West Volusia Hospital Authority BOARD OF COMMISSIONERS REGULAR MEETING January 20, 2022 5:00 p.m.

DeLand City Hall

120 S. Florida Avenue, DeLand, FL

AGENDA

- 1. Call to Order Organizational Portion of Meeting
- 2. Organizational Meeting
- 3. Organization of New Board of Commissioners
 - I. Election of Officers
 - A. Open floor for nomination of Chair
 - 1. Close nominations
 - 2. Hold vote for Chair
 - B. Chair continues with nominations and election of remaining officers
 - 1. Vice-Chair
 - 2. Secretary
 - 3. Treasurer
 - II. Organizational Matters
 - A. Motion and approval confirming location of Authority office and records remains the same
 - B. Motion and approval of time and location for Authority meetings
 - 1. DeLand City Hall Commission Chambers, 120 S. Florida Avenue, DeLand, FL, 5 p.m.
 - 2. Dreggors, Rigsby & Teal, P.A., 1006 N. Woodland Blvd., DeLand FL, 5 p.m.
 - 3. DeLand Police Department Community Room, 219 W. Howry Avenue, DeLand, FL, 5 p.m.
 - 4. Wayne Sanborn Center, 815 S. Alabama Ave., DeLand, FL 5 p.m.
 - 5. Deltona City Hall, 2345 Providence Blvd., Deltona, FL 5 p.m.
 - C. Citizens Advisory Committee No Vacancies
 - III. Allow WVHA Commissioners short comments, concerns and requests for agenda items for regular meetings
- 4. Adjourn Organizational portion of meeting

West Volusia Hospital Authority BOARD OF COMMISSIONERS REGULAR MEETING

January 20, 2022 commencing upon the conclusion of the Organizational Meeting

DeLand City Hall

120 S. FLORIDA AVENUE, DELAND, FL

Commencing upon the conclusion of the Organizational Meeting AGENDA

- 1. Call to Order Regular meeting
- 2. Opening Observance followed by a moment of silence
- 3. Approval of Proposed Agenda
- 4. Consent Agenda:
 - A. Approval of Minutes Regular Meeting November 18, 2021
- 5. Citizens Advisory Committee (CAC), Vice-Chair, Jacquie Lewis
 - a. CAC Meeting Minutes August 17, 2021 (Draft)
 - b. CAC Organizational/Orientation January 4, 2022, Verbal Update
- 6. Citizens Comments
- 7. Reporting Agenda:
 - A. EBMS November/December Report Written Submission
 - B. WVHA miCare Clinic DeLand/Deltona November/December Report Written Submission
 - 1. WVHA miCare Clinic Deland/Deltona 2021 4th Quarter Report
 - C. The House Next Door (THND) November/December HealthCard Report
- 8. Discussion Items:
 - A. DRT Site Visit Engagement Letter 1st Quarter 2021-2022
 - 1. The Neighborhood Center Healthcare Navigator Program
 - 2. Healthy Start Coalition of Flagler & Volusia Community Health Nurse
 - 3. New Hope Human Services
 - B. Contractual Site Visit Review Write Ups FYE 2021
 - 1. Rising Against All Odds
 - 2. SMA Residential Treatment Beds
 - 3. SMA Baker Act Services
 - 4. Healthy Start Coalition of Flagler & Volusia (HSCFV) WIS/NOS
 - 5. HSCFV Family Services Coordinator
 - C. WVHA Marketing Plan Update attached sample brochure-Commissioner Coen
 - D. Ameris Bank Resolution 2022-001
 - E. Intracoastal Banking Relationship with WVHA Coming to an end
 - F. Follow Up Items
 - 1. Response Costs to Florida Auditor General's Operational Audit through December 2021 (spreadsheet attached)
- 9. Finance Report
 - A. November & December Financials
- 10. Legal Update
- 11. Adjournment

WEST VOLUSIA HOSPITAL AUTHORITY

Board of Commissioners Regular Meeting
November 18, 2021
DeLand City Hall
120 S. Florida Avenue
DeLand, Florida
5:00 p.m.

Those in Attendance:

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

CAC Members Present:

Jacquie Lewis

Call to Order

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

5:06 p.m. Commissioner Craig was running late.

Approval of Proposed Agenda

Motion 119 – 2021 Commissioner Accardi motioned to approve the amended agenda as presented. Commissioner Coen seconded the motion. The motion passed by a 4-0-1 vote.

Consent Agenda

Approval of Minutes Regular October 21, 2021 (Errata Sheet attached)

Motion 120 – 2021 Commissioner Coen motioned to approve the Consent Agenda. Commissioner Accardi seconded the motion. The motion passed by a 4-0-1 vote.

Citizens Comments

There were two.

5:08 p.m. Commissioner Craig arrived at the meeting already in session.

Reporting Agenda

EBMS October Report - Written Submission

There was much Board discussion and concern regarding the reduction in membership in the WVHA HealthCard (HC) Program. There was Board consent that updating marketing materials would be brought before the Board during the January 20, 2022 Regular Meeting.

CAC Member Jacquie Lewis offered her assistance in marketing and suggested that WVHA partner with the Public Information Officers (PIO's) at AdventHealth, Halifax, even the cities PIO's and the Counties who would, in turn, benefit by making the WVHA miCare Clinics known and to divert from hospital campuses and to direct the community members towards appropriate services.

WVHA miCare Clinics DeLand/Deltona October Report – Written Submission West Plymouth Avenue WVHA miCare Clinic Fascia Repair Update West Plymouth Avenue WVHA miCare Clinic Overhand/Amazon Driver Damage Repair Update

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

The Board received the Reporting Agenda.

Discussion Items

CAC Applicants (Applications attached)
Asal Johnson & Taylor Hibel _ Commissioner Pepin
Ella Ran – Commissioner Craig
Willie T. Stephens – Commissioner Coen

Motion 121 – 2021 Commissioner Craig motioned to appoint Asal Johnson & Taylor Hibel as Commissioner Pepin's CAC appointees; Ella Ran as Commissioner Craig's appointee; and Willie T. Stephens as Commissioner Coen's appointee. Commissioner Coen seconded the motion. The motion passed unanimously.

West Plymouth Avenue – Professional Center Update – email Tyler Spore dated 10/25/2021 (attached)

WVHA Banking Options

Mr. Cantlay explained that DRT has been working with Mainstreet Bank, along with Attorney Small, in pursuing a new certificate of deposit account called Certificate of Deposit Account

Registry Services (CDARS) and placing \$9 million in this new account with variable maturity dates.

Motion 122 – 2021 Commissioner Pepin made the motion to approve the CDARS account with Mainstreet Community Bank, along with approving the signing of the Custodial Agreement as presented with the WVHA Meeting Materials, depositing \$9 million with variable maturity dates. Commissioner Accardi seconded the motion.

Roll Call:

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

The motion passed unanimously.

WVHA Tentatively Scheduled Meeting 2022

Motion 123 – 2021 Commissioner Craig motioned to approve the WVHA Tentatively Scheduled Meeting 2022. Commissioner Coen seconded the motion. The motion passed unanimously.

WVHA Commissioner Tentative Schedule for Check Signing 2022

Motion 124 – 2021 Commissioner Coen approved the WVHA Commissioner Tentative Schedule for Check Signing 2022. Commissioner Pepin seconded the motion. The motion passed unanimously.

Coordination of Public Speaking by Commissioners - Chair Manning

Chair Manning requested that her fellow Commissioners notify Ms. Long in advance of their planned attendance at any future public speaking events that they plan on attending. Then Ms. Long can notify all of the Commissioners about this planned speaking event in order for the Commissioners to avoid any violation of the Sunshine Law.

Follow-Up Items

County Medicaid Split-Update (Phelps Dunbar LLC Letter dated November 8, 2021 attached)

Mr. Small referred to the Phelps Dunbar status letter from yesterday, 11/17/2021 (attached). Further, Mr. Small sent out a late email this afternoon, 11/18/2021 at 1:51 p.m. with a referral from Phelps Dunbar along with a proposal from Heffley & Associates to perform public affairs monitoring and lobbying on behalf of matters affecting WVHA's interest in Florida State Government. Mr. Small explained that he had an opportunity this afternoon to speak at length

with Rich Heffley and discussed how to put forth a positive message with Florida Legislature about the work that WVHA does that people are unaware of. WVHA is a very unique funding mechanism to facilitate a holistic network of care, including primary care, specialty care, hospital care and special services care for the working poor of West Volusia, for those who fall between Medicaid or ACA eligibility. Mr. Small presented to the Board as to form approval of this November 18, 2021 Letter of Agreement between Heffley & Associates and WVHA (attached).

Motion 125 – 2021 Commissioner Craig motioned to approve the Heffley & Associates Letter of Agreement with WVHA. Commissioner Accardi seconded the motion.

Roll call:

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

The motion passed unanimously.

Motion 126 – 2021 Commissioner Coen motioned to terminate the agreement between WVHA and Phelps Dunbar, LLC. The motion died for lack of a second.

Response Costs to FL Auditor General's Operational Audit (Spreadsheet attached)

Mr. Cantlay updated the costs that have been incurred administratively, in accounting services and legal services to date thus far of \$14,711.25 through the end of last month.

The Neighborhood Center (TNC) Site Visit Agency Report to the Board Updating Procedures to Cure Site Visit Review Findings

Mr. Small commented about TNC's spreadsheet identifying that out of 183 clients served 140 were deemed eligible for WVHA reimbursement but 40 were ineligible. Mr. Small suggested tabling this until the January meeting to allow DRT to submit their Engagement Letter to perform an additional Contractual Compliance Site Visit for TNC and to determine if any further penalties should be incurred in bringing TNC into compliance.

Motion 127 – 2021 Commissioner Pepin motioned to table this matter until the January 20, 2022 Regular Meeting. Commissioner Craig seconded the motion. The motion passed unanimously.

Finance Report October Financials

Motion 128 – 2021 Commissioner Craig motioned to pay the expenditures and bank transfers totaling \$15,906,031.97. Commissioner Accardi seconded the motion. The motion passed unanimously.

Legal Update

Adjournment

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

Adjournment

Voloria Manning, Chair

CITIZENS ADVISORY COMMITTEE MEETING Sub-Committee WEST VOLUSIA HOSPITAL AUTHORITY DELAND CITY HALL 120 S. FLORIDA AVENUE DELAND FL AUGUST 17, 2021 5:15PM MINUTES

CAC Members/Attendance:

Patrick Rogers
Linda White
Donna Pepin
Brandy White
Dave Williams

PRELIMINARY DRAFT

Absent:

Dolores Guzman (Excused) Jacquie Lewis (Excused) Jenneffer Pulapaka (Excused) Althea Whittaker (Unexcused)

Others Present:

Commissioner Jennifer Coen Eileen Long, Dreggors, Rigsby & Teal, P.A.

Call to Order

Acting Chair Linda White opened the meeting with The Pledge of Allegiance followed by a moment of silence.

Approval of Agenda

Member Patrick Rogers motioned to approve the agenda. Member Dave Williams seconded the motion. The motion passed by a 5-0-4 vote.

Approval CAC sub-Committee Minutes – August 3, 2021

Member Donna Pepin motioned to adopt the CAC Sub-Committee Minutes of August 3, 2021. Member Patrick Rogers seconded the motion. The motion passed by a 5-0-4 vote.

Citizens Comments

There were none.

Development of Orientation Process for New CAC Members and/or New Board Members

Page 1 of 2 CAC Sub-Committee August 17, 2021 There was much Sub-Committee discussion and agreement that the Committee would develop an orientation process on behalf of the CAC and not on behalf of the WVHA Board of Commissioners. In regards to creating a brief, historical video, any individual chosen to present should submit a script that would be reviewed by the CAC, edited and finally presented to the WVHA Board for final approval. The Committee asked that Chair Jacquie Lewis be tasked with reaching out to the people in the community that she identified requesting that they submit a draft script of what they intended to say regarding the history of the WVHA.

Ms. Long will draft a list of WVHA Commissioners, their terms in office, their designated CAC Appointees, and contact information for all, including the Attorney and those at Dreggors, Rigsby & Teal. Further, Ms. Long will email a map of the boundaries of the Hospital District. Member Linda White volunteered to email a sample of a Conflict-of-Interest Form to Ms. Long and Member Brandy White volunteered to notate agency locations, hospital locations and miCare clinic locations within the Taxing District Map.

There was further discussion that there is already a procedure for the application process that is sent out each year by Ms. Long with the timeline of funding applications received and released, dates for meetings and description of the funding review process. Commissioner Coen suggested that the CAC would benefit by receiving copies of the WVHA Funded Agencies contracts, which would go a long way in answering many of the inquires that the CAC Members had for the applicants.

Under monitoring programs and service delivery, it was agreed that each agency provides an annual utilization to the WVHA that can be shared with the CAC along with each agencies most recent Contractual Compliance Site Visit Review Write Ups. It was also discussed that Guidestar.org would be a valuable resource to the Committee in viewing each agencies IRS Form 990.

Sensitivity Training Options

Funded Agencies Better Outcomes versus Output

PRELIMINARY DRAFT

CAC Comments

Adjournment

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

Linda White, Acting Chair, CAC Sub-Committee



EBMS

January 20, 2022

Submission Report for

WVHA Board Members

November 2021

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Client: Paid Dates: Location: West Volusia Hospital Authority 11/1/2021 to 11/30/2021

Plan Experi	ence Summa	iry
Claim Counts 3176 Claim Type	Total Paid	Per EE/Mo
Medical	\$466,194	\$359
Professional	\$256,691	\$198
Facility	\$209,503	\$161
PBM	\$0	\$0
Total Plan Paid:	\$466,194	\$359

Cash Flow Summary				
Charges	\$11,310,610			
less Disallowed	\$10,830,939			
Allowed	\$479,671			
less Member	\$13,009			
less Adjustments	\$468			
Paid Benefit	\$466,194			
plus Admin Costs	\$0			
Total Plan Paid:	\$466,194			

Disallowed Charges by Category						
Disallowed Category	Amount % of Gr					
Addl Info Not Provided	\$104,911	0.93%				
Duplicate Charges	\$1,612,927	14.26%				
Plan Limitations	\$6,965,724	61.59%				
UCR Reductions	\$446	0.00%				
Other	\$2,146,930	18.98%				
Total:	\$10,830,939	95.76%				

				Cens	us					
Census Date: 11/30/2021	Male Emp	Female Emp	Total Employees	Male Spouse	Female Spouse	Male Dep	Female Dep	Total Medical	Total Dental	Total Vision
0 to 19	16	14	30	0	0	0	0	30	0	0
20 to 25	23	27	50	0	0	0	0	50	0	0
26 to 29	32	26	58	0	0	0	0	58	0	0
30 to 39	114	94	208	0	0	0	0	208	0	0
40 to 49	107	175	282	0	0	0	0	282	0	0
50 to 59	166	248	414	0	0	0	0	414	0	0
60 to 64	73	117	190	0	0	0	0	190	0	0
65 and Older	24	43	67	0	0	0	0	67	0	0
Totals	555	744	1299	0	0	0	0	1299	0	0
Average Age	46.24	49.10	47.88	0.00	0.00	0.00	0.00	47.88	0.00	0.00

То	p Paid		Plan Payment by Age & Claimant Type			
Name	Claim Count	Paid	Census Date: 11/30/2021	Employee	Spouse	Dependent
Medical Center Of Deltona	29	\$79,344		\$169	\$0	\$0
AdventHealth Fish	42	\$43,153	20 to 25	\$3,586	\$0	\$0
Florida Cancer Specialists	76	\$42,983	26 to 29	\$20,975	\$0	\$0
Adventhealth Deland	36	\$35,289	30 to 39	\$35,548	\$0	\$0
Quest Diagnostics Tampa	440	\$33,071	40 to 49	\$60,351	\$0	\$0
Halifax Hospital Medical	11	\$21,107	50 to 59	\$211,858	\$0	\$0
6 Radiology Associates	147	\$16,275	60 to 64	\$74,562	\$0	\$0
Adventhealth Fish	11	\$11,523	65 and Older	\$59,145	\$0	\$0
Gastroenterology Of	84	\$10,363	Totals	\$466,194	\$0	\$0
Halifax Health	15	\$10,227				

Claims Pai	d by Month
January 21	\$195,932
February 21	\$461,274
March 21	\$432,415
April 21	\$662,120
May 21	\$391,136
June 21	\$424,614
July 21	\$819,433
August 21	\$340,483
September 21	\$548,995
October 21	\$563,096
November 21	\$466,194
Tota	al: \$5,305,692

Ave	rage Lag & Average S	Spend (rolling 12 n	nonths)
Product	Avg Paid per Day	Avg Lag Days	Lag Dollars
Medical	\$15,293	45	\$688,185
Vision	\$0	52	\$0
RX	\$0	130	\$0
	Total Control of the	Total:	\$688,185





Client: Paid Dates: Location: West Volusia Hospital Authority 11/1/2021 to 11/30/2021 All

			Benefit A	nalysis				
Benefit Category	Line Counts	Charges	Disallowed	Allowed	Member	Adjustments	Plan Paid	% of Total
AMBULANCE	4	\$60,132	\$60,132	\$0	\$0	\$0	\$0	0.00%
ANESTHESIA	58	\$88,304	\$81,003	\$7,301	\$0	\$0	\$7,301	1.57%
CHIROPRACTIC	66	\$744	-\$686	\$1,430	\$230	\$0	\$1,200	0.26%
COVID-19	100	\$5,287	\$4,836	\$451	\$0	\$0	\$451	0.10%
DIALYSIS	122	\$4,725,280	\$4,720,518	\$4,762	\$0	\$0	\$4,762	1.02%
DME/APPLIANCE	4	\$6,156	\$6,156	\$0	\$0	\$0	\$0	0.00%
EMERG ROOM CHRGS	468	\$1,083,734	\$994,387	\$89,347	\$3,100	\$0	\$86,247	18.50%
INELIGIBLE	324	\$328,563	\$328,563	\$0	\$0	\$0	\$0	0.00%
INPATIENT PHYS	181	\$43,481	\$37,625	\$5,856	\$0	\$0	\$5,856	1.26%
IP HOSP CHARGES	32	\$569,892	\$498,424	\$71,468	\$450	\$0	\$71,018	15.23%
MATERNITY	2	\$5,100	\$5,100	\$0	\$0	\$0	\$0	0.00%
MEDICAL MISC	43	\$6,288	\$4,137	\$2,151	\$115	\$0	\$2,036	0.44%
OFFICE VISIT	870	\$105,271	\$64,313	\$40,958	\$3,760	\$0	\$37,198	7.98%
OP PHYSICIAN	241	\$1,921,745	\$1,905,071	\$16,674	\$109	\$0	\$16,565	3.55%
OTHER	243	\$0	\$0	\$0	\$0	\$468	-\$468	-0.10%
OUTPAT HOSP	25	\$902,744	\$902,710	\$34	\$34	\$0	\$0	0.00%
PSYCHIATRIC	132	\$19,834	\$9,399	\$10,435	\$550	\$0	\$9,885	2.12%
RADIATION /CHEMO	72	\$41,844	\$14,258	\$27,586	\$12	\$0	\$27,573	5.91%
SLEEP DISORDER	11	\$1,602	\$1,602	\$0	\$0	\$0	\$0	0.00%
SUBS ABUSE	1	\$146	\$146	\$0	\$0	\$0	\$0	0.00%
SURG FACILITY	51	\$594,558	\$535,986	\$58,572	\$775	\$0	\$57,797	12.40%
SURGERY	193	\$19,152	\$16,834	\$2,317	\$0	\$0	\$2,317	0.50%
SURGERY IP	27	\$84,726	\$74,645	\$10,081	\$0	\$0	\$10,081	2.16%
SURGERY OP	113	\$161,527	\$129,964	\$31,563	\$0	\$0	\$31,563	6.77%
THERAPY	317	\$37,357	\$23,171	\$14,185	\$1,150	\$0	\$13,035	2.80%
VISION	3	\$60	\$60	\$0	\$0	\$0	\$0	0.00%
WELLNESS	1709	\$69,939	\$57,993	\$11,946	\$0	\$0	\$11,946	2.56%
XRAY/ LAB	3145	\$427,143	\$354,590	\$72,552	\$2,724	\$0	\$69,829	14.98%
Totals	8557	\$11,310,610	\$10,830,939	\$479,671	\$13,009	\$468	\$466,194	





Client: Paid Dates: Location: West Volusia Hospital Authority 1/1/2021 to 11/30/2021 All

Plan Experience Sun	nmary	Cash Flow Su	Cash Flow Summary Disallowed C	Disallowed Charges by Category		
Claim Counts 38231 Claim Type Total P Medical \$5,305,6 Professional \$2,789,6 Facility \$2,516,0 PBM Vision Total Plan Paid: \$5,305,6	Paid Per EE/Mo 692 \$371 506 \$195 086 \$176 \$0 \$0 \$0 \$0	Charges less Disallowed Allowed less Member less Adjustments Paid Benefit plus Admin Costs Total Plan Paid:	\$48,570,091 \$43,139,373 \$5,430,718 \$125,170 -\$143	Disallowed Category Addl Info Not Provided Duplicate Charges Plan Limitations Cost Savings UCR Reductions Other		6 of Gross 2.01% 5.45% 42.35% 0.01% 0.01% 38.98% 88.82%

				Cens	us					
Census Date: 11/30/2021	Male Emp	Female Emp	Total Employees	Male Spouse	Female Spouse	Male Dep	Female Dep	Total Medical	Total Dental	Total Vision
0 to 19	16	14	30	0	0	0	0	30	0	0
20 to 25	23	27	50	0	0	0	0	50	0	0
26 to 29	32	26	58	0	0	0	0	58	0	0
30 to 39	114	94	208	0	0	0	0	208	0	0
40 to 49	107	175	282	0	0	0	0	282	0	0
50 to 59	166	248	414	0	0	0	0	414	0	0
60 to 64	73	117	190	0	0	0	0	190	0	0
65 and Older	24	43	67	0	0	0	0	67	0	0
Totals	555	744	1299	0	0	0	0	1299	0	0
Average Age	46.24	49.10	47.88	0.00	0.00	0.00	0.00	47.88	0.00	0.00

То	p Paid		Plan Payment by Age & Claimant Type						
Name	Claim Count	Paid	Census Date: 11/30/2021	Employee	Spouse	Dependent			
Medical Center Of Deltona	477	\$825,831	0 to 19	\$13,732	\$0	\$0			
Halifax Hospital Medical	242	\$789,885	20 to 25	\$40,891	\$0	\$0			
Florida Cancer Specialists	1126	\$494,778	26 to 29	\$130,911	\$0	\$0			
Adventhealth Fish	458	\$329,475	30 to 39	\$677,181	\$0	\$0			
Adventhealth Deland	491	\$325,054	40 to 49	\$829,306	\$0	\$0			
Quest Diagnostics Tampa	4878	\$285,198	50 to 59	\$2,018,624	\$0	\$0			
6 Radiology Associates	1503	\$156,545	60 to 64	\$983,118	\$0	\$0			
Orange City Surgery	226	\$126,107	65 and Older	\$611,929	\$0	\$0			
Orange City Surgery	300	\$107,649	Totals	\$5,305,692	\$0	\$0			
Gastroenterology Of	736	\$97,145		The state of the s					

Claims Pa	d by Month
January 21	\$195,932
February 21	\$461,274
March 21	\$432,415
April 21	\$662,120
May 21	\$391,136
June 21	\$424,614
July 21	\$819,433
August 21	\$340,483
September 21	\$548,995
October 21	\$563,096
November 21	\$466,194
Tot	

Average Lag & Average Spend (rolling 12 months)									
Product	Avg Paid per Day	Avg Lag Days	Lag Dollars						
Medical	\$15,293	45	\$688,185						
Vision	\$0	52	\$0						
RX	\$0	130	\$0						
	To the second se	otal:	\$688,185						





Client: Paid Dates: Location: West Volusia Hospital Authority 1/1/2021 to 11/30/2021

Benefit Analysis											
Benefit Category	Line Counts	Charges	Disallowed	Allowed	Member	Adjustments	Plan Paid	% of Total			
ALLERGY CARE	29	\$8,281	\$5,251	\$3,030	\$50	\$0	\$2,980	0.06%			
AMBULANCE	20	\$127,207	\$127,207	\$0	\$0	\$0	\$0	0.00%			
ANESTHESIA	505	\$794,489	\$709,758	\$84,731	\$0	\$0	\$84,731	1.60%			
CHIROPRACTIC	286	\$8,334	\$3,324	\$5,010	\$630	\$0	\$4,380	0.08%			
COVID-19	699	-\$245,221	-\$251,439	\$6,217	\$0	\$0	\$6,217	0.12%			
DIALYSIS	493	\$6,101,161	\$6,079,130	\$22,031	\$0	\$0	\$22,031	0.42%			
DME/APPLIANCE	40	\$38,599	\$38,599	\$0	\$0	\$0	\$0	0.00%			
EMERG ROOM CHRGS	5700	\$11,955,209	\$11,404,952	\$550,257	\$16,413	\$0	\$533,844	10.06%			
HOME HEALTH CARE	11	\$0	\$0	\$0	\$0	\$0	\$0	0.00%			
HOSPICE CARE	2	\$364	\$364	\$0	\$0	\$0	\$0	0.00%			
INELIGIBLE	2555	\$1,237,983	\$1,237,839	\$144	\$0	\$0	\$144	0.00%			
INJECTION	13	\$0	\$0	\$0	\$0	\$0	\$0	0.00%			
INPATIENT PHYS	2174	\$510,210	\$423,631	\$86,578	\$0	\$0	\$86,578	1.63%			
IP HOSP CHARGES	576	\$6,900,830	\$6,137,941	\$762,889	\$5,275	\$0	\$757,614	14.28%			
MATERNITY	55	\$32,055	\$30,817	\$1,238	\$0	\$0	\$1,238	0.02%			
MEDICAL MISC	896	\$116,891	\$87,029	\$29,862	\$1,069	\$0	\$28,794	0.54%			
OFFICE VISIT	11705	\$1,846,165	\$1,251,408	\$594,758	\$43,080	\$0	\$551,678	10.40%			
OP PHYSICIAN	2325	\$2,682,392	\$2,514,621	\$167,771	\$1,321	\$0	\$166,450	3.14%			
OTHER	3046	\$10,206	\$10,028	\$178	\$0	-\$143	\$321	0.01%			
OUTPAT HOSP	54	\$994,050	\$959,486	\$34,564	\$1,220	\$0	\$33,344	0.63%			
PSYCHIATRIC	1906	\$426,783	\$255,087	\$171,696	\$7,265	\$0	\$164,431	3.10%			
RADIATION /CHEMO	1044	\$1,895,344	\$1,380,931	\$514,414	\$141	\$0	\$514,273	9.69%			
SLEEP DISORDER	149	\$17,421	\$17,421	\$0	\$0	\$0	\$0	0.00%			
SUBS ABUSE	25	\$44,349	\$43,674	\$676	\$100	\$0	\$576	0.01%			
SURG FACILITY	547	\$5,119,576	\$4,262,521	\$857,055	\$7,640	\$0	\$849,415	16.01%			
SURGERY	2450	\$216,094	\$176,724	\$39,369	\$0	\$0	\$39,369	0.74%			
SURGERY IP	264	\$475,723	\$408,127	\$67,596	\$0	\$0	\$67,596	1.27%			
SURGERY OP	1255	\$1,639,005	\$1,266,070	\$372,935	\$13	\$0	\$372,922	7.03%			
THERAPY	3880	\$384,867	\$218,161	\$166,706	\$13,630	\$0	\$153,076	2.89%			
URGENT CARE	13	\$2,431	\$2,431	\$0	\$0	\$0	\$0	0.00%			
VISION	59	\$1,935	\$1,935	\$0	\$0	\$0	\$0	0.00%			
WELLNESS	14053	\$573,249	\$458,150	\$115,099	\$3	\$0	\$115,097	2.17%			
XRAY/ LAB	43864	\$4,654,108	\$3,878,194	\$775,914	\$27,321	\$0	\$748,592	14.11%			
Totals		\$48,570,091	\$43,139,373	\$5,430,718	\$125,170	-\$143	\$5,305,692				





PCORI Membership Count

Block of Business ID: Client ID:

EBMSI 00532

Eligibility Date: : 1/1/2021 to 11/30/2021

Month-Year	Employee Count	Dependent Count	Total Member
00532-West Volus	ia Hospital Au	uthority	
1/1/2021	2228	0	2228
2/1/2021	2233	0	2233
3/1/2021	2246	0	2246
4/1/2021	2246	0	2246
5/1/2021	2091	0	2091
6/1/2021	2005	0	2005
7/1/2021	1852	0	1852
8/1/2021	1695	0	1695
9/1/2021	1535	0	1535
10/1/2021	1396	0	1396
11/1/2021	1362	0	1362

Total Member Days

1,899.00





Enrollment Counts by Postal Code

As Of Date: 11/30/2021

Block of Business ID: Client ID:

EBMSI 00532

	ployee		Total
	Count	Count	Count
32102	2	0	2
32105	2	0	2
32114	1	0	1
32130	40	0	40
32180	68	0	68
32190	23	0	23
32713	44	0	44
32720	315	0	315
32724	231	0	231
32725	240	0	240
32738	189	0	189
32739	1	0	1
32744	26	0	26
32763	88	0	88

0

9

1279

9

1279



32764

Total



Tier Census by Product 11/1/2021

Block of Business ID:

EBMSI

Client ID: Status: 00532 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	1282	550	732	0	0	0	0	1282
		Subtotal for Active:	1282	550	732	0	0	0	0	1282
		Total for Medical:	1282	550	732	0	0	0	0	1282





Tier Census by Product 11/15/2021

Block of Business ID:

EBMSI

Client ID: Status:

00532 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	1290	551	739	0	(0	0	1290
		Subtotal for Active:	1290	551	739	0		0	0	1290
		Total for Medical:	1290	551	739	0	(0	0	1290





Tier Census by Product 11/30/2021

Products: MM,DE,VI

Block of Business ID: Client ID:

EBMSI 00532 A,C,NC,R,V

Status:

00532: West Volusia Hospital Authority

Total Enrolled	1279	1279	1279
Female Temale Dependents Er	0	0	0
Male Dependents D	0	0	0
Female Spouses	0	0	0
Male Spouses	0	0	0
Female Members	733	733	733
Male Members	546	546	546
Total Members	1279	1279	1279
Coverage Level	Employee Only	Subtotal for Active:	Total for Medical:
Status	Active E		
ledical			

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Benefit Analysis Summary

Block of Business ID: Client ID: EBMSI 00532

Paid Date:

