

Governing Board Meeting Agenda

June 16, 2021 - Zoom Meeting

	Agenda		P. 1
I.	Call to Order	Michael Foster	
II.	HSNT Stakeholder Recognition	Teri Johnson	
	The Ybarra Family		
II.	Consent Agenda	Michael Foster	
	*May 2021 Board Minutes		P. 2
	*May 2021 Financial Committee Minutes		P. 7
	*May 2021 Financials		P. 9
	*May 2021 Quality Committee Minutes		P. 14
	*June 2021 Personnel Committee Minutes		P. 17
	*June 2021 MarCom Report (including approval of grants)		P. 19
III.	Board Training	Larry Bisno	
	Compliance Review		
IV.	CEO Report	Doreen Rue	P. 20
	Dashboard		
	ARP Grant Project Summary		P. 24
	ARP Capital Grant Proposal		
V.	Committee Reports		
	Finance Committee	Dale Tampke	
	Finance Report		
	403B Retirement Audit Engagement Letter		P. 84
	*ARP Grant Budget		
	*ARP Capital Grant Application Submission and Budget		
	Quality Committee	Dr. Howard Shaw	
	Quality Report		
	*PCMH Policies		P. 90
	* Referrals, Diagnostic Tests, and Procedures Tracking Policy		P. 95
	Strategic Planning Committee	Sara Schroeder	
	Strategic Planning Report		
	Personnel Committee	James Henderson	
	Personnel Report		
	*Board Member Applications		P. 100
	HRSA 330 Compliance Update		P. 105
	<i>Key Management Staff, Clinical Staffing, FTCA Deeming Requirements</i>		
VI.	Old Business/New Business	Michael Foster	
VII.	Executive Session	Michael Foster	
	John Moyle Cause # 18-4895-393		
	Sarah Gibbons EEOC # 450-2019-04360		
	Progressive Auto Claim # 19-4874088, Personal Injury File # 260052		
VIII.	Important Dates and Adjourn Meeting	Michael Foster	
	July Board Meeting - July 21st @ 6pm		

*** Items Requiring a Vote**

Agenda Item I: Called to order at 6:00pm by Michael Foster

Attendees: Michael Foster, Dale Tampke, James Henderson, Sara Schroeder, Lee Brown, Hamed Husain, Melissa Winans, Dr. Howard Shaw, Judge Chance Oliver

Absent: Trang Dang-Le, April Powell

Quorum was met.

Staff: Doreen Rue, Pam Barnes, Larry Bisno, Debra Layman

Guests: Raj Chhadua

Agenda Item II: ReNue Rx Presentation – presented by Raj Chhadua

- ReNue Rx currently has 9 locations in Texas and 1 in Iowa.
- The pharmacy at HSNT’s Loop 288 location has been open for nearly 9 months.
 - This pharmacy is the first of its kind in Texas utilizing telepharmacy services.
- ReNue Rx is excited to see this new model serving underserved populations.
- The partnership between HSNT and ReNue Rx has been a positive experience for both organizations.
 - It has also been a seamless integration for patients.

Agenda Item III: Consent Agenda - Approval of April 2021 Board Minutes, April 2021 Financial Committee Minutes, April 2021 Financials, April 2021 Quality Committee Minutes, May 2021 Strategic Planning Committee Minutes, May 2021 MarCom Report (including approval of grants)

Motion to approve all consent items: *Melissa Winans*

Seconded: *Dr. Howard Shaw*

Motion Passed Unanimously

Agenda Item IV: Board Training

- Legislative Mandate Review, presented by Doreen Rue
 - HSNT and other FQHC’s receive their funding from two sources: mandatory funding from the Health Center Fund and annual funding from the federal appropriations bill.
 - Health Center Fund
 - This is the bulk of the health center funding.
 - Health centers are currently advocating for a 5-year funding authorization.
 - Annual Appropriations Funding
 - This is year to year funding.
 - Legislative mandates are included in each appropriations bill.
 - HSNT must review and ensure it is in compliance with these mandates on the passage of the appropriations bill each year.

- Legislative mandates have not changed or been updated in recent appropriations bills.
- HSNT is in compliance with all legislative mandates.

Agenda Item V: CEO Report

- American Rescue Plan Funding
 - HSNT is requesting an extension for submitting the budget for the ARP grant.
 - Doreen has been meeting with small groups of HSNT to get feedback on where HSNT should spend this grant.
- 340b Program
 - The six pharmaceutical manufacturers that limited medications to community health centers with contract pharmacies were ordered to immediately remove those limitations by HRSA.
 - HSNT has been strategically growing this program.
- Toyota Initiative
 - This program will now be called HSNT BEST.
 - Pam Barnes is leading the team through this process.
- DSC Mural
 - The mural will be revealed for the Rotary Club at 5:30pm tomorrow.
- Dashboard
 - HSNT is on track for its productivity measures.
 - The addition of new providers will continue the growth of these numbers.

Agenda Item VI: Committee Reports

- **Finance Committee – Dale Tampke Reporting**
 - Meeting Report
 - April 2021 had 3 payrolls which affected HSNT’s cash and expenses.
 - Revenue is on budget for the year.
 - The 340b program is ahead of budget for the year.
 - HSNT’s independent audit is in progress.
 - The audit team plans to do an extensive review of the Ryan White program.
- **Quality Committee – Dr. Howard Shaw Reporting**
 - Meeting Report
 - Patient Satisfaction
 - 4.66/5 public rating for April 2021
 - 98% of patients would recommend HSNT to family or friends
 - 80% of HSNT’s staff is vaccinated against COVID-19.
 - PCMH Policies
 - The Quality Committee reviewed and recommends the approval of the PCMH policies to the Governing Board.

The Quality Committee recommends the approval of the PCMH Policies to the Governing Board.

Seconded: *Hamed Husain*

Motion Passed Unanimously

- HSNT Quality Management Plan
 - An in-depth review is required every 3 years.
 - The updated plan adds a focus on provider and team satisfaction.
 - The plan also updates the structure of the staff quality committee.

The Quality Committee recommends the approval of the HSNT Quality Management Plan to the Governing Board.

Seconded: *Lee Brown*

Motion Passed Unanimously

- HRSA 330 Compliance Review
 - Required and Additional Health Services
 - Accessible Locations and Hours of Operations
 - Quality Assurance and Improvement
- **Strategic Planning Committee – Sara Schroeder Reporting**
 - 2020 Year End Report
 - The year end report shows some impacts from the pandemic.
 - The initiatives that were affected are continuing into 2021.
 - CCMC Location
 - The new location is in an older building but in excellent condition.
 - The location has more space and exam rooms.
 - The space will need some updates – wiring, cosmetic changes, etc.
 - The rent at the new location is higher, but the space has the potential to grow HSNT’s practice and attract new patients.

The Strategic Planning Committee recommends the relocation of CCMC to 5501 Independence Pkwy to the Governing Board.

Seconded: *Dr. Howard Shaw*

Motion Passed Unanimously

- **Personnel Committee – James Henderson Reporting**
 - Administrative Requirements Policy
 - The policy was updated to account for HIPPA training updates and new software.

The Personnel Committee recommends the approval of the Administrative Requirements Policy to the Governing Board.

Seconded: *Lee Brown*

Motion Passed Unanimously

- Board Member Recruitment
 - The Personnel Committee is currently seeking new Governing Board members.
 - Two potential members have expressed interest.
 - Reminder – all consumer board members must have had a medical visit at HSNT in the previous 24 months.
- ARP Budget Process
 - Doreen Rue has met with small staff groups to receive feedback on uses for the ARP grant.
 - HSNT will use these ideas and suggestions to help determine the allocation of grant dollars.

Agenda Item VII: Old/New Business

- Old Business – none to report.
- New Business
 - Outside Business Hours Policies
 - Approved as part of the PCMH policies recommended by the Quality Committee.
 - Changes in Scope
 - Hours of Operation at Loop 288 and DSC - Form 5B
 - Move Mental Health and Substance Abuse Services from Contract (Column II) to Referral (Column III) - Form 5A
 - Add Immunizations and Health Education to Other In-Scope Activities - Form 5C

The Personnel Committee recommends the approval of the Changes in Scope to the Governing Board.

Seconded: *Dr. Howard Shaw*

Motion Passed Unanimously

Agenda Item VIII: Executive Session

- John Moyle Cause # 18-4895-393
 - No report at this time.
- Sarah Gibbons EEOC # 450-2019-04360
 - No report at this time.
- Progressive Auto Claim # 19-4874088, Personal Injury File # 260052
 - No report at this time.

Agenda Item IX: Important Dates

- June Board Meeting – June 16th @ 6pm – Virtual Meeting

Adjourned by Michael Foster at 6:41pm.

Board Secretary Approval _____ **Date** _____

Board President Approval _____ **Date** _____

Health Services of North Texas, Inc.

Finance Committee Meeting Agenda

June 15th, 2021; 7:30 am

ZOOM Invitation

Meeting ID: 946 7287 6318

Password: 217287

Call In Number: 1-346-248-7799

- I. Review and approve May 2021 minutes
- II. Review and Approve May 2021 Financials
- III. Title X Risk Score and Monitoring process
- IV. American Rescue Plan Budget
- V. HRSA Capital Improvemnts
- VI. 8:30am Adjournment-THANK YOU!

- HSNT Bank Account Reconciliations are available for review

IMPORTANT DATES:

- June 16th, 2021; 6:00pm HSNT Board Meeting
- July 20th, 2021; 7:30am HSNT Finance Committee Meeting



Finance Committee Meeting

Meeting Facilitator: Dale Tampke

Meeting Date: May 18, 2021

Time: 7:30 a.m.

Location: HSNT HQ ZOOM

Attendees: Dale Tampke and Lee Brown

Staff Present: Doreen Rue, Pam Barnes, Debra Layman and Christopher Redden

Agenda Item I: Review and Approve April 2021 minutes

Motion to accept: Lee Brown

Seconded: Dale Tampke

Motion Passed 2-0

Agenda Item II: Review and Approve April 2021 Financials

Dale acknowledged the notes to the financials sent prior to the meeting. The notes have detailed comments about HSNT's financial position. Pam discussed April is one of two months per calendar year HSNT will experience three payroll periods. An analysis of activity to budget would have agency at 34% of Revenue and Expenditures to budget. Revenues are on target at 34.8% of budget; earned revenue is at 30% to budget and other revenue is at 45% to budget putting HSNT total revenue at 34.8%. Expenditures are at 36% to budget. Three payroll payments were made in April, the third payroll totals approximately 2% of budgeted expenditure which equals the total overage to budget of 2%. HSNT leadership can make decisions on larger expenditures to curb the overage to budget during the months we know three payrolls will occur.

Motion to accept: Lee Brown

Seconded: Dale Tampke

Motion Passed 2-0

Agenda Item III: Audit Update

Pam updated the finance committee on Audit Status. Two remaining outstanding items include Ryan White eligibility documentation for one patient and validating HSNT documented year end Medical Account Receivable. There will be one adjustment to the financials in accounts payable. It was discovered that when HSNT accounting office implemented Electronic Funds Transfer payment system, HSNT accounting software is not able to appropriately document these payments accounts payable. This has been manually corrected moving forward. Additionally, the accounting team is looking at restructuring HSNT accounting software and update the software to the cloud version. Audit presentation is schedule for the July 2021 Finance Committee and Board meeting.

Agenda Item IV: 7:57 am adjourn

March minutes include notes to the financials.

Board Treasurer Approval: 
Dale Tampke, HSNT Board Treasurer

Health Services of North Texas, Inc.
Statement of Activities
From 5/1/2021 Through 5/31/2021

	Current Month	Last Month (04/01/2021 - 04/30/2021)	Current YTD	Prior YTD	FY2021 Budget	YTD Difference	% Budget
REVENUE							
Individuals	266.72	1,250.90	6,101.31	6,304.88	28,000.00	(203.57)	(21.79)%
Corporations	23,300.00	12,433.13	93,316.13	86,901.35	209,500.00	6,414.78	(44.54)%
Organizations	2,880.00	4,723.19	115,043.19	52,843.56	189,500.00	62,199.63	(60.70)%
In Kind	12,531.00	12,531.00	153,587.29	140,938.53	257,067.00	12,648.76	(59.74)%
United Way	17,916.66	17,916.66	89,583.30	131,944.40	215,000.00	(42,361.10)	(41.66)%
Govt Grants	307,023.59	535,579.07	2,263,371.46	1,569,251.86	4,337,269.00	694,119.60	(52.18)%
Medicaid	524,260.32	494,156.39	2,194,589.10	1,775,276.38	15,095,890.00	419,312.72	(14.53)%
Medicare	98,136.08	(23,909.11)	414,444.37	703,130.12	1,015,423.00	(288,685.75)	(40.81)%
Commercial	84,253.36	(33,995.61)	428,790.45	684,245.39	2,459,241.00	(255,454.94)	(17.43)%
Self Pay	942,640.82	1,610,700.06	4,799,777.42	4,350,012.92	18,350,376.00	449,764.50	(26.15)%
Contractual Adj	(1,099,069.72)	(1,382,948.55)	(5,033,508.36)	(5,061,901.50)	(27,827,719.00)	28,393.14	(18.08)%
Doubtful Allow	59,016.20	0.00	38,795.40	(17,130.87)	(40,000.00)	55,926.27	96.98%
Bad Debt	0.00	0.00	0.00	(18,119.47)	(251,716.00)	18,119.47	0.00%
Program Income	395,134.09	165,223.45	1,604,884.85	504,913.38	2,630,885.00	1,099,971.47	(61.00)%
Interest Income	0.00	0.00	0.00	699.35	3,000.00	(699.35)	0.00%
Misc. Income	691.10	0.00	891.04	2,229.23	0.00	(1,338.19)	0.00%
SBA PPP	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
Total REVENUE	<u>1,368,980.22</u>	<u>1,413,660.58</u>	<u>7,169,666.95</u>	<u>4,911,539.51</u>	<u>16,671,716.00</u>	<u>2,258,127.44</u>	<u>(43.00)%</u>
EXPENSES							
Salaries	573,724.53	858,589.30	3,235,776.74	2,715,496.83	7,813,709.00	520,279.91	41.41%
Payroll Taxes	44,781.40	65,885.16	263,930.92	209,866.23	633,651.00	54,064.69	41.65%
Fringe Benefits	66,871.31	100,257.29	371,176.80	305,720.03	900,560.00	65,456.77	41.21%
Contract Labor	121,146.50	116,121.76	558,384.70	436,359.90	1,437,228.00	122,024.80	38.85%
Communication	18,800.63	18,094.55	98,250.21	70,606.29	173,140.00	27,643.92	56.74%
Depreciation	11,441.04	11,441.04	57,427.67	60,371.55	144,000.00	(2,943.88)	39.88%
Equipment	33,719.78	41,974.77	192,907.16	172,696.26	459,927.00	20,210.90	41.94%
Insurance	7,398.90	7,293.10	36,172.07	29,388.88	71,000.00	6,783.19	50.94%
Interest	5,308.85	5,501.79	26,883.52	27,995.60	70,000.00	(1,112.08)	38.40%
Training	2,901.09	5,258.56	9,907.87	6,899.00	77,000.00	3,008.87	12.86%
Mileage	605.92	756.73	2,366.70	2,088.58	13,265.00	278.12	17.84%
Misc. Expenses	0.00	0.00	296.85	1,010.45	4,000.00	(713.60)	7.42%
Donor Dev	184.00	886.50	1,070.50	321.34	5,900.00	749.16	18.14%
Occupancy	45,008.62	45,712.40	229,146.87	213,091.16	522,067.00	16,055.71	43.89%
Postage/Print	5,438.71	1,384.72	12,389.10	13,288.18	51,840.00	(899.08)	23.89%
Professional Svcs	3,680.45	31,879.94	44,053.70	12,255.40	300,000.00	31,798.30	14.68%
Assist to Clients	476,371.57	401,602.26	2,017,255.23	891,635.57	3,233,881.00	1,125,619.66	62.37%
Dues	2,406.97	4,235.12	16,379.03	12,503.16	76,500.00	3,875.87	21.41%
Supplies	34,424.66	28,494.28	271,730.73	241,756.58	620,000.00	29,974.15	43.82%
Total EXPENSES	<u>1,454,214.93</u>	<u>1,745,369.27</u>	<u>7,445,506.37</u>	<u>5,423,350.99</u>	<u>16,607,668.00</u>	<u>2,022,155.38</u>	<u>44.83%</u>
Net Assets	<u>(85,234.71)</u>	<u>(331,708.69)</u>	<u>(275,839.42)</u>	<u>(511,811.48)</u>	<u>64,048.00</u>	<u>235,972.06</u>	<u>430.67%</u>

Health Services of North Texas, Inc.
Statement of Financial Position
As of 5/31/2021

	Current Period	Last Month - Apr 2021	Prior Year End - Dec 2020	\$ Chge	% Chge
ASSETS					
Current Assets					
Operating Cash	2,122,582.89	1,927,885.65	1,965,114.47	157,468.42	0.08
Total Current Assets	2,122,582.89	1,927,885.65	1,965,114.47	157,468.42	0.08
Other Current Assets					
Grant Receivables	521,842.64	774,926.96	816,078.27	(294,235.63)	-36.05%
340B Receivables	361,017.19	265,747.83	439,228.86	(78,211.67)	(0.18)
Medical Receivables	450,041.26	513,806.98	429,021.86	21,019.40	4.90%
Prepaid Expenses	66,371.03	70,329.05	51,445.64	14,925.39	100.00%
Deposits	11,429.25	11,429.25	11,429.25	0.00	0.00%
Inventory	0.00	0.00	0.00	0.00	0.00%
Total Other Current Assets	1,410,701.37	1,636,240.07	1,747,203.88	(336,502.51)	-19.26%
Short Term Investments					
Investment CDs	564,649.38	564,649.38	564,649.38	0.00	0.00%
Total Short Term Investments	564,649.38	564,649.38	564,649.38	0.00	0.00%
Long Term Assets					
Fixed Assets					
Medical Equipment	60,525.84	60,525.84	60,525.84	0.00	0.00%
Building Improvements	92,664.56	92,664.56	92,664.56	0.00	0.00%
4308 Mesa Denton Office	308,335.28	308,335.28	308,335.28	0.00	0.00%
4304 Mesa Medical Center	2,324,761.13	2,324,761.13	2,324,761.13	0.00	0.00%
Software Applications	15,240.00	15,240.00	15,240.00	0.00	0.00%
Telephone Systems	95,499.55	95,499.55	95,499.55	0.00	0.00%
IT Equipment	110,348.65	110,348.65	99,323.65	11,025.00	11.10%
Vehicles	102,255.00	102,255.00	102,255.00	0.00	0.00%
4304 Land	257,000.00	257,000.00	257,000.00	0.00	100.00%
Accumulated Depreciation	(557,830.20)	(546,389.16)	(500,402.53)	(57,427.67)	11.48%
Total Fixed Assets	2,808,799.81	2,820,240.85	2,855,202.48	(46,402.67)	-1.63%
Total Long Term Assets	2,808,799.81	2,820,240.85	2,855,202.48	(46,402.67)	(0.02)
Total ASSETS	6,906,733.45	6,949,015.95	7,132,170.21	(225,436.76)	-3.16%
LIABILITIES					
Current Liabilities					
Accounts Payable	454,925.14	434,212.68	265,943.30	188,981.84	71.06%
Accrued Payroll	602,366.39	582,866.39	668,636.39	(66,270.00)	-9.91%
Accrued Retirement	114,149.61	100,491.52	171,606.83	(57,457.22)	-33.48%
Payroll Liabilities	13,711.25	20,531.09	8,025.68	5,685.57	70.84%
Other Current Liability	261,976.34	261,976.34	262,360.64	(384.30)	(0.00)
Total Current Liabilities	1,447,128.73	1,400,078.02	1,376,572.84	70,555.89	5.13%
Long Term Liabilities					
Capital Loan	1,294,737.97	1,298,836.47	1,314,891.20	(20,153.23)	100.00
Total Long Term Liabilities	1,294,737.97	1,298,836.47	1,314,891.20	(20,153.23)	100.00
Total LIABILITIES	2,741,866.70	2,698,914.49	2,691,464.04	50,402.66	1.87%
NET ASSETS					
Net Assets at Beginning of Year	4,440,706.17	4,440,706.17	4,214,048.67	226,657.50	5.38%
Current Net Assets(Liabilities)	(275,839.42)	(190,604.71)	226,657.50	(502,496.92)	-221.70%
Total NET ASSETS	4,164,866.75	4,250,101.46	4,440,706.17	(275,839.42)	-6.21%
TOTAL LIABILITIES & NET ASSETS	6,906,733.45	6,949,015.95	7,132,170.21	(225,436.76)	-3.16%

Health Services of North Texas, Inc.
Statement of Operations
From 5/1/2021 Through 5/31/2021

	Current Month	Last Month (04/01/2021 - 04/30/2021)	Current YTD	Prior YTD	FY2021 Budget	YTD Difference	% Budget
Patient Revenue							
Net Patient Rev	1,871,943.87	2,358,514.28	8,852,888.08	7,022,946.80	28,784,071.00	1,829,941.28	(30.75)%
Uncollectible	(867,572.72)	(1,529,287.65)	(4,405,114.85)	(4,102,520.45)	(17,351,691.00)	(302,594.40)	(25.38)%
Total Patient Revenue	<u>1,004,371.15</u>	<u>829,226.63</u>	<u>4,447,773.23</u>	<u>2,920,426.35</u>	<u>11,432,380.00</u>	<u>1,527,346.88</u>	<u>(38.91)%</u>
Other Revenue							
Grants	307,023.59	535,579.07	2,263,371.46	1,569,251.86	4,337,269.00	694,119.60	(52.18)%
Other	57,585.48	48,854.88	458,522.26	421,861.30	902,067.00	36,660.96	(50.83)%
Total Other Revenue	<u>364,609.07</u>	<u>584,433.95</u>	<u>2,721,893.72</u>	<u>1,991,113.16</u>	<u>5,239,336.00</u>	<u>730,780.56</u>	<u>(51.95)%</u>
TOTAL Revenue	<u>1,368,980.22</u>	<u>1,413,660.58</u>	<u>7,169,666.95</u>	<u>4,911,539.51</u>	<u>16,671,716.00</u>	<u>2,258,127.44</u>	<u>(43.00)%</u>
Expenses							
Personnel	688,190.78	1,027,330.52	3,884,147.22	3,245,977.17	9,383,920.00	638,170.05	41.39%
Medical Services	421,545.21	386,798.76	1,890,005.39	864,924.91	2,957,381.00	1,025,080.48	63.90%
Patient Care	51,574.27	42,989.92	241,615.12	178,536.92	641,500.00	63,078.20	37.66%
IT	67,676.12	76,389.58	364,918.47	296,558.71	789,027.00	68,359.76	46.24%
MarComm	12,473.43	8,528.52	49,435.72	38,075.92	154,680.00	11,359.80	31.95%
Occupancy	45,008.62	45,712.40	229,146.87	213,091.16	522,067.00	16,055.71	43.89%
Operating Costs	167,746.50	157,619.57	786,237.58	586,186.20	2,159,093.00	200,051.38	36.41%
Total Expenses	<u>1,454,214.93</u>	<u>1,745,369.27</u>	<u>7,445,506.37</u>	<u>5,423,350.99</u>	<u>16,607,668.00</u>	<u>2,022,155.38</u>	<u>44.83%</u>
Operating Income(Loss)	<u>(85,234.71)</u>	<u>(331,708.69)</u>	<u>(275,839.42)</u>	<u>(511,811.48)</u>	<u>64,048.00</u>	<u>235,972.06</u>	<u>430.67%</u>
Net Assets	<u>(85,234.71)</u>	<u>(331,708.69)</u>	<u>(275,839.42)</u>	<u>(511,811.48)</u>	<u>64,048.00</u>	<u>235,972.06</u>	<u>430.67%</u>

Health Services of North Texas, Inc.
Statement of Cash Flows
As of 5/31/2021

	<u>Current Period</u>	<u>Current Year</u>	<u>Prior Year YTD</u>
Cash Flows from Operating Activities			
Medicaid	547,653.37	2,139,776.15	1,676,106.17
Medicare	34,437.92	140,476.87	307,037.71
Private/Commercial	(16,755.23)	108,389.91	238,628.53
Self Pay	107,666.72	433,226.05	271,494.05
Program Income	395,134.09	1,604,884.85	504,319.76
Grants	464,838.55	2,635,818.76	1,630,751.14
Receipts from Contributors	57,585.48	458,522.26	421,161.95
Interest Received	0.00	0.00	699.35
Payments to Employees & Suppliers	<u>(1,385,538.56)</u>	<u>(7,315,337.18)</u>	<u>(4,270,713.76)</u>
Total Cash Flows from Operating Activities	<u>205,022.34</u>	<u>205,757.67</u>	<u>779,484.90</u>
Cash Flows from Capital Activities			
Capital Activity/Disposal of Assets	0.00	(11,025.00)	0.00
Capital Loan	<u>(9,407.35)</u>	<u>(47,036.75)</u>	<u>(47,036.75)</u>
Total Cash Flows from Capital Activities	<u>(9,407.35)</u>	<u>(58,061.75)</u>	<u>(47,036.75)</u>
Change in Medical Liability			
Change in Patient Refunds	<u>0.00</u>	<u>2,027.08</u>	<u>(36,226.74)</u>
Total Change in Medical Liability	<u>0.00</u>	<u>2,027.08</u>	<u>(36,226.74)</u>
Beginning Cash & Cash Equivalents	<u>2,462,555.18</u>	<u>2,508,447.17</u>	<u>2,472,037.04</u>
Ending Cash & Cash Equivalents	<u><u>2,658,170.17</u></u>	<u><u>2,658,170.17</u></u>	<u><u>3,168,258.45</u></u>

Health Services of North Texas, Inc.
Financial Ratios
May 2021

		Fiscal Year	
	FY2020 Goals	To Date 2021	Fiscal Year End 2020
Quick Ratio Current Assets/Current Liabilities	9:1	2.78 : 1	3.07 : 1
Debt/Equity Total Liabilities/Total Net Assets	13.0%	65.8%	60.5%
Working Capital to Expense Ratio CA/CL divided by Expense/# month in Period	3 : 1	1.78 : 1	2.39 : 1
Long Term Debt to Equity Ratio	25%	31.1%	29.6%
Percentage of Admin & Fundraising <i>included estimate of new accounting standard</i>	25.0%	13.2%	15.6%
Number of Days - Cash	60	50	58
Number of Days - Liquidity	180	78	101
Accounts Receivable Days (Medical AR Collection Period)	50	24	28
Change In Net Assets to Expense (Net Assets/Total Expense)	3.0%	-3.7%	1.6%
Operating Margin (Change in Net Assets/Total Revenue)	0.5%	3.9%	1.56%
Cash Flow	1.5%	6.8%	6.0%
			FY2020
Cost per Employee this month		\$5,170.61	\$5,037.72
		Rolling 12 Month Data	Fiscal Year End 2020
Cost per Employee R12		\$67,832.96	\$65,398.18
Average Hourly Rate R12		\$34.21	\$32.73
Cost Per Medical Encounter *40,782		\$392.77	\$354.79
Cost Per Medical Patient *15,927		\$1,054.03	\$1,053.75
Federal Cost Per Medical Patient		\$103.98	\$103.91

* Cost per Medical Encounter and Cost per Patient calculations updated for 2018 year end financials moving forward.

*Cost per Employee and Hourly Rate updated to a rolling 12 months in August 2019



Governing Board Quality Committee Minutes

May 19, 2021

Present: Dr. Howard Shaw, Melissa Winans, Judge Chance Oliver

Absent: Trang Dang-Le

Staff: Debra Layman, Dr. Jason Siegel, Doreen Rue

Quorum met.

Called to order: 5:00pm

I. Roll Call and Acceptance of Minutes

- April 2021 Board and Staff Quality Meeting Minutes

Motion to approve minutes: Melissa Winans

Seconded: Judge Chance Oliver

Motion Passed Unanimously

II. New PDSAs

- No Report this Month.

III. Update on Existing Quality Initiatives

- New Patients
 - April 2021: 358 new patients
 - 42% of new patients are pediatric patients.
- COVID-19 Response
 - Vaccines
 1. HSNT has administered 944 doses to date.
 2. 80% of HSNT's staff is vaccinated.
 - Testing
 1. HSNT is seeing lower testing rates than previously.
 2. HSNT has had 4 weeks with no positive tests.
- PCMH – including policy approval
 - HSNT's third and final check-in will be in July.
 1. The first two reviews have gone well.
 - HSNT has prepped policies for review and approval as part of the PCMH process.
 - The Quality Committee will recommend approval of the PCMH Policies to the Governing Board.



IV. Patient Satisfaction Reports

- Public Reviews:
 - 4.54 All-Time
 - 4.66 April 2021
- 98.1% of patients would recommend HSNT to family and friends.
- Family and Friends are the top referral category for HSNT patients.
 - Internet and Hospitals are the next largest groups.
- 60% of HSNT's patients have been financially impacted by COVID-19.
- 96% of patients agree that HSNT's services are affordable.
- 96% of patient are able to books an appointment when needed.
 - 94% found a time that was convenient for them.

V. Quality Meeting Dashboard

- HEDIS, UDS, & HSNT
 - HSNT must meet 25 of the 31 goals to achieve incentive for 2021.
 1. April – meeting 14
 - Some quality metrics will naturally improve over the course of the year.
 1. As patient numbers and visits increase metrics will improve.
- Incentive Goals
 - The focus is on quality, sustainability, and patient satisfaction.

VI. Other Items

- Quality Management Plan
 - The updated Quality Management Plan incorporates the Quadruple Aim:
 1. Patient Experience
 2. Better Health Outcomes
 3. Sustainability
 4. Care Team Wellbeing
 - The new plan also makes changes to the structure of the HSNT Staff Quality Committee membership and meeting structure.
 - The Quality Committee will recommend approval of the Quality Management Plan to the Governing Board.
- HRSA 330 Compliance Review
 - Required and Additional Health Services
 1. HSNT will present a change in scope for Mental Health and Substance Use Disorder Services to the Governing Board for approval.
 2. Cultural sensitivity training will be rolled out to all clinic staff.
 - Accessible Locations and Hours of Operations
 1. HSNT will present a change in scope for hours of operations at Loop 288 and DSC to the Governing Board for approval.



o Quality Improvement/Assurance

1. HSNT's HIPPA policies will be evaluated for needed updates.
2. HSNT's clinical policies and procedures will be reviewed to ensure consistency with HSNT's PCMH policies.

VII. Reports to the Board

- Patient Satisfaction
- Incentive Progress
- PCMH Policies
- Quality Management Plan
- HRSA 330 Compliance Review

Adjourned: 5:40pm



Governing Board Personnel Committee Minutes

June 8, 2021

Present: James Henderson

Staff: Doreen Rue

Quorum not met.

I. Board Member Applications

- Belinda Hernandez
 - i. Current HSNT patient, would join as a consumer member.
 - ii. She has a comprehensive view of HSNT's services.
 - iii. She has expressed a passion for advocating for patients and healthcare.
- Dr. Kimberly Middleton
 - i. She has impressive experience in healthcare and FQHC operations.
 - ii. She is a practicing physician; her membership would bring HSNT's percentage of non-consumer members who earn more than 10% of their income from healthcare to 50%.
- Both candidates will bring valuable insight to HSNT's Governing Board.
- Going forward, HSNT will need to prepare for the consumer member rolling off of the board in April 2022.

II. HRSA 330 Compliance Review

- Key Management Staff
 - i. HSNT will add job posting procedures to the Recruitment and Retention policy.
- Clinical Staffing
 - i. HSNT is revamping its credentialing process to improve adherence.
 - ii. HSNT is creating the Credentialing Compliance Committee.
- FTCA Deeming Requirements
 - i. This application will be completed this month.

III. ARP Grant Updates

- ARP Grant
 - i. Six Spending Areas:
 1. Four for COVID-19 Response
 2. Building Capacity
 3. Recovery
 - ii. HSNT will back bill to replenish cash reserves used for expenses tied to COVID-19.
 - iii. Personnel



1. Vacant Positions:
 - a. Pediatric physician
 - b. Family nurse practitioner
 - c. Accounting assistant
 - d. Business office manager
 2. This will also include allocations of unfunded staff positions that will support the new CCMC location.
 - iv. New CCMC Location
 1. The change in scope to relocate was approved by HRSA.
 2. The lease for the new location will most likely begin on July 1st.
 3. Moving costs, flooring, paint, and ADA retrofits will be billed to the ARP grant.
 - v. Equipment (defined as \$5,000 or more with a life of over 1 year)
 1. Fetal Non-Stress Test
 - vi. Supplies
 1. Both office and medical supplies.
 2. This category includes many staff requests.
 - vii. Most items are a onetime expense – HSNT will utilize more funding in year one than year two.
 1. Funds can be moved from one line item to another as long as the amount moved does not exceed 25% of the total grant amount.
- ARP Capital Grant
 - i. Three projects will be included in this grant:
 1. Remodel of 4308 Mesa Drive
 - a. Approx. \$400,000
 - b. This will not be a complete overhaul but will include significant changes.
 2. Additional Parking at 4304 Mesa Drive
 - a. Approx. \$200,000
 - b. Addition of 18 parking spaces.
 3. Equipment
 - a. Items identified by providers but not included in the ARP grant.
- IV. Workforce Development & Organizational Culture Update**
- No Update
- V. Old/New Business**
- No Update
- VI. Reports to the Board**
- Board Member Applications
 - HRSA 330 Compliance

Grants & MarCom Monthly Report June 2021

Keeping HSNT Top of Mind & Building Relationships

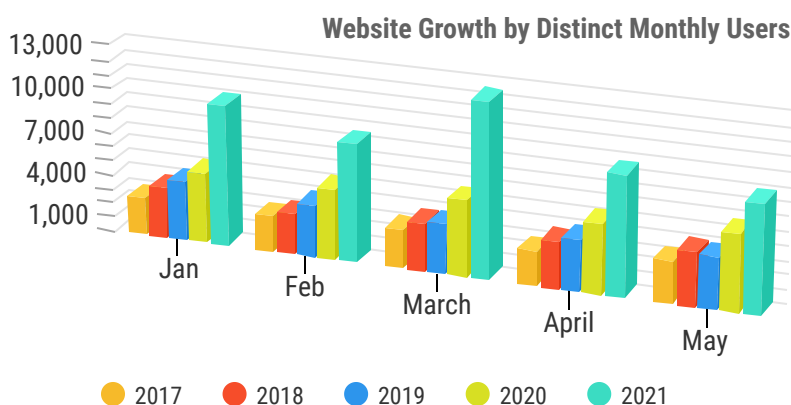
- Denton Noon Rotarians finished up the DSC waiting room project with the tremendous addition of a Denton themed mural covering one waiting room wall. Check out the HSNT Facebook page to see what the mural looks like and show some love to the Denton Rotarians.
- Strategic attendance at in person ribbon cuttings and community events has resumed.
- Denton Rotarian groups came together to purchase and assemble new mom totes. These totes are filled with items that all new moms need and will appreciate.
- Grocery Cart Advertising at the Kroger is Wylie is live, promoting HSNT's pediatric care at Wylie Children's Medical Clinic.

480
NEW PATIENTS
to HSNT system in May
191 are Pediatric Patients
and of those 39 Newborns!

Jan	Feb	March	April	May
231	196	353	358	480

Digital Marketing and Website

- Website traffic is continuing to decline due to fewer COVID related searches. However growth year over year is significant as seen in graph to the right. Current website traffic is producing relevant conversions. 7,640 Users | 10,324 Sessions during the month of May.
- Paid digital pediatric ads are running, performance data to be released in July.
- Google Ads Grant is holding steady, we anticipate significant growth by August.



Key Campaigns

- Introduce HSNT's online schedule tool to patients and community
- Pediatrics- position HSNT as a leader in pediatric care.
- General Awareness Campaigns | Pediatrics | HIV & Infectious Disease Services
- Business Stakeholder Campaign
- COVID-19 Vaccine Education

Up Next

- Introduce Health Services of North Texas to the larger Plano community. Developing all Stakeholder Groups to [Join HSNT as we Raise the Bar in Quality Health Care](#)
- Identify and define usage of new HSNT sub-brand, **Health Services of North Texas Pediatrics** along with best practices to strengthen the sub-brand.
- Preparing for Summer months and Back to School campaign
- Wylie Donor Stakeholder Development

Key Grant Metrics

Total Awarded since April Board meeting:
Walmart in Wylie \$2,500

9 Grant Proposals in Process
\$1,347,474 Value

23 Grant Proposals Awaiting Decision
\$480,770 Value

Grant proposals/submissions for approval

American Rescue Plan Capital	Construction and equipment (4308 renovations, 4304 parking lot, equipment)	\$641,240	June
Episcopal Health Foundation of Dallas	Pediatrics	\$7,500	June

Year to Date we have submitted 30 proposals, 10 to new funders.

Patient Comment

"The office staff is always so helpful when I call. They go above and beyond to help me and answer my questions. Dr. Siegel is great. He is so personable and really takes the time to listen to me. Best doctor I've ever had. I'm so glad I found Health Services of North Texas, they really are a great facility with wonderful staff and providers."

Health Center American Rescue Plan Funding

We asked for and received an extension to submit our project proposal after our June board meeting. The entire team participated in providing input on our current and strategic needs. Reviews of HRSA’s funding guidance along with HSNT’s community needs assessment, strategic plan, current facilities condition, and capacity and program utilization data were used to prepare recommendations on how to best invest these resources. All Governing Board committees will review the project plan and documents prior the June 16th board meeting when the budget and proposal will be presented for review and approval. The project summary and budget documents immediately follow this report.

American Rescue Plan Capital Funding Opportunity

Following the same process as noted above we have prepared a proposal in response to the non-competitive capital grant. This one-time supplemental funding is for health centers to support construction, expansion, alteration, renovation, and other capital improvements to modify, enhance, and expand health care infrastructure. Recommendations include repair and renovation of the 4308 Mesa Drive building in Denton, additional parking at 4304 Mesa Drive in Denton, and equipment. This grant proposal is due on June 24th and will be presented to the board for review and approval. We are finalizing the documents for review and will send as much in advance of the meeting as possible.

Collin County Medical Center (CCMC) Location Update

The ARP funding is the springboard to advance our strategic goal of expanding services at our CCMC location in Plano. HRSA approved our request to add 5501 Independence Parkway location in Plano in our FHQC project scope. The Notice of Award is attached and acknowledges that the site is not officially included in our scope until we verify that is ready for patient care. We are moving forward with the lease and anticipate a July 1st start date. We negotiated the first month without rent payment to complete the painting, flooring, and network wiring, and move. The timeline is tight with our moveout of current space by July 31,2021. The plan is to be operational in August with Infectious Disease care with Peds and Family Practices to follow. Larry Bisno is the project manager for both decommissioning of the K Avenue location and opening the Independence Parkway location.



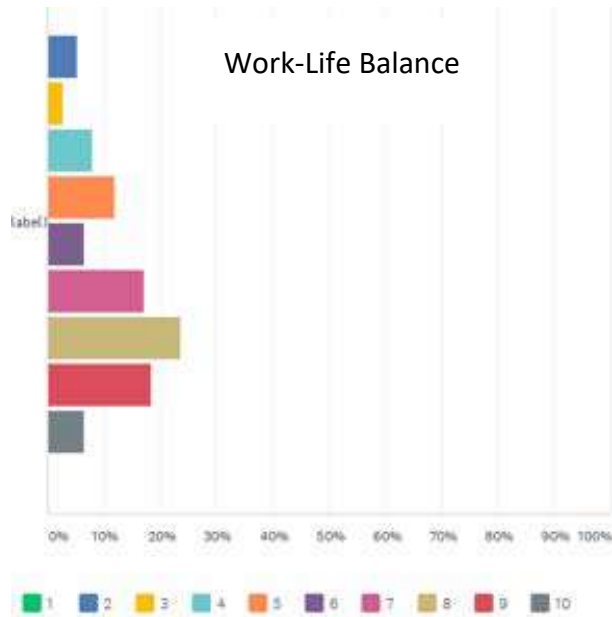


2021 Staff Satisfaction Survey Results

The workforce development and organizational culture committee recently reviewed the survey results in detail. Brandi Ruiz, Human Resource Director for HSNT, met with supervisors from each functional area to go over their team’s responses and develop strategies to address and strengthen staff satisfaction. Job descriptions, pay ranges, communication style, recognition, and conflict management were included in the supervisor sessions.

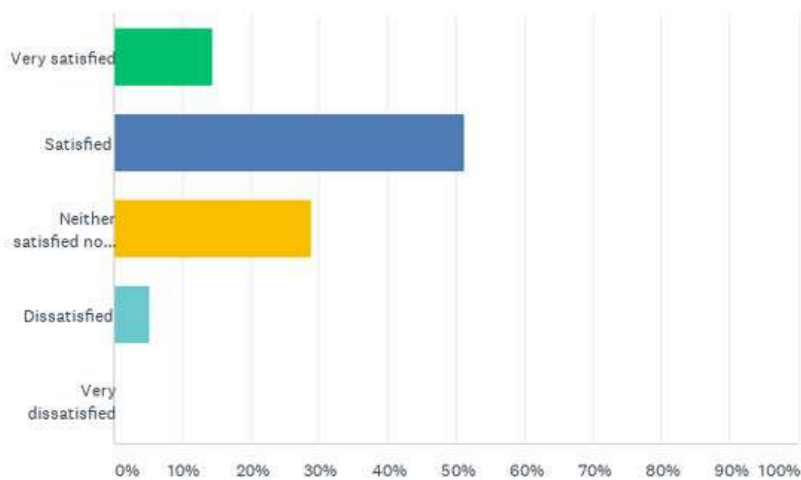
77 staff members, or 63% of employees, responded to the survey. Of the survey questions, are a few that are highlighted here, and the full results follow this report.

Q1: On a scale of 1 to 10, how would you rate your work-life balance? (1 being the lowest and 10 being the highest).



*This is an area that we are addressing. Leadership is reviewing job descriptions, using technology and simplify procedures, creating efficiencies and removing waste from our process (HSNT BEST initiative with Toyota).

Q22: How satisfied are you with the benefits offered by HSNT?



- Nearly 74% of the respondents felt that they we are progressing professionally and 53% said they would like to receive training from HSNT.
- 97% said they are Proud to work at HSNT.
- When asked how good their supervisor is at recognizing their contributions at work on a scale of 1 to 10 the staff rated their supervisors at an 8.
- 84% said they would refer someone to work at HSNT.
- 25% are not satisfied with the amount of paid time off.

Updates and Information

- Health Services of North Texas Pediatric Clinic was selected as an awardee at Child Psychiatry Access Network (CPAN) Anniversary Celebration. As the first clinic to enroll in CPAN with the UTSW hub, HSNT received the **Bright Beginning Award**. Dr. Jackson was recognized for his leadership in this initiative.
- Annual staff performance evaluations wrapped up this week. Merit increases go into effect on July 1, 2021.
- We are planning the annual staff picnic in late fall. We skipped last year, and staff are looking forward to resuming this tradition and updating our group picture.
- Health centers advocates helped secure many of the priorities we set for this legislative session. A summary of this activity will be presented next month.
- HSNT received our results from the TACHC Staff Wellness survey in August of 2020. The results were very positive, a follow up survey is scheduled for July 2021.

Thank you for your support,

Doreen Rue, CEO

BUDGET INFORMATION - Non-Construction Programs

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Health Center American Rescue Plan Act (H8F40947)	93.224	\$ 3,448,000.00	\$ 0.00	\$	\$	\$ 3,448,000.00
2.						
3.						
4.						
5. Totals		\$ 3,448,000.00	\$ 0.00	\$	\$	\$ 3,448,000.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
	Health Center American Rescue Plan Act (H8F40947)				
a. Personnel	\$ 1,375,660.00	\$	\$	\$	\$ 1,375,660.00
b. Fringe Benefits	264,456.00				264,456.00
c. Travel	9,940.00				9,940.00
d. Equipment	6,078.00				6,078.00
e. Supplies	656,271.00				656,271.00
f. Contractual	569,622.00				569,622.00
g. Construction	105,000.00				105,000.00
h. Other	460,973.00				460,973.00
i. Total Direct Charges (sum of 6a-6h)	3,448,000.00				\$ 3,448,000.00
j. Indirect Charges	0.00				\$ 0.00
k. TOTALS (sum of 6i and 6j)	\$ 3,448,000.00	\$	\$	\$	\$ 3,448,000.00
7. Program Income	\$ 0.00	\$	\$	\$	\$ 0.00

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SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e)TOTALS
8.	Health Center American Rescue Plan Act (H8F40947)	\$ 0.00	\$	\$	\$ 0.00
9.					
10.					
11.					
12. TOTAL (sum of lines 8-11)		\$ 0.00	\$	\$	\$ 0.00

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 2,040,991.00	\$ 0.00	\$ 680,330.00	\$ 680,330.00	\$ 680,331.00
14. Non-Federal	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
15. TOTAL (sum of lines 13 and 14)	\$ 2,040,991.00	\$ 0.00	\$ 680,330.00	\$ 680,330.00	\$ 680,331.00

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program		FUTURE FUNDING PERIODS (YEARS)			
		(b)First	(c) Second	(d) Third	(e) Fourth
16.	Health Center American Rescue Plan Act (H8F40947)	\$ 351,752.00	\$ 351,752.00	\$ 351,753.00	\$ 351,753.00
17.					
18.					
19.					
20. TOTAL (sum of lines 16 - 19)		\$ 351,752.00	\$ 351,752.00	\$ 351,753.00	\$ 351,753.00

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges: Direct Cost allocation method	22. Indirect Charges: HSNT does not have an indirect cost rate.
--	--

23. Remarks: Line b (Fringe Benefits) on Federal Object Class Categories form is \$1 less than budget narrative due to rounding.

