



# HALIFAX HEALTH

## BOARD OF COMMISSIONERS MEETING

November 6, 2017  
4:00 p.m. - France Tower  
Conference Room A

# HALIFAX HEALTH BOARD OF COMMISSIONERS MEETING

303 No. Clyde Morris Boulevard, Daytona Beach, FL  
France Tower Conference Room A  
4:00 p.m. November 6, 2017

## AGENDA (Page 1 of 2)

### Call to Order

### Invocation & Pledge of Allegiance

### Roll Call

### Mission Statement

Page 4

### Approval of Minutes (Action)

- Board of Commissioners Meeting – September 5, 2017 Page 5
- Board of Commissioners First Public Hearing – September 5, 2017 Page 12
- Board of Commissioners Final Public Hearing – September 18, 2017 Page 15

### Approval of Agenda (Action)

### Medical Staff Report – Dan Miles, MD (Action)

- Credentials Committee Actions Page 17

### Auxiliary Report – Auxiliary President, WG Watts

- Report included under Additional Information Tab (Page 151)

### Foundation Report – Chairman, Glenn Ritchey

- Report included under Additional Information Tab (Page 153)

### Management Report – Jeff Feasel

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- Quality Presentation under Presentation Tab (Page 168)

### Strategic & Community Health Planning Committee

Page 34

### Audit & Finance Committee Report – Eric Peburn (Information only)

- Audit & Finance Committee Minutes - August 30, 2017 Page 35
- Schedule of Uses of Property Taxes – September 30, 2017 Page 39
- Investment Performance Report – August 2017 Page 40
- Investment Performance Report – September 2017 Page 45
- Capital Expenditures - \$25,000-\$50,000 Page 50
  - Omnicell Medication Dispensing Cabinet - \$33,214 Page 51
  - Vaginal CT/MRI Channel Application - \$29,473 Page 53
  - Meditech Interface for Laboratory - \$25,350 Page 55
- Affiliate Activity (Information only)
  - PO Hospice Care Center HVAC Replacement - \$28,600 Page 57
  - Sale of Portion of Deltona Parcel (5 Acres)  
120 Howland Boulevard - \$1,875,000 (Cost Basis \$1,175,200) Page 59
  - Deltona Road & Utility Infrastructure (Phase I)  
120 Howland Boulevard - \$787,000 (\$430,000 to be paid  
By HH Holdings and \$357,000 to be paid by buyer) Page 59

### Consent Agenda (Action)

- Healthy Communities Board Appointment Page 61
- Audit Services Reports #1-3 Page 62
- Financial Statements August 2017 Page 65
- Financial Statements September 2017 Page 90
- Capital Expenditures - \$50,000 and Over (Working Capital) Page 115
  - Development of Road & Utility Infrastructure  
West of Clyde Morris Boulevard - \$2,530,000 Page 116
  - Acquisition of Orthopedic Medical Office - \$898,250 Page 119
  - Gastroenterology Relocation Project - \$683,995 Page 121
  - Surgical Tables - \$109,840 Page 123
  - Urinalysis Analyzer - \$99,590 Page 125
  - Orthopedic Surgical Table - \$93,057 Page 127

# HALIFAX HEALTH BOARD OF COMMISSIONERS MEETING

303 No. Clyde Morris Boulevard, Daytona Beach, FL

France Tower Conference Room A

4:00 p.m. November 6, 2017

## AGENDA (Page 2 of 2)

### Consent Agenda (continued)

- Disposals
  - Capital Disposals – October 2017 Page 129
  - Sale of Portion of Vacant Land (11.68 acres) Page 131  
West Clyde Morris Boulevard - \$2,336,000
- Banking & Treasury Services with US Bank Page 134
- Banking & Treasury Services with Intracoastal Bank Page 135

### Old Business

- Interlocal Agreement – City of Deltona (Action) Page 136
- HHMC Reimbursement Resolution (Action) Page 142
- CIA Dashboard / Update August 2017 (Information Only) Page 144
- CIA Dashboard / Update September 2017 (Information Only) Page 146

### New Business

#### Additional Information

- 2018 Halifax Health Board of Commissioners Meeting Schedule Page 148
- Auxiliary Semi-Annual Report Page 149
- Foundation & Associates Semi-Annual Report Page 151
- Human Resources Report August 2017 Page 153
- Human Resources Report September 2017 Page 154
- Biketoberfest 2017 Snapshot Page 155
- Affiliate Minutes Page 156

### Presentations

- Quality Update Q3-FY2017 Page 167
- HKS – Deltona Project Update Page 189

### Public Participation

#### Next Meetings – January 8, 2018 - France Tower Conf. Room A

- 4:00 p.m. - Regular HH Board Meeting
- Closed Strategic Planning and Litigation meetings to follow  
(Pursuant to FS 395.3035 & FS 286.001)

### Adjourn



**OUR MISSION** is to be the community healthcare leader through exceptional talent and superior patient centered service delivered in a financially sustainable manner.

**OUR VISION** is to develop talented teams dedicated to providing competent, accountable patient centered healthcare in a financially sustainable manner.

## **OUR VALUES:**

Halifax Health will cultivate a positive workplace in which each team member is valued, respected, and has an opportunity for personal and professional growth. We will develop patient centered systems of care.

## **OUR SERVICE PHILOSOPHY:**

Halifax Health will ensure that those we serve are treated with courtesy and respect in a safe, compassionate, and professional environment.

Halifax Health will provide exemplary medical, emotional, and spiritual care for each of our patients and their families.

Adopted 7/14/10



**HALIFAX HOSPITAL MEDICAL CENTER  
BOARD OF COMMISSIONERS MEETING  
Held at 303 North Clyde Morris Boulevard, France Tower, Daytona Beach, FL  
September 5, 2017**

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Present: Ed Connor, Assistant Secretary  
Dan Francati, Vice Chairman  
Harold Goodemote, Chairman  
Carl W. Lentz, M.D., Member  
Tom McCall, Secretary  
Glenn Ritchey, Member  
Susan Schandel, Treasurer

Also Present: Kent Bailey, Director of Finance  
Mark Billings, Exec. VP/Chief Operating Officer  
Margaret Crossman, MD, Sr. VP/Chief Medical Officer  
Jeff Feasel, President & Chief Executive Officer  
Kim Fulcher, VP/Chief Human Resource Officer  
Vivian Gallo, Sr. VP/General Counsel  
Bill Griffin, Director, System Research & Planning  
John Guthrie, Director, Communications  
Arvin Lewis, Sr. VP/Chief Revenue Officer  
Catherine Luchsinger, Chief Nursing Officer  
Dan Miles, MD, President, Medical Staff  
Steve Miles, MD, Sr. VP/Chief Quality Officer  
Jacob Nagib, Director, Engineering, Design & Construction  
Eric Peburn, Exec. VP/Chief Financial Officer  
Andy Pollock, Chaplain  
Raphael Ramirez, Market Development Specialist  
Shelly Shiflet, VP/Corporate Compliance Officer  
Tom Stafford, VP/Chief Information Officer  
Lisa Tyler, Corporate Controller  
Alberto Tineo, VP Operations  
Bob Wade, Board Compliance Expert, Barnes & Thornburg, LLP  
Mike Finch, Daytona News Journal

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Chairman Goodemote called the meeting to order at 4:00 p.m. The invocation was given, the Pledge of Allegiance recited, the Mission Statement read, and the roll recorded.