11/1/2021 to 11/30/2021

	Line Count	Charge	Ineligible	Cost Savings	Allowed	Patient Responsibility	Adjustments	Paid	% Paid	-
00532-West Volusia H	lospital A	uthority					a decrete annual rich in the artist and and			
AMBULANCE	4	60,132.38	60,132.38	0.00	0.00	0.00	0.00	0.00	0.00%	
ANESTHESIA	58	88,304.00	24,116.10	56,887.21	7,300.69	0.00	0.00	7,300.69	1.57%	
CHIROPRACTIC	66	744.00	-1,646.26	959.89	1,430.37	230.00	0.00	1,200.37	0.26%	
COVID-19	100	5,286.65	3,996.65	838.96	451.04	0.00	0.00	451.04	0.10%	
DIALYSIS	122	4,725,280.05	4,646,601.40	73,916.28	4,762.37	0.00	0.00	4,762.37	1.02%	
DME/APPLIANCE	4	6,156.40	6,156.40	0.00	0.00	0.00	0.00	0.00	0.00%	
EMERG ROOM	468	1,083,733.85	481,333.36	513,053.30	89,347.19	3,100.00	0.00	86,247.19	18.50%	
INELIGIBLE	324	328,563.38	328,563.38	0.00	0.00	0.00	0.00	0.00	0.00%	
INPATIENT PHYS	181	43,481.00	29,501.00	8,124.45	5,855.55	0.00	0.00	5,855.55	1.26%	
IP HOSP CHARGES	32	569,891.77	141,513.38	356,910.74	71,467.65	450.00	0.00	71,017.65	15.23%	
MATERNITY	2	5,100.00	5,100.00	0.00	0.00	0.00	0.00	0.00	0.00%	
MEDICAL MISC	43	6,288.04	197.04	3,939.65	2,151.35	115.22	0.00	2,036.13	0.44%	
OFFICE VISIT	870	105,271.19	2,135.75	62,177.59	40,957.85	3,760.00	0.00	37,197.85	7.98%	
OP PHYSICIAN	241	1,921,745.15	1,778,914.86	126,156.30	16,673.99	109.42	0.00	16,564.57	3.55%	
OTHER	257	0.00	0.00	0.00	0.00	0.00	467.68	-467.68	-0.10%	
OUTPAT HOSP	25	902,743.79	902,241.49	468.46	33.84	33.84	0.00	0.00	0.00%	
PSYCHIATRIC	132	19,834.38	0.00	9,399.02	10,435.36	550.00	0.00	9,885.36	2.12%	
RADIATION /CHEMO	72	41,844.00	-1,027.00	15,285.45	27,585.55	12.22	0.00	27,573.33	5.91%	
SLEEP DISORDER	11	1,602.48	1,602.48	0.00	0.00	0.00	0.00	0.00	0.00%	
SUBS ABUSE	1	145.72	145.72	0.00	0.00	0.00	0.00	0.00	0.00%	
SURG FACILITY	51	594,557.72	169,963.55	366,022.18	58,571.99	775.00	0.00	57,796.99	12.40%	
SURGERY	193	19,151.87	116.99	16,717.46	2,317.42	0.00	0.00	2,317.42	0.50%	
SURGERY IP	27	84,726.26	28,843.26	45,801.63	10,081.37	0.00	0.00	10,081.37	2.16%	
SURGERY OP	113	161,526.92	13,448.37	116,515.70	31,562.85	0.00	0.00	31,562.85	6.77%	
THERAPY	317	37,356.65	1,082.00	22,089.20	14,185.45	1,150.00	0.00	13,035.45	2.80%	
VISION	3	60.00	60.00	0.00	0.00	0.00	0.00	0.00	0.00%	
WELLNESS	1709	69,939.40	574.69	57,418.27	11,946.44	0.00	0.00	11,946.44	2.56%	
XRAY/ LAB	3145	427,142.73	59,354.65	295,235.74	72,552.34	2,723.57	0.00	69,828.77	14.98%	
Totals for 00532	8571	11,310,609.78	8,683,021.64	2,147,917.48	479,670.66	13,009.27	467.68	466,193.71		





Benefit Analysis Summary

Block of Business ID:

EBMSI 00532

Client ID: Paid Date:

1/1/2021 to 11/30/2021

	Line Count	Charge	Ineligible	Cost Savings	Allowed	Patient Responsibility	Adjustments	Paid	% Paid	
00532-West Volusia H	lospital A	uthority								
ALLERGY CARE	29	8,281.00	243.00	5,008.42	3,029.58	50.00	0.00	2,979.58	0.06%	
AMBULANCE	20	127,206.58	127,206.58	0.00	0.00	0.00	0.00	0.00	0.00%	
ANESTHESIA	505	794,489.41	154,785.38	554,972.74	84,731.29	0.00	0.00	84,731.29	1.60%	
CHIROPRACTIC	286	8,334.26	982.00	2,342.30	5,009.96	630.00	0.00	4,379.96	0.08%	
COVID-19	699	-245,221.17	-265,071.98	13,633.42	6,217.39	0.00	0.00	6,217.39	0.12%	
DIALYSIS	493	6,101,160.60	5,729,630.40	349,499.66	22,030.54	0.00	0.00	22,030.54	0.42%	
DME/APPLIANCE	40	38,599.40	38,599.40	0.00	0.00	0.00	0.00	0.00	0.00%	
EMERG ROOM	5700	11,955,209.15	8,420,945.66	2,984,006.40	550,257.09	16,412.92	0.00	533,844.17	10.06%	
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	2555	1,237,982.82	1,237,548.58	290.03	144.21	0.00	0.00	144.21	0.00%	
INJECTION	13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	
INPATIENT PHYS	2174	510,209.59	324,676.78	98,954.65	86,578.16	0.00	0.00	86,578.16	1.63%	
IP HOSP CHARGES	576	6,900,829.66	2,584,151.22	3,553,789.82	762,888.62	5,275.00	0.00	757,613.62	14.28%	
MATERNITY	55	32,054.75	28,091.00	2,726.10	1,237.65	0.00	0.00	1,237.65	0.02%	
MEDICAL MISC	896	116,891.33	9,408.05	77,621.01	29,862.27	1,068.58	0.00	28,793.69	0.54%	
OFFICE VISIT	11705	1,846,165.28	115,179.07	1,136,228.45	594,757.76	43,080.00	0.00	551,677.76	10.40%	
OP PHYSICIAN	2325	2,682,392.33	2,049,557.73	465,063.14	167,771.46	1,320.96	0.00	166,450.50	3.14%	
OTHER	3733	10,205.74	9,746.10	281.63	178.01	0.00	-143.38	321.39	0.01%	
OUTPAT HOSP	54	994,049.97	867,667.76	91,818.08	34,564.13	1,219.92	0.00	33,344.21	0.63%	
PSYCHIATRIC	1906	426,783.29	27,731.78	227,355.35	171,696.16	7,265.00	0.00	164,431.16	3.10%	
RADIATION /CHEMO	1044	1,895,344.41	55,630.92	1,325,299.75	514,413.74	140.51	0.00	514,273.23	9.69%	
SLEEP DISORDER	149	17,421.28	17,421.28	0.00	0.00	0.00	0.00	0.00	0.00%	
SUBS ABUSE	25	44,349.34	33,155.58	10,518.25	675.51	100.00	0.00	575.51	0.01%	
SURG FACILITY	547	5,119,576.08	968,775.09	3,293,745.72	857,055.27	7,640.00	0.00	849,415.27	16.01%	
SURGERY	2450	216,093.50	23,051.85	153,672.64	39,369.01	0.00	0.00	39,369.01	0.74%	
SURGERY IP	264	475,722.82	162,354.87	245,771.92	67,596.03	0.00	0.00	67,596.03	1.27%	
SURGERY OP	1255	1,639,005.39	63,388.17	1,202,682.10	372,935.12	13.11	0.00	372,922.01	7.03%	
THERAPY	3880	384,866.91	11,194.89	206,965.87	166,706.15	13,630.00	0.00	153,076.15	2.89%	
URGENT CARE	13	2,431.44	2,431.44	0.00	0.00	0.00	0.00	0.00	0.00%	
VISION	59	1,935.00	1,935.00	0.00	0.00	0.00	0.00	0.00	0.00%	
WELLNESS	14053	573,249.22	47,394.66	410,755.12	115,099.44	2.82	0.00	115,096.62	2.17%	
XRAY/ LAB	43864	4,654,107.75	964,715.63	2,913,478.29	775,913.83	27,321.36	0.00	748,592.47	14.11%	



miBenefits F

Benefit Analysis Summary

Block of Business ID: Client ID: Paid Date:

EBMSI 00532 1/1/2021 to 11/30/2021

	Count	Charge	Ineligible	Cost Savings	Allowed	Patient Responsibility	Adjustments	Paid	Paid % Paid
Totals for 00532	101380	48,570,091.21	23,812,891.97	19,326,480.86	5,430,718.38	125,170.18	-143.38	5,305,691.58	



Cost of Major

Block of Business ID: Client ID: EBMSI 00532

Paid Date:

11/1/2021 to 11/30/2021

Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount F	Percent of Total
00532	West Volusia Hospital Authority	13	Diseases of the Musculoskeletal System & Connective Tissue	135	301	104,368.82	22.39%
00532	West Volusia Hospital Authority	02	Neoplasms	43	86	61,611.53	13.22%
00532	West Volusia Hospital Authority	14	Diseases of the Genitourinary System	77	145	48,294.22	10.36%
00532	West Volusia Hospital Authority	18	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere	159	249	42,854.51	9.19%
00532	West Volusia Hospital Authority	11	Diseases of the Digestive System	81	142	42,106.50	9.03%
00532	West Volusia Hospital Authority	09	Diseases of Circulatory System	55	88	35,913.20	7.70%
00532	West Volusia Hospital Authority	01	Certain infectious and parasitic disease	34	43	29,497.87	6.33%
00532	West Volusia Hospital Authority	21	Factors Influencing Health Status and Contact with Health Services	162	183	22,090.10	4.74%
00532	West Volusia Hospital Authority	04	Endocrine, nutritional and metabolic diseases	139	183	20,173.53	4.33%
00532	West Volusia Hospital Authority	07	Diseases of the eye & adnexa	17	18	12,117.47	2.60%
00532	West Volusia Hospital Authority	05	Mental, Behavioral and Neurodevelopmental disorders	83	117	11,720.01	2.51%
00532	West Volusia Hospital Authority	03	Diseases of the blood and blood-forming organs & disorders involving the	36	63	9,827.68	2.11%
00532	West Volusia Hospital Authority	06	Diseases of the nervous system	28	46	8,429.75	1.81%
00532	West Volusia Hospital Authority	19	Injury, Poisoning and Certain Other Consequences of External Causes	23	41	6,492.07	1.39%
00532	West Volusia Hospital Authority	10	Diseases of the Respiratory System	33	49	6,077.58	1.30%
00532	West Volusia Hospital Authority	12	Diseases of the skin & subcutaneous tissue	15	20	1,969.44	0.42%
00532	West Volusia Hospital Authority	15	Pregnancy, childbirth and the puerperium	9	14	1,446.89	0.31%
00532	West Volusia Hospital Authority	08	Diseases of the ear & mastoid process	4	5	700.49	0.15%
00532	West Volusia Hospital Authority	22	Codes for Special Purposes	4	4	502.05	0.11%
				1137	1797	466,193.71	100.00%





Cost of Major

Block of Business ID: Client ID: EBMSI 00532

Paid Date:

1/1/2021 to 11/30/2021

Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount I	Percent of Total
00532	West Volusia Hospital Authority	13	Diseases of the Musculoskeletal System & Connective Tissue	550	3016	678,866.10	12.80%
00532	West Volusia Hospital Authority	09	Diseases of Circulatory System	376	1163	613,583.83	11.56%
00532	West Volusia Hospital Authority	02	Neoplasms	211	1098	607,947.44	11.46%
00532	West Volusia Hospital Authority	11	Diseases of the Digestive System	347	1437	590,082.75	11.12%
00532	West Volusia Hospital Authority	18	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere	731	2554	527,757.97	9.95%
00532	West Volusia Hospital Authority	21	Factors Influencing Health Status and Contact with Health Services	821	1946	445,657.62	8.40%
00532	West Volusia Hospital Authority	14	Diseases of the Genitourinary System	386	1161	340,993.31	6.43%
00532	West Volusia Hospital Authority	04	Endocrine, nutritional and metabolic diseases	613	1645	250,560.05	4.72%
00532	West Volusia Hospital Authority	05	Mental, Behavioral and Neurodevelopmental disorders	277	1556	205,909.08	3.88%
00532	West Volusia Hospital Authority	03	Diseases of the blood and blood-forming organs & disorders involving the	110	621	168,762.78	3.18%
00532	West Volusia Hospital Authority	22	Codes for Special Purposes	47	153	162,054.42	3.05%
00532	West Volusia Hospital Authority	10	Diseases of the Respiratory System	175	626	155,636.06	2.93%
00532	West Volusia Hospital Authority	19	Injury, Poisoning and Certain Other Consequences of External Causes	142	402	151,777.83	2.86%
00532	West Volusia Hospital Authority	01	Certain infectious and parasitic disease	131	290	108,916.82	2.05%
00532	West Volusia Hospital Authority	07	Diseases of the eye & adnexa	152	367	107,117.43	2.02%
00532	West Volusia Hospital Authority	06	Diseases of the nervous system	177	432	87,317.69	1.65%
00532	West Volusia Hospital Authority	12	Diseases of the skin & subcutaneous tissue	133	297	56,949.04	1.07%
00532	West Volusia Hospital Authority	15	Pregnancy, childbirth and the puerperium	29	275	26,062.42	0.49%
00532	West Volusia Hospital Authority	08	Diseases of the ear & mastoid process	28	78	15,355.35	0.29%
00532	West Volusia Hospital Authority	17	Congenital malformations, deformations and chromosomal abnormalities	11	22	4,326.04	0.08%
00532	West Volusia Hospital Authority	16	Certain conditions originating in the perinatal period	1	1	57.55	0.00%
				5448	19140	5,305,691.58	100.00%





Block of Business ID: Client ID: EBMSI 00532

Paid Date:

11/1/2021 to 11/30/2021

Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Po	
							Total
00532	West Volusia Hospital Authority	01.04	Other bacterial diseases	8	13	27,023.63	5.80%
00532	West Volusia Hospital Authority	13.04	Osteoarthritis	18	24	22,602.16	4.85%
00532	West Volusia Hospital Authority	13.10	Other dorsopathies	46	98	21,702.80	4.66%
00532	West Volusia Hospital Authority	13.08	Deforming dorsopathies	6	9	19,960.08	4.28%
00532	West Volusia Hospital Authority	21.01	Persons encountering health services for examinations	134	143	18,011.43	3.86%
00532	West Volusia Hospital Authority	02.08	Malignant neoplasms of breast	4	16	16,795.56	3.60%
00532	West Volusia Hospital Authority	18.01	Symptoms and signs involving the circulatory and respiratory systems	38	59	16,608.89	3.56%
00532	West Volusia Hospital Authority	02.10	Malignant neoplasms of male genital organs	2	9	16,271.68	3.49%
00532	West Volusia Hospital Authority	13.09	Spondylopathies	20	47	15,951.05	3.42%
00532	West Volusia Hospital Authority	02.17	Malignant neoplasms of lymphoid, hematopoietic and related tissue	1	7	15,318.22	3.29%
00532	West Volusia Hospital Authority	11.02	Diseases of esophagus, stomach and duodenum	32	57	14,834.89	3.18%
00532	West Volusia Hospital Authority	18.02	Symptoms and signs involving the digestive system and abdomen	52	80	14,540.12	3.12%
00532	West Volusia Hospital Authority	14.06	Other diseases of the urinary system	8	11	14,083.75	3.02%
00532	West Volusia Hospital Authority	04.02	Diabetes mellitus	74	97	13,638.08	2.93%
00532	West Volusia Hospital Authority	11.06	Other diseases of intestines	25	40	13,347.65	2.86%
00532	West Volusia Hospital Authority	14.03	Acute kidney failure and chronic kidney disease	19	50	13,269.40	2.85%
00532	West Volusia Hospital Authority	14.04	Urolithiasis	7	14	11,196.85	2.40%
00532	West Volusia Hospital Authority	09.07	Cerebrovascular diseases	5	5	11,193.87	2.40%
00532	West Volusia Hospital Authority	09.03	Hypertensive diseases	26	36	9,206.67	1.97%
00532	West Volusia Hospital Authority	13.13	Other soft tissue disorders	24	30	8,794.75	1.89%
00532	West Volusia Hospital Authority	13.05	Other joint disorders	36	59	8,311.57	1.78%
00532	West Volusia Hospital Authority	07.08	Disorders of optic nerve and visual pathways	1	1	8,261.46	1.77%
00532	West Volusia Hospital Authority	05.04	Mood [affective] disorders	58	80	7,676.96	1.65%
00532	West Volusia Hospital Authority	09.08	Diseases of arteries, arterioles and capillaries	5	14	7,445.24	1.60%
00532	West Volusia Hospital Authority	02.19	Benign neoplasms, except benign neuroendocrine tumors	25	29	7,024.87	1.51%
00532	West Volusia Hospital Authority	06.06	Episodic and paroxysmal disorders	17	21	5,816.28	1.25%
00532	West Volusia Hospital Authority	11.05	Noninfective enteritis and colitis	7	12	5,764.05	1.24%
00532	West Volusia Hospital Authority	02.03	Malignant neoplasms of respiratory and intrathoracic organs	1	8	4,237.77	0.91%
00532	West Volusia Hospital Authority	09.04	Ischemic heart diseases	8	13	4,103.89	0.88%
00532	West Volusia Hospital Authority	04.09	Metabolic disorders	48	53	3,899.13	0.84%





Block of Business ID: Client ID:

EBMSI 00532

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Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Pe	
00532	West Value a Heavital Authority	44.04	Usada			机 经验 5000000000000000000000000000000000000	Total
00532	West Volusia Hospital Authority	11.04	Hemia	3	5	3,868.18	0.83%
	West Volusia Hospital Authority	18.08	General symptoms and signs	25	33	3,861.68	0.83%
00532	West Volusia Hospital Authority	14.02	Renal tubulo-interstitial diseases	5	12	3,745.70	0.80%
00532	West Volusia Hospital Authority	03.05	Other disorders of blood and blood-forming organs	10	15	3,734.39	0.80%
00532	West Volusia Hospital Authority	03.01	Nutritional anemias	14	25	3,323.66	0.71%
00532	West Volusia Hospital Authority	10.05	Chronic lower respiratory diseases	16	27	3,207.50	0.69%
00532	West Volusia Hospital Authority	13.03	Inflammatory polyarthropathies	11	17	3,004.94	0.64%
00532	West Volusia Hospital Authority	05.05	Anxiety, dissociative, stress-related, somatoform and other nonpsychotic	21	30	2,893.54	0.62%
00532	West Volusia Hospital Authority	18.12	Abnormal findings on diagnostic imaging and in function studies, without	34	37	2,798.87	0.60%
00532	West Volusia Hospital Authority	03.03	Aplastic and other anemias and other bone marrow failure syndromes	10	17	2,521.46	0.54%
00532	West Volusia Hospital Authority	09.09	Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified	7	8	2,257.37	0.48%
00532	West Volusia Hospital Authority	11.08	Diseases of liver	11	15	2,242.21	0.48%
00532	West Volusia Hospital Authority	21.15	Persons with potential health hazards related to family and personal history	18	19	2,231.55	0.48%
00532	West Volusia Hospital Authority	14.08	Disorders of breast	19	24	2,155.66	0.46%
00532	West Volusia Hospital Authority	10.01	Acute upper respiratory infections	5	6	1,895.63	0.41%
00532	West Volusia Hospital Authority	13.12	Disorders of synovium and tendon	3	4	1,890.04	0.41%
00532	West Volusia Hospital Authority	18.06	Symptoms and signs involving cognition, perception, emotional state and	5	5	1,839.85	0.39%
00532	West Volusia Hospital Authority	19.09	Injuries to the knee and lower leg	4	5	1,808.21	0.39%
00532	West Volusia Hospital Authority	07.04	Disorders of lens	3	4	1,695.10	0.36%
00532	West Volusia Hospital Authority	09.06	Other forms of heart disease	8	11	1,693.46	0.36%
00532	West Volusia Hospital Authority	14.10	Noninflammatory disorders of female genital tract	13	14	1,615.50	0.35%
00532	West Volusia Hospital Authority	06.11	Other disorders of the nervous system	6	15	1,537.66	0.33%
00532	West Volusia Hospital Authority	19.02	Injuries to the neck	2	10	1,394.82	0.30%
00532	West Volusia Hospital Authority	13.14	Disorders of bone density and structure	1	4	1,381.70	0.30%
00532	West Volusia Hospital Authority	04.01	Disorders of thyroid gland	12	17	1,376.06	0.30%
00532	West Volusia Hospital Authority	18.09	Abnormal findings on examination of blood, without diagnosis	12	14	1,327.98	0.28%
00532	West Volusia Hospital Authority	14.07	Diseases of male genital organs	6	9	1,176.48	0.25%
00532	West Volusia Hospital Authority	19.22	Complications of surgical and medical care, not elsewhere classified	2	2	1,028.83	0.22%
00532	West Volusia Hospital Authority	07.06	Glaucoma	7	7	989.20	0.21%
00532	West Volusia Hospital Authority	14.05	Other disorders of kidney and ureter	9	9	959.93	0.21%
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ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount P	ercent of Total
0532	West Volusia Hospital Authority	11.09	Disorders of gallbladder, biliary tract and pancreas	5	5	927.34	0.20%
0532	West Volusia Hospital Authority	21.09	Encounters for other specific health care	7	10	905.50	0.19%
0532	West Volusia Hospital Authority	11.10	Other diseases of the digestive system	3	5	905.29	0.19%
0532	West Volusia Hospital Authority	06.07	Nerve, nerve root and plexus disorders	2	7	900.81	0.19%
0532	West Volusia Hospital Authority	05.02	Mental and behavioral disorders due to psychoactive substance use	3	4	854.93	0.18%
0532	West Volusia Hospital Authority	04.07	Other nutritional deficiencies	9	11	851.14	0.18%
0532	West Volusia Hospital Authority	10.04	Other diseases of upper respiratory tract	5	6	768.94	0.16%
0532	West Volusia Hospital Authority	12.09	Other disorders of the skin and subcutaneous tissue	5	5	767.34	0.16%
0532	West Volusia Hospital Authority	18.05	Symptoms and signs involving the genitourinary system	9	9	715.75	0.15%
0532	West Volusia Hospital Authority	02.09	Malignant neoplasms of female genital organs	2	6	630.31	0.14%
0532	West Volusia Hospital Authority	15.02	Supervision of high risk pregnancy	6	8	629.64	0.14%
0532	West Volusia Hospital Authority	12.01	Infections of the skin and subcutaneous tissue	6	9	611.55	0.13%
0532	West Volusia Hospital Authority	18.03	Symptoms and signs involving the skin and subcutaneous tissue	3	4	598.58	0.13%
0532	West Volusia Hospital Authority	01.14	Human immunodeficiency virus [HIV] disease	4	5	595.96	0.13%
0532	West Volusia Hospital Authority	21.08	Persons encountering health services in circumstances related to reproduction	6	8	581.68	0.12%
0532	West Volusia Hospital Authority	19.14	Burns and corrosions of external body surface, specified by site	3	5	502.98	0.11%
0532	West Volusia Hospital Authority	22.1	Emergency Use 2019-nCoVacute respiratory disease	4	4	502.05	0.11%
0532	West Volusia Hospital Authority	01.11	Viral infections characterized by skin and mucous membrane lesions	4	4	465.55	0.10%
0532	West Volusia Hospital Authority	07.07	Disorders of vitreous body and globe	2	2	464.83	0.10%
0532	West Volusia Hospital Authority	02.22	Neoplasms of unspecified behavior	2	2	443.27	0.10%
0532	West Volusia Hospital Authority	02.20	Neoplasms of uncertain behavior, polycythemia vera and myelodysplastic	4	4	405.52	0.09%
0532	West Volusia Hospital Authority	07.01	Disorders of eyelid, lacrimal system and orbit	3	3	403.57	0.09%
0532	West Volusia Hospital Authority	15.09	Other obstetric conditions, not elsewhere classified	3	3	400.77	0.09%
0532	West Volusia Hospital Authority	01.16	Mycoses	5	6	394.45	0.08%
0532	West Volusia Hospital Authority	01.13	Viral hepatitis	4	5	390.89	0.08%
0532	West Volusia Hospital Authority	21.07	Persons with potential health hazards related to communicable diseases	3	3	359.94	0.08%
0532	West Volusia Hospital Authority	01.01	Intestinal infectious diseases	4	4	356.77	0.08%
0532	West Volusia Hospital Authority	19.10	Injuries to the ankle and foot	3	5	349.04	0.07%
0532	West Volusia Hospital Authority	19.05	Injuries to the shoulder and upper arm	2	2	336.31	0.07%
0532	West Volusia Hospital Authority	04.08	Overweight, obesity and other hyperalimentation	1	4	327.75	0.07%





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00532	West Volusia Hospital Authority	08.04	Other disorders of ear	3	3	323.62	0.07%
00532	West Volusia Hospital Authority	15.05	Maternal care related to the fetus and amniotic cavity and possible delivery	2	2	321.94	0.07%
00532	West Volusia Hospital Authority	19.01	Injuries to the head	1 *	3	309.66	0.07%
00532	West Volusia Hospital Authority	07.05	Disorders of choroid and retina	1	1	303.31	0.07%
00532	West Volusia Hospital Authority	02.18	In situ neoplasms	1	ıî.	300.46	0.06%
00532	West Volusia Hospital Authority	19.07	Injuries to the wrist, hand and fingers	2	3	287.27	0.06%
00532	West Volusia Hospital Authority	18.11	Abnormal findings on examination of other body fluids, substances and	3	3	282.47	0.06%
00532	West Volusia Hospital Authority	13.07	Systemic connective tissue disorders	2	2	274.76	0.06%
00532	West Volusia Hospital Authority	12.05	Urticaria and erythema	3	3	272.55	0.06%
00532	West Volusia Hospital Authority	12.03	Dermatitis and eczema	2	2	261.35	0.06%
00532	West Volusia Hospital Authority	13.15	Other osteopathies	2	4	255.95	0.05%
00532	West Volusia Hospital Authority	03.04	Coagulation defects, purpura and other hemorrhagic conditions	5	6	248.17	0.05%
00532	West Volusia Hospital Authority	08.02	Diseases of middle ear and mastoid	1	1	245.45	0.05%
00532	West Volusia Hospital Authority	13.11	Disorders of muscles	3	3	239.02	0.05%
00532	West Volusia Hospital Authority	19.06	Injuries to the elbow and forearm	1	2	234.37	0.05%
00532	West Volusia Hospital Authority	18.04	Symptoms and signs involving the nervous and musculoskeletal systems	2	3	220.56	0.05%
00532	West Volusia Hospital Authority	11.01	Diseases of oral cavity and salivary glands	2	3	216.89	0.05%
00532	West Volusia Hospital Authority	05.03	Schizophrenia, schizotypal, delusional, and other non-mood psychotic disorders	1	2	163.25	0.04%
00532	West Volusia Hospital Authority	01.05	Infections with a predominantly sexual mode of transmission	2	2	151.18	0.03%
00532	West Volusia Hospital Authority	08.01	Diseases of external ear	1	1	131.42	0.03%
00532	West Volusia Hospital Authority	05.10	Behavioral and emotional disorders with onset usually occurring in childhood	1	1	131.33	0.03%
00532	West Volusia Hospital Authority	10.03	Other acute lower respiratory infections	1	2	126.56	0.03%
00532	West Volusia Hospital Authority	19.12	Injury of unspecified body region	1	1	96.86	0.02%
00532	West Volusia Hospital Authority	15.04	Other maternal disorders predominantly related to pregnancy	1	1	94.54	0.02%
00532	West Volusia Hospital Authority	14.09	Inflammatory diseases of female pelvic organs	2	2	90.95	0.02%
00532	West Volusia Hospital Authority	06.03	Extrapyramidal and movement disorders	1	1	82.80	0.05%
00532	West Volusia Hospital Authority	04.04	Disorders of other endocrine glands	1	1	81.37	0.02%
00532	West Volusia Hospital Authority	19.20	Other and unspecified effects of external causes	1	1	70.51	0.02%
00532	West Volusia Hospital Authority	19.04	Injuries to the abdomen, lower back, lumbar spine, pelvis and external genitals	1	1	65.23	0.01%
00532	West Volusia Hospital Authority	18.13	Abnormal tumor markers	2	2	59.76	0.01%





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ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	01.15	Other viral diseases	1	1	57.55	0.01%
00532	West Volusia Hospital Authority	12.07	Disorders of skin appendages	1	1	56.65	0.01%
00532	West Volusia Hospital Authority	01.21	Bacterial and viral infectious agents	2	2	52.50	0.01%
00532	West Volusia Hospital Authority	02.14	Malignant neoplasms of ill-defined, other secondary and unspecified sites	1	1	51.83	0.01%
00532	West Volusia Hospital Authority	10.09	Other diseases of the pleura	3	5	50.78	0.01%
00532	West Volusia Hospital Authority	02.01	Malignant neoplasms of lip, oral cavity and pharynx	·1	1	39.84	0.01%
00532	West Volusia Hospital Authority	10.11	Other diseases of the respiratory system	3	3	28.17	0.01%
00532	West Volusia Hospital Authority	09.05	Pulmonary heart disease and diseases of pulmonary circulation	1	1	12.70	0.00%
00532	West Volusia Hospital Authority	06.08	Polyneuropathies and other disorders of the peripheral nervous system	1	1	9.40	0.00%
00532	West Volusia Hospital Authority	01.22	Other infectious diseases	1	1	9.39	0.00%
00532	West Volusia Hospital Authority	19.03	Injuries to the thorax	1	1	7.98	0.00%
				1250	1797	466,193.71	100.00%





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ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount P	
00500							Total
00532	West Volusia Hospital Authority	02.08	Malignant neoplasms of breast	16	227	256,690.88	4.84%
00532	West Volusia Hospital Authority	09.06	Other forms of heart disease	98	273	232,037.67	4.37%
00532	West Volusia Hospital Authority	18.02	Symptoms and signs involving the digestive system and abdomen	287	785	201,330.34	3.79%
00532	West Volusia Hospital Authority	21.09	Encounters for other specific health care	45	151	196,471.87	3.70%
00532	West Volusia Hospital Authority	21.01	Persons encountering health services for examinations	751	1345	193,410.52	3.65%
00532	West Volusia Hospital Authority	11.02	Diseases of esophagus, stomach and duodenum	164	609	180,187.65	3.40%
00532	West Volusia Hospital Authority	09.04	Ischemic heart diseases	56	133	170,048.59	3.21%
00532	West Volusia Hospital Authority	22.1	Emergency Use 2019-nCoVacute respiratory disease	47	153	162,054.42	3.05%
00532	West Volusia Hospital Authority	13.10	Other dorsopathies	231	910	160,224.05	3.02%
00532	West Volusia Hospital Authority	04.02	Diabetes mellitus	297	928	146,938.59	2.77%
00532	West Volusia Hospital Authority	18.01	Symptoms and signs involving the circulatory and respiratory systems	249	629	138,819.64	2.62%
00532	West Volusia Hospital Authority	13.09	Spondylopathies	121	421	138,443.80	2.61%
00532	West Volusia Hospital Authority	05.04	Mood [affective] disorders	167	1095	137,716.76	2.60%
00532	West Volusia Hospital Authority	11.06	Other diseases of intestines	123	334	137,434.31	2.59%
00532	West Volusia Hospital Authority	13.04	Osteoarthritis	116	268	132,384.15	2.50%
00532	West Volusia Hospital Authority	11.04	Hernia	32	95	121,248.22	2.29%
00532	West Volusia Hospital Authority	14.10	Noninflammatory disorders of female genital tract	138	382	118,579.21	2.23%
00532	West Volusia Hospital Authority	02.19	Benign neoplasms, except benign neuroendocrine tumors	142	285	114,104.80	2.15%
00532	West Volusia Hospital Authority	03.05	Other disorders of blood and blood-forming organs	30	166	98,016.15	1.85%
00532	West Volusia Hospital Authority	13.13	Other soft tissue disorders	173	392	95,376.70	1.80%
00532	West Volusia Hospital Authority	02.11	Malignant neoplasms of urinary tract	7	66	95,331.46	1.80%
00532	West Volusia Hospital Authority	04.09	Metabolic disorders	255	436	72,946.94	1.37%
00532	West Volusia Hospital Authority	01.04	Other bacterial diseases	20	83	71,525.14	1.35%
00532	West Volusia Hospital Authority	13.05	Other joint disorders	189	606	68,221.83	1.29%
00532	West Volusia Hospital Authority	09.08	Diseases of arteries, arterioles and capillaries	36	113	61,309.26	1.16%
00532	West Volusia Hospital Authority	10.04	Other diseases of upper respiratory tract	47	122	56,254.31	1.06%
00532	West Volusia Hospital Authority	06.06	Episodic and paroxysmal disorders	91	198	56,020.24	1.06%
00532	West Volusia Hospital Authority	07.04	Disorders of lens	51	149	54,652.46	1.03%
00532	West Volusia Hospital Authority	18.08	General symptoms and signs	149	303	50,616.63	0.95%
00532	West Volusia Hospital Authority	09.03	Hypertensive diseases	224	370	49,392.22	0.93%





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ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Po	
							Total
00532	West Volusia Hospital Authority	14.06	Other diseases of the urinary system	60	132	48,738.66	0.92%
00532	West Volusia Hospital Authority	11.05	Noninfective enteritis and colitis	21	86	48,717.06	0.92%
00532	West Volusia Hospital Authority	18.12	Abnormal findings on diagnostic imaging and in function studies, without	150	219	45,655.90	0.86%
00532	West Volusia Hospital Authority	09.09	Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified	36	105	44,314.19	0.84%
00532	West Volusia Hospital Authority	14.03	Acute kidney failure and chronic kidney disease	74	273	43,669.37	0.82%
00532	West Volusia Hospital Authority	10.05	Chronic lower respiratory diseases	93	316	41,395.17	0.78%
00532	West Volusia Hospital Authority	03.01	Nutritional anemias	49	256	40,758.79	0.77%
00532	West Volusia Hospital Authority	09.07	Cerebrovascular diseases	35	100	38,237.43	0.72%
00532	West Volusia Hospital Authority	11.08	Diseases of liver	82	159	35,965.75	0.68%
00532	West Volusia Hospital Authority	13.08	Deforming dorsopathies	20	70	35,406.80	0.67%
00532	West Volusia Hospital Authority	19.22	Complications of surgical and medical care, not elsewhere classified	14	29	34,761.68	0.66%
00532	West Volusia Hospital Authority	14.04	Urolithiasis	23	65	34,711.81	0.65%
00532	West Volusia Hospital Authority	02.17	Malignant neoplasms of lymphoid, hematopoietic and related tissue	6	32	33,117.45	0.62%
00532	West Volusia Hospital Authority	19.09	Injuries to the knee and lower leg	27	68	33,044.76	0.62%
00532	West Volusia Hospital Authority	11.09	Disorders of gallbladder, biliary tract and pancreas	38	87	31,803.53	0.60%
00532	West Volusia Hospital Authority	21.15	Persons with potential health hazards related to family and personal history	121	248	31,610.41	0.60%
00532	West Volusia Hospital Authority	14.08	Disorders of breast	87	130	30,239.63	0.57%
00532	West Volusia Hospital Authority	05.05	Anxiety, dissociative, stress-related, somatoform and other nonpsychotic	70	265	28,698.48	0.54%
00532	West Volusia Hospital Authority	14.02	Renal tubulo-interstitial diseases	9	43	26,732.95	0.50%
00532	West Volusia Hospital Authority	14.07	Diseases of male genital organs	26	58	26,294.86	0.50%
00532	West Volusia Hospital Authority	02.10	Malignant neoplasms of male genital organs	4	66	26,037.47	0.49%
00532	West Volusia Hospital Authority	18.03	Symptoms and signs involving the skin and subcutaneous tissue	62	100	25,524.16	0.48%
00532	West Volusia Hospital Authority	10.11	Other diseases of the respiratory system	27	96	25,032.97	0.47%
00532	West Volusia Hospital Authority	10.10	Intraoperative and postprocedural complications and disorders of respiratory	1	1	23,384.51	0.44%
00532	West Volusia Hospital Authority	03.03	Aplastic and other anemias and other bone marrow failure syndromes	42	114	22,270.96	0.42%
00532	West Volusia Hospital Authority	18.09	Abnormal findings on examination of blood, without diagnosis	106	167	21,307.84	0.40%
00532	West Volusia Hospital Authority	12.01	Infections of the skin and subcutaneous tissue	40	89	20,695.02	0.39%
00532	West Volusia Hospital Authority	19.05	Injuries to the shoulder and upper arm	13	46	19,775.59	0.37%
00532	West Volusia Hospital Authority	02.02	Malignant neoplasms of digestive organs	7	106	19,042.76	0.36%
00532	West Volusia Hospital Authority	18.06	Symptoms and signs involving cognition, perception, emotional state and	48	78	18,515.72	0.35%
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ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Pe	
							Total
00532	West Volusia Hospital Authority	04.01	Disorders of thyroid gland	96	163	17,905.60	0.34%
00532	West Volusia Hospital Authority	05.02	Mental and behavioral disorders due to psychoactive substance use	38	85	17,431.19	0.33%
00532	West Volusia Hospital Authority	19.06	Injuries to the elbow and forearm	3	56	17,188.88	0.32%
00532	West Volusia Hospital Authority	09.05	Pulmonary heart disease and diseases of pulmonary circulation	10	50	16,378.19	0.31%
00532	West Volusia Hospital Authority	02.05	Melanoma and other malignant neoplasms of skin	14	59	15,970.38	0.30%
00532	West Volusia Hospital Authority	06.11	Other disorders of the nervous system	58	138	15,669.19	0.30%
00532	West Volusia Hospital Authority	19.08	Injuries to the hip and thigh	7	14	15,578.34	0.29%
00532	West Volusia Hospital Authority	02.09	Malignant neoplasms of female genital organs	5	77	15,179.09	0.29%
00532	West Volusia Hospital Authority	15.02	Supervision of high risk pregnancy	18	181	15,083.33	0.28%
00532	West Volusia Hospital Authority	07.06	Glaucoma	44	77	15,060.67	0.28%
00532	West Volusia Hospital Authority	01.01	Intestinal infectious diseases	11	15	14,430.18	0.27%
00532	West Volusia Hospital Authority	12.07	Disorders of skin appendages	21	34	14,350.44	0.27%
00532	West Volusia Hospital Authority	11.10	Other diseases of the digestive system	12	26	12,397.49	0.23%
00532	West Volusia Hospital Authority	21.07	Persons with potential health hazards related to communicable diseases	32	43	12,031.79	0.23%
00532	West Volusia Hospital Authority	06.07	Nerve, nerve root and plexus disorders	19	58	11,816.68	0.22%
00532	West Volusia Hospital Authority	21.08	Persons encountering health services in circumstances related to reproduction	39	155	11,791.97	0.22%
00532	West Volusia Hospital Authority	11.03	Diseases of appendix	2	6	11,759.90	0.22%
00532	West Volusia Hospital Authority	12.09	Other disorders of the skin and subcutaneous tissue	39	89	11,271.09	0.21%
00532	West Volusia Hospital Authority	05.09	Pervasive and specific developmental disorders	2	3	11,250.81	0.21%
00532	West Volusia Hospital Authority	13.03	Inflammatory polyarthropathies	42	95	10,546.41	0.20%
00532	West Volusia Hospital Authority	13.15	Other osteopathies	11	21	10,474.99	0.20%
00532	West Volusia Hospital Authority	13.14	Disorders of bone density and structure	29	90	9,280.40	0.17%
00532	West Volusia Hospital Authority	18.11	Abnormal findings on examination of other body fluids, substances and	32	88	9,062.71	0.17%
00532	West Volusia Hospital Authority	07.08	Disorders of optic nerve and visual pathways	5	6	8,886.52	0.17%
00532	West Volusia Hospital Authority	11.07	Diseases of peritoneum and retroperitoneum	2	19	8,809.81	0.17%
00532	West Volusia Hospital Authority	08.02	Diseases of middle ear and mastoid	8	17	8,329.46	0.16%
00532	West Volusia Hospital Authority	02.20	Neoplasms of uncertain behavior, polycythemia vera and myelodysplastic	37	64	7,895.78	0.15%
00532	West Volusia Hospital Authority	13.12	Disorders of synovium and tendon	22	43	7,775.73	0.15%
00532	West Volusia Hospital Authority	18.04	Symptoms and signs involving the nervous and musculoskeletal systems	33	63	7,737.47	0.15%
00532	West Volusia Hospital Authority	03.04	Coagulation defects, purpura and other hemorrhagic conditions	15	85	7,716.88	0.15%





Block of Business ID: Client ID:

EBMSI 00532

Paid Date:

1/1/2021 to 11/30/2021

Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Per	
		经多种的证券			自由 公主主	動から生まれ	Total
00532	West Volusia Hospital Authority	02.01	Malignant neoplasms of lip, oral cavity and pharynx	1	39	7,690.23	0.14%
00532	West Volusia Hospital Authority	07.02	Disorders of conjunctiva	10	19	7,533.39	0.14%
00532	West Volusia Hospital Authority	07.01	Disorders of eyelid, lacrimal system and orbit	35	52	6,781.39	0.13%
00532	West Volusia Hospital Authority	12.03	Dermatitis and eczema	34	55	6,625.80	0.12%
00532	West Volusia Hospital Authority	01.14	Human immunodeficiency virus [HIV] disease	15	55	6,508.55	0.12%
00532	West Volusia Hospital Authority	04.07	Other nutritional deficiencies	60	77	6,396.98	0.12%
00532	West Volusia Hospital Authority	05.03	Schizophrenia, schizotypal, delusional, and other non-mood psychotic disorders	15	67	6,352.07	0.12%
00532	West Volusia Hospital Authority	19.04	Injuries to the abdomen, lower back, lumbar spine, pelvis and external genitals	15	47	6,216.10	0.12%
00532	West Volusia Hospital Authority	07.07	Disorders of vitreous body and globe	15	24	6,079.96	0.11%
00532	West Volusia Hospital Authority	19.10	Injuries to the ankle and foot	22	40	6,023.31	0.11%
00532	West Volusia Hospital Authority	15.06	Complications of labor and delivery	4	4	5,503.87	0.10%
00532	West Volusia Hospital Authority	18.05	Symptoms and signs involving the genitourinary system	51	73	5,497.72	0.10%
00532	West Volusia Hospital Authority	02.14	Malignant neoplasms of ill-defined, other secondary and unspecified sites	5	26	5,464.11	0.10%
00532	West Volusia Hospital Authority	14.05	Other disorders of kidney and ureter	30	57	5,444.18	0.10%
00532	West Volusia Hospital Authority	19.03	Injuries to the thorax	7	9	5,244.97	0.10%
00532	West Volusia Hospital Authority	01.13	Viral hepatitis	21	42	4,998.56	0.09%
00532	West Volusia Hospital Authority	08.04	Other disorders of ear	22	43	4,989.34	0.09%
00532	West Volusia Hospital Authority	19.01	Injuries to the head	10	20	4,944.07	0.09%
00532	West Volusia Hospital Authority	01.16	Mycoses	33	43	4,601.74	0.09%
00532	West Volusia Hospital Authority	13.11	Disorders of muscles	17	42	4,496.28	0.08%
00532	West Volusia Hospital Authority	02.03	Malignant neoplasms of respiratory and intrathoracic organs	1	9	4,244.66	0.08%
00532	West Volusia Hospital Authority	07.03	Disorders of sclera, cornea, iris and ciliary body	9	14	4,242.33	0.08%
00532	West Volusia Hospital Authority	10.01	Acute upper respiratory infections	14	20	4,062.45	0.08%
00532	West Volusia Hospital Authority	10.02	Influenza and pneumonia	16	41	3,936.74	0.07%
00532	West Volusia Hospital Authority	04.04	Disorders of other endocrine glands	16	26	3,932.96	0.07%
00532	West Volusia Hospital Authority	14.11	Intraoperative and postprocedural complications and disorders of	1	2	3,586.10	0.07%
00532	West Volusia Hospital Authority	02.06	Malignant neoplasms of mesothelial and soft tissue	1	9	3,128.81	0.06%
00532	West Volusia Hospital Authority	14.09	Inflammatory diseases of female pelvic organs	15	18	2,913.74	0.05%
00532	West Volusia Hospital Authority	15.04	Other maternal disorders predominantly related to pregnancy	12	48	2,817.60	0.05%
00532	West Volusia Hospital Authority	19.07	Injuries to the wrist, hand and fingers	19	31	2,733.85	0.05%





Block of Business ID: Client ID: EBMSI 00532

Paid Date:

1/1/2021 to 11/30/2021

Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Percent of Total	
00532	West Volusia Hospital Authority	02.18	In situ neoplasms	7	20	2,692.93	0.05%
00532	West Volusia Hospital Authority	07.05	Disorders of choroid and retina	10	13	2,441.89	0.05%
00532	West Volusia Hospital Authority	17.08	Congenital malformations of the urinary system	2	3	2,426.74	0.05%
00532	West Volusia Hospital Authority	19.20	Other and unspecified effects of external causes	6	9	2,297.33	0.04%
00532	West Volusia Hospital Authority	13.01	Infectious arthropathies	2	21	2,108.90	0.04%
00532	West Volusia Hospital Authority	05.07	Disorders of adult personality and behavior	4	20	2,066.38	0.04%
00532	West Volusia Hospital Authority	01.15	Other viral diseases	7	10	2,065.27	0.04%
00532	West Volusia Hospital Authority	12.05	Urticaria and erythema	10	14	2,043.40	0.04%
00532	West Volusia Hospital Authority	13.07	Systemic connective tissue disorders	11	21	2,002.36	0.04%
00532	West Volusia Hospital Authority	04.08	Overweight, obesity and other hyperalimentation	5	12	1,888.31	0.04%
00532	West Volusia Hospital Authority	11.01	Diseases of oral cavity and salivary glands	11	16	1,759.03	0.03%
00532	West Volusia Hospital Authority	01.11	Viral infections characterized by skin and mucous membrane lesions	13	14	1,736.76	0.03%
00532	West Volusia Hospital Authority	06.03	Extrapyramidal and movement disorders	7	17	1,728.31	0.03%
00532	West Volusia Hospital Authority	19.02	Injuries to the neck	3	12	1,722.63	0.03%
00532	West Volusia Hospital Authority	18.10	Abnormal findings on examination of urine, without diagnosis	16	23	1,597.37	0.03%
00532	West Volusia Hospital Authority	08.03	Diseases of inner ear	2	13	1,533.82	0.03%
00532	West Volusia Hospital Authority	18.07	Symptoms and signs involving speech and voice	5	12	1,439.17	0.03%
00532	West Volusia Hospital Authority	01.05	Infections with a predominantly sexual mode of transmission	7	9	1,334.69	0.03%
00532	West Volusia Hospital Authority	09.02	Chronic rheumatic heart diseases	11	12	1,252.69	0.02%
00532	West Volusia Hospital Authority	01.21	Bacterial and viral infectious agents	10	13	1,246.99	0.02%
00532	West Volusia Hospital Authority	12.06	Radiation-related disorders of the skin and subcutaneous tissue	9	10	1,246.40	0.02%
00532	West Volusia Hospital Authority	13.16	Chondropathies	3	6	1,233.80	0.02%
00532	West Volusia Hospital Authority	15.05	Maternal care related to the fetus and amniotic cavity and possible delivery	8	12	1,210.81	0.02%
00532	West Volusia Hospital Authority	06.04	Other degenerative diseases of the nervous system	9	11	1,205.55	0.02%
00532	West Volusia Hospital Authority	07.10	Visual disturbances and blindness	8	11	1,193.41	0.02%
00532	West Volusia Hospital Authority	05.06	Behavioral syndromes associated with physiological disturbances and	8	10	1,145.52	0.02%
00532	West Volusia Hospital Authority	15.09	Other obstetric conditions, not elsewhere classified	11	18	1,130.82	0.02%
00532	West Volusia Hospital Authority	17.03	Congenital malformations of the circulatory system	4	12	982.84	0.02%
00532	West Volusia Hospital Authority	19.14	Burns and corrosions of external body surface, specified by site	3	6	860.66	0.02%
00532	West Volusia Hospital Authority	02.13	Malignant neoplasms of thyroid and other endocrine glands	3	9	837.82	0.02%





Block of Business ID: Client ID: EBMSI 00532

Paid Date:

1/1/2021 to 11/30/2021

Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Percent of	
00500							Total
00532	West Volusia Hospital Authority	19.12	Injury of unspecified body region	3	5	783.39	0.01%
00532	West Volusia Hospital Authority	10.07	Other respiratory diseases principally affecting the interstitium	6	9	750.93	0.01%
00532	West Volusia Hospital Authority	12.04	Papulosquamous disorders	5	6	716.89	0.01%
00532	West Volusia Hospital Authority	05.10	Behavioral and emotional disorders with onset usually occurring in childhood	3	5	677.54	0.01%
00532	West Volusia Hospital Authority	18.13	Abnormal tumor markers	12	14	653.30	0.01%
00532	West Volusia Hospital Authority	13.18	Intraoperative and postprocedural complications and disorders of	2	7	640.60	0.01%
00532	West Volusia Hospital Authority	09.10	Other and unspecified disorders of the circulatory system	5	7	613.59	0.01%
00532	West Volusia Hospital Authority	19.18	Poisoning by, adverse effects of and underdosing of drugs, medicaments and	4	7	608.82	0.01%
00532	West Volusia Hospital Authority	05.01	Mental disorders due to known physiological conditions	2	6	570.33	0.01%
00532	West Volusia Hospital Authority	02.22	Neoplasms of unspecified behavior	3	4	518.81	0.01%
00532	West Volusia Hospital Authority	06.08	Polyneuropathies and other disorders of the peripheral nervous system	5	6	517.75	0.01%
00532	West Volusia Hospital Authority	08.01	Diseases of external ear	4	5	502.73	0.01%
00532	West Volusia Hospital Authority	17.10	Other congenital malformations	2	3	432.95	0.01%
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	10.03	Other acute lower respiratory infections	2	3	360.61	0.01%
00532	West Volusia Hospital Authority	04.06	Malnutrition	1	1	351.39	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	2	2	277.77	0.01%
00532	West Volusia Hospital Authority	10.06	Lung diseases due to external agents	1	2	240.94	0.00%
00532	West Volusia Hospital Authority	10.09	Other diseases of the pleura	11	16	217.43	0.00%
00532	West Volusia Hospital Authority	04.10	Postprocedural endocrine and metabolic complications and disorders, not	1	2	199.28	0.00%
00532	West Volusia Hospital Authority	06.10	Cerebral palsy and other paralytic syndromes	1	2	194.37	0.00%
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	06.09	Diseases of myoneural junction and muscle	1	2	165.60	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	01.19	Pediculosis, acariasis and other infestations	2	3	125.94	0.00%
00532	West Volusia Hospital Authority	21.14	Persons encountering health services in other circumstances	2	2	120.75	0.00%
00532	West Volusia Hospital Authority	17.11	Chromosomal abnormalities, not elsewhere classified	1	1	106.05	0.00%
00532	West Volusia Hospital Authority	13.21	Chronic Gout	2	2	95.00	0.00%
10 M M M M M M M M M M M M M M M M M M M		10.21		2	2	33.00	0.0070





Block of Business ID: Client ID: EBMSI

00532

Paid Date:

1/1/2021 to 11/30/2021

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount P	ercent of Total
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	01.18	Helminthiases	1	1	65.23	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	16.09	Digestive system disorders of newborn	1	1	57.55	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%
				7287	19140	5,305,691.58	100.00%





Summary of Claims Paid By Location

Block of Business ID: Client ID:

EBMSI 00532

Paid Date: 11/1/2021 to 11/30/2021

Description	Claims	Medical	Dental	Vision	Prescription	Disability	Total Paid
00532-West Volusia Hospital Authority							
DeLand	2	0.00	0.00	0.00	0.00	0.00	0.00
Deltona	13	10,900.19	0.00	0.00	0.00	0.00	10,900.19
miCareDeLand	1425	200,629.25	0.00	0.00	0.00	0.00	200,629.25
miCareDelton	1578	245,419.94	0.00	0.00	0.00	0.00	245,419.94
miCarePierso	147	9,244.33	0.00	0.00	0.00	0.00	9,244.33
00532 Totals:	3165	466,193.71	0.00	0.00	0.00	0.00	466,193.71





Summary of Claims Paid By Location

Block of Business ID: Client ID:

EBMSI 00532

Paid Date: 1/1/2021 to 11/30/2021

Description	Claims	Medical	Dental	Vision	Prescription	Disability	Total Paid
00532-West Volusia Hospital Authority							
DeLand	398	57,720.73	0.00	0.00	0.00	0.00	57,720.73
Deltona	490	144,750.39	0.00	0.00	0.00	0.00	144,750.39
miCareDeLand	17414	2,321,396.41	0.00	0.00	0.00	0.00	2,321,396.41
miCareDelton	18024	2,546,682.96	0.00	0.00	0.00	0.00	2,546,682.96
miCarePierso	1712	222,348.51	0.00	0.00	0.00	0.00	222,348.51
Pierson	71	12,792.58	0.00	0.00	0.00	0.00	12,792.58
00532 Totals:	38109	5,305,691.58	0.00	0.00	0.00	0.00	5,305,691.58



Top Providers by Paid Amount for Tins: '550799729'

Block of Business ID: Client ID:

EBMSI 00532

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Ţ	IdN	Provider	City	State	Specialty	Claim Count	Billed Charges	Over UCR	PPO Discount	Allowed	Plan Paid Patient Res	t Resp
55-0799729	1467907626	NEFHS Deland 1205	Deland	긥	Hospital	ю	274.00	0.00	0.00	319.00	0.00	0.00

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Top Providers by Paid Amount for Tins: '550799729'

Block of Business ID: Client ID: EBMSI 00532

Paid Date: 1/1/2021 to 11/30/2021

rin	NPI	Provider	City	State	Specialty	Claim Count	Billed Charges	Over UCR	PPO Discount	Allowed	Plan Paid Pa	tient Resp
										AND DESCRIPTION OF THE PARTY OF		
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	24	726.00	0.00	80.80	862.00	854.38	25.00
55-0799729	1992792311	Nefhs Pierson	Pierson	FL	Clinic	13	377.50	0.00	63.05	191.95	463.79	20.00
55-0799729	1467907626	Family Health Source	Deland	FL	Family Practice	2	0.00	0.00	0.00	0.00	117.50	5.00
5-0799729	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	37	3,793.32	0.00	5.94	3,787.38	19.06	0.00
5-0799729	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
5-0799729	1750546313	NEFHS Deltona 2160 Howland	Deltona	FL	Hospital	3	377.00	0.00	0.00	377.00	0.00	0.00
5-0799729	1396282208	NEFHS Daytona	South Daytona	FL	Hospital	3	172.00	0.00	0.00	172.00	0.00	0.00



Top Providers by Paid Amount for Tins: '204552956'

Block of Business ID: Client ID:

EBMSI 00532

Paid Date: 11/1/2021 to 11/30/2021

Patient Resp	0.00
Plan Paid Patient R	0.00
Allowed	0.00
PPO Discount	0.00
Over UCR	0.00
Billed Charges	0.00
Claim Count	869
Specialty	Clinic
State	M
City	Billings
ider	e LLC
Prov	Micar
Ē	20-4552956 1942540356 Micare LLC
<u>e</u>	20-4552956

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Top Providers by Paid Amount for Tins: '204552956'

Block of Business ID: Client ID:

EBMSI 00532

Paid Date: 1/1/2021 to 11/30/2021

Plan Paid Patient Resp	0.00
Plan Paid	0.00
Allowed	0.00
PPO Discount	0.00
Over UCR	0.00
Billed Charges	0.00
Claim Count	8757
Specialty	Clinic
State	TW
City	Billings
Provider	Micare LLC
IĀN	1942540356
Ē	20-4552956



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CLAIMS PAID BY MONTH	Paid Date: 1/1/21 to 11/31/21

Location Name	Month	Hospital	Laboratory	PCP	Speciality	Facility Physician	Total Claims Count	Total Paid Claims	Total Fixed Costs	Employee Count	PEPM Cost/ Employee	Hospital PEPM	Lab PEPM	PCP PEPM	Speciality PEPM	Facility PEPM
00532 - West Volus	ia Hospital Authority															
miCareDeLand	01-2021	\$0.00	\$3,019.53	\$0.00	\$49,132.91	\$0.00	429	\$52,152.44	\$0.00	1169	\$44.61	\$0.00	\$2.58	\$0.00	\$42.03	\$0.00
miCareDeLand	02-2021	\$0.00	\$11,639.77	\$0.00	\$83,073.60	\$0.00	692	\$94,713.37	\$0.00	1180	\$80.27	\$0.00	\$9.86	\$0.00	\$70.40	\$0.00
miCareDeLand	03-2021	\$399.64	\$19,342.96	\$0.00	\$62,106.24	\$0.00	804	\$81,848.84	\$0.00	1198	\$68.32	\$0.33	\$16.15	\$0.00	\$51.84	\$0.00
miCareDeLand	04-2021	\$11,384.91	\$18,064.94	\$0.00	\$155,406.21	\$2,382.30	1124	\$187,238.36	\$0.00	1206	\$155.26	\$9.44	\$14.98	\$0.00	\$128.86	\$1.98
miCareDeLand	05-2021	\$12,871.90	\$9,068.04	\$0.00	\$63,751.88	\$433.53	742	\$86,125.35	\$0.00	1133	\$76.02	\$11.36	\$8.00	\$0.00	\$56.27	\$0.38
miCareDeLand	06-2021	\$13,900.10	\$15,700.50	\$0.00	\$75,243.14	\$83.26	826	\$104,927.00	\$0.00	1065	\$98.52	\$13.05	\$14.74	\$0.00	\$70.65	\$0.08
miCareDeLand	07-2021	\$42,632.07	\$11,668.44	\$0.00	\$106,124.65	\$393.03	1057	\$160,818.19	\$0.00	980	\$164.10	\$43.50	\$11.91	\$0.00	\$108.29	\$0.40
miCareDeLand miCareDeLand	08-2021 09-2021	\$36,743.00	\$5,084.79	\$0.00	\$61,766.80	\$379.92	544	\$103,974.51	\$0.00	889	\$116.96	\$41.33	\$5.72	\$0.00	\$69.48	\$0.43
		\$83,000.04	\$11,786.57	\$0.00	\$70,548.00	\$1,975.06	823	\$167,309.67	\$0.00	812	\$206.05	\$102.22	\$14.52	\$0.00	\$86.88	\$2.43
miCareDeLand	10-2021	\$47,743.79	\$8,759.20	\$0.00	\$64,496.70	\$44.34	646	\$121,044.03	\$0.00	722	\$167.65	\$66.13	\$12.13	\$0.00	\$89.33	\$0.08
miCareDeLand	11-2021	\$44,697.02	\$15,889.15	\$0.00	\$61,305.18	\$36.95	672	\$121,928.30	\$0.00	698	\$174.68	\$64.04	\$22.76	\$0.00	\$87.83	\$0.05
	Subtotal:	\$293,372.47	\$130,023.89	\$0.00	\$852,955.31	\$5,728.39	8359	\$1,282,080.06	\$0.00	11052	\$116.00	\$26.54	\$11.76	\$0.00	\$77.18	\$0.52
miCareDelton	01-2021	\$0.00	\$5,002.12	\$0.00	\$50,507.76	\$0.00	475	\$55,509.88	\$0.00	930	\$59.69	\$0.00	\$5.38	\$0.00	\$54.31	\$0.00
miCareDelton	02-2021	\$0.00	\$12,705.80	\$0.00	\$79,621.20	\$0.00	787	\$92,327.00	\$0.00	925	\$99.81	\$0.00	\$13.74	\$0.00	\$86.08	\$0.00
miCareDelton	03-2021	\$0.00	\$22,739.61	\$0.00	\$91,183.73	\$0.00	1054	\$113,923.34	\$0.00	919	\$123.96	\$0.00	\$24.74	\$0.00	\$99.22	\$0.00
miCareDelton	04-2021	\$44,699.87	\$19,260.88	\$0.00	\$177,755.94	\$669.76	1288	\$242,386.45	\$0.00	910	\$266.36	\$49.12	\$21.17	\$0.00	\$195.34	\$0.74
miCareDelton	05-2021	\$7,459.40	\$8,118.85	\$0.00	\$81,102.95	\$406.72	734	\$97,087.92	\$0.00	835	\$116.27	\$8.93	\$9.72	\$0.00	\$97.13	\$0.49
miCareDelton	06-2021	\$23,994.39	\$14,062.15	\$0.00	\$97,861.77	\$205.07	854	\$136,123.38	\$0.00	822	\$165.60	\$29.19	\$17.11	\$0.00	\$119.05	\$0.25
miCareDelton	07-2021	\$55,581.99	\$16,756.38	\$0.00	\$156,907.89	\$361.81	1109	\$229,608.07	\$0.00	762	\$301.32	\$72.94	\$21.99	\$0.00	\$205.92	\$0.47
miCareDelton	08-2021	\$9,981.21	\$10,189.12	\$0.00	\$62,888.02	\$319.95	682	\$83,378.30	\$0.00	708	\$117.77	\$14.10	\$14.39	\$0.00	\$88.82	\$0.45
miCareDelton	09-2021	\$5,583.24	\$13,554.50	\$0.00	\$107,152.41	\$161.12	879	\$126,451.27	\$0.00	642	\$196.96	\$8.70	\$21.11	\$0.00	\$166.90	\$0.25
miCareDelton	10-2021	\$46,583.95	\$13,699.60	\$0.00	\$79,178.36	\$170.35	741	\$139,632.26	\$0.00	598	\$233.50	\$77.90	\$22.91	\$0.00	\$132.41	\$0.28
miCareDelton	11-2021	\$33,593.52	\$15,320.17	\$0.00	\$112,920.11	\$842.12	800	\$162,675.92	\$0.00	585	\$278.08	\$57.42	\$26.19	\$0.00	\$193.03	\$1.44
	Subtotal:	\$227,477.57	\$151,409.18	\$0.00	\$1,097,080.14	\$3,136.90	9403	\$1,479,103.79	\$0.00	8636	\$171.27	\$26.34	\$17.53	\$0.00	\$127.04	\$0.36
miCarePierso	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
miCarePierso	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
miCarePierso	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
miCarePierso	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
miCarePierso	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
miCarePierso	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
miCarePierso	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
miCarePierso	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
niCarePierso	09-2021	\$4,362.27	\$1,564.50	\$0.00	\$7,460.94	\$7.39	90	\$13,395.10	\$0.00	82	\$163.35	\$53.20	\$19.08	\$0.00	\$90.99	\$0.09
niCarePierso niCarePierso	10-2021 11-2021	\$394.33 \$151.31	\$434.22 \$1,554.14	\$0.00 \$0.00	\$7,638.02 \$6,455.79	\$7.39	59	\$8,473.96	\$0.00	76	\$111.50	\$5.19	\$5.71	\$0.00	\$100.50	\$0.10
IIICarerierso	Subtotal:	\$25,553.64	\$13,036.20	\$0.00	\$75,115.98	\$0.00 \$365,38	72 860	\$8,161.24 \$114.071.20	\$0.00 \$0.00	79	\$103.31	\$1.92	\$19.67	\$0.00	\$81.72	\$0.00
N/A	01-2021	\$0.00	\$0.00	\$0.00	\$75,115.96	\$365.38	0	\$114,071.20		1203	\$94.82	\$21.24	\$10.84	\$0.00	\$62.44	\$0.30
N/A	03-2021	\$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
N/A	04-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$272,312.50 \$172,375.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
N/A	05-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$172,375.00 \$119,875.00	0	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$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	\$119,875.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 \$0.00	\$0.00
N/A	07-2021	\$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
N/A	09-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$44,825.50	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
N/A	10-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$172,625.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CASE.	Subtotal:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	CATANESSA SIGNATURA	SOLVED STATE OF STREET	0	STATE OF THE PARTY	SONONISONNO SONO			TATANS LINE BUTTON	CALL STREET
								\$0.00	\$1,264,200.50		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Total:	\$546,403.68	\$294,469.27	\$0.00	\$2,025,151.43	\$9,230.67	18622	\$2,875,255.05	\$1,264,200.50	20891	\$137.63	\$26.15	\$14.10	\$0.00	\$96.94	\$0.44

Parameters

Beginning Location:

Ending Location:

Paid Date: 1/1/2021-11/30/2021

Reporting Period: CLIENTYTD Location: 000-zzzzz

^{**} Census Count Comments: Membership is counted per location, per department, or per plan for each month; an individual with a change may be counted more than one time.



EBMS

January 20, 2022

Submission Report for

WVHA Board Members



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Client: Paid Dates: Location: West Volusia Hospital Authority 12/1/2021 to 12/31/2021

Department: All Benefit Plan: All TIN: All

Plan Experi	ence Summa	iry
Claim Counts 3077 Claim Type	Total Paid	Per EE/Mo
Medical	\$596,894	\$469
Professional	\$223,722	\$176
Facility	\$373,172	\$293
PBM	\$0	\$0
Total Plan Paid:	\$596,894	\$469

Cash Flow Sur	nmary
Charges	\$8,663,281
less Disallowed	\$8,056,237
Allowed	\$607,045
less Member	\$10,948
less Adjustments	-\$798
Paid Benefit	\$596,894
plus Admin Costs	\$165,229
Total Plan Paid:	\$762,123

Disallowed Charges by Category							
Disallowed Category	Amount	% of Gross					
Addl Info Not Provided	\$208,372	2.41%					
Duplicate Charges	\$2,736,274	31.58%					
Plan Limitations	\$2,885,091	33.30%					
UCR Reductions	\$103	0.00%					
Other	\$2,226,397	25.70%					
Total:	\$8,056,237	92.99%					

	Census										
Census Date: 12/31/2021	Male Emp	Female Emp	Total Employees	Male Spouse	Female Spouse	Male Dep	Female Dep	Total Medical	Total Dental	Total Vision	
0 to 19	15	14	29	0	0	0	0	29	0	0	
20 to 25	24	24	48	0	0	0	0	48	0	0	
26 to 29	29	27	56	0	0	0	0	56	0	0	
30 to 39	104	97	201	0	0	0	0	201	0	0	
40 to 49	105	170	275	0	0	0	0	275	0	0	
50 to 59	160	245	405	0	0	0	0	405	0	0	
60 to 64	75	120	195	0	0	0	0	195	0	0	
65 and Older	22	43	65	0	0	0	0	65	0	0	
Totals	534	740	1274	0	0	0	0	1274	0	0	
Average Age	46.55	49.23	48.11	0.00	0.00	0.00	0.00	48.11	0.00	0.00	

То	p Paid		Plan Paym	ent by Age & Cla	aimant Type	
Name	Claim Count	Paid	Census Date: 12/31/2021	Employee	Spouse	Dependent
Medical Center Of Deltona	26	\$98,216	0 to 19	\$340	\$0	\$0
Halifax Hospital Medical	16	\$89,219	20 to 25	\$4,009	\$0	\$0
Adventhealth Fish	57	\$73,820	26 to 29	\$7,275	\$0	\$0
Adventhealth Deland	34	\$59,478	30 to 39	\$50,320	\$0	\$0
Florida Cancer Specialists	81	\$54,740	40 to 49	\$122,735	\$0	\$0
Shands UF	7	\$23,909	50 to 59	\$226,119	\$0	\$0
Quest Diagnostics Tampa	456	\$15,707	60 to 64	\$113,569	\$0	\$0
Medical Center Of Deltona	2	\$12,789	65 and Older	\$72,527	\$0	\$0
Adventhealth Orlando	1	\$12,766	Totals	\$596,894	\$0	\$0
6 Radiology Associates	113	\$12,657				

Claims Paid	by Month
January 21	\$195,932
February 21	\$461,274
March 21	\$432,415
April 21	\$662,120
May 21	\$391,136
June 21	\$424,614
July 21	\$819,433
August 21	\$340,483
September 21	\$548,995
October 21	\$563,096
November 21	\$466,194
December 21	\$596,894
Tota	\$5,902,586

Average Lag & Average Spend (rolling 12 months)									
Product	Avg Paid per Day	Avg Lag Days	Lag Dollars						
Medical	\$16,351	45	\$735,795						
Vision	\$0	52	\$0						
Vision RX	\$0	130	\$0						
	1	otal:	\$735,795						





Client: Paid Dates: Location: West Volusia Hospital Authority 12/1/2021 to 12/31/2021

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	\$1,200	\$763	\$437	\$0	\$0	\$437	0.07%	
ANESTHESIA	41	\$83,015	\$72,421	\$10,594	\$0	\$0	\$10,594	1.77%	
CHIROPRACTIC	24	\$872	\$450	\$422	\$160	\$0	\$262	0.04%	
COVID-19	42	\$4,675	\$4,595	\$80	\$0	\$0	\$80	0.01%	
DIALYSIS	94	\$2,966,781	\$2,963,238	\$3,543	\$0	\$0	\$3,543	0.59%	
DME/APPLIANCE	3	\$1,050	\$1,050	\$0	\$0	\$0	\$0	0.00%	
EMERG ROOM CHRGS	375	\$717,500	\$627,265	\$90,236	\$2,400	\$0	\$87,836	14.72%	
INELIGIBLE	560	\$728,218	\$728,218	\$0	\$0	\$0	\$0	0.00%	
INPATIENT PHYS	180	\$42,254	\$33,513	\$8,741	\$0	\$0	\$8,741	1.46%	
IP HOSP CHARGES	37	\$828,013	\$652,864	\$175,149	\$700	\$0	\$174,449	29.23%	
MATERNITY	1	\$2,550	\$2,550	\$0	\$0	\$0	\$0	0.00%	
MEDICAL MISC	34	\$6,035	\$4,188	\$1,847	\$149	\$0	\$1,697	0.28%	
OFFICE VISIT	831	\$94,469	\$59,467	\$35,002	\$3,060	\$0	\$31,942	5.35%	
OP PHYSICIAN	195	\$1,118,611	\$1,102,131	\$16,479	\$103	\$0	\$16,377	2.74%	
OTHER	258	\$4	\$4	\$0	\$0	-\$798	\$798	0.13%	
OUTPAT HOSP	25	\$888,614	\$878,610	\$10,004	\$53	\$0	\$9,951	1.67%	
PSYCHIATRIC	130	\$37,255	\$19,717	\$17,538	\$590	\$0	\$16,948	2.84%	
RADIATION /CHEMO	70	\$122,516	\$84,990	\$37,526	\$18	\$0	\$37,508	6.28%	
SLEEP DISORDER	11	\$935	\$935	\$0	\$0	\$0	\$0	0.00%	
SURG FACILITY	42	\$369,211	\$268,293	\$100,918	\$625	\$0	\$100,293	16.80%	
SURGERY	178	\$10,177	\$9,026	\$1,151	\$0	\$0	\$1,151	0.19%	
SURGERY IP	7	\$3,309	\$2,130	\$1,179	\$0	\$0	\$1,179	0.20%	
SURGERY OP	133	\$163,965	\$128,927	\$35,038	\$0	\$0	\$35,038	5.87%	
THERAPY	262	\$28,150	\$17,030	\$11,119	\$890	\$0	\$10,229	1.71%	
URGENT CARE	3	\$596	\$422	\$174	\$25	\$0	\$149	0.03%	
WELLNESS	2022	\$110,324	\$103,092	\$7,231	\$10	\$0	\$7,221	1.21%	
XRAY/ LAB	3240	\$332,983	\$290,347	\$42,637	\$2,165	\$0	\$40,472	6.78%	
Total		\$8,663,281	\$8,056,237	\$607,045	\$10,948	-\$798	\$596,894		





Client: Paid Dates: West Volusia Hospital Authority 1/1/2021 to 12/31/2021

Department: All Benefit Plan: All

Location:

All

TIN: All

Plan Experience Summary			Cash Flow Su	mmary	Disallowed Charges by Category			
Claim Counts 41307 Claim Type	Total Paid	Per EE/Mo	Charges less Disallowed	\$51,195,609	Disallowed Category Addl Info Not Provided	\$1,186,623	% of Gross 2.07%	
Medical Professional Facility PBM Vision	\$5,902,586 \$3,013,328 \$2,889,258 \$0 \$0	\$386 \$197 \$189 \$0 \$0	plus Admin Costs	\$136,118 -\$941 \$5,902,586 \$1,429,429		\$5,385,224 \$23,453,044 \$3,402 \$6,835 \$21,160,481	9.41% 40.98% 0.01% 0.01% 36.97%	
Total Plan Paid:	\$5,902,586	\$386	Total Plan Paid:	\$7,332,015	Total:	\$51,195,609	89.45%	

NAME OF THE	Census										
Census Date: 12/31/2021	Male Emp	Female Emp	Total Employees	Male Spouse	Female Spouse	Male Dep	Female Dep	Total Medical	Total Dental	Total Vision	
0 to 19	15	14	29	0	0	0	0	29	0	0	
20 to 25	24	24	48	0	0	0	0	48	0	0	
26 to 29	29	27	56	0	0	0	0	56	0	0	
30 to 39	104	97	201	0	0	0	0	201	0	0	
40 to 49	105	170	275	0	0	0	0	275	0	0	
50 to 59	160	245	405	0	0	0	0	405	0	0	
60 to 64	75	120	195	0	0	0	0	195	0	0	
65 and Older	22	43	65	0	0	0	0	65	0	0	
Totals	534	740	1274	0	0	0	0	1274	0	0	
Average Age	46.55	49.23	48.11	0.00	0.00	0.00	0.00	48.11	0.00	0.00	

To	p Paid		Plan Payment by Age & Claimant Type						
Name	Claim Count	Paid	Census Date: 12/31/2021	Employee	Spouse	Dependent			
Medical Center Of Deltona	503	\$924,047	0 to 19	\$14,072	\$0	\$0			
Halifax Hospital Medical	258	\$879,104	20 to 25	\$44,395	\$0	\$0			
Florida Cancer Specialists	1207	\$549,518	26 to 29	\$138,424	\$0	\$0			
Adventhealth Fish	638	\$467,437	30 to 39	\$726,754	\$0	\$0			
Adventhealth Deland	525	\$384,531	40 to 49	\$934,195	\$0	\$0			
Quest Diagnostics Tampa	5334	\$300,905	50 to 59	\$2,263,319	\$0	\$0			
6 Radiology Associates	1616	\$169,201	60 to 64	\$1,092,397	\$0	\$0			
Orange City Surgery	247		65 and Older	\$689,029	\$0	\$0			
Orange City Surgery	320	\$118,808	Totals	\$5,902,586	\$0	\$0			
Gastroenterology Of	797	\$105,288	ACCUSANCE AND ALBERT MADE IN TAXABLE AND ACCUSANCE AND ACC	CONTRACTOR AND CONTRACTOR CONTRACTOR					
Claims P	aid by Month		Average Lag & A	Average Spend (r	olling 12 mor	iths)			

Subtrounter Glogy Ci		4.00,000			
C	laims Paid by Month			Average Lag & Average S	Spend (rolling 1
January 21		\$195,932	Product	Avg Paid per Day	Avg Lag Days
February 21		\$461,274	Medical	\$16,351	45
March 21		\$432,415	Vision	\$0	52
April 21		\$662,120	RX	\$0	130
May 21		\$391,136			Total:
June 21		\$424,614	ADDISON NO.		iotai.
July 21		\$819,433			
August 21		\$340,483			
September 21		\$548,995			
October 21		\$563,096			
November 21		\$466,194			
December 21		\$596,894			
	Total:	\$5,902,586			



Lag Dollars



Client: Paid Dates: Location: West Volusia Hospital Authority 1/1/2021 to 12/31/2021 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	31	\$9,481	\$6,015	\$3,466	\$50	\$0	\$3,416	0.06%			
AMBULANCE	20	\$127,207	\$127,207	\$0	\$0	\$0	\$0	0.00%			
ANESTHESIA	546	\$877,504	\$782,179	\$95,325	\$0	\$0	\$95,325	1.61%			
CHIROPRACTIC	310	\$9,206	\$3,774	\$5,432	\$790	\$0	\$4,642	0.08%			
COVID-19	741	-\$240,546	-\$246,844	\$6,297	\$0	\$0	\$6,297	0.11%			
DIALYSIS	587	\$9,067,942	\$9,042,368	\$25,574	\$0	\$0	\$25,574	0.43%			
DME/APPLIANCE	43	\$39,649	\$39,649	\$0	\$0	\$0	\$0	0.00%			
EMERG ROOM CHRGS	6075	\$12,672,709	\$12,032,217	\$640,493	\$18,813	\$0	\$621,680	10.53%			
HOME HEALTH CARE	11	\$0	\$0	\$0	\$0	\$0	\$0	0.00%			
HOSPICE CARE	2	\$364	\$364	\$0	\$0	\$0	\$0	0.00%			
INELIGIBLE	3115	\$1,966,201	\$1,966,057	\$144	\$0	\$0	\$144	0.00%			
INJECTION	13	\$0	\$0	\$0	\$0	\$0	\$0	0.00%			
INPATIENT PHYS	2354	\$552,463	\$457,145	\$95,319	\$0	\$0	\$95,319	1.61%			
IP HOSP CHARGES	613	\$7,728,842	\$6,790,805	\$938,038	\$5,975	\$0	\$932,063	15.79%			
MATERNITY	56	\$34,605	\$33,367	\$1,238	\$0	\$0	\$1,238	0.02%			
MEDICAL MISC	930	\$122,926	\$91,217	\$31,709	\$1,218	\$0	\$30,491	0.52%			
OFFICE VISIT	12536	\$1,940,634	\$1,310,874	\$629,760	\$46,140	\$0	\$583,620	9.89%			
OP PHYSICIAN	2520	\$3,801,003	\$3,616,752	\$184,251	\$1,424	\$0	\$182,827	3.10%			
OTHER	3303	\$10,210	\$10,032	\$178	\$0	-\$941	\$1,119	0.02%			
OUTPAT HOSP	79	\$1,882,664	\$1,838,096	\$44,568	\$1,272	\$0	\$43,296	0.73%			
PSYCHIATRIC	2036	\$464,038	\$274,804	\$189,234	\$7,855	\$0	\$181,379	3.07%			
RADIATION /CHEMO	1114	\$2,017,860	\$1,465,921	\$551,940	\$159	\$0	\$551,781	9.35%			
SLEEP DISORDER	160	\$18,356	\$18,356	\$0	\$0	\$0	\$0	0.00%			
SUBS ABUSE	25	\$44,349	\$43,674	\$676	\$100	\$0	\$576	0.01%			
SURG FACILITY	589	\$5,488,787	\$4,530,813	\$957,973	\$8,265	\$0	\$949,708	16.09%			
SURGERY	2628	\$226,271	\$185,751	\$40,520	\$0	\$0	\$40,520	0.69%			
SURGERY IP	271	\$479,032	\$410,257	\$68,775	\$0	\$0	\$68,775	1.17%			
SURGERY OP	1388	\$1,802,970	\$1,394,998	\$407,973	\$13	\$0	\$407,960	6.91%			
THERAPY	4142	\$413,017	\$235,191	\$177,825	\$14,520	\$0	\$163,305	2.77%			
URGENT CARE	16	\$3,027	\$2,853	\$174	\$25	\$0	\$149	0.00%			
VISION	59	\$1,935	\$1,935	\$0	\$0	\$0	\$0	0.00%			
WELLNESS	16075	\$683,573	\$561,242	\$122,331	\$13	\$0	\$122,318	2.07%			
XRAY/ LAB	47104	\$4.987.091	\$4,168,540	\$818,550	\$29,486	\$0	\$789,064	13.37%			
Totals		\$57,233,373	\$51,195,609	\$6,037,763	\$136,118	-\$941	\$5,902,586				





PCORI Membership Count

Block of Business ID: EBMSI Eligibility Date: : 1/1/2021 to 12/31/2021

Client ID: 00532

Month-Year	Employee Count	Dependent Count	Total Member					
00532-West Volus	00532-West Volusia Hospital Authority							
1/1/2021	2228	0	2228					
2/1/2021	2233	0	2233					
3/1/2021	2246	0	2246					
4/1/2021	2246	0	2246					
5/1/2021	2091	0	2091					
6/1/2021	2005	0	2005					
7/1/2021	1852	0	1852					
8/1/2021	1695	0	1695					
9/1/2021	1535	0	1535					
10/1/2021	1396	0	1396					
11/1/2021	1377	0	1377					
12/1/2021	1358	0	1358					
Total Member Days								

1,855.17





Enrollment Counts by Postal Code

Block of Business ID: Client ID:

EBMSI 00532

As Of Date: 12/31/2021

Postal Code	Employee Count	Dependent Count	Total Count
32102	2	0	2
32105	2	0	2
32114	1	0	1
32130	47	0	47
32180	67	0	67
32190	20	0	20
32713	44	0	44
32720	316	0	316
32724	232	0	232
32725	226	0	226
32738	191	0	191
32739	1	0	1
32744	28	0	28
32763	88	0	88
32764	9	0	9
Total	1274	0	1274





Tier Census by Product 12/1/2021

Block of Business ID:

EBMSI

Client ID: Status: 00532 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	1269	541	728	0	0	0	0	1269
		Subtotal for Active:	1269	541	728	0	0	0	0	1269
		Total for Medical:	1269	541	728	0	0	0	0	1269





Tier Census by Product 12/15/2021

Block of Business ID:

EBMSI

Client ID: Status: 00532 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
19 - T 19 - T 1	Active	Employee Only	1271	532	739	0		0 0	0	1271
		Subtotal for Active:	1271	532	739	0		0	0	1271
		Total for Medical:	1271	532	739	0		0	0	1271





Tier Census by Product 12/31/2021

Block of Business ID:

EBMSI 00532

Client ID: 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	1274	534	740	0	0	0	0	1274
		Subtotal for Active:	1274	534	740	0	0	0	0	1274
		Total for Medical:	1274	534	740	0	0	0	0	1274





Benefit Analysis Summary

Block of Business ID: Client ID: EBMSI 00532

Paid Date:

12/1/2021 to 12/31/2021

	Line Count	Charge	Ineligible	Cost Savings	Allowed	Patient Responsibility	Adjustments	Paid	% Paid	
00532-West Volusia I	Hospital A	uthority								
ALLERGY CARE	2	1,200.00	0.00	763.44	436.56	0.00	0.00	436.56	0.07%	
ANESTHESIA	41	83,014.80	4,402.60	68,018.38	10,593.82	0.00	0.00	10,593.82	1.77%	
CHIROPRACTIC	24	872.00	0.00	449.68	422.32	160.00	0.00	262.32	0.04%	
COVID-19	42	4,674.94	4,474.94	120.00	80.00	0.00	0.00	80.00	0.01%	
DIALYSIS	94	2,966,781.05	2,803,560.85	159,676.84	3,543.36	0.00	0.00	3,543.36	0.59%	
DME/APPLIANCE	3	1,050.00	1,050.00	0.00	0.00	0.00	0.00	0.00	0.00%	
EMERG ROOM	375	717,500.19	130,369.10	496,895.57	90,235.52	2,400.00	0.00	87,835.52	14.72%	
INELIGIBLE	560	728,218.12	728,218.12	0.00	0.00	0.00	0.00	0.00	0.00%	
INPATIENT PHYS	180	42,253.79	21,276.42	12,236.84	8,740.53	0.00	0.00	8,740.53	1.46%	
IP HOSP CHARGES	37	828,012.79	119,957.64	532,906.13	175,149.02	700.00	0.00	174,449.02	29.23%	
MATERNITY	1	2,550.00	2,550.00	0.00	0.00	0.00	0.00	0.00	0.00%	
MEDICAL MISC	34	6,035.02	1,609.02	2,579.27	1,846.73	149.44	0.00	1,697.29	0.28%	
OFFICE VISIT	831	94,468.90	7,546.16	51,920.60	35,002.14	3,060.00	0.00	31,942.14	5.35%	
OP PHYSICIAN	195	1,118,610.66	1,011,853.22	90,277.97	16,479.47	102.64	0.00	16,376.83	2.74%	
OTHER	265	4.00	4.00	0.00	0.00	0.00	-797.65	797.65	0.13%	
OUTPAT HOSP	25	888,614.21	852,716.05	25,894.32	10,003.84	52.52	0.00	9,951.32	1.67%	
PSYCHIATRIC	130	37,254.79	6,067.63	13,649.63	17,537.53	590.00	0.00	16,947.53	2.84%	
RADIATION /CHEMO	70	122,516.00	0.00	84,989.93	37,526.07	18.44	0.00	37,507.63	6.28%	
SLEEP DISORDER	11	935.08	935.08	0.00	0.00	0.00	0.00	0.00	0.00%	
SURG FACILITY	42	369,210.79	-69,730.04	338,022.60	100,918.23	625.00	0.00	100,293.23	16.80%	
SURGERY	178	10,177.46	0.00	9,026.20	1,151.26	0.00	0.00	1,151.26	0.19%	
SURGERY IP	7	3,309.12	737.00	1,393.06	1,179.06	0.00	0.00	1,179.06	0.20%	
SURGERY OP	133	163,965.07	19,837.00	109,090.30	35,037.77	0.00	0.00	35,037.77	5.87%	
THERAPY	262	28,149.68	2,543.78	14,486.60	11,119.30	890.00	0.00	10,229.30	1.71%	
URGENT CARE	3	596.00	0.00	421.75	174.25	25.00	0.00	149.25	0.03%	
WELLNESS	2022	110,323.73	70,325.03	32,767.38	7,231.32	10.00	0.00	7,221.32	1.21%	
XRAY/ LAB	3240	332,983.15	109,858.30	180,488.22	42,636.63	2,164.87	0.00	40,471.76	6.78%	
Totals for 00532	8807	8,663,281.34	5,830,161.90	2,226,074.71	607,044.73	10,947.91	-797.65	596,894.47		





Benefit Analysis Summary

Block of Business ID: Client ID: EBMSI 00532

Paid Date:

1/1/2021 to 12/31/2021

	Line Count	Charge	Ineligible	Cost Savings	Allowed	Patient Responsibility	Adjustments	Paid	% Paid	
00532-West Volusia H	lospital A	uthority								
ALLERGY CARE	31	9,481.00	243.00	5,771.86	3,466.14	50.00	0.00	3,416.14	0.06%	
AMBULANCE	20	127,206.58	127,206.58	0.00	0.00	0.00	0.00	0.00	0.00%	
ANESTHESIA	546	877,504.21	159,187.98	622,991.12	95,325.11	0.00	0.00	95,325.11	1.61%	
CHIROPRACTIC	310	9,206.26	982.00	2,791.98	5,432.28	790.00	0.00	4,642.28	0.08%	
COVID-19	741	-240,546.23	-260,597.04	13,753.42	6,297.39	0.00	0.00	6,297.39	0.11%	
DIALYSIS	587	9,067,941.65	8,533,191.25	509,176.50	25,573.90	0.00	0.00	25,573.90	0.43%	
DME/APPLIANCE	43	39,649.40	39,649.40	0.00	0.00	0.00	0.00	0.00	0.00%	
EMERG ROOM	6075	12,672,709.34	8,551,314.76	3,480,901.97	640,492.61	18,812.92	0.00	621,679.69	10.53%	
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	3115	1,966,200.94	1,965,766.70	290.03	144.21	0.00	0.00	144.21	0.00%	
INJECTION	13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	
INPATIENT PHYS	2354	552,463.38	345,953.20	111,191.49	95,318.69	0.00	0.00	95,318.69	1.61%	
IP HOSP CHARGES	613	7,728,842.45	2,704,108.86	4,086,695.95	938,037.64	5,975.00	0.00	932,062,64	15.79%	
MATERNITY	56	34,604.75	30,641.00	2,726.10	1,237.65	0.00	0.00	1,237.65	0.02%	
MEDICAL MISC	930	122,926.35	11,017.07	80,200.28	31,709.00	1,218.02	0.00	30,490.98	0.52%	
OFFICE VISIT	12536	1,940,634.18	122,725.23	1,188,149.05	629,759.90	46,140.00	0.00	583,619.90	9.89%	
OP PHYSICIAN	2520	3,801,002.99	3,061,410.95	555,341.11	184,250.93	1,423.60	0.00	182,827.33	3.10%	
OTHER	3998	10,209.74	9,750.10	281.63	178.01	0.00	-941.03	1,119.04	0.02%	
OUTPAT HOSP	79	1,882,664.18	1,720,383.81	117,712.40	44,567.97	1,272.44	0.00	43,295.53	0.73%	
PSYCHIATRIC	2036	464,038.08	33,799.41	241,004.98	189,233.69	7,855.00	0.00	181,378.69	3.07%	
RADIATION /CHEMO	1114	2,017,860.41	55,630.92	1,410,289.68	551,939.81	158.95	0.00	551,780.86	9.35%	
SLEEP DISORDER	160	18,356.36	18,356.36	0.00	0.00	0.00	0.00	0.00	0.00%	
SUBS ABUSE	25	44,349.34	33,155.58	10,518.25	675.51	100.00	0.00	575.51	0.01%	
SURG FACILITY	589	5,488,786.87	899,045.05	3,631,768.32	957,973.50	8,265.00	0.00	949,708.50	16.09%	
SURGERY	2628	226,270.96	23,051.85	162,698.84	40,520.27	0.00	0.00	40,520.27	0.69%	
SURGERY IP	271	479,031.94	163,091.87	247,164.98	68,775.09	0.00	0.00	68,775.09	1.17%	
SURGERY OP	1388	1,802,970.46	83,225.17	1,311,772.40	407,972.89	13.11	0.00	407,959.78	6.91%	
THERAPY	4142	413,016.59	13,738.67	221,452.47	177,825.45	14,520.00	0.00	163,305.45	2.77%	
URGENT CARE	16	3,027.44	2,431.44	421.75	174.25	25.00	0.00	149.25	0.00%	
VISION	59	1,935.00	1,935.00	0.00	0.00	0.00	0.00	0.00	0.00%	
WELLNESS	16075	683,572.95	117,719.69	443,522.50	122,330.76	12.82	0.00	122,317.94	2.07%	
XRAY/ LAB	47104	4,987,090.90	1,074,573.93	3,093,966.51	818,550.46	29,486.23	0.00	789,064.23	13.37%	



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Benefit Analysis Summary

Block of Business ID:

EBMSI 00532

1/1/2021 to 12/31/2021 Client ID: Paid Date:

% Paid Paid -941.03 5,902,586.05 Patient Responsibility 136,118.09 Allowed 110187 57,233,372.55 29,643,053.87 21,552,555.57 6,037,763.11 Cost Savings Ineligible Charge Line Totals for 00532





Cost of Major

Block of Business ID:

Client ID:

EBMSI 00532

Paid Date:

12/1/2021 to 12/31/2021

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
00532	West Volusia Hospital Authority	13	Diseases of the Musculoskeletal System & Connective Tissue	115	223	127,450.23	21.35%
00532	West Volusia Hospital Authority	09	Diseases of Circulatory System	47	83	87,157.85	14.60%
00532	West Volusia Hospital Authority	14	Diseases of the Genitourinary System	49	99	62,897.59	10.54%
00532	West Volusia Hospital Authority	11	Diseases of the Digestive System	69	120	60,576.32	10.15%
00532	West Volusia Hospital Authority	19	Injury, Poisoning and Certain Other Consequences of External Causes	29	46	52,973.98	8.87%
00532	West Volusia Hospital Authority	18	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere	117	190	42,603.85	7.14%
00532	West Volusia Hospital Authority	02	Neoplasms	38	75	41,811.59	7.00%
00532	West Volusia Hospital Authority	21	Factors Influencing Health Status and Contact with Health Services	116	135	27,758.05	4.65%
00532	West Volusia Hospital Authority	05	Mental, Behavioral and Neurodevelopmental disorders	80	106	24,723.89	4.14%
00532	West Volusia Hospital Authority	04	Endocrine, nutritional and metabolic diseases	90	104	17,250.01	2.89%
00532	West Volusia Hospital Authority	10	Diseases of the Respiratory System	37	56	15,563.59	2.61%
00532	West Volusia Hospital Authority	06	Diseases of the nervous system	35	43	9,219.62	1.54%
00532	West Volusia Hospital Authority	12	Diseases of the skin & subcutaneous tissue	22	33	8,556.43	1.43%
00532	West Volusia Hospital Authority	03	Diseases of the blood and blood-forming organs & disorders involving the	22	46	6,342.91	1.06%
00532	West Volusia Hospital Authority	07	Diseases of the eye & adnexa	19	21	5,099.59	0.85%
00532	West Volusia Hospital Authority	01	Certain infectious and parasitic disease	16	26	3,731.02	0.63%
00532	West Volusia Hospital Authority	15	Pregnancy, childbirth and the puerperium	7	17	2,903.48	0.49%
00532	West Volusia Hospital Authority	22	Codes for Special Purposes	1	1	155.39	0.03%
00532	West Volusia Hospital Authority	08	Diseases of the ear & mastoid process	1	2	119.08	0.02%
				910	1426	596,894.47	100.00%





Cost of Major

Block of Business ID: Client ID: **EBMSI**

00532

Paid Date:

1/1/2021 to 12/31/2021

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount I	Percent of
							Total
00532	West Volusia Hospital Authority	13	Diseases of the Musculoskeletal System & Connective Tissue	569	3239	806,316.33	13.66%
00532	West Volusia Hospital Authority	09	Diseases of Circulatory System	391	1246	700,741.68	11.87%
00532	West Volusia Hospital Authority	11	Diseases of the Digestive System	368	1557	650,659.07	11.02%
00532	West Volusia Hospital Authority	02	Neoplasms	225	1173	649,759.03	11.01%
00532	West Volusia Hospital Authority	18	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere	758	2744	570,361.82	9.66%
00532	West Volusia Hospital Authority	21	Factors Influencing Health Status and Contact with Health Services	845	2081	473,415.67	8.02%
00532	West Volusia Hospital Authority	14	Diseases of the Genitourinary System	401	1260	403,890.90	6.84%
00532	West Volusia Hospital Authority	04	Endocrine, nutritional and metabolic diseases	627	1749	267,810.06	4.54%
00532	West Volusia Hospital Authority	05	Mental, Behavioral and Neurodevelopmental disorders	288	1662	230,632.97	3.91%
00532	West Volusia Hospital Authority	19	Injury, Poisoning and Certain Other Consequences of External Causes	159	448	204,751.81	3.47%
00532	West Volusia Hospital Authority	03	Diseases of the blood and blood-forming organs & disorders involving the	114	667	175,105.69	2.97%
00532	West Volusia Hospital Authority	10	Diseases of the Respiratory System	188	682	171,199.65	2.90%
00532	West Volusia Hospital Authority	22	Codes for Special Purposes	47	154	162,209.81	2.75%
00532	West Volusia Hospital Authority	01	Certain infectious and parasitic disease	142	316	112,647.84	1.91%
00532	West Volusia Hospital Authority	07	Diseases of the eye & adnexa	157	388	112,217.02	1.90%
00532	West Volusia Hospital Authority	06	Diseases of the nervous system	192	475	96,537.31	1.64%
00532	West Volusia Hospital Authority	12	Diseases of the skin & subcutaneous tissue	146	330	65,505.47	1.11%
00532	West Volusia Hospital Authority	15	Pregnancy, childbirth and the puerperium	31	292	28,965.90	0.49%
00532	West Volusia Hospital Authority	80	Diseases of the ear & mastoid process	29	80	15,474.43	0.26%
00532	West Volusia Hospital Authority	17	Congenital malformations, deformations and chromosomal abnormalities	11	22	4,326.04	0.07%
00532	West Volusia Hospital Authority	16	Certain conditions originating in the perinatal period	1	1	57.55	0.00%
				5689	20566	5,902,586.05	100.00%





Block of Business ID: Client ID: EBMSI 00532

Paid Date:

12/1/2021 to 12/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Po	
	是"AMESTALLA TRANSPORT						Total
00532	West Volusia Hospital Authority	09.08	Diseases of arteries, arterioles and capillaries	8	29	45,559.23	7.63%
00532	West Volusia Hospital Authority	09.04	Ischemic heart diseases	11	19	38,219.42	6.40%
00532	West Volusia Hospital Authority	13.08	Deforming dorsopathies	6	6	35,961.48	6.02%
00532	West Volusia Hospital Authority	13.09	Spondylopathies	22	44	32,427.90	5.43%
00532	West Volusia Hospital Authority	14.02	Renal tubulo-interstitial diseases	3	8	27,958.61	4.68%
00532	West Volusia Hospital Authority	05.04	Mood [affective] disorders	56	75	21,658.67	3.63%
00532	West Volusia Hospital Authority	13.04	Osteoarthritis	18	26	21,619.91	3.62%
00532	West Volusia Hospital Authority	13.07	Systemic connective tissue disorders	1	2	19,356.39	3.24%
00532	West Volusia Hospital Authority	19.22	Complications of surgical and medical care, not elsewhere classified	3	5	18,998.34	3.18%
00532	West Volusia Hospital Authority	11.06	Other diseases of intestines	25	29	17,505.12	2.93%
00532	West Volusia Hospital Authority	18.01	Symptoms and signs involving the circulatory and respiratory systems	38	50	16,756.93	2.81%
00532	West Volusia Hospital Authority	18.02	Symptoms and signs involving the digestive system and abdomen	43	65	16,078.32	2.69%
00532	West Volusia Hospital Authority	11.02	Diseases of esophagus, stomach and duodenum	27	41	15,966.58	2.67%
00532	West Volusia Hospital Authority	04.02	Diabetes mellitus	55	64	14,101.90	2.36%
00532	West Volusia Hospital Authority	19.01	Injuries to the head	3	4	13,175.20	2.21%
00532	West Volusia Hospital Authority	11.04	Hernia	6	8	12,020.53	2.01%
00532	West Volusia Hospital Authority	19.09	Injuries to the knee and lower leg	5	8	11,807.33	1.98%
00532	West Volusia Hospital Authority	14.04	Urolithiasis	4	8	11,493.36	1.93%
00532	West Volusia Hospital Authority	10.04	Other diseases of upper respiratory tract	7	11	11,037.53	1.85%
00532	West Volusia Hospital Authority	02.17	Malignant neoplasms of lymphoid, hematopoietic and related tissue	2	6	10,933.06	1.83%
00532	West Volusia Hospital Authority	21.01	Persons encountering health services for examinations	90	99	10,606.35	1.78%
00532	West Volusia Hospital Authority	02.15	Malignant neuroendocrine tumors	1	4	10,499.98	1.76%
00532	West Volusia Hospital Authority	14.03	Acute kidney failure and chronic kidney disease	19	51	10,256.87	1.72%
00532	West Volusia Hospital Authority	02.08	Malignant neoplasms of breast	6	14	8,833.64	1.48%
00532	West Volusia Hospital Authority	21.15	Persons with potential health hazards related to family and personal history	12	13	8,258.09	1.38%
00532	West Volusia Hospital Authority	14.06	Other diseases of the urinary system	3	4	7,845.79	1.31%
00532	West Volusia Hospital Authority	13.10	Other dorsopathies	27	51	6,899.85	1.16%
00532	West Volusia Hospital Authority	21.07	Persons with potential health hazards related to communicable diseases	3	3	6,860.17	1.15%
00532	West Volusia Hospital Authority	11.08	Diseases of liver	11	16	6,712.77	1.12%
00532	West Volusia Hospital Authority	02.19	Benign neoplasms, except benign neuroendocrine tumors	17	21	6,495.25	1.09%





Block of Business ID: Client ID: EBMSI 00532

Paid Date:

12/1/2021 to 12/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Pe	rcent of Total
00532	West Volusia Hospital Authority	13.05	Other joint disorders	30	47	6,128.16	1.03%
00532	West Volusia Hospital Authority	12.01	Infections of the skin and subcutaneous tissue	7	12	6,044.04	1.01%
00532	West Volusia Hospital Authority	06.11	Other disorders of the nervous system	8	9	4,949.41	0.83%
00532	West Volusia Hospital Authority	11.05	Noninfective enteritis and colitis	6	8	4,938.40	0.83%
00532	West Volusia Hospital Authority	19.05	Injuries to the shoulder and upper arm	4	6	4,721.66	0.79%
00532	West Volusia Hospital Authority	14.10	Noninflammatory disorders of female genital tract	12	16	3,832.05	0.64%
00532	West Volusia Hospital Authority	18.08	General symptoms and signs	16	25	3,773.90	0.63%
00532	West Volusia Hospital Authority	03.01	Nutritional anemias	15	27	3,705.84	0.62%
00532	West Volusia Hospital Authority	07.04	Disorders of lens	9	10	3,613.78	0.61%
00532	West Volusia Hospital Authority	10.05	Chronic lower respiratory diseases	21	31	2,910.57	0.49%
00532	West Volusia Hospital Authority	06.06	Episodic and paroxysmal disorders	18	20	2,764.58	0.46%
00532	West Volusia Hospital Authority	18.06	Symptoms and signs involving cognition, perception, emotional state and	8	12	2,746.73	0.46%
00532	West Volusia Hospital Authority	01.13	Viral hepatitis	6	9	2,099.92	0.35%
00532	West Volusia Hospital Authority	05.05	Anxiety, dissociative, stress-related, somatoform and other nonpsychotic	15	22	2,095.50	0.35%
00532	West Volusia Hospital Authority	13.13	Other soft tissue disorders	17	21	2,047.26	0.34%
00532	West Volusia Hospital Authority	19.08	Injuries to the hip and thigh	1	2	2,035.66	0.34%
00532	West Volusia Hospital Authority	03.03	Aplastic and other anemias and other bone marrow failure syndromes	6	14	2,028.37	0.34%
00532	West Volusia Hospital Authority	02.03	Malignant neoplasms of respiratory and intrathoracic organs	2	9	2,006.98	0.34%
00532	West Volusia Hospital Authority	15.04	Other maternal disorders predominantly related to pregnancy	3	4	1,747.23	0.29%
00532	West Volusia Hospital Authority	11.10	Other diseases of the digestive system	2	11	1,669.22	0.28%
00532	West Volusia Hospital Authority	11.09	Disorders of gallbladder, biliary tract and pancreas	4	6	1,609.40	0.27%
00532	West Volusia Hospital Authority	12.09	Other disorders of the skin and subcutaneous tissue	7	13	1,604.82	0.27%
00532	West Volusia Hospital Authority	04.09	Metabolic disorders	18	21	1,490.44	0.25%
00532	West Volusia Hospital Authority	09.03	Hypertensive diseases	13	16	1,442.26	0.24%
00532	West Volusia Hospital Authority	14.08	Disorders of breast	7	7	1,177.78	0.20%
00532	West Volusia Hospital Authority	02.11	Malignant neoplasms of urinary tract	4	4	1,168.99	0.20%
00532	West Volusia Hospital Authority	13.11	Disorders of muscles	3	7	1,099.06	0.18%
00532	West Volusia Hospital Authority	21.08	Persons encountering health services in circumstances related to reproduction	8	13	1,033.61	0.17%
00532	West Volusia Hospital Authority	13.03	Inflammatory polyarthropathies	8	10	974.09	0.16%
00532	West Volusia Hospital Authority	04.01	Disorders of thyroid gland	8	9	914.61	0.15%
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Block of Business ID: Client ID: EBMSI 00532

Paid Date:

12/1/2021 to 12/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Po	
							Total
00532	West Volusia Hospital Authority	01.15	Other viral diseases	3	6	858.15	0.14%
00532	West Volusia Hospital Authority	02.20	Neoplasms of uncertain behavior, polycythemia vera and myelodysplastic	4	6	804.64	0.13%
00532	West Volusia Hospital Authority	18.09	Abnormal findings on examination of blood, without diagnosis	11	13	794.29	0.13%
00532	West Volusia Hospital Authority	02.10	Malignant neoplasms of male genital organs	2	2	785.61	0.13%
00532	West Volusia Hospital Authority	09.09	Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified	4	5	707.32	0.12%
00532	West Volusia Hospital Authority	21.09	Encounters for other specific health care	3	4	666.63	0.11%
00532	West Volusia Hospital Authority	15.02	Supervision of high risk pregnancy	4	7	666.05	0.11%
00532	West Volusia Hospital Authority	10.03	Other acute lower respiratory infections	3	4	656.38	0.11%
00532	West Volusia Hospital Authority	07.01	Disorders of eyelid, lacrimal system and orbit	3	3	610.31	0.10%
00532	West Volusia Hospital Authority	03.05	Other disorders of blood and blood-forming organs	3	4	596.00	0.10%
00532	West Volusia Hospital Authority	18.13	Abnormal tumor markers	3	3	552.42	0.09%
00532	West Volusia Hospital Authority	05.03	Schizophrenia, schizotypal, delusional, and other non-mood psychotic disorders	5	5	549.03	0.09%
00532	West Volusia Hospital Authority	06.07	Nerve, nerve root and plexus disorders	2	5	531.12	0.09%
00532	West Volusia Hospital Authority	07.06	Glaucoma	5	5	502.58	0.08%
00532	West Volusia Hospital Authority	09.06	Other forms of heart disease	6	8	500.59	0.08%
00532	West Volusia Hospital Authority	10.02	Influenza and pneumonia	1	4	495.97	0.08%
00532	West Volusia Hospital Authority	18.05	Symptoms and signs involving the genitourinary system	5	5	495.11	0.08%
00532	West Volusia Hospital Authority	18.12	Abnormal findings on diagnostic imaging and in function studies, without	7	7	479.43	0.08%
00532	West Volusia Hospital Authority	04.07	Other nutritional deficiencies	7	8	477.50	0.08%
00532	West Volusia Hospital Authority	13.14	Disorders of bone density and structure	3	4	471.47	0.08%
00532	West Volusia Hospital Authority	01.14	Human immunodeficiency virus [HIV] disease	2	5	453.74	0.08%
00532	West Volusia Hospital Authority	19.10	Injuries to the ankle and foot	3	4	437.29	0.07%
00532	West Volusia Hospital Authority	10.01	Acute upper respiratory infections	2	2	420.45	0.07%
00532	West Volusia Hospital Authority	15.09	Other obstetric conditions, not elsewhere classified	4	5	417.27	0.07%
00532	West Volusia Hospital Authority	06.03	Extrapyramidal and movement disorders	3	4	414.65	0.07%
00532	West Volusia Hospital Authority	18.04	Symptoms and signs involving the nervous and musculoskeletal systems	3	4	409.22	0.07%
00532	West Volusia Hospital Authority	19.14	Burns and corrosions of external body surface, specified by site	1	2	392.39	0.07%
00532	West Volusia Hospital Authority	12.07	Disorders of skin appendages	3	3	374.67	0.06%
00532	West Volusia Hospital Authority	09.05	Pulmonary heart disease and diseases of pulmonary circulation	2	3	351.31	0.06%
00532	West Volusia Hospital Authority	06.08	Polyneuropathies and other disorders of the peripheral nervous system	3	3	345.64	0.06%





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Paid Date:

12/1/2021 to 12/31/2021

Pro	ducts:	MM,	DE,	RX,	VI	

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Percent of Total
00532	West Volusia Hospital Authority	13.12	Disorders of synovium and tendon	3	3	334.67 0.06%
00532	West Volusia Hospital Authority	12.04	Papulosquamous disorders	2	2	326.76 0.05%
00532	West Volusia Hospital Authority	19.03	Injuries to the thorax	2	3	288.39 0.05%
00532	West Volusia Hospital Authority	05.07	Disorders of adult personality and behavior	2	2	288.11 0.05%
00532	West Volusia Hospital Authority	19.18	Poisoning by, adverse effects of and underdosing of drugs, medicaments and	1	2	282.98 0.05%
00532	West Volusia Hospital Authority	21.14	Persons encountering health services in other circumstances	2	2	251.12 0.04%
00532	West Volusia Hospital Authority	18.03	Symptoms and signs involving the skin and subcutaneous tissue	3	3	242.87 0.04%
00532	West Volusia Hospital Authority	06.04	Other degenerative diseases of the nervous system	2	2	214.22 0.07%
00532	West Volusia Hospital Authority	12.03	Dermatitis and eczema	2	2	197.51 0.03%
00532	West Volusia Hospital Authority	19.06	Injuries to the elbow and forearm	1	2	193.45 0.03%
00532	West Volusia Hospital Authority	18.11	Abnormal findings on examination of other body fluids, substances and	2	2	191.83 0.03%
00532	West Volusia Hospital Authority	14.07	Diseases of male genital organs	1	1	178.85 0.03%
00532	West Volusia Hospital Authority	19.07	Injuries to the wrist, hand and fingers	2	2	168.76 0.03%
00532	West Volusia Hospital Authority	04.04	Disorders of other endocrine glands	1	1	166.38 0.03%
00532	West Volusia Hospital Authority	19.12	Injury of unspecified body region	2	2	165.28 0.03%
00532	West Volusia Hospital Authority	09.02	Chronic rheumatic heart diseases	1	1	163.50 0.03%
00532	West Volusia Hospital Authority	01.11	Viral infections characterized by skin and mucous membrane lesions	2	2	156.95 0.03%
00532	West Volusia Hospital Authority	22.1	Emergency Use 2019-nCoVacute respiratory disease	1	1	155.39 0.03%
00532	West Volusia Hospital Authority	19.02	Injuries to the neck	1	1	154.30 0.05%
00532	West Volusia Hospital Authority	14.05	Other disorders of kidney and ureter	3	4	154.28 0.03%
00532	West Volusia Hospital Authority	07.10	Visual disturbances and blindness	1	1	139.74 0.02%
00532	West Volusia Hospital Authority	05.02	Mental and behavioral disorders due to psychoactive substance use	2	2	132.58 0.02%
00532	West Volusia Hospital Authority	13.18	Intraoperative and postprocedural complications and disorders of	1	2	129.99 0.02%
00532	West Volusia Hospital Authority	07.07	Disorders of vitreous body and globe	1	1	120.92 0.02%
00532	West Volusia Hospital Authority	08.04	Other disorders of ear	1	2	119.08 0.02%
00532	West Volusia Hospital Authority	02.05	Melanoma and other malignant neoplasms of skin	2	4	118.78 0.02%
00532	West Volusia Hospital Authority	07.02	Disorders of conjunctiva	1	1	112.26 0.02%
00532	West Volusia Hospital Authority	04.08	Overweight, obesity and other hyperalimentation	1	1	99.18 0.02%
00532	West Volusia Hospital Authority	19.04	Injuries to the abdomen, lower back, lumbar spine, pelvis and external genitals	1	2	95.40 0.02%
00532	West Volusia Hospital Authority	02.13	Malignant neoplasms of thyroid and other endocrine glands	1	2	89.48 0.01%





Block of Business ID: Client ID: EBMSI

00532

Paid Date:

12/1/2021 to 12/31/2021

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount F	ercent of Total
00532	West Volusia Hospital Authority	18.10	Abnormal findings on examination of urine, without diagnosis	1	1	82.80	0.01%
00532	West Volusia Hospital Authority	01.05	Infections with a predominantly sexual mode of transmission	1	2	82.74	0.01%
00532	West Volusia Hospital Authority	21.05	Retained foreign body fragments	1	1	82.08	0.01%
00532	West Volusia Hospital Authority	15.05	Maternal care related to the fetus and amniotic cavity and possible delivery	1	1	72.93	0.01%
00532	West Volusia Hospital Authority	01.04	Other bacterial diseases	1	1	63.54	0.01%
00532	West Volusia Hospital Authority	19.20	Other and unspecified effects of external causes	1	1	57.55	0.01%
00532	West Volusia Hospital Authority	02.09	Malignant neoplasms of female genital organs	1	1	50.02	0.01%
00532	West Volusia Hospital Authority	10.09	Other diseases of the pleura	2	2	25.32	0.00%
00532	West Volusia Hospital Authority	02.01	Malignant neoplasms of lip, oral cavity and pharynx	1	2	25.16	0.00%
00532	West Volusia Hospital Authority	01.21	Bacterial and viral infectious agents	1	1	15.98	0.00%
00532	West Volusia Hospital Authority	03.04	Coagulation defects, purpura and other hemorrhagic conditions	1	1	12.70	0.00%
00532	West Volusia Hospital Authority	10.11	Other diseases of the respiratory system	1	1	9.39	0.00%
00532	West Volusia Hospital Authority	12.05	Urticaria and erythema	1	1	8.63	0.00%
00532	West Volusia Hospital Authority	10.07	Other respiratory diseases principally affecting the interstitium	1	1	7.98	0.00%
				994	1426	596,894.47	100.00%





11.04

14.10

02.19

09.08

03.05

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West Volusia Hospital Authority

Paid Date:

1/1/2021 to 12/31/2021

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount F	Percent of Total
00532	West Volusia Hospital Authority	02.08	Malignant neoplasms of breast	18	241	265,524.52	4.50%
00532	West Volusia Hospital Authority	09.06	Other forms of heart disease	101	281	232,538.26	3.94%
00532	West Volusia Hospital Authority	18.02	Symptoms and signs involving the digestive system and abdomen	299	850	217,408.66	3.68%
00532	West Volusia Hospital Authority	09.04	Ischemic heart diseases	60	152	208,268.01	3.53%
00532	West Volusia Hospital Authority	21.01	Persons encountering health services for examinations	770	1444	204,016.87	3.46%
00532	West Volusia Hospital Authority	21.09	Encounters for other specific health care	47	155	197,138.50	3.34%
00532	West Volusia Hospital Authority	11.02	Diseases of esophagus, stomach and duodenum	180	650	196,154.23	3.32%
00532	West Volusia Hospital Authority	13.09	Spondylopathies	124	465	170,871.70	2.89%
00532	West Volusia Hospital Authority	13.10	Other dorsopathies	238	961	167,123.90	2.83%
00532	West Volusia Hospital Authority	22.1	Emergency Use 2019-nCoVacute respiratory disease	47	154	162,209.81	2.75%
00532	West Volusia Hospital Authority	04.02	Diabetes mellitus	307	992	161,040.49	2.73%
00532	West Volusia Hospital Authority	05.04	Mood [affective] disorders	173	1170	159,375.43	2.70%
00532	West Volusia Hospital Authority	18.01	Symptoms and signs involving the circulatory and respiratory systems	265	679	155,576.57	2.64%
00532	West Volusia Hospital Authority	11.06	Other diseases of intestines	133	363	154,939.43	2.62%
00532	West Volusia Hospital Authority	13.04	Osteoarthritis	121	294	154,004.06	2.61%



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Products: MM, DE, RX, VI

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159

136

133,268.75

122,411.26

120,600.05

106,868.49

98,612.15

97,423.96

96,500.45

74,437.38

74,349.99

71,588.68

71,368.28

67,291.84

58,784.82

58,266,24

56,584.45

2.26%

2.07%

2.04%

1.81%

1.67%

1.65%

1.63%

1.26%

1.26%

1.21%

1.21%

1.14%

1.00%

0.99%

0.96%

Hernia

Noninflammatory disorders of female genital tract

Diseases of arteries, arterioles and capillaries

Other soft tissue disorders

Metabolic disorders

Other joint disorders

Other bacterial diseases

Deforming dorsopathies

Disorders of lens

Malignant neoplasms of urinary tract

Other diseases of upper respiratory tract

Episodic and paroxysmal disorders

Other diseases of the urinary system

Other disorders of blood and blood-forming organs

Benign neoplasms, except benign neuroendocrine tumors



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Paid Date:

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ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount P	ercent of Total
00532	West Volusia Hospital Authority	14.02	Renal tubulo-interstitial diseases	10	51	54,691.56	0.93%
00532	West Volusia Hospital Authority	18.08	General symptoms and signs	158	328	54,390.53	0.92%
00532	West Volusia Hospital Authority	14.03	Acute kidney failure and chronic kidney disease	80	324	53,926.24	0.91%
00532	West Volusia Hospital Authority	19.22	Complications of surgical and medical care, not elsewhere classified	16	34	53,760.02	0.91%
00532	West Volusia Hospital Authority	11.05	Noninfective enteritis and colitis	24	94	53,655.46	0.91%
00532	West Volusia Hospital Authority	09.03	Hypertensive diseases	231	386	50,834.48	0.86%
00532	West Volusia Hospital Authority	14.04	Urolithiasis	24	73	46,205.17	0.78%
00532	West Volusia Hospital Authority	18.12	Abnormal findings on diagnostic imaging and in function studies, without	156	226	46,135.33	0.78%
00532	West Volusia Hospital Authority	09.09	Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified	37	110	45,021.51	0.76%
00532	West Volusia Hospital Authority	19.09	Injuries to the knee and lower leg	30	76	44,852.09	0.76%
00532	West Volusia Hospital Authority	03.01	Nutritional anemias	54	283	44,464.63	0.75%
00532	West Volusia Hospital Authority	10.05	Chronic lower respiratory diseases	101	347	44,305.74	0.75%
00532	West Volusia Hospital Authority	02.17	Malignant neoplasms of lymphoid, hematopoietic and related tissue	6	38	44,050.51	0.75%
00532	West Volusia Hospital Authority	11.08	Diseases of liver	87	175	42,678.52	0.72%
00532	West Volusia Hospital Authority	21.15	Persons with potential health hazards related to family and personal history	130	261	39,868.50	0.68%
00532	West Volusia Hospital Authority	09.07	Cerebrovascular diseases	36	102	38,451.65	0.65%
00532	West Volusia Hospital Authority	11.09	Disorders of gallbladder, biliary tract and pancreas	40	93	33,412.93	0.57%
00532	West Volusia Hospital Authority	14.08	Disorders of breast	90	137	31,417.41	0.53%
00532	West Volusia Hospital Authority	05.05	Anxiety, dissociative, stress-related, somatoform and other nonpsychotic	71	287	30,793.98	0.52%
00532	West Volusia Hospital Authority	02.10	Malignant neoplasms of male genital organs	4	68	26,823.08	0.45%
00532	West Volusia Hospital Authority	12.01	Infections of the skin and subcutaneous tissue	44	101	26,739.06	0.45%
00532	West Volusia Hospital Authority	14.07	Diseases of male genital organs	26	59	26,473.71	0.45%
00532	West Volusia Hospital Authority	18.03	Symptoms and signs involving the skin and subcutaneous tissue	62	103	25,767.03	0.44%
00532	West Volusia Hospital Authority	10.11	Other diseases of the respiratory system	28	97	25,042.36	0.42%
00532	West Volusia Hospital Authority	19.05	Injuries to the shoulder and upper arm	16	52	24,497.25	0.42%
00532	West Volusia Hospital Authority	03.03	Aplastic and other anemias and other bone marrow failure syndromes	44	128	24,299.33	0.41%
00532	West Volusia Hospital Authority	10.10	Intraoperative and postprocedural complications and disorders of respiratory	1	1	23,384.51	0.40%
00532	West Volusia Hospital Authority	18.09	Abnormal findings on examination of blood, without diagnosis	114	180	22,102.13	0.37%
00532	West Volusia Hospital Authority	13.07	Systemic connective tissue disorders	11	23	21,358.75	0.36%
00532	West Volusia Hospital Authority	18.06	Symptoms and signs involving cognition, perception, emotional state and	53	90	21,262.45	0.36%





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Paid Date:

1/1/2021 to 12/31/2021

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Pe	ercent of Total
00532	West Volusia Hospital Authority	06.11	Other disorders of the nervous system	61	147	20,618.60	0.35%
00532	West Volusia Hospital Authority	02.02	Malignant neoplasms of digestive organs	7	106	19,042.76	0.32%
00532	West Volusia Hospital Authority	21.07	Persons with potential health hazards related to communicable diseases	34	46	18,891.96	0.32%
00532	West Volusia Hospital Authority	04.01	Disorders of thyroid gland	101	172	18,820.21	0.32%
00532	West Volusia Hospital Authority	19.01	Injuries to the head	12	24	18,119.27	0.31%
00532	West Volusia Hospital Authority	19.08	Injuries to the hip and thigh	8	16	17,614.00	0.30%
00532	West Volusia Hospital Authority	05.02	Mental and behavioral disorders due to psychoactive substance use	39	87	17,563.77	0.30%
00532	West Volusia Hospital Authority	19.06	Injuries to the elbow and forearm	3	58	17,382.33	0.29%
00532	West Volusia Hospital Authority	09.05	Pulmonary heart disease and diseases of pulmonary circulation	11	53	16,729.50	0.28%
00532	West Volusia Hospital Authority	02.05	Melanoma and other malignant neoplasms of skin	15	63	16,089.16	0.27%
00532	West Volusia Hospital Authority	15.02	Supervision of high risk pregnancy	19	188	15,749.38	0.27%
00532	West Volusia Hospital Authority	07.06	Glaucoma	45	82	15,563.25	0.26%
00532	West Volusia Hospital Authority	02.09	Malignant neoplasms of female genital organs	5	78	15,229.11	0.26%
00532	West Volusia Hospital Authority	12.07	Disorders of skin appendages	21	37	14,725.11	0.25%
00532	West Volusia Hospital Authority	01.01	Intestinal infectious diseases	11	15	14,430.18	0.24%
00532	West Volusia Hospital Authority	11.10	Other diseases of the digestive system	12	37	14,066.71	0.24%
00532	West Volusia Hospital Authority	12.09	Other disorders of the skin and subcutaneous tissue	45	102	12,875.91	0.22%
00532	West Volusia Hospital Authority	21.08	Persons encountering health services in circumstances related to reproduction	41	168	12,825.58	0.22%
00532	West Volusia Hospital Authority	06.07	Nerve, nerve root and plexus disorders	20	63	12,347.80	0.21%
00532	West Volusia Hospital Authority	11.03	Diseases of appendix	3	7	11,914.20	0.20%
00532	West Volusia Hospital Authority	13.03	Inflammatory polyarthropathies	46	105	11,520.50	0.20%
00532	West Volusia Hospital Authority	05.09	Pervasive and specific developmental disorders	2	3	11,250.81	0.19%
00532	West Volusia Hospital Authority	02.15	Malignant neuroendocrine tumors	1	4	10,499.98	0.18%
00532	West Volusia Hospital Authority	13.15	Other osteopathies	11	21	10,474.99	0.18%
00532	West Volusia Hospital Authority	13.14	Disorders of bone density and structure	31	94	9,751.87	0.17%
00532	West Volusia Hospital Authority	18.11	Abnormal findings on examination of other body fluids, substances and	34	90	9,254.54	0.16%
00532	West Volusia Hospital Authority	07.08	Disorders of optic nerve and visual pathways	5	6	8,886.52	0.15%
00532	West Volusia Hospital Authority	11.07	Diseases of peritoneum and retroperitoneum	2	19	8,809.81	0.15%
00532	West Volusia Hospital Authority	02.20	Neoplasms of uncertain behavior, polycythemia vera and myelodysplastic	40	70	8,700.42	0.15%
00532	West Volusia Hospital Authority	08.02	Diseases of middle ear and mastoid	8	17	8,329.46	0.14%



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Paid Date:

1/1/2021 to 12/31/2021

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Pe	rcent of Total
00532	West Volusia Hospital Authority	18.04	Symptoms and signs involving the nervous and musculoskeletal systems	35	67	8,146.69	0.14%
00532	West Volusia Hospital Authority	13.12	Disorders of synovium and tendon	24	46	8,110.40	0.14%
00532	West Volusia Hospital Authority	03.04	Coagulation defects, purpura and other hemorrhagic conditions	15	86	7,729.58	0.13%
00532	West Volusia Hospital Authority	02.01	Malignant neoplasms of lip, oral cavity and pharynx	1	41	7,715.39	0.13%
00532	West Volusia Hospital Authority	07.02	Disorders of conjunctiva	11	20	7,645.65	0.13%
00532	West Volusia Hospital Authority	07.01	Disorders of eyelid, lacrimal system and orbit	36	55	7,391.70	0.13%
00532	West Volusia Hospital Authority	01.13	Viral hepatitis	25	51	7,098.48	0.12%
00532	West Volusia Hospital Authority	01.14	Human immunodeficiency virus [HIV] disease	16	60	6,962.29	0.12%
00532	West Volusia Hospital Authority	05.03	Schizophrenia, schizotypal, delusional, and other non-mood psychotic disorders	17	72	6,901.10	0.12%
00532	West Volusia Hospital Authority	04.07	Other nutritional deficiencies	66	85	6,874.48	0.12%
00532	West Volusia Hospital Authority	12.03	Dermatitis and eczema	36	57	6,823.31	0.12%
00532	West Volusia Hospital Authority	19.10	Injuries to the ankle and foot	25	44	6,460.60	0.11%
00532	West Volusia Hospital Authority	19.04	Injuries to the abdomen, lower back, lumbar spine, pelvis and external genitals	16	49	6,311.50	0.11%
00532	West Volusia Hospital Authority	02.03	Malignant neoplasms of respiratory and intrathoracic organs	2	18	6,251.64	0.11%
00532	West Volusia Hospital Authority	07.07	Disorders of vitreous body and globe	16	25	6,200.88	0.11%
00532	West Volusia Hospital Authority	18.05	Symptoms and signs involving the genitourinary system	55	78	5,992.83	0.10%
00532	West Volusia Hospital Authority	14.05	Other disorders of kidney and ureter	32	61	5,598.46	0.09%
00532	West Volusia Hospital Authority	13.11	Disorders of muscles	18	49	5,595.34	0.09%
00532	West Volusia Hospital Authority	19.03	Injuries to the thorax	9	12	5,533.36	0.09%
00532	West Volusia Hospital Authority	15.06	Complications of labor and delivery	4	4	5,503.87	0.09%
00532	West Volusia Hospital Authority	02.14	Malignant neoplasms of ill-defined, other secondary and unspecified sites	5	26	5,464.11	0.09%
00532	West Volusia Hospital Authority	08.04	Other disorders of ear	23	45	5,108.42	0.09%
00532	West Volusia Hospital Authority	01.16	Mycoses	33	43	4,601.74	0.08%
00532	West Volusia Hospital Authority	15.04	Other maternal disorders predominantly related to pregnancy	14	52	4,564.83	0.08%
00532	West Volusia Hospital Authority	10.01	Acute upper respiratory infections	15	22	4,482.90	0.08%
00532	West Volusia Hospital Authority	10.02	Influenza and pneumonia	16	45	4,432.71	0.08%
00532	West Volusia Hospital Authority	07.03	Disorders of sclera, cornea, iris and ciliary body	9	14	4,242.33	0.07%
00532	West Volusia Hospital Authority	04.04	Disorders of other endocrine glands	17	27	4,099.34	0.07%
00532	West Volusia Hospital Authority	14.11	Intraoperative and postprocedural complications and disorders of	1	2	3,586.10	0.06%
00532	West Volusia Hospital Authority	02.06	Malignant neoplasms of mesothelial and soft tissue	1	9	3,128.81	0.05%





Block of Business ID: Client ID: EBMSI 00532

Paid Date:

1/1/2021 to 12/31/2021

Products: MM, DE, RX, VI

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount Per	
							Total
00532	West Volusia Hospital Authority	01.15	Other viral diseases	9	16	2,923.42	0.05%
00532	West Volusia Hospital Authority	14.09	Inflammatory diseases of female pelvic organs	15	18	2,913.74	0.05%
00532	West Volusia Hospital Authority	19.07	Injuries to the wrist, hand and fingers	21	33	2,902.61	0.05%
00532	West Volusia Hospital Authority	02.18	In situ neoplasms	7	20	2,692.93	0.05%
00532	West Volusia Hospital Authority	07.05	Disorders of choroid and retina	10	13	2,441.89	0.04%
00532	West Volusia Hospital Authority	17.08	Congenital malformations of the urinary system	2	3	2,426.74	0.04%
00532	West Volusia Hospital Authority	19.20	Other and unspecified effects of external causes	7	10	2,354.88	0.04%
00532	West Volusia Hospital Authority	05.07	Disorders of adult personality and behavior	5	22	2,354.49	0.04%
00532	West Volusia Hospital Authority	06.03	Extrapyramidal and movement disorders	10	21	2,142.96	0.04%
00532	West Volusia Hospital Authority	13.01	Infectious arthropathies	2	21	2,108.90	0.04%
00532	West Volusia Hospital Authority	12.05	Urticaria and erythema	11	15	2,052.03	0.03%
00532	West Volusia Hospital Authority	04.08	Overweight, obesity and other hyperalimentation	5	13	1,987.49	0.03%
00532	West Volusia Hospital Authority	01.11	Viral infections characterized by skin and mucous membrane lesions	15	16	1,893.71	0.03%
00532	West Volusia Hospital Authority	19.02	Injuries to the neck	4	13	1,876.93	0.03%
00532	West Volusia Hospital Authority	11.01	Diseases of oral cavity and salivary glands	11	16	1,759.03	0.03%
00532	West Volusia Hospital Authority	18.10	Abnormal findings on examination of urine, without diagnosis	16	24	1,680.17	0.03%
00532	West Volusia Hospital Authority	15.09	Other obstetric conditions, not elsewhere classified	13	23	1,548.09	0.03%
00532	West Volusia Hospital Authority	08.03	Diseases of inner ear	2	13	1,533.82	0.03%
00532	West Volusia Hospital Authority	18.07	Symptoms and signs involving speech and voice	5	12	1,439.17	0.02%
00532	West Volusia Hospital Authority	06.04	Other degenerative diseases of the nervous system	11	13	1,419.77	0.02%
00532	West Volusia Hospital Authority	01.05	Infections with a predominantly sexual mode of transmission	8	11	1,417.43	0.02%
00532	West Volusia Hospital Authority	09.02	Chronic rheumatic heart diseases	12	13	1,416.19	0.02%
00532	West Volusia Hospital Authority	07.10	Visual disturbances and blindness	9	12	1,333.15	0.02%
00532	West Volusia Hospital Authority	15.05	Maternal care related to the fetus and amniotic cavity and possible delivery	9	13	1,283.74	0.02%
00532	West Volusia Hospital Authority	01.21	Bacterial and viral infectious agents	10	14	1,262.97	0.02%
00532	West Volusia Hospital Authority	19.14	Burns and corrosions of external body surface, specified by site	4	8	1,253.05	0.02%
00532	West Volusia Hospital Authority	12.06	Radiation-related disorders of the skin and subcutaneous tissue	9	10	1,246.40	0.02%
00532	West Volusia Hospital Authority	13.16	Chondropathies	3	6	1,233.80	0.02%
00532	West Volusia Hospital Authority	18.13	Abnormal tumor markers	13	17	1,205.72	0.02%
00532	West Volusia Hospital Authority	05.06	Behavioral syndromes associated with physiological disturbances and	8	10	1,145.52	0.02%





Block of Business ID:

EBMSI

Client ID: Paid Date:	00532 1/1/2021 to 12/31/2021	
windows (from the loss of the office of the		

ClientId	. Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount P	
							Total
00532	West Volusia Hospital Authority	12.04	Papulosquamous disorders	6	8	1,043.65	0.02%
00532	West Volusia Hospital Authority	10.03	Other acute lower respiratory infections	5	7	1,016.99	0.02%
00532	West Volusia Hospital Authority	17.03	Congenital malformations of the circulatory system	4	12	982.84	0.02%
00532	West Volusia Hospital Authority	19.12	Injury of unspecified body region	4	7	948.67	0.02%
00532	West Volusia Hospital Authority	02.13	Malignant neoplasms of thyroid and other endocrine glands	3	11	927.30	0.02%
00532	West Volusia Hospital Authority	19.18	Poisoning by, adverse effects of and underdosing of drugs, medicaments and	5	9	891.80	0.02%
00532	West Volusia Hospital Authority	06.08	Polyneuropathies and other disorders of the peripheral nervous system	7	9	863.39	0.01%
00532	West Volusia Hospital Authority	13.18	Intraoperative and postprocedural complications and disorders of	2	9	770.59	0.01%
00532	West Volusia Hospital Authority	10.07	Other respiratory diseases principally affecting the interstitium	7	10	758.91	0.01%
00532	West Volusia Hospital Authority	05.10	Behavioral and emotional disorders with onset usually occurring in childhood	3	5	677.54	0.01%
00532	West Volusia Hospital Authority	09.10	Other and unspecified disorders of the circulatory system	5	7	613.59	0.01%
00532	West Volusia Hospital Authority	05.01	Mental disorders due to known physiological conditions	2	6	570.33	0.01%
00532	West Volusia Hospital Authority	02.22	Neoplasms of unspecified behavior	3	4	518.81	0.01%
00532	West Volusia Hospital Authority	08.01	Diseases of external ear	4	5	502.73	0.01%
00532	West Volusia Hospital Authority	17.10	Other congenital malformations	2	3	432.95	0.01%
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	21.14	Persons encountering health services in other circumstances	3	4	371.87	0.01%
00532	West Volusia Hospital Authority	04.06	Malnutrition	1	1	351.39	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	2	2	277.77	0.00%
00532	West Volusia Hospital Authority	10.09	Other diseases of the pleura	12	18	242.75	0.00%
00532	West Volusia Hospital Authority	10.06	Lung diseases due to external agents	1	2	240.94	0.00%
00532	West Volusia Hospital Authority	04.10	Postprocedural endocrine and metabolic complications and disorders, not	1	2	199.28	0.00%
00532	West Volusia Hospital Authority	06.10	Cerebral palsy and other paralytic syndromes	1	2	194.37	0.00%
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	06.09	Diseases of myoneural junction and muscle	1	2	165.60	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	01.19	Pediculosis, acariasis and other infestations	2	3	125.94	0.00%
00532	West Volusia Hospital Authority	17.11	Chromosomal abnormalities, not elsewhere classified	1	1	106.05	0.00%



Requested by: ReportScheduler from p316 data [P316] Generated at: 00:28:13 on 01 January 2022



Block of Business ID:

EBMSI

Client ID: Paid Date: 00532 1/1/2021 to 12/31/2021

ClientId	Client Name	Categoryld	Category Description	Unique Patients	Claim Count	Paid Amount	Percent of Total
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	21.05	Retained foreign body fragments	1	1	82.08	0.00%
00532	West Volusia Hospital Authority	01.18	Helminthiases	1	1	65.23	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	16.09	Digestive system disorders of newborn	1	1	57.55	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%
				7685	20566	5,902,586.05	100.00%





Summary of Claims Paid By Location

Block of Business ID: Client ID:

EBMSI 00532

Paid Date: 12/1/2021 to 12/31/2021

Description	Claims	Medical	Dental	Vision	Prescription	Disability	Total Paid
00532-West Volusia Hospital Authority							
DeLand	2	68.42	0.00	0.00	0.00	0.00	68.42
Deltona	8	667.72	0.00	0.00	0.00	0.00	667.72
miCareDeLand	1538	313,831.41	0.00	0.00	0.00	0.00	313,831.41
miCareDelton	1356	227,098.23	0.00	0.00	0.00	0.00	227,098.23
miCarePierso	153	55,228.69	0.00	0.00	0.00	0.00	55,228.69
Pierson	2	0.00	0.00	0.00	0.00	0.00	0.00
00532 1	Totals: 3059	596,894.47	0.00	0.00	0.00	0.00	596,894.47





Summary of Claims Paid By Location

Block of Business ID: Client ID:

EBMSI 00532

Paid Date: 1/1/2021 to 12/31/2021

Description 00532-West Volusia Hospital Authority	Claims	Medical	Dental	Vision	Prescription	Disability	Total Paid
DeLand	400	57,789.15	0.00	0.00	0.00	0.00	57,789.15
Deltona	498	145,418.11	0.00	0.00	0.00	0.00	145,418.11
miCareDeLand	18952	2,635,227.82	0.00	0.00	0.00	0.00	2,635,227.82
miCareDelton	19380	2,773,781.19	0.00	0.00	0.00	0.00	2,773,781.19
miCarePierso	1865	277,577.20	0.00	0.00	0.00	0.00	277,577.20
Pierson	73	12,792.58	0.00	0.00	0.00	0.00	12,792.58
00532 To	otals: 41168	5,902,586.05	0.00	0.00	0.00	0.00	5,902,586.05





Top Providers by Paid Amount for Tins: '204552956'

Block of Business ID: Client ID: EBMSI 00532

Paid Date: 12/1/2021 to 12/31/2021

Tin	NPI	Provider	City	State	Specialty	Claim Count	Billed Charges	Over UCR	PPO Discount	Allowed	Plan Paid Patie	nt Resp
20-4552956	1942540356	Micare LLC	Billings	мт	Clinic	797	0.00	0.00	0.00	0.00	0.00	0.00



Top Providers by Paid Amount for Tins: '204552956'

Block of Business ID: Client ID:

EBMSI 00532

Paid Date: 1/1/2021 to 12/31/2021

ıt Resp	0.00
Plan Paid Patient Resp	0.00
Allowed	0.00
PPO Discount	0.00
Over UCR	00.00
Billed Charges	0.00
Count	9554
ity	
Specia	Clinic
State	TM
City	Billings
Provider	Micare LLC
ĪĠN	1942540356
Ē	20-4552956



Top Providers by Paid Amount for Tins: '550799729'

Paid Date: 12/1/2021 to 12/31/2021

mįBenefits^{if} Block of Business ID: Client ID:

EBMSI 00532

There is no data to you There is no datars you for the parameters you entered





Top Providers by Paid Amount for Tins: '550799729'

Block of Business ID: Client ID:

EBMSI 00532 Paid Date: 1/1/2021 to 12/31/2021

Tin	NPI	Provider	City	State	Specialty	Claim Count	Billed Charges	Over UCR	PPO Discount	Allowed	Plan Paid Pa	tient Resp	
	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			DINE TO SE							Visit Harriste		
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	24	726.00	0.00	80.80	862.00	854.38	25.00	
55-0799729	1992792311	Nefhs Pierson	Pierson	FL	Clinic	13	377.50	0.00	63.05	191.95	463.79	20.00	
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	37	3,793.32	0.00	5.94	3,787.38	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	3	377.00	0.00	0.00	377.00	0.00	0.00	
55-0799729	1396282208	NEFHS Daytona	South Daytona	FL	Hospital	3	172.00	0.00	0.00	172.00	0.00	0.00	





Location Name	Month	Hospital	Laboratory	PCP	Speciality Fa	cility Physician	Total Claims Count	Total Paid Claims	Total Fixed Costs	Employee Count	PEPM Cost/ Employee	Hospital PEPM	Lab PEPM	PCP PEPM	Speciality PEPM	Facility PEPM
00532 - West Volus	sia Hospital Authority															
miCareDeLand	01-2021	\$0.00	\$3,019.53	\$0.00	\$49,132.91	\$0.00	429	\$52,152.44	\$0.00	1169	\$44.61	\$0.00	\$2.58	\$0.00	\$42.03	\$0.00
miCareDeLand	02-2021	\$0.00	\$11,639.77	\$0.00	\$83,073.60	\$0.00	692	\$94,713.37	\$0.00	1180	\$80.27	\$0.00	\$9.86	\$0.00	\$70.40	\$0.00
miCareDeLand	03-2021	\$399.64	\$19,342.96	\$0.00	\$62,106.24	\$0.00	804	\$81,848.84	\$0.00	1198	\$68.32	\$0.33	\$16.15	\$0.00	\$51.84	\$0.00
miCareDeLand	04-2021	\$11,384.91	\$18,064.94	\$0.00	\$155,406.21	\$2,382.30	1124	\$187,238.36	\$0.00	1206	\$155.26	\$9.44	\$14.98	\$0.00	\$128.86	\$1.98
miCareDeLand	05-2021	\$12,871.90	\$9,068.04	\$0.00	\$63,751.88	\$433.53	742	\$86,125.35	\$0.00	1133	\$76.02	\$11.36	\$8.00	\$0.00	\$56.27	\$0.38
miCareDeLand	06-2021	\$13,900.10	\$15,700.50	\$0.00	\$75,243.14	\$83.26	826	\$104,927.00	\$0.00	1065	\$98.52	\$13.05	\$14.74	\$0.00	\$70.65	\$0.08
miCareDeLand	07-2021	\$42,632.07	\$11,668.44	\$0.00	\$106,124.65	\$393.03	1057	\$160,818.19	\$0.00	980	\$164.10	\$43.50	\$11.91	\$0.00	\$108.29	\$0.40
miCareDeLand	08-2021	\$36,743.00	\$5,084.79	\$0.00	\$61,766.80	\$379.92	544	\$103,974.51	\$0.00	889	\$116.96	\$41.33	\$5.72	\$0.00	\$69.48	\$0.43
miCareDeLand	09-2021	\$83,000.04	\$11,786.57	\$0.00	\$70,548.00	\$1,975.06	823	\$167,309.67	\$0.00	812	\$206.05	\$102.22	\$14.52	\$0.00	\$86.88	\$2.43
miCareDeLand	10-2021	\$47,743.79	\$8,759.20	\$0.00	\$64,496.70	\$44.34	646	\$121,044.03	\$0.00	722	\$167.65	\$66.13	\$12.13	\$0.00	\$89.33	\$0.06
miCareDeLand	11-2021	\$44,697.02	\$15,889.15	\$0.00	\$61,305.18	\$36.95	672	\$121,928.30	\$0.00	710	\$171.73	\$62.95	\$22.38	\$0.00	\$86.35	\$0.05
miCareDeLand	12-2021	\$76,424.54	\$7,021.07	\$0.00	\$82,654.18	\$697.37	729	\$166,797.16	\$0.00	699	\$238.62	\$109.33	\$10.04	\$0.00	\$118.25	\$1.00
	Subtotal:	\$369,797.01	\$137,044.96	\$0.00	\$935,609.49	\$6,425.76	9088	\$1,448,877.22	\$0.00	11763	\$123.17	\$31.44	\$11.65	\$0.00	\$79.54	\$0.55
miCareDelton	01-2021	\$0.00	\$5,002.12	\$0.00	\$50,507.76	\$0.00	475	\$55,509.88	\$0.00	930	\$59.69	\$0.00	\$5.38	\$0.00	\$54.31	\$0.00
miCareDelton	02-2021	\$0.00	\$12,705.80	\$0.00	\$79,621.20	\$0.00	787	\$92,327.00	\$0.00	925	\$99.81	\$0.00	\$13.74	\$0.00	\$86.08	\$0.00
miCareDelton	03-2021	\$0.00	\$22,739.61	\$0.00	\$91,183.73	\$0.00	1054	\$113,923.34	\$0.00	919	\$123.96	\$0.00	\$24.74	\$0.00	\$99.22	\$0.00
miCareDelton	04-2021	\$44,699.87	\$19,260.88	\$0.00	\$177,755.94	\$669.76	1288	\$242,386.45	\$0.00	910	\$266.36	\$49.12	\$21.17	\$0.00	\$195.34	\$0.74
miCareDelton	05-2021	\$7,459.40	\$8,118.85	\$0.00	\$81,102.95	\$406.72	734	\$97,087.92	\$0.00	835	\$116.27	\$8.93	\$9.72	\$0.00	\$97.13	\$0.49
miCareDelton	06-2021	\$23,994.39	\$14,062.15	\$0.00	\$97,861.77	\$205.07	854	\$136,123.38	\$0.00	822 762	\$165.60	\$29.19	\$17.11	\$0.00	\$119.05	\$0.25
miCareDelton	07-2021	\$55,581.99	\$16,756.38	\$0.00	\$156,907.89	\$361.81	1109	\$229,608.07	\$0.00	708	\$301.32	\$72.94	\$21.99	\$0.00	\$205.92	\$0.47
miCareDelton	08-2021	\$9,981.21	\$10,189.12	\$0.00	\$62,888.02	\$319.95	682	\$83,378.30	\$0.00		\$117.77	\$14.10	\$14.39	\$0.00	\$88.82	\$0.45
miCareDelton	09-2021	\$5,583.24	\$13,554.50	\$0.00	\$107,152.41	\$161.12	879 741	\$126,451.27	\$0.00 \$0.00	642 598	\$196.96 \$233.50	\$8.70 \$77.90	\$21.11 \$22.91	\$0.00	\$166.90	\$0.25
miCareDelton miCareDelton	10-2021 11-2021	\$46,583.95 \$33,593.52	\$13,699.60 \$15,320.17	\$0.00 \$0.00	\$79,178.36 \$112,920.11	\$170.35 \$842.12	800	\$139,632.26 \$162,675.92	\$0.00	588	\$235.50	\$57.13	\$26.05	\$0.00 \$0.00	\$132.41 \$192.04	\$0.28 \$1.43
miCareDelton	12-2021	\$56,488.96	\$8,068.04	\$0.00	\$71,015.93	\$36.95	633	\$135,609.88	\$0.00	582	\$233.01	\$97.06	\$13.86	\$0.00	\$192.04	\$0.06
THE CATE DE ROTT	Subtotal:	\$283,966.53	\$159,477.22	\$0.00	\$1,168,096.07	\$3,173.85	10036	\$1,614,713.67	\$0.00	9221	\$175.11	\$30.80	\$17.30	\$0.00	\$126.68	NAME OF TAXABLE PARTY.
miCon Diana	01-2021	ESTRICT TO SERVICE OF THE SERVICE OF THE		LOCAL PROPERTY OF THE	\$2,732.55	\$0.00	48	\$3,121.28	\$0.00	129	\$24.20	\$0.00	\$3.01	\$0.00		\$0.34
miCarePierso	01-2021	\$0.00 \$0.00	\$388.73 \$634.66	\$0.00 \$0.00	\$2,732.55	\$0.00	57	\$4,303.19	\$0.00	129	\$33.62	\$0.00	\$4.96	\$0.00	\$21.18 \$28.66	\$0.00
miCarePierso miCarePierso	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	\$28.66	\$0.00
miCarePierso	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 \$0.00
miCarePierso	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
miCarePierso	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
miCarePierso	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
miCarePierso	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
miCarePierso	09-2021	\$4,362.27	\$1,564.50	\$0.00	\$7,460.94	\$7.39	90	\$13,395.10	\$0.00	82	\$163.35	\$53.20	\$19.08	\$0.00	\$90.99	\$0.09
miCarePierso	10-2021	\$394.33	\$434.22	\$0.00	\$7,638.02	\$7.39	59	\$8,473.96	\$0.00	76	\$111.50	\$5.19	\$5.71	\$0.00	\$100.50	\$0.10
miCarePierso	11-2021	\$151.31	\$1,554.14	\$0.00	\$6,455.79	\$0.00	72	\$8,161.24	\$0.00	79	\$103.31	\$1.92	\$19.67	\$0.00	\$81.72	\$0.00
miCarePierso	12-2021	\$354.36	\$963.67	\$0.00	\$6,383.88	\$0.00	72	\$7,701.91	\$0.00	77	\$100.02	\$4.60	\$12.52	\$0.00	\$82.91	\$0.00
	Subtotal:	\$25,908.00	\$13,999.87	\$0.00	\$81,499.86	\$365.38	932	\$121,773.11	\$0.00	1280	\$95.14	\$20.24	\$10.94	\$0.00	\$63.67	\$0.29
N/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
N/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
N/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
N/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
N/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
N/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
N/A	09-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$44,825.50	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
N/A	10-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$172,625.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
N/A	12-2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$165,228.50	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Subtotal:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00	\$1,429,429.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Total:	\$679,671.54	\$310,522.05	\$0.00	\$2,185,205.42	\$9,964.99	20056	\$3,185,364.00	\$1,429,429.00	22264	\$143.07	\$30.53	\$13.95	\$0.00	\$98.15	\$0.45

Parameters

Beginning Location: Ending Location:

ebms

Paid Date: 1/1/2021-12/31/2021

Reporting Period: CLIENTYTD Location: 000-zzzzz

** Census Count Comments: Membership is counted per location, per department, or per plan for each month; an individual with a change may be counted more than one time.

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Paid Date: 1/1/21 to 12/31/21



WVHA miCare Clinic Deland and Deltona November 2021 Report

miCare Utilization and Capacity

miCare Utilization and Capacity

Deland	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	183	122	67%	61	33%

Deltona	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	153	119	78%	34	22%

	Capacity Available for Scheduled	Total Capacity Used for Scheduled	% of Total Capacity Scheduled for	Total Capacity Available for Unscheduled	% of Total Capacity Available for
Deland and Deltona	Appointments	Appointments	Appointments	Appointments	Appointments
2021	336	241	73%	95	27%

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

		REPUBLISHED IN THE					
Dela	and	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
20:	21	62%	66%	76%	61%	62%	22%

Deltona	Monday	Tuesday	Wednesday	Thursday	Friday
2021	74%	79%		79%	79%

Key Insights:

- Between the two clinics 73% of the available capacity was used for scheduled appointments; 27% 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
 - o DeLand 6%
 - Deltona 13% 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

November 2021

	Total Unique Patients with Appointments	Total Eligible Membership	Penetration of Membership (%)
Total	605	1,284	47%

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



miCare Visit Type Frequency <u>Deland</u>

#	Visit Type Description	Visit Count	% of Total
1	Medication Pick Up	533	54%
2	Recheck/ Follow-Up	136	14%
3	Lab Ordered by a miCare Provider	125	13%
4	Regular Visit, 1-2 Issues/Medications	45	5%
5	Lab Ordered by a Non-miCare Provider	32	3%
6	Sick/Urgent	23	2%
7	Immunization/Shot	22	2%
8	Med Pick Up Pt Assist Program	20	2%
9	Hospital Follow-up	14	1%
10	1st Clinic Visit	12	1%
11	Chronic Disease Mgmt	11	1%
12	Nurse Visit	8	1%
13	Regular Visit, 3+ Issues/Medications	7	1%
14	Physical/Well Exams (Women/Men 18 and over)	6	1%
	Overall - Total	994	

Location	Visit Count	% of Total
Onsite	879	88%
Telephone	115	12%
Overall - Total	994	



Deltona

#	Visit Type Description	Visit Count	% of Total
1	Recheck/ Follow-Up	135	38%
2	Lab Ordered by a miCare Provider	70	19%
3	Regular Visit, 1-2 Issues/Medications	42	12%
4	Sick/Urgent	23	6%
5	1st Clinic Visit	18	5%
6	Immunization/Shot	14	4%
7	Chronic Disease Mgmt	11	3%
7	Hospital Follow-up	11	3%
9	Physical/Well Exams (Women/Men 18 and over)	10	3%
10	Lab Ordered by a Non-miCare Provider	7	2%
11	Community Resource	6	2%
11	Med Pick Up Pt Assist Program	6	2%
13	Nurse Visit	3	1%
14	Regular Visit, 3+ Issues/Medications	2	1%
15	Medication Pick Up	1	0%
	Overall - Total	359	

Location	Visit Count	% of Total
Onsite	285	79%
Telephone	74	21%
Overall - Total	359	

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



WVHA miCare Clinic Deland and Deltona December 2021 Report

miCare Utilization and Capacity

miCare Utilization and Capacity

Deland	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	192	152	79%	40	21%

Deltona	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	123	100	81%	23	19%

Deland and Delton	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	315	252	80%	63	20%

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	Monday	Tuesday	Wednesday	Thursday	Friday
2021	87%	81%	81%	76%	68%

Deltona	Monday	Tuesday	Wednesday	Thursday	Friday
2021	67%	87%		87%	69%

Key Insights:

- Between the two clinics 80% of the available capacity was used for scheduled appointments; 20% 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
 - o DeLand 6%
 - Deltona 17% 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

December 2021

	Total Unique Patients with Appointments	Total Eligible Membership	Penetration of Membership (%)
Total	611	1,291	47%

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



miCare Visit Type Frequency

<u>Deland</u>

#	Visit Type Description	Visit Count	% of Total
1	Medication Pick Up	533	51%
2	Lab Ordered by a miCare Provider	134	13%
3	Recheck/ Follow-Up	117	11%
4	Regular Visit, 1-2 Issues/Medications	69	7%
5	Lab Ordered by a Non-miCare Provider	30	3%
6	1st Clinic Visit	29	3%
7	Hospital Follow-up	28	3%
8	Med Pick Up Pt Assist Program	22	2%
9	Sick/Urgent	21	2%
10	Chronic Disease Mgmt	15	1%
10	Immunization/Shot	15	1%
12	Physical/Well Exams (Women/Men 18 and over)	14	1%
13	Nurse Visit	7	1%
14	Regular Visit, 3+ Issues/Medications	4	0%
15	Procedure	1	0%
	Overall - Total	1,039	

Location	Visit Count	% of Total
Onsite	944	91%
Telephone	95	9%
Overall - Total	1,039	



Deltona

#	Visit Type Description	Visit Count	% of Total
1	Recheck/ Follow-Up	94	32%
2	Lab Ordered by a miCare Provider	71	24%
3	Regular Visit, 1-2 Issues/Medications	41	14%
4	1st Clinic Visit	17	6%
5	Sick/Urgent	15	5%
6	Chronic Disease Mgmt	10	3%
7	Hospital Follow-up	9	3%
7	Physical/Well Exams (Women/Men 18 and over)	9	3%
9	Lab Ordered by a Non-miCare Provider	8	3%
10	Med Pick Up Pt Assist Program	5	2%
10	Regular Visit, 3+ Issues/Medications	5	2%
12	Community Resource	4	1%
12	Immunization/Shot	4	1%
14	Nurse Visit	3	1%
	Overall - Total	295	

Location	Visit Count	% of Total
Onsite	222	75%
Telephone	73	25%
Overall - Total	295	

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

Eileen Long

From:

Darik J. Croft <dcroft@ebms.com>

Sent:

Tuesday, January 11, 2022 11:54 AM

To:

Eileen Long; Rose Alberts; Gail Hallmon; Ted Small

Subject:

RE: Friendly Reminder

Attachments:

WVHA Q4 Report.docx; WVHA Q4 Report.pdf

Hi Eileen,

I was able to get the annual report so I have attached the 2021 Q4 (annual) miCare operating report. It does include survey comments. I want the board to know that we follow up with the concerns and work with the clinic to ensure we are aware of the opportunities and optimize our care delivery processes to ensure we continue to provide an exceptional patient experience.

Thanks,

Darik Croft, MBA

Chief Operating Officer- miCare | e: dcroft@ebms.com t: 800.777.3575 ext. 1152 | p: 406-869-6548 | f: 406-652-5380 | m: 406-606-2749 | 2075 Overland Avenue | PO Box 21367 | Billings, MT 59104-1367 www.micareclinics.com www.ebms.com

Healthcare simplified.



From: Eileen Long <elong@drtcpa.com> Sent: Tuesday, January 11, 2022 9:09 AM

To: Darik J. Croft <dcroft@ebms.com>; Rose Alberts <ralberts@veracity-benefits.com>; Gail Hallmon

<ghallmon@thehnd.com>; Ted Small <tsmall@westvolusiahospitalauthority.org>

Subject: RE: Friendly Reminder

Hi Darik,

Thanks for these reports (and adding the Word version) and I'll look for the annual operating report next month.

Have a great week everybody!

Eileen O'Reilly Long



1006 N Woodland Blvd DeLand FL 32720



WVHA miCare Clinic Deland and Deltona 2021 Fourth Quarter Report miCare Utilization and Member Penetration

miCare Utilization and Capacity

	Capacity Available for	Total Capacity Used for	% of Total Capacity	Total Capacity Available for	% of Total Capacity
Deland	Scheduled	Scheduled	Scheduled for	Unscheduled	Available for
Q4	Appointments	Appointments	Appointments	Appointments	Appointments
2021	2,471	1,758	71%	713	29%

	Capacity Available for	Total Capacity Used for	% of Total Capacity	Total Capacity Available for	% of Total Capacity
Deltona	Scheduled	Scheduled	Scheduled for	Unscheduled	Available for
Q4	Appointments	Appointments	Appointments	Appointments	Appointments
2021	2,057	1,436	70%	621	30%

Deland and Deltona	Capacity Available for Scheduled	Total Capacity Used for Scheduled	% of Total Capacity Scheduled for	Total Capacity Available for Unscheduled	% of Total Capacity Available for
Q4	Appointments	Appointments	Appointments		Appointments
2021	4528	3,194	70%	1,334	30%

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

<u>% Total Utilized Hours</u>: Total time that has been scheduled (including "no-shows" since this time was unavailable for other members to schedule an appointment

Average 2021 Utilization 720
Average 2021 Unscheduled Capacity 30%



miCare Utilization by Day of the Week

Deland Q4	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
2021	75%	77%	71%	74%	74%	

Deltona Q4	Monday	Tuesday	Wednesday	Thursday	Friday
2021	72%	73%	67%	69%	67%

Key Insights:

- 2021 the average utilization for Q4 is 70%
- At the Deland location there were 69 no shows in Q4 of 2021. That is a 6% no show percentage. Friday and Saturdays have the highest no show rates
- At the Deltona location there were 923 no shows in Q4 of 2021. That is a 19% no show percentage.
 Monday's and Tuesday's have the highest no show rates

miCare Member Migration

	Total Unique Patients with Appointments	Total Eligible Membership	Penetration of Membership (%)
Patients	1,058	1,284	82%
Total 2021	1,058	1,284	82%

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



miCare Visit Type Frequency

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

Deland

#	Visit Type Description	Visit Count	% of Total
1	Medication Pick Up	7,271	55%
2	Lab Ordered by a miCare Provider	1,815	14%
3	Recheck/ Follow-Up	1,721	13%
4	Regular Visit, 1-2 Issues/Medications	621	5%
5	1st Clinic Visit	422	3%
6	Lab Ordered by a Non-miCare Provider	298	2%
7	Med Pick Up Pt Assist Program	245	2%
8	Sick/Urgent	216	2%
9	Hospital Follow-up	167	1%
10	Physical/Well Exams (Women/Men 18 and over)	107	1%
11	Chronic Disease Mgmt	71	1%
12	Nurse Visit	54	0%
13	Immunization/Shot	50	0%
14	Regular Visit, 3+ Issues/Medications	33	0%
15	Community Resource	29	0%
16	Procedure	1	0%
16	Sports Physical	1	0%
	Overall - Total	13,122	

Location	Visit Count	% of Total
Onsite	12,371	94%
Telephone	751	6%
Overall - Total	13,122	



Deltona

#	Visit Type Description	Visit Count	% of Total
1	Recheck/ Follow-Up	1.476	37%
2	Lab Ordered by a miCare Provider	814	20%
3	Regular Visit, 1-2 Issues/Medications	533	13%
4	1st Clinic Visit	306	8%
5	Sick/Urgent	272	7%
6	Physical/Well Exams (Women/Men 18 and over)	105	3%
7	Lab Ordered by a Non-miCare Provider	101	3%
8	Hospital Follow-up	87	2%
9	Med Pick Up Pt Assist Program	80	2%
10	Chronic Disease Mgmt	53	1%
11	Immunization/Shot	49	1%
12	Regular Visit, 3+ Issues/Medications	44	1%
13	Nurse Visit	30	1%
14	Community Resource	20	1%
15	Medication Pick Up	6	0%
16	Procedure	2	0%
17	Sports Physical	1	0%
	Overall - Total	3,979	

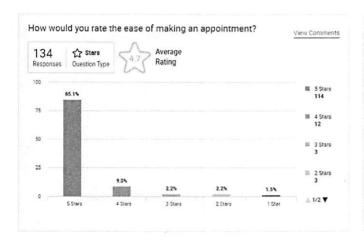
Location	Visit Count	% of Total
Onsite	3,428	86%
Telephone	551	14%
Overall - Total	3,979	

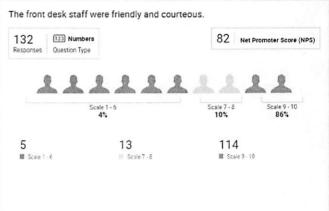


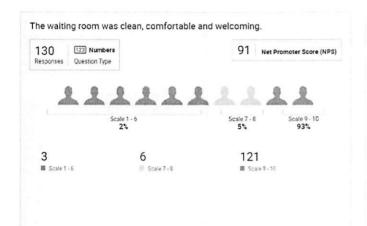
Post Visit Survey Results

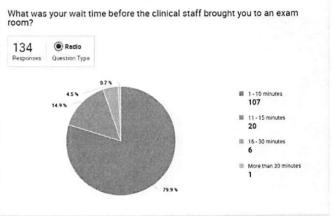
Q3 2021

Oct - Dec 2021

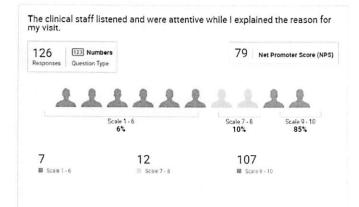


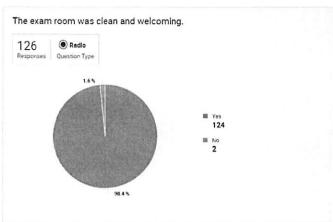


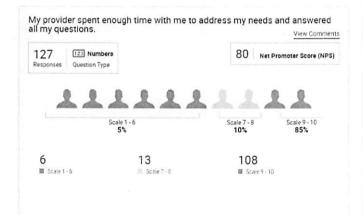


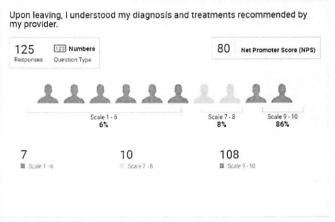




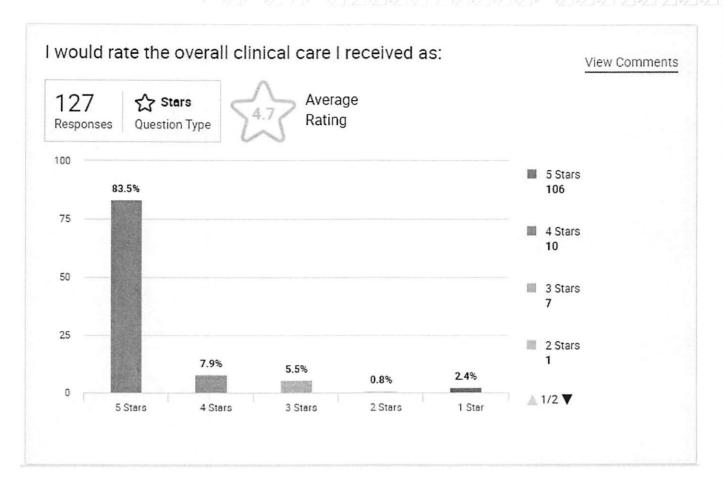












Survey Results- Comments

- Is always so easy to make my appointment in Deltona
- this was a phone appointment only
- Very speedy
- Hard to get directly to the clinic via telephone also not able to do it it via portal
- My wellness appt was entered incorrectly twice. Bloodwork was scheduled and then the appt for physical.
 Each time I went in for physical, the appt was to review bloodwork. Another appt for bloodwork was made for in 3 months and another physical. I went in and again the nurse practitioner said it was to review bloodwork. That day, she went up with me to check out and made sure the next appt in 3 months was for bloodwork and physical. After several months and 3 blood draws I finally had a physical.
- · The staff was very nice kind friendly
- · Best Dr. and staff ever.
- I kinda miss actually being seen in person.
- My visit was a phone call
- · Great staff,, very caring..



Survey Comments Cont:

- Wonderful Doctor who really shows care for your health. Good team of nurses.
- Dr Mark Payne is always helpful and always listen and explain everything to you.
- Doc Hahn is great.
- We went over lab results and I asled about 2 specialists that I was referred to and what they said, Sherri did
 not know since theere were no info sent by them. I also told her I had fallen twice recently hitting my head
 and face and the second time injuring my shoulder and arm. She did not seem concerned with my large bump
 on my forehead or my lack of ability to use my right arm.
- Again Hahn listens and has the answers.
- i do not like of telephone appointments. I do not believe the provider gets a good picture of my health and an example of that would be the large bump on my brow and the lack of ability to use my right arm.
- Grt.job True Heroes
- Rooms are to small I have a hard time maneuvering into a room using my mobility scooter or going down a
 hall way there is know way I can turn around.
- Gina mendiz was awesome.
- Overall experience is very good
- Mark Payne is always very attentive and thorough. A great asset to the MiCare team.
- The physical exam was lacking in my opinion. I have no issue getting med refills, I have no problem going to specialists to treat my osteoarthritis, or anxiety/depression, but it took 3 tries and 3 blood draws to get the correct appt on the books. I like all the staff very much. This healthcare is different than my previous healthcare with blue cross in MA through my employer. It seems the only difference is my income level and the type of insurance I have now.
- They were very helpful and nice.
- Great work
- Dr Payne is a great Dr he always give me the time if day...
- 100% A FABULOUS Dr. Mark,. The staff is so caring. Jusy wonderful.
- Best team ever
- I love going to the Dr.

You are the best!! Thank you!

When are the physicians going to physically exam the patiients

The physician and staff were friendly and caring.

Everything was great but I am still waiting for my prescription. It's been two weeks and no nothing yet.

Phone call visit

The provider attended to my needs.

Provider called me on time as scheduled.

She was awesome. Knowledgeable

Everything is perfect

Dr. Mark Payne is the best doctor I have had in my life

I am so glad to have as my Dr. Mark Payne he is very devoted

Dr Hahn really cares about me and trying to figure out what is going on with me even though my Cardiologist Dr West thinks I am faking and he makes me feel like I am nothing

Very friendly Doctor

Amazing

She explained all that needed to be addressed



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)



December 1, 2021

West Volusia Hospital Authority

Monthly Enrollment Report

In the month of November there were 229 appointments to assist with new applications and 10 appointments to assist with pended applications from October-November. For a total of 239 Interviews with clients.

219 applications were submitted for verification and enrollment. Of these, 219 were processed by the end of the month includes the roll overs 0 from previous month) leaving the balance of 0 to roll over into December 2021 for approval.

Of the 219 that were processed, 196 were approved and 13 were denied. There were 10 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







The House Next Door
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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)

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



January 3, 2022

West Volusia Hospital Authority

Monthly Enrollment Report

In the month of December there were 248 appointments to assist with new applications and 11 appointments to assist with pended applications from November-December. For a total of 259 Interviews with clients.

202 applications were submitted for verification and enrollment. Of these, 202 were processed by the end of the month includes the roll overs 0 from previous month) leaving the balance of 0 to roll over into January 2022 for approval.

Of the 202 that were processed, 184 were approved and 7 were denied. There were 11 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





1006 N. Woodland Boulevard ■ DeLand, FL 32720 (386) 734-9441 🚮 www.drtcpa.com

Ronald J. Cantlay, CPA/CFP® James H. Dreggors, CPA Victoria A. Kizma, CPA Robin C. Lennon, CPA John A. Powers, CPA Ann J. Rigsby, CPA/CFP® Melissa J. Trickey, CPA

January 20, 2022

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

This letter documents our agreement, as administrators for the West Volusia Hospital Authority, to perform these agreed-upon procedures related to grantee site visits for the fiscal year of 2021-2022. The procedures are enumerated below. We will meet with you as needed to discuss the agreed-upon procedures, results, and other issues that may arise.

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

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

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

MEMBERS

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

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

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

Acknowledged:		
Red & Come		
Dreggors, Rigsby & Teal, P.A.	West Volusia Hospital Authority	Date

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

November 15, 2021

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

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

We have performed the procedures detailed in our engagement letter for grantee site visits, dated July 15, 2021, which were agreed to by West Volusia Hospital Authority (WVHA) Board of Commissioners, solely to assist you with respect to funding agreement compliance of Rising Against All Odds (RAAO) HIV/Aids Outreach Services for the year ending September 30, 2021. WVHA provides reimbursement of a flat fee of \$100.00 of Active Street Outreach services to individual Program Participants, to include at least one-half hour of individualized preventative education and counseling and testing if consented; a health and behavioral education flat fee capped at \$50.00 per Program Participant for providing at least one-half hour (30 minutes) of one-on-one health and behavioral education and coaching using evidence based curricula and strategies; and a fee of \$25.00 per half hour for up to four hours of Comprehensive Case Management services for a Program Participant. The sufficiency of these procedures is solely the responsibility of those parties specified in the report. Consequently, we make no representation regarding the sufficiency of the procedures described below, either for the purpose for which this report has been requested or for any other purpose.

Our procedures and findings are below:

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

MEMBERS

Rising Against All Odds (RAAO) HIV/Aids Outreach Services Site Visit Review Summary November 15, 2021 Page 2 of 3

- a. Each month RAAO provides to WVHA a list of clients who received services during the prior month. This de-identified list includes the client's city of residence, the date services were rendered, and the units of service billed in half hour, one hour, or multiple hour increments.
- b. RAAO personnel complete a residency checklist form with information obtained from the patient. This form is completed at time of the first encounter.
- c. RAAO multiplies the units of service, typically one hour up to four hours, to calculate the invoice total.
- 2. Select a sample of transactions and test compliance with contract provisions.
 - a. January 2021 was chosen for test procedures. A de-identified list of client visits was provided, four hundred seventy-seven (477) client events.
 - b. From the individual list of client visits, five percent (5%) were selected for compliance review (25 clients) for proof of identification and residency. From this list:
 - i. RAAO provided supporting medical files of all selected clients for review. All twenty-five (25) service dates were verified.
 - ii. Of the twenty-five (25) files sampled, one hundred percent (100%) of the files tied back to the client ID numbers presented on the original invoice.
 - iii. Of the twenty-five (25) files sampled, one hundred percent (100%) contained approved proof of identification.
 - iv. Of the twenty-five (25) files sampled, one hundred percent (100%) contained approved proof of residency.
- 3. Prepare a written report summarizing the results with recommendations to the Board of Commissioners.
 - a. The Utilization Report which details clients served and demographic data with respect to those clients, which RAAO provides to the WVHA, does meet the requirements of Section 7 of the funding agreement.

Rising Against All Odds (RAAO) HIV/Aids Outreach Services Site Visit Review Summary November 15, 2021 Page 3 of 3

b. RAAO's client files appeared to be complete and organized when reviewed for verification of services provided.

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

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

Dusgo Rifs + Tal , P.A.

Dreggors, Rigsby & Teal, P.A.

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Ronald J. Cantlay, CPA/CFP® James H. Dreggors, CPA Victoria A. Kizma, CPA Robin C. Lei NovemBer 8, 2021

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

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

Re: Stewart-Marchman-Act (SMA) Residential Treatment Beds

Dear Commissioners:

We have performed the procedures detailed in our engagement letter for grantee site visits, dated July 15, 2021, which were agreed to by West Volusia Hospital Authority (WVHA) Board of Commissioners, solely to assist you with respect to funding agreement compliance of SMA for the year ending September 30, 2021. WVHA reimburses SMA for residential treatment beds provided to West Volusia County residents. The engagement to apply the agreed upon procedures was performed in accordance with the standards established by the American Institute of Certified Public Accountants. The sufficiency of these procedures is solely the responsibility of those parties specified in the report. Consequently, we make no representation regarding the sufficiency of the procedures described below, either for the purpose for which this report has been requested or for any other purpose.

Our procedures and findings are below:

- 1. Inquire and document as to the grantee's monitoring procedures with respect to contract compliance.
 - a. SMA provides to WVHA with each month's invoices, a list of clients who received services during the prior month. This de-identified list includes the client's city of residence, the admission date and the discharge date.
 - b. SMA personnel complete an income eligibility form with information obtained from the patient. This form is completed at time of admission if possible, or as soon as patient is capable of providing the information.
 - c. SMA is reimbursed a flat fee of \$188.35 per bed day at Level II Residential Treatment and for prescription medications provided to clients at the acquisition cost plus a \$7.00 filling fee per prescription.
- 2. Select a sample of transactions and test compliance with contract provisions.
 - a. January 2021 was chosen for test procedures. From the individual list of client charges, five (5) clients were treated, and five (5) files were selected for compliance review, or one hundred percent (100%).

SMA Residential Treatment Beds Site Visit Review Summary November 8, 2021 Page 2 of 2

- b. SMA provided supporting medical files of all selected clients for review. One Hundred percent (100%) of dates of admission and discharge dates, if applicable, were verified.
- c. SMA provided supporting eligibility files of all selected clients for review. One hundred percent (100%) had valid photo identification.
- d. SMA provided financial information for all selected clients for review. One hundred percent (100%) had an active/eligible WVHA HealthCard.
- 3. Prepare a written report summarizing the results with recommendations to the Board of Commissioners.
 - a. The Utilization Report which details clients served and demographic data with respect to those clients, which SMA provides to the WVHA, meets all of the requirements of Section 7 of the funding agreement.
 - b. SMA's medical files appeared to be complete and organized when reviewed for verification of services provided.
 - c. SMA's eligibility screening met the requirements of the funding agreement.

We were not engaged to, and did not conduct an audit, the objective of which would be the expression of an opinion, on the specified elements, accounts, or items. Accordingly, we do not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you. This report is intended solely for the information and use of the specified users listed above and is not intended to be and should not be used by anyone other than those specified parties.

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

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November 12, 2021

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

Re: Stewart-Marchman-Act (SMA) Baker Act - Local Match Funding

Dear Commissioners:

We have performed the procedures detailed in our engagement letter for grantee site visits, dated July 15, 2021, which were agreed to by West Volusia Hospital Authority (WVHA) Board of Commissioners, solely to assist you with respect to funding agreement compliance of Stewart-Marchman-Act (SMA) Baker Act – Local Match Funding for the year ending September 30, 2021. WVHA provides local match funding (25%) to provide psychiatric crisis services under the Baker Act. The sufficiency of these procedures is solely the responsibility of those parties specified in the report. Consequently, we make no representation regarding the sufficiency of the procedures described below, either for the purpose for which this report has been requested or for any other purpose.

Our procedures and findings are below:

- 1. Inquire and document as to the grantee's monitoring procedures with respect to contract compliance.
 - a. Each month SMA provides to WVHA a list of clients who received services during the prior month. This de-identified list includes the client's city of residence, the admission date and the discharge date.
 - b. SMA personnel complete a Client Admission Registration Form with information obtained from the patient. This form is completed at time of admission if possible, or as soon as patient is capable of providing the information.
 - c. SMA personnel complete forms specific in identifying WVHA eligible clients to determine residency in West Volusia County along with an asset test worksheet listing the family size and asset limit based upon the WVHA Eligibility Guidelines.

SMA Baker Act – Local Match Site Visit Review Summary November 12, 2021 Page 2 of 3

- d. SMA multiplies the number of days of service for emergency services and the crisis stabilization unit times the rate established by the State of Florida (\$377.27 per day) plus 25% (local match funding) to equal the invoice total.
- e. SMA multiplies the number of days of service for detoxification services times the rate established by the State of Florida (\$307.94) plus 25% to equal the invoice total.
- 2. Select a sample of transactions and test compliance with contract provisions.
 - a. January 2021 was chosen for test procedures. A de-identified list of client visits was provided (51 client events).
 - b. From the individual list of client visits, twelve percent (12%) were selected for compliance review (6 clients) of income and residency eligibility. From this list:
 - c. SMA provided supporting medical files of all selected clients for review. 100% of admission and discharge dates were verified.
 - d. SMA provided WVHA approved admission forms and/or forms specific in identifying WVHA eligible clients to determine residency in West Volusia County along with an asset test worksheet listing the family size and asset limit based upon the WVHA Eligibility Guidelines. Five (5) of the six (6) complied with completing the approved forms. One (1) client refused or eighty three percent (83%).; however, SMA provided the approved forms from a previous admission for the client who refused dating back to October of 2019.
 - e. In addition to SMA providing WVHA approved admission forms for all (6) clients per paragraph 6 of their WVHA Funding Agreement, one (1) client had an active WVHA HealthCard. Two (2) clients had active Medicaid; however, Medicaid does not reimburse for psychiatric services.
 - f. SMA provided photo ID for six (6) clients or one hundred percent (100%)
 - g. SMA provided a copy of "Exhibit L" of the agreement with the State of Florida to verify the reimbursement rate of \$377.27 established for Adult Mental Health.
 - h. SMA provided a copy of "Exhibit L" of the agreement with the State of Florida to verify the reimbursement rate of \$307.94 established for Substance Abuse Detoxification.
- 3. Prepare a written report summarizing the results with recommendations to the Board of Commissioners.
 - a. The Utilization Report which details clients served and demographic data with respect to those clients, which SMA provides to the WVHA, meets all of the requirements of Section 7 of the funding agreement.
 - b. SMA's medical files appear to be complete and organized when reviewed for verification of services provided.
 - c. SMA's eligibility screening met the requirements of the funding agreement.

SMA Baker Act – Local Match Site Visit Review Summary November 12, 2021 Page 3 of 3

> d. Continue to recommend that SMA establish a follow up protocol with the WVHA screening agency, The House Next Door (THND) to ensure that these clients apply for and secure valid WVHA HealthCards (HC) and retain a copy of that HC in their client files.

We were not engaged to, and did not conduct an audit, the objective of which would be the expression of an opinion, on the specified elements, accounts, or items. Accordingly, we do not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you. This report is intended solely for the information and use of the specified users listed above and is not intended to be and should not be used by anyone other than those specified parties.

Dunga Roty + Tell, P.A. Dreggors, Rigsby & Teal, P.A.

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November 19, 2021

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

Re: Healthy Start Coalition of Flagler and Volusia (HSCFV) Women's Intervention Specialist-Neonatal Outreach Specialist (WIS/NOS)

Dear Commissioners:

We have performed the procedures detailed in our engagement letter for grantee site visits, dated July 15, 2021 which were agreed to by West Volusia Hospital Authority (WVHA) Board of Commissioners, solely to assist you with respect to funding agreement compliance of Healthy Start Coalition of Flagler and Volusia (HSCFV) Women's Intervention Specialist-Neonatal Outreach Specialist (WIS/NOS) services for the year ending September 30, 2021. WVHA reimburses HSCFV for outreach provided by WIS/NOS for addicted pregnant women, substance exposed infants, and other extremely high risk pregnant or post-partum women or infants residing within the WVHA boundaries. These procedures were performed in accordance with the standards established by the American Institute of Certified Public Accountants. The sufficiency of these procedures is solely the responsibility of those parties specified in the report. Consequently, we make no representation regarding the sufficiency of the procedures described below, either for the purpose for which this report has been requested or for any other purpose.

Our procedures and findings are below:

1. Inquire and document as to the grantee's monitoring procedures with respect to contract compliance. WVHA funds 1 full time employee (FTE) for a WIS/NOS outreach specialist for addicted pregnant women, substance exposed infants, and other extremely high risk pregnant or post-partum women or infants residing within the WVHA boundaries. HSCFV documents activities as follows:

MEMBERS

West Volusia Hospital Authority Board of Commissioners November 19, 2021 Page 2 of 3

- a. HSCFV provides to WVHA each month's invoices and total hours billed by the Outreach Specialist for the month at an hourly rate of \$35.34.
- b. HSCFV provides reports to WVHA detailing activities of the Outreach Specialist. These reports include locations where applications and brochures are distributed and information regarding events, meetings and presentations attended by Specialist to assist in enrollment of participants. HSCFV promotes program enrollment and other activities performed by the Outreach Specialist to promote program participation.
- 2. Select a sample of transactions and test compliance with contract provisions.
 - a. January 2021 was chosen for test procedures. From the individual list of client charges, sixteen (16) clients were seen, and five (5) files or thirty-one percent (31%) were selected for compliance review.
 - b. HSCFV provided supporting files of all selected clients for review. One hundred percent (100%) of reimbursed dates of service were verified.
 - c. HSCFV provided supporting eligibility files for all selected clients for review. Three (3) out of five (5) files or sixty percent (60%) had photo identification with West Volusia addresses. HSCFV provided detailed listings of numerous attempts that were made in trying to secure from the client the missing photo ID's.
 - d. HSCFV provided copies of most recent payroll rate authorizations for WIS/NOS and detail payroll reports for the payroll dates covered by the monthly invoice. All information provided agreed to the monthly invoice.
 - e. HSCFV provides a monthly narrative report of all outreach activities, covering programs and agencies dealt with during each month, specific services provided, monthly results, data collected, services provided, overall program goals, concerns with program implementation along with a monthly utilization report.
 - f. HSCFV performs the WIS/NOS services collecting the city zip codes for each unique client. During the month of January, there were 108 encounters with reported zip codes in DeLand, Deltona, Deleon Springs, and Orange City for a total of 16 clients.
- 3. Expanded sample of transactions and test compliance with contract provision. January of 2021, HSCFV was working remotely due to the Covid Pandemic and the rise in the Delta variant. Therefore, we expanded the site visit out to August of 2021.
 - a. August 2021 was chosen for test procedures. From the individual list of client charges, twenty-four (24) clients were seen, and five (5) files or twenty-one percent (21%) were selected for compliance review.
 - b. HSCFV provided supporting files of all selected clients for review. One hundred percent (100%) of reimbursed dates of service were verified.
 - c. HSCFV provided supporting eligibility files for all selected clients for review. Three (3) out of five (5) clients were duplicate clients with more

West Volusia Hospital Authority Board of Commissioners November 19, 2021 Page 3 of 3

- than one child. One hundred percent (100%) had photo identification with West Volusia addresses.
- d. HSCFV provided copies of most recent payroll rate authorizations for WIS/NOS and detail payroll reports for the payroll dates covered by the monthly invoice. All information provided agreed to the monthly invoice.
- e. HSCFV provides a monthly narrative report of all outreach activities, covering programs and agencies dealt with during each month, specific services provided, monthly results, data collected, services provided, overall program goals, concerns with program implementation along with a monthly utilization report.
- f. HSCFV performs the WIS/NOS services collecting the city zip codes for each unique client. During the month of August, there were 261 encounters with reported zip codes in DeLand, Deltona, Debary, Deleon Springs, Orange City and Pierson for a total of 24 clients.
- g. Recommend that HSCFV procure and retain verifiable forms of proof of identification for all clients.
- 4. Prepare a written report summarizing the results with recommendations to the Board of Commissioners.
 - a. The Utilization Report of Services detailing clients served and demographic data with respect to those clients, which HSCFV provides to the WVHA, meets all of the requirements of Section 7 of the funding agreement.
 - b. The HSCFV WIS/NOS records appeared to be mostly complete and organized when reviewed for verification of visits.
 - a. Recommend that HSCFV procure and retain verifiable forms of proof of identification for all clients.

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

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

Dwg, Pig, Too P.A. Dreggors, Rigsby & Teal, P.A. 1006 N. Woodland Boulevard ■ DeLand, FL 32720 (386) 734-9441 🔝 www.drtcpa.com

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November 15, 2021

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

Re: Healthy Coalition of Flagler and Volusia (HSCFV) Family Services Coordinator

Dear Commissioners:

We have performed the procedures detailed in our engagement letter for grantee site visits, dated July 15, 2021, which were agreed to by West Volusia Hospital Authority (WVHA) Board of Commissioners, solely to assist you with respect to funding agreement compliance of Healthy Start Coalition of Flagler and Volusia (HSCFV) for the year ending September 30, 2021. WVHA reimburses HSCFV Family Services Coordinator (FSC) for an all-inclusive capitated rate per program participant provided to West Volusia County residents. The engagement to apply the agreed upon procedures was performed in accordance with the standards established by the American Institute of Certified Public Accountants. The sufficiency of these procedures is solely the responsibility of those parties specified in the report. Consequently, we make no representation regarding the sufficiency of the procedures described below, either for the purpose for which this report has been requested or for any other purpose.

Our procedures and findings are below:

- 1. Inquire and document as to the grantee's monitoring procedures with respect to contract compliance.
 - a. HSCFV provides to WVHA a monthly invoice summarizing clients served who qualify for WVHA funding. This report summarizes number of clients served, and zip code of residence
 - b. HSCFV personnel complete an income eligibility intake form with information obtained from the patient. This form is completed at the time of the first visit.
 - c. HSCFV is reimbursed an all-inclusive capitated rate of \$407.60 per program participant who received FSC services as specifically described

MEMBERS

HSCFV Family Services Site Visit Review Summary November 15, 2021 Page 2 of 3

in the Funding Request, including, but not limited to, assistance in application for Medicaid Managed Care (MMC), food stamps, and cash assistance through DCF Access, assist in navigating to application sites to obtain the WHHA HealthCard, provide information and/or referral to Women, Infant and Child (WIC) program, Healthy Start and other needed services, provide a referral for women to receive post-partum interconception health care or to parents of children for pediatric care.

- 2. Select a sample of transactions and test compliance with contract provisions.
 - a. January 2021 was chosen for test procedures. From the individual list of client charges, sixteen (16) clients were seen, and five (5) files were selected for compliance review or thirty-one percent (31%).
 - b. HSCFV provided supporting files of all selected clients for review. One hundred percent (100%) of reimbursed dates of service were verified.
 - c. HSCFV provided supporting eligibility files for all selected clients for review. One (1) file did not have a photo ID out of the five (5) or eighty percent (80%) had identification with West Volusia address. For the one (1) client that did not have a photo ID, HSCFV provided a copy of the client's Florida Medicaid application in which the client was deemed eligible and reflecting a DeLand address. Further, HSCFV provided detailed listings of numerous attempts that were made in trying to secure from the client the missing photo ID.
 - d. HSCFV collects self reported financial information on intake forms for all clients seen. One hundred percent (100%) of files or five (5) files contained income verification.
 - e. One hundred percent (100%) of HSCFV eligible clients had proof of Medicaid applications.
 - f. One hundred percent (100%) of HSCFV clients that were not eligible for Medicaid contained referrals for the WVHA HealthCard Program.
- 3. Prepare a written report summarizing the results with recommendations to the Board of Commissioners.
 - a. The Utilization Report of Services detailing clients served and demographic data with respect to those clients, which HSCFV provides to the WVHA, meets all of the requirements of Section 7 of the funding agreement.
 - b. The HSCFV FSC records appeared to be complete and organized when reviewed for verification of visits.
 - c. The HSCFV client records appeared to be mostly complete and organized when reviewed for verification of photo identification with West Volusia address.

HSCFV Family Services Site Visit Review Summary November 15, 2021 Page 3 of 3

d. Recommend that HSCFV procure and retain verifiable forms of proof of identification for all clients.

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

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

Denger, Rigsby & Teal, P.A.

About The West Volusia Hospital Authority

The West Volusia Hospital Authority (WVHA) funds local agencies that serve the health care needs of our community.

It operates as an independent special taxing district for the *Inspired by life* purpose of providing access to no-cost primary and hospital care, low co-pay specialty care, and low-cost prescriptions for working poor residents of West Volusia.

Additionally, WVHA appropriates \$4 million dollars each year to reimburse for hospital and emergency room expenses of Health Card members, with no balance billing, at either AdventHealth DeLand, AdventHealth Fish Memorial, or HalifaxHealth | UF Health Medical Center of Deltona.

WVHA funding *supports over 150 employees* of local agencies — people who live and work right here in West Volusia.

WVHA also encourages funded agencies to work together to combine resources and reduce costs. Our goal is to keep costs down and keep your tax dollars close to home.

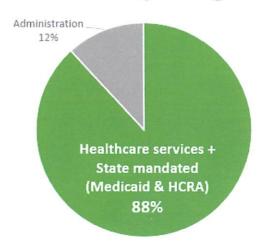


WVHA community links:

westvolusiahospitalauthority.org/community-links/



Inspired by life, Driven by hope.



Where WVHA expenditures go...

88%

Over **88%** of WVHA expenditures are directly to patient care.



The West Volusia Hospital Authority

Meeting critical needs
directly with our
patients and neighbors

386,626,4870

westvolusiahospitalauthority.org/

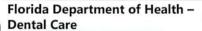
Community Legal Services of Mid-Florida

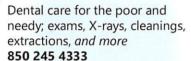


A nonprofit law firm empowering vulnerable communities through advocacy; helping card members who qualify for veterans' benefits, Medicare, or disability insurance obtain this insurance and transition off of WVHA

800 405 1417

clsmf.org/





floridahealth.gov/programs-andservices/community-health/dentalhealth/



The House Next Door

Counseling and therapeutic intervention for those with modest means experiencing divorce, depression, physical or sexual abuse, and other traumas 386 734 7571 thehnd.com/



Healthy Start Coalition of Flagler and Volusia

For women who are pregnant, post-partum, or attempting to conceive, with a focus on infant health and mental health 386 252 4277

healthystartfv.org/





Feed the hungry, shelter the homeless, prevent further homelessness... with respect and integrity

386 734 8120

neighborhoodcenterwv.org/



Stewart Marchman-Act (SMA) Behavioral Health Services

Improving lives through inpatient and outpatient care and community support for individuals struggling with additions to alcohol, opioid and drugs; mental health and crisis issues

386 254 1136 800 539 4228 smahealthcare.org/



Hispanic Health Initiative

Reaching out to medically underserved communities to educate West Volusia residents how to diagnose and make informed health care decisions about Type II diabetes

386 320 0110 / **386 320 0633** 70 Spring Visa Dr. #2, DeBary, FL



Outreach Promoting health and disease

promoting health and disease prevention, targeting marginalized and low-income populations; free and confidential testing and counseling

386 202 4209

risingagainstallodds.org/



miCare DeLand & miCare Deltona Clinics

Provider of primary care, pharmacy, and specialty care referrals to low-income residents of West Volusia

866 326 7548

micarehealthcenter.com/location/wvhamicare-clinic



RESOLUTION OF THE WEST VOLUSIA HOSPITAL AUTHORITY TO AUTHORIZE THE OPENING OF A NEW QUALIFIED PUBLIC DEPOSITORY BANK ACCOUNT AT AMERIS BANK OF FLORIDA, A DESIGNATED QUALIFIED PUBLIC DEPOSITORY

RESOLUTION 2022-001

BE IT RESOLVED by the Board of Commissioners of the West Volusia Hospital Authority, an independent special taxing district in Volusia County, Florida, created and existing under and by virtue of Chapter 57-2085, Laws of Florida, as amended, that WVHA hereby approves the opening of a new checking account at the duly qualified public depository, Ameris Bank.

Further resolved that WVHA deposit two tax revenue checks (\$6,375,482.93 and \$3,058,431.46) issued by Will Roberts Tax Collector totaling NINE MILLION FOUR HUNDRED THIRTY-THREE THOUSAND NINE HUNDRED FOURTEEN Dollars and THIRTY-NINE Cents (\$9,433,914.39) to make initial deposit into this newly opened Ameris Bank money market account.

Further resolved that this initial deposit and all subsequent transfers into or out of this new Ameris Bank money market account shall be authorized only pursuant to a check or similar authorization that is signed by two (2) WVHA Board members consistent with the requirement in Section 9 of the WVHA Enabling Legislation that the funds of WVHA be paid out only upon warranty signed by two board members.

Further resolved that each of the five duly elected and installed members of the WVHA board (currently Commissioners J. Roger Accardi; Jennifer L. Coen; Judy L. Craig, Voloria L. Manning, Donna J. Pepin) shall be authorized to be one of the two (2) required signatures to authorize a transfer of funds concerning this new Mainstreet money market account.

Further resolved that this new Ameris Bank money market account shall <u>not</u> be set up to allow any one or multiple authorized signers to have access to any of the following account features:

- a. ATM TRANSACTIONS/POINT OF SALE TRANSACTIONS
- b. ONLINE BANKING TRANSFERS; provided however, board members may be set up to view the account online)
- c. ACH OR WIRE TRANSFERS
- d. MOBILE BANKING
- e. TELEPHONE BANKING

- f. TELEPHONIC INSTRUCTIONS
- REMOTELY CREATED CHECKS g.
- FACSIMILE SIGNATURES h.
- MASTERCARD/VISA DEBIT OR CREDIT TRANSACTIONS

This Resolution shall take effect immediately upon adoption.

ADOPTED and subscribed to this 20th day of January, 2022, at a duly noticed public meeting.

CHAIR,
West Volusia Hospital Authority
I HEREBY CERTIFY that the foregoing resolution is true and correct as adopte by a vote of the Board of Commissioners of the West Volusia Hospital Authority at its monthly regular meeting, and held on Thursday, January 20, 2022 at 5:00 p.m. at the DeLand City Hall Commission Chambers, 120 S. Florida Avenue, DeLand, Florida. In a roll call, the following Commissioners voted on the resolution as follows: Commissioner J. Roger Accardi (yes/no/absent), Commissioner Jennifer L. Coen (yes/no/absent), Commissioner Judy L. Craig (yes/no/absent), Commissioner Voloria L. Manning (yes/no) and Commissioner Donna J. Pepin (yes/no/absent).
SECRETARY,

West Volusia Hospital Authority

Florida Auditor General Operational Audit Beginning September 22, 2020 Cost Calculations

Administrative/Accounting Costs

Month	Costs	Running Total	Sub-Total
Sep-20	\$595.00	\$595.00	
Oct-20	\$1,993.75	\$2,588.75	
Nov-20	\$915.00	\$3,503.75	
Dec-20	\$233.75	\$3,737.50	
Feb-21	\$595.00	\$4,332.50	
Mar-21	\$736.25	\$5,068.75	
Apr-21	\$563.75	\$5,632.50	
May-21	\$233.75	\$5,866.25	
Jun-21	\$2,696.25	\$8,562.50	
Jul-21	\$637.50	\$9,200.00	
Aug-21	\$1,147.50	\$10,347.50	
Sep-21	\$573.75	\$10,921.25	
Oct-21	\$807.50	\$11,728.75	
Nov-21	\$297.50	\$12,026.25	
Dec-21	\$276.25	\$12,302.50	
Legal Costs			
Mar-21	1,300.00	1,300.00	
May-21	340.00	\$1,640.00	
Jul-21	160.00	\$1,800.00	
Aug-21	1,560.00	\$3,360.00	
Sep-21	225.00	\$3,585.00	
Oct-21	205.00	\$3,790.00	
		\$3,790.00	
		\$3,790.00	\$16,092.50

West Volusia Hospital Authority Financial Statements November 30, 2021

1006 N. Woodland Boulevard ■ DeLand, FL 32720 (386) 734-9441 ■ www.drtcpa.com

Ronald J. Cantlay, CPA/CFP® James H. Dreggors, CPA Victoria A. Kizma, CPA Robin C. Lennon, CPA 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 November 30, 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.

Dreggers, Rijsly + Teal, P.A.

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

December 06, 2021

MEMBERS

West Volusia Hospital Authority Balance Sheet Modified Cash Basis November 30, 2021

Assets

Current Assets		
Petty Cash	\$	100.00
Intracoastal Bank - Money Market		2,021,078.98
Intracoastal Bank - Operating		1,768,937.12
Mainstreet Community Bank (MCB) - MM		1,706,574.32
MCB Escrow Account		200,000.00
Surety Bank - MM		6,005,319.68
Taxes Receivable		121,920.00
CDARS - 1 Year		7,500,000.00
Total Current Assets		19,323,930.10
Fixed Assets		
Land		145,000.00
Buildings		422,024.71
Building Improvements		362,091.33
Equipment		53,974.56
Leasehold Improvements		23,232.63
Total Fixed Assets		1,006,323.23
Less Accum. Depreciation		(452,150.56)
Total Net Fixed Assets		554,172.67
Other Assets		
CDARS - 2 Year		1,000,000.00
CDARS - 3Year		500,000.00
Deposits		2,000.00
Total Other Assets		1,502,000.00
Total Assets	_	21,380,102.77

Liabilities and Net Assets

Current Liabilities	
Accounts Payable	36,625.21
Deferred Revenue	116,506.00
Total Current Liabilities	153,131.21
Net Assets	
Unassigned Fund Balance	18,468,082.85
Restricted Fund Balance	208,000.00
Assigned Fund Balance	1,177,700.00
Nonspendable Fund Balance	554,172.67
Net Income Excess (Deficit)	819,016.04
Total Net Assets	21,226,971.56

West Volusia Hospital Authority Balance Sheet Modified Cash Basis November 30, 2021

Total Liabilities and Net Assets

\$ 21,380,102.77

West Volusia Hospital Authority Statement of Revenue and Expenditures Modified Cash Basis Budget and Actual

For the 1 Month and 2 Months Ended November 30, 2021

	Annual Budget_	Current Period Actual	Year To Date Actual	Budget Balance
Revenue				
Ad Valorem Taxes	17,400,000	1,686,135	1,687,201	15,712,799
Investment Income	45,000	1,201	2,662	42,338
Other Income	0	141	141	(141)
Use of Prior Year Reserves	1,177,700	0	0	1,177,700
Total Revenue	18,622,700	1,687,477	1,690,004	16,932,696
Healthcare Expenditures			440.070	0.000.004
Hospital Services	3,000,000	97,491	116,676	2,883,324
Emergency Room Care	1,000,000	3,194	3,194	996,806
Primary Care	2,500,000	58,159	175,330	2,324,670
Pharmacy	900,000	0	0	900,000
Specialty Care	3,000,000	222,201	263,276	2,736,724
County Medicaid Reimbursement	2,359,000	0	0	2,359,000
The House Next Door	100,000	1,506	1,506	98,494
The Neighborhood Center	150,000	12,780	12,780	137,220
Rising Against All Odds	116,925	14,050	14,050	102,875
Community Legal Services	100,756	9,579	9,579	91,177
Hispanic Health Initiatives	65,000	0	0	65,000
Florida Dept of Health Dental Svcs	150,000	5,784	5,784	144,216
Stewart Marchman - ACT	928,336	40,887	40,887	887,449
New Hope Human Svcs Homeless Cert	50,000	0	0	50,000
Health Start Coalition of Flagler & Volusia	207,891	11,006	11,006	196,885
H C R A	800,000	2,564	2,564	797,436
Other Healthcare Costs	650,000	0	0	650,000
Total Healthcare Expenditures	16,077,908	479,201	656,632	15,421,276
Other Expenditures				
Advertising	7,000	0	331	6,669
Annual Independent Audit	17,000	0	0	17,000
Building & Office Costs	100,000	5,040	10,601	89,399
General Accounting	68,100	4,183	4,183	63,917
General Administrative	65,100	4,435	4,435	60,665
Legal Counsel	80,000	9,585	16,448	63,552
City of DeLand Tax Increment District	90,000	0	0	90,000
Tax Collector & Appraiser Fee	630,000	34,420	34,442	595,558
Outside Legal Consulting	0	12,000	12,000	(12,000)
TPA Services	620,000	28,509	87,892	532,108
Healthy Communities	72,202	5,577	5,577	66,625
Application Screening				
Application Screening - THND	417,590	33,464	33,464	384,126
Application Screening - RAAO	52,800	3,840	3,840	48,960
Workers Compensation Claims	25,000	0	0	25,000
Other Operating Expenditures	300,000	1,144	1,144	298,856
Total Other Expenditures	2,544,792	142,197	214,357	2,544,792
Total Expenditures	18,622,700	621,398	870,989	17,751,711
Excess (Deficit)	0	1,066,079	819,015	(819,015)

West Volusia Hospital Authority Schedule I - Healthcare Expenditures Modified Cash Basis Budget and Actual

For the 1 Month and 2 Months Ended November 30, 2021

	Annual Budget	Current Period Actual	Year To Date Actual	Budget Balance
Healthcare Expenditures				
AdventHealth	1,500,000	35,877	44,660	1,455,340
Halifax Hospital	1,500,000	61,615	72,017	1,427,983
Emergency Room Care	1,000,000	3,194	3,194	996,806
Primary Care	2,500,000	58,159	175,330	2,324,670
Pharmacy	900,000	0	0	900,000
Specialty Care	3,000,000	222,201	263,276	2,736,724
County Medicaid Reimbursement	2,359,000	0	0	2,359,000
Florida Dept of Health Dental Svcs	150,000	5,784	5,784	144,216
Good Samaritan				
The House Next Door	100,000	1,506	1,506	98,494
The Neighborhood Center	100,000	8,400	8,400	91,600
TNC Healthcare Navigation Program	50,000	4,380	4,380	45,620
Rising Against All Odds	116,925	14,050	14,050	102,875
Community Legal Services	100,756	9,579	9,579	91,177
Hispanic Health Initiatives	65,000	0	0	65,000
Stewart Marchman - ACT				
SMA - Homeless Program	78,336	3,593	3,593	
SMA - Residential Treatment	550,000	37,293	37,293	
SMA - Baker Act - Match	300,000	0	0	
New Hope Human Svcs Homeless Cert	50,000	0	0	50,000
Health Start Coalition of Flagler & Volusia				
HSCFV - Community Health Nurse	50,000	0	0	•
HSCFV - Outreach	81,560	6,587		
HSCFV - Fam Services	76,331	4,419	4,419	71,912
HCRA				
H C R A - In County	400,000	2,564	2,564	
H C R A - Outside County	400,000	0	0	•
Other Healthcare Costs	650,000	0	0	
Total Healthcare Expenditures	16,077,908	479,201	656,632	15,421,276

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

For the 1 Month and 2 Months Ended November 30, 2021 and November 30, 2020

	1 Month Ended November 30, 2021	1 Month Ended November 30, 2020	2 MonthsEnded November 30, 2021	2 Months Ended November 30, 2020
Revenue				
Ad Valorem Taxes	1,686,135	1,842,868	1,687,201	1,845,117
Investment Income	1,201	4,663	2,662	11,497
Other Income	141	0	141	0
Total Revenue	1,687,477	1,847,531	1,690,004	1,856,614
Healthcare Expenditures				
Hospital Services	97,491	0	116,676	71
Emergency Room Care	3,194	0	3,194	0
Primary Care	58,159	13,188	175,330	196,132
Pharmacy	0	0	0	0
Specialty Care	222,201	163,357	263,276	179,218
County Medicaid Reimbursement	0	418,705	0	418,705
The House Next Door	1,506	1,973	1,506	1,973
The Neighborhood Center	12,780	14,075	12,780	14,075
Rising Against All Odds	14,050	22,050	14,050	22,050
Community Legal Services	9,579	3,417	9,579	3,417
Florida Dept of Health Dental Svcs	5,784	14,219	5,784	14,219
Stewart Marchman - ACT	40,887	49,984	40,887	49,984
New Hope Human Svcs Homeless Cert	0	0	0	0
Health Start Coalition of Flagler & Volusia	11,006	12,334	11,006	12,334
HCRA	2,564	0	2,564	0
Other Healthcare Costs	0	13,826	0	36,740
Total Healthcare Expenditures	479,201	727,128	656,632	948,918
Other Expenditures				
Advertising	0	323	331	323
Building & Office Costs	5,040	239	10,601	3,869
General Accounting	4,183	2,832	4,183	2,832
General Administrative	4,435	3,755	4,435	3,755
Legal Counsel	9,585	4,980	16,448	10,880
Tax Collector & Appraiser Fee	34,420	110,875	34,442	110,914
Outside Legal Consulting	12,000	0	12,000	120 664
TPA Services	28,509	46,741	87,892	139,664
Healthy Communities	5,577	7,373	5,577	7,373
Application Screening Application Screening - THND	33,464	32,565	33,464	32,565
-	3,840	1,920	3,840	1,920
Application Screening - RAAO Application Screening - SMA	0,040	0	0,5,5	0
	0	0	0	0
Workers Compensation Claims Other Operating Expenditures	1,144	2,206	1,144	2,206
Total Other Expenditures	142,197	213,809	214,357	316,301
Total Expenditures	621,398	940,937	870,989	1,265,219
Excess (Deficit)	1,066,079	906,594	819,015	591,395
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See Accountants' Compilation Report

West Volusia Hospital Authority Financial Statements December 31, 2021 1006 N. Woodland Boulevard ■ DeLand, FL 32720 (386) 734-9441 🌃 www.drtcpa.com

Ronald J. Cantlay, CPA/CFP® James H. Dreggors, CPA Victoria A. Kizma, CPA Robin C. Lennon, CPA 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 December 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.

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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.

Dreggers, Right + Teal, P.A.

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

January 06, 2022

MEMBERS

West Volusia Hospital Authority Balance Sheet Modified Cash Basis December 31, 2021

Assets

Current Assets	
Petty Cash	\$ 100.00
Intracoastal Bank - Money Market	2,074,012.72
Intracoastal Bank - Operating	262,022.04
Mainstreet Community Bank (MCB) - MM	1,706,646.79
MCB Escrow Account	200,000.00
Surety Bank - MM	7,505,953.03
Taxes Receivable	121,920.00
CDARS - 1 Year	 7,500,813.80
Total Current Assets	19,371,468.38
Fixed Assets	
Land	145,000.00
Buildings	422,024.71
Building Improvements	362,091.33
Equipment	53,974.56
Leasehold Improvements	 23,232.63
Total Fixed Assets	1,006,323.23
Less Accum. Depreciation	 (452,150.56)
Total Net Fixed Assets	 554,172.67
Other Assets	
CDARS - 2 Year	1,000,424.21
CDARS - 3Year	500,325.58
Deposits	2,000.00
Total Other Assets	 1,502,749.79
Total Assets	 21,428,390.84
	-

Liabilities and Net Assets

Total Liabilities and Net Assets	\$ 21,	428,390.84
Total Net Assets	21,	311,884.84
Net Income Excess (Deficit)		900,276.16
Nonspendable Fund Balance		554,172.67
Assigned Fund Balance	1,	177,700.00
Restricted Fund Balance	:	208,000.00
Unassigned Fund Balance	18,	471,736.01
Net Assets		
Total Current Liabilities		116,506.00
Deferred Revenue		116,506.00
Current Liabilities		

West Volusia Hospital Authority Statement of Revenue and Expenditures Modified Cash Basis Budget and Actual

For the 1 Month and 3 Months Ended December 31, 2021

	Annual Budget	Current Period Actual	Year To Date Actual	Budget Balance
Revenue				
Ad Valorem Taxes	17,400,000	1,220,541	2,907,742	14,492,258
Investment Income	45,000	2,422	5,084	39,916
Other Income	0	55	196	(196)
Use of Prior Year Reserves	1,177,700	0	0	1,177,700
Total Revenue	18,622,700	1,223,018	2,913,022	15,709,678
Healthcare Expenditures				
Hospital Services	3,000,000	321,646	438,322	2,561,678
Emergency Room Care	1,000,000	7,995	11,189	988,811
Primary Care	2,500,000	216,506	391,837	2,108,163
Pharmacy	900,000	51,319	51,319	848,681
Specialty Care	3,000,000	230,711	493,987	2,506,013
County Medicaid Reimbursement	2,359,000	0	0	2,359,000
The House Next Door	100,000	2,381	3,887	96,113
The Neighborhood Center	150,000	0	12,780	137,220
Rising Against All Odds	116,925	12,450	26,500	90,425
Community Legal Services	100,756	7,931	17,510	83,246
Hispanic Health Initiatives	65,000	9,700	9,700	55,300
Florida Dept of Health Dental Svcs	150,000	11,568	17,352	132,648
Stewart Marchman - ACT	928,336	50,903	91,789	836,547
New Hope Human Svcs Homeless Cert	50,000	0	0	50,000
Health Start Coalition of Flagler & Volusia	207,891	4,419	15,426	192,465
H C R A	800,000	8,724	11,288	788,712
Other Healthcare Costs	650,000	0	0	650,000
Total Healthcare Expenditures	16,077,908	936,253	1,592,886	14,485,022
Other Expenditures				
Advertising	7,000	150	481	6,519
Annual Independent Audit	17,000	5,000	5,000	12,000
Building & Office Costs	100,000	1,016	11,617	88,383
General Accounting	68,100	8,188	12,371	55,729
General Administrative	65,100	3,294	7,729	57,371
Legal Counsel	80,000	6,345	22,793	57,207
City of DeLand Tax Increment District	90,000	0	0	90,000
Tax Collector & Appraiser Fee	630,000	90,267	124,708	505,292
Outside Legal Consulting	0	18,000	30,000	(30,000)
TPA Services	620,000	28,316	116,208	503,792
Healthy Communities	72,202	5,648	11,224	60,978
Application Screening				0.40 T 00
Application Screening - THND	417,590	34,334	67,798	349,792
Application Screening - RAAO	52,800	4,608	8,448	44,352
Workers Compensation Claims	25,000	0	0	25,000
Other Operating Expenditures	300,000	340	1,484	298,516
Total Other Expenditures	2,544,792	205,506	419,861	2,544,792
Total Expenditures	18,622,700	1,141,759	2,012,747	16,609,953
Excess (Deficit)	0	81,259	900,275	(900,275)

West Volusia Hospital Authority Schedule I - Healthcare Expenditures Modified Cash Basis Budget and Actual

For the 1 Month and 3 Months Ended December 31, 2021

	Annual Budget	Current Period Actual	Year To Date Actual	Budget Balance
Healthcare Expenditures	Annual Budget	Actual	Actual	Dudget Balarice
AdventHealth	1,500,000	133,376	178,035	1,321,965
Halifax Hospital	1,500,000	188,271	260,287	1,239,713
Emergency Room Care	1,000,000	7,995	11,189	988,811
Primary Care	2,500,000	216,506	391,837	2,108,163
Pharmacy	900,000	51,319	51,319	848,681
Specialty Care	3,000,000	230,711	493,987	2,506,013
County Medicaid Reimbursement	2,359,000	0	0	2,359,000
Florida Dept of Health Dental Svcs	150,000	11,568	17,352	132,648
Good Samaritan				
The House Next Door	100,000	2,381	3,887	96,113
The Neighborhood Center	100,000	0	8,400	91,600
TNC Healthcare Navigation Program	50,000	0	4,380	45,620
Rising Against All Odds	116,925	12,450	26,500	90,425
Community Legal Services	100,756	7,931	17,510	83,246
Hispanic Health Initiatives	65,000	9,700	9,700	55,300
Stewart Marchman - ACT	•			
SMA - Homeless Program	78,336	4,304	7,898	70,438
SMA - Residential Treatment	550,000	46,598	83,892	466,108
SMA - Baker Act - Match	300,000	0	0	300,000
New Hope Human Svcs Homeless Cert	50,000	0	0	50,000
Health Start Coalition of Flagler & Volusia				
HSCFV - Community Health Nurse	50,000	0	0	50,000
HSCFV - Outreach	81,560	0	6,587	74,973
HSCFV - Fam Services	76,331	4,419	8,838	67,493
HCRA				
H C R A - In County	400,000	8,724	11,288	388,712
H C R A - Outside County	400,000	0	0	400,000
Other Healthcare Costs	650,000	0	0	650,000
Total Healthcare Expenditures	16,077,908	936,253	1,592,886	14,485,022

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

For the 1 Month and 3 Months Ended December 31, 2021 and December 31, 2020

	1 Month Ended December 31, 2021	1 Month Ended December 31, 2020	3 MonthsEnded December 31, 2021	3 Months Ended December 31, 2020
Revenue				
Ad Valorem Taxes	1,220,541	12,310,405	2,907,742	14,155,521
Investment Income	2,422	5,547	5,084	17,044
Other Income	55	0	196	0
Total Revenue	1,223,018	12,315,952	2,913,022	14,172,565
Healthcare Expenditures				
Hospital Services	321,646	28,472	438,322	28,543
Emergency Room Care	7,995	0	11,189	0
Primary Care	216,506	389,212	391,837	585,345
Pharmacy	51,319	0	51,319	0
Specialty Care	230,711	279,788	493,987	459,006
County Medicaid Reimbursement	0	209,352	0	628,057
The House Next Door	2,381	1,804	3,887	3,777
The Neighborhood Center	0	13,755	12,780	27,830
Rising Against All Odds	12,450	18,375	26,500	40,425
Community Legal Services	7,931	3,944	17,510	7,361
Hispanic Health Initiatives	9,700	0	9,700	0
Florida Dept of Health Dental Svcs	11,568	15,497	17,352	29,715
Stewart Marchman - ACT	50,903	287,139	91,789	337,123
New Hope Human Svcs Homeless Cert	0	0	0	0
Health Start Coalition of Flagler & Volusia	4,419	7,568	15,426	19,901
H C R A	8,724	2,482	11,288	2,482
Other Healthcare Costs	0	34,118	0	70,858
Total Healthcare Expenditures	936,253	1,291,506	1,592,886	2,240,423
Other Expenditures				
Advertising	150	0	481	323
Annual Independent Audit	5,000	0	5,000	0
Building & Office Costs	1,016	2,829	11,617	6,699
General Accounting	8,188	5,414	12,371	8,246
General Administrative	3,294	4,569	7,729	8,324
Legal Counsel	6,345	3,080	22,793	13,960
City of DeLand Tax Increment District	0	90,172	0	90,172
Tax Collector & Appraiser Fee	90,267	246,199	124,708	357,113
Outside Legal Consulting	18,000	0	30,000	0
TPA Services	28,316	48,719	116,208	188,383
Healthy Communities	5,648	5,022	11,224	12,395
Application Screening				
Application Screening - THND	34,334	32,175	67,798	64,739
Application Screening - RAAO	4,608	2,880	8,448	4,800
Application Screening - SMA	0	0	0	0
Workers Compensation Claims	0	0	0	0
Other Operating Expenditures	340	1,243	1,484	3,449
Total Other Expenditures	205,506	442,302	419,861	758,603

See Accountants' Compilation Report

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

For the 1 Month and 3 Months Ended December 31, 2021 and December 31, 2020

	1 Month Ended December 31, 2021	1 Month Ended December 31, 2020	3 MonthsEnded December 31, 2021	3 Months Ended December 31, 2020
Total Expenditures	1,141,759	1,733,808	2,012,747	2,999,026
Excess (Deficit)	81,259	10,582,144	900,275	11,173,539

LEGAL UPDATE MEMORANDUM

TO: WVHA Board of Commissioners

DATE: January 11, 2022

FROM: Theodore W. Small, Jr.

RE: West Volusia Hospital Authority – Update for January 20, 2022 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 November 18, 2021 Regular Meeting Minutes.

I. Annual Overview of Funding Agreements or other Contracts: [See new info. in italics and bold] [Refer back to Legal Update Memorandum dated 5/12/2020 for additional background details, including details regarding now expired 20-year AdventHealth related Hospital agreements]

Each Board member is responsible for making his or her own independent determination about whether the terms of a particular contract are consistent with the public interest. Counsel, 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. For your convenience, the following is a listing of the major contracts, hospital services subcontracts in the EBMS Network and funding agreements between the Authority and other entities with notation of termination dates, if any.

Year-to Year Health Care or Access to Health Care Funding Agreements, 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. New Hope Human Services Homeless Assessment, Verification and Certification
- 5. Rising Against All Odds, Inc. -- HIV/AIDS Outreach and Case Management
- 6. Rising Against All Odds, Inc.—Health Card Enrollment & Retention Services
- 7. SMA Healthcare Baker Act Match
- 8. SMA Healthcare-Psychiatric/Homeless Program
- 9. SMA Healthcare —Level II Residential Treatment
- 10. The Healthy Start -- Access to Healthcare Services WIS/NOS Program

- 11. The Healthy Start--Community Health Nurse
- 12. The Healthy Start Family Services Coordinator Deltona
- 13. The House Next Door Therapeutic/Mental Health Services
- 14. The House Next Door—HealthCard Eligibility Determination Services
- 15. The Neighborhood Center of West Volusia "Access to Care"
- 16. The Neighborhood Center of West Volusia "Health Care Navigator"
- 17. Volusia County Health Department—Florida Department of Health Dental Care

Primary Care Agreement:

- A. Employee Benefit Management Services, LLC ("EBMS") Amendment No. 1 to Administrative Services Agreement, effective 10/01/2020 expanded EBMS's portfolio of services to include the set-up and management of primary care clinic services, pharmacy services and healthcare management services, along with the third party administrator services that it had already been providing since 1/01/2020. Amendment No. 1 provides for with automatic renewals for additional one-year terms unless either party gives notice of non-renewal at least 90-days before the end of then-current term or Renewal Term. Pursuant to Amendment No. 1 to the Administrative Services Agreement, the current term was extended to end on September 30, 2023.
 - 1. The Board retains the right to establish policy that governs the terms on which EBMS provides this new portfolio of services, including the selection of the location of where the services are provided. Along with the terms of Amendment No. 1 to the Administrative Services Agreement, the WVHA Health Card Program Eligibility Guidelines and Procedures ("Eligibility Guidelines") and Summary Benefit Plan set forth most of the Board's existing policy concerning the terms on which WVHA authorizes EBMS to provide this portfolio of services.

EBMS's Network of In-Hospital Services Agreements:

- A. (AdventHealth DeLand (AHD), AdventHealth Fish Memorial (AHFM)), Halifax Hospital Medical Center, EMPros) Following the 9/30/2020 expiration of the direct contractual agreement between AdventHealth and WVHA, EBMS as Third Party Administrator is now responsible for qualifying and contracting directly with the hospitals and their emergency room specialists to establish terms for their participation in the network of providers that serve WVHA Health Card members.
- B. The Board retains the right to establish policy that governs the terms on which EBMS may qualify and contract with its network of providers. An example of such policy intervention is the Board's passage of WVHA Resolution 2020-007 in which the Board excluded any reimbursement for Emergency Room care services and established 85% of Medicare as the maximum that EBMS is allowed to contract with hospitals for reimbursement of inpatient hospital facilities and professional

services. Through extensive negotiations between EBMS, the hospitals and EMPros, the Board at its April, 2021 Regular Meeting approved Amended Motion 43-2021, which provides the still relevant Board policies concerning this network of in-hospital service agreements:

- Increase hospital funding for the 2021/22 program budget to \$4MM, of which 25% would be reserved for ED reimbursement this establishes a de facto \$1.0M ED budget for 2021/22. Future year ED budgets to increase/decrease formulaically if utilization increase/decrease materially from a mutually agreed baseline: for example (a) increase the budget from \$1.0M to \$1.25M if ED utilization increases by 25% or more; similarly, (b) decrease the budget from \$1.0M to \$750k if ED utilization decrease by 25% or more.
- Invest in an ED diversion program by expanding access to this new ED budget for care through more cost-effective, alternative sites of service (i.e. Urgent Care). Urgent Care should be reimbursable only when the miCare clinic is not available.
- All contracted ED and/or Urgent Care providers draw down from this annual budget through submitting invoices for either facility fee charges (e.g. hospitals) or professional fee charges (all contracted specialists working in the ED / Urgent Care, whether hospital-employed or independent).
- Rate of reimbursement for both facility and professional fees to be contracted at 85% of Medicare.
- Participating providers should agree to provide all hospital care including ED care without any member balance billing, even when the annual hospital-ED budget has been depleted.
- Participating providers should agree to a formal 3 year network agreement with fixed rate of 85% of Medicare, subject to annual hospital and ED budget caps as proposed above.
- Hospitals should commit to a mutually agreeable accountability / transparency mechanism that may include submitting quarterly reports, periodically sharing external accreditation reports and agreement to not decrease access or adversely impact the quality of care available to the community.

C. Halifax Hospital Medical Center Extended HCRA

1. Extended HCRA Hospital Coverage and Physician Indigent Hospital Program Reimbursement Agreement (2007) ("Extended HCRA") Second Addendum to Extended HCRA dated 9/23/2010, terminable at will by either party upon 60 days written notice. Establishes reimbursement rate consistent with HCRA guidelines, as opposed to 105% of Medicare rate (except for adult psychiatric and medical device implants) which was agreed in prior agreements dated 11/20/2008 and 4/19/2007.

Administrative Services

- 1. Employee Benefit Management Services, LLC ("EBMS") Administrative Services Agreement, effective 1//1/2020 for Third Party Administrator services with automatic renewals for additional one-year terms unless either party gives notice of non-renewal at least 90-days before the end of then-current term. Pursuant to Amendment No. 1 to the Administrative Services Agreement, the current term was extended to end on September 30, 2023.
- 2. The House Next Door—Eligibility Determination Services, effective 10/1/2018, renewable on annual basis.
- 3. Rising Against All Odds, Inc. Health Card Enrollment and Retention, effective 10/1/2018, renewable on annual basis.
- 4. Dreggors, Rigsby & Teal, P.A. dated 9/27/2012 (accounting services), is terminable at will by either party upon 90 days written notice.
- 5. Dreggors, Rigsby & Teal, P.A. dated 9/27/2012 (administrative services), is terminable at will by either party upon 90 days written notice.
- 6. Law Office Of Theodore W. Small, P.A. dated 11/2006 (outside legal counsel), terminable at will by Board
- 7. James Moore and Co., P.L. (audit of financial statements) was signed September, 2015 for three years through September 30, 2017 and then renewed by mutual agreement for one 2 year term through September 30, 2019, and then may be renewed for 3 additional 1 year terms with 60-days' notice. In fact, it has been renewed twice to cover audits through fiscal year September 30, 2021.
- II. 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] [See new info. in italics and bold] Refer back to Legal Update Memorandum dated 10/12/21 for additional background details.]

In 2012 the Florida Legislature passed HB-530l which required counties and/or hospital districts who "benefit" from the Medicaid program to catch up on disputed Medicaid bills dating back to 200l. 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 200l 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 (38,461enrollees); 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 5th 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.

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.

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At its September 23" 2021 Board Meeting, the Board unanimously adopted Motion 108-2021: Subject to further negotiations and hoped for development of alternatives that WVHA's Accountant and Attorney would recommend that the WVHA Board accept, the WVHA Board hereby notes its objection to what it understands is County staff's proposal (dated 9/22/2021) to change the longstanding methodology for the County's division of Medicaid Match costs between hospital districts such that Halifax would pay approximately a half million dollars less, WVHA would pay a half million dollars more and SEVD would pay approximately \$40,000 more than they would pursuant to the longstanding and mutually agreed methodology for splitting the County's Medicaid Match costs. (The County's own share to cover nursing home costs remains unchanged in the latest proposal.) Preliminarily and subject to further research, WVHA objects to any division by the County Council that does not give a reasonable and ordinary interpretation to the qualification in Chapter 409.915(5) which only authorizes the County Council to divide its Medicaid Match responsibilities to hospital districts "which benefit from the Medicaid Program." Until 2020 when WVHA's hospital sale agreement with Advent Health terminated, it was arguable that at least the WVHA indirectly obtained some benefit from the Medicaid Program. But currently WVHA does not have any such basis for the County Council determining that it "benefits from the Medicaid Program." Therefore, any division of the Medicaid Match responsibilities should now fall solely upon the other hospital districts that own and operate hospitals and thereby clearly do benefit from the Medicaid Program through the receipt of millions of dollars in direct payments to reimburse care for patients who are both residents and non-residents of the County of Volusia.

Accordingly, the Board authorizes the Attorney to take all reasonable and necessary steps to obtain outside counsel and legislative expertise to defend WVHA should the

County staff recommend, and the County Council adopt this objectionable division of Medicaid Match costs, including subcontracting with outside counsel and experts to handle immediate matters pending the Board's ability to interview and retain counsel at a future Regular or Special Meeting.

At its October 21, 2021 Board Meeting, the Board unanimously approved an engagement letter with Phelps Dunbar LLP for that law firm to represent it concerning Motion 108-2021, specifically authorizing it as follows:

Unless directed otherwise by the Board or the WVHA Attorney, the Authority's engagement of Phelps Dunbar will authorize us to take all appropriate actions to further the Authority's interests in this matter as set forth in Motion 108-2021 and any subsequent Board motions or directives.

At its November 18, 2021 Board Meeting, the Board unanimously approved an engagement letter with Heffley & Associates to perform public affairs monitoring and lobbying on behalf of matters affecting its interest in Florida state government, including assisting in the implementation of Motion 108-2021.

III. 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 21st. 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>

Sent: Monday, June 21, 2021 2:15 PM To: Eileen Long < elong@drtcpa.com>

Cc: WALT CUNNINGHAM < 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 >

Sent: Friday, July 16, 2021 8:16 AM
To: Eileen Long <elong@drtcpa.com>

Cc: Waylan Niece < waylan.niece@nhcwv.org>; 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. At the November 2021 Regular Meeting, counsel recommended and the Board agreed to table further discussion until the January meeting to allow DRT to submit their Engagement Letter to perform an additional contractual compliance site visit for TNC and, upon completion of that follow-up site visit, then to determine if any further penalties should be incurred in bringing TNC into compliance.

IV. General Compliance with the Sunshine Law [See new info. in italics and bold]

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

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

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

Please note that the Sunshine Law DOES apply to "off-the record" chats during meetings or during breaks, written correspondence, telephone conversations and e-mails exchanges between two or more board members if such communication concerns matters likely to come before the Board; provided however, it is permissible for one board member to send correspondence to the rest of the board outside of a public meeting as long as this correspondence does not result in replies or other back and forth exchanges until a public meeting is convened for such discussion and also the correspondence is made available to interested members of the public.

The Sunshine Law also prohibits nonmembers (staff, lawyers, accountants, and members of the public) from serving as liaisons between Board members concerning matters likely to come before the Board.

With the increased use of social media accounts, including Facebook and other community and political blogs, Board members should be mindful of the following Florida Attorney General guidance before posting on Facebook, or other blogs an opinion or viewpoint on matters likely to come before the Board. In AG Opinion 08-07, the Florida Attorney General

concluded that the use of a website blog or message board to solicit comment from other members of the board or commission by their response on matters that would come before the board would trigger the requirements of the Sunshine Law. As stated therein:

'While there is no statutory prohibition against a city council member posting comments on a privately maintained electronic bulletin board or blog, members of the board or commission must not engage in an exchange or discussion of matters that foreseeably will come before the board or commission for official action. The use of such an electronic means of posting one's comments and the inherent availability of other participants or contributors to act as liaisons would create an environment that could easily become a forum for members of a board or commission to discuss official issues which should most appropriately be conducted at a public meeting in compliance with the Government in the Sunshine Law. It would be incumbent upon the commission members to avoid any action that could be construed as an attempt to evade the requirements of the law.