Backbill - maintaining and increasing capacity through outreach, communication, recruiting, insurance, security, occupancy, maintenance, cleaning, and sanitation.	See attached	135,573		135,573	0	0	135,573	0
Staff development to include accounting system upgrades, Accounting and EHR training, Workforce training as well as conference registration		25,000		25,000	16,650	16,650	41,650	0
Workforce Wellbeing -Stress and anxiety mgmt, trauma informed care classes, etc.		35,000		35,000	35,000	35,000	70,000	0
Translation Services Language Link (communication)		57,000		57,000	60,000	60,000	117,000	0
Occupancy rent difference in new location (\$8350 per month in year 1; \$3600 monthly difference for 9 months in year 1)		32,400		32,400	46,500	46,500	78,900	0
Utilities (approx \$100 per month)		900		900	1,200	1,200	2,100	0
Maint (approx \$750 per month)		6,750		6,750	9,000	9,000	15,750	0
TOTAL OTHER		292,623	0	292,623	168,350	0	168,350	460,973
TOTAL DIRECT CHARGES		2,040,991	0	2,040,991	1,407,009	0	1,407,009	3,448,000

Total Backbill 690,224.63

0

Backbilled Salaries

GL Code	Effective Date	GL Title	Name	Position	Document Description	Debit	Credit
		Salaries					
5010	1/8/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	707.14	
5010	1/8/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	1,112.94	
5010	1/8/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	3,629.86	
5010	1/8/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	2,748.38	
5010	1/8/2021		Arlene Hudson	Physician	HUDS5534	1,011.75	
5010	1/8/2021		Beverly Johnson	Physician's Assistant	JOHN2412	1,815.27	
5010	1/8/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	3,930.53	
5010	1/22/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	707.14	
5010	1/22/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	1,119.87	
5010	1/22/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	3,629.86	
5010	1/22/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	2,692.31	
5010	1/22/2021		Arlene Hudson	Physician	HUDS5534	1,268.25	
5010	1/22/2021		Beverly Johnson	Physician's Assistant	JOHN2412	1,851.69	
5010	1/22/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	3,930.53	
5010	2/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	707.13	
5010	2/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	1,119.86	
5010	2/5/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	3,629.86	
5010	2/5/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	2,692.31	
5010	2/5/2021		Arlene Hudson	Physician	HUDS5534	1,510.50	
5010	2/5/2021		Beverly Johnson	Physician's Assistant	JOHN2412	1,851.69	
5010	2/5/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	3,930.52	
5010	2/19/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	817.31	
5010	2/19/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	1,119.86	
5010	2/19/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	3,629.86	
5010	2/19/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	2,196.62	
5010	2/19/2021		Arlene Hudson	Physician	HUDS5534	1,282.50	
5010	2/19/2021		Beverly Johnson	Physician's Assistant	JOHN2412	1,851.69	
5010	2/19/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	3,930.53	
5010	3/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	555.77	
5010	3/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	1,116.32	

5010	3/5/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	3,040.00		
5010	3/5/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	1,923.08		
5010	3/5/2021	Arlene Hudson	Physician	HUDS5534	1,809.75		
5010	3/5/2021	Beverly Johnson	Physician's Assistant	JOHN2412	1,851.69		
5010	3/19/2021	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	555.76		
5010	3/19/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	1,102.32		
5010	3/19/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	3,040.00		
5010	3/19/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	1,923.08		
5010	3/19/2021	Arlene Hudson	Physician	HUDS5534	997.50		
5010	3/19/2021	Beverly Johnson	Physician's Assistant	JOHN2412	1,851.69		
5010	4/2/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	641.67		
5010	4/2/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	4,537.32		
5010	4/2/2021	Arlene Hudson	Physician	HUDS5534	1,866.75		
5010	4/2/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	3,930.53		
5010	4/16/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	637.65		
5010	4/16/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	4,537.32		
5010	4/16/2021	Arlene Hudson	Physician	HUDS5534	1,425.00		
5010	4/16/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	3,930.52		
5010	4/30/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	641.67		
5010	4/30/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	4,537.32		
5010	4/30/2021	Arlene Hudson	Physician	HUDS5534	1,439.25		
5010	4/30/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	<u>3,930.53</u>		
Total 5010		Salaries			112,248.25	0.00	112,248.25
5011	1/29/2021	Incentive	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	901.60	
5011	1/29/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	1,119.86	
5011	1/29/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	3,885.38	
5011	1/29/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	2,286.41	
5011	1/29/2021		Arlene Hudson	Physician	HUDS5534	1,394.40	
5011	1/29/2021		Beverly Johnson	Physician's Assistant	JOHN2412	1,125.85	
5011	1/29/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	<u>4,730.53</u>	
Total 5011		Incentive			15,444.03	0.00	15,444.03

127,692.28

Backbilled Benefits

GL Code	Date	GL Title	Name	Position	Description	Debit	Credit
5020	1/8/2021	Social Security Expense	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	41.12	
5020	1/8/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	65.50	
5020	1/8/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	227.39	
5020	1/8/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	168.62	
5020	1/8/2021		Arlene Hudson	Physician	HUDS5534	62.73	
5020	1/8/2021		Beverly Johnson	Physician's Assistant	JOHN2412	112.86	
5020	1/8/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	223.08	
5020	1/22/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	41.12	
5020	1/22/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	65.93	
5020	1/22/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	227.39	
5020	1/22/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	165.14	
5020	1/22/2021		Arlene Hudson	Physician	HUDS5534	78.63	
5020	1/22/2021		Beverly Johnson	Physician's Assistant	JOHN2412	115.12	
5020	1/22/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	223.08	
5020	1/29/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	55.90	
5020	1/29/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	69.43	
5020	1/29/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	240.90	
5020	1/29/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	141.76	
5020	1/29/2021		Arlene Hudson	Physician	HUDS5534	86.45	
5020	1/29/2021		Beverly Johnson	Physician's Assistant	JOHN2412	69.80	
5020	1/29/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	293.30	
5020	2/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	41.12	
5020	2/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	65.93	
5020	2/5/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	227.39	
5020	2/5/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	165.14	
5020	2/5/2021		Arlene Hudson	Physician	HUDS5534	93.65	
5020	2/5/2021		Beverly Johnson	Physician's Assistant	JOHN2412	115.12	
5020	2/5/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	223.08	
5020	2/19/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	47.95	
5020	2/19/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	65.93	
5020	2/19/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	227.39	
5020	2/19/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	165.14	
5020	2/19/2021		Arlene Hudson	Physician	HUDS5534	79.52	
5020	2/19/2021		Beverly Johnson	Physician's Assistant	JOHN2412	115.12	
5020	2/19/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	223.08	

5020	3/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	32.61		
5020	3/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	65.71		
5020	3/5/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	190.44		
5020	3/5/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	87.23		
5020	3/5/2021		Arlene Hudson	Physician	HUDS5534	112.21		
5020	3/5/2021		Beverly Johnson	Physician's Assistant	JOHN2412	115.12		
5020	3/19/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	32.61		
5020	3/19/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	64.84		
5020	3/19/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	190.44		
5020	3/19/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	117.96		
5020	3/19/2021		Arlene Hudson	Physician	HUDS5534	61.85		
5020	3/19/2021		Beverly Johnson	Physician's Assistant	JOHN2412	115.12		
5020	4/2/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	37.77		
5020	4/2/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	284.24		
5020	4/2/2021		Arlene Hudson	Physician	HUDS5534	115.74		
5020	4/2/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	223.08		
5020	4/16/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	37.52		
5020	4/16/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	284.24		
5020	4/16/2021		Arlene Hudson	Physician	HUDS5534	88.35		
5020	4/16/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	223.08		
5020	4/30/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	37.77		
5020	4/30/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	284.24		
5020	4/30/2021		Arlene Hudson	Physician	HUDS5534	89.23		
5020	4/30/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	<u>223.08</u>		
Total 5020		Social Security Expense				7,745.29	0.00	7,745.29
5030	1/8/2021	Medicare Expense	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	9.62		
5030	1/8/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	15.32		
5030	1/8/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	53.18		
5030	1/8/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	39.43		
5030	1/8/2021		Arlene Hudson	Physician	HUDS5534	14.67		
5030	1/8/2021		Beverly Johnson	Physician's Assistant	JOHN2412	26.40		
5030	1/8/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	52.17		
5030	1/22/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	9.62		
5030	1/22/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	15.42		

5030	1/22/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	53.18
5030	1/22/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	38.62
5030	1/22/2021	Arlene Hudson	Physician	HUDS5534	18.39
5030	1/22/2021	Beverly Johnson	Physician's Assistant	JOHN2412	26.92
5030	1/22/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	52.17
5030	1/29/2021	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	13.07
5030	1/29/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	16.23
5030	1/29/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	56.34
5030	1/29/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	33.15
5030	1/29/2021	Arlene Hudson	Physician	HUDS5534	20.22
5030	1/29/2021	Beverly Johnson	Physician's Assistant	JOHN2412	16.32
5030	1/29/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	68.59
5030	2/5/2021	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	9.62
5030	2/5/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	15.42
5030	2/5/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	53.18
5030	2/5/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	38.62
5030	2/5/2021	Arlene Hudson	Physician	HUDS5534	21.90
5030	2/5/2021	Beverly Johnson	Physician's Assistant	JOHN2412	26.92
5030	2/5/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	52.17
5030	2/19/2021	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	11.22
5030	2/19/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	15.42
5030	2/19/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	53.18
5030	2/19/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	38.62
5030	2/19/2021	Arlene Hudson	Physician	HUDS5534	18.59
5030	2/19/2021	Beverly Johnson	Physician's Assistant	JOHN2412	26.92
5030	2/19/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	52.17
5030	3/5/2021	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	7.63
5030	3/5/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	15.36
5030	3/5/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	44.53
5030	3/5/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	27.59
5030	3/5/2021	Arlene Hudson	Physician	HUDS5534	26.24
5030	3/5/2021	Beverly Johnson	Physician's Assistant	JOHN2412	26.92
5030	3/19/2021	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	7.63
5030	3/19/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	15.16
5030	3/19/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	44.53
5030	3/19/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	20.40

5030	3/19/2021		Arlene Hudson	Physician	HUDS5534	14.47		
5030	3/19/2021		Beverly Johnson	Physician's Assistant	JOHN2412	26.92		
5030	4/2/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	8.83		
5030	4/2/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	66.47		
5030	4/2/2021		Arlene Hudson	Physician	HUDS5534	27.07		
5030	4/2/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	52.17		
5030	4/16/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	8.78		
5030	4/16/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	66.47		
5030	4/16/2021		Arlene Hudson	Physician	HUDS5534	20.66		
5030	4/16/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	52.17		
5030	4/30/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	8.83		
5030	4/30/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	66.47		
5030	4/30/2021		Arlene Hudson	Physician	HUDS5534	20.87		
5030	4/30/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	<u>52.17</u>		
Total 5030		Medicare Expense				1,811.32	0.00	1,811.32
5040	1/8/2021	Employer Paid Health Insurance	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	73.56		
5040	1/8/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	256.01		
5040	1/8/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	205.97		
5040	1/8/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	235.39		
5040	1/22/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	73.56		
5040	1/22/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	255.99		
5040	1/22/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	205.97		
5040	1/22/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	235.39		
5040	2/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	73.56		
5040	2/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	255.99		
5040	2/5/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	205.97		
5040	2/5/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	235.39		
5040	2/19/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	73.56		
5040	2/19/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	255.99		
5040	2/19/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	158.05		
5040	2/19/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	235.39		
5040	3/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	50.02		
5040	3/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	255.98		
5040	3/5/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	147.12		

5040	3/19/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	50.02		
5040	3/19/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	255.98		
5040	3/19/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	147.12		
5040	4/2/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	147.14		
5040	4/2/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	235.39		
5040	4/16/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	147.14		
5040	4/16/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	235.39		
5040	4/30/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	147.14		
5040	4/30/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	<u>235.39</u>		
Total 5040		Employer Paid Health Insurance				5,089.57	0.00	5,089.57
5042	1/8/2021	Employer Paid Dental Insurance	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	2.49		
5042	1/8/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	8.67		
5042	1/8/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	7.98		
5042	1/22/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	2.49		
5042	1/22/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	8.67		
5042	1/22/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	7.98		
5042	2/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	2.49		
5042	2/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	8.67		
5042	2/5/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	7.98		
5042	2/19/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	2.49		
5042	2/19/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	8.67		
5042	2/19/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	7.98		
5042	3/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	1.69		
5042	3/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	8.67		
5042	3/5/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	6.68		
5042	3/19/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	1.69		
5042	3/19/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	8.67		
5042	3/19/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	6.68		
5042	4/2/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	4.99		
5042	4/2/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	9.97		
5042	4/16/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	4.99		
5042	4/16/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	9.97		
5042	4/30/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	4.99		

5042	4/30/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	<u>9.97</u>		
Total 5042		Employer Paid Dental Insurance				155.52	0.00	155.52
5060	1/8/2021	Employer Paid Life Insurance	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	7.09		
5060	1/8/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	11.29		
5060	1/8/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	26.74		
5060	1/8/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	26.89		
5060	1/8/2021		Beverly Johnson	Physician's Assistant	JOHN2412	16.93		
5060	1/8/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	35.08		
5060	1/22/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	7.09		
5060	1/22/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	11.29		
5060	1/22/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	26.74		
5060	1/22/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	26.89		
5060	1/22/2021		Beverly Johnson	Physician's Assistant	JOHN2412	16.93		
5060	1/22/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	35.08		
5060	2/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	7.08		
5060	2/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	11.29		
5060	2/5/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	26.74		
5060	2/5/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	26.89		
5060	2/5/2021		Beverly Johnson	Physician's Assistant	JOHN2412	16.93		
5060	2/5/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	35.08		
5060	2/19/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	7.09		
5060	2/19/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	11.29		
5060	2/19/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	26.74		
5060	2/19/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	26.89		
5060	2/19/2021		Beverly Johnson	Physician's Assistant	JOHN2412	16.93		
5060	2/19/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	35.08		
5060	3/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	5.15		
5060	3/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	11.29		
5060	3/5/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	22.40		
5060	3/5/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	19.22		
5060	3/5/2021		Beverly Johnson	Physician's Assistant	JOHN2412	16.93		
5060	3/19/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	5.15		
5060	3/19/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	11.29		
5060	3/19/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	22.40		
5060	3/19/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	19.22		

5060	3/19/2021		Beverly Johnson	Physician's Assistant	JOHN2412	16.93		
5060	4/2/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	6.49		
5060	4/2/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	33.43		
5060	4/2/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	35.08		
5060	4/16/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	6.49		
5060	4/16/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	33.43		
5060	4/16/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	35.08		
5060	4/30/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	6.49		
5060	4/30/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	33.43		
5060	4/30/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	<u>35.08</u>		
Total 5060		Employer Paid Life Insurance				871.05	0.00	871.05
5070	1/8/2021	Retirement Plan	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	35.36		
5070	1/8/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	13.05		
5070	1/8/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	181.50		
5070	1/8/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	137.42		
5070	1/8/2021		Beverly Johnson	Physician's Assistant	JOHN2412	90.76		
5070	1/8/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	196.53		
5070	1/22/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	35.36		
5070	1/22/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	13.05		
5070	1/22/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	181.50		
5070	1/22/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	134.62		
5070	1/22/2021		Beverly Johnson	Physician's Assistant	JOHN2412	92.58		
5070	1/22/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	196.53		
5070	1/29/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	45.08		
5070	1/29/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	13.05		
5070	1/29/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	194.27		
5070	1/29/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	114.32		
5070	1/29/2021		Beverly Johnson	Physician's Assistant	JOHN2412	56.29		
5070	2/5/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	35.36		
5070	2/5/2021		Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	13.05		
5070	2/5/2021		Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	181.50		
5070	2/5/2021		Terrie Estes	Adult Nurse Practitioner	ESTE9985	134.62		
5070	2/5/2021		Beverly Johnson	Physician's Assistant	JOHN2412	92.58		
5070	2/5/2021		Mary Loya	Women's Nurse Practitioner	LOYA3066	196.53		
5070	2/19/2021		Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	40.87		

5070	2/19/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	13.05
5070	2/19/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	181.50
5070	2/19/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	134.62
5070	2/19/2021	Beverly Johnson	Physician's Assistant	JOHN2412	92.58
5070	2/19/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	196.53
5070	3/5/2021	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	23.27
5070	3/5/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	13.05
5070	3/5/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	76.00
5070	3/5/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	53.42
5070	3/5/2021	Beverly Johnson	Physician's Assistant	JOHN2412	46.29
5070	3/19/2021	Marielena Bailey	Senior Clinical Nurse Manager	BAIL0568	27.79
5070	3/19/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	13.05
5070	3/19/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	152.00
5070	3/19/2021	Terrie Estes	Adult Nurse Practitioner	ESTE9985	96.16
5070	3/19/2021	Beverly Johnson	Physician's Assistant	JOHN2412	92.58
5070	4/2/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	7.50
5070	4/2/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	226.87
5070	4/2/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	196.53
5070	4/16/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	7.50
5070	4/16/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	226.87
5070	4/16/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	196.53
5070	4/30/2021	Katelyn Drummond	Referral and Medical Records Coordinator	DRUM0884	7.50
5070	4/30/2021	Sonja Estep	Pediatric Nurse Practitioner	ESTE6581	226.87
5070	4/30/2021	Mary Loya	Women's Nurse Practitioner	LOYA3066	<u>196.53</u>
Total 5070	Retirement Plan				<u>4,930.37</u>
					<u>0.00</u>
					4,930.37

20,603.12

Backbilled Supplies

GL Code	Effective Date	GL Title	ID	Document Description	Debit	Credit
5122	1/1/2021	Flu Vaccine	GLAXOSMITHKLINE	Flu Injectables	17,896.09	
5122	1/1/2021		GLAXOSMITHKLINE	Flu Injectables	3,728.37	
5301	2/18/2021	IT User Equipment	EON Consulting	IT User Equipment	175.00	
5301	2/23/2021		EON Consulting	IT User Equipment	90.00	
5301	2/23/2021		EON Consulting	IT User Equipment (new provider)	1,304.99	
5301	2/24/2021		EON Consulting	IT User Equipment	84.00	
5301	3/23/2021		EON Consulting	IT User Equipment	399.00	
5301	4/14/2021		EON Consulting	IT User Equipment	998.00	
5301	4/16/2021		EON Consulting	IT User Equipment	3.74	

24,679.19

Backbilled Contractual

GL Code	Effective Date	GL Title	ID	Document Description	Debit
5091	1/1/2021	IT-Contract		Vulnerabilty Testing	340.73
5091	1/5/2021		EON Consulting	01.2021 Monthly Service	7,649.81
5091	2/1/2021			Vulnerability Testing	340.73
5091	2/1/2021		EON Consulting	02.2021 Monthly Service	5,762.08
5091	2/23/2021		EON Consulting	02.2021 Monthly Service Supplement	15.98
5091	2/26/2021		EON Consulting	Domain Name Renewal	5.28
5091	3/1/2021			Vulnerability Testing	340.73
5091	3/1/2021		EON Consulting	03.2021 Monthly Service	5,789.52
5091	4/1/2021			Vulnerability Testing	340.73
5091	4/1/2021		EON Consulting	04.2021 Monthly Service	7,349.91
5094	1/31/2021	Medical Billing	R and B Billing Solu	Medical Billing Services 01.2021	31,272.96
5094	2/28/2021		R and B Billing Solu	Medical Billing Services 02.2021	30,690.80
5094	3/31/2021		R and B Billing Solu	Medical Billing Services 03.2021	35,985.18
5094	4/30/2021		R and B Billing Solu	Medical Billing Services 04.2021	38,457.05
5322	1/1/2021		eClinicalWorks	Monthly Service 01.2021	4,642.70
5322	2/1/2021		eClinicalWorks	Monthly Service 02.2021	9,719.70
5322	3/1/2021		eClinicalWorks	Monthly Service 03.2021	9,875.91
5322	4/16/2021		eClinicalWorks	add Exostar token	192.50
5322	4/16/2021		eClinicalWorks	add FTE	196.89
5322	4/16/2021		eClinicalWorks	Monthly Service 04.2021	10,173.26
5750	1/31/2021		LABCORP OF AMERICA	LabCorp 01.2021	43,565.02
5750	2/28/2021		LABCORP OF AMERICA	LabCorp 02.2021	36,536.49
5750	3/30/2021		LABCORP OF AMERICA	LabCorp 03.2021	52,942.87
5750	4/26/2021		LABCORP OF AMERICA	LabCorp 04.2021	47,451.39
5300	1/1/2021	IT Infastructure Equipment		Healthicity Expense	509.77
5300	2/1/2021			Healthicity Expense	509.77
5300	3/1/2021			Healthicity Expense	509.77
5300	4/1/2021			Healthicity Expense	509.77
					381,677.30

Backbilled Other

GL Code	Effective Date	GL Title	ID	Document Description	Debit
		MarCom Print Communications (inc Postage)	Indoor Media	INDOORMEDIA	400.00
5220	1/21/2021				
5220	1/22/2021		Indoor Media	INDOORMEDIA	400.00
5220	2/15/2021		Vista	VISTAPR*VistaPrint.com	688.81
5220	2/22/2021		Indoor Media	INDOORMEDIA	800.00
5220	3/22/2021		Indoor Media	INDOORMEDIA	400.00
5220	3/23/2021		Indoor Media	INDOORMEDIA	400.00
5220	4/21/2021		Amazon	AMZN MKTP US*281PL2U73	179.84
5220	4/21/2021		Indoor Media	INDOORMEDIA	400.00
5220	4/22/2021		Indoor Media	INDOORMEDIA	400.00
5310	1/31/2021		eFax Corporate	eFax 01.2021	662.53
5310	2/28/2021		eFax Corporate	eFax 02.2021	261.78
5310	3/31/2021		eFax Corporate	eFax 03.2021	432.49
5310	4/30/2021		eFax Corporate	eFax 04.2021	4,337.00
5320	1/1/2021		Trizetto	Trizetto 01.2021 - Equip. Maint.	1,365.99
5320	2/1/2021		Trizetto	Trizetto 02.2021 - Equip. Maint.	3,389.71
5320	3/1/2021		Trizetto	TRIZETTO 03.2021 - Equip. Maint.	2,998.75
5320	4/1/2021		Trizetto	Trizetto 04.2021 - Equip Maint.	3,266.16
5330	1/1/2021	Insurance - Agency		General Liability Expense	1,609.84
5330	1/1/2021			D&O Insurance	1,191.75
5330	2/1/2021			D&O Insurance	1,191.75
5330	2/1/2021			GL Insurance Expense Release	1,942.85
5330	3/1/2021			D&O Insurance	1,191.75
5330	3/1/2021			GL Insurance Expense Release	1,957.80
5330	4/1/2021			D&O Insurance	1,191.75
5330	4/1/2021			GL Insurance Expense Release	1,957.80
5411	1/4/2021	Recruiting	Indeed	INDEED	494.32
5411	1/7/2021		Indeed	INDEED	531.21
5411	1/12/2021		Indeed	INDEED	106.60
5411	1/14/2021		Indeed	INDEED	500.33
5411	1/19/2021		Indeed	INDEED	500.09
5411	1/25/2021		Indeed	INDEED	500.28
5411	2/2/2021		Indeed	INDEED	468.09
5411	2/5/2021		Indeed	INDEED	503.49
5411	2/10/2021		Indeed	INDEED	507.26
5411	2/12/2021		Indeed	INDEED	106.60
5411	2/16/2021		Indeed	INDEED	500.67
5411	2/22/2021		Indeed	INDEED	504.95
5411	3/2/2021		Indeed	INDEED	483.63
5411	3/8/2021		Indeed	INDEED	503.38

5411	3/11/2021	Indeed	INDEED	500.76
5411	3/12/2021	Indeed	INDEED	106.60
5411	3/19/2021	Indeed	INDEED	500.41
5411	3/26/2021	Indeed	INDEED	522.67
5411	4/2/2021	Indeed	INDEED-1	472.78
5411	4/7/2021	Indeed	INDEED-2	509.83
5411	4/12/2021	Indeed	INDEED-3	106.60
5411	4/13/2021	Indeed	INDEED-4	504.10
5411	4/19/2021	Indeed	INDEED-5	505.38
5411	4/23/2021	Indeed	INDEED-6	500.08
5450	1/4/2021	IT Communication	AT&T MOBILITY AT&T*BILL PAYMENT	236.08
5450	2/2/2021		AT&T MOBILITY AT&T*BILL PAYMENT	230.84
5450	3/3/2021		AT&T MOBILITY AT&T*BILL PAYMENT	229.63
5450	4/2/2021		AT&T MOBILITY AT&T*BILL PAYMENT-1	257.69
5450	3/1/2021	Fire Star Alarm	Alarm Monitoring - DMC04	34.80
5450	3/22/2021	Fire Star Alarm	battery replacement DMC04	74.69
5450	1/1/2021	GURKIN SECURITY	1st QTR 2021 Services	16.20
5450	4/1/2021	GURKIN SECURITY	2nd Qtr 2021 Services	16.20
5450	1/31/2021	LanguageLink	Language Link COMM 01.2021	80.19
5450	2/28/2021	LanguageLink	Language Link COMM 02.2021	13.86
5450	3/31/2021	LanguageLink	Language Link COMM 03.2021	23.76
5450	4/30/2021	LanguageLink	Language Link COMM 04.2021	3,132.88
5450	3/1/2021	Paxica Security Grou	Quarterly Monitoring CCMC	0.90
5450	3/1/2021	Paxica Security Grou	Quarterly Monitoring DMC04	18.89
5450	1/1/2021	PLANO POLICE DEPT	PLANO POLICE ALARMS	1.50
5450	1/5/2021	Star2Star Communicat	S2S COMM 01.2021 CCMC	4.10
5450	1/5/2021	Star2Star Communicat	S2S COMM 01.2021 DHQ	2,159.84
5450	1/5/2021	Star2Star Communicat	S2S COMM 01.2021 DMC04	98.52
5450	1/5/2021	Star2Star Communicat	S2S COMM 01.2021 DMC08	133.77
5450	1/5/2021	Star2Star Communicat	S2S COMM 01.2021 L288	217.09
5450	1/5/2021	Star2Star Communicat	S2S COMM 01.2021 WCMC	367.93
5450	2/5/2021	Star2Star Communicat	S2S COMM 02.2021 CCMC	4.48
5450	2/5/2021	Star2Star Communicat	S2S COMM 02.2021 DHQ	2,143.65
5450	2/5/2021	Star2Star Communicat	S2S COMM 02.2021 L288	225.65
5450	2/5/2021	Star2Star Communicat	S2S COMM 02.2021 WCMC	379.74
5450	3/5/2021	Star2Star Communicat	S2S COMM 03.2021 CCMC	4.17
5450	3/5/2021	Star2Star Communicat	S2S COMM 03.2021 DHQ	3,842.28
5450	3/5/2021	Star2Star Communicat	S2S COMM 03.2021 L288	211.44

5450	3/5/2021	Star2Star	S2S COMM 03.2021 WCMC	351.33
5450	4/5/2021	Star2Star Communicat	S2S COMM 04.2021 CCMC	4.59
5450	4/5/2021	Star2Star Communicat	S2S COMM 04.2021 DHQ	2,125.77
5450	4/5/2021	Star2Star Communicat	S2S COMM 04.2021 DSC	419.02
5450	4/5/2021	Star2Star Communicat	S2S COMM 04.2021 L288	145.49
5450	4/5/2021	Star2Star Communicat	S2S COMM 04.2021 WCMC	356.05
5450	1/1/2021	Wagner Comm	Wagner COMM 01.2021	51.94
5451	1/14/2021	IT Internet Charter Comm	Charter COMM L288 1/14-2/13	75.58
5451	1/23/2021	Charter Comm	Charter COMM DHQ 12/28-1/27 & DSC 12/24-1/23	134.97
5451	2/14/2021	Charter Comm	Charter COMM L288 2/14-2/13	75.58
5451	2/23/2021	Charter Comm	Charter COMM DHQ 1/28-2/27 & DSC 1/24-2/23	134.97
5451	3/14/2021	Charter Comm	CHARTER COMM L288 3/14-4/13	75.58
5451	3/23/2021	Charter Comm	CHARTER COMM DHQ 2/28-3/27 & DSC 2/24-3/23	134.97
5451	4/14/2021	Charter Comm	Charter COMM L288 4/14-5/13	45.89
5451	4/17/2021	Charter Comm	Charter COMM DMC 4/17-5/16	43.49
5451	4/19/2021	Charter Comm	Charter COMM DMC 4/19-5/18	34.49
5451	4/23/2021	Charter Comm	Charter COMM DHQ 3/28-4/27 & DSC 3/24-4/23	289.95
5451	1/1/2021	Frontier Communicati	Frontier COMM DHQ 01.2021	160.98
5451	1/2/2021	Frontier Communicati	Frontier COMM CCMC 01.2021	2.73
5451	1/2/2021	Frontier Communicati	Frontier COMM WCMC 01.2021	181.79
5451	2/1/2021	Frontier Communicati	Frontier COMM DHQ 02.2021	160.98
5451	2/2/2021	Frontier Communicati	Frontier COMM CCMC 02.2021	2.73
5451	2/2/2021	Frontier Communicati	Frontier COMM WCMC 02.2021	181.79
5451	3/1/2021	Frontier Communicati	FRONTIER COMM DHQ 03.2021	160.98
5451	3/2/2021	Frontier Communicati	FRONTIER COMM CCMC 03.2021	2.17
5451	3/2/2021	Frontier Communicati	FRONTIER COMM WCMC 03.2021	144.66
5451	4/1/2021	Frontier Communicati	Frontier COMM DHQ 04.2021	160.98
5451	4/2/2021	Frontier Communicati	Frontier COMM CCMC 04.2021	2.56
5451	4/2/2021	Frontier Communicati	Frontier COMM DSC 04.2021	170.98
5451	4/2/2021	Frontier Communicati	Frontier COMM WCMC 04.2021	170.98
5451	1/2/2021	TIME WARNER	Time Warner COMM CCMC 1/2-2/1	4.02
5451	1/19/2021	TIME WARNER	Time Warner COMM WCMC 1/19-2/18	124.97
5451	2/2/2021	TIME WARNER	Time Warner COMM CCMC 2/2-3/1	6.42
5451	2/19/2021	TIME WARNER	Time Warner COMM WCMC 2/19-3/18	124.97

5451	3/2/2021		TIME WARNER	TIME WARNER COMM CCMC 3/2-4/1	4.02
5451	3/19/2021		TIME WARNER	TIME WARNER COMM WCMC 3/19-4/18	124.97
5451	4/2/2021		TIME WARNER	Time Warner COMM CCMC 4/2-5/1	6.42
5451	4/19/2021		TIME WARNER	Time Warner COMM WCMC 4/19-5/18	124.97
5511	1/4/2021	Agency Rent	Budget Self Storage	BUDGET SELF STORAGE-DE	23.63
5511	2/3/2021		Budget Self Storage	BUDGET SELF STORAGE-DE	23.63
5511	3/3/2021		Budget Self Storage	BUDGET SELF STORAGE-DE	23.63
5511	4/5/2021		Budget Self Storage	BUDGET SELF STORAGE-DE-1	23.63
5511	4/5/2021		Budget Self Storage	BUDGET SELF STORAGE-DE-3	196.00
5511	1/1/2021		KONG'S INVESTMENT CO	01.2021 CCMC Monthly Rent	71.25
5511	2/1/2021		KONG'S INVESTMENT CO	02.2021 CCMC Monthly Rent	71.25
5511	3/1/2021		KONG'S INVESTMENT CO	03.2021 CCMC Monthly Rent	71.25
5511	4/1/2021		KONG'S INVESTMENT CO	04.2021 CCMC Monthly Rent	71.25
5511	1/1/2021		SCOTT BROWN PROP.	01.2021 DHQ Monthly Rent - 4401 I-35 Suite 312 Dtn Tx 76207	5,929.25
5511	2/1/2021		SCOTT BROWN PROP.	02/2021 DHQ Monthly Rent - 4401 I-35 Suite 312 Dtn Tx 76207	5,929.25
5511	3/1/2021		SCOTT BROWN PROP.	03/2021 DHQ Monthly Rent - 4401 I-35 Suite 312 Dtn Tx 76207	5,929.25
5511	4/1/2021		SCOTT BROWN PROP.	04/2021 DHQ Monthly Rent - 4401 I-35 Suite 312 Dtn Tx 76207	5,929.25
5511	1/4/2021		Serve Denton	SERVE DENTON	3,882.48
5511	2/2/2021		Serve Denton	SERVE DENTON	3,882.48
5511	3/2/2021		Serve Denton	SERVE DENTON	3,882.48
5511	4/2/2021		Serve Denton	SERVE DENTON	2,357.22
5511	1/4/2021		Storage Depot	STORAGE DEPOT - DENTON	50.40
5511	2/2/2021		Storage Depot	STORAGE DEPOT - DENTON	56.89
5511	3/2/2021		Storage Depot	STORAGE DEPOT - DENTON	50.40
5511	4/2/2021		Storage Depot	STORAGE DEPOT - DENTON	50.40
5511	1/1/2021			01.2021 Monthly Rent Release - WCMC	4,800.00
5511	2/1/2021			Feb2021 Rent Release = Wylie CYPP	4,800.00
5511	3/1/2021			Mar2021 Rent Release - Wylie CYPP	4,800.00
5511	4/1/2021			April 2021 Rent Release - Wylie CYPP	4,800.00
5513	2/11/2021	Agency Repairs & Maintenance	AAA DENTON FIRE & SA	Fire Extinguisher Maintenance	130.50
5513	3/31/2021		ADAMS EXTERMINATING	Pest Quarterly Service DMC08	39.00
5513	2/28/2021		All Area Mechanical	Maintenance & Repair	44.32
5513	3/9/2021		All Area Mechanical	Maintenance & Repair	59.01
5513	4/1/2021		All Area Mechanical	maint. & repair - HVAC contract	864.00

5513	4/17/2021	All Area Mechanical	maint. & repair	92.30
5513	3/26/2021	ALL-SAFE	Quarterly Pest Control Service - CCMC	0.98
5513	4/9/2021	Amanda Martin	Painting costs (maintenance)	400.00
5513	1/10/2021	Anago Cleaning System	Cleaning Service	1,078.18
5513	2/10/2021	Anago Cleaning System	Cleaning Service	1,078.18
5513	3/10/2021	Anago Cleaning System	cleaning service	1,078.18
5513	4/10/2021	Anago Cleaning System	cleaning service CCMC	3.08
5513	4/10/2021	Anago Cleaning System	cleaning service DMC	331.50
5513	4/10/2021	Anago Cleaning System	cleaning service L288	190.40
5513	4/10/2021	Anago Cleaning System	cleaning service WCMC	430.00
5513	2/12/2021	Dallas Corporate Flo	Maintenance & Repair - floor replacement (DSC)	4,488.15
5513	1/6/2021	Dallas Plumbing	Maintenance & Repair - CCMC	81.26
5513	1/11/2021	Duryea Moving	Moving services	319.00
5513	1/18/2021	Lonestar Const.	Repair and Replace ceiling for DMC	960.00
5513	2/28/2021	Lonestar Const.	Cut, remove and repour concrete by front door	570.00
5513	4/16/2021	LOWE 'S	LOWES #01059*	1.29
5513	1/22/2021	SHERWIN WILLIAMS	SHERWIN WILLIAMS 70710	179.06
5513	2/1/2021	SHERWIN WILLIAMS	SHERWIN WILLIAMS 70710	141.56
5513	1/1/2021		Edge Biomedical	290.89
5513	2/1/2021		Edge Biomedical	290.89
5513	3/1/2021		Edge Biomedical	290.89
5513	4/1/2021		Edge Biomedical	290.89

135,572.74

Federal Object Class Categories

Object Class Category	(\$) Year 1 Federal	(\$) Year 1 Non-Federal	(\$) Year 2 Federal	(\$) Year 2 Non-Federal	(\$) Total Year 1	(\$) Total Year 2
a. Personnel	630512.00	0.00	745149.00	0.00	\$630,512.00	\$745,149.00
b. Fringe Benefits	118853.00	0.00	145602.00	0.00	\$118,853.00	\$145,602.00
c. Travel	1820.00	0.00	8120.00	0.00	\$1,820.00	\$8,120.00
d. Equipment	6078.00	0.00	0.00	0.00	\$6,078.00	\$0.00
e. Supplies	411023.00	0.00	245248.00	0.00	\$411,023.00	\$245,248.00
f. Contractual	475082.00	0.00	94540.00	0.00	\$475,082.00	\$94,540.00
g. Construction	105000.00	0.00	0.00	0.00	\$105,000.00	\$0.00
h. Other	292623.00	0.00	168350.00	0.00	\$292,623.00	\$168,350.00
i. Total Direct Charges (sum of a through h)	2040991	0	1407009	0	\$2,040,991.00	\$1,407,009.00
j. Indirect Charges	0	0	0	0	\$0.00	\$0.00
k. Total Budget Specified in Section A - Budget Summary (sum of i through j)	2040991	0	1407009	0	\$2,040,991.00	\$1,407,009.00

Project Overview: H8FCS40947

1. Work Plan

COVID-19 Vaccination Capacity

- **Vaccine Administration:** Administer vaccinations at permanent and temporary health center service sites or other locations, including through mobile, drive-up, walk-up, or community-based vaccination events. Such vaccine administration activities should address the unique and evolving access barriers experienced by underserved and vulnerable populations and be carried out in alignment with CDC, state/jurisdiction, and other public health guidance.
- **Outreach:** Perform vaccine-related outreach and education, including promoting health center vaccination efforts and supporting COVID-19 vaccine acceptance. Such activities should include a focus on providing services to racial and ethnic minorities, homeless individuals and families, agricultural workers, residents of public housing, individuals with limited English proficiency, and other underserved and vulnerable populations at greatest risk for COVID-19 exposure or severe disease.
- **Supplies and Equipment:** Purchase COVID-19 vaccination supplies (e.g., PPE, hygiene and other disposable supplies), storage (including back-up systems), sterilization equipment, and moveable physical barriers, along with temporary signage to promote vaccination locations.

COVID-19 Response and Treatment Capacity

- **Personnel:** Hire and contract additional clinical staff and other personnel (e.g., community health workers, behavioral health specialists, billing staff, case managers) who will support health center outreach, testing, delivery of test results, COVID-19 treatment, and related behavioral health services.
- **Treatment:** Provide health center-based treatment for patients with COVID-19, as appropriate (including monoclonal antibody therapy).
- **Supplies and Equipment:** Purchase equipment and supplies to diagnose and treat COVID-19 (e.g., COVID-19 tests, radiological equipment, health information technologies, PPE, hygiene and other disposable supplies), along with temporary signage to promote testing and treatment locations.
- **Outreach:** Conduct outreach and education to patients who may be at risk of COVID-19 exposure or severe illness, have need for extra precautions, or who have barriers to accessing testing or treatment, including enrollment in affordable health insurance coverage options.

Maintaining and Increasing Capacity

- **Personnel:** Ensure the availability of comprehensive primary and behavioral health care, through in-person and virtual visits, to meet the needs of underserved and vulnerable populations in the community by supporting salaries and benefits for health center personnel providing in-scope services.
- **Immunization (other than COVID-19 vaccination):** Establish and/or expand adult and childhood immunization/vaccination programs, including aligning workflows with current public health guidance, maximizing use of patient registries, enhancing clinical decision

- supports and use of data from electronic health records (EHR), leveraging community partners, increasing staff, purchasing vaccines and supplies, storage, and outreach.
- Telehealth: Expand and enhance health center telehealth capacity to perform triage, deliver care, support care transitions, and support follow-up via telehealth, including the use of home monitoring devices and video to provide care to patients in their homes, community settings, and other locations. Support access to virtual care for patients with unstable or no housing or other barriers to accessing care.
 - Training and Education: Train personnel on digital platforms, devices, and workflows supporting the use of telehealth, and provide patient education that will increase digital literacy and competence using digital devices and applications that promote health.
 - Equipment and Supplies: Purchase equipment and supplies to support the provision of comprehensive primary care (e.g., clinical and diagnostic equipment; telehealth equipment; information technology systems to enhance data collection, exchange, reporting, and billing; equipment and supplies for use by remotely located staff to ensure continuity of health center services).
 - Other (350 characters) – Back billed salaries, benefits, & incentives for staff providing healthcare. Contractual services supporting primary care through IT vulnerability testing, billing, EHR costs, labs, & training. Supplies, outreach, communication, recruiting, insurance, security, occupancy, maintenance, & cleaning/sanitation to support safe primary care services.

Recovery and Stabilization

- Pent Up Demand: Bring sites, services, and staff to an operational capacity sufficient to meet pent up demand for services, including addressing the needs of patients and other vulnerable populations who have been without care and whose conditions and needs may have been exacerbated by the social and financial impacts of COVID-19.
- Outreach: Conduct outreach to patients and residents of the service area who have been out of care or who may be in need of a medical home.
- Patient Engagement: Enhance patient activation and engagement, including through virtual and in-person outreach and education, self-management programs and techniques, partnerships with families and caregivers, patient-centered care coordination, and other evidence-based interventions to support self-care.
- Workforce Well-being: Assess needs and develop interventions to support staff well-being and address needs related to burnout and recovery, productivity, stress, professional fulfillment, diversity, and inclusion.
- Training: Adapt and deliver staff training to meet new and returning patients' needs, including training to assess and address social risk and other barriers to accessing and engaging in care provided by the health center.
- Other - Back billed salaries, benefits, & incentives for staff providing healthcare. Contractual services supporting primary care through IT vulnerability testing, billing, EHR costs, labs, & training. Supplies, outreach, communication, recruiting, insurance, security, occupancy, maintenance, & cleaning/sanitation to support safe primary care services.

Infrastructure: Minor Alteration/Renovation (A/R), Mobile Units, and Vehicles

- General Physical Infrastructure Improvements: Enhance the health center physical infrastructure to ensure continued access to comprehensive primary care services (e.g., roof repairs, ADA-compliant entrances, new foot traffic pathways to facilitate physical access to health center services).
2. **Review your current approved Form 5A: Services Provided. Will a Scope Adjustment or Change in Scope request be necessary to ensure that all proposed services are accurate on your Form 5A? No**
 3. **Review your current Form 5B: Service Sites. Will a Scope Adjustment or Change in Scope request be necessary to ensure that all proposed sites are accurate on your Form 5B? Yes**
 4. **Review your current Form 5C: Other Activities/Locations. Will a Scope Adjustment or Change in Scope request be necessary to ensure that all proposed activities/locations are on your Form 5C? No**

Equipment List Year 1

▼ H8FCS40947: Health Services of North Texas , Inc.

Program Name : American Rescue Plan Act Funding for Health Centers


Activity Code : H8F

Total Awarded Amount : \$3,448,000.00

▼ Resources

Current Document

[Program Specific Read-Only Forms](#) | [Technical Assistance Webpage](#)

 An autosaved version of this page is in progress and not saved. Use the Save button at the bottom of the page to keep these changes or the Discard link to revert these changes.




Action: [Discard Autosave](#)

Status: ✔ Complete

Year 1

- For each budget year, the total equipment costs entered here must equal those requested in the federal equipment lines of the Federal Object Class Category Form and Budget Narrative.
- Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-federal entity for financial statement purposes, or \$5,000.
- Equipment that does not meet the \$5,000 threshold should be considered supplies and should not be entered on this form.

List Of Equipment

Type	Description	Unit Price	Quantity	Total	Action
Clinical 	Fetal Non-Stress Test with Cart	607€	1	\$6,078.00	 Delete
				\$6,078.00	

[+ Add Row](#)

[Go to Previous Page](#)

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Equipment List Year 2

H8FCS40947: Health Services of North Texas , Inc.

Program Name : American Rescue Plan Act Funding for Health Centers

Activity Code : H8F

Total Awarded Amount : \$3,448,000.00

Resources

Current Document

[Program Specific Read-Only Forms](#)

[Technical Assistance Webpage](#)

Status: ✔ Complete

Year 2

■ If you are proposing equipment, enter Equipment costs in the Federal column, Equipment line (d) of the Federal Object Class Category form to enable completion of the Equipment List. This form is not applicable to you as you have not requested federal funds in the year 2 Equipment category in the Federal Object Class Categories form of this application.

■ For each budget year, the total equipment costs entered here must equal those requested in the federal equipment lines of the Federal Object Class Category Form and Budget Narrative.
Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-federal entity for financial statement purposes, or \$5,000.
Equipment that does not meet the \$5,000 threshold should be considered supplies and should not be entered on this form.

List Of Equipment

Type	Description	Unit Price	Quantity	Total	Action
			0	\$0.00	

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Minor A/R Project Details

Site Information

Name of Service Site: Collin County Medical Center (CCMC)

Address: 5501 Independence Pkwy, Ste. 110, Plano, TX 75023

Site Control and Federal Interest

1a. Identify current status of property site (If 'Leased', please answer Question 1b): Leased

1b. If Leased, please certify the following: Certified

- The existing lease will provide the health center reasonable control of the project site;
- The existing lease is consistent with the proposed scope of project;
- We understand and accept the terms and conditions regarding Federal Interest in the property.

Cultural Resource Assessment and Historic Preservation Considerations

2a. Was the project facility constructed prior to 1975? No

2b. Is the project facility 50 years or older? No

2c. Does any element of the overall work at the project site include: No

- Any renovation/modifications to the exterior of the facility (for example: roof, HVAC, windows, siding, signage, exterior painting, generators, etc.) or
- Ground disturbance activity (for example: expansion of building footprint, parking lot, sidewalks, utilities, etc.)?

2d. Does the project involve renovation to a facility that is, or near a facility that is, architecturally, historically, or culturally significant? No

2e. Is the site located on or near Native American, Alaskan Native, Native Hawaiian, or equivalent culturally significant lands? No



Minor Alteration and Renovation Budget Justification

Service site address: 5501 Independence Pkwy, Ste. 110, Plano, TX 75023

Total minor A/R funding request: \$105,000

Total project cost: \$105,000

Health Services of North Texas (HSNT) is proposing minor alteration and renovation of a new prospective service delivery site that will expand services to additional people in need (Collin County Medical Center). We have submitted a Change in Scope (CIS) to add this site and will relocate operations from a current smaller site once the CIS is approved.

HSNT is proposing the following alterations/renovations:

- 16,676 sq. ft. of wall painting
- 2,408 sq. ft. of new medical grade flooring to replace aging carpet and support safety and sustainability at this new location.
- Counter alterations to support ADA compliance
 - Lower 43” of counter space to 31” height (total length is 86”)
 - Lengthen separate counter space by 28” (total will then be 54”) and lower 27” of this counter to 31” height
- Updated network and electrical wiring to support connectivity for Electronic Health Record documentatation, telehealth, and more.
 - 4 wi-fi access points
 - 39 duplex CAT6 network/phone drops

These renovations will support sustainability at the new site and enhance the site’s physical infrastructure to increase HSNT’s capacity to serve additional patients in need. HSNT expects renovations to begin with 60 days of budget approval, after all required bids are received. We estimate that the project will be complete within 30 days after the work begins.

	Allowable Costs	Unallowable Costs
Minor A/R (Construction)	\$105,000 total. This renovation cost is derived from the following cost breakdown: <ul style="list-style-type: none"> • \$10,000 – painting • \$20,000 – flooring and installation • \$5,000 – counter alterations • \$70,000 – updated wiring 	n/a
Total	\$105,000	
Total requested for minor A/R	\$105,000	



<p style="text-align: center;">DEPARTMENT OF HEALTH AND HUMAN SERVICES</p> <p style="text-align: center;">HEALTH RESOURCES AND SERVICES ADMINISTRATION</p> <p style="text-align: center;">ENVIRONMENTAL INFORMATION AND DOCUMENTATION (EID)</p>	FOR HRSA USE ONLY		
	Award Recipient Name		
	Award Number		Application Tracking #
	Project #		Project Type
	Project Title		
<p>This Environmental Information and Documentation (EID) checklist consists of information that the agency is required to obtain to comply with the National Environmental Policy Act of 1969 (NEPA). NEPA establishes the Federal government's national policy for protection of the environment. HRSA has developed the EID for applicants of funding that would potentially impact the environment and to ensure that their decision-making processes are consistent with NEPA. Applicants must provide information and requested on the EID checklist so that HRSA may ensure compliance with NEPA.</p> <p>HRSA will provide applicants with the results of the agency's environmental review through the NGA. If HRSA determines that additional environmental compliance is necessary, HRSA will notify applicable Award Recipients of specific requirements.</p> <p>Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The OMB control number for this project is 0915-0324. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-29, Rockville, Maryland, 20857.</p> <p>Award Recipient Authorized Official: Doreen Rue, Chief Executive Officer Phone: 940-293-6001 Email: funding@healthntx.org</p> <p>Award Recipient EID Preparer: Jamie Taylor, Grants Manager Phone: 940-293-6018 Email: jtaylor2@healthntx.org Address: 4401 N. I-35, Ste. 312, Denton, TX 76207</p> <p>Project Location/Address (Please note - separate EID forms are required for each project location) Please provide the address where the action will occur (e.g. where equipment will be located or where renovations/new construction will occur) 5501 Independence Pkwy, Ste. 110, Plano, TX 75023</p>			

Scope of work

Describe all actions that are part of the proposed action (Please include a description of the entire project, including elements that will use non-federal funding)

Minor alterations and renovations will include paint, new flooring, counter height adjustments for Americans with Disabilities Act compliance, and updated network wiring.

Site Description - required for all building renovations (e.g. interior renovations, new windows, roofs, etc.) and new construction (including building additions, temporary facilities, and trailers)

Site acreage: 3 acres

Land use on site: Commercial, medical, office

Land use surrounding site (current use, zoning and proposed changes if applicable): Commercial and multi-family

Buildings currently on site (stories, height, age, total sq. footage): 3 stories, approx. 40 ft. tall, 35 years old, 57,478 SF total

Vegetation on site (e.g. grasses, shrub, heavily wooded, none because it's paved, etc.): Grass, decorative shrubs

Streams/wetlands on site or adjacent to the site: N/A

Proposed ground disturbance (sq. footage): N/A

A. Scope of Proposed Action

This set of questions is concerned with size and scope of the proposed action

A.1. Will the action involve the purchase, construction or lease of new facilities (including temporary facilities and trailers), or substantially increase the capacity of an existing health care facility?

Yes No

If yes explain:

The proposed action includes the lease of a new facility, which will increase HSNT's capacity to serve additional low-income and uninsured populations.

A.2. Is the action significantly greater in scope than other development taking place in the area, or will it have significant unusual characteristics?

Yes No

If yes explain:

B. Potential for Public Controversy

This set of questions is concerned with whether or not the proposed action has or could generate public controversy.

B.1. Are there any public concerns or controversy with respect to effects of the action on environmental or cultural resources based on reasonable and substantial issues?

Yes No

B.2. Have comments on the action's impacts to environmental or cultural resources been received from the public or from local, State, or Federal agencies?

Yes No

If yes explain:

C. Degradation of Environmental Conditions

This set of questions concerns the potential for actions to degrade, even slightly, already existing poor environmental conditions.

C.1. Will the action increase identifiable ambient air pollution levels from a new emission source or from existing sources (e.g., lab fume hoods, HVAC systems, etc.)?

Yes No

If yes explain:

C.2. Will the action increase identifiable ambient air pollution levels through a major increase in the number of or use of automobiles, trucks (e.g., will there be a large number of new employees or patients traveling to the site, or a large number of deliveries to the site)?

Yes No

C.3. Will the action exceed city or State health or Federal air quality standards with exhausts from fume hoods

Yes No

If yes explain:

C.4. Will the action cause or increase soil erosion?

Yes No

If yes explain(For building additions and/or new construction, please list measures to be taken to control sedimentation and soil erosion):

C.5. Will the action discharge stormwater or pollutants into a stream, river, lake, etc.?

Yes No

If yes explain(For building additions and/or new construction, please note any stormwater management practices to be utilized):

C.6. Will the action overload existing waste treatment plants due to new loads (water volume, chemicals, toxicity, etc.)?

Yes No

If yes, please obtain and submit a connection permit or other approval from local sewer authority.

C.7. Will the action allow seepage of contaminants into the water table?

Yes No

If yes explain:

D. New or Unproven Technology

This set of questions is concerned with the deployment of new or unproven technology with the potential adverse effects or actions involving unique or unknown environmental risks

D.1. Will the action involve the purchase or use of new or unproven technology?

Yes No

If yes explain:

D.2. Will the action involve the purchase or use of technology for which the environmental impacts are unknown?

Yes No

If yes explain:

E. Presence of cultural, archaeological, historical or other protected resources

This set of questions is concerned with potential impacts to cultural resources including, but not limited to, buildings; archaeological sites; National Historic Landmarks; objects of significance to a Native American Tribe including graves, funerary objects, and traditional cultural properties; or other protected resources. HRSA will provide applicants with the results of the agency's historic preservation assessment through the Notice of Award (NOA). If HRSA determines that additional review by the State Historic Preservation Office (SHPO) is necessary, HRSA will instruct applicable Award Recipients on how to initiate consultation with the SHPO.

E.1. Will the action involve the purchase, construction, alteration, renovation, or lease of real property or portion of real property?

Yes No

If yes, when was the building constructed?

1986

E.2. Will the proposed action occur in or near a building listed on or eligible for listing on the National Register of Historic Places?

Yes No

E.3. Will the proposed action adversely affect properties listed on or eligible for listing on the National Register of Historic Places?

Yes No

If yes explain:

E.4. Will the action encroach upon, change views to, or change noise levels around any historical, architectural, or archeological cultural property?

Yes No

If yes explain:

F. Protected Species

This set of questions is concerned with protected plant and animals, including endangered or threatened species or their critical habitat.

F.1. Will the action be likely to adversely affect a plant or animal species listed on the Federal or applicable State list of endangered or threatened species or a specific critical habitat of an endangered or threatened species?

For assistance, contact the appropriate State Fish and Wildlife Agency or the regional office of the U.S. Fish and Wildlife Service.

Yes No

If yes explain:

F.2. Will the action adversely affect nesting Bald Eagles or migratory birds?

Yes No

If yes explain:

G. Special Status Areas and Critical Resources

These questions are concerned with actions with the potential to adversely affect special status areas or other critical resources such as wetlands, floodplains, coastal zones, wildlife refuge and wilderness areas, wild and scenic rivers, or sole or principal drinking water aquifers.

G.1. Are there wetlands or waters of the U.S. on or adjacent to the site?

Yes No

If yes, attach National Wetland Inventory Map, State or local map, or site specific map

G.2. Will the action include discharge to or the filling or dredging of wetlands?

Yes No

If yes explain:

G.3. Will the action require a section 404 (Clean Water Act) permit for actions in a wetland and/or section 10 (Rivers and Harbors Act) permit for actions in a stream or river? (Activities in or near a wetland or river may require a permit from the U.S. Army Corps of Engineers or U.S. Coast Guard. Includes: construction in or near any wet or dry waterway, stream crossings, intake structures, outfalls, etc.)

Yes No

If yes, provide status of permit process:

G.4. Is the project site located in either a 100-year or a 500-year floodplain?

Yes No

Regardless of whether the project is in a known floodplain, please attach a Flood Insurance Rate Map to this document. **Clearly mark** the location of the facility, and the NFIP Panel Number. FIRMettes can be generated electronically at no cost at the [FEMA Map Service Center](#) website. The FIRMette module is located in the upper left hand corner, while the tutorial is at the lower right hand corner of the webpage. (If Flood Insurance Rate Maps do not exist for the project site, a floodplain survey or consultation may be required.)

G.5. Will the proposed action include new construction or new site features (e.g., new buildings, additions, fences, parking lots, signage, etc.) in the floodplain?

Yes No

If yes explain:

G.6. Will the proposed action adversely impact flood flows in a floodplain or support development in a floodplain?

Yes No

If yes explain:

G.7. Will the proposed action include alter floodplain levels?

Yes No

If yes explain:

G.8. Will the proposed action discharge stormwater to the floodplain?

Yes No

If yes explain:

G.9. Is the project located in a state that borders the Atlantic Ocean, Pacific Ocean, Great Lake, Chesapeake Bay, or Gulf of Mexico?

Yes No N/A

If yes, is your project located in the state's coastal zone?

Yes No N/A

If yes, you may be asked in your NGA to contact your state coastal zone agency for a Section 307 Federal Coastal Zone Consistency Determination.

G.10. Will the action adversely affect a specifically designated Wildlife Refuge or Wilderness Area?
 For assistance contact your State Fish and Wildlife Agency or the regional office of the U.S. Fish and Wildlife Service, Bureau of Land Management, U.S. Forest Service, or National Park Service.

Yes No

If yes explain:

G.11. Will the action adversely affect a wild, scenic, or recreational river area or create conditions inconsistent with the character of the river? (A consideration for activities that are in or near any wild and scenic waterway including construction of stream/river crossings, intake structures, outfalls, etc.)

Yes No

If yes explain:

G.12. Will the action adversely impact an EPA designated sole source aquifer? (Designation of sole source aquifer puts restrictions and conditions on Federal expenditures, projects, and Awards.)

Yes No

If yes explain:

H. Pollutants

This set of questions is concerned with the presence of hazardous, toxic, or petroleum substances at levels which exceed Federal, state, or local regulations or standards requiring action or attention.

H.1. Will the action include renovation of an existing building or ground disturbing activities?

Yes No

If yes, has a Phase I Environmental Site Assessment been prepared for the property within the last 3 years?

Not required, as the proposed project is only minor alterations and renovations (painting, flooring, counters, updated network wiring)

H.2. Will the action take place on a site where past land uses may have led to contamination of soil, surface water, or groundwater?

Yes No

If yes explain:

I. Health and Safety

This set of questions is concerned with the potential for adverse impacts to human health and safety from the proposed action.

I.1. Will the action introduce major new sources of unshielded radiation?

Yes No

If yes explain:

I.2. Will the action require storage of waste pending technology for safe disposal?

Yes No

If yes explain:

I.3. Will the action adversely affect access to transportation, health, education, and/or welfare service?

Yes No

If yes explain:

I.4. Will the action result in changes in genetic engineering directed at the human population?

Yes No

If yes explain:

I.5. Will the action cause a new, large volume of production of non-recycled items?

Yes No

If yes explain:

I.6. Could the action disrupt existing health services' response in case of a disaster?

Yes No

If yes explain:

I.7. Will the action decrease accessibility to routine health services by altering point-of-service delivery?

Yes No

If yes explain:

I.8. Will the action increase by more than 5% the patient load of the area's routine care services?

Yes No

If yes explain:

J. Environmental Justice (Executive Order 12898)

This set of questions is concerned with consistency with Executive Order 12898, Environmental Justice in Minority Populations and Low-Income Populations

J.1. Are there low-income or minority populations in the vicinity of the proposed action?

Yes No

If yes explain:

Low-income and minority populations live near the proposed action. This minor renovation project will increase the accessibility of quality, affordable healthcare for these populations.

J.2. Will the action have disproportionately high and adverse human health or environmental effects on minority populations and low-income populations?

Yes No

If yes explain:

J.3. Will the proposed action displace or relocate low-income or minority populations?

Yes No

If yes explain:

K. Other Federal, State, Local, or Tribal Laws

This set of questions is concerned with consistency with other federal, state, local or tribal laws or requirement imposed for the protection of the environment.

K.1. Will the action convert significant agricultural lands to non-agricultural uses or impact Prime Farmland Soils or Solis of Statewide Importance?

Yes No

If yes explain:

K.2. Will the action change traditional use of the land parcel (by rezoning, etc.)?

Yes No

If yes, has zoning change been requested and/or received? Explain

If yes, complete the following:

Present Zoning: _____

Present Use of Site: _____

Proposed Zoning: _____

K.3. Will the action have significant adverse direct or indirect effects on park land, other public lands, or areas of recognized scenic or recreational value? (For example, consider how the activity will affect the view?)

Yes No

If yes explain:

K.4. Will the action block access to known mineral deposits? (Sand, gravel, clay, stone, or other common building materials are not considered mineral deposits.)

Yes No

If yes explain:

L. Cumulative Impacts

Potential for significant cumulative impact when the proposed action is combined with other past, present and reasonably foreseeable future actions, even though the impacts of the proposed action may not be significant by themselves.

L.1. Has the area around the project undergone major changes in land use/development?

Yes No

If yes explain:

L.2. Are major changes in land use/development planned for the area around the project?
 Yes No

If yes explain:

L.3. Will the action alter the use of other land by related development of stores, roads, or site changes?
 Yes No

If yes explain:

M. Mitigative Measures

Please discuss any mitigative measures undertaken to minimize any environmental impacts. For example, utilizing the EPA's Energy Performance Environmental Assessment Tool (EPEAT) or EnergyStar guidance as part of IT selection and purchase criteria, using EPA's Environmentally Preferred Purchasing Guidance for 'green' products and services, or incorporating Sustainable Design or Leadership in Energy and Environmental Design (LEED) standards into alteration/renovation or new construction project.

Describe mitigative measures that will be incorporated into the action:
 No mitigative measures are required because we are leasing and renovating a suite that was previously used by another medical practice.

ENVIRONMENTAL INFORMATION AND DOCUMENTATION CERTIFICATION

I certify that to the best of my knowledge and ability the information presented herein is true and correct (enter appropriate information in the shaded blanks):

Jamie Taylor	Grants Manager	940-293-6018 05/28/2021
Signature (Type Full Name):	Title or Position:	Phone Number: Date:
(Award Recipient or responsible, knowledgeable person who completed this document)		
Doreen Rue	Chief Executive Officer	940-293-6001 05/28/2021
Signature (Type Full Name):	Title or Position:	Phone Number: Date:

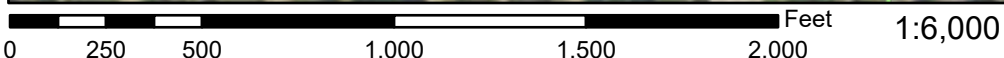
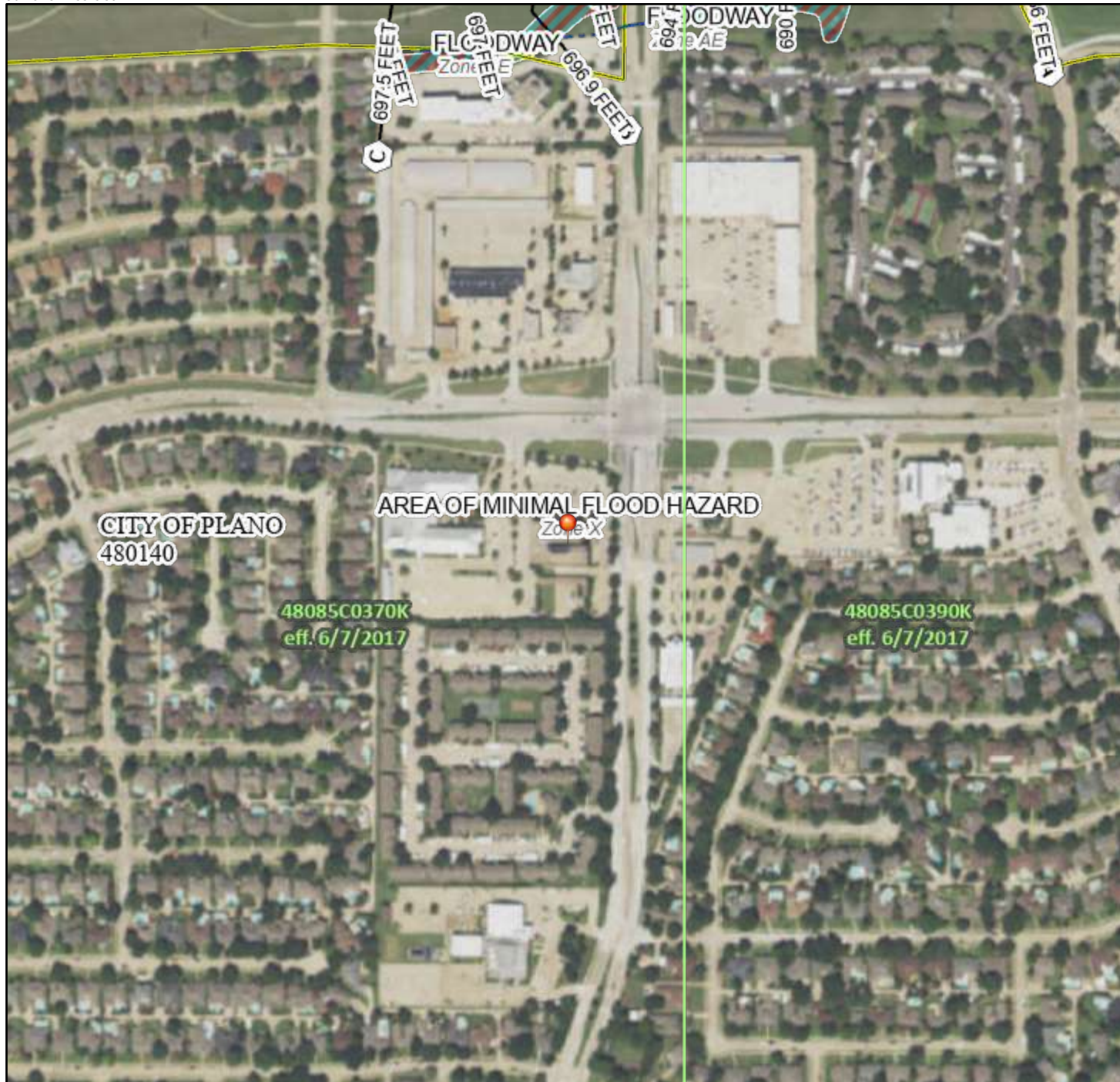
(Award Recipient Authorized Representative)

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The OMB control number for this project is 0915-0324. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857.

National Flood Hazard Layer FIRMMette



96°45'23"W 33°3'38"N



96°44'45"W 33°3'18"N

Basemap: USGS National Map: Orthoimagery: Data refreshed October, 2020

Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

- | | |
|------------------------------------|---|
| SPECIAL FLOOD HAZARD AREAS | Without Base Flood Elevation (BFE)
<i>Zone A, V, A99</i>
With BFE or Depth <i>Zone AE, AO, AH, VE, AR</i>
Regulatory Floodway |
| OTHER AREAS OF FLOOD HAZARD | 0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile <i>Zone X</i>
Future Conditions 1% Annual Chance Flood Hazard <i>Zone X</i>
Area with Reduced Flood Risk due to Levee. See Notes. <i>Zone X</i>
Area with Flood Risk due to Levee <i>Zone D</i> |
| OTHER AREAS | NO SCREEN Area of Minimal Flood Hazard <i>Zone X</i>
Effective LOMRs
Area of Undetermined Flood Hazard <i>Zone D</i> |
| GENERAL STRUCTURES | Channel, Culvert, or Storm Sewer
Levee, Dike, or Floodwall |
| OTHER FEATURES | Cross Sections with 1% Annual Chance Water Surface Elevation
Cross Sections with 1% Annual Chance Water Surface Elevation
Coastal Transect
Base Flood Elevation Line (BFE)
Limit of Study
Jurisdiction Boundary
Coastal Transect Baseline
Profile Baseline
Hydrographic Feature |
| MAP PANELS | Digital Data Available
No Digital Data Available
Unmapped |
-
- The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

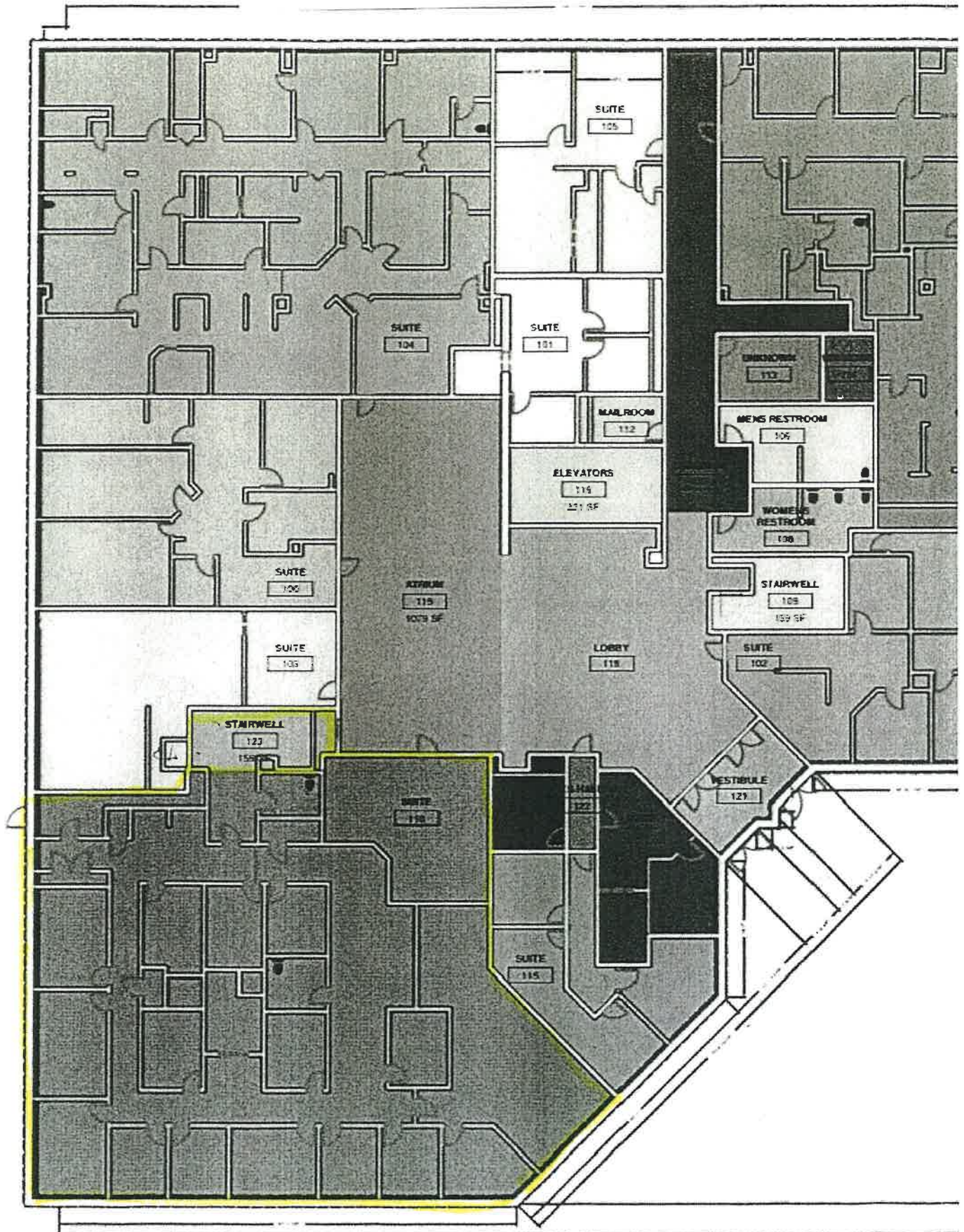
The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 5/25/2021 at 5:20 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.

Master 1st Floor Layout plan.

Suite 110 inside yellow boundaries.

Suite 110: Total Gross Sq Feet of Suite: 4,875



FLOORING

5501 Independence PKWY
Suite 110
Plano TX 75023

Total Gross Sf: 4,875

Scale: Approximately 7/8" = 10 ft.

Area of New Flooring in Yellow:
Approx. 2,408 sf.

= Spec. m-m
Pass Through



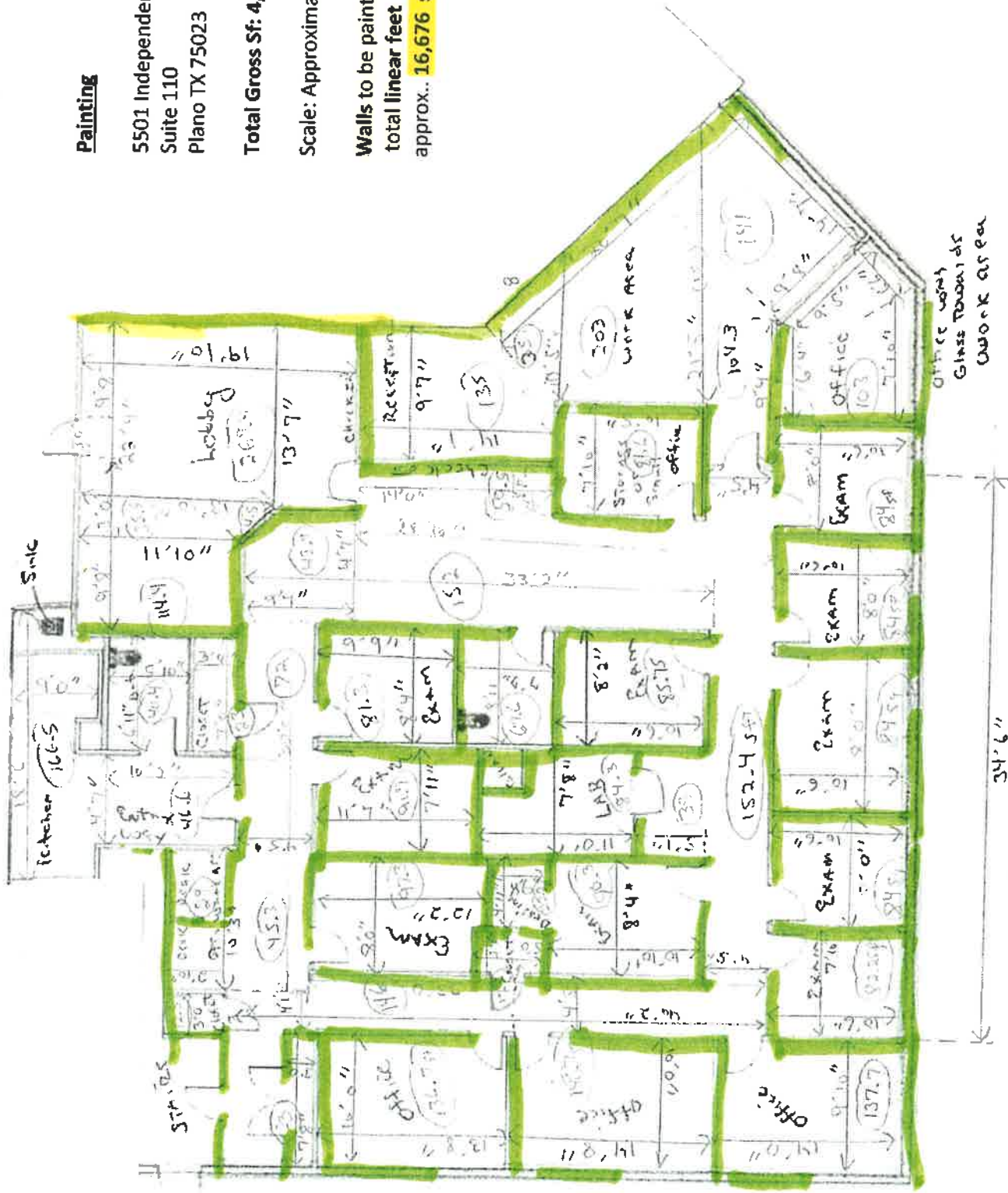
Painting

5501 Independence PKWY
Suite 110
Plano TX 75023

Total Gross Sf: 4,875

Scale: Approximately 7/8" = 10 ft.

Walls to be painted in **Green**
total linear feet 1516 x wall height 11 ft =
approx. 16,676 sf wall surface for painting.



*Spec. m. and
Glass Through

ADA Compliant Adjustment

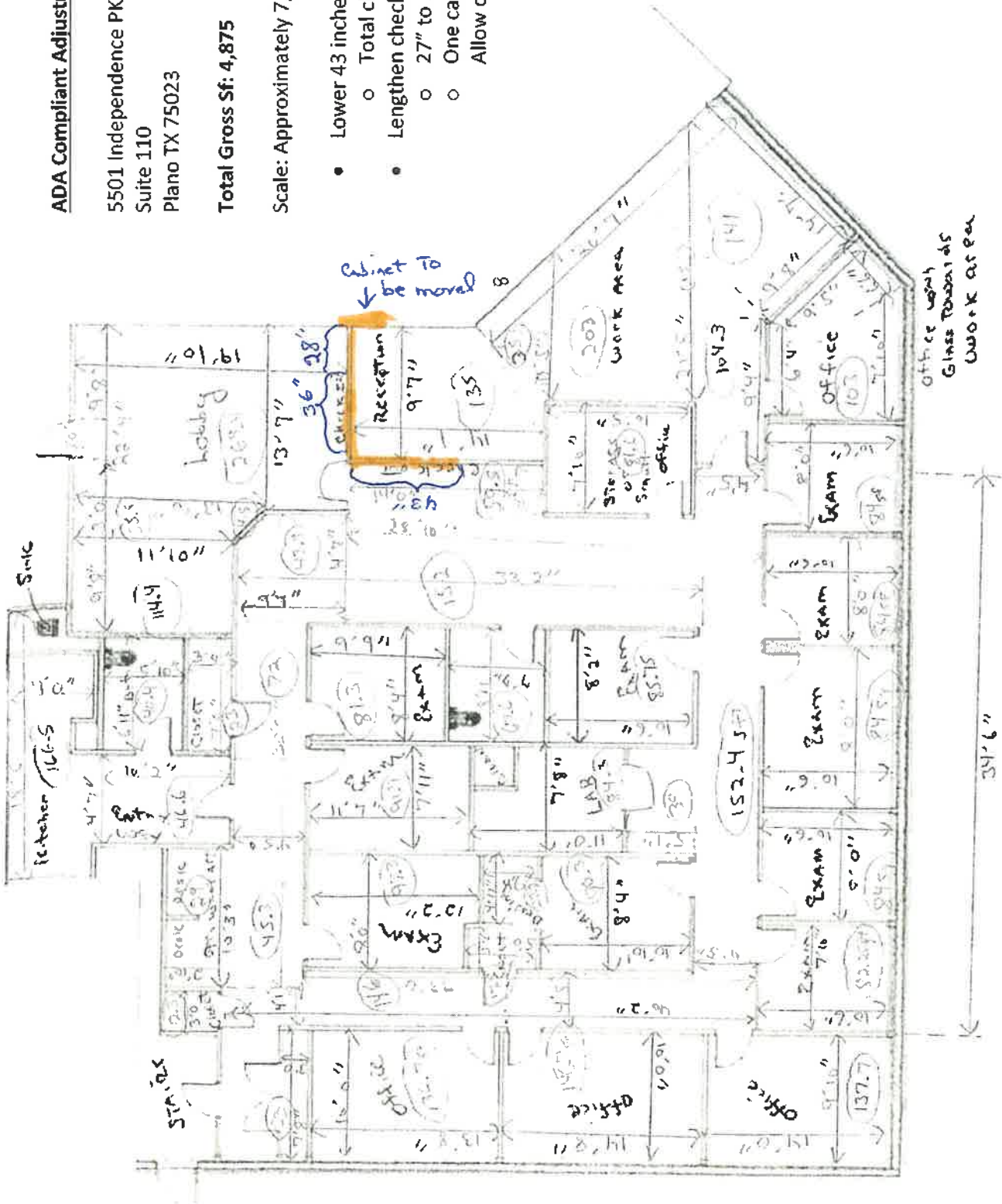
5501 Independence PKWY
Suite 110
Plano TX 75023

Total Gross Sf: 4,875

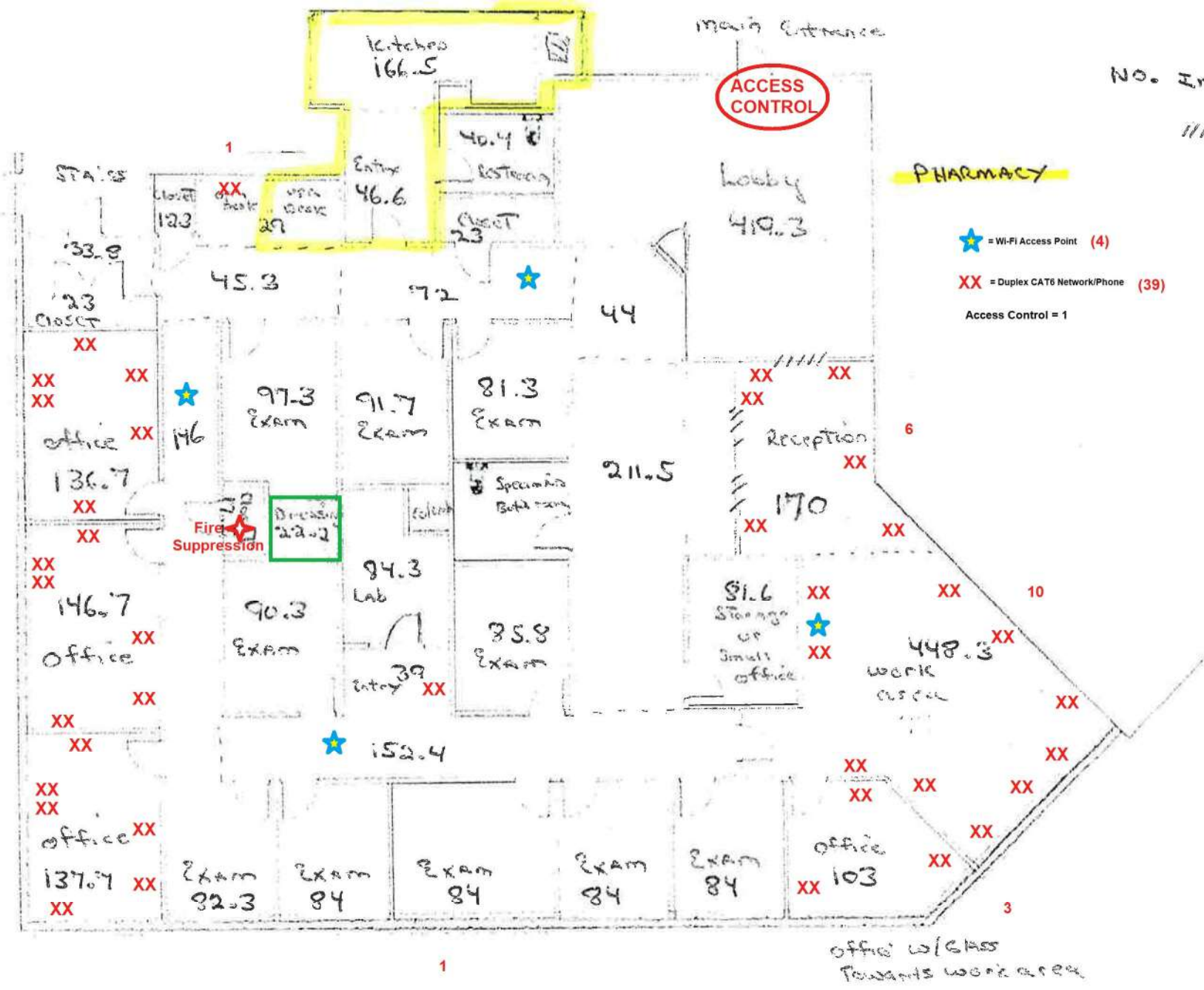
Scale: Approximately 7/8" = 10 ft.

- Lower 43 inches of check out counter to 31" height
 - Total checkout counter is 86 inches.
- Lengthen check in counter to by 28" to total of 54" height
 - 27" to be lowered to 31" height
 - One cabinet in reception needs to be moved Allow change.

Cabinet to be moved
↓



Specimens
Pass Through



NO. In black = NET Sq. Ft
 /// = counter check in/out
 = specimen pass-through

PHARMACY

- ★ = Wi-Fi Access Point (4)
- XX = Duplex CAT6 Network/Phone (39)
- Access Control = 1

Date: 05/27/2021

Health Services of North Texas
4401 N. Interstate 35
Suite 312
Denton TX 76207

Email: drue@healthntx.org



Letter of Intent for HSNT

Dear Doreen,

On behalf of Lystra Real Estate Holdings LLC, we would like to thank you in advance for your consideration of the following Letter of Intent at 5501 Independence Pkwy Suite #110, Plano TX 75023. Allow us to assist our client in their review process by addressing the conditions below.

1. **PREMISES:** Approximately 4875 SF (suite 110).
2. **COMMENCEMENT & RENT START DATE:** The Target Lease Commencement date is estimated to be August 1st,2021.
3. **LEASE TERM:** 5-year proposals.
4. **ANNUAL RENTAL RATE:**
 - Base Rent: Year One \$14/sf/NNN (NNN expense estimated at \$6.55/sf).
 - Year One Monthly Rent \$8348.43/Month
 - 3% annual increase.
5. **AGENCY:** Landlord shall pay the Worldwide Commercial, PLLC a leasing commission per a separate agreement. Commissions shall be due and payable upon document execution,
6. **POINTS AND TERMS**
 1. Health Services of North Texas (HSNT) can sublease to a contract Pharmacy
 2. Renovation for Pharmacy (HSNT expense):
 - Pharmacy entrance will be created from the 5501 Atrium into what is now Suite 110 kitchen. The atrium entrance will be glass wall with door located between 110 and suite 103. This entrance will require removing wall and kitchen sink and associated cabinetry.
 - Area in entry way to kitchen from interior hallway will

1415 Legacy Drive, suite 300
Frisco, TX 75034
www.CREfirm.com

May 27, 2021
Page 2 of 3

opened and widened, and bathroom will be walled off.

- And door will be created between what is now kitchen and Hallway.
- Closet between interior hall and bathroom will become entrance to bathroom.
- Pharmacy may create a new suite designation.

3. HSNT has right at their expense, if desired, to paint entire suite, put in new flooring, adjust reception area to be ADA compliant, install IT wiring and secure electronic door locks.

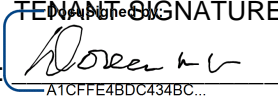
4. HSNT will receive 1 month free of rent at the beginning of the lease term

5. IF the government (HHS/HRSA) **doe not approve** the Change in Scope required to put the location in Scope as part of HSNT's designation as a Federally Qualified Health Center, then HSNT is not committed to a lease/rental. The Change in scope was submitted May 20, 2021

The terms as outlined herein are not all-inclusive, but comprise a summary of the general business terms, which Tenant requires. Other terms, which are not included, are to be negotiated. The parties mutually intend that neither shall have any binding contractual obligations to the other with respect to the matters referenced herein unless and until a formal written Lease has been prepared with adequate opportunity to be reviewed by legal counsel or its authorized representative and has been fully executed and delivered by the parties. Please call to discuss at your convenience. Thank you in advance for your cooperation and I look forward to working with you on this transaction.

TENANT SIGNATURE:

Company:


A1CFFE4BDC434BC...

Doreen

Name: _____

Title: Chief Executive Officer

Date: 5/27/2021

May 27, 2021
Page 3 of 3

LANDLORD ACKNOWLEDGED AND ACCEPTED:

DocuSigned By:

Aaron

Company: 94146E19DA8D462...

Aaron

Name: _____

Manager

Title: _____

5/28/2021

Date: _____



Recipient Information

- 1. Recipient Name**
Health Services of North Texas, Inc.
4401 N. I-35
Denton, TX 76207
- 2. Congressional District of Recipient**
26
- 3. Payment System Identifier (ID)**
1752252866A1
- 4. Employer Identification Number (EIN)**
752252866
- 5. Data Universal Numbering System (DUNS)**
928920180
- 6. Recipient's Unique Entity Identifier**
- 7. Project Director or Principal Investigator**
Doreen Rue
Chief Executive Officer
drue@healthntx.org
(940)293-6001
- 8. Authorized Official**

Federal Agency Information

- 9. Awarding Agency Contact Information**
Vera Windham
Grants Management Specialist
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
vwindham@hrsa.gov
(301) 443-6859
- 10. Program Official Contact Information**
Ardandia Campbell-Williams
Project Officer
Bureau of Primary Health Care (BPHC)
ACampbell-Williams@hrsa.gov
(301) 443-6723

Federal Award Information

- 11. Award Number**
6 H80CS24197-10-01
- 12. Unique Federal Award Identification Number (FAIN)**
H8024197
- 13. Statutory Authority**
42 U.S.C. § 254b
- 14. Federal Award Project Title**
Health Center Program
- 15. Assistance Listing Number**
93.224
- 16. Assistance Listing Program Title**
Community Health Centers
- 17. Award Action Type**
Administrative
- 18. Is the Award R&D?**
No

Summary Federal Award Financial Information

19. Budget Period Start Date 05/01/2021 - End Date 04/30/2022	
20. Total Amount of Federal Funds Obligated by this Action	\$0.00
20a. Direct Cost Amount	
20b. Indirect Cost Amount	
21. Authorized Carryover	\$0.00
22. Offset	\$0.00
23. Total Amount of Federal Funds Obligated this budget period	\$1,456,205.00
24. Total Approved Cost Sharing or Matching, where applicable	\$15,215,527.00
25. Total Federal and Non-Federal Approved this Budget Period	\$16,671,732.00
26. Project Period Start Date 05/01/2018 - End Date 04/30/2022	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$54,767,202.00

- 28. Authorized Treatment of Program Income**
Addition
- 29. Grants Management Officer – Signature**
Vera Windham on 06/08/2021

30. Remarks



Notice of Award
Award Number: 6 H80CS24197-10-01
Federal Award Date: 06/08/2021

Bureau of Primary Health Care (BPHC)

31. APPROVED BUDGET: (Excludes Direct Assistance)

Grant Funds Only
 Total project costs including grant funds and all other financial participation

a. Salaries and Wages:	\$7,811,393.00
b. Fringe Benefits:	\$1,526,347.00
c. Total Personnel Costs:	\$9,337,740.00
d. Consultant Costs:	\$0.00
e. Equipment:	\$0.00
f. Supplies:	\$2,220,380.00
g. Travel:	\$23,050.00
h. Construction/Alteration and Renovation:	\$0.00
i. Other:	\$2,827,362.00
j. Consortium/Contractual Costs:	\$2,263,200.00
k. Trainee Related Expenses:	\$0.00
l. Trainee Stipends:	\$0.00
m. Trainee Tuition and Fees:	\$0.00
n. Trainee Travel:	\$0.00
o. TOTAL DIRECT COSTS:	\$16,671,732.00
p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00
q. TOTAL APPROVED BUDGET:	\$16,671,732.00
i. Less Non-Federal Share:	\$15,215,527.00
ii. Federal Share:	\$1,456,205.00

32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:

a. Authorized Financial Assistance This Period	\$1,456,205.00
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	\$0.00
ii. Offset	\$0.00
c. Unawarded Balance of Current Year's Funds	\$0.00
d. Less Cumulative Prior Award(s) This Budget Period	\$1,456,205.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$0.00

33. RECOMMENDED FUTURE SUPPORT:
(Subject to the availability of funds and satisfactory progress of project)

YEAR	TOTAL COSTS
	Not applicable

34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)

a. Amount of Direct Assistance	\$0.00
b. Less Unawarded Balance of Current Year's Funds	\$0.00
c. Less Cumulative Prior Award(s) This Budget Period	\$0.00
d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	\$0.00

35. FORMER GRANT NUMBER

36. OBJECT CLASS
41.51

37. BHCNIS#
06E00522

38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:

a. The program authorizing statute and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.

39. ACCOUNTING CLASSIFICATION CODES

FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
21 - 3981160	93.224	18H80CS24197	\$0.00	\$0.00	CH	HEALTHCARECENTERS_18
21 - 398160K	93.527	18H80CS24197	\$0.00	\$0.00	CH	HEALTHCARECENTERS_18

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants3.hrsa.gov/2010/WebEPSEExternal/Interface/common/accesscontrol/login.aspx> to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Condition(s)

1. Due Date: Within 120 Days of Award Release Date

Due Date: Within 120 Days of Award Release Date

(CIS Tracking Number: CIS00116254 - Add Service Delivery Site:HSNT - Collin County Medical Center

5501 Independence Pkwy Ste 110, Plano, TX 75023-5472)

Within 120 days of the release date of this award (i.e., the date HRSA emailed you this Notice of Award), you **MUST** verify implementation of this CIS, as required via the related EHB submission deliverable.

To access the deliverable, go to your grant folder/handbook.

Grant Specific Term(s)

1. (CIS Tracking Number: CIS00116254) This Notice of Award (NoA) reflects approval of a proposed change in scope as of 06/07/2021:

Add Service Delivery Site:HSNT - Collin County Medical Center

5501 Independence Pkwy Ste 110, Plano, TX 75023-5472

Verification of implementation (see condition above) is **REQUIRED** for your CIS request to be officially included in your scope of project.

This change in scope must be supported within the level of grant funds currently awarded. This approval in no way obligates the Health Resources and Services Administration (HRSA) to any future support.

2. Grantees are reminded that separate Medicare enrollment applications must be submitted for each "permanent unit" at which they provide services. This includes units considered both "permanent sites" and "seasonal sites" under their HRSA scope of project. (For the definition of permanent and seasonal sites under the scope of project, see Section III of Program Information Notice 2008-01, Defining Scope of Project and Policy for Requesting Changes at <https://bphc.hrsa.gov/programrequirements/pdf/pin2008-01.pdf>) Therefore, for Medicare purposes, a single health center organization may consist of two or more FQHCs, each of which must be separately enrolled in Medicare and submit bills using its unique Medicare Billing Number.

The Medicare enrollment application can be located at <http://www.cms.hhs.gov/cmsforms/downloads/cms855a.pdf>. To identify the address where the package should be mailed, please refer to http://www.cms.hhs.gov/MedicareProviderSupEnroll/downloads/contact_list.pdf. The appropriate Medicare contractor is listed next to "Fiscal Intermediary."

Successful enrollment in Medicare as an FQHC does not automatically qualify a health center for payment as an FQHC under its State Medicaid program. Health centers should contact their State Medicaid office directly to determine the process and timeline for becoming eligible for payment as an FQHC under Medicaid.

All prior terms and conditions remain in effect unless specifically removed.

Contacts

NoA Email Address(es):

Name	Role	Email
Pamela Barnes	Business Official	pbarnes@healthntx.org
Doreen Rue	Program Director	dreue@healthntx.org

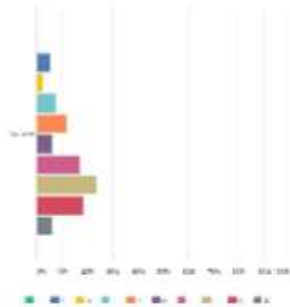
Note: NoA emailed to these address(es)

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (<https://pms.psc.gov/>).

HSNT Staff Survey Summary

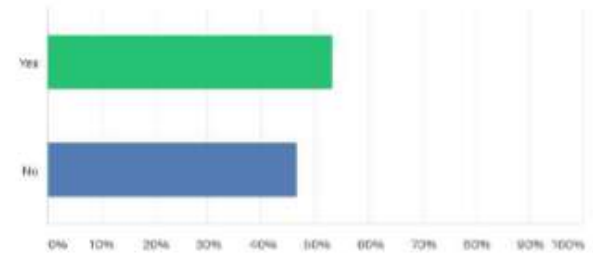
Q1: On a scale of 1 to 10, how would you rate your work-life balance? (1 being the lowest and 10 being the highest)

Answered: 78 Skipped: 0



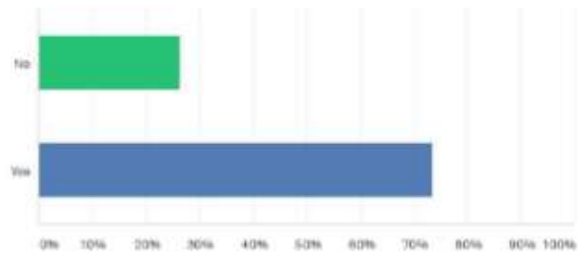
Q3: Would you like to receive any training from HSNT? If yes, please name at least three areas and explain why they're important for your career.

Answered: 75 Skipped: 1



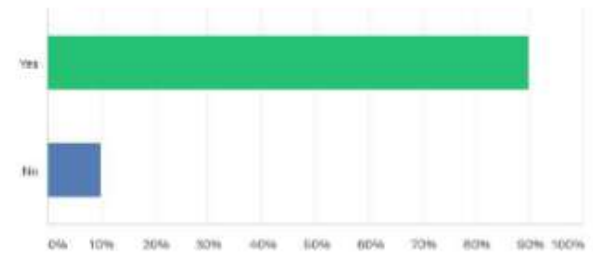
Q2: Do you feel like you're progressing professionally HSNT? Please indicate what aspects are moving you forward or holding you back.

Answered: 78 Skipped: 0



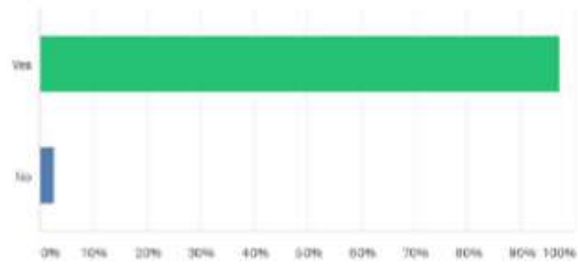
Q7: Is HSNT a better organization now than we were six months ago?

Answered: 70 Skipped: 0



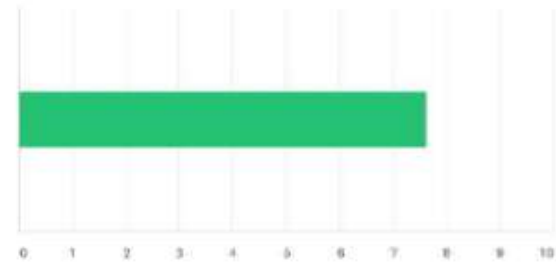
Q8: Are you proud to work for HSNT? Why?

Answered: 75 Skipped: 1



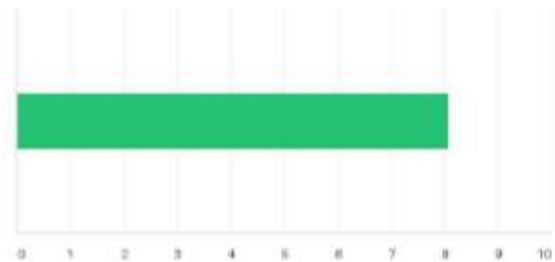
Q11: On a scale of 1 to 10, how comfortable do you feel providing upward feedback to your supervisor?(1 being the lowest and 10 being the highest)

Answered: 75 Skipped: 1



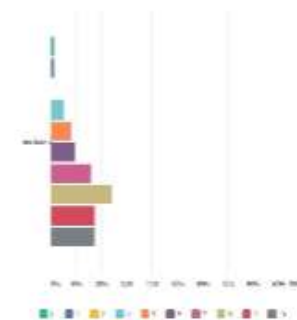
Q10: On a scale of 1 to 10, how good is your direct supervisor at recognizing your contributions at work?(1 being the lowest and 10 being the highest)

Answered: 70 Skipped: 0



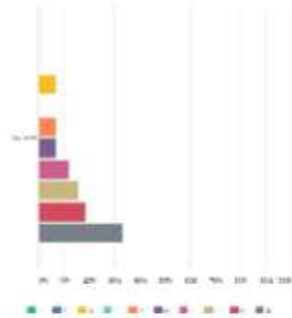
Q12: On a scale of 1 to 10, how much joy do you receive from your work environment? What activities bring you joy?(1 being the lowest and 10 being the highest)

Answered: 75 Skipped: 1



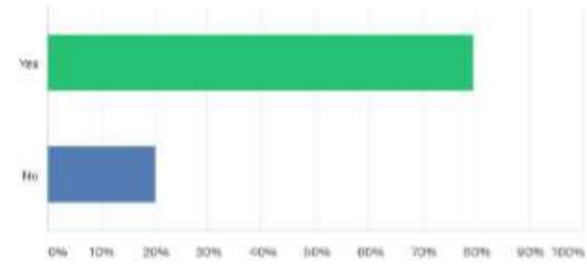
Q15: On a scale of 1 to 10, how much respect do your coworkers show with each other?(1 being the lowest and 10 being the highest)

Answered: 75 Skipped: 1



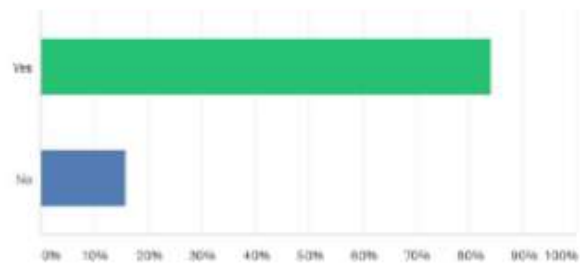
Q18: Do you have the resources you need to be successful? In not, please explain.

Answered: 74 Skipped: 2



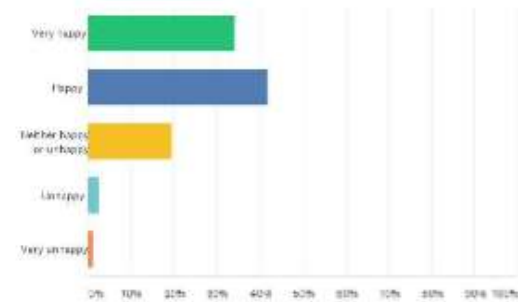
Q17: Would you refer someone to work at HSNT? Why?

Answered: 75 Skipped: 1



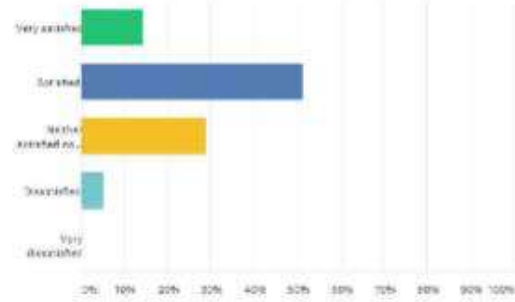
Q20: How happy or unhappy are you with HSNT as a place to work?

Answered: 76 Skipped: 0



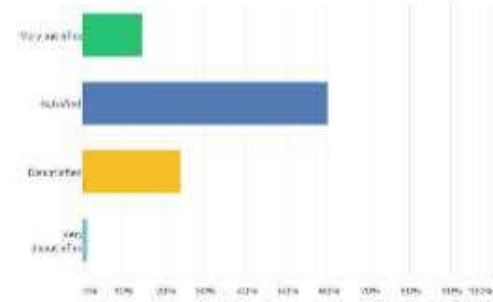
Q22: How satisfied are you with the benefits offered by HSNT?

Answered: 76 Skipped: 0



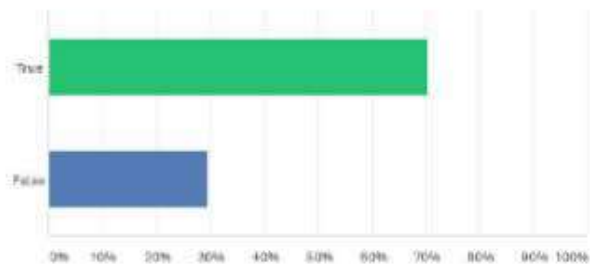
Q24: How satisfied are you with your current time off amount?

Answered: 75 Skipped: 1



Q23: The employee benefits that HSNT offers can compete with those offered by other organizations.

Answered: 71 Skipped: 5



May 17, 2021

To Doreen Rue, Executive Director
Health Services of North Texas, Inc.
4401 North I-35, Suite 312
Denton, TX 76207

We are pleased to confirm our understanding of the services we are to provide for Health Services of North Texas, Inc. 403(b) Plan (“the Plan”) for the year ended December 31, 2020 in connection with its annual reporting obligation under the Employee Retirement Income Security Act of 1974 (ERISA).

Except as described below, we will audit the financial statements of the Plan, which comprise the statement of net assets available for benefits as of December 31, 2020 and the related statement(s) of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements (the financial statements) and report on the supplemental schedules of the Plan for the year ended December 31, 2020. The following supplementary information accompanying the financial statements, as applicable, will be subjected to the auditing procedures applied in our audit of the financial statements and certain additional procedures:

- 1) Assets (Held at End of Year) and Assets (Acquired and Disposed of Within Year).

These financial statements and supplemental schedules are required to be included in the Plan’s Form 5500 filing with the Employee Benefits Security Administration (EBSA) of the Department of Labor (DOL).

Audit Objective

Our audit will be conducted in accordance with auditing standards generally accepted in the United States of America except that, as permitted by 29 CFR 2520.103-8 of the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA and as instructed by you, we will not perform any auditing procedures with respect to asset information prepared and certified to by Fidelity Management Trust Company and AXA Equitable Life Insurance Company, the Custodians, in accordance with 29 CFR 2520.103-5, other than comparing the information with the related information included in the financial statements and supplemental schedules. Under ERISA, the Plan administrator is generally responsible to the Plan participants for the financial information and the ability of the certifying entity to issue such ERISA certification. Because of the significance of the information that we will not audit, we will not express an opinion on the financial statements and supplemental schedules. We will issue a written report upon completion of our audit of the Plan’s financial statements. Our report will be addressed to management and the Plan Administrator of the Plan. We cannot provide assurance that a limited-scope disclaimer of opinion as permitted by Regulation 2520.103-8 of the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA will be expressed. Circumstances may arise in which it is necessary for us to make further modifications to our report, such as adding an emphasis-of-matter or other-matter paragraph. The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified to by the Custodian, will be audited by us in accordance with auditing standards generally accepted in the United States of America, and will be subjected to tests of your accounting records and other procedures we consider necessary to enable us to express an opinion as to whether they are presented in compliance with the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA. If circumstances occur related to the condition of your records, the availability of sufficient, appropriate audit evidence, or the existence of a significant risk of material misstatement of the financial statements caused by error, fraudulent financial reporting, or misappropriation of assets, which in our professional judgment prevent us from completing the engagement, we retain the right to take any course of action permitted by professional standards, including declining to issue a report or withdrawing from the engagement.

Audit Procedures

Our procedures will include tests of documentary evidence supporting the transactions recorded in the accounts and direct confirmation of investments except those certified to by the Custodian and certain other assets and liabilities by correspondence with financial institutions and other third parties. We will also request written representations from your attorneys as part of the engagement, and they may bill you for responding to this inquiry. At the conclusion of our audit, we will require certain written representations from you about the financial statements and related matters.

An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements; therefore, our audit will involve judgment about the number of transactions to be examined and the areas to be tested, except that assets and related transactions certified to by the Custodian will not be tested. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We will plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement, whether from (1) errors, (2) fraudulent financial reporting, (3) misappropriation of assets, or (4) violations of laws or governmental regulations, including prohibited transactions with parties in interest or other violations of ERISA rules and regulations, that are attributable to the Plan or to acts by management or employees acting on behalf of the Plan.

Because of the inherent limitations of an audit, combined with the inherent limitations of internal control, and because we will not perform a detailed examination of all transactions, there is a risk that material misstatements may exist and not be detected by us, even though the audit is properly planned and performed in accordance with U.S. generally accepted auditing standards except as previously noted. In addition, an audit is not designed to detect immaterial misstatements or violations of laws or governmental regulations that do not have a direct and material effect on the financial statements. However, we will inform the appropriate level of management of any material errors, fraudulent financial reporting or misappropriation of assets that comes to our attention. We will also inform the appropriate level of management of any violations of laws or governmental regulations that come to our attention, unless clearly inconsequential, and will include prohibited transactions in the supplemental schedule of nonexempt transactions as required by the instructions to Form 5500. Our responsibility as auditors is limited to the period covered by our audit and does not extend to any later periods for which we are not engaged as auditors.

Except as described in the Audit Objective section, our audit will include obtaining an understanding of the Plan and its environment, including internal control, sufficient to assess the risks of material misstatement of the financial statements and to design the nature, timing, and extent of further audit procedures. An audit is not designed to provide assurance on internal control or to identify deficiencies in internal control. Accordingly, we will express no such opinion. However, during the audit, we will communicate to you and those charged with governance internal control related matters that are required to be communicated under professional standards.

In addition, we will perform certain procedures directed at considering the Plan's compliance with applicable Internal Revenue Service (IRS) requirements for tax exempt status and ERISA plan qualification requirements. However, you should understand that our audit is not specifically designed for and should not be relied upon to disclose matters affecting plan qualifications or compliance with the ERISA and IRS requirements. If during the audit we become aware of any instances of any such matters or ways in which management practices can be improved, we will communicate them to you.

Other Services

We will also assist in preparing the financial statements of the Plan for the year ending December 31, 2020 in conformity with U.S. generally accepted accounting principles based on information provided by you. We will perform this service in accordance with applicable professional standards. The other service is limited to the financial statement service as defined. We, in our sole professional judgement, reserve the right to refuse to perform any procedure or take any action that could be construed as assuming management responsibilities.

As you have instructed, our engagement does not include preparation of the Plan's Form 5500. The AICPA's Audit and Accounting Guide, *Employee Benefit Plans*, requires that, before an auditor's report on the Plan's financial statements can be included with a filed Form 5500 (including any related schedules), the auditor must review the Form 5500 and consider whether there are any material inconsistencies between the other information in the form and the audited financial statements (including the required supplemental schedules) or any material misstatement of fact. We will, therefore, not issue our auditor's report until the completed Form 5500 has been provided for our review.

Management Responsibilities

You are responsible for designing, implementing, and maintaining internal controls relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error, including monitoring ongoing activities; for the selection and application of accounting principles; for establishing an accounting and financial reporting process for determining appropriate value measurements; and for the preparation and fair presentation of the financial statements in conformity with U.S. generally accepted accounting principles. You are also responsible for making all financial records and related information available to us and for the accuracy and completeness of that information, including the completeness and accuracy of the certification by the Custodian, and for determining if the certification from the Custodian includes the appropriate value of investments as of the Plan's year end. You are also responsible for providing us with (1) access to all information of which you are aware that is relevant to the preparation and fair presentation of the financial statements, (2) additional information that we may request for the purpose of the audit, and (3) unrestricted access to persons within the Plan from whom we determine it necessary to obtain audit evidence.

Your responsibilities include adjusting the financial statements to correct material misstatements and confirming to us in the written management representation letter that the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the latest period presented are immaterial, both individually and in the aggregate, to the financial statements taken as a whole.

You are responsible for the design and implementation of programs and controls to prevent and detect fraud, and for informing us about all known or suspected fraud affecting the Plan involving (1) Plan management, (2) employees who have significant roles in internal control, and (3) others where the fraud could have a material effect on the financial statements. Your responsibilities include informing us of your knowledge of any allegations of fraud or suspected fraud affecting the Plan received in communications from employees, former employees, regulators, or others. In addition, you are responsible for identifying and ensuring that the Plan complies with applicable laws and regulations. You are also responsible for the fair presentation of the supplemental schedules and the form and content of the financial statements and supplemental schedules in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. You agree to include our report on the supplementary information in any document that contains, and indicates that we have reported on, the supplementary information. You also agree to include the audited financial statements with any presentation of the supplementary information that includes our report thereon. You are required to disclose the date through which subsequent events have been evaluated and whether that date is the date the financial statements were issued. You agree that you will not date the subsequent event note earlier than the date of your management representation letter.

You agree to assume all management responsibilities for any nonattest services we provide; oversee the services by designating an individual, preferably from senior management, with suitable skill, knowledge, and/or experience; evaluate the adequacy and results of the services; and accept responsibility for them.

Engagement Administration, Fees, and Other

We understand that your personnel will prepare schedules, analyses, and all confirmations we request and will locate any invoices or other documents selected by us for testing.

The audit documentation for this engagement is the property of Durbin & Company, L.L.P. and constitutes confidential information. However, we may be requested to make certain audit documentation available to the U.S. Department of Labor pursuant to authority given to it by law. If requested, access to such audit documentation will be provided under the supervision of Durbin & Company, L.L.P. personnel. Furthermore, upon request, we may provide copies of selected audit documentation to the U.S. Department of Labor. The U.S. Department of Labor may intend, or decide, to distribute the copies of information contained therein to others, including other governmental agencies.

Tommy L. Davis is the engagement partner and is responsible for supervising the engagement and signing the report or authorizing another individual to sign it. We expect to begin our audit in June and to issue our report no later than the October filing deadline.

Our fee for this engagement will be at our regular rates and will be based on our understanding that plan sponsor personnel will prepare audit schedules in a timely manner and locate any supporting documentation we require to complete the engagement. You will also be billed for travel and other out-of-pocket costs such as report production, word processing, postage, etc. Our invoices for these fees will be rendered each month as work progresses and are payable on presentation.

You may request that we perform additional services not addressed in this engagement letter. If this occurs, we will communicate with you regarding the scope of the additional services and the estimated fees. We also may issue a separate engagement letter covering the additional services, our services will continue to be governed by the terms of this engagement letter.

We appreciate the opportunity to be of service to the Plan 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.

Very truly yours,
Durbin & Company, L.L.P.



Tommy Davis, CPA
Partner

RESPONSE:

This letter correctly sets forth the understanding of Health Services of North Texas, Inc.403(b) Plan.

Plan Administrator's Signature and Title
Date: _____

Governance Signature: _____
Title: _____
Date: _____



American Rescue Plan Grant Budget

Summary:

The Governing Board reviewed and approved the Budget for the American Rescue Plan Grant H8FCS40947.

ACTION:

Reviewed by:

- Pam Barnes, CFO _____ Date: _____
- Doreen Rue, CEO _____ Date: _____

Governing Board Personnel Committee Approval:

_____ Date: _____

Governing Board Quality Committee Approval:

_____ Date: _____

Governing Board Strategic Planning Committee Approval:

_____ Date: _____

Governing Board Finance Committee Approval:

_____ Date: _____

Governing Board Approval:

_____ Date: _____

(President)



American Rescue Plan Capital Grant Application Submission and Budget

Summary:

The Governing Board reviewed and approved the Application Submission and Budget for the American Rescue Plan Capital Grant HRSA-21-114.

ACTION:

Reviewed by:

- Pam Barnes, CFO _____ Date: _____
- Doreen Rue, CEO _____ Date: _____

Governing Board Personnel Committee Approval:

_____ Date: _____

Governing Board Quality Committee Approval:

_____ Date: _____

Governing Board Strategic Planning Committee Approval:

_____ Date: _____

Governing Board Finance Committee Approval:

_____ Date: _____

Governing Board Approval:

_____ Date: _____

(President)



OUTSIDE BUSINESS HOURS POLICY

PCMH015

PURPOSE:

The practice recognizes that patients' care needs are not confined to normal operating hours, and therefore offers routine and urgent care appointments outside typical business hours.

POLICY:

Health Services of North Texas (HSNT) has a written process and defined standards and demonstrates that it monitors performance against the standards for providing access to routine and urgent care appointments expanding outside of regular standard business hours available to all patients. It is also the policy of Health Services of North Texas that patients have access to a provider via answering service after the office has closed to maximize access and continuity of care.

Routine & urgent after-hours care is offered M-Thursday until 6pm for adult and pediatric patients and on Wednesdays until 7pm for Woman's Health services.

It is the policy of HSNT that a provider is on call every business day from 5:00 p.m. to 8:00 a.m. and weekends starting Friday at 5p.m. until Monday at 8 a.m.

It is the policy of HSNT to use an answering service to effectively handle calls received during non-office hours. The primary incoming telephone line is placed on call-forwarding to the current answering service each weekday evening and on Fridays for the weekend. The service ensures that all patients, referring providers, and hospital emergency departments have immediate access to the provider on call. If the provider is not immediately available a message is escalated to assigned back up staff, who contacts our patient. Using evidence-based



HEALTHNTX.ORG

HSNT Headquarters
4401 N. I-35 Suite 312
Denton, TX 76207
940-381-1501
940-566-8059 Fax

Denton Medical Center
4304 & 4308 Mesa Drive
Denton, TX 76207
940-381-1501
940-591-7830 Fax

HSNT at Serve Denton
306 N Loop 288 Suite 200
Denton, TX 76209
940-381-1501
940-591-7830 Fax

Denton South Center
3537 South I-35E Suite 210
Denton, TX 76210
940-381-1501
940-381-5249 Fax

Collin County Center
2540 K Avenue
Plano, TX 75074
972-424-1480
972-424-9117 Fax

Wylie Children's
Medical Clinic
303 Hwy 78 Suite 106
Wylie, TX 75098
940-381-1501
972-429-5410 Fax

guidelines of clinical practice, the patient may be given phone advice with a follow-up appointment the next day or triaged for emergent care if the conditions warrant this action.

Chief Executive Officer

Date

Board of Directors Representative

Date

Revision to Policy:
Board approved revision:

PROCEDURE:

Health Services of North Texas provides a call schedule to the answering service each month by the 20th day of the prior month. The schedule includes primary and secondary contact numbers for all providers and specialists on call (Family practice, pediatrics, and OB).

Answering Service

An automatic transfer of the telephones to the answering service at the close of business hours each evening.

The Senior Clinical Nurse Manager then receives messages from the answering service and taken during the evening and/or weekend and performs the following:

- Reviews the messages for completeness.
- Distributes all applicable messages via Telephone encounter messaging in the electronic health record system labeled with reason “After-Hours Follow up” to the appropriate staff members who can take action. Messages are left in “open” status until completion by the appropriate party.

On-Call Providers

Health Services of North Texas establishes a schedule for call. Providers rotate on-call responsibilities, which includes responding to patients via telephone to provide clinical advice and/or arrange care, during the hours of 5:00 p.m. to 8 a.m. on weeknights and all day on weekends and holiday closures.

Patient Communication After Hours

Patients are informed of the availability of an after-hours coverage service when they establish with Health Services of North Texas. This information is also made available through the Welcome Packet.

When patients call Health Services of North Texas after the usual operating hours, they are answered by a live person. If the call is received outside business hours, the patient is connected to the answering service, the operator on duty at the answering service:

- Informs callers regarding HSNT usual business hours. If the patient wants to schedule or cancel appointments, the operator instructs the patient to call back during usual operating hours or submit the request via HSNT's secure electronic system for patients. All other calls are sent to the provider on call.
- Answering service staff obtains the caller's name, the patient's full name, date of birth, and the reason for the call.
- Identifies the on-call provider and contacts the appropriate Provider.

The provider contacts the patient within 20 minutes of receiving the page. The provider provides the patient with advice related to his or her needs. All communications are documented in the EMR following the conversation in a manner that is consistent with medical and legal prudence.

If there is no response to contact within 5 minutes from the on-call provider, the operator on duty at the answering service reaches out to the Provider again. If there is still no response of confirmation of acknowledgement the backup staff is contacted.

If applicable, the operator reports unsuccessful attempts to contact the on-call provider to the Administration by secure email the next morning.

Expansion of Office Hours

HSNT expands hours on Monday-Thursday from 7:30 am to 6 pm for Adult and Pediatric care. Woman's health expanded office hours occur every Wednesday from 8:00-7pm. Patients are informed of availability and of expanded hours when they establish with Health Services of North Texas. This information is also made available through our brochure and website. In the event that a patient calls outside these hours and has an urgent need, the answering service will contact the on call provider the on-call provider for further assessment. The on-call

provider will take the patient history and assess their needs. If the patient is deemed to have a non-emergent condition, a message will be sent for staff to follow up on the next business day. If the patient is determined by history to have an urgent condition the patient may be directed to go to an urgent care or the emergency room.

Quality Control

HSNT monitors the policy and procedure in the following manner:

- Weekly monitoring of the call schedule. Immediate action is taken if problems arise with the provider on-call being unable to be reached.
- Comprehensive review of all after hours calls including follow up calls to patients and ensuring appropriate provider documentation for each call is in EMR.



REFERRALS, DIAGNOSTIC TESTS AND PROCEDURES TRACKING MRR002

POLICY:

The Medical Center actively monitors the status of referrals and test results to ensure consistent, high-quality care. Staff notifies each patient, as directed by the provider, about his or her diagnostic and laboratory test results in a timely manner.

Chief Executive Officer

Date

Board of Directors Representative

Date

Revision to Policy:

Board approved revision:



HEALTHNTX.ORG

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972-424-9117 Fax

**Wylie Children's
Medical Clinic**
303 Hwy 78 Suite 106
Wylie, TX 75098
940-381-1501
972-429-5410 Fax

PROCEDURE:

1. When the provider recognizes the need to refer a patient to another provider or specialist, the provider will explain the need for the referral to the patient.
2. The referral will be documented in the electronic medical record (EMR) and will include referral origin. The patient will be directed to the appropriate staff member who will give the patient all the pertinent information regarding the referral and may make the appointment if applicable. If our staff makes the appointment it will be documented in the medical record.
3. Waivers, such as those for non-covered services, including advanced beneficiary notices (ABNs) for Medicare-covered patients are done on the date of service by the rendering staff/provider.
4. All referrals and orders are documented in the EMR when ordered by the provider. All orders, referrals, imaging, and lab orders are tracked in queues monitored, by the provider's support staff or Referral Coordinator, daily to ensure they are completed and resulted in a timely manner. Once the result is available, the report is attached to the referral or order and can also interface electronically where it is electronically routed to the ordering provider.
5. After receiving test results or consultation notes, the staff communicates the results to the patient at the direction of the provider. The provider can also send this information via patient portal messaging. Staff provides information to the patient via telephone. The staff may also leave a message on the patient's voice mail if the patient agrees to this type of notification. The staff documents the notification in the patient's medical record.
6. A provider designates whether a staff member can provide positive or negative results directly to the patient.
7. If an order is not resulted within the indicated time frame already set for each lab, referral, or image, the patient is contacted to determine whether or not they are scheduled to have the order done. If not, the order is cancelled with supporting reasons to explain why the testing or referrals was not done.

- If the results are missing, the staff contacts the point of referral.
- If the test, referral, or study was completed, the staff follows up with the lab, hospital, provider's office, or other facility to locate the results.
- If the point of referral indicates the test, referral, or study was not completed because of patient noncompliance, the staff discusses the barriers the patient may have encountered and assists the patient in making another appointment. The staff will provide relevant information, education, and answers to any questions that may assist the patient in following through with the appointment.
- Should staff suspect that a minor patient's or dependent elderly patient's refusal is the result of neglect or abuse, staff contact the appropriate authorities as required by state law.
- If applicable, staff documents the call or follow-up, missed referral appointments, frequency of attempts to contact, and attempt methods in patient's medical record.

Each provider who refers a patient for a consultation will communicate with the consulted provider in writing (either by letter or consultation form) prior to the patient visit. The referring provider will provide the following information to the consulting provider:

- Referral form with diagnosis
- Reason for being referred
- Billing information
- Demographics
- Any labs, imaging, or reports on file that may be needed for the visit

Patients who give consent to receive messages through the patient portal have access to their medical record, to include results and referrals as published by the ordering provider.

Health Services of North Texas
GOVERNING BOARD OF DIRECTORS
PERSONAL DATA FORM

Please complete this form and return it Doreen Rue, Health Services of North Texas, 4401 N. I35, Suite 312, Denton, Texas 76207. Please note- personal information is required, data is kept confidential. If applicable, HSNT needs the board members NPI and Medicare identification numbers. This is required for Federally Qualified Health Centers to submit these numbers to CMS for informational purposes only. Please attach current résumé.

NAME: Belinda Hernandez SS # [REDACTED]

DATE OF BIRTH: [REDACTED]

Sex:Female Race/Ethnicity: White

If applicable: NPI #: Medicare #s:

HOME ADDRESS:1164 Valley Oaks Drive CITY, STATE, ZIP: Lewisville,TX 75067

PLACE OF BIRTH:Dallas, TX HOME PHONE:214-662-0362

BUSINESS ADDRESS:

CITY, STATE, ZIP: BUSINESS PHONE:

E-MAIL ADDRESS: mkbelindah@gmail.com

POSITION OR PROFESSION:

PROFESSIONAL DESIGNATION:

RETIRED: Yes No CELL PHONE:

The Board will be representative of each of the following groups. Please check the one that is appropriate to you.

- Consumer--user of medical services at HSNT at the present time**
- Non-Consumer—does more than 10% of your income come from the medical field?
Yes No
- Consumer—plan to become a consumer of medical services

RECENT COMMUNITY ACTIVITIES: None at this time

Briefly describe the personal interest, educational background or perspective you will contribute to the HSNT. My personal interest is to advocate for persons living with HIV/AIDS, my educational background is personal.

The Board of Directors of Health Services of North Texas meets on the third Wednesday of each month at 6:00 p.m. via Zoom with occasional in-person meetings in the conference room at the Serve Denton Center at 306 N Loop 288 Denton, TX 76209. Please bear this in mind if you offer to serve. Attendance at the meetings is critical to the smooth operation of the Center.

If elected, I do agree to serve.

Belinda Hernandez
Signature of Nominee

May 27, 2021
Today's Date

Referred by Doreen Rue

Revised 3.25.2021

Health Services of North Texas
GOVERNING BOARD OF DIRECTORS
PERSONAL DATA FORM

Please complete this form and return it Doreen Rue, Health Services of North Texas, 4401 N. 135, Suite 312, Denton, Texas 76207. Please note- personal information is required, data is kept confidential. If applicable, HSNT needs the board members NPI and Medicare identification numbers. This is required for Federally Qualified Health Centers to submit these numbers to CMS for informational purposes only. Please attach current résumé.

NAME: Kimberly Middleton, M.D SS #: [REDACTED]

DATE OF BIRTH: [REDACTED]

Sex: Female Race/Ethnicity: African American

If applicable: NPI #: 1619944857 Medicare #s: [Click here to enter text.](#)

HOME ADDRESS: 2240 Nocona Drive CITY, STATE, ZIP: Prosper, TX 75078

PLACE OF BIRTH: Chicago, IL HOME PHONE: 312-399-7185

BUSINESS ADDRESS: 4170 Lavon Drive #146

CITY, STATE, ZIP: Garland, TX 75040 BUSINESS PHONE: 972-244-4992

E-MAIL ADDRESS: kimorlandi@gmail.com

POSITION OR PROFESSION: Family Medicine Physician

PROFESSIONAL DESIGNATION: Medical Doctor

RETIRED: Yes No CELL PHONE: 312-399-7185

The Board will be representative of each of the following groups. Please check the one that is appropriate to you.

- Consumer--user of medical services at HSNT at the present time**
- Non-Consumer—does more than 10% of your income come from the medical field?
 Yes No
- Consumer—plan to become a consumer of medical services

RECENT COMMUNITY ACTIVITIES: **Color of Medicine 6/2020-current-** Advisory Board Member for nonprofit organization-Active in developing programs to find solutions and strategies to promote the inclusion of minority students in STEM and medicine. **Jack and Jill of America, Inc.** Member 2013-current-Executive Board Legislative Chair-organized voter registration booths to increase registration in underserved communities. Served as Chair and Co-Chair for various committees that provide community service to Chicagoland and Dallas area communities. Sub-committee Lead for Fundraising for scholarships for low-income high school students. Volunteer for Feed the City-Collin County. **Delta Sigma Theta Sorority, Inc. JASSAC-** Member 2013-2020-Served on Health Services Team- Organized yearly health fairs, guest speaker on various health related topics, served on various committees that increased health awareness in underserved communities. Organized voter registration and Census booths, Sub-committee Lead for annual golf tournament to raise funds for scholarships; **Victory Apostolic Church-**provided medical services/exams for yearly back to school health fair 2013-2020, speaker for summer health series; **AT&T** 2020-volunteer speaker-provided COVID education to national staff. **Vein Clinics of America-**Diversity& Inclusion Steering Committee Physician Team Lead 1/2021-current-active in developing programs to influence diversity and inclusion in the workplace. Participate in weekly meetings to secure and ensure all VCA members are given relevant and relatable diversity and inclusion training.

Briefly describe the personal interest, educational background or perspective you will contribute to the HSNT. I am passionate about the mental and physical health of those in underserved communities. I have trained as a Family Physician and spent over 15 years providing medical services in FQHCs. As a Board Certified Family Physician who is Fellowship trained in Maternal Child Health, I have a broad knowledge of the barriers that women, children and families face in obtaining optimal healthcare. Some of these barriers include the lack of education, access to convenient care, and myths that negatively impact early prevention and treatment. Although FQHCs have become a solution to many who are financially vulnerable, there are still opportunities for improving care, establishing additional external collaboration, and the procurement of financial support. Throughout my career at Circle Family Care Center and PCC Community Health Center I've served as Physician Champion for the American Cancer Society as well as Physician Advisor for the Maternal Child Health Program. In these roles, I was actively involved in data collection and programming to reduce cancer mortality as well as women and infant mortality. I was also involved in weekly quality review of healthcare delivery within the clinic and hospital. With my experience and compassion for under-insured and uninsured individuals I feel I am able to contribute as an advisory board member in the areas of programming and quality management. Although I am new to the DFW area, I am rapidly developing relationships in the medical and non-medical community. I am a new member of the Collin County NAACP and the Far North Dallas Chapter of Jack and Jill of America. I feel confident in my ability to build trust through collaboration with those in the medical and non-medical community which could positively impact the patients at Health Services of North Texas.

The Board of Directors of Health Services of North Texas meets on the third Wednesday of each month at 6:00 p.m. via Zoom with occasional in-person meetings in the conference room at the Serve Denton

Revised 3.25.2021

Center at 306 N Loop 288 Denton, TX 76209. Please bear this in mind if you offer to serve. Attendance at the meetings is critical to the smooth operation of the Center.

If elected, I do agree to serve.

Kimberly Middleton, M.D.
Signature of Nominee

5/19/2021
Today's Date

Referred by N/A



**HRSA 330 Compliance Annual Review Final Report:
Key Management Staff**

Participants:

- Project Leader: Kelsey Moore
- Compliance Officer: Larry Bisno
- Subject Owner: Jamie Taylor
- Review Team: Brandi Ruiz

Materials Reviewed:

- HSNT Org Chart
- Bios and Job Descriptions for Key Management Staff
- Employment and Retention Policies

Timeline:

- Review Worksheet sent to Subject Owner: 4/16/2021
- Review Worksheet Completed and Requested Documents Uploaded by Subject Owner: 5/3/2021
- Submissions Reviewed by Project Leader and Compliance Officer: 5/24/2021
- Meeting with Subject Owner, Project Leader, Compliance Officer, and Review Team to discuss next steps and recommendations: 5/25/2021
- Progress Report to Agency Quality Committee: 6/2/2021
- Full Report to Governing Board: 6/16/2021
- Final Report to Agency Quality Committee: 6/23/2021

Recommendations:

- The HSNT Employment and Retention Policy will be updated with procedures for job postings.
- HSNT is currently reviewing staff job descriptions and will update key management job descriptions as needed.
- Key Management Staff Requirements were found to be in compliance with HRSA requirements.

ACTION:

Reviewed by:

- Brandi Ruiz, Director of Human Resources _____ Date: _____
- Doreen Rue, CEO _____ Date: _____



Governing Board Personnel Committee Approval:

_____ Date: _____

Governing Board Approval:

_____ Date: _____

(President)



**HRSA 330 Compliance Annual Review:
Key Management Staff**

Participants:

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Approved By:

- | | | |
|----------------|---|------------------------|
| • Kelsey Moore | <small>DocuSigned by:</small>
<u>Kelsey Moore</u>
<small>D1EBA649100C49F...</small> | Date: <u>6/11/2021</u> |
| • Larry Bisno | <small>DocuSigned by:</small>
<u>Larry Bisno</u>
<small>B2352AAE916D4BA...</small> | Date: <u>6/11/2021</u> |
| • Jamie Taylor | <small>DocuSigned by:</small>
<u>Jamie Taylor</u>
<small>8E1B093B9DF4483...</small> | Date: <u>6/11/2021</u> |
| • Brandi Ruiz | <small>DocuSigned by:</small>
<u>Brandi Ruiz</u>
<small>4BB2DE856311421...</small> | Date: <u>6/11/2021</u> |



**HRSA 330 Compliance Annual Review Final Report:
Clinical Staffing**

Participants:

- Project Leader: Kelsey Moore
- Compliance Officer: Larry Bisno
- Subject Owner: Jamie Taylor
- Review Team: Brandi Ruiz

Materials Reviewed:

- HSNT Org Chart
- HSNT Credentialing and Privileging Policies and Procedures

Timeline:

- Review Worksheet sent to Subject Owner: 4/16/2021
- Review Worksheet Completed and Requested Documents Uploaded by Subject Owner: 5/3/2021
- Submissions Reviewed by Project Leader and Compliance Officer: 5/24/2021
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- Full Report to Governing Board: 6/16/2021
- Final Report to Agency Quality Committee: 6/23/2021

Recommendations:

- Creation of the Credentialing Compliance Committee. This committee will ensure the timely and accurate submission of licensure and required documentation by the credentialed staff member and supervisors.
- Education of clinical staff and leadership on the level of risk associated with failure to comply with privileging and credentialing requirements.
- Development of systems to ensure adherence to privileging and credentialing requirements.
- HSNT’s credentialing and privileging policies and procedures are in compliance with HRSA requirements, however more work is required to ensure these policies and procedures are followed in practice.

ACTION:

Reviewed by:

- Brandi Ruiz, Director of Human Resources _____ Date: _____
- Doreen Rue, CEO _____ Date: _____



Governing Board Personnel Committee Approval:

_____ Date: _____

Governing Board Approval:

_____ Date: _____

(President)



**HRSA 330 Compliance Annual Review:
Clinical Staffing**

Participants:

- Project Leader: Kelsey Moore
- Compliance Officer: Larry Bisno
- Subject Owner: Jamie Taylor
- Review Team: Brandi Ruiz

Materials Reviewed:

- HSNT Org Chart
- HSNT Credentialing and Privileging Policies and Procedures

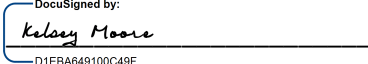
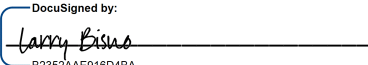
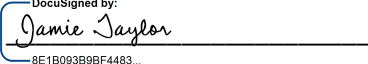
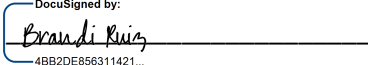
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- Final Report to Agency Quality Committee: 6/23/2021

Recommendations:

- Creation of the Credentialing Compliance Committee. This committee will ensure the timely and accurate submission of licensure and required documentation by the credentialed staff member and supervisors.
- Education of clinical staff and leadership on the level of risk associated with failure to comply with privileging and credentialing requirements.
- Development of systems to ensure adherence to privileging and credentialing requirements.
- HSNT’s credentialing and privileging policies and procedures are in compliance with HRSA requirements, however more work is required to ensure these policies and procedures are followed in practice.

Approved By:

- Kelsey Moore  Date: 6/11/2021
- Larry Bisno  Date: 6/11/2021
- Jamie Taylor  Date: 6/11/2021
- Brandi Ruiz  Date: 6/11/2021



**HRSA 330 Compliance Annual Review Final Report:
FTCA**

Participants:

- Project Leader: Kelsey Moore
- Compliance Officer: Larry Bisno
- Subject Owner: Jamie Taylor
- Review Team: Brandi Ruiz

Materials Reviewed:

- 2021 FTCA Deeming Application
- Annual Risk Report
- Risk Management Policy and Procedures
- Risk Training Plan and Tracking
- Job Descriptions
- Claims Management Policy

Timeline:

- Review Worksheet sent to Subject Owner: 4/16/2021
- Review Worksheet Completed and Requested Documents Uploaded by Subject Owner: 4/29/2021
- Submissions Reviewed by Project Leader and Compliance Officer: 5/24/2021
- Meeting with Subject Owner, Project Leader, Compliance Officer, and Review Team to discuss next steps and recommendations: 5/25/2021
- Progress Report to Agency Quality Committee: 6/2/2021
- Full Report to Governing Board: 6/16/2021
- Final Report to Agency Quality Committee: 6/23/2021

Recommendations:

- The Risk Committee will be consulted for input on risk mitigation responses and actions implemented in response to risk management assessments and reporting.
- The FTCA Deeming Requirements was found to be in compliance with HRSA requirements.

ACTION:

Reviewed by:

- Brandi Ruiz, Director of Human Resources _____ Date: _____
- Doreen Rue, CEO _____ Date: _____



Governing Board Personnel Committee Approval:

_____ Date: _____

Governing Board Approval:

_____ Date: _____

(President)



**HRSA 330 Compliance Annual Review:
FTCA**

Participants:

- Project Leader: Kelsey Moore
- Compliance Officer: Larry Bisno
- Subject Owner: Jamie Taylor
- Review Team: Brandi Ruiz

Materials Reviewed:

- 2021 FTCA Deeming Application
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Approved By:

- | | | |
|----------------|---|------------------------|
| • Kelsey Moore | <small>DocuSigned by:</small>
<u>Kelsey Moore</u> | Date: <u>6/11/2021</u> |
| • Larry Bisno | <small>D1EBA649100C49F...
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<u>Larry Bisno</u> | Date: <u>6/11/2021</u> |
| • Jamie Taylor | <small>B2352AAE916D4BA...
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<u>Jamie Taylor</u> | Date: <u>6/11/2021</u> |
| • Brandi Ruiz | <small>8E1B093B9BF4483...
DocuSigned by:</small>
<u>Brandi Ruiz</u> | Date: <u>6/11/2021</u> |