annually, during the September 23, 2021 Regular Meeting.

The motion passed by a 3-0-2 vote.

**County Medicaid Split**

Mr. Small referred to his Legal Update (attached) explaining that there was nothing more to report.

**Florida Auditor General, Jim Cole – RAAO Data Request (email dated 8-18-2021 and 8-5-2021 attached)**

**Motion 094 – 2021** Commissioner Coen motioned that the WVHA will continue to cooperate with the ongoing operational audit by the State of Florida—Office of the Auditor General to provide any requested information and public records within its possession. WVHA encourages its funded agencies to cooperate with any requests from the Auditor General for information unless providing such information is contrary to their internal privacy policies, State or Federal laws or regulations as interpreted by their own counsel.

Regarding the recent RAAO Data Request, the Auditor General makes this request on the basis of its view that “RAAO is a unique entity in that there is a limited number of tests that would be performed on a single individual”. (Email from Jim Cole, Office of Auditor General to Attorney Ted Small dated 8/18/21). The Auditor General has not pointed to any contractual or other basis for this “unique” treatment of RAAO versus other WVHA funded entities, none of which have received such intrusive requests concerning the number of times a client has received a test/exam, the frequency, the outcome, along with the clients’ addresses. As a matter of sound public health policy to potentially avoid further unknowing spread of HIV within our community, WVHA does not support rationing the number of HIV tests that are administered to an individual that is engaging in activities that make them want to be tested. Further, WVHA supports both Federal and State policies that require heightened protection for the protection of medical information relating to HIV status.

Commissioner Craig seconded the motion. The motion passed by a 3-0-2 vote.

## **Finance Report**

### **July Financials**

Mr. Ron Cantlay, DRT reviewed for the Board the July financial statements.

**Motion 095 – 2021** Commissioner Coen motioned to pay the expenditures totaling \$1,954,820.58, a transfer from Intracoastal Money Market into the Intracoastal Operating Account of \$702,158.28, a transfer of \$1,500,000.00 from Mainstreet Community Bank into the Intracoastal Money Market Account for a total of \$4,156,978.86. Commissioner Craig seconded the motion.

## **Legal Update**

## **Adjournment**

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

Adjournment

Voloria Manning, Chair

**WEST VOLUSIA HOSPITAL AUTHORITY**  
**Board of Commissioners Initial Budget Hearing**  
DeLand City Hall, Commission Chambers  
120 S. Florida Avenue,  
DeLand, FL  
September 9, 2021  
5:05 p.m.

**Those in Attendance:**

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

**Absent:**

Commissioner Brian Soukup

**CAC Present:**

Donna Pepin

**Others Present:**

Attorney for the Authority: Ted Small, Law Office of Theodore W. Small, P.A.  
Accountant for the Authority: Ron Cantlay, Dreggors, Rigsby & Teal (DRT)  
Administrative Support: Eileen Long, DRT

**Call to Order**

Chair Manning called the meeting to order and confirmed that a quorum was established with four Commissioners present. The meeting took place at DeLand City Hall, Commission Chambers, located at 120 S. Florida Avenue, DeLand, FL and commenced at 5:05 p.m., DeLand, Florida, having been legally noticed on the TRIM Notice mailed by the Volusia County Property Appraiser.

**Millage proposal**

Chair Manning asked for discussion of the proposed millage rate necessary to fund the budget for Fiscal Year 2021-2022.

Chair Manning moved to public comment.

There were four.

Chair Manning asked for Commissioner discussion.

There was Board consensus to adopt the rolled-back millage rate of 1.4073 during this initial budget hearing.

Chair Manning asked Attorney Small to read the Public Announcement of the West Volusia Hospital Authority 2021-2022 Tentative Millage Rate.

Mr. Ted Small read into the record the Public Announcement of the West Volusia Hospital Authority 2021-2022 Tentative Millage.

**Resolution 2021 – 003** Attorney Small read into the record Resolution of the West Volusia Hospital Authority to adopt the 2021-2022 Tentative Millage, Resolution 2021-003 (See attached).

**Motion 096 – 2021** Commissioner Craig motioned to adopt Resolution 2021-003. Commissioner Accardi seconded the motion.

Roll Call:

Commissioner Accardi	Yes
Commissioner Coen	Yes
Commissioner Craig	Yes
Chair Manning	Yes
Commissioner Soukup	Absent

The Resolution was adopted by a 4-0-1 vote.

### **Discussion of Tentative Budget**

Chair Manning asked the Board if there was any discussion regarding the proposed budget for FY 2021-2022.

Mr. Cantlay reviewed the 2021-2022 tentative budget presented for consideration.

Chair Manning moved to public comment.

There were none.

**Resolution 2021 – 004** Attorney Small read into the record the Resolution of the West Volusia Hospital Authority to Adopt the 2021-2022 Tentative Budget, Resolution 2021-004 (See attached).

**Motion 097 – 2021** Commissioner Craig motioned to adopt Resolution 2021-004. Commissioner Coen seconded the motion.

Roll Call:

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

Commissioner Soukup

Absent

The Resolution was adopted by a 4-0-1 vote.

**Set date of Public Hearing to Adopt Final Millage Rate and Final Budget**

**Resolution 2021 - 005** Attorney Small read into the record the Resolution of the West Volusia Hospital Authority to formally set the date of public hearing to make a final decision on the budget and taxes on Thursday, September 23, 2021 to be held at The Wayne Sanborn Activity Center located at 815 S. Alabama Avenue, DeLand FL, and commencing at 5:05 p.m., Resolution 2021-005 (See attached).

**Motion 098 – 2021** Commissioner Craig motioned to adopt Resolution 2021-005. Commissioner Coen seconded the motion.

Roll Call:

Commissioner Accardi	Yes
Commissioner Coen	Yes
Commissioner Craig	Yes
Chair Manning	Yes
Commissioner Soukup	Absent

The Resolution was adopted by a 4-0-1 vote.

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

Adjournment,

Voloria Manning, Chair



EBMS

August 2021

Submission Report for  
WVHA Board Members

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# Executive Summary for 00532

Client: West Volusia Hospital Authority  
 Paid Dates: 8/1/2021 to 8/31/2021  
 Location: All

Department: All  
 Benefit Plan: All  
 TIN: All

Plan Experience Summary			Cash Flow Summary		Disallowed Charges by Category		
Claim Counts	2744		Charges	\$2,317,636	Disallowed Category	Amount	% of Gross
Claim Type	Total Paid	Per EE/Mo	less Disallowed	\$1,970,312	Addl Info Not Provided	-\$9,666	-0.42%
Medical	\$340,483	\$237	Allowed	\$347,324	Duplicate Charges	\$74,492	3.21%
Professional	\$204,634	\$142	less Member	\$9,421	Plan Limitations	\$798,086	34.44%
Facility	\$135,850	\$95	less Adjustments	-\$2,580	UCR Reductions	\$51	0.00%
PBM	\$0	\$0	Paid Benefit	\$340,483	Other	\$1,107,348	47.78%
Total Plan Paid:	\$340,483	\$237	plus Admin Costs	\$0	Total:	\$1,970,312	85.01%

Census										
Census Date:	Male Emp	Female Emp	Total Employees	Male Spouse	Female Spouse	Male Dep	Female Dep	Total Medical	Total Dental	Total Vision
8/31/2021										
0 to 19	13	19	32	0	0	0	0	32	0	0
20 to 25	26	31	57	0	0	0	0	57	0	0
26 to 29	37	25	62	0	0	0	0	62	0	0
30 to 39	140	107	247	0	0	0	0	247	0	0
40 to 49	133	179	312	0	0	0	0	312	0	0
50 to 59	191	255	446	0	0	0	0	446	0	0
60 to 64	81	129	210	0	0	0	0	210	0	0
65 and Older	25	46	71	0	0	0	0	71	0	0
Totals	646	791	1437	0	0	0	0	1437	0	0
Average Age	46.10	48.79	47.58	0.00	0.00	0.00	0.00	47.58	0.00	0.00

Top Paid			Plan Payment by Age & Claimant Type			
Name	Claim Count	Paid	Census Date: 8/31/2021	Employee	Spouse	Dependent
Medical Center Of Deltona	22	\$56,404	0 to 19	\$702	\$0	\$0
Florida Cancer Specialists	85	\$42,025	20 to 25	\$2,239	\$0	\$0
Adventhealth Deland	27	\$37,348	26 to 29	\$5,367	\$0	\$0
Halifax Hospital Medical	20	\$22,334	30 to 39	\$40,096	\$0	\$0
Adventhealth Fish	50	\$19,987	40 to 49	\$46,335	\$0	\$0
Medical Center Of Deltona	8	\$18,755	50 to 59	\$132,376	\$0	\$0
Quest Diagnostics Tampa	370	\$15,329	60 to 64	\$85,625	\$0	\$0
6 Radiology Associates	109	\$11,234	65 and Older	\$27,744	\$0	\$0
Orange City Surgery	15	\$9,969	Totals	\$340,483	\$0	\$0
Gastroenterology Of	60	\$8,481				

Claims Paid by Month		Average Lag & Average Spend (rolling 12 months)			
January 21	\$195,932	Product	Avg Paid per Day	Avg Lag Days	Lag Dollars
February 21	\$461,274	Medical	\$15,428	47	\$725,116
March 21	\$432,415	Vision	\$0	35	\$0
April 21	\$662,120	RX	\$0	71	\$0
May 21	\$391,136	Total:			\$725,116
June 21	\$424,614				
July 21	\$819,433				
August 21	\$340,483				
Total:	\$3,727,406				



## Executive Summary for 00532

Client: West Volusia Hospital Authority  
Paid Dates: 8/1/2021 to 8/31/2021  
Location: All

Department: All  
Benefit Plan: All  
TIN: All

Benefit Analysis								
Benefit Category	Line Counts	Charges	Disallowed	Allowed	Member	Adjustments	Plan Paid	% of Total
ALLERGY CARE	2	\$973	\$875	\$98	\$0	\$0	\$98	0.03%
ANESTHESIA	31	\$45,579	\$42,377	\$3,202	\$0	\$0	\$3,202	0.94%
CHIROPRACTIC	29	\$1,058	\$46	\$1,012	\$90	\$0	\$922	0.27%
COVID-19	64	\$5,899	\$5,112	\$787	\$0	\$0	\$787	0.23%
DIALYSIS	32	\$305,111	\$304,823	\$288	\$0	\$0	\$288	0.08%
DME/APPLIANCE	1	\$312	\$312	\$0	\$0	\$0	\$0	0.00%
EMERG ROOM CHRGS	384	\$641,094	\$573,139	\$67,955	\$2,200	\$0	\$65,755	19.31%
HOSPICE CARE	2	\$364	\$364	\$0	\$0	\$0	\$0	0.00%
INELIGIBLE	259	\$104,264	\$104,264	\$0	\$0	\$0	\$0	0.00%
INPATIENT PHYS	157	\$48,551	\$39,028	\$9,523	\$0	\$0	\$9,523	2.80%
IP HOSP CHARGES	48	-\$70,283	-\$120,543	\$50,260	\$600	\$0	\$49,660	14.59%
MATERNITY	4	\$2,190	\$2,190	\$0	\$0	\$0	\$0	0.00%
MEDICAL MISC	21	\$7,675	\$6,109	\$1,566	\$89	\$0	\$1,477	0.43%
OFFICE VISIT	838	\$164,917	\$134,005	\$30,912	\$2,660	\$0	\$28,252	8.30%
OP PHYSICIAN	129	\$78,073	\$68,574	\$9,499	\$98	\$0	\$9,402	2.76%
OTHER	233	\$245	\$245	\$0	\$0	-\$2,580	\$2,580	0.76%
OUTPAT HOSP	4	\$1,462	\$1,345	\$118	\$34	\$0	\$84	0.02%
PSYCHIATRIC	126	\$21,065	\$7,560	\$13,505	\$455	\$0	\$13,050	3.83%
RADIATION /CHEMO	46	\$109,716	\$68,762	\$40,954	\$18	\$0	\$40,936	12.02%
SLEEP DISORDER	23	\$3,839	\$3,839	\$0	\$0	\$0	\$0	0.00%
SUBS ABUSE	2	\$291	\$291	\$0	\$0	\$0	\$0	0.00%
SURG FACILITY	17	\$228,060	\$218,574	\$9,485	\$295	\$0	\$9,190	2.70%
SURGERY	170	\$15,541	\$10,839	\$4,702	\$0	\$0	\$4,702	1.38%
SURGERY IP	18	\$50,290	\$42,631	\$7,658	\$0	\$0	\$7,658	2.25%
SURGERY OP	92	\$152,298	\$119,728	\$32,569	\$0	\$0	\$32,569	9.57%
THERAPY	279	\$21,628	\$12,600	\$9,028	\$700	\$0	\$8,328	2.45%
VISION	4	\$160	\$160	\$0	\$0	\$0	\$0	0.00%
WELLNESS	1119	\$38,539	\$32,422	\$6,117	\$0	\$0	\$6,117	1.80%
XRAY/ LAB	3131	\$338,725	\$290,642	\$48,084	\$2,182	\$0	\$45,901	13.48%
Totals:	7265	\$2,317,636	\$1,970,312	\$347,324	\$9,421	-\$2,580	\$340,483	

# Executive Summary for 00532

Client: West Volusia Hospital Authority  
 Paid Dates: 1/1/2021 to 8/31/2021  
 Location: All

Department: All  
 Benefit Plan: All  
 TIN: All

Plan Experience Summary			Cash Flow Summary		Disallowed Charges by Category		
Claim Counts	28537		Charges	\$29,447,146	Disallowed Category	Amount	% of Gross
Claim Type	Total Paid	Per EE/Mo	less Disallowed	\$25,635,274	Addl Info Not Provided	\$1,200,736	4.08%
Medical	\$3,727,406	\$324	Allowed	\$3,811,872	Duplicate Charges	\$671,190	2.28%
Professional	\$2,068,476	\$180	less Member	\$84,635	Plan Limitations	\$11,013,568	37.40%
Facility	\$1,658,930	\$144	less Adjustments	-\$170	Cost Savings	\$3,402	0.01%
PBM	\$0	\$0	Paid Benefit	\$3,727,406	UCR Reductions	\$5,429	0.02%
Vision	\$0	\$0	plus Admin Costs	\$1,046,750	Other	\$12,740,950	43.27%
Total Plan Paid:	\$3,727,406	\$324	Total Plan Paid:	\$4,774,156	Total:	\$25,635,274	87.06%

Census										
Census Date:	Male Emp	Female Emp	Total Employees	Male Spouse	Female Spouse	Male Dep	Female Dep	Total Medical	Total Dental	Total Vision
8/31/2021										
0 to 19	13	19	32	0	0	0	0	32	0	0
20 to 25	26	31	57	0	0	0	0	57	0	0
26 to 29	37	25	62	0	0	0	0	62	0	0
30 to 39	140	107	247	0	0	0	0	247	0	0
40 to 49	133	179	312	0	0	0	0	312	0	0
50 to 59	191	255	446	0	0	0	0	446	0	0
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65 and Older	25	46	71	0	0	0	0	71	0	0
Totals	646	791	1437	0	0	0	0	1437	0	0
Average Age	46.10	48.79	47.58	0.00	0.00	0.00	0.00	47.58	0.00	0.00

Top Paid			Plan Payment by Age & Claimant Type			
Name	Claim Count	Paid	Census Date: 8/31/2021	Employee	Spouse	Dependent
Halifax Hospital Medical	184	\$621,426	0 to 19	\$11,340	\$0	\$0
Medical Center Of Deltona	352	\$552,315	20 to 25	\$41,080	\$0	\$0
Florida Cancer Specialists	864	\$390,092	26 to 29	\$94,585	\$0	\$0
Adventhealth Fish	387	\$248,744	30 to 39	\$487,058	\$0	\$0
Quest Diagnostics Tampa	3784	\$203,330	40 to 49	\$637,813	\$0	\$0
Adventhealth Deland	328	\$110,414	50 to 59	\$1,342,711	\$0	\$0
6 Radiology Associates	1041	\$101,113	60 to 64	\$686,996	\$0	\$0
Orange City Surgery	173	\$99,919	65 and Older	\$425,824	\$0	\$0
Orange City Surgery	239	\$79,655	Totals	\$3,727,406	\$0	\$0
Gastroenterology Of	513	\$67,404				

Claims Paid by Month		Average Lag & Average Spend (rolling 12 months)			
Month	Paid	Product	Avg Paid per Day	Avg Lag Days	Lag Dollars
January 21	\$195,932	Medical	\$15,428	47	\$725,116
February 21	\$461,274	Vision	\$0	35	\$0
March 21	\$432,415	RX	\$0	71	\$0
April 21	\$662,120				
May 21	\$391,136				
June 21	\$424,614				
July 21	\$819,433				
August 21	\$340,483				
Total:	\$3,727,406				\$725,116



# Executive Summary for 00532

Client: West Volusia Hospital Authority  
 Paid Dates: 1/1/2021 to 8/31/2021  
 Location: All

Department: All  
 Benefit Plan: All  
 TIN: All

Benefit Analysis								
Benefit Category	Line Counts	Charges	Disallowed	Allowed	Member	Adjustments	Plan Paid	% of Total
ALLERGY CARE	20	\$5,821	\$3,974	\$1,847	\$40	\$0	\$1,807	0.05%
AMBULANCE	13	\$7,896	\$7,896	\$0	\$0	\$0	\$0	0.00%
ANESTHESIA	370	\$577,576	\$511,398	\$66,178	\$0	\$0	\$66,178	1.78%
CHIROPRACTIC	133	\$3,883	\$1,312	\$2,571	\$240	\$0	\$2,331	0.06%
COVID-19	497	-\$261,445	-\$266,527	\$5,082	\$0	\$0	\$5,082	0.14%
DIALYSIS	304	\$901,286	\$886,516	\$14,770	\$0	\$0	\$14,770	0.40%
DME/APPLIANCE	29	\$25,349	\$25,349	\$0	\$0	\$0	\$0	0.00%
EMERG ROOM CHRGS	4079	\$8,807,436	\$8,576,784	\$230,652	\$6,985	\$0	\$223,667	6.00%
HOME HEALTH CARE	11	\$0	\$0	\$0	\$0	\$0	\$0	0.00%
HOSPICE CARE	2	\$364	\$364	\$0	\$0	\$0	\$0	0.00%
INELIGIBLE	1499	\$334,112	\$333,970	\$141	\$0	\$0	\$141	0.00%
INJECTION	13	\$0	\$0	\$0	\$0	\$0	\$0	0.00%
INPATIENT PHYS	1582	\$344,647	\$282,746	\$61,902	\$0	\$0	\$61,902	1.66%
IP HOSP CHARGES	424	\$5,188,923	\$4,715,230	\$473,694	\$3,425	\$0	\$470,269	12.62%
LAB OP	2	\$2,820	\$2,791	\$29	\$10	\$0	\$19	0.00%
MATERNITY	47	\$21,405	\$20,167	\$1,238	\$0	\$0	\$1,238	0.03%
MEDICAL MISC	789	\$82,423	\$61,953	\$20,470	\$812	\$0	\$19,657	0.53%
OFFICE VISIT	8876	\$1,394,719	\$967,975	\$426,744	\$30,635	\$0	\$396,109	10.63%
OP PHYSICIAN	1759	\$541,929	\$413,304	\$128,626	\$1,013	\$0	\$127,613	3.42%
OTHER	2273	\$9,956	\$9,858	\$98	\$0	-\$170	\$268	0.01%
OUTPAT HOSP	19	\$20,234	\$6,801	\$13,433	\$1,136	\$0	\$12,297	0.33%
PSYCHIATRIC	1470	\$357,102	\$219,880	\$137,223	\$5,395	\$0	\$131,828	3.54%
RADIATION /CHEMO	862	\$1,634,839	\$1,215,265	\$419,575	\$85	\$0	\$419,489	11.25%
SLEEP DISORDER	123	\$13,526	\$13,526	\$0	\$0	\$0	\$0	0.00%
SUBS ABUSE	20	\$31,853	\$31,177	\$676	\$100	\$0	\$576	0.02%
SURG FACILITY	401	\$3,608,682	\$2,953,806	\$654,876	\$5,440	\$0	\$649,436	17.42%
SURGERY	1843	\$163,343	\$130,071	\$33,272	\$0	\$0	\$33,272	0.89%
SURGERY IP	211	\$350,149	\$298,857	\$51,291	\$0	\$0	\$51,291	1.38%
SURGERY OP	954	\$1,257,176	\$961,128	\$296,047	\$10	\$0	\$296,037	7.94%
THERAPY	2775	\$267,252	\$147,449	\$119,803	\$9,890	\$0	\$109,913	2.95%
URGENT CARE	10	\$2,130	\$2,130	\$0	\$0	\$0	\$0	0.00%
VISION	43	\$1,645	\$1,645	\$0	\$0	\$0	\$0	0.00%
WELLNESS	9424	\$404,531	\$322,816	\$81,714	\$3	\$0	\$81,712	2.19%
XRAY/ LAB	34349	\$3,345,583	\$2,775,662	\$569,921	\$19,416	\$0	\$550,505	14.77%
<b>Totals:</b>	<b>75226</b>	<b>\$29,447,146</b>	<b>\$25,635,274</b>	<b>\$3,811,872</b>	<b>\$84,635</b>	<b>-\$170</b>	<b>\$3,727,406</b>	

# PCORI Membership Count

Block of Business ID:  
Client ID:

EBMSI  
00532

Eligibility Date: : 1/1/2021 to 8/31/2021

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

1/1/2021	2231	0	2231
2/1/2021	2236	0	2236
3/1/2021	2249	0	2249
4/1/2021	2249	0	2249
5/1/2021	2095	0	2095
6/1/2021	2008	0	2008
7/1/2021	1854	0	1854
8/1/2021	1678	0	1678

**Total Member Days**

2,075.00



## Enrollment Counts by Postal Code

Block of Business ID:  
Client ID:

EBMSI  
00532

As Of Date: 8/31/2021

Postal Code	Employee Count	Dependent Count	Total Count
32102	2	0	2
32130	45	0	45
32176	1	0	1
32180	80	0	80
32190	23	0	23
32713	48	0	48
32720	384	0	384
32724	242	0	242
32725	262	0	262
32738	216	0	216
32744	28	0	28
32763	95	0	95
32764	11	0	11
<b>Total</b>	<b>1437</b>	<b>0</b>	<b>1437</b>



## Tier Census by Product 8/1/2021

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	1619	726	893	0	0	0	0	1619
		Subtotal for Active:	1619	726	893	0	0	0	0	1619
		Total for Medical:	1619	726	893	0	0	0	0	1619





## Tier Census by Product 8/15/2021

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	1543	698	845	0	0	0	0	1543
		Subtotal for Active:	1543	698	845	0	0	0	0	1543
		Total for Medical:	1543	698	845	0	0	0	0	1543





## Tier Census by Product 8/31/2021

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	1437	646	791	0	0	0	0	1437
		Subtotal for Active:	1437	646	791	0	0	0	0	1437
		Total for Medical:	1437	646	791	0	0	0	0	1437



## Benefit Analysis Summary

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 8/1/2021 to 8/31/2021

		Charge	Ineligible	Cost Savings	Allowed	Patient Responsibility	Adjustments	Paid	
00532-West Volusia Hospital Authority									
ALLERGY CARE	2	973.00	730.00	144.77	98.23	0.00	0.00	98.23	0.03%
ANESTHESIA	31	45,578.80	24,021.40	18,355.31	3,202.09	0.00	0.00	3,202.09	0.94%
CHIROPRACTIC	29	1,058.00	0.00	45.67	1,012.33	90.00	0.00	922.33	0.27%
COVID-19	64	5,899.21	2,459.36	2,652.41	787.44	0.00	0.00	787.44	0.23%
DIALYSIS	32	305,110.80	304,380.80	441.72	288.28	0.00	0.00	288.28	0.08%
DME/APPLIANCE	1	312.00	312.00	0.00	0.00	0.00	0.00	0.00	0.00%
EMERG ROOM...	384	641,094.38	253,657.24	319,482.03	67,955.11	2,200.00	0.00	65,755.11	19.31%
HOSPICE CARE	2	364.08	364.08	0.00	0.00	0.00	0.00	0.00	0.00%
INELIGIBLE	259	104,264.24	104,130.32	133.92	0.00	0.00	0.00	0.00	0.00%
INPATIENT PHYS	157	48,551.25	29,519.25	9,508.94	9,523.06	0.00	0.00	9,523.06	2.80%
IP HOSP CHARGES	48	-70,282.92	-315,876.30	195,332.92	50,260.46	600.00	0.00	49,660.46	14.59%
MATERNITY	4	2,190.00	2,190.00	0.00	0.00	0.00	0.00	0.00	0.00%
MEDICAL MISC	21	7,675.01	406.01	5,702.76	1,566.24	89.33	0.00	1,476.91	0.43%
OFFICE VISIT	838	164,916.92	78,254.46	55,750.65	30,911.81	2,660.00	0.00	28,251.81	8.30%
OP PHYSICIAN	129	78,073.21	48,221.65	20,352.19	9,499.37	97.76	0.00	9,401.61	2.76%
OTHER	244	244.74	244.74	0.00	0.00	0.00	-2,580.45	2,580.45	0.76%
OUTPAT HOSP	4	1,462.30	306.30	1,038.31	117.69	33.68	0.00	84.01	0.02%
PSYCHIATRIC	126	21,065.45	848.16	6,712.15	13,505.14	455.00	0.00	13,050.14	3.83%
RADIATION /CHEMO	46	109,716.00	-28,124.00	96,885.93	40,954.07	18.44	0.00	40,935.63	12.02%
SLEEP DISORDER	23	3,838.56	3,838.56	0.00	0.00	0.00	0.00	0.00	0.00%
SUBS ABUSE	2	291.44	0.00	291.44	0.00	0.00	0.00	0.00	0.00%
SURG FACILITY	17	228,059.80	188,802.00	29,772.37	9,485.43	295.00	0.00	9,190.43	2.70%
SURGERY	170	15,540.66	4,380.00	6,458.98	4,701.68	0.00	0.00	4,701.68	1.38%
SURGERY IP	18	50,289.56	12,873.19	29,758.05	7,658.32	0.00	0.00	7,658.32	2.25%
SURGERY OP	92	152,297.84	18,530.00	101,198.39	32,569.45	0.00	0.00	32,569.45	9.57%
THERAPY	279	21,628.00	1,475.00	11,125.20	9,027.80	700.00	0.00	8,327.80	2.45%
VISION	4	160.00	160.00	0.00	0.00	0.00	0.00	0.00	0.00%
WELLNESS	1119	38,538.55	13,289.69	19,132.03	6,116.83	0.00	0.00	6,116.83	1.80%
XRAY/ LAB	3131	338,725.34	114,496.08	176,145.67	48,083.59	2,182.18	0.00	45,901.41	13.48%
<b>Totals for 00532</b>	<b>7276</b>	<b>2,317,636.22</b>	<b>863,889.99</b>	<b>1,106,421.81</b>	<b>347,324.42</b>	<b>9,421.39</b>	<b>-2,580.45</b>	<b>340,483.48</b>	



# Benefit Analysis Summary

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 1/1/2021 to 8/31/2021

		Charge	Ineligible	Cost Savings	Allowed	Patient Responsibility	Adjustments	Paid	
00532-West Volusia Hospital Authority									
ALLERGY CARE	20	5,821.00	973.00	3,000.76	1,847.24	40.00	0.00	1,807.24	0.05%
AMBULANCE	13	7,895.82	7,895.82	0.00	0.00	0.00	0.00	0.00	0.00%
ANESTHESIA	370	577,575.71	94,655.98	416,741.89	66,177.84	0.00	0.00	66,177.84	1.78%
CHIROPRACTIC	133	3,883.06	588.06	724.14	2,570.86	240.00	0.00	2,330.86	0.06%
COVID-19	497	-261,444.81	-277,448.62	10,921.55	5,082.26	0.00	0.00	5,082.26	0.14%
DIALYSIS	304	901,286.35	681,303.65	205,212.33	14,770.37	0.00	0.00	14,770.37	0.40%
DME/APPLIANCE	29	25,349.00	25,349.00	0.00	0.00	0.00	0.00	0.00	0.00%
EMERG ROOM...	4079	8,807,436.01	7,259,092.68	1,317,691.79	230,651.54	6,984.59	0.00	223,666.95	6.00%
HOME HEALTH CARE	11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
HOSPICE CARE	2	364.08	364.08	0.00	0.00	0.00	0.00	0.00	0.00%
INELIGIBLE	1499	334,111.76	333,691.40	278.94	141.42	0.00	0.00	141.42	0.00%
INJECTION	13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
INPATIENT PHYS	1582	344,647.48	218,730.05	64,015.60	61,901.83	0.00	0.00	61,901.83	1.66%
IP HOSP CHARGES	424	5,188,923.18	2,392,021.32	2,323,208.32	473,693.54	3,425.00	0.00	470,268.54	12.62%
LAB OP	2	2,820.21	2,505.21	286.15	28.85	10.00	0.00	18.85	0.00%
MATERNITY	47	21,404.75	17,441.00	2,726.10	1,237.65	0.00	0.00	1,237.65	0.03%
MEDICAL MISC	789	82,423.24	7,869.96	54,083.33	20,469.95	812.48	0.00	19,657.47	0.53%
OFFICE VISIT	8876	1,394,718.69	161,895.01	806,079.81	426,743.87	30,635.00	0.00	396,108.87	10.63%
OP PHYSICIAN	1759	541,929.28	169,375.42	243,928.09	128,625.77	1,012.88	0.00	127,612.89	3.42%
OTHER	2929	9,955.74	9,696.10	161.63	98.01	0.00	-169.82	267.83	0.01%
OUTPAT HOSP	19	20,234.34	-30,298.57	37,099.78	13,433.13	1,136.08	0.00	12,297.05	0.33%
PSYCHIATRIC	1470	357,102.45	28,517.70	191,362.06	137,222.69	5,395.00	0.00	131,827.69	3.54%
RADIATION /CHEMO	862	1,634,839.41	56,657.92	1,158,606.91	419,574.58	85.08	0.00	419,489.50	11.25%
SLEEP DISORDER	123	13,525.67	13,525.67	0.00	0.00	0.00	0.00	0.00	0.00%
SUBS ABUSE	20	31,852.78	26,402.16	4,775.11	675.51	100.00	0.00	575.51	0.02%
SURG FACILITY	401	3,608,681.96	577,323.09	2,376,483.00	654,875.87	5,440.00	0.00	649,435.87	17.42%
SURGERY	1843	163,343.13	18,311.86	111,759.16	33,272.11	0.00	0.00	33,272.11	0.89%
SURGERY IP	211	350,148.66	115,428.61	183,428.84	51,291.21	0.00	0.00	51,291.21	1.38%
SURGERY OP	954	1,257,175.80	54,121.80	907,006.52	296,047.48	10.00	0.00	296,037.48	7.94%
THERAPY	2775	267,252.37	4,362.00	143,087.46	119,802.91	9,890.00	0.00	109,912.91	2.95%
URGENT CARE	10	2,130.00	2,130.00	0.00	0.00	0.00	0.00	0.00	0.00%
VISION	43	1,645.00	1,645.00	0.00	0.00	0.00	0.00	0.00	0.00%
WELLNESS	9424	404,530.78	43,977.42	278,838.92	81,714.44	2.82	0.00	81,711.62	2.19%
XRAY/ LAB	34349	3,345,583.02	675,382.77	2,100,279.63	569,920.62	19,415.99	0.00	550,504.63	14.77%

Requested by: ReportScheduler from p316 data [P316]

Generated at: 06:56:28 on 01 September 2021



## Benefit Analysis Summary

Block of Business ID: EBMSI  
Client ID: 00532  
Paid Date: 1/1/2021 to 8/31/2021

	Line Count	Charge	Ineligible	Cost Savings	Allowed	Patient Responsibility	Adjustments	Paid	% Paid
Totals for 00532	75882	29,447,145.92	12,693,486.55	12,941,787.82	3,811,871.55	84,634.92	-169.82	3,727,406.45	

# Cost of Major

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 1/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	13	Diseases of the Musculoskeletal System & Connective Tissue	445	2089	461,623.88	12.38%
00532	West Volusia Hospital Authority	02	Neoplasms	162	839	439,254.60	11.78%
00532	West Volusia Hospital Authority	09	Diseases of Circulatory System	309	883	428,150.24	11.49%
00532	West Volusia Hospital Authority	11	Diseases of the Digestive System	264	1012	394,668.56	10.59%
00532	West Volusia Hospital Authority	18	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere...	587	1725	366,784.62	9.84%
00532	West Volusia Hospital Authority	21	Factors Influencing Health Status and Contact with Health Services	659	1419	340,002.88	9.12%
00532	West Volusia Hospital Authority	14	Diseases of the Genitourinary System	315	838	243,119.76	6.52%
00532	West Volusia Hospital Authority	04	Endocrine, nutritional and metabolic diseases	520	1203	198,468.49	5.32%
00532	West Volusia Hospital Authority	05	Mental, Behavioral and Neurodevelopmental disorders	236	1152	159,634.66	4.28%
00532	West Volusia Hospital Authority	03	Diseases of the blood and blood-forming organs & disorders involving the...	91	445	133,568.82	3.58%
00532	West Volusia Hospital Authority	10	Diseases of the Respiratory System	138	452	123,124.28	3.30%
00532	West Volusia Hospital Authority	22	Codes for Special Purposes	24	71	93,082.18	2.50%
00532	West Volusia Hospital Authority	19	Injury, Poisoning and Certain Other Consequences of External Causes	97	276	83,756.40	2.25%
00532	West Volusia Hospital Authority	07	Diseases of the eye & adnexa	130	272	72,827.11	1.95%
00532	West Volusia Hospital Authority	01	Certain infectious and parasitic disease	89	200	59,090.76	1.59%
00532	West Volusia Hospital Authority	06	Diseases of the nervous system	135	305	55,188.82	1.48%
00532	West Volusia Hospital Authority	12	Diseases of the skin & subcutaneous tissue	102	198	36,688.00	0.98%
00532	West Volusia Hospital Authority	15	Pregnancy, childbirth and the puerperium	23	227	20,981.88	0.56%
00532	West Volusia Hospital Authority	08	Diseases of the ear & mastoid process	22	61	13,170.52	0.35%
00532	West Volusia Hospital Authority	17	Congenital malformations, deformations and chromosomal abnormalities	10	21	4,219.99	0.11%
				4358	13688	3,727,406.45	100.00%

## Cost of Major

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 8/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	02	Neoplasms	30	64	49,823.54	14.63%
00532	West Volusia Hospital Authority	09	Diseases of Circulatory System	55	82	31,615.65	9.29%
00532	West Volusia Hospital Authority	18	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere...	129	204	29,892.62	8.78%
00532	West Volusia Hospital Authority	13	Diseases of the Musculoskeletal System & Connective Tissue	124	206	29,866.15	8.77%
00532	West Volusia Hospital Authority	11	Diseases of the Digestive System	67	92	28,002.00	8.22%
00532	West Volusia Hospital Authority	04	Endocrine, nutritional and metabolic diseases	71	88	24,808.52	7.29%
00532	West Volusia Hospital Authority	21	Factors Influencing Health Status and Contact with Health Services	86	110	22,900.11	6.73%
00532	West Volusia Hospital Authority	14	Diseases of the Genitourinary System	33	49	21,393.76	6.28%
00532	West Volusia Hospital Authority	01	Certain infectious and parasitic disease	15	17	19,114.37	5.61%
00532	West Volusia Hospital Authority	22	Codes for Special Purposes	13	24	17,485.66	5.14%
00532	West Volusia Hospital Authority	03	Diseases of the blood and blood-forming organs & disorders involving the...	34	56	17,222.29	5.06%
00532	West Volusia Hospital Authority	10	Diseases of the Respiratory System	30	45	15,951.92	4.69%
00532	West Volusia Hospital Authority	05	Mental, Behavioral and Neurodevelopmental disorders	73	99	15,040.72	4.42%
00532	West Volusia Hospital Authority	06	Diseases of the nervous system	17	26	4,751.46	1.40%
00532	West Volusia Hospital Authority	07	Diseases of the eye & adnexa	23	24	4,219.13	1.24%
00532	West Volusia Hospital Authority	12	Diseases of the skin & subcutaneous tissue	15	24	2,515.04	0.74%
00532	West Volusia Hospital Authority	15	Pregnancy, childbirth and the puerperium	8	17	2,159.16	0.63%
00532	West Volusia Hospital Authority	08	Diseases of the ear & mastoid process	3	6	1,851.42	0.54%
00532	West Volusia Hospital Authority	19	Injury, Poisoning and Certain Other Consequences of External Causes	12	17	1,587.88	0.47%
00532	West Volusia Hospital Authority	17	Congenital malformations, deformations and chromosomal abnormalities	2	2	282.08	0.08%
				840	1252	340,483.48	100.00%

# Cost of Minor

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 1/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	02.08	Malignant neoplasms of breast	14	180	197,844.38	5.31%
00532	West Volusia Hospital Authority	09.06	Other forms of heart disease	75	216	174,711.73	4.69%
00532	West Volusia Hospital Authority	21.09	Encounters for other specific health care	36	125	150,466.19	4.04%
00532	West Volusia Hospital Authority	18.02	Symptoms and signs involving the digestive system and abdomen	226	568	145,167.06	3.89%
00532	West Volusia Hospital Authority	21.01	Persons encountering health services for examinations	592	946	142,451.49	3.82%
00532	West Volusia Hospital Authority	11.02	Diseases of esophagus, stomach and duodenum	138	469	132,495.24	3.55%
00532	West Volusia Hospital Authority	04.02	Diabetes mellitus	262	677	115,728.81	3.10%
00532	West Volusia Hospital Authority	09.04	Ischemic heart diseases	42	88	114,945.75	3.08%
00532	West Volusia Hospital Authority	05.04	Mood [affective] disorders	149	819	108,708.62	2.92%
00532	West Volusia Hospital Authority	13.09	Spondylopathies	89	283	108,293.92	2.91%
00532	West Volusia Hospital Authority	14.10	Noninflammatory disorders of female genital tract	115	316	107,667.51	2.89%
00532	West Volusia Hospital Authority	13.04	Osteoarthritis	82	185	100,198.58	2.69%
00532	West Volusia Hospital Authority	11.04	Hernia	26	75	95,166.00	2.55%
00532	West Volusia Hospital Authority	22.1	Emergency Use 2019-nCoV acute respiratory disease	24	71	93,082.18	2.50%
00532	West Volusia Hospital Authority	18.01	Symptoms and signs involving the circulatory and respiratory systems	178	404	89,894.48	2.41%
00532	West Volusia Hospital Authority	03.05	Other disorders of blood and blood-forming organs	23	115	84,140.11	2.26%
00532	West Volusia Hospital Authority	13.10	Other dorsopathies	176	597	81,901.10	2.20%
00532	West Volusia Hospital Authority	02.19	Benign neoplasms, except benign neuroendocrine tumors	98	186	80,767.74	2.17%
00532	West Volusia Hospital Authority	13.13	Other soft tissue disorders	126	289	76,083.65	2.04%
00532	West Volusia Hospital Authority	11.06	Other diseases of intestines	90	203	75,647.46	2.03%
00532	West Volusia Hospital Authority	02.11	Malignant neoplasms of urinary tract	6	52	70,985.31	1.90%
00532	West Volusia Hospital Authority	04.09	Metabolic disorders	199	323	59,944.88	1.61%
00532	West Volusia Hospital Authority	09.08	Diseases of arteries, arterioles and capillaries	31	81	51,338.22	1.38%
00532	West Volusia Hospital Authority	13.05	Other joint disorders	139	445	48,561.56	1.30%
00532	West Volusia Hospital Authority	10.04	Other diseases of upper respiratory tract	39	97	42,814.82	1.15%
00532	West Volusia Hospital Authority	07.04	Disorders of lens	45	110	38,848.48	1.04%
00532	West Volusia Hospital Authority	09.03	Hypertensive diseases	184	287	35,077.90	0.94%
00532	West Volusia Hospital Authority	18.08	General symptoms and signs	110	197	34,623.77	0.93%
00532	West Volusia Hospital Authority	14.06	Other diseases of the urinary system	50	101	32,938.67	0.88%
00532	West Volusia Hospital Authority	06.06	Episodic and paroxysmal disorders	68	137	32,430.79	0.87%

Requested by: ReportScheduler from p316 data [P316]

Generated at: 02:53:54 on 01 September 2021



# Cost of Minor

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 1/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	18.12	Abnormal findings on diagnostic imaging and in function studies, without...	101	135	30,813.17	0.83%
00532	West Volusia Hospital Authority	11.05	Noninfective enteritis and colitis	14	59	29,822.55	0.80%
00532	West Volusia Hospital Authority	01.04	Other bacterial diseases	11	64	29,718.07	0.80%
00532	West Volusia Hospital Authority	10.05	Chronic lower respiratory diseases	70	219	28,839.19	0.77%
00532	West Volusia Hospital Authority	21.15	Persons with potential health hazards related to family and personal history...	90	196	26,420.97	0.71%
00532	West Volusia Hospital Authority	14.03	Acute kidney failure and chronic kidney disease	60	182	26,137.70	0.70%
00532	West Volusia Hospital Authority	03.01	Nutritional anemias	41	186	25,734.61	0.69%
00532	West Volusia Hospital Authority	14.08	Disorders of breast	64	84	24,345.96	0.65%
00532	West Volusia Hospital Authority	10.10	Intraoperative and postprocedural complications and disorders of respiratory...	1	1	23,384.51	0.63%
00532	West Volusia Hospital Authority	10.11	Other diseases of the respiratory system	21	64	21,817.24	0.59%
00532	West Volusia Hospital Authority	19.22	Complications of surgical and medical care, not elsewhere classified	9	21	21,496.64	0.58%
00532	West Volusia Hospital Authority	18.03	Symptoms and signs involving the skin and subcutaneous tissue	43	72	21,304.85	0.57%
00532	West Volusia Hospital Authority	09.09	Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified	25	73	20,760.37	0.56%
00532	West Volusia Hospital Authority	02.02	Malignant neoplasms of digestive organs	7	103	18,623.82	0.50%
00532	West Volusia Hospital Authority	05.05	Anxiety, dissociative, stress-related, somatoform and other nonpsychotic...	51	184	18,580.40	0.50%
00532	West Volusia Hospital Authority	14.04	Urolithiasis	17	40	18,422.36	0.49%
00532	West Volusia Hospital Authority	03.03	Aplastic and other anemias and other bone marrow failure syndromes	36	77	17,208.20	0.46%
00532	West Volusia Hospital Authority	14.07	Diseases of male genital organs	21	44	16,933.25	0.45%
00532	West Volusia Hospital Authority	09.05	Pulmonary heart disease and diseases of pulmonary circulation	8	44	15,801.89	0.42%
00532	West Volusia Hospital Authority	18.09	Abnormal findings on examination of blood, without diagnosis	74	111	15,769.87	0.42%
00532	West Volusia Hospital Authority	02.05	Melanoma and other malignant neoplasms of skin	14	51	15,569.43	0.42%
00532	West Volusia Hospital Authority	19.05	Injuries to the shoulder and upper arm	9	42	15,188.96	0.41%
00532	West Volusia Hospital Authority	11.09	Disorders of gallbladder, biliary tract and pancreas	27	63	15,162.53	0.41%
00532	West Volusia Hospital Authority	19.09	Injuries to the knee and lower leg	19	51	14,486.63	0.39%
00532	West Volusia Hospital Authority	04.01	Disorders of thyroid gland	85	125	14,467.45	0.39%
00532	West Volusia Hospital Authority	01.01	Intestinal infectious diseases	8	10	14,008.18	0.38%
00532	West Volusia Hospital Authority	09.07	Cerebrovascular diseases	27	77	13,875.14	0.37%
00532	West Volusia Hospital Authority	12.07	Disorders of skin appendages	16	25	13,705.69	0.37%
00532	West Volusia Hospital Authority	11.08	Diseases of liver	55	89	13,210.61	0.35%
00532	West Volusia Hospital Authority	13.08	Deforming dorsopathies	15	47	13,151.68	0.35%



# Cost of Minor

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 Paid Date: 1/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	06.11	Other disorders of the nervous system	46	107	12,408.44	0.33%
00532	West Volusia Hospital Authority	02.09	Malignant neoplasms of female genital organs	5	65	12,406.50	0.33%
00532	West Volusia Hospital Authority	07.06	Glaucoma	35	58	12,329.94	0.33%
00532	West Volusia Hospital Authority	14.02	Renal tubulo-interstitial diseases	4	23	12,178.99	0.33%
00532	West Volusia Hospital Authority	05.02	Mental and behavioral disorders due to psychoactive substance use	31	56	12,141.62	0.33%
00532	West Volusia Hospital Authority	18.06	Symptoms and signs involving cognition, perception, emotional state and...	29	48	12,018.53	0.32%
00532	West Volusia Hospital Authority	11.03	Diseases of appendix	2	6	11,759.90	0.32%
00532	West Volusia Hospital Authority	02.17	Malignant neoplasms of lymphoid, hematopoietic and related tissue	5	23	11,733.35	0.31%
00532	West Volusia Hospital Authority	15.02	Supervision of high risk pregnancy	15	150	11,725.70	0.31%
00532	West Volusia Hospital Authority	11.10	Other diseases of the digestive system	9	21	11,492.20	0.31%
00532	West Volusia Hospital Authority	21.07	Persons with potential health hazards related to communicable diseases	23	31	11,312.85	0.30%
00532	West Volusia Hospital Authority	05.09	Pervasive and specific developmental disorders	2	3	11,250.81	0.30%
00532	West Volusia Hospital Authority	19.06	Injuries to the elbow and forearm	3	41	11,110.43	0.30%
00532	West Volusia Hospital Authority	13.15	Other osteopathies	9	16	9,831.83	0.26%
00532	West Volusia Hospital Authority	21.08	Persons encountering health services in circumstances related to reproduction	31	119	9,131.07	0.24%
00532	West Volusia Hospital Authority	12.09	Other disorders of the skin and subcutaneous tissue	31	68	8,857.05	0.24%
00532	West Volusia Hospital Authority	11.07	Diseases of peritoneum and retroperitoneum	2	19	8,809.81	0.24%
00532	West Volusia Hospital Authority	08.02	Diseases of middle ear and mastoid	8	16	8,084.01	0.22%
00532	West Volusia Hospital Authority	06.07	Nerve, nerve root and plexus disorders	13	37	7,757.00	0.21%
00532	West Volusia Hospital Authority	02.10	Malignant neoplasms of male genital organs	4	44	7,344.49	0.20%
00532	West Volusia Hospital Authority	02.01	Malignant neoplasms of lip, oral cavity and pharynx	1	32	7,029.66	0.19%
00532	West Volusia Hospital Authority	02.20	Neoplasms of uncertain behavior, polycythemia vera and myelodysplastic...	29	54	6,732.19	0.18%
00532	West Volusia Hospital Authority	12.01	Infections of the skin and subcutaneous tissue	27	42	6,629.77	0.18%
00532	West Volusia Hospital Authority	03.04	Coagulation defects, purpura and other hemorrhagic conditions	12	67	6,485.90	0.17%
00532	West Volusia Hospital Authority	13.03	Inflammatory polyarthropathies	32	62	6,062.69	0.16%
00532	West Volusia Hospital Authority	07.02	Disorders of conjunctiva	8	13	6,014.49	0.16%
00532	West Volusia Hospital Authority	18.11	Abnormal findings on examination of other body fluids, substances and...	21	61	5,807.07	0.16%
00532	West Volusia Hospital Authority	05.03	Schizophrenia, schizotypal, delusional, and other non-mood psychotic disorders	15	57	5,434.38	0.15%
00532	West Volusia Hospital Authority	15.06	Complications of labor and delivery	3	3	5,411.07	0.15%
00532	West Volusia Hospital Authority	13.14	Disorders of bone density and structure	24	55	5,214.80	0.14%

# Cost of Minor

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 Client ID: 00532  
 Paid Date: 1/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	01.14	Human immunodeficiency virus [HIV] disease	14	44	5,125.63	0.14%
00532	West Volusia Hospital Authority	07.01	Disorders of eyelid, lacrimal system and orbit	27	39	5,006.93	0.13%
00532	West Volusia Hospital Authority	18.04	Symptoms and signs involving the nervous and musculoskeletal systems	27	40	4,949.15	0.13%
00532	West Volusia Hospital Authority	02.14	Malignant neoplasms of ill-defined, other secondary and unspecified sites	4	22	4,834.82	0.13%
00532	West Volusia Hospital Authority	12.03	Dermatitis and eczema	25	41	4,675.78	0.13%
00532	West Volusia Hospital Authority	19.01	Injuries to the head	8	15	4,470.74	0.12%
00532	West Volusia Hospital Authority	04.07	Other nutritional deficiencies	43	53	4,394.35	0.12%
00532	West Volusia Hospital Authority	13.12	Disorders of synovium and tendon	18	25	4,193.89	0.11%
00532	West Volusia Hospital Authority	19.03	Injuries to the thorax	2	3	4,143.59	0.11%
00532	West Volusia Hospital Authority	19.04	Injuries to the abdomen, lower back, lumbar spine, pelvis and external genitals	10	34	4,041.04	0.11%
00532	West Volusia Hospital Authority	19.10	Injuries to the ankle and foot	14	26	3,971.63	0.11%
00532	West Volusia Hospital Authority	10.02	Influenza and pneumonia	15	40	3,841.32	0.10%
00532	West Volusia Hospital Authority	07.07	Disorders of vitreous body and globe	11	17	3,675.13	0.10%
00532	West Volusia Hospital Authority	07.03	Disorders of sclera, cornea, iris and ciliary body	8	10	3,589.13	0.10%
00532	West Volusia Hospital Authority	01.13	Viral hepatitis	16	27	3,563.98	0.10%
00532	West Volusia Hospital Authority	18.05	Symptoms and signs involving the genitourinary system	33	51	3,397.98	0.09%
00532	West Volusia Hospital Authority	08.04	Other disorders of ear	17	31	3,358.28	0.09%
00532	West Volusia Hospital Authority	01.16	Mycoses	24	30	3,328.16	0.09%
00532	West Volusia Hospital Authority	13.11	Disorders of muscles	14	34	3,215.73	0.09%
00532	West Volusia Hospital Authority	04.04	Disorders of other endocrine glands	14	19	3,175.70	0.09%
00532	West Volusia Hospital Authority	14.05	Other disorders of kidney and ureter	18	35	2,949.53	0.08%
00532	West Volusia Hospital Authority	02.06	Malignant neoplasms of mesothelial and soft tissue	1	6	2,698.69	0.07%
00532	West Volusia Hospital Authority	17.08	Congenital malformations of the urinary system	2	3	2,426.74	0.07%
00532	West Volusia Hospital Authority	13.01	Infectious arthropathies	2	21	2,108.90	0.06%
00532	West Volusia Hospital Authority	02.18	In situ neoplasms	6	13	2,020.33	0.05%
00532	West Volusia Hospital Authority	05.07	Disorders of adult personality and behavior	4	19	1,978.58	0.05%
00532	West Volusia Hospital Authority	15.04	Other maternal disorders predominantly related to pregnancy	10	38	1,928.86	0.05%
00532	West Volusia Hospital Authority	07.05	Disorders of choroid and retina	7	10	1,709.21	0.05%
00532	West Volusia Hospital Authority	13.07	Systemic connective tissue disorders	11	18	1,644.80	0.04%
00532	West Volusia Hospital Authority	19.07	Injuries to the wrist, hand and fingers	11	18	1,561.68	0.04%

Requested by: ReportScheduler from p316 data [P316]

Generated at: 02:53:54 on 01 September 2021

# Cost of Minor

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 1/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	08.03	Diseases of inner ear	1	12	1,497.54	0.04%
00532	West Volusia Hospital Authority	14.09	Inflammatory diseases of female pelvic organs	10	12	1,462.99	0.04%
00532	West Volusia Hospital Authority	18.07	Symptoms and signs involving speech and voice	5	12	1,439.17	0.04%
00532	West Volusia Hospital Authority	19.08	Injuries to the hip and thigh	6	9	1,413.37	0.04%
00532	West Volusia Hospital Authority	12.05	Urticaria and erythema	7	9	1,305.61	0.04%
00532	West Volusia Hospital Authority	10.01	Acute upper respiratory infections	7	10	1,278.07	0.03%
00532	West Volusia Hospital Authority	12.06	Radiation-related disorders of the skin and subcutaneous tissue	8	9	1,181.17	0.03%
00532	West Volusia Hospital Authority	06.03	Extrapyramidal and movement disorders	7	10	1,161.38	0.03%
00532	West Volusia Hospital Authority	19.20	Other and unspecified effects of external causes	4	5	1,117.29	0.03%
00532	West Volusia Hospital Authority	01.05	Infections with a predominantly sexual mode of transmission	4	6	1,105.51	0.03%
00532	West Volusia Hospital Authority	11.01	Diseases of oral cavity and salivary glands	7	8	1,102.26	0.03%
00532	West Volusia Hospital Authority	18.10	Abnormal findings on examination of urine, without diagnosis	12	16	1,047.99	0.03%
00532	West Volusia Hospital Authority	01.11	Viral infections characterized by skin and mucous membrane lesions	8	8	1,026.72	0.03%
00532	West Volusia Hospital Authority	09.02	Chronic rheumatic heart diseases	9	10	1,025.65	0.03%
00532	West Volusia Hospital Authority	05.06	Behavioral syndromes associated with physiological disturbances and...	7	9	1,014.19	0.03%
00532	West Volusia Hospital Authority	17.03	Congenital malformations of the circulatory system	4	12	982.84	0.03%
00532	West Volusia Hospital Authority	07.10	Visual disturbances and blindness	6	9	908.00	0.02%
00532	West Volusia Hospital Authority	15.05	Maternal care related to the fetus and amniotic cavity and possible delivery...	6	10	888.87	0.02%
00532	West Volusia Hospital Authority	06.04	Other degenerative diseases of the nervous system	7	8	859.91	0.02%
00532	West Volusia Hospital Authority	10.07	Other respiratory diseases principally affecting the interstitium	6	9	750.93	0.02%
00532	West Volusia Hospital Authority	15.09	Other obstetric conditions, not elsewhere classified	7	14	711.39	0.02%
00532	West Volusia Hospital Authority	09.10	Other and unspecified disorders of the circulatory system	5	7	613.59	0.02%
00532	West Volusia Hospital Authority	19.18	Poisoning by, adverse effects of and underdosing of drugs, medicaments and...	4	7	608.82	0.02%
00532	West Volusia Hospital Authority	02.13	Malignant neoplasms of thyroid and other endocrine glands	3	6	588.35	0.02%
00532	West Volusia Hospital Authority	18.13	Abnormal tumor markers	8	10	551.53	0.01%
00532	West Volusia Hospital Authority	13.16	Chondropathies	1	4	528.34	0.01%
00532	West Volusia Hospital Authority	01.21	Bacterial and viral infectious agents	5	6	527.20	0.01%
00532	West Volusia Hospital Authority	07.08	Disorders of optic nerve and visual pathways	3	4	500.39	0.01%
00532	West Volusia Hospital Authority	17.10	Other congenital malformations	2	3	432.95	0.01%
00532	West Volusia Hospital Authority	13.18	Intraoperative and postprocedural complications and disorders of...	2	5	383.11	0.01%

# Cost of Minor

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Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	17.09	Congenital malformations and deformations of the musculoskeletal system	2	3	377.46	0.01%
00532	West Volusia Hospital Authority	01.15	Other viral diseases	2	2	358.22	0.01%
00532	West Volusia Hospital Authority	04.06	Malnutrition	1	1	351.39	0.01%
00532	West Volusia Hospital Authority	05.10	Behavioral and emotional disorders with onset usually occurring in childhood...	2	3	350.46	0.01%
00532	West Volusia Hospital Authority	12.04	Papulosquamous disorders	3	4	332.93	0.01%
00532	West Volusia Hospital Authority	15.01	Pregnancy with abortive outcome	1	12	315.99	0.01%
00532	West Volusia Hospital Authority	01.22	Other infectious diseases	1	1	268.38	0.01%
00532	West Volusia Hospital Authority	10.06	Lung diseases due to external agents	1	2	240.94	0.01%
00532	West Volusia Hospital Authority	08.01	Diseases of external ear	2	2	230.69	0.01%
00532	West Volusia Hospital Authority	06.08	Polyneuropathies and other disorders of the peripheral nervous system	2	2	211.33	0.01%
00532	West Volusia Hospital Authority	04.08	Overweight, obesity and other hyperalimentation	1	3	206.63	0.01%
00532	West Volusia Hospital Authority	04.10	Postprocedural endocrine and metabolic complications and disorders, not...	1	2	199.28	0.01%
00532	West Volusia Hospital Authority	06.10	Cerebral palsy and other paralytic syndromes	1	2	194.37	0.01%
00532	West Volusia Hospital Authority	21.02	Genetic carrier and genetic susceptibility to disease	1	1	180.84	0.00%
00532	West Volusia Hospital Authority	05.01	Mental disorders due to known physiological conditions	1	2	175.60	0.00%
00532	West Volusia Hospital Authority	06.09	Diseases of myoneural junction and muscle	1	2	165.60	0.00%
00532	West Volusia Hospital Authority	10.09	Other diseases of the pleura	7	10	157.26	0.00%
00532	West Volusia Hospital Authority	07.09	Disorders of ocular muscles, binocular movement, accommodation and...	1	1	157.15	0.00%
00532	West Volusia Hospital Authority	13.06	Dentofacial anomalies [including malocclusion] and other disorders of jaw	1	1	154.30	0.00%
00532	West Volusia Hospital Authority	19.12	Injury of unspecified body region	1	1	152.13	0.00%
00532	West Volusia Hospital Authority	13.21	Chronic Gout	2	2	95.00	0.00%
00532	West Volusia Hospital Authority	07.11	Other disorders of eye and adnexa	1	1	88.26	0.00%
00532	West Volusia Hospital Authority	14.01	Glomerular diseases	1	1	82.80	0.00%
00532	West Volusia Hospital Authority	02.22	Neoplasms of unspecified behavior	1	2	75.54	0.00%
00532	West Volusia Hospital Authority	19.19	Toxic effects of substances chiefly nonmedicinal as to source	1	1	61.06	0.00%
00532	West Volusia Hospital Authority	01.19	Pediculosis, acariasis and other infestations	1	2	60.71	0.00%
00532	West Volusia Hospital Authority	21.06	Hormone sensitivity malignancy status	1	1	39.47	0.00%
00532	West Volusia Hospital Authority	19.13	Effects of foreign body entering through natural orifice	2	2	-67.61	0.00%
				5580	13688	3,727,406.45	100.00%

# Cost of Minor

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 8/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	02.08	Malignant neoplasms of breast	6	10	23,764.34	6.98%
00532	West Volusia Hospital Authority	22.1	Emergency Use 2019-nCoVacute respiratory disease	13	24	17,485.66	5.14%
00532	West Volusia Hospital Authority	09.08	Diseases of arteries, arterioles and capillaries	10	13	16,736.65	4.92%
00532	West Volusia Hospital Authority	04.09	Metabolic disorders	15	21	16,176.15	4.75%
00532	West Volusia Hospital Authority	03.05	Other disorders of blood and blood-forming organs	5	12	11,939.20	3.51%
00532	West Volusia Hospital Authority	18.01	Symptoms and signs involving the circulatory and respiratory systems	39	62	11,902.03	3.50%
00532	West Volusia Hospital Authority	05.04	Mood [affective] disorders	49	64	11,094.60	3.26%
00532	West Volusia Hospital Authority	02.11	Malignant neoplasms of urinary tract	3	3	10,556.01	3.10%
00532	West Volusia Hospital Authority	21.01	Persons encountering health services for examinations	62	69	10,272.44	3.02%
00532	West Volusia Hospital Authority	13.09	Spondylopathies	25	37	10,237.00	3.01%
00532	West Volusia Hospital Authority	21.09	Encounters for other specific health care	6	8	9,729.06	2.86%
00532	West Volusia Hospital Authority	10.11	Other diseases of the respiratory system	4	6	9,649.47	2.83%
00532	West Volusia Hospital Authority	14.02	Renal tubulo-interstitial diseases	2	8	9,633.41	2.83%
00532	West Volusia Hospital Authority	18.02	Symptoms and signs involving the digestive system and abdomen	31	46	9,116.60	2.68%
00532	West Volusia Hospital Authority	01.04	Other bacterial diseases	2	2	8,814.96	2.59%
00532	West Volusia Hospital Authority	01.01	Intestinal infectious diseases	1	1	8,661.69	2.54%
00532	West Volusia Hospital Authority	02.19	Benign neoplasms, except benign neuroendocrine tumors	8	16	8,492.81	2.49%
00532	West Volusia Hospital Authority	13.10	Other dorsopathies	43	61	8,225.96	2.42%
00532	West Volusia Hospital Authority	11.02	Diseases of esophagus, stomach and duodenum	25	36	8,095.83	2.38%
00532	West Volusia Hospital Authority	09.06	Other forms of heart disease	13	26	7,832.51	2.30%
00532	West Volusia Hospital Authority	11.06	Other diseases of intestines	16	25	7,319.51	2.15%
00532	West Volusia Hospital Authority	14.08	Disorders of breast	4	4	7,089.10	2.08%
00532	West Volusia Hospital Authority	04.02	Diabetes mellitus	43	49	7,075.34	2.08%
00532	West Volusia Hospital Authority	11.10	Other diseases of the digestive system	1	1	4,956.33	1.46%
00532	West Volusia Hospital Authority	18.08	General symptoms and signs	28	39	3,859.78	1.13%
00532	West Volusia Hospital Authority	10.05	Chronic lower respiratory diseases	16	25	3,655.42	1.07%
00532	West Volusia Hospital Authority	03.01	Nutritional anemias	17	26	3,241.65	0.95%
00532	West Volusia Hospital Authority	13.05	Other joint disorders	28	34	2,916.85	0.86%
00532	West Volusia Hospital Authority	11.05	Noninfective enteritis and colitis	4	4	2,773.85	0.81%
00532	West Volusia Hospital Authority	09.03	Hypertensive diseases	16	21	2,683.44	0.79%

# Cost of Minor

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 8/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	06.06	Episodic and paroxysmal disorders	6	9	2,664.53	0.78%
00532	West Volusia Hospital Authority	02.05	Melanoma and other malignant neoplasms of skin	5	12	2,426.75	0.71%
00532	West Volusia Hospital Authority	13.13	Other soft tissue disorders	16	26	2,296.28	0.67%
00532	West Volusia Hospital Authority	09.09	Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified	8	9	2,155.31	0.63%
00532	West Volusia Hospital Authority	07.04	Disorders of lens	11	11	2,118.00	0.62%
00532	West Volusia Hospital Authority	11.09	Disorders of gallbladder, biliary tract and pancreas	10	12	2,105.78	0.62%
00532	West Volusia Hospital Authority	15.02	Supervision of high risk pregnancy	8	16	2,087.16	0.61%
00532	West Volusia Hospital Authority	13.04	Osteoarthritis	10	17	2,031.67	0.60%
00532	West Volusia Hospital Authority	05.02	Mental and behavioral disorders due to psychoactive substance use	8	13	1,987.28	0.58%
00532	West Volusia Hospital Authority	08.02	Diseases of middle ear and mastoid	2	4	1,786.51	0.52%
00532	West Volusia Hospital Authority	10.04	Other diseases of upper respiratory tract	6	8	1,752.43	0.51%
00532	West Volusia Hospital Authority	14.06	Other diseases of the urinary system	5	7	1,696.11	0.50%
00532	West Volusia Hospital Authority	13.08	Deforming dorsopathies	4	7	1,608.69	0.47%
00532	West Volusia Hospital Authority	02.10	Malignant neoplasms of male genital organs	2	8	1,495.34	0.44%
00532	West Volusia Hospital Authority	11.08	Diseases of liver	7	8	1,459.23	0.43%
00532	West Volusia Hospital Authority	05.05	Anxiety, dissociative, stress-related, somatoform and other nonpsychotic...	12	16	1,456.74	0.43%
00532	West Volusia Hospital Authority	21.08	Persons encountering health services in circumstances related to reproduction	9	18	1,456.00	0.43%
00532	West Volusia Hospital Authority	09.04	Ischemic heart diseases	5	5	1,302.07	0.38%
00532	West Volusia Hospital Authority	06.11	Other disorders of the nervous system	7	10	1,155.88	0.34%
00532	West Volusia Hospital Authority	02.14	Malignant neoplasms of ill-defined, other secondary and unspecified sites	1	5	1,112.97	0.33%
00532	West Volusia Hospital Authority	18.12	Abnormal findings on diagnostic imaging and in function studies, without...	12	12	1,104.70	0.32%
00532	West Volusia Hospital Authority	03.03	Aplastic and other anemias and other bone marrow failure syndromes	8	9	1,099.61	0.32%
00532	West Volusia Hospital Authority	07.06	Glaucoma	5	5	1,078.66	0.32%
00532	West Volusia Hospital Authority	18.04	Symptoms and signs involving the nervous and musculoskeletal systems	9	13	1,043.13	0.31%
00532	West Volusia Hospital Authority	14.10	Noninflammatory disorders of female genital tract	9	10	1,026.08	0.30%
00532	West Volusia Hospital Authority	14.03	Acute kidney failure and chronic kidney disease	7	11	995.34	0.29%
00532	West Volusia Hospital Authority	03.04	Coagulation defects, purpura and other hemorrhagic conditions	4	9	941.83	0.28%
00532	West Volusia Hospital Authority	11.04	Hernia	4	4	898.69	0.26%
00532	West Volusia Hospital Authority	06.07	Nerve, nerve root and plexus disorders	3	6	848.25	0.25%
00532	West Volusia Hospital Authority	01.14	Human immunodeficiency virus [HIV] disease	5	6	830.02	0.24%



# Cost of Minor

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 8/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	09.07	Cerebrovascular diseases	5	6	786.49	0.23%
00532	West Volusia Hospital Authority	04.07	Other nutritional deficiencies	6	7	786.12	0.23%
00532	West Volusia Hospital Authority	12.01	Infections of the skin and subcutaneous tissue	6	8	734.14	0.22%
00532	West Volusia Hospital Authority	18.05	Symptoms and signs involving the genitourinary system	5	7	721.03	0.21%
00532	West Volusia Hospital Authority	04.01	Disorders of thyroid gland	7	9	705.36	0.21%
00532	West Volusia Hospital Authority	02.18	In situ neoplasms	1	1	681.27	0.20%
00532	West Volusia Hospital Authority	21.15	Persons with potential health hazards related to family and personal history...	7	8	675.03	0.20%
00532	West Volusia Hospital Authority	13.11	Disorders of muscles	4	5	613.19	0.18%
00532	West Volusia Hospital Authority	21.07	Persons with potential health hazards related to communicable diseases	5	6	586.74	0.17%
00532	West Volusia Hospital Authority	18.09	Abnormal findings on examination of blood, without diagnosis	6	6	577.53	0.17%
00532	West Volusia Hospital Authority	02.09	Malignant neoplasms of female genital organs	1	4	567.00	0.17%
00532	West Volusia Hospital Authority	12.09	Other disorders of the skin and subcutaneous tissue	4	8	563.48	0.17%
00532	West Volusia Hospital Authority	12.05	Urticaria and erythema	2	3	547.11	0.16%
00532	West Volusia Hospital Authority	18.06	Symptoms and signs involving cognition, perception, emotional state and...	4	5	527.54	0.15%
00532	West Volusia Hospital Authority	13.03	Inflammatory polyarthropathies	6	7	508.00	0.15%
00532	West Volusia Hospital Authority	10.01	Acute upper respiratory infections	2	2	506.93	0.15%
00532	West Volusia Hospital Authority	07.02	Disorders of conjunctiva	2	3	493.09	0.14%
00532	West Volusia Hospital Authority	14.07	Diseases of male genital organs	2	3	474.14	0.14%
00532	West Volusia Hospital Authority	12.07	Disorders of skin appendages	3	3	447.02	0.13%
00532	West Volusia Hospital Authority	18.03	Symptoms and signs involving the skin and subcutaneous tissue	5	6	406.27	0.12%
00532	West Volusia Hospital Authority	19.09	Injuries to the knee and lower leg	3	4	396.10	0.12%
00532	West Volusia Hospital Authority	13.07	Systemic connective tissue disorders	1	2	393.05	0.12%
00532	West Volusia Hospital Authority	11.01	Diseases of oral cavity and salivary glands	2	2	392.78	0.12%
00532	West Volusia Hospital Authority	19.06	Injuries to the elbow and forearm	1	3	390.54	0.11%
00532	West Volusia Hospital Authority	13.01	Infectious arthropathies	1	2	380.01	0.11%
00532	West Volusia Hospital Authority	10.02	Influenza and pneumonia	3	3	378.28	0.11%
00532	West Volusia Hospital Authority	02.01	Malignant neoplasms of lip, oral cavity and pharynx	1	1	349.94	0.10%
00532	West Volusia Hospital Authority	18.11	Abnormal findings on examination of other body fluids, substances and...	3	3	333.50	0.10%
00532	West Volusia Hospital Authority	05.03	Schizophrenia, schizotypal, delusional, and other non-mood psychotic disorders	3	4	326.50	0.10%
00532	West Volusia Hospital Authority	13.12	Disorders of synovium and tendon	2	2	312.40	0.09%

Requested by: ReportScheduler from p316 data [P316]

Generated at: 02:52:55 on 01 September 2021

# Cost of Minor

Block of Business ID: EBMSI  
 Client ID: 00532  
 Paid Date: 8/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	02.20	Neoplasms of uncertain behavior, polycythemia vera and myelodysplastic...	2	2	286.47	0.08%
00532	West Volusia Hospital Authority	01.16	Mycoses	2	2	263.96	0.08%
00532	West Volusia Hospital Authority	19.18	Poisoning by, adverse effects of and underdosing of drugs, medicaments and...	1	2	262.90	0.08%
00532	West Volusia Hospital Authority	07.01	Disorders of eyelid, lacrimal system and orbit	2	2	248.56	0.07%
00532	West Volusia Hospital Authority	12.03	Dermatitis and eczema	2	2	223.29	0.07%
00532	West Volusia Hospital Authority	18.10	Abnormal findings on examination of urine, without diagnosis	3	3	205.06	0.06%
00532	West Volusia Hospital Authority	17.10	Other congenital malformations	1	1	199.28	0.06%
00532	West Volusia Hospital Authority	19.05	Injuries to the shoulder and upper arm	1	1	181.38	0.05%
00532	West Volusia Hospital Authority	21.02	Genetic carrier and genetic susceptibility to disease	1	1	180.84	0.05%
00532	West Volusia Hospital Authority	05.07	Disorders of adult personality and behavior	2	2	175.60	0.05%
00532	West Volusia Hospital Authority	14.04	Urolithiasis	1	1	168.88	0.05%
00532	West Volusia Hospital Authority	01.15	Other viral diseases	1	1	157.77	0.05%
00532	West Volusia Hospital Authority	01.05	Infections with a predominantly sexual mode of transmission	2	2	155.22	0.05%
00532	West Volusia Hospital Authority	13.06	Dentofacial anomalies [including malocclusion] and other disorders of jaw	1	1	154.30	0.09%
00532	West Volusia Hospital Authority	01.13	Viral hepatitis	2	2	147.18	0.04%
00532	West Volusia Hospital Authority	07.07	Disorders of vitreous body and globe	1	1	146.70	0.04%
00532	West Volusia Hospital Authority	13.14	Disorders of bone density and structure	4	4	140.58	0.04%
00532	West Volusia Hospital Authority	14.09	Inflammatory diseases of female pelvic organs	1	1	134.07	0.04%
00532	West Volusia Hospital Authority	09.05	Pulmonary heart disease and diseases of pulmonary circulation	2	2	119.18	0.04%
00532	West Volusia Hospital Authority	19.20	Other and unspecified effects of external causes	1	1	106.12	0.03%
00532	West Volusia Hospital Authority	19.07	Injuries to the wrist, hand and fingers	2	2	101.20	0.03%
00532	West Volusia Hospital Authority	14.05	Other disorders of kidney and ureter	2	3	93.83	0.03%
00532	West Volusia Hospital Authority	07.11	Other disorders of eye and adnexa	1	1	88.26	0.03%
00532	West Volusia Hospital Authority	01.21	Bacterial and viral infectious agents	1	1	83.57	0.02%
00532	West Volusia Hospital Authority	06.09	Diseases of myoneural junction and muscle	1	1	82.80	0.07%
00532	West Volusia Hospital Authority	02.13	Malignant neoplasms of thyroid and other endocrine glands	1	1	78.90	0.02%
00532	West Volusia Hospital Authority	15.04	Other maternal disorders predominantly related to pregnancy	1	1	72.00	0.02%
00532	West Volusia Hospital Authority	19.04	Injuries to the abdomen, lower back, lumbar spine, pelvis and external genitals	1	1	67.50	0.02%
00532	West Volusia Hospital Authority	08.04	Other disorders of ear	1	2	64.91	0.02%
00532	West Volusia Hospital Authority	19.19	Toxic effects of substances chiefly nonmedicinal as to source	1	1	61.06	0.02%

Requested by: ReportScheduler from p316 data [P316]

Generated at: 02:52:55 on 01 September 2021





## Cost of Minor

Block of Business ID: EBMSI  
Client ID: 00532  
Paid Date: 8/1/2021 to 8/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	CategoryId	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	04.08	Overweight, obesity and other hyperalimentation	1	1	55.44	0.02%
00532	West Volusia Hospital Authority	18.13	Abnormal tumor markers	1	1	51.67	0.02%
00532	West Volusia Hospital Authority	13.15	Other osteopathies	1	1	48.17	0.01%
00532	West Volusia Hospital Authority	07.05	Disorders of choroid and retina	1	1	45.86	0.01%
00532	West Volusia Hospital Authority	18.07	Symptoms and signs involving speech and voice	1	1	43.78	0.01%
00532	West Volusia Hospital Authority	02.02	Malignant neoplasms of digestive organs	1	1	11.74	0.00%
00532	West Volusia Hospital Authority	04.04	Disorders of other endocrine glands	1	1	10.11	0.00%
00532	West Volusia Hospital Authority	10.07	Other respiratory diseases principally affecting the interstitium	1	1	9.39	0.00%
00532	West Volusia Hospital Authority	19.13	Effects of foreign body entering through natural orifice	1	1	-133.22	-0.04%
				903	1252	340,483.48	100.00%



## Summary of Claims Paid By Location

Block of Business ID: EBMSI  
Client ID: 00532

Paid Date: 8/1/2021 to 8/31/2021

Description	Claims	Medical	Dental	Vision	Prescription	Disability	Total Paid
<b>00532-West Volusia Hospital Authority</b>							
DeLand	41	1,123.70	0.00	0.00	0.00	0.00	1,123.70
Deltona	34	538.98	0.00	0.00	0.00	0.00	538.98
miCareDeLand	1203	166,580.45	0.00	0.00	0.00	0.00	166,580.45
miCareDelton	1328	149,585.23	0.00	0.00	0.00	0.00	149,585.23
miCarePierse	119	22,350.86	0.00	0.00	0.00	0.00	22,350.86
Pierson	7	304.26	0.00	0.00	0.00	0.00	304.26
<b>00532 Totals:</b>	<b>2732</b>	<b>340,483.48</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>340,483.48</b>



## Summary of Claims Paid By Location

Block of Business ID: EBMSI  
Client ID: 00532

Paid Date: 1/1/2021 to 8/31/2021

Description	Claims	Medical	Dental	Vision	Prescription	Disability	Total Paid
<b>00532-West Volusia Hospital Authority</b>							
DeLand	383	13,936.87	0.00	0.00	0.00	0.00	13,936.87
Deltona	467	95,904.56	0.00	0.00	0.00	0.00	95,904.56
miCareDeLand	12900	1,629,064.01	0.00	0.00	0.00	0.00	1,629,064.01
miCareDelton	13322	1,789,524.35	0.00	0.00	0.00	0.00	1,789,524.35
miCarePierse	1309	186,299.51	0.00	0.00	0.00	0.00	186,299.51
Pierson	68	12,677.15	0.00	0.00	0.00	0.00	12,677.15
00532 Totals:	28449	3,727,406.45	0.00	0.00	0.00	0.00	3,727,406.45



## Top Providers by Paid Amount for Tins: '550799729'

Block of Business ID: EBMSI  
Client ID: 00532

Paid Date: 8/1/2021 to 8/31/2021

Tin	NPI	Provider	City	State	Specialty	Claim Count	Billed Charges	Over UCR	PPO Discount	Allowed	Plan Paid	Patient Resp
55-0799729	1750546313	NEFHS Deltona 2160	Deltona	FL	Hospital	23	129.10	0.00	501.27	-372.17	1,290.87	45.00
55-0799729	1407026016	NEFHS Deland	Deland	FL	Hospital	16	-429.78	0.00	-66.09	-146.89	508.09	10.00
55-0799729	1992792311	Nefhs Pierson	Pierson	FL	Clinic	10	-56.84	0.00	4.14	-183.48	348.36	15.00
55-0799729	1467907626	Family Health Source	Deland	FL	Family Practice	2	0.00	0.00	0.00	0.00	117.50	5.00
55-0799729	1992792311	NDFHS Administration	Deland	FL	Hospital	2	0.00	0.00	-4.12	107.52	107.52	0.00
55-0799729	1467907626	NEFHS Deland 1205	Deland	FL	Hospital	2	0.00	0.00	5.94	-5.94	19.06	0.00
55-0799729	1750546313	NEFHS Deltona 2160 Howland...	Deltona	FL	Hospital	2	245.00	0.00	0.00	245.00	0.00	0.00
55-0799729	1407026016	DO Not Use NEFHS Deland Do...	Deland	FL	Hospital	2	245.00	0.00	0.00	245.00	0.00	0.00



## Top Providers by Paid Amount for Tins: '550799729'

Block of Business ID: EBMSI  
Client ID: 00532

Paid Date: 1/1/2021 to 8/31/2021

Tin	NPI	Provider	City	State	Specialty	Claim Count	Billed Charges	Over UCR	PPO Discount	Allowed	Plan Paid	Patient Resp
55-0799729	1750546313	NEFHS Deltona 2160	Deltona	FL	Hospital	37	344.00	0.00	633.23	-289.23	1,870.09	70.00
55-0799729	1407026016	NEFHS Deland	Deland	FL	Hospital	21	217.82	0.00	-66.09	500.71	508.09	10.00
55-0799729	1992792311	Nefhs Pierson	Pierson	FL	Clinic	12	198.16	0.00	4.14	71.52	348.36	15.00
55-0799729	1467907626	Family Health Source	Deland	FL	Family Practice	2	0.00	0.00	0.00	0.00	117.50	5.00
55-0799729	1992792311	NDFHS Administration	Deland	FL	Hospital	2	0.00	0.00	-4.12	107.52	107.52	0.00
55-0799729	1467907626	NEFHS Deland 1205	Deland	FL	Hospital	26	3,009.32	0.00	5.94	3,003.38	19.06	0.00
55-0799729	1407026016	NEFHS Deland DO Not Use	Deland	FL	Hospital	3	436.10	0.00	0.00	436.10	0.00	0.00
55-0799729	1407026016	DO Not Use NEFHS Deland Do...	Deland	FL	Hospital	2	245.00	0.00	0.00	245.00	0.00	0.00
55-0799729	1750546313	NEFHS Deltona 2160 Howland...	Deltona	FL	Hospital	2	245.00	0.00	0.00	245.00	0.00	0.00
55-0799729	1396282208	NEFHS Daytona	South Daytona	FL	Hospital	1	82.00	0.00	0.00	82.00	0.00	0.00



## Top Providers by Paid Amount for Tins: '204552956'

Block of Business ID: EBMSI  
Client ID: 00532

Paid Date: 1/1/2021 to 8/31/2021

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	6560	0.00	0.00	0.00	0.00	0.00	0.00



## Top Providers by Paid Amount for Tins: '204552956'

Block of Business ID: EBMSI  
Client ID: 00532

Paid Date: 8/1/2021 to 8/31/2021

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	701	0.00	0.00	0.00	0.00	0.00	0.00

# CLAIMS PAID BY MONTH

Paid Date: 1/1/20 to 8/31/21

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
<b>10532 - West Volusia Hospital Authority</b>																
niCareDeLand	01-2021	\$0.00	\$3,019.53	\$0.00	\$49,132.91	\$0.00	429	\$52,152.44	\$0.00	1171	\$44.54	\$0.00	\$2.58	\$0.00	\$41.96	\$0.00
niCareDeLand	02-2021	\$0.00	\$11,639.77	\$0.00	\$83,073.60	\$0.00	692	\$94,713.37	\$0.00	1182	\$80.13	\$0.00	\$9.85	\$0.00	\$70.28	\$0.00
niCareDeLand	03-2021	\$399.64	\$19,342.96	\$0.00	\$62,106.24	\$0.00	804	\$81,848.84	\$0.00	1200	\$68.21	\$0.33	\$16.12	\$0.00	\$51.76	\$0.00
niCareDeLand	04-2021	\$11,384.91	\$18,064.94	\$0.00	\$155,406.21	\$2,382.30	1124	\$187,238.36	\$0.00	1208	\$155.00	\$9.42	\$14.95	\$0.00	\$128.65	\$1.97
niCareDeLand	05-2021	\$12,871.90	\$9,068.04	\$0.00	\$63,751.88	\$433.53	742	\$86,125.35	\$0.00	1135	\$75.88	\$11.34	\$7.99	\$0.00	\$56.17	\$0.38
niCareDeLand	06-2021	\$13,900.10	\$15,700.50	\$0.00	\$75,243.14	\$83.26	826	\$104,927.00	\$0.00	1067	\$98.34	\$13.03	\$14.71	\$0.00	\$70.52	\$0.08
niCareDeLand	07-2021	\$42,632.07	\$11,668.44	\$0.00	\$106,124.65	\$393.03	1057	\$160,818.19	\$0.00	981	\$163.93	\$43.46	\$11.89	\$0.00	\$108.18	\$0.40
niCareDeLand	08-2021	\$36,743.00	\$5,084.79	\$0.00	\$61,766.80	\$379.92	544	\$103,974.51	\$0.00	880	\$118.15	\$41.75	\$5.78	\$0.00	\$70.19	\$0.43
	<b>Subtotal:</b>	<b>\$117,931.62</b>	<b>\$93,588.97</b>	<b>\$0.00</b>	<b>\$656,605.43</b>	<b>\$3,672.04</b>	<b>6218</b>	<b>\$871,798.06</b>	<b>\$0.00</b>	<b>8824</b>	<b>\$98.80</b>	<b>\$13.36</b>	<b>\$10.61</b>	<b>\$0.00</b>	<b>\$74.41</b>	<b>\$0.42</b>
niCareDelton	01-2021	\$0.00	\$5,002.12	\$0.00	\$50,507.76	\$0.00	475	\$55,509.88	\$0.00	931	\$59.62	\$0.00	\$5.37	\$0.00	\$54.25	\$0.00
niCareDelton	02-2021	\$0.00	\$12,705.80	\$0.00	\$79,621.20	\$0.00	787	\$92,327.00	\$0.00	926	\$99.71	\$0.00	\$13.72	\$0.00	\$85.98	\$0.00
niCareDelton	03-2021	\$0.00	\$22,739.61	\$0.00	\$91,183.73	\$0.00	1054	\$113,923.34	\$0.00	920	\$123.83	\$0.00	\$24.72	\$0.00	\$99.11	\$0.00
niCareDelton	04-2021	\$44,699.87	\$19,260.88	\$0.00	\$177,755.94	\$669.76	1288	\$242,386.45	\$0.00	911	\$266.07	\$49.07	\$21.14	\$0.00	\$195.12	\$0.74
niCareDelton	05-2021	\$7,459.40	\$8,118.85	\$0.00	\$81,102.95	\$406.72	734	\$97,087.92	\$0.00	837	\$116.00	\$8.91	\$9.70	\$0.00	\$96.90	\$0.49
niCareDelton	06-2021	\$23,994.39	\$14,062.15	\$0.00	\$97,861.77	\$205.07	854	\$136,123.38	\$0.00	823	\$165.40	\$29.15	\$17.09	\$0.00	\$118.91	\$0.25
niCareDelton	07-2021	\$55,581.99	\$16,756.38	\$0.00	\$156,907.89	\$361.81	1109	\$229,608.07	\$0.00	763	\$300.93	\$72.85	\$21.96	\$0.00	\$205.65	\$0.47
niCareDelton	08-2021	\$9,981.21	\$10,189.12	\$0.00	\$62,888.02	\$319.95	682	\$83,378.30	\$0.00	700	\$119.11	\$14.26	\$14.56	\$0.00	\$89.84	\$0.46
	<b>Subtotal:</b>	<b>\$141,716.86</b>	<b>\$108,834.91</b>	<b>\$0.00</b>	<b>\$797,829.26</b>	<b>\$1,963.31</b>	<b>6983</b>	<b>\$1,050,344.34</b>	<b>\$0.00</b>	<b>6811</b>	<b>\$154.21</b>	<b>\$20.81</b>	<b>\$15.98</b>	<b>\$0.00</b>	<b>\$117.14</b>	<b>\$0.29</b>
niCarePierso	01-2021	\$0.00	\$388.73	\$0.00	\$2,732.55	\$0.00	48	\$3,121.28	\$0.00	129	\$24.20	\$0.00	\$3.01	\$0.00	\$21.18	\$0.00
niCarePierso	02-2021	\$0.00	\$634.66	\$0.00	\$3,668.53	\$0.00	57	\$4,303.19	\$0.00	128	\$33.62	\$0.00	\$4.96	\$0.00	\$28.66	\$0.00
niCarePierso	03-2021	\$0.00	\$1,998.05	\$0.00	\$4,171.58	\$0.00	106	\$6,169.63	\$0.00	130	\$47.46	\$0.00	\$15.37	\$0.00	\$32.09	\$0.00
niCarePierso	04-2021	\$220.22	\$2,982.07	\$0.00	\$11,722.15	\$0.00	160	\$14,924.44	\$0.00	130	\$114.80	\$1.69	\$22.94	\$0.00	\$90.17	\$0.00
niCarePierso	05-2021	\$8,298.47	\$354.99	\$0.00	\$6,850.16	\$0.00	65	\$15,503.62	\$0.00	123	\$126.05	\$67.47	\$2.89	\$0.00	\$55.69	\$0.00
niCarePierso	06-2021	\$108.37	\$1,959.75	\$0.00	\$5,208.06	\$350.60	78	\$7,626.78	\$0.00	118	\$64.63	\$0.92	\$16.61	\$0.00	\$44.14	\$2.97
niCarePierso	07-2021	\$1,536.27	\$1,087.01	\$0.00	\$9,630.37	\$0.00	74	\$12,253.65	\$0.00	110	\$111.40	\$13.97	\$9.88	\$0.00	\$87.55	\$0.00
niCarePierso	08-2021	\$10,482.40	\$78.08	\$0.00	\$9,577.83	\$0.00	51	\$20,138.31	\$0.00	98	\$205.49	\$106.96	\$0.80	\$0.00	\$97.73	\$0.00
	<b>Subtotal:</b>	<b>\$20,645.73</b>	<b>\$9,483.34</b>	<b>\$0.00</b>	<b>\$53,561.23</b>	<b>\$350.60</b>	<b>639</b>	<b>\$84,040.90</b>	<b>\$0.00</b>	<b>966</b>	<b>\$87.00</b>	<b>\$21.37</b>	<b>\$9.82</b>	<b>\$0.00</b>	<b>\$55.45</b>	<b>\$0.36</b>
V/A	01-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$268,812.50	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
V/A	03-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$272,312.50	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
V/A	04-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$172,375.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
V/A	05-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$119,875.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
V/A	06-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$111,375.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
V/A	07-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$102,000.00	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>0</b>	<b>\$0.00</b>	<b>\$1,046,750.00</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>
	<b>Total:</b>	<b>\$280,294.21</b>	<b>\$211,907.22</b>	<b>\$0.00</b>	<b>\$1,507,995.92</b>	<b>\$5,985.95</b>	<b>13840</b>	<b>\$2,006,183.30</b>	<b>\$1,046,750.00</b>	<b>16601</b>	<b>\$120.85</b>	<b>\$16.88</b>	<b>\$12.76</b>	<b>\$0.00</b>	<b>\$90.84</b>	<b>\$0.36</b>

## Parameters

Beginning Location:

Ending Location:

Paid Date: 1/1/2021-8/31/2021

Reporting Period: CLIENTYTD

Location: 000-zzzzz

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





# WVHA miCare Clinic Deland and Deltona

## August 2021 Report

### miCare Utilization and Capacity

#### miCare Utilization and Capacity

Deland August	Capacity Available for Scheduled Appointments	Total Capacity Used for Scheduled Appointments	% of Total Capacity Scheduled for Appointments	Total Capacity Available for Unscheduled Appointments	% of Total Capacity Available for Appointments
2021	406	262	65%	144	35%

Deltona August	Capacity Available for Scheduled Appointments	Total Capacity Used for Scheduled Appointments	% of Total Capacity Scheduled for Appointments	Total Capacity Available for Unscheduled Appointments	% of Total Capacity Available for Appointments
2021	187	124	66%	63	34%

Deland and Deltona August	Capacity Available for Scheduled Appointments	Total Capacity Used for Scheduled Appointments	% of Total Capacity Scheduled for Appointments	Total Capacity Available for Unscheduled Appointments	% of Total Capacity Available for Appointments
2021	593	386	66%	207	34%

**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)



### miCare Utilization by Day of the Week

DeLand August	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
2021	58%	69%	67%	66%	67%	56%

Deltona August	Monday	Tuesday	Wednesday	Thursday	Friday
2021	67%	63%	73%	69%	59%

### Key Insights:

- Between the two clinics 66% of the available capacity was used for scheduled appointments; 34% of time was available for walk-ins and other unscheduled patient care activities
- “No Shows” is where patient didn’t attend their scheduled clinic appointment
  - DeLand - 8%
  - Deltona – 18% such no shows create systematic “waste” since this scheduled appointment slot was not available to other members
- Administrative Time (chart reviews, medication follow-ups, referrals, provider-to-provider communication; etc.) represent approx. 2% of total capacity and is in line with industry standard for this type of patient care model

## miCare Member Migration

August 2021

	Total Unique Patients with Appointments	Total Eligible Membership	Penetration of Membership (%)
<b>Total</b>	653	1,386	47%

\*The data above represents unique members, several of who had multiple clinic visits on month



## miCare Visit Type Frequency

Deland  
August  
2021

Visit Type	Visits	Percentage
New Patient	26	2%
Sick/Urgent/Walk In	27	2%
Regular Visit, 1-2 Issues/Medications	62	5%
Regular Visit, 3+ Issues/Medications	1	0%
Recheck/Follow-Up	135	13%
Lab Draw	156	14%
Medication Pick Up	663	58%
Med Pick Up Pt Assist Program	32	3%
Hospital F/U	20	2%
Physical/Well Exams	4	0%
Chronic Disease Mgmt	14	1%
Community Resource	5	0%
Nurse Visit	5	0%
Total Visits	1,150	100%

Deland  
August  
2021

Location	Visit Count	% of Total
Onsite	1,058	92%
Telephone	92	8%
Overall - Total	1,150	100%



**Deltona**  
**August**  
**2021**

Visit Type	Visits	Percentage
New Patient	16	4%
Sick/Urgent/Walk In	20	6%
Regular Visit, 1-2 Issues/Medications	58	16%
Regular Visit, 3+ Issues/Medications	5	1%
Recheck/Follow-Up	136	38%
Lab Draw	85	24%
Med Pick Up Pt Assist Program	8	2%
Hospital F/U	3	1%
Physical/Well Exams	12	3%
Chronic Disease Mgmt	6	2%
Immunization	4	1%
Medication Pick Up	2	1%
Total Visits	360	100%

**Deltona**  
**August**  
**2021**

Location	Visit Count	% of Total
Onsite	270	75%
Telephone	90	25%
Overall - Total	360	100%

The data below includes all visits completed by the clinical team including Nurses, Phlebotomy, Nurse Practitioners, and Health Coaches.



**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)



COURTESY • INTEGRITY • COMMITMENT



September 1, 2021

West Volusia Hospital Authority

## Monthly Enrollment Report

In the month of August there were 280 appointments to assist with new applications and 65 appointments to assist with pended applications from June-July. For a total of 345 Interviews with clients.

254 applications were submitted for verification and enrollment. Of these, 254 were processed by the end of the month (includes the July roll overs -0- from previous month) leaving the balance of 0 to roll over into August 2021 for approval.

Of the 254 that were processed, 195 were approved and 19 were denied. There were 40 pended remaining.

Currently applications are being processed, approved and the client enrolled in 7 business days. Current enrollment with EBMS is taking up to 3-5 days to appear active in system.

Respectfully submitted by Gail Hallmon

September 14, 2021

RE: The Neighborhood Center (TNC), HEALTH CARE NAVIGATOR

To Fellow Board Members,

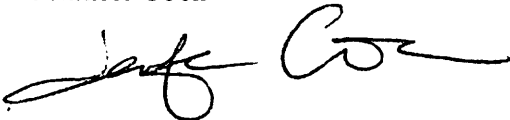
I initially recommended to defund the TNC Healthcare Navigator program for the upcoming calendar year. Specifically, I was concerned with TNC employment practice to hire persons with "lived personal experiences". However, after in-depth conversations, in-person interviews and a tour of its facilities, I was able to establish that TNC has a company policy to hire only persons with a clean criminal background checks, and has terms of employment which require all employees to participate in a random drug testing program. I believe this is sufficient in creating a positive work culture and a deterrent. For this reason, I will reconsider my funding recommendation.

However, in the discovery process and with direct consultation with our Attorney, it has come to light that TNC, Health Care Navigator Program over the 2020/2021 funding year has been in violation of it's funding agreement. Our funding contract stipulates that the Health Care Navigator (HCN) must be SSI/SSDI, Outreach, Access and Recovery (SOAR) certified. The current HCN began employment on August 24, 2020 and did not obtain the required SOAR certification until it was brought to the attention of TNC last week at which point it was promptly addressed and is in the process of being rectified. TNC acknowledges this oversight and accepts full responsibility.

I acknowledge, on it's merits, this violation does not warrant defunding of this valuable service. Nonetheless, a contractual violation is a serious problem and I recommend to the board, we seek reimbursement from TNC of a penalty of \$7500 (15% of last year's funding agreement). In addition, in future board meetings, I also recommend we adopt in writing a requirement for all funded applicants to submit proof of current license for any and all licensed employees relied upon in funded applications.

Thank you for your consideration.

Jennifer Coen

A handwritten signature in black ink, appearing to read 'Jennifer Coen', with a stylized flourish at the end.

Commissioner  
West Volusia Hospital Authority

## Low Income Pool Letter of Agreement

**THIS LETTER OF AGREEMENT (LOA)** is made and entered into in duplicate on the \_\_\_\_\_ day of \_\_\_\_\_ 2021, by and between **West Volusia Hospital Authority** on behalf of **SMA Behavioral**, and the State of Florida, **Agency for Health Care Administration** (the "**Agency**"), for good and valuable consideration, the receipt and sufficiency of which is acknowledged.

### DEFINITIONS

"Charity care" or "uncompensated charity care" means that portion of hospital charges reported to the Agency for which there is no compensation, other than restricted or unrestricted revenues provided to a hospital by local governments or tax districts regardless of the method of payment. Uncompensated care includes charity care for the uninsured but does not include uncompensated care for insured individuals, bad debt, or Medicaid and Children's Health Insurance Program (CHIP) shortfall. The state and providers that are participating in Low Income Pool (LIP) will provide assurance that LIP claims include only costs associated with uncompensated care that is furnished through a charity care program and that adheres to the principles of the Healthcare Financial Management Association (HFMA) operated by the provider.

"Intergovernmental Transfers (IGTs)" means transfers of funds from a non-Medicaid governmental entity (e.g., counties, hospital taxing districts, providers operated by state or local government) to the Medicaid agency. IGTs must be compliant with 42 CFR Part 433 Subpart B.

"Low Income Pool (LIP)" means providing government support for safety-net providers for the costs of uncompensated charity care for low-income individuals who are uninsured. Uncompensated care includes charity care for the uninsured but does not include uncompensated care for insured individuals, "bad debt," or Medicaid and CHIP shortfall.

"Medicaid" means the medical assistance program authorized by Title XIX of the Social Security Act, 42 U.S.C. §§ 1396 et seq., and regulations thereunder, as administered in Florida by the Agency.

### A. GENERAL PROVISIONS

1. Per Senate Bill 2500, the General Appropriations Act of State Fiscal Year 2021-22, passed by the 2021 Florida Legislature, the **West Volusia Hospital Authority** and the Agency agree that the **West Volusia Hospital Authority** will remit IGT funds to the Agency in an amount not to exceed the total of **\$300,000**.
  - a. The **West Volusia Hospital Authority** and the Agency have agreed that these IGT funds will only be used to increase the provision of health services for the charity care of the **West Volusia Hospital Authority** and the State of Florida at large.
  - b. The increased provision of charity care health services will be accomplished through the following Medicaid programs:
    - i. LIP payments to hospitals, federally qualified health centers, Medical School Physician Practices, community behavioral health providers, and

rural health centers pursuant to the approved Centers for Medicare & Medicaid Services Special Terms and Conditions.

1. The **West Volusia Hospital Authority** will return the signed LOA to the Agency no later than October 1, 2021.
2. The **West Volusia Hospital Authority** will pay IGT funds to the Agency in an amount not to exceed the total of **\$300,000**.
  - a. Per Florida Statute 409.908, annual payments for the months of July 2021 through June 2022 are due to the Agency no later than October 31, 2021 unless an alternative plan is specifically approved by the agency.
  - b. The Agency will bill the **West Volusia Hospital Authority** when payment is due.
3. The **West Volusia Hospital Authority** and the Agency agree that the Agency will maintain necessary records and supporting documentation applicable to health services covered by this LOA.
  - a. Audits and Records
    - i. The **West Volusia Hospital Authority** agrees to maintain books, records, and documents (including electronic storage media) pertinent to performance under this LOA in accordance with generally accepted accounting procedures and practices, which sufficiently and properly reflect all revenues and expenditures of funds provided.
    - ii. The **West Volusia Hospital Authority** agrees to assure that these records shall be subject at all reasonable times to inspection, review, or audit by state personnel and other personnel duly authorized by the Agency, as well as by federal personnel.
    - iii. The **West Volusia Hospital Authority** agrees to comply with public record laws as outlined in section 119.0701, Florida Statutes.
  - b. Retention of Records
    - i. The **West Volusia Hospital Authority** agrees to retain all financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to performance under this LOA for a period of six (6) years after termination of this LOA, or if an audit has been initiated and audit findings have not been resolved at the end of six (6) years, the records shall be retained until resolution of the audit findings.
    - ii. Persons duly authorized by the Agency and federal auditors shall have full access to and the right to examine any of said records and documents.



- i. The rights of access in this section must not be limited to the required retention period but shall last as long as the records are retained.
- c. Monitoring
  - i. The **West Volusia Hospital Authority** agrees to permit persons duly authorized by the Agency to inspect any records, papers, and documents of the **West Volusia Hospital Authority** which are relevant to this LOA.
- d. Assignment and Subcontracts
  - i. The **West Volusia Hospital Authority** agrees to neither assign the responsibility of this LOA to another party nor subcontract for any of the work contemplated under this LOA without prior written approval of the Agency. No such approval by the Agency of any assignment or subcontract shall be deemed in any event or in any manner to provide for the incurrence of any obligation of the Agency in addition to the total dollar amount agreed upon in this LOA. All such assignments or subcontracts shall be subject to the conditions of this LOA and to any conditions of approval that the Agency shall deem necessary.
- 4. This LOA may only be amended upon written agreement signed by both parties. The **West Volusia Hospital Authority** and the Agency agree that any modifications to this LOA shall be in the same form, namely the exchange of signed copies of a revised LOA.
- 5. The **West Volusia Hospital Authority** confirms that there are no pre-arranged agreements (contractual or otherwise) between the respective counties, taxing districts, and/or the providers to re-direct any portion of these aforementioned charity care supplemental payments in order to satisfy non-Medicaid, non-uninsured, and non-underinsured activities.
- 6. The **West Volusia Hospital Authority** agrees the following provision shall be included in any agreements between the **West Volusia Hospital Authority** and local providers where IGT funding is provided pursuant to this LOA: "Funding provided in this Agreement shall be prioritized so that designated IGT funding shall first be used to fund the Medicaid program (including LIP or DSH) and used secondarily for other purposes."
- 7. This LOA covers the period of July 1, 2021 through June 30, 2022 and shall be terminated June 30, 2022.
- 8. This LOA may be executed in multiple counterparts, each of which shall constitute an original, and each of which shall be fully binding on any party signing at least one counterpart.

<b>LIP Local Intergovernmental Transfers (IGTs)</b>	
<b>Program / Amount</b>	<b>State Fiscal Year 2021-2022</b>
Low Income Pool	\$300,000
<b>Total Funding</b>	<b>\$300,000</b>

**WITNESSETH:**

**IN WITNESS WHEREOF**, the parties have caused this page Letter of Agreement to be executed by their undersigned officials as duly authorized.

**West Volusia Hospital Authority**

**STATE OF FLORIDA, AGENCY FOR  
HEALTH CARE ADMINISTRATION**

**SIGNED**  
**BY:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**SIGNED**  
**BY:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

WEST VOLUSIA HOSPITAL AUTHORITY  
DeLand City Hall  
120 S. Florida Avenue, DeLand, FL

**TENTATIVELY SCHEDULED MEETINGS - 2021**

**Citizens Advisory Committee Meetings**

**Tuesdays at 5:15pm**

**Joint Meetings**

**Board of Commissioners Meetings**

**Thursdays at 5:00pm**

January 21 - Organizational/Regular

~~February 2 – CAC Organizational/Orientation~~

~~\*Judy Craig/Voloria Manning~~ ~~Cancelled due to lack of a quorum~~

February 18 (HSCFV)

March 2 – Organizational/Applicant Workshop

\*Roger Accardi

March 18 (4 p.m.)

Future of Hospital Funding Workshop  
(duration 1 ½ hours) (TNC/FDOH)  
(TPA to Attend)

**April 15 – 5 p.m. Joint meeting of WVHA Board and CAC – Preliminary Funding  
Application Review**

May 4 - Discussion/Q&A Meeting

\*Jennifer Coen

May 20 (SMA/RAAO)

May 25 - Ranking Meeting \*Brian Soukup

**June 17 – 5:00 p.m. Joint meeting of WVHA Board and CAC–Funding Recommendations**

July (CAC Hiatus)

July 15 (4:00 p.m.) Budget  
Workshop Followed by Regular  
(THND/Healthy Comm)  
(TPA to Attend)

August 3 Sub-Committee

August 17 Sub-Committee

August 19 (HHI/CLSMF)

~~August 31 Sub-Committee~~

September 9 – Initial Budget Hearing

~~September 14 Sub-Committee~~

September 23 - Final Budget Hearing/Regular  
Meeting

October (CAC Hiatus)

October 21

November 2 Sub-Committee

November 18

\*WVHA Commissioner to attend CAC Meeting

Meetings to be held at DeLand City Hall Commission Chamber 120 S. Florida Avenue, DeLand FL

Meetings to be held at DRT, 1006 N. Woodland Blvd., DeLand, FL

Meeting to be held at Sanborn Activity Center, 815 S. Alabama Avenue, DeLand, FL

To: Eillen Long & Commissioners

Due to a significant and unanticipated change in my work status which requires me to travel and be out of the area a great deal, I regretfully tender my resignation as WVHA Commissioner, Group A Seat 1, effective Immediately.

I was hoping that my work schedule would slow down but it has actually got busier.

As an elected official, I know that much is expected of me. Most importantly, that duty requires attendance at meetings and attention to the significant changes that are occurring at the Authority level. As an athlete, I have always believed in giving 100% and that applies to my professional life as well. Due to my unanticipated increased work responsibilities, I feel that I am no longer able to adequately fulfill my duties on the Hospital Authority.

I hope that moving forward you not only think about the indigent in our community, but also the working poor that are dealing with inflation, higher taxes and struggling to make ends meet.

I am grateful for the opportunity to have served as a Hospital Authority Commissioner.

I wish you all the best in the future. Please let me know if there is anything else I need to do.

Sincerely

Brian Soukup



WeCare@MasseyServices.com  
MasseyServices.com • 1-888-2MASSEY (262-7739)

## WOOD DESTROYING INSECTS SERVICE AGREEMENT - FLORIDA SPOT TREATMENT

My CARE CLINIC - ELLEN Long  
First Name MI Last Name  
844-846 W. Plymouth  
Address of Treated Structure  
Deland FL 32720  
City State Zip County

ELONG@DETCA.com  
Email Address  
Billing Address (if different)  
City State Zip County

386.734-9441  
Primary Phone (Mobile/Work/Home)  
Alternate Phone (Mobile/Work/Home)  
386.715-3337  
Massey Services Phone

Massey Services Address

<input checked="" type="checkbox"/> <b>TREATMENT WILL BE PROVIDED BY:</b> <input checked="" type="checkbox"/> WOOD TREATMENT <input type="checkbox"/> HEAT TREATMENT	<b>GUARANTEE WILL BE ISSUED AS CHECKED BELOW:</b> <input checked="" type="checkbox"/> RETREATMENT ONLY <input type="checkbox"/> NO GUARANTEE
MASSEY IS AUTHORIZED TO TREAT THE STRUCTURE IDENTIFIED ABOVE FOR THE: <input type="checkbox"/> CONTROL OF <input checked="" type="checkbox"/> PREVENTION OF	Specific Wood Destroying Insects Included in Coverage:
<input checked="" type="checkbox"/> Drywood Termites <input checked="" type="checkbox"/> Powderpost Beetles <input checked="" type="checkbox"/> Old House Borers	<input checked="" type="checkbox"/> Drywood Termites ( <i>Kaloterms sp., Incisitermes sp., Cryptoterms sp.</i> )
WDI Treatment Sticker Location:	<input checked="" type="checkbox"/> Powderpost Beetles ( <i>Anohilidae sp., Lyctidae sp., Bostrichidae sp.</i> )
	<input checked="" type="checkbox"/> Old House Borers ( <i>Cerambycidae sp.</i> )

**IMPORTANT:** For detailed explanation of Guarantee(s), see the reverse side hereof. All Guarantees are specifically subject to the General Terms and Conditions listed on the reverse side hereof. (Refer to the Wood Destroying Organism Inspection Graph for specific areas in, on or under the structure that were treated.) This Agreement specifically excludes all subterranean termites including *Reticulitermes spp., Heteroterms spp., and Coptoterms spp.* (including Formosan Termites) and *Nasutitermes spp.*

### 1. RENEWABLE PROTECTION

- A. MASSEY guarantees the Initial Treatment for a period of one (1) year from the Effective Date referenced above. MASSEY will offer the Customer an option of renewing the Guarantee each year. The annual renewal fee will be ☐ \$ 100 for the second year through fifth year, or ☐ \$ \_\_\_\_\_ for customers enrolling in Automatic Bill Pay which equates to a 5% discount. MASSEY reserves the right to adjust the annual renewal fee each year thereafter by giving the Customer Advance Notice. (Checked Box and Initials indicates Customer Preference: \_\_\_\_\_ Customer Initials)
- B. The Customer must pay the annual renewal fee on or before the end of the expiration month (anniversary of the Effective Date) or this Guarantee will be automatically terminated.
- C. Based on the mutual consent of both MASSEY and the Customer, MASSEY reserves the right to offer the Customer an option to renew this Guarantee on a year-to-year basis after the initial ten (10) year period.

### 2. REINSPECTIONS

- A. During the effective period of this Guarantee, MASSEY will reinspect the Treated Structure(s) annually upon Customer's request, or more frequently deemed by MASSEY. No failure on the part of the Customer to request reinspection shall, in any way, affect the Customer's rights under this Guarantee.
- B. The Customer agrees to make the Treated Structure(s) available for reinspection

### 3. RETREATMENT, REPAIR OF FUTURE DAMAGE, AND LIMITATIONS OF LIABILITY

The type of Guarantee checked above will be issued to the Customer upon completion of the Initial Treatment and payment in full. The "Repair and Retreatment" and "Retreatment Only" Guarantees are explained in detail and are subject to the General Terms and Conditions on the reverse side hereof. In summary, the "Repair and Retreatment" Guarantee provides for retreatment and repair protection against new damage to the structure and contents at no additional cost to the Customer. Old damage (damage occurring prior to the Effective Date) is not covered. The "Retreatment Only" Guarantee provides only for any retreatment deemed necessary at no additional cost to the Customer.

### 4. TRANSFER OF OWNERSHIP

MASSEY agrees to transfer this Guarantee to the new Owner of the Treated Property upon payment of a \$95.00 transfer fee, provided that the new Owner requests transfer in writing and pays the transfer fee within three business days of the change of ownership. Otherwise, this Guarantee will terminate automatically as of the date of change of ownership. MASSEY reserves the right to adjust the annual renewal fee upon transfer of this Guarantee.

### 5. STRUCTURAL ADDITIONS AND/OR ALTERATIONS

- A. In the event the Treated Structure is modified, altered or otherwise changed, Customer will immediately notify MASSEY in writing for proper instruction(s) and/or any additional treatments required by the changes made.
- B. MASSEY may exclude damage repair coverage from avenues or conditions created by structural additions and/or alterations. In lieu of such exclusion, MASSEY may require additional treatment, additional service charges, and/or an adjustment in the annual renewal fee.

### 6. ALLERGIES AND SENSITIVITIES

If you, or any occupants, are prone to allergic reactions or sensitivities to dust, pollen, odors, chemicals, solvents, etc., or suffer from any respiratory illnesses, you should consult your physician before any service is performed on your property.

In consideration for work to be performed as itemized above and subject to the General Terms and Conditions recorded on the reverse side of this agreement, the undersigned agrees to make payment as follows:

INITIAL TREATMENT	\$ <u>540</u>
OTHER SERVICES	\$ _____
TAX _____ %	\$ _____
TOTAL AMOUNT DUE	\$ _____
LESS DOWN PAYMENT	\$ ( _____ )
BALANCE DUE UPON COMPLETION	\$ _____

### Credit Card, ACH/Electronic Funds Transfer, & Autopay Authorization\*

(Details on back)

Acct Type: ☐ Checking ☐ Savings ☐ Credit Card \_\_\_\_\_  
Financial Institution/City/St: \_\_\_\_\_  
Name on Card/Acct: \_\_\_\_\_  
CC#: \_\_\_\_\_ Exp Date: \_\_\_\_\_  
ABA/Transit#: \_\_\_\_\_ Acct#: \_\_\_\_\_  
Use for: ☐ Regular Sves ☐ Renewals ☐ Initial Only  
\_\_\_\_\_  
Customer Approval to Debit Acct and/or Charge Card as indicated above and for the amounts shown in Service Charges.

You, the Buyer, can cancel this transaction at any time prior to midnight of the third business day after the date of this transaction, by giving written notice of cancellation by registered mail to MASSEY SERVICES, INC. FOR CC/ACH: Customer agrees to notify Massey Services in writing if any change occurs with the credit card or bank account or at least 30 days prior to the intent to cancel and/or revoke this authorization. Notifications need to be sent to Massey Services, Inc., Attn: Accounts Receivable, 315 Graveland Street, Orlando, FL 32804. For additional information, please call 1.888.262.7739 (M-F, 8am-8pm EST) or email us at WeCare@MasseyServices.com.

Customer Signature/Date

Massey Services Representative/Date

GM Approval/Date

MS-204 (02/20)

SERVICE CENTER COPY

**West Volusia Hospital Authority  
Financial Statements  
August 31, 2021**



# Dreggors, Rigsby & Teal, P.A.

*Advisors for Life*

Certified Public Accountant | Registered Investment Advisor

1006 N. Woodland Boulevard ■ DeLand, FL 32720

(386) 734-9441 ■ [www.drtcpa.com](http://www.drtcpa.com)

Ronald J. Cantlay, CPA/CFP®  
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John A. Powers, CPA  
Ann J. Rigsby, CPA/PFS/CFP®  
Melissa J. Trickey, CPA

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

Management is responsible for the accompanying balance sheet (modified cash basis) of West Volusia Hospital Authority, as of August 31, 2021 and the related statement of revenues and expenditures - budget and actual (modified cash basis) for the month then ended and year-to-date, in accordance with accounting principles generally accepted in the United States of America. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the financial statements nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on these financial statements.

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

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

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

*Dreggors, Rigsby & Teal, P.A.*

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

September 02, 2021

#### MEMBERS

American Institute of  
Certified Public Accountants

the *CPAlliance* network

Florida Institute of  
Certified Public Accountants

**West Volusia Hospital Authority**

**Balance Sheet**

**Modified Cash Basis**

**August 31, 2021**

**Assets**

**Current Assets**

Petty Cash	\$	100.00
Intracoastal Bank - Money Market		2,795,965.55
Intracoastal Bank - Operating		182,445.07
Mainstreet Community Bank (MCB) - MM		10,205,441.78
MCB Escrow Account		200,000.00
Surety Bank - MM		8,003,389.83
Taxes Receivable		121,920.00
<b>Total Current Assets</b>		<b>21,509,262.23</b>

**Fixed Assets**

Land		145,000.00
Buildings		422,024.71
Building Improvements		362,091.33
Equipment		53,974.56
Leasehold Improvements		23,232.63
<b>Total Fixed Assets</b>		<b>1,006,323.23</b>
Less Accum. Depreciation		(409,309.80)
<b>Total Net Fixed Assets</b>		<b>597,013.43</b>

**Other Assets**

Deposits		2,000.00
<b>Total Other Assets</b>		<b>2,000.00</b>
<b>Total Assets</b>		<b>22,108,275.66</b>

**Liabilities and Net Assets**

**Current Liabilities**

Deferred Revenue		116,506.00
<b>Total Current Liabilities</b>		<b>116,506.00</b>

**Net Assets**

Unassigned Fund Balance		15,147,803.21
Restricted Fund Balance		208,000.00
Assigned Fund Balance		2,000,000.00
Nonspendable Fund Balance		597,013.43
Net Income Excess (Deficit)		4,038,953.02
<b>Total Net Assets</b>		<b>21,991,769.66</b>
<b>Total Liabilities and Net Assets</b>	<b>\$</b>	<b>22,108,275.66</b>



**West Volusia Hospital Authority**  
**Statement of Revenue and Expenditures**  
**Modified Cash Basis**  
**Budget and Actual**  
**For the 1 Month and 11 Months Ended August 31, 2021**

	<u>Annual Budget</u>	<u>Current Period Actual</u>	<u>Year To Date Actual</u>	<u>Budget Balance</u>
<b>Revenue</b>				
Ad Valorem Taxes	16,431,158	12,517	17,059,687	(628,529)
Investment Income	135,000	1,377	38,028	96,972
Other Income	0	1,225	72,970	(72,970)
Use of Prior Year Reserves	<u>2,000,000</u>	<u>0</u>	<u>0</u>	<u>2,000,000</u>
<b>Total Revenue</b>	<u>18,566,158</u>	<u>15,119</u>	<u>17,170,685</u>	<u>1,395,473</u>
<b>Healthcare Expenditures</b>				
Hospital Services	3,000,000	293,749	1,658,276	1,341,724
Primary Care and Pharmacy	4,000,000	203,747	3,432,938	567,062
Specialty Care	3,300,000	318,911	2,818,553	481,447
County Medicaid Reimbursement	2,512,229	0	1,884,172	628,057
The House Next Door	100,000	1,946	19,351	80,649
The Neighborhood Center	100,000	9,500	83,650	16,350
TNC Healthcare Navigation Program	50,000	4,800	48,195	1,805
Rising Against All Odds	164,985	0	164,985	0
Community Legal Services	95,958	5,304	49,680	46,278
Hispanic Health Initiatives	75,000	1,125	1,125	73,875
Florida Dept of Health Dental Svcs	225,000	13,420	142,666	82,334
Stewart Marchman - ACT	945,880	53,336	761,946	183,934
Health Start Coalition of Flagler & Volusia	142,359	11,111	98,974	43,385
H C R A	819,162	2,835	66,101	753,061
Other Healthcare Costs	<u>849,920</u>	<u>0</u>	<u>26,020</u>	<u>823,900</u>
<b>Total Healthcare Expenditures</b>	<u>16,380,493</u>	<u>919,784</u>	<u>11,256,632</u>	<u>5,123,861</u>
<b>Other Expenditures</b>				
Advertising	7,000	517	3,469	3,531
Annual Independent Audit	16,700	0	16,700	0
Building & Office Costs	15,533	6,520	22,132	(6,599)
General Accounting	68,100	6,358	48,212	19,888
General Administrative	65,100	4,725	50,528	14,572
Legal Counsel	70,000	3,680	53,840	16,160
City of DeLand Tax Increment District	100,000	0	90,172	9,828
Tax Collector & Appraiser Fee	610,000	190	635,095	(25,095)
TPA Services	540,000	31,799	524,944	15,056
Healthy Communities	75,397	5,326	57,003	18,394
Application Screening				
Application Screening - THND	402,835	33,570	328,691	74,144
Application Screening - RAAO	40,000	4,032	32,832	7,168
Workers Compensation Claims	25,000	0	0	25,000
Other Operating Expenditures	<u>150,000</u>	<u>638</u>	<u>11,483</u>	<u>138,517</u>
<b>Total Other Expenditures</b>	<u>2,185,665</u>	<u>97,355</u>	<u>1,875,101</u>	<u>310,564</u>
<b>Total Expenditures</b>	<u>18,566,158</u>	<u>1,017,139</u>	<u>13,131,733</u>	<u>5,434,425</u>
<b>Excess ( Deficit)</b>	<u>0</u>	<u>(1,002,020)</u>	<u>4,038,952</u>	<u>(4,038,952)</u>

**West Volusia Hospital Authority**  
**Schedule I - Healthcare Expenditures**  
**Modified Cash Basis**  
**Budget and Actual**  
**For the 1 Month and 11 Months Ended August 31, 2021**

	Annual Budget	Current Period Actual	Year To Date Actual	Budget Balance
<b>Healthcare Expenditures</b>				
Halifax Hospital	1,500,000	142,082	1,203,656	296,344
AdventHealth	1,500,000	151,667	454,619	1,045,381
Primary Care and Pharmacy	4,000,000	203,747	3,432,938	567,062
Specialty Care	3,300,000	318,911	2,818,553	481,447
County Medicaid Reimbursement	2,512,229	0	1,884,172	628,057
Florida Dept of Health Dental Svcs	225,000	13,420	142,666	82,334
Good Samaritan				
The House Next Door	100,000	1,946	19,351	80,649
The Neighborhood Center	100,000	9,500	83,650	16,350
TNC Healthcare Navigation Program	50,000	4,800	48,195	1,805
Rising Against All Odds	164,985	0	164,985	0
Community Legal Services	95,958	5,304	49,680	46,278
Hispanic Health Initiatives	75,000	1,125	1,125	73,875
Stewart Marchman - ACT				
SMA - Homeless Program	95,880	3,002	32,620	63,260
SMA - Residential Treatment	550,000	50,334	429,326	120,674
SMA - Baker Act - Match	300,000	0	300,000	0
Health Start Coalition of Flagler & Volusia				
HSCFV - Outreach	73,500	6,220	61,068	12,432
HSCFV - Fam Services	68,859	4,891	37,907	30,952
HCRA				
H C R A - In County	400,000	2,835	58,650	341,350
H C R A - Outside County	419,162	0	7,451	411,711
Other Healthcare Costs	849,920	0	26,020	823,900
<b>Total Healthcare Expenditures</b>	<b>16,380,493</b>	<b>919,784</b>	<b>11,256,632</b>	<b>5,123,861</b>

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

**For the 1 Month and 11 Months Ended August 31, 2021 and August 31, 2020**

	1 Month Ended August 31, 2021	1 Month Ended August 31, 2020	11 Months Ended August 31, 2021	11 Months Ended August 31, 2020
<b>Revenue</b>				
Ad Valorem Taxes	12,517	14,108	17,059,687	19,497,416
Investment Income	1,377	7,887	38,028	126,317
Rental Income	0	5,999	0	62,065
Other Income	1,225	0	72,970	19,209
<b>Total Revenue</b>	<u>15,119</u>	<u>27,994</u>	<u>17,170,685</u>	<u>19,705,007</u>
<b>Healthcare Expenditures</b>				
Hospital Services	293,749	326,846	1,658,276	3,430,346
Primary Care and Pharmacy	203,747	99,024	3,432,938	1,178,042
Specialty Care	318,911	190,871	2,818,553	2,560,245
County Medicaid Reimbursement	0	0	1,884,172	1,839,421
The House Next Door	1,946	1,740	19,351	55,602
The Neighborhood Center	9,500	12,575	83,650	69,429
TNC Healthcare Navigation Program	4,800	2,800	48,195	27,833
Rising Against All Odds	0	12,250	164,985	150,325
Community Legal Services	5,304	3,368	49,680	46,697
Hispanic Health Initiatives	1,125	0	1,125	26,525
Florida Dept of Health Dental Svcs	13,420	6,829	142,666	112,768
Good Samaritan	0	0	0	1,832
Stewart Marchman - ACT	53,336	10,597	761,946	897,300
Health Start Coalition of Flagler & Volusia	11,111	6,503	98,974	130,209
H C R A	2,835	11,824	66,101	266,404
Other Healthcare Costs	0	0	26,020	0
<b>Total Healthcare Expenditures</b>	<u>919,784</u>	<u>685,227</u>	<u>11,256,632</u>	<u>10,792,978</u>
<b>Other Expenditures</b>				
Advertising	517	28	3,469	2,708
Annual Independent Audit	0	0	16,700	16,400
Building & Office Costs	6,520	0	22,132	3,742
Capital Expenditures - miCare Clininc	0	29,580	0	29,580
General Accounting	6,358	4,802	48,212	40,860
General Administrative	4,725	4,824	50,528	45,143
Legal Counsel	3,680	3,880	53,840	53,877
City of DeLand Tax Increment District	0	0	90,172	90,813
Tax Collector & Appraiser Fee	190	131	635,095	683,407
Legislative Consulting	0	0	0	30,090
TPA Services	31,799	0	524,944	479,098
Healthy Communities	5,326	0	57,003	35,094
Application Screening				
Application Screening - THND	33,570	33,201	328,691	326,605
Application Screening - RAAO	4,032	2,880	32,832	32,640
Application Screening - SMA	0	0	0	0
Workers Compensation Claims	0	0	0	17,701
Other Operating Expenditures	638	563	11,483	11,023
<b>Total Other Expenditures</b>	<u>97,355</u>	<u>79,889</u>	<u>1,875,101</u>	<u>1,868,691</u>

See Accountants' Compilation Report

**West Volusia Hospital Authority**  
**Schedule II - Statement of Revenue and Expenditures**  
**Modified Cash Basis**  
**For the 1 Month and 11 Months Ended August 31, 2021 and August 31, 2020**

	1 Month Ended August 31, 2021	1 Month Ended August 31, 2020	11 Months Ended August 31, 2021	11 Months Ended August 31, 2020
<b>Total Expenditures</b>	<u>1,017,139</u>	<u>765,116</u>	<u>13,131,733</u>	<u>12,661,669</u>
<b>Excess ( Deficit)</b>	<u><u>(1,002,020)</u></u>	<u><u>(737,122)</u></u>	<u><u>4,038,952</u></u>	<u><u>7,043,338</u></u>

## LEGAL UPDATE MEMORANDUM

TO: WVHA Board of Commissioners

DATE: September 14, 2021

FROM: Theodore W. Small, Jr.

RE: West Volusia Hospital Authority – Update for September 23, 2021 Regular Meeting

Summarized below are updates on active legal matters/issues for which some new information has become available since my last legal update. This Memorandum will not reflect updates on matters resolved by a final vote of the Board and thereby already summarized in the August 19, 2021 Meeting Minutes.

### I. Funding Agreements for 2021-22:

Please note that each Board member is responsible for making his or her own independent determination about whether the terms of a particular contract is consistent with the public interest. Counsel, EBMS as well as the accounting and administrative team at DRT, PA, are available to answer your questions and offer counsel about accounting and business or legal matters, each respectively; but, the Board retains the ultimate authority to approve or disapprove the terms of all proposed agreements after due consultation.

Based on the approved 2021-22 Tentative Budget as well as incorporating publicly announced Board consensus, counsel has prepared “redlined” versions of funding agreements for each of the previously funded providers. Next, counsel will circulate copies of the redlined drafts to the agencies, members of the Board and to accounting and administrative staff at DRT. To the extent agreeable, suggested changes will be incorporated into final drafts and circulated to the agencies for final review and execution.

Depending on whether funding for the two new agencies is approved, counsel will prepare and present those new funding agreements for review and approval.

It is noteworthy that once again this year only one of the CAC reviewed and recommended agencies has not provided any comparable rate information concerning the “AVERAGE COST/UNIT OF SERVICE WITH COMPARATIVE REIMBURSEMENT” section of the Funding Application. Except for Hispanic Health Initiative (“HHI”), all agencies were able to provide some comparable rate information (even if it required looking at rates paid in states other than Florida). HHI represents in its funding application that it had searched but could not find any such information. Further it explains that its inability to find comparative rate information is due to the “uniqueness of HHI’s programs”. Counsel is willing to defer again this year to the continued validity of past negotiations with HHI over its reimbursement rate, but notes this

incomplete information for the Board's consideration of whether it has an adequate factual basis for determining whether the proposed reimbursement rate is competitive.

Healthy Start Coalition's Outreach and Family Services agreements include rate or funding increases as requested in their applications, but these proposed rates are still equal or below rates paid for similar services by other payers.

With those clarifications, counsel has prepared "redlined" versions of funding agreements for previously funded agencies, which Ms. Long is being asked to distribute to the Board in electronic format for the Board's *first reading*. Counsel will also forward these redlined versions to the agencies so that they can begin their internal legal review and contract approval process. Once the Final Budget is approved and counsel hears back from the agencies confirming their acceptance of these proposed terms and incorporates any suggested changes from DRT or Board members, counsel will present these and any newly funded agency agreements to the Board for *second reading* and final approval:

- A. Community Legal Services, Inc. Medical-Legal Partnership program.
- B. Healthy Communities – Kidcare Outreach
- C. Hispanic Health Initiatives, Inc.'s Taking Care of My Health
- D. Rising Against All Odds, Inc. -- HIV/AIDS Outreach and Case Management
- E. Rising Against All Odds, Inc.—Health Card Enrollment & Retention Services
- F. SMA Healthcare – Baker Act Match
- G. SMA Healthcare– Homeless Program
- H. SMA Healthcare —Level II Residential Treatment
- I. The Healthy Start --Access to Healthcare Services—SMA Outreach
- J. The Healthy Start –Family Services Coordinator—Deltona
- K. The House Next Door – Mental Health Services
- L. The House Next Door—Eligibility Determination Services
- M. The Neighborhood Center of West Volusia "Access to Care"
- N. The Neighborhood Center of West Volusia "Health Care Navigation"
- O. Volusia County Health Department—Florida Department of Health (Dental Care)

II. Follow-up Site Visit of The Neighborhood Center HealthCare Navigator Program  
[*See new info. in italics and bold*]

Although counsel has not yet reviewed DRT's follow-up site visit write-up concerning the HealthCare Navigator Program, counsel anticipates that the Board may require some background from a legal perspective.

Counsel was first contacted about this item by Ms. Long on June 21<sup>st</sup>. Ms. Long requested that I review my files to help her answer the following inquiry from the Auditor General:

**From:** JIM COLE <[JIMCOLE@AUD.STATE.FL.US](mailto:JIMCOLE@AUD.STATE.FL.US)>

**Sent:** Monday, June 21, 2021 2:15 PM

**To:** Eileen Long <[elong@drtcpa.com](mailto:elong@drtcpa.com)>

**Cc:** WALT CUNNINGHAM <[WALTCUNNINGHAM@AUD.STATE.FL.US](mailto:WALTCUNNINGHAM@AUD.STATE.FL.US)>

**Subject: TNC HealthCare Navigator Program (1920) December 2020 Site Visit Report**

Eileen,

We reviewed the TNC HealthCare Navigator Program (1920) December 2020 - Site Visit Report. The Report noted that of six (6) clients tested, TNC provided no photo IDs or residency documentation.

- A. Under the funding agreement, TNC agreed to screen participants for income and assets eligibility. The Report does not refer to this eligibility requirement. Was this examined during the audit and, if not, would you explain why it was not included?
- B. Would you please explain why the test results did not result in expanding the audit procedures and attempting to estimate questioned costs and seek reimbursement? The Board authorized an expanded Site Visit for the month of May 2021 that has yet to be performed.
- C. Would you calculate the questioned costs for the above exceptions? Please include your calculations.

Thank you,

***Jim Cole, CPA***  
***State of Florida - Auditor General's Office***  
Ph 407-928-9512

To assist DRT with formulating a response, counsel located and reviewed a series of emails concerning the initial drafting of the agreement for HealthCare Navigator Program. Those September/October 2019 emails (between counsel, the Board, TNC and DRT) confirmed that the Screening provision/Paragraph 6 for this funding agreement had always been presented to TNC, the Board and DRT as different from the provision in the Access to Care program.

After DRT responded to the Auditor General and began to conduct its follow-up site-visit concerning the HealthCare Navigator Program, counsel was again contacted by DRT with a request to weigh-in when TNC indicated that it was unable to provide all of the information that DRT was requesting concerning the full screening requirement. Counsel responded to DRT with a copy to TNC in the following email:

**From:** Attorney Ted Small <[tsmall@westvolusiahospitalauthority.org](mailto:tsmall@westvolusiahospitalauthority.org)>  
**Sent:** Friday, July 16, 2021 8:16 AM  
**To:** Eileen Long <[elong@drtcpa.com](mailto:elong@drtcpa.com)>  
**Cc:** Waylan Niece <[waylan.niece@nhcwv.org](mailto:waylan.niece@nhcwv.org)>;  
[rcantlay@westvolusiahospitalauthority.org](mailto:rcantlay@westvolusiahospitalauthority.org)  
**Subject:** Re: FW: TNC Navigator Contractual Compliance Review

Good morning, Happy to schedule something next week to discuss further. My overall impression upon reviewing this email and related agreements is that there is a disconnect between what TNC was expecting to provide as support under its funding agreement and what DRT is expecting to examine under its Site Visit engagement. DRT needs to write this up and put it on the Board discussion agenda so they can consider both why this disconnect is being discovered now after several years of funding and what, if anything, can bring this into compliance with the terms of the funding agreement. I checked and this funding agreement, unlike the Access to Healthcare agreement, requires full eligibility screening. That was what was agreed and communicated in emails to TNC and DRT when this program was initially approved and that's what should have been happening. The Board needs to be informed and to weigh in on how to handle it if this Site Visit discovers or reveals that it hasn't been operated that way. Regards, ts

***Based on a conversation with Mr. Niece about TNC's progress on the requested effort that TNC endeavor to retroactively qualify as many program participants as practicable, counsel is anticipating TNC to present the Board a spreadsheet demonstrating an extensive effort to assure the Board that most of the program participants would have been eligible had they been properly screened at the time of services.***

III. New Methodology for Calculating the Medicaid Contribution Required from Counties and/or Hospital Districts Who “Benefit” from the Medicaid Program—SB 1520/HB 5301 (2013 Florida Legislature) [*See new info. in italics and bold*]

As some Board members may recall, in 2012 the Florida Legislature passed HB-5301 which required counties and/or hospital districts who “benefit” from the Medicaid program to catch up on disputed Medicaid bills dating back to 2001. After much research, discussion and legal and political wrangling, WVHA ultimately resolved to continue its longstanding commitment to reimburse the County of Volusia (the “County”) for the County’s required contribution to the State of Florida Medicaid Program for hospital bill payments on behalf of indigent residents of the West Volusia Tax District. For both the unpaid Medicaid bills dating back to 2001 and future Medicaid bills, the County and WVHA agreed to set aside their disagreement about whether WVHA actually “benefits” from the Medicaid program as do the other hospital districts (Halifax and Southeast Volusia) which receive direct Medicaid payments for services rendered at hospitals which they own and operate. Instead, the ultimate resolution to this dispute was WVHA’s agreement to continue reimbursing the County for a portion of its required contribution to the Medicaid Program as long as the County certified that it had verified that hospital bills apportioned to WVHA concerned healthcare services for persons who were indigent residents of the West Volusia Tax District at the time of service. This agreed-upon Medicaid billing procedure was fully implemented and was the basis for the Board’s approval of all Medicaid payments during the 2012-13 fiscal year.

However, with the passage of SB 1520 by the 2013 Florida Legislature, the State of Florida Medicaid Program will no longer bill the County based on the actual amount of services



rendered to individual Medicaid recipients within the County. Instead, the State of Florida is now allowed to assess counties based on statutory formulas with the stated goals of 1. relieving counties of having to devote administrative time to check and verify recipient addresses and 2. making the process compatible with AHCA's new Diagnosis Related Group (DRG) reimbursement system, whereby hospitals are reimbursed a flat rate per diagnosis code regardless of the number of hospitalization days. (Although not acknowledged in the FAC materials I reviewed, it is counsel's understanding that AHCA pushed hard for passage of the new law in order to relieve itself of many administrative burdens associated with the prior reimbursements procedures)

The formula that applied for the first two years under the new regime was based solely on the "percentage share of payments", which represents the County's percentage share of total Medicaid payments for all counties, based on six months of resolved payments during SFY 2012-13. Because the County has three independent hospital districts which had traditionally split responsibilities for the County's assessment based on the residency of the hospital inpatient at the time of service, the County divided responsibility for the new formula assessments based solely on the percentage of Medicaid enrollees within each of the hospital taxing districts, as determined by their zip codes as of March 2013: 45.97% in West Volusia Taxing District (39,802 enrollees); 44.42% in Halifax Taxing District (38,461 enrollees); and 9.61% in Southeast Volusia Taxing District (8,318 enrollees).

However, beginning in SFY 15-16 and through SFY 19-20, the formula that will apply is based on a five year transitional period where two formulas are utilized, the percentage share of payments formula and a new "enrollment percentage". The new "enrollment percentage" formula represents the total Florida Medicaid enrollees living in the County as of March of that year divided by the total number of Medicaid enrollees in Florida. During the transition period, the proportionate weight of the "percentage share of payments" formula decreases each year and the proportionate weight of a new enrollment percentage is increased each year. For example, in SFY 15-16, the percentage share of payments formula will count for 80% and the enrollment percentage will count for only 20% of the County's total assessment. However, by SFY 18-19, the percentage share of payments formula will only count for 20% and the enrollment percentage will count for 80% of the County's total assessment. In SFY 2019-20, the enrollment percentage will count for 100% of the County's total Medicaid assessment.

Under the new law, the Department of Revenue (DOR) is required to notify each county by June 1 of its total SFY Medicaid contribution. Each county is then required to begin paying its assessed contribution in equal monthly installments by the 5<sup>th</sup> day of each month. If a county fails to make these monthly payments, the DOR is required to reduce the county's half-cent sales tax distribution. Therefore, the County will be unforgiving of any resistance by WVHA or the other hospital districts to pay whatever is decided as "our proportionate share" of the assessed contribution.

Counsel will defer to the CPAs at DRT to provide the Board with an analysis of the detailed numbers and how the change in the proportionate weight of the two formulas during the transitional period which starts this year. From a broad analytical perspective and based on preliminary discussions with representatives of other hospital districts, it appears that WVHA

could be assessed an increasingly larger amount for Medicaid each year because the total assessment to each county is no longer based upon data on actual hospital stays/services provided and is no longer going to distinguish hospitals versus nursing homes stays/services. (Under the prior formula, the County paid all of the Medicaid contribution attributed to nursing home stays). Apparently, the data on actual usage is no longer being collected and maintained by AHCA. Instead, by the end of the transitional period DOR will simply assess the County one lump sum assessment based entirely on per capita enrollment in zip codes associated with Volusia County, without any consideration of the actual Medicaid usage by these enrollees and without any division as between hospital stays and nursing home stays. Further, counsel has confirmed that DOR is not making any distinction based on actual physical addresses of the Medicaid enrollees. Therefore, those with zip codes that DOR associates with Volusia County will be included in the County's assessment even if those enrollees actually live in Lake or Flagler County.

Counsel, DRT and other representatives from Halifax and Southeast have scheduled a conference call in order to discuss a potential mutual strategy for negotiating with the County about how to deal with those features of the new "enrollment percentage" formula that will result in WVHA and the other districts becoming responsible for both hospital stays and nursing home care of Medicaid enrollees. Counsel is not expecting that the other districts will be as concerned about the lack of perfect correlation between the States use of inexact zip coding as the sole means to determine "residency", because they have other revenue other than ad valorem taxes and could pay for nonresidents without a per se violation of their Enabling Legislation. But at some point if this zip code methodology is not addressed, WVHA may be faced with a choice between violating its Enabling Legislation and reneging on its traditional willingness to pay its proportionate share of the County's Medicaid assessment. It would help counsel to advise the Board on this choice if the Board would authorize "special accounting" by DRT or HSI, or both working collaboratively, to come up with a reasonable estimate of how many actual Lake County residents with a 32720 zip code are Medicaid enrollees. If that number is not significant, then it would allow counsel to articulate for the Board a justification for considering this cost as "incidental" to the larger cost of providing healthcare to actual residents of the Tax District. The converse is also true.

Consistent with the methodology tentatively agreed in a conference call last month between representatives of all three hospital districts in Volusia County, Mr. Powers has prepared a preliminary spreadsheet indicating how utilizing the average of four years of WVHA's percentage of the overall Volusia County's required contribution to the Medicaid Program will actually decrease WVHA's contribution percentage to 31.02%, as compared to 31.84% for 2014-15. Mr. Powers received notice that the County has agreed to the joint proposal from all three hospital districts. Apparently County Council approval was not required and WVHA should receive a formal letter confirming the County's approval. Counsel has requested that this matter be placed on the Board's Discussion Agenda for the September 17<sup>th</sup> meeting and recommends that the Board formally approve the jointly proposed methodology until, hopefully, some legislative fix occurs to replace the statutory "enrollment percentage" formula that would be applicable if this joint proposal were not agreed by all parties.

For the past several years, counsel has agreed with DRT that WVHA should agree with

Halifax and Southeast to continue the same contribution percentages for Medicaid Match payments as were jointly agreed for the 2015-16 transitional year. However, counsel has repeatedly cautioned that the Board review the above summarized background to what was agreed only as a temporary fix and give due consideration that the transitional phase in period will end with State Fiscal Year 2019-20. At that time, all unresolved legal issues will likely need to be resolved between WVHA, the County and all interested parties. If a jointly agreed upon new methodology for a fair and equitable division of Medicaid costs cannot be agreed, WVHA may need to pursue an appeal to the Department of Financial Services, as provided under Chapter 409.915(5), Florida Statutes, to obtain a definitive ruling on whether WVHA actually "benefits" from the Medicaid program to allow the County to allocate it any portion of the Medicaid costs; whether WVHA can legally reimburse for Lake County non-residents who have a West Volusia zip code in spite of the restriction in its Enabling Legislation to only funds costs for "residents" of the Tax District; as well as whether the County is dealing with WVHA fairly in dividing percentages between hospital and nursing home stays by Medicaid enrollees.

To update the Board on the status of current negotiations between the County and the other hospital districts about the proposal developed by Halifax to shift nearly a half million of these Medicaid costs from Halifax to WVHA, counsel is pasting the below recent emails and will update the Board on any further developments as needed. Please call, 386-740-0787, with any specific questions.

**From:** Ted Small [mailto:tsmall@businessemploymentlawyer.com]  
**Sent:** Monday, June 7, 2021 12:54 PM  
**To:** 'Dona DeMarsh Butler' <ddbutter@volusia.org>; 'Powers Al' <apowers@drtcpa.com>; 'eric.peburn@halifax.org' <eric.peburn@halifax.org>; 'Joni Hunt' <Joni.Hunt@halifax.org>; 'Kelly.Kwiatek@halifax.org' <Kelly.Kwiatek@halifax.org>; 'jeff.davidson@sevhd.com' <jeff.davidson@sevhd.com>; 'Diana Phillips' <DPhillips@volusia.org>  
**Cc:** 'Long Eileen' <elong@drtcpa.com>; 'RonCantlay' <rcantlay@drtcpa.com>; 'Carmen Hall' <CHall@volusia.org>; 'Laura Coleman' <LColeman@volusia.org>; 'Coen Jennifer' <jcoen@westvolusiahospitalauthority.org>  
**Subject:** RE: [EX] RE: Medicaid Negotiations

Hi Dona and all, I'm catching up on this email string and I am starting to get questions from WVHA Board members about exactly what is the sourcing and legitimacy of the data that appears to shift nearly a half million of Medicaid sharing costs from Halifax to WVHA for this and future years. If the County intends to depart from using what has been our longstanding and jointly agreed upon data-based way dividing the Medicaid sharing costs amongst the three hospital districts, it is the County's responsibility to gather verifiable data and justify its basis for doing so under Chapter 409.915(5). Hopefully I am misreading the email string, but what I am understanding from the below exchange is that the County intends to reallocate a half million dollars of Medicaid sharing costs from the Halifax taxing district to the WVHA taxing district (with some minor adjustments to Southeast and ZERO adjustments to the County's share) solely based on one month of zip code data which Halifax's own consultants and

staff obtained from some unknown source at AHCA. Is that a correct reading?

Please help me to understand what I am missing about how the County would justify such a dramatic shift of how we have been cooperatively handling this very complex matter. I need to be able to explain it more clearly to three new Board members who are completely unfamiliar with the negotiations that Dan Eckert, Tura Schnebly and all counsel involved in negotiation the currently used basis for division once HB-5301 (2013) upended the prior specific user-based method for dividing these costs. Indeed, I have some Board members who aren't even persuaded that WVHA should share any of these costs since it no longer owns or operates a hospital that seeks Medicaid reimbursements. This will come up for WVHA Board discussion next week and I suspect (but don't know) that a majority of the Board would be willing to continue with the longstanding method of sharing these costs. But I need much more information about the sourcing and legitimacy of this proposed new methodology in order to avoid this becoming a basis for an appeal.

Thanks in advance for your help, ts

After the July 15th Board Meeting wherein the Board authorized counsel to advocate that the County Council should decide to split Medicaid costs in proportion to the actual Medicaid reimbursements benefitting the hospitals within each of the three hospital districts or, alternatively, to continue the same methodology for splitting the costs based on actual user data, which has been utilized since 2015-16. On July 19<sup>th</sup>, counsel had a thoughtful discussion explaining WVHA's position with Assistant County Attorney, Laura Coleman. Attorney Coleman assured counsel that she would convey these points to the County Attorney and other staff involved. At that time, Attorney Coleman indicated that the County staff had not finalized its recommendation and that she would notify counsel before a recommended decision was presented to the County Council. Counsel has also communicated briefly with one Council member about WVHA's position. The Council's Agenda on 7/20/21, 8/3/21 did not include this matter and the current draft County Council Agenda for the 8/17/21 does not include it. Counsel checked with Attorney Coleman on 8/9/21 and will report on any updates. ***Counsel has not received any updates from Attorney Coleman, but a group meeting has been scheduled for later this afternoon, 9/14/2021, which is expected to reveal the recommendation of County staff on how to split these Medicaid costs. Counsel will report to the Board on what has been decided or recommended.***

IV. Legal Context for Budget Workshop/TRIM Procedure [Tax/Budgeting] [See new info. in italics and bold]

Please note that the Authority's budget process is governed by the Truth in Millage ("TRIM") process as set forth in Chapter 200, Florida Statutes and the related Department of Revenue compliance regulations. In general, TRIM requires that taxing entities such as the Authority hold two public hearings for open discussion on their proposed millage rate and proposed

budget. Such public hearings must first deal with any increase in millage over the statutory rolled-back rate (RBR) necessary to fund the proposed budget, if any, and the specific purposes for which taxes are being increased. The millage rate must be adopted first and then the budget must be adopted with a separate vote. Notices for the first public hearing ("TRIM Notice") is mailed to taxpayers by the County Property Appraiser on the Notice of Proposed Property Taxes. Notice for the second public hearing is handled by the Authority with a newspaper advertisement in a statutorily mandated format and publication deadline.

For Board member personal vacation scheduling purposes, please note that the Authority's TRIM budgeting process usually starts in July coincident with the Property Appraiser's certification of the tax roll and ends in late September with a final budget hearing and submission of certifications of compliance to the State's TRIM Compliance Office. Therefore, even though tentative dates have already been voted upon (see below in Paragraph H *infra*), Board members should maintain as much flexibility as possible in their September schedules in order to ensure a quorum and whatever majority is necessary to satisfy the TRIM requirements.

For most years since 2007 including for the current tax year, the Board has voted to adopt millage at the "rolled-back rate" ("RBR"), which is the rate calculated with a statutory formula to allow the Board to raise the same amount of revenue as it did in the immediate past tax year with a simple majority vote. Refer to counsel's 9/17/2014 for further historical summary of final millage votes.

The following are descriptions of the exceptional years where the Board has voted to set its final millage rate either below or above that statutory rolled-back rate, which meant a tax decrease or tax increase in layman's terms:

Regarding the 2020-21 budget year, the TRIM Final Budget Hearing was held virtually on Thursday, September 24, 2020, and the Board voted unanimously to set its final millage at the rate of 1.5035 mills with a separate unanimous vote to adopt the Authority's 2020-21 tentative budget of \$18,566,158,000.00. Therefore, the 2020-21 tax year's millage of 1.5035 mills represents a 14.42% decrease below the 1.7569 mills rolled-back rate.

Regarding the 2019-20 budget year, the TRIM Final Budget Hearing was held on Thursday, September 26, 2019, and the Board voted 3-1-1 to set its final millage at 1.908 mills with a separate 3-1-1 to adopt the Authority's 2019-20 final budget of \$19,556,988. Therefore, the 2019-20 tax year's millage of 1.908 mills was a 5.563% decrease over the 2.0204 mills rolled-back rate.

Regarding the 2017-18 budget year, the TRIM Final Budget Hearing was held on Tuesday, September 26, 2017, and the Board voted 4-0-1 to set its final millage at 2.366 mills with a separate 4-0-1 to adopt the Authority's 2017-18 final budget of \$20,023,304.00. Therefore, the 2017-18 tax year's millage of 2.366 mills was a 58% increase over the 1.4966 mills rolled-back rate.

Regarding the 2015-16 budget year, the TRIM Final Budget Hearing was held on Thursday, September 17, 2015, and the Board voted 5-0 to set its final millage at 1.6679 mills with a separate 5-0 to adopt the Authority's 2015-16 final budget of \$16,741,063.00. Therefore, the 2015-16 tax year's millage of 1.6679 mills was a 10% decrease over the 1.8532 mills rolled-back rate;

Regarding the 2014-15 budget year, the TRIM Final Budget Hearing was held on Thursday, September 25, 2014, and the Board voted 4-0-1 (vacant) to set its final millage at 1.9237 mills with a separate 4-0-1 (vacant) to adopt the Authority's 2014-15 final budget of \$15,989,676.00. Therefore, the 2014-15 tax year's millage of 1.9237 mills was a 15% decrease over the 2.2632 rolled-back rate;

Regarding the 2013-14 budget year, the TRIM Final Budget Hearing was held on Thursday, September 19, 2013, and the Board voted 5-0 to set its final millage at 2.3759 mills with a separate 5-0 to adopt the Authority's 2013-14 final budget of \$17,453,695.00. Therefore, the 2013-14 tax year's millage of 2.3759 mills was a 1.5% decrease over the 2.4121 rolled-back rate;

Regarding the 2009-10 budget year, the TRIM Final Budget Hearing was held on Tuesday, September 22, 2009, and the Board voted unanimously to set its final millage at 1.745 mills with a separate unanimous vote to adopt the Authority's 2008-09 final budget of \$15,680,000.00. Therefore, the 2009-10 tax year's millage of 1.745 mills was a 2.04% decrease over the 1.7813 rolled-back rate;

Regarding the 2007-2008 budget year, the TRIM Final Budget Hearing was held on Wednesday, September 12, 2007, and the Board unanimously voted to set its final millage at 1.2619 mills with a separate unanimous vote to adopt the Authority's 2007-08 final budget of \$18,414,937.00. Therefore, the current tax year's millage of 1.2619 mills is the same as the final millage adopted for 2006-07, but it represented a 10.37 percent increase over the statutory rolled-back rate of 1.1433 mills.

On May 25, 2021, the Volusia County Property Appraiser sent the Authority official notification that based on its "pre-preliminary estimate", the total taxable value of property in the Authority's tax district is \$12,894,895,787, which represents a net change of approximately +10,34% from 2020 pre-preliminary estimated taxable value (11,686,105,072). Counsel defers to DRT to confirm or correct these calculations.

For Board planning purposes please begin to anticipate the following TRIM deadlines and special meeting dates during the next few months. *Several preliminary steps in the TRIM process have already occurred. The following additional steps are required to complete the 2019-2020 TRIM process:*

- A Within 15 days after the Tentative Budget Hearing occurs and the Tentative Millage and Budget are adopted, the Authority will need to advertise its second and final public hearing on the millage and budget ("Final Budget Hearing"). The advertisement for the Final Budget Hearing must be published at least 2, but no more than 5 days before the hearing takes place.

- B Hearing dates selected by the Volusia County Council and Volusia County School Board take priority. DRT has confirmed the dates that the School Board and the County Council have scheduled their respective TRIM hearings which will allow WVHA to schedule on Thursdays, September 9<sup>th</sup> and 23<sup>rd</sup> within the relevant time periods.
- C To reconcile these statutory scheduling requirements with the Authority's current meeting schedule and depending on any changes to the County Council or School Board schedule, the Tentative Budget Hearing has been scheduled for 5:05p.m. on Thursday, September 9, 2021; Monday, September 20 as the tentatively scheduled date for publication of the Final Budget Hearing which is proposed to occur in a special meeting on Thursday, September 23, 2020 at 5:05p.m, followed immediately by a regular meeting scheduled for that same date.
- D Within 3 days of the Final Budget Hearing, the Authority (via DRT) must forward the resolution adopting the final millage rate to the Property Appraiser.
- E Within 30 days of the Final Budget Hearing, the Authority (via DRT) must submit its TRIM Compliance package (DR-422).