**APPROVAL OF MINUTES**

Discussion: Mr. Goodemote requested approval of the following minutes:

- Board of Commissioners Meeting- July 10, 2017
- Board & Audit/Finance Budget Workshop – August 7, 2017

Action: Mr. Ritchey moved to approve minutes as presented. Mr. Francati seconded the motion. Carried unanimously.

**APPROVAL OF AGENDA**

Action: Mrs. Schandel moved to approve the agenda. Mr. Ritchey seconded the motion. Carried unanimously.

## **MEDICAL STAFF REPORT**

### **Credentials Committee Actions – July 17 & August 21, 2017**

Discussion: Dr. Miles requested approval of the following physician applications as recommended by the Credentials Committee:

Action: **Edmund Andah, MD, OB/GYN Hospitlist, Associate**  
Mr. Ritchey moved to approve medical staff privileges for Dr. Edmund Andah. Mr. Francati seconded the motion. Carried unanimously.

Action: **Kenneth Andreoni, MD, Transplant Surgery, Associate**  
**Mark Johnson, MD, Transplant Surgery, Associate**  
**Elizabeth Thomas, DO, Transplant Surgery, Associate**  
Mrs. Schandel moved to approve medical staff privileges for Dr. Kenneth Andreoni, MD, Dr. Mark Johnson, MD and Elizabeth Thomas, MD. Mr. Francati seconded the motion. Carried unanimously.

Action: **Sarah Bajorek, DO, Neonatology, Associate**  
Mr. Francati moved to approve medical staff privileges for Dr. Bajorek. Mr. Ritchey seconded the motion. Carried unanimously.

Action: **Steve Grier, DO, Ophthalmology/Retina, Associate**  
Mrs. Schandel moved to approve medical staff privileges for Dr. Grier. Mr. Francati seconded the motion. Carried unanimously.

Action: **Abdallah Jeroudi, MD**  
Mr. Ritchey moved to approve medical staff privileges for Dr. Jeroudi. Mr. Francati seconded the motion. Carried unanimously.

Action: **Anna Liberatore, MD, Emergency Medicine (Deltona), Associate**  
Mrs. Schandel moved to approve medical staff privileges for Dr. Liberatore. Mr. Francati seconded the motion. Carried unanimously.

Action: **Hammad Masoodi, MD, Family Medicine, Associate**  
Mr. Ritchey moved to approve medical staff privileges for Dr. Masoodi. Mr. Francati seconded the motion. Carried unanimously.

Action: **Albert Michael, MD, Emergency Medicine (Deltona), Associate**  
Mr. Francati moved to approve medical staff privileges for Dr. Michael. Mrs. Schandel seconded the motion. Carried unanimously.

Action: **Eric Santos, MD, Psychiatry, Associate**  
Mr. Ritchey moved to approve medical staff privileges for Dr. Santos. Mrs. Schandel seconded the motion. Carried unanimously.

**Tabitha Townsend, MD, Hematology/Oncology, Associate**

- Action: Mr. Francati moved to approve medical staff privileges for Dr. Townsend. Mrs. Schandel seconded the motion. Carried unanimously.
- Action: **• Nathan Valin, MD, International Cardiology, Associate**  
Mrs. Schandel moved to approve medical staff privileges for Dr. Valin. Mr. Francati seconded the motion. Carried unanimously.
- Discussion: **Dr. Miles advised that Nashwa Wahba, DO, Internal Medicine, Associate,** was unable to attend but requested approval with the understanding that Dr. Wahba would make a future personal appearance before the board.
- Additionally, Dr. Miles requested approval of applications for following:
- Kyle Correll, MD, Family Medicine, Resident Affiliate**  
**• James Howell, MD, Family Medicine, Resident Affiliate**
- Action: Mrs. Schandel moved to approve medical staff privileges for Dr. Wahba and Resident Affiliate status for Dr. Correll and Dr. Howell. Mr. Ritchey seconded the motion. Carried unanimously.
- Discussion: Dr. Miles requested approval of applications for the following Non Physician Providers as recommended by the Credentials Committee:
- Candace Cassano, CRNA, Anesthesiology
  - Sarah Lower, ARNP, Hospice/Palliative Care
  - Cecil Parris, PA, Family Medicine
  - Katie Weisz, PA, Gastroenterology
- Action: Mr. Ritchey moved to approve of Non Physician Providers as presented. Mr. Francati seconded the motion. Carried unanimously.
- Discussion: Dr. Miles requested reappointments and privileges changes as follows (Section C-G attached):
- Reappointment Physician Applications (Section C)
  - Reappointment w/Changes (Section D)
  - Reappointment of Non Physician Providers (Section E)
  - Requests for Additional Privileges/Deletions/Other (Section F)
  - Changes in Status (Section G)
- Action: Mr. Ritchey moved to approve reappointments and privilege changes as presented (Section C-G). Mr. Francati seconded the motion. Carried unanimously.
- Discussion: Dr. Miles advised that the following items were provided for information only.
- Resignations (Section H)
  - Leave of Absence (Section I)
  - Locum Tenens Physicians (Section J)
- Discussion: Dr. Miles requested approval of the new criteria for Transcatheter Aortic Valve Replacement (TAVR) (attached) as recommended by the Credentials Committee.

Action: Mr. Ritchey moved to approve new criteria for Transcatheter Aortic Valve Replacement (TAVR). Mrs. Schandel seconded the motion. Carried unanimously.

## **MANAGEMENT REPORT**

Discussion: Mr. Feasel acknowledged and thanked members of the Medical Staff Executive Committee in attendance and introduced Dr. Emma Robertson Blackmore, Graduate Medical Education Quality and Patient Safety Coordinator for Halifax Health Family Medicine Residency Program.

### **Family Medicine Residency Program – Quality Improvement Studies**

- Dr. Blackmore provided an overview of the Quality Improvement and Patient Safety studies over the past year. Advising that the aim is to teach residents to provide safe, effective and high value care and master the necessary skills to integrate quality and patient safety into their future practice. Residents are encouraged to identify areas of concern that impact the care that they provide and develop appropriate studies. The significance and importance of the work is highlighted in the national and state recognition that our work has received through conference presentations. Dr. Blackmore introduced Dr. Katie McHugh, 3<sup>rd</sup> year resident, who provided the following overview of one of four posters that were presented at the Florida Academy of Family Physicians:

#### *Project to Reduce Opioid Prescriptions within the Family Health Center*

The national opioid epidemic was identified as an area of interest because of the broad range of educational and clinical issues that it raises. The study is a longitudinal project that forms part of our core QI curriculum. The study aims to reduce the number of opioid prescriptions within the clinic and to ensure the appropriateness of those prescriptions. It comprises three related cycles. To date we have: 1) established and developed accurate tracking systems for opioid prescriptions to enable individual feedback to physicians and patient level data analysis; 2) enhanced the curriculum to ensure that residents receive current evidence-based training on prescribing, including non-narcotic options, appropriate to their clinical experience; 3) we are reviewing and updating clinic policies and procedures to provide safe and effective care to patients on opioid prescriptions. We continue to look for opportunities to reduce the number of prescriptions written and educate our future physicians to provide optimal care.

**Center for Transplant Services** - Over the past few months, a new partnership was formed with University of Florida's department of transplant surgery. The University of Florida will assist with program oversight, surgical directorship, surgical coverage and back-up, reactivation of living donor program, and program outreach. In the next few weeks, University of Florida will assign a dedicated faculty member to the Halifax program to serve as primary transplant surgeon. The advantages our patients will receive as a result of this partnership include simpler dual wait listing process, living donor transplant option, double

surgeon coverage on cases, and no more periods of waitlist inactivity. The clinical excellence and expertise the UF faculty is planning to bring to Halifax will be invaluable to our community.

**Cardiovascular Services – TAVR Heart Program** - In August, Halifax launched its new TAVR heart program (Transcatheter Aortic Valve Replacement). TAVR is offering new treatment for patients with severe aortic stenosis who are not eligible for traditional open-heart surgery. This breakthrough technology allows a new valve to be replaced in a minimally invasive procedure. This procedure results in dramatically shorter length of stay and recovery when compared to traditional surgical repair. A multidisciplinary team including interventional cardiologists and cardiovascular surgeons work together to provide the best treatment option for the patient.

**Bariatric Surgery – Blue Distinction Specialty Care+** - East Coast Bariatrics at Halifax Health, our surgical weight loss program that is run in partnership with Florida Health Care Plans, was just notified by Blue Cross Blue Shield that we have received the Blue Distinction Specialty Care+ which is a national designation recognizing programs that demonstrate quality specialty care, safety, effectiveness and cost efficiency. Blue Distinction encourages healthcare professionals to improve the overall quality and delivery of healthcare nationwide to provide a credible foundation for local Blue Cross/Blue Shield Plans to design benefits tailored to meet employers' quality and cost objectives. The goal of the program is to help consumers find both quality and value for their specialty medical care.

**Halifax Hospice BeginAgain Children's Grief Program** - In August, Halifax Health Hospice celebrated the grand opening of its newest BeginAgain Children's Grief Center, located at 5210 South Orange Avenue in Orlando. The Lawrence E. Whelan BeginAgain Children's Grief Centers provide crucial support and understanding to children and families who have experienced the death of a loved one. Through physical activity, art, drama, music and other activities, this program encourages grief expression in children and teenagers ages 4-18, in a safe, child-friendly environment.

**Deltona Hospital** – HKS reviewed the Deltona Hospital schedule and budget, as well as an overview of the interior and exterior design. Advising that it is expected that project approval will be brought to the Board in November; and anticipated ground breaking to be scheduled in mid-December (presentation attached).

**Uncompensated Care** – Chief Review Officer, Arvin Lewis, provided an update on Uncompensated Care advising 40% of families in the Halifax District are under the Federal Poverty Level and that uncompensated care in FY 2016 totaled \$172.9 million in charges (presentation attached).

## **STRATEGIC & COMMUNITY HEALTH PLANNING COMMITTEE**

Discussion: None.

## **AUDIT & FINANCE REPORT**

Discussion: None. Financial statements were included in the board packet.

## **RECESS**

The Halifax Health Board of Commissioners meeting recessed at 5:10pm.

The **Halifax Health Board of Commissioners First Public Hearing** was called to order at 5:20pm and adjourned at 6:00pm.

## **RECONVENE**

The Halifax Health Board of Commissioners meeting was reconvened at 6:00pm.

## **CONSENT AGENDA**

Discussion: Mr. Goodemote requested approval of the Consent Agenda, which included following items:

- Financial Statements July 2017
- Financial Statements June 2017
- Capital Expenditures - \$50,000 and Over (Working Capital)
  - IV Pumps - \$2,316,642
  - Office Expansion /Renovation-NSB Family Practice - \$137,600
  - Ultrasound Machines – Intensive Care Units - \$99,375
  - Surgical Lighting – Cardiovascular Operating Room - \$92,360
  - High Dose Rate Brachytherapy Equip. – Oncology - \$74,700
  - Cytology Equipment – Laboratory - \$54,214
- Disposals – July & August 2017
- Audit Services Reports #2 & #3

Action: Mr. Ritchey moved to approve the consent agenda as presented. Mr. Francati seconded the motion. Carried unanimously.

## **OLD BUSINESS**

Discussion: None.

## **NEW BUSINESS**

Discussion: None. CIA Dashboard / Update included in board packet.

## **PUBLIC PARTICIPATION**

Discussion: None.

## **NEXT MEETING**

Discussion: Mr. Goodemote advised that the Board of Commissioners Final Public Hearing will be held on September 18, 2017 at 5:05pm in Conf. Room A; and the next regular Board of Commissioners meeting will be held on November 6, 2017 at 4:00pm in Conf. Room A.

**ADJOURN**

Discussion:                    There being no further business, the meeting adjourned at 6:25 pm.

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Chairman

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Secretary

**HALIFAX HOSPITAL MEDICAL CENTER**  
**BOARD OF COMMISSIONERS – FIRST PUBLIC HEARING**  
**Held at 303 North Clyde Morris Boulevard, France Tower, Daytona Beach, FL**  
**September 5, 2017**

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Present: Ed Connor, Assistant Secretary  
Dan Francati, Vice Chairman  
Harold Goodemote, Chairman  
Carl W. Lentz, M.D., Member  
Tom McCall, Secretary  
Glenn Ritchey, Member  
Susan Schandel, Treasurer

Also Present: Kent Bailey, Director of Finance  
Mark Billings, Exec. VP/Chief Operating Officer  
Margaret Crossman, MD, Sr. VP/Chief Medical Officer  
Jeff Feasel, President & Chief Executive Officer  
Kim Fulcher, VP/Chief Human Resource Officer  
Vivian Gallo, Sr. VP/General Counsel  
Bill Griffin, Director, System Research & Planning  
John Guthrie, Director, Communications  
Arvin Lewis, Sr. VP/Chief Revenue Officer  
Catherine Luchsinger, Chief Nursing Officer  
Dan Miles, MD, President, Medical Staff  
Steve Miles, MD, Sr. VP/Chief Quality Officer  
Jacob Nagib, Director, Engineering, Design & Construction  
Eric Peburn, Exec. VP/Chief Financial Officer  
Andy Pollock, Chaplain  
Raphael Ramirez, Market Development Specialist  
Shelly Shiflet, VP/Corporate Compliance Officer  
Tom Stafford, VP/Chief Information Officer  
Lisa Tyler, Corporate Controller  
Alberto Tineo, VP Operations  
Bob Wade, Board Compliance Expert, Barnes & Thornburg, LLP  
Mike Finch, Daytona News Journal

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The meeting was called to order by Chairman Goodemote at 5:20pm. The roll was recorded.

**PURPOSE OF MEETING**

Discussion: Mr. Goodemote stated that the purpose of this hearing was to:

- Adopt a tentative millage rate and tentative budget for fiscal year 2017-2018, and;
- Designate a date for the final public hearing to adopt a final millage rate and budget.

**BUDGET WORKSHOP UPDATE**

Discussion: Mr. Peburn provided an update on operating margin changes since the budget was presented at the August budget workshop, specifically, LIP reimbursement reduction, defined benefit pension expense increase and patient service revenue decrease due to reduction in area wage index (presentation attached). Mr. Peburn also reviewed historical operating margin comparisons, long range financial forecast/assumptions, and uses of property taxes (presentation attached).



**PROPOSED MILLAGE RATE**

Discussion: Mr. Goodemote advised that the proposed millage rate is 0.3781 mills; and that the rolled back rate is 0.7122 mills. The proposed millage rate is less than the rolled back rate. The floor was opened for public comment.

**PUBLIC COMMENT**

Discussion: Dr. Scott Klioze, Radiologist on staff at Halifax Health, expressed concern over the continued reduction of taxes and the impact that has had on team members who provide critical support to the physicians caring for patients. Dr. Klioze urged the board to consider this when discussing any further changes to the millage rate.

**RESOLUTION 2017-2018A – PROPOSED MILLAGE RATE**

Action: Mr. Connor moved to approve Resolution 2017-2018A to adopt the proposed millage rate of 0.3781 mills. Mr. Ritchey seconded the motion. Carried unanimously (roll call below).

- Ed Connor - Yes
- Dan Francati - Yes
- Harold Goodemote - Yes
- Carl W. Lentz., MD - Yes
- Susan Schandel - Yes
- Tom McCall - Yes
- Glenn Ritchey - Yes

**PROPOSED OPERATING BUDGET**

Discussion: Mr. Goodemote advised that the proposed operating budget for 2017-2018 had been reviewed and discussed at the budget workshop; that the proposed operating revenue of Halifax Health in the budget is \$560.7 million; and that only 1.1% of Halifax Health's revenue is generated from ad valorem taxes. The budget includes \$57.8 million for the cost of uncompensated care not paid for by taxes. The floor was opened for public comment.

**RESOLUTION 2017-2018B – PROPOSED BUDGET**

Action: There being no public comment, Mr. Ritchey moved to approve Resolution 2017-2018B to adopt the proposed budget. Mr. Francati seconded the motion. Carried unanimously (roll call below).

- Ed Connor - Yes
- Dan Francati - Yes
- Harold Goodemote - Yes
- Carl W. Lentz., MD - Yes
- Susan Schandel - Yes
- Tom McCall - Yes
- Glenn Ritchey - Yes

**FINAL PUBLIC HEARING**

Discussion: Mr. Goodemote advised that a date and time for the final public hearing needed to be scheduled. The meeting must be after 5:00 p.m. and cannot conflict with a meeting date of the School Board or the County Council.

Action: Following discussion, the board agreed to schedule the Final Public Hearing on Monday, September 18, 2017 at 5:05 p.m. in the France Tower Conference Room A at Halifax Health, 303 N. Clyde Morris Boulevard.

**ADJOURNMENT**

Action: There being no further business the meeting adjourned at 6:00pm

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Chairman

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Secretary

**HALIFAX HOSPITAL MEDICAL CENTER  
BOARD OF COMMISSIONERS – FINAL PUBLIC HEARING  
Held at 303 North Clyde Morris Boulevard, France Tower, Daytona Beach, FL  
September 18, 2017**

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Present: Ed Connor, Assistant Secretary  
Dan Francati, Vice Chairman  
Harold Goodemote, Chairman  
Carl W. Lentz, M.D., Member  
Tom McCall, Secretary  
Glenn Ritchey, Member  
Susan Schandel, Treasurer (via phone)

Also Present: Kent Bailey, Director of Finance  
Mark Billings, Exec. VP/Chief Operating Officer  
Jeff Feasel, President & Chief Executive Officer  
Kim Fulcher, VP/Chief Human Resource Officer  
Vivian Gallo, Sr. VP/General Counsel  
Bill Griffin, Director, System Research & Planning  
John Guthrie, Director, Communications  
Arvin Lewis, Sr. VP/Chief Revenue Officer  
Eric Peburn, Exec. VP/Chief Financial Officer  
Shawn Remington, Manager, Finance & Budget  
Andy Pollock, Chaplain  
Tom Stafford, VP/Chief Information Officer  
Lisa Tyler, Corporate Controller

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The meeting was called to order by Chairman Goodemote at 5:05pm. The roll was recorded.

**PURPOSE OF MEETING**

Discussion: Mr. Goodemote stated that the purpose of this hearing was to adopt a final millage rate and final budget for fiscal year 2017-2018.

**MILLAGE RATE**

Discussion: Mr. Goodemote advised that the tentatively adopted millage rate is 0.3781 mills and the tentatively adopted rate is less than the rolled back rate. The rolled back rate is 0.7122 mills

**PUBLIC COMMENT**

Discussion: None.

**RESOLUTION 2017-2018C – FINAL MILLAGE RATE**

Discussion: There being no comment, Mr. Goodemote stated that the rolled back rate is 0.7122. The final millage rate is less than the rolled back rate. The final millage rate for Halifax Hospital Medical Center is 0.3781 mills.

Action: Mr. Ritchey moved to approve Resolution 2017-2018C to adopt the final millage rate of 0.3781 mills. Dr. Lentz seconded the motion. Carried unanimously (roll call below).

- Ed Connor - Yes
- Dan Francati - Yes
- Harold Goodemote - Yes
- Carl W. Lentz, MD - Yes
- Tom McCall - Yes
- Glenn Ritchey - Yes
- Susan Schandel - Yes

### **OPERATING BUDGET**

Discussion: Mr. Goodemote advised that the proposed revenue of Halifax Medical Center in the budget is \$560.7 million; and that only 0.4% of Halifax Health's revenue is generated from net ad valorem taxes available for healthcare services, which will be exhausted by the 14<sup>th</sup> day of the fiscal year. The budget includes \$57.8 million for the cost of uncompensated care not paid for by taxes.

### **PUBLIC COMMENT**

Discussion: None.

### **RESOLUTION 2017-2018D – FINAL BUDGET**

Action: There being no public comment, Mr. Connor moved to approve Resolution 2017-2018D to adopt the final budget. Mr. Francati seconded the motion. Carried unanimously (roll call below).

- Ed Connor - Yes
- Dan Francati - Yes
- Harold Goodemote - Yes
- Carl W. Lentz., MD - Yes
- Tom McCall - Yes
- Glenn Ritchey - Yes
- Susan Schandel - Yes

### **ADJOURNMENT**

Action: There being no further business the meeting adjourned at 5:11pm.

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Chairman

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Secretary



# HALIFAX HEALTH

TO: Members of the Board of Commissioners  
FROM: Daniel Miles, MD, Medical Staff President  
DATE: November 6, 2017  
RE: Credentials Committee Actions, September 18, October 16, 2017

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The Medical Staff report is attached for the Board's review and approval at the Board of Commissioner's meeting on November 6, 2017.

## PHYSICIAN INTRODUCTION: Nashwa Wahba, DO

### **BOARD APPROVAL REQUIRED**

#### **A. INITIAL APPLICATIONS FOR PHYSICIANS** *Action Required (Applicants present should introduce themselves to the BOC prior to a Motion to Approve for each applicant)*

The following practitioners were required to appear before the **Credentials Committee** on September 18, October 16, 2017 and are presented to the Board of Commissioners for approval:

John Conboy, MD	Emergency Medicine - Deltona	Associate
Gershwin Cross, MD	Neonatology	Associate
Kimberly De La Mata, MD	Emergency Medicine - Deltona	Associate
Mariano De La Mata, MD	Emergency Medicine - Deltona	Associate
Philip Dolin, MD	Emergency Medicine - Deltona	Associate
Uril Greene, MD	Emergency Medicine - Deltona	Associate
Evgeny Goldman, MD	Family Medicine	Associate
Brittney Lambie, MD	Orthopaedic Surgery	Associate
Lauren Powell, MD	Family Medicine	Associate
Stefanie Vallancourt, DO	Anesthesiology	Associate
Leslie Williams, MD	Family Medicine	Community Affiliate
Ameigh Worley, MD	OB/GYN	Associate

#### **B. INITIAL APPLICATIONS FOR NON PHYSICIAN PROVIDERS –** *Action Required (No appearance required; may propose Motion to Approve for entire group)*

The following practitioners were reviewed and approved by the Credentials Committee on September 18, October 16, 2017 and are presented to the Board of Commissioners for approval:

Jessica Huckaby, ARNP	Emergency Medicine	Stephen Viel, MD
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Jeffrey James, CCP  
Holly Mulvey, ARNP  
Ambili Nair, CRNA  
Allison Justice, PA  
Ashley Steblein Pascucci, ARNP

CardioThoracic Surgery  
Family Medicine  
Anesthesiology  
Emergency Medicine  
Pulmonology

Sohit Khanna, MD  
Gerald Woodard, DO  
Derrick Payne, MD  
Stephen Viel, MD  
Rajesh Ailani, MD

**C. REAPPOINTMENTS AND PRIVILEGE CHANGES – *Action Required (No appearance required; may propose Motion to Approve for entire group)***

REAPPOINTMENT PHYSICIAN APPLICATIONS – *SEE SECTION (C) OF THE REPORT*

REAPPOINTMENT WITH CHANGES – *SEE SECTION (D) OF THE REPORT*

REAPPOINTMENT NPP APPLICATIONS - *SEE SECTION (E) OF THE REPORT*

REQUESTS FOR ADDITIONAL PRIVILEGES/DELETIONS/OTHER - *SEE SECTION (F) OF THE REPORT*

CHANGES IN STATUS - *SEE SECTION (G) OF THE REPORT*

***BOARD ENDORSEMENT REQUIRED***

**D. RESIGNATIONS/LEAVE OF ABSENCE/AUTOMATIC RELINQUISHMENTS –** The following practitioners have resigned from the Medical Staff, been granted a Leave of Absence, or have had their privileges automatically relinquished, for the reasons specified below:

<u>Practitioner</u>	<u>Specialty</u>	<u>Status: Reason</u>
Barber, Bonnie, CRNFA	OB/GYN	Now employed by HH
Cornel, Laurette, ARNP	Internal Medicine	No longer needs privileges
Eisenhut, Natalie, ARNP	Plastic Surgery	No longer needs privileges
LaStarza, Mark, MD	Internal Medicine	No longer needs privileges Daytona Beach area
Le, Elizabeth, MD	Family Medicine	Reappointment application not returned
Mateo, Rod, MD	General Surgery	No longer employed by HH
Messiner, Ryan, DO	Vascular Surgery	No longer with UF
Minske, Candy, DA	Pediatric Dentistry	No longer employed by Daytona Pediatric Dentistry
Wingard, Martha, PA	Hand/Plastic Surgery	No longer needs privileges
Wyatt, Jimmy, PA	Cardiology	Relocating out of state

**E. OTHER - None**



HALIFAX HEALTH  
MEDICAL CENTER

**BOARD OF COMMISSIONERS – November 06, 2017**  
**CREDENTIALS COMMITTEE ACTIONS – September 18, 2017, October 16, 2017**

**FOR BOARD ACTION**

**A. INITIAL PHYSICIAN APPLICATIONS RECOMMENDED FOR APPROVAL**  
**INTERVIEW NOT REQUIRED FOR RESIDENT AFFILIATE**

John W. Conboy, MD	Emergency Services ( <i>board certified</i> )	Associate
Gershwin Cross, MD	Neonatology ( <i>board certified</i> )	Associate
Kimberly Bruno De La Mata, MD	Emergency Medicine ( <i>board certified</i> )	Associate
Mariano De La Mata, MD	Emergency Services ( <i>board certified</i> )	Associate
Philip Dolin, MD	Emergency Medicine ( <i>board certified</i> )	Associate
Evgeny Goldman, MD	Family Medicine (Faculty) ( <i>board certified</i> )	Associate
Uril Greene, MD	Emergency Medicine ( <i>board certified</i> )	Associate
Brittney L. Lambie, MD	Orthopaedic Surgery ( <i>board eligible</i> )	Associate
Lauren Powell, MD	Family Medicine ( <i>board eligible</i> )	Associate
Stefanie M. Vallancourt, DO	Anesthesiology ( <i>board eligible</i> )	Associate
Leslie Williams, MD	Family Medicine ( <i>board eligible</i> )	Community Affiliate
Ameigh Worley, MD	OB/GYN ( <i>board certified</i> )	Associate

**B. INITIAL NON PHYSICIAN PROVIDERS RECOMMENDED FOR APPROVAL**

Jessica Huckaby, ARNP	Emergency Medicine	Employed by Halifax Health
Jeffrey James, CCP	Cardio Thoracic Surgery	Employed by CSI
Allison Justice, PA	Emergency Medicine	Employed by Halifax Health
Holly Mulvey, ARNP	Family Medicine	Employed by Dr. Woodard
Ambili Nair, CRNA	Anesthesiology	Employed by Sheridan
Ashley E. Steblein Pascucci, ARNP	Pulmonology	Employed by Dr. Ailani

**C. PHYSICIAN REAPPOINTMENTS RECOMMENDED FOR APPROVAL**

Department of Anesthesiology

Dunham, Anne, MD	Anesthesiology	Active
Rachman, Nathan, MD	Anesthesiology	Active

Department of Emergency Medicine

No reappointments this month

Department of Medicine

Ailani, Rajesh, MD	Pulmonology	Courtesy Affiliate
Boye, Richard, MD	Family Medicine	Senior Active
Braithwaite, Richard, MD	Internal Medicine	Active
Dimayuga, Eloisa, MD	Infectious Disease	Active

Dontfraid, Franklyn, MD	Infectious Disease	Active
Lopez, Maria, MD	Interventional Cardiology	Active
McDonald, David, MD	Neurology	Active
Ombogo, Anthony, MD	Family Medicine	Active
Rao, Surya, MD	Cardiology	Active
White, Donald, MD	Family Medicine	Senior Active

#### Department of Obstetrics/Gynecology

Haddox, Linda, MD	OB/GYN	Active
Meyers, John, MD	OB/GYN	Active
Mauldin, Jill, MD	Maternal & Fetal Medicine	Courtesy
Stanley, Christopher, MD	Gynecology	Active

#### Department of Oncology

No reappointments this month

#### Department of Pathology

No reappointments this month

#### Department of Pediatrics

No reappointments this month

#### Department of Psychiatry

No reappointments this month

#### Department of Radiology

Burkett, Charles, MD	Diagnostic Radiology	Active
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#### Department of Surgery

Bianchi, Joseph, MD	General Surgery	Senior Active
Schalit, Curtis, DDS	Oral/Maxillofacial Surgery	Active
Sebastien, Joel, MD	General Surgery	Active
Ramshaw, David, MD	General Surgery	Senior Active

### **D. PHYSICIAN REAPPOINTMENTS (*WITH CHANGES*) RECOMMENDED FOR APPROVAL**

Bernardo, George, MD ( <i>Active to Community Affiliate</i> )	Medicine	Family Medicine
Chudasama, Prady, MD ( <i>Active to Community Affiliate</i> )	Medicine	Internal Medicine
Doliner, Stuart, MD ( <i>Courtesy Affiliate to Community Affiliate</i> )	Anesthesiology	Anesthesiology
Farach, Carlos, MD ( <i>Active to Community Affiliate</i> )	Medicine	Internal Medicine
Jones, Gordon, MD ( <i>Courtesy Affiliate to Community Affiliate</i> )	Medicine	Family Medicine
Kendrick, Mark, MD ( <i>Active to Community Affiliate</i> )	Medicine	Family Medicine
Lawindy, Madiey, MD ( <i>Active to Community Affiliate</i> )	Pediatrics	Pediatrics
Oung, Twethida, MD ( <i>Associate to Active</i> )	Internal Medicine	Medicine
Patel, B.I. (Bhadresh), MD ( <i>Active to Community Affiliate</i> )	Medicine	Family Medicine



Halpern, Shravanti, MD ( <i>Associate to Active</i> )	Emergency Medicine	Emergency Medicine
Wiedel, Lisa, MD ( <i>Associate to Active</i> )	OB/GYN	OB/GYN

#### **E. NON PHYSICIAN PROVIDERS REAPPOINTMENTS RECOMMENDED FOR APPROVAL**

Craddock, Sharon, ARNP	Jaideep Hoskote, MD	Nephrology
Jefferson, Rosalie, ARNP	Raul Zimmerman, MD	Hospice and Palliative Medicine
Mather, Nancy, ARNP	Raul Zimmerman, MD	Hospice and Palliative Medicine
Meyers, Robert, ARNP	Antony Denard, MD	Orthopaedic, Colon Rectal, Ob/Gyn
Morton, Wendy, ARNP	James Henson, MD	Family Medicine
Olotch, Berryl, ARNP	Mazhar Kayyal, MD	Internal Medicine
Powers, Bethann, CRNA	Derrick Payne, MD	Anesthesiology
Rassi, Keri, ARNP	Stephen Viel, MD	Emergency Medicine

#### **F. REQUEST(S) FOR ADDITIONAL PRIVILEGES / DELETIONS / OTHER RECOMMENDED FOR APPROVAL**

Alexander, Michal, Dental Asst	<i>Additional supervising physician: Curtis Schalit, DDS</i>
Harman, Peter, MD	<i>Additional privileges for Pediatric Critical Care (with recommendation of 20 proctored cases by the Department Chair of Pediatrics and Dr. Lindsey Johnson)</i>
Kenney-Kersey, Sheri, Dental Asst	<i>Additional supervising physician: Curtis Schalit, DDS</i>
Perez, Marizsa, ARNP	<i>Additional supervising physicians; Halifax Health Hospitalist group</i>
Thek, Kerry, MD	<i>Request for 6 month Leave of Absence due to change in practice</i>
Tso, Tina, MD	<i>Withdrawing request for Newborn Circumcision privileges</i>

#### **G. CHANGE(S) IN STATUS/SPECIALTY/PRIVILEGES RECOMMENDED FOR APPROVAL**

Chopra, Neena, MD	Community Affiliate	Honorary	Pediatrics
Latif, Sajid, MD ( <i>initial staff date: 9/10/97</i> )	Active	Senior Active	Medicine/Nephrology

#### **FOR INFORMATION ONLY**

#### **H. RESIGNATIONS:**

Barber, Bonnie, CRNFA (is now employed)	Ob/Gyn	11/06/2017
Cornel, Laurette, ARNP ( <i>no longer wishes to maintain privileges</i> )	Internal Medicine	09/05/2017
Eisenhut, Natalie, ARNP ( <i>no longer needs privileges</i> )	Plastic Surgery	09/05/2017
LaStarza, Mark, MD (No longer wishes to maintain privileges at HH)	Internal Medicine	09/05/2017
Le, Elizabeth, MD(Reappointment not returned)	Family Medicine	11/06/2017
Mateo, Rod, MD (no longer employed)	General Surgery	08/26/2017
Messiner, Ryan, DO (Leaving UF)	Vascular Surgery	11/06/2017
Minske, Candy, Dental Asst ( <i>no longer employed with Daytona Pediatric Dentistry</i> )	Pediatric Dentistry	09/30/2017
Wingard, Martha, E, PA ( <i>no longer wishes to maintain privileges</i> )	Hand/Plastic Surgery	09/30/2017
Wyatt, Jimmy, PA (moving out of state)	Cardiology	11/06/2017

**I. LEAVE OF ABSENCE:**

***For Information Only:***

Livingston, Denise, ARNP  
Thek, Kerry, MD

Surgery  
Pediatrics

**J. LOCUM TENENS PHYSICIANS:**

***For Information Only - Ongoing Privileges this month:***

Abt, John, DO  
Ballarini, Joseph, MD  
Bannerman, Christian, MD  
Bruce, Willie, DO  
Gamez, Jason, MD  
Silverman, Jonathan, MD  
Smith, Lawrence, DO  
Ward, Frederick, MD  
Wilson, David, MD  
Casas-Reyes, Carlos, MD  
Cumberbatch, Gregory, MD  
Tiesi, James, MD  
Tran, Nam, MD  
Hervie, Peter, MD  
Liriano, Humberto, MD  
Lopez, Debra, MD  
Combs, Wallace, MD  
Fisher, Anton, DO  
Upton, Monique, MD

Emergency Medicine - Deltona  
Emergency Medicine - Deltona  
Emergency Medicine - Deltona  
Emergency Medicine - Deltona  
Emergency Medicine - Deltona  
Emergency Medicine - Deltona  
Emergency Medicine - Deltona  
Emergency Medicine - Deltona  
Emergency Medicine - Deltona  
Neurosurgery  
Neurosurgery  
Neurosurgery  
Neurosurgery  
Pediatric Critical Care  
Pediatric Critical Care  
Pediatric Critical Care  
Psychiatry  
Psychiatry  
Psychiatry

**K. OTHER BUSINESS: None**

**HALIFAX HEALTH MEDICAL CENTER**  
**BOARD OF COMMISSIONERS**  
**NEW PHYSICIAN PROFILES**  
**November 6, 2017**  
**(Credentials Committee September 18, October 16, 2017)**

**Kimberly Bruno-De La Mata, MD**  
**Emergency Medicine**

Kimberly Bruno-De La Mata, MD, is requesting privileges in the Department of Emergency Services and is in practice with Halifax Health Emergency Department of Deltona.

**Medical Education:**

West Virginia University 05/01/1990 to 05/30/1994

**Internship**

Ruby Memorial Hospital - WVU 07/01/1994 to 06/30/1995

Internal Medicine

**Residency**

Ruby Memorial Hospital - WVU 07/01/1995 to 06/30/1997

Internal Medicine

**Board Certification:**

American Board of Internal Medicine - Internal Medicine

**John Conboy, MD**  
**Emergency Medicine**

John Conboy, MD, is requesting privileges in the Department of Emergency Services and is in practice with Halifax Health Emergency Department of Deltona.

**Medical Education:**

University of Florida College of Medicine 05/01/1993 to 06/30/1997

**Internship**

Tallahassee Memorial Regional Med Center 07/01/1997 to 06/30/1998

Family Practice

**Residency**

University of Florida College of Medicine 07/01/2000 to 04/30/2001

Orthopedic Surgery

**Board Certification:**

American Board of Family Medicine - Family Medicine

**HALIFAX HEALTH MEDICAL CENTER**  
**BOARD OF COMMISSIONERS**  
**NEW PHYSICIAN PROFILES**  
**November 6, 2017**  
**(Credentials Committee September 18, October 16, 2017)**

**Gershwin Cross, MD**  
**Neonatology**

Gershwin Cross, MD, is requesting privileges in the Department of Pediatrics and is in practice with Halifax Health NICU.

**Medical Education:**

University of the West Indies 09/01/1987 to 12/01/1992

**Residency**

Newark Beth Israel Medical Center 06/26/2006 to 06/25/2009

Pediatrics

**Fellowship**

Robert Wood Johnson University Hospital 07/01/2009 to 06/30/2012

Neonatal - Perinatal - Medicine

**Board Certification:**

American Board of Pediatrics - Pediatrics

**Mariano De La Mata, MD**  
**Emergency Medicine**

Mariano De La Mata, MD, is requesting privileges in the Department of Emergency Services and is in practice with Halifax Health Emergency Department of Deltona.

**Medical Education:**

West Virginia University School of Medic 08/01/1992 to 05/31/1996

**Internship**

West Virginia University School of Medic 07/01/1996 to 06/30/1997

Internal Medicine/Pediatrics

**Residency**

West Virginia University School of Medic 07/01/1997 to 06/30/2000

Internal Medicine/Pediatrics

**Board Certification:**

American Board of Internal Medicine - Internal Medicine

**HALIFAX HEALTH MEDICAL CENTER**  
**BOARD OF COMMISSIONERS**  
**NEW PHYSICIAN PROFILES**  
**November 6, 2017**  
**(Credentials Committee September 18, October 16, 2017)**

**Philip Dolin, MD**  
**Emergency Medicine**

Philip Dolin, MD, is requesting privileges in the Department of Emergency Services and is in practice with Halifax Health Emergency Department of Deltona.

**Medical Education:**

SUNY Upstate Medical Center 09/01/1980 to 06/30/1984

**Internship**

Long Island Jewish Medical Center 07/01/1984 to 06/30/1985

Internal Medicine

**Residency**

University of Florida Jacksonville Physi 07/01/1985 to 06/30/1987

Emergency Medicine

**Board Certification:**

National Board of Physicians and Surgeons(NBPAS) - Emergency Medical Services

**Evgeny Goldman, MD**  
**Family Medicine**

Evgeny Goldman, MD, is requesting privileges in the Department of Medicine and is in practice with Center for Family & Sports Medicine.

**Medical Education:**

St. Matthews University School of Medicine 09/01/2008 to 05/30/2012

**Internship**

Columbus Regional Medical Center 06/01/2012 to 06/30/2013

Family Medicine

**Residency**

Columbus Regional Medical Center 06/01/2013 to 06/30/2015

Family Medicine

**Fellowship**

University of Mississippi Medical Center 07/01/2015 to 06/30/2016

Sports Medicine Primary Care

**Board Certification:**

American Board of Family Medicine - Sports Medicine

HALIFAX HEALTH MEDICAL CENTER

BOARD OF COMMISSIONERS  
NEW PHYSICIAN PROFILES

November 6, 2017

(Credentials Committee September 18, October 16, 2017)

**Uril Greene, MD**  
**Emergency Medicine**

Uril Greene, MD, is requesting privileges in the Department of Emergency Services and is in practice with Halifax Health Emergency Department of Deltona.

**Medical Education:**

University of North Carolina 08/01/1973 to 12/31/1977

**Internship**

Malcolm Grow Medical Center 03/01/1978 to 02/28/1979

Family Medicine

**Residency**

Georgetown Univ. School of Medicine 07/01/1990 to 12/31/1993

Orthopedic Surgery

**Board Certification:**

American Board of Family Medicine - Family Medicine

**Brittney Lambie, MD**  
**Orthopaedic Surgery**

Brittney Lambie, MD, is requesting privileges in the Department of Surgery and is in practice with Orthopaedic Clinic of Daytona Beach.

**Medical Education:**

Georgetown University 08/01/2007 to 05/31/2011

**Internship**

Orlando Health 07/01/2011 to 06/30/2012

Orthopaedic Surgery

**Residency**

Orlando Health 07/01/2012 to 06/30/2016

Orthopaedic Surgery

**Fellowship**

SUNY Upstate Medical Center 08/01/2016 to 07/31/2017

Orthopedic Spine Surgery

**Board Certification:**

American Board of Orthopaedic Surgery (Board Eligible)

**HALIFAX HEALTH MEDICAL CENTER**  
**BOARD OF COMMISSIONERS**  
**NEW PHYSICIAN PROFILES**  
**November 6, 2017**  
**(Credentials Committee September 18, October 16, 2017)**

**Lauren Powell, MD**  
**Family Medicine**

Lauren Powell, MD, is requesting privileges in the Department of Medicine and is in practice with Halifax Health Hospitalists.

**Medical Education:**

Wayne State University 09/01/2010 to 05/31/2014

**Residency**

Halifax Medical Center 07/01/2014 to 06/30/2017

Family Medicine

**Board Certification:**

American Board of Family Medicine – (Board Eligible)

**Stefanie Vallancourt, DO**  
**Anesthesiology**

Stefanie Vallancourt, DO, is requesting privileges in the Department of Anesthesiology and is in practice with Sheridan Healthcorp, Inc..

**Medical Education:**

Lake Erie College of Osteopathic Medicine 07/01/2009 to 06/30/2013

**Internship**

University of Florida College of Medicine 07/01/2013 to 06/30/2014

Anesthesiology

**Residency**

University of Florida College of Medicine 07/01/2014 to 06/30/2017

Anesthesiology

**Board Certification:**

American Board of Anesthesiology – (Board Eligible)

**HALIFAX HEALTH MEDICAL CENTER**  
**BOARD OF COMMISSIONERS**  
**NEW PHYSICIAN PROFILES**  
**November 6, 2017**  
**(Credentials Committee September 18, October 16, 2017)**

**Leslie Williams, MD**  
**Family Medicine**

Leslie Williams, MD, is requesting privileges in the Department of Medicine and is in practice with Halifax Health Primary Care.

**Medical Education:**

Morehouse School of Medicine 07/01/2010 to 06/30/2015

**Residency**

Halifax Family Medicine Residency Program 07/01/2014 to 06/30/2017

Family Medicine

**Board Certification:**

American Board of Family Medicine - Family Medicine

**Ameigh Worley, MD**  
**OB/GYN**

Ameigh Worley, MD, is requesting privileges in the Department of OB/GYN and is in practice with Ob Hospitalist Group.

**Medical Education:**

University of South Florida 08/01/2005 to 12/31/2009

**Internship**

Emory University 07/01/2010 to 06/30/2011

OB/GYN

**Residency**

Wake Forest University School of Medicine 07/01/2012 to 06/30/2014

OB/GYN

**Board Certification:**

American Board of Obstetrics & Gynecology - Obstetrics & Gynecology





# HALIFAX HEALTH

## Management Report – Board of Commissioners November 2017

### **Presentations**

Quality – Q3 FY 2017 – Dr. Miles, Suzanne Lovelady, Keith Sofiak

Family Medicine Residency Quality Improvement Posters – Dr. Emma Robertson-Blackmore

Deltona Hospital – HKS – Carl Beers

### **Information Technology - Team Recognition**

As previously reported, Halifax Health was named one of the “Best Places to Work in IT” by *IDG's Computerworld* – the leading information technology media brand dedicated to being the voice of business technology. *Computerworld* lists the availability of training opportunities, tuition reimbursement, commitment to promote from within, telework and flexible-scheduling options as reasons why Halifax Health is a great organization for information technology professionals. Halifax was featured June-July 2017 edition of *Computerworld* and we are pleased to present a replica of that cover page to our Chief Information Officer, Tom Stafford, and his team in acknowledgement of this accomplishment.

### **Family Medicine Residency Program**

The residency program continues to present the results from their ongoing Quality and Patient Safety projects at State and National conferences. In April, residents and faculty attended and presented at the Florida Academy of Family Physicians (FAFP), which is composed of more than 5,400 family medicine physicians, resident physicians, and medical students from across the state. FAFP works to advance the specialty of family medicine by promoting excellence and improvement in the healthcare of all Floridians. Their priority is to help members to become the best family physicians they can be through effective communication, legislation/regulation, education, advocacy, research and motivation.

Faculty from the residency program were invited to speak on a variety of topics.

- Dr. Carrie Vey (Program Director) gave a podium presentation on the importance and assessment of patient “Health Literacy”.
- Dr. Emma Robertson Blackmore led two workshops, one to resident faculty attendees on ‘Giving Effective Feedback’ and the other to medical students on ‘End of Life Discussions’.
- Dr. Neil Oslos was a co-moderator for the entire CME program and presented the ABFM Self-Assessment Module workshop for Heart Failure and Coronary Artery disease.
- Residents presented 4 posters, 3 of which won prizes in their respective categories including 2<sup>nd</sup> place in the cutting edge research symposium.

In September, Dr. Katie McHugh, presented her poster on reducing opioid prescriptions within the Family Health Center. Today we are pleased to welcome Dr. Joshua Grube and Dr. Marcia Newby-Goodman who will be presenting their posters:

- Improving Patient Telephone Access to Clinic Staff – Dr. Grube
- Female Athlete Triad – Dr. Newby-Goodman

### **Biketoberfest**

We had a very busy Biketoberfest in our trauma center with 34 trauma admissions over a four-day period, 12 of which were motorcycle crashes, resulting in trauma alerts from EMS. When the emergency department receives a trauma alert from the field, the emergency department physician may request a trauma activation. This requires the immediate mobilization of a multidisciplinary team consisting of physicians, nurses and other allied health professionals specifically trained to provide expert rapid assessment and treatment to the complex needs of critically injured residents and visitors to Volusia County.

During this year's 25<sup>th</sup> anniversary event, Halifax Health saw 13 Biketoberfest-related trauma team activations. The median age of patients admitted was 55 years, reflecting the upward trend of aging baby boomers who continue to participate in motorcycle events. Approximately 33.3 percent of the riders were reported as wearing helmets, 80 percent of those admitted were male, and 73.3 percent of those admitted lived outside of Volusia County.

### **Hurricane Irma**

As always, the team members of Halifax Health rallied before, during and after Hurricane Irma to ensure that our community was cared for at all times. All of the Halifax Health emergency departments remained open and accepting patients throughout the storm. Physicians, staff, their families and pets were all welcome to weather the storm at HHMC, HHMCPO, the Hospice Care Centers in Port Orange and Ormond Beach and the Free Standing Emergency Department in Deltona. We also housed several EVAC teams during the storm so they could be positioned and ready to respond to the community quickly following the storm. None of our facilities suffered any major damage. Some specifics are below:

Among all of the facilities, we housed/sheltered:

- Over 90 physicians
- 500 family members
- Provided day care for over 75 children per shift per day
- Over 100 pets

### **Flu Vaccinations**

#### **Employee Health – Flu Vaccinations**

Flu season is upon us again. Our flu vaccination compliance in 2016-2017 was 80 percent, which was less than last year's compliance of 86 percent. We attribute this reduction to challenges with using an intradermal vaccination this past year. We initially felt that this preparation would increase our numbers because it is given just under the skin instead of into the muscle. However, many team members had an expected redness and swelling to the site of injection and therefore many opted not to be vaccinated. Employee Health has returned this year to the intramuscular injection with hopes of recapturing and exceeding our 2015-2016 compliance of 86 percent. For the second year in a row Employee Health achieved an overall 100 percent compliance of acceptance or declination of the flu vaccination. The flu vaccination initiative is a great team effort and ensures the health and safety of the patients that we serve each and every day. The employee health team will be performing roving clinics throughout the organization and at off-site locations over the next several weeks; as well as providing

vaccinations every Tuesday & Thursday in the Employee Health Office and on the First Floor France Tower area outside the Café. To date Employee Health has vaccinated over 3000 team members for this flu season. Beginning November 1, if a team member has not received a flu vaccination, they will be required to wear a mask when within six feet of a patient.

### **Cornerstone**

As part of our ongoing commitment to our Cornerstone culture and continuous performance improvement, Halifax Health held its 6<sup>th</sup> Annual Cornerstone Event during October. The event is mandatory for all team members and is an opportunity to re-commit to our service and quality standards and to understand the priorities of Halifax Health as we move into a new fiscal year. Our theme this year is "Own It", encouraging every team member to take responsibility for their own performance every day in order to deliver on our service philosophy of "Exceptional Service, Every Encounter, Every Day to Everyone".

### **Deltona Construction Update**

- Site filling is 100% complete
- Application for site utilities (underground utilities) permit has been submitted
- Site utilities work is out for bid
- Team is working on the budget and adjusting for market escalation as it becomes available
- Halifax on-site construction office has been established

### **Halifax Health Welcomes Two New Primary Care Providers**

Halifax Health – Primary Care is proud to announce two new providers in our area. Anthony Stover, DO has joined our primary care office in New Smyrna Beach and Leslie Williams, MD has joined our Ormond Beach Primary Care location. Both are accepting new patients.

### **Marketing/Communications Update**

**Through Oct. 1: Port Orange Family Days.** Halifax Health was a proud sponsor of Port Orange Family Days 2017.

**October 4. Halifax Health Live Your Life Well Radio on JOY 106.3 FM.** This weekly radio show, hosted by Halifax Health Team Members Rev. John Long and Sharon James, RN, features a variety of healthcare topics and community information. Topic: Breast Cancer Awareness.

**October 4. Free Car Seat Safety Check.** Halifax Health – Healthy Communities is offering free car seat safety checks the first Wednesday of each month from 1 to 3 pm at Halifax Health Medical Center, France Tower. This program is presented in conjunction with SafeKids Volusia/Flagler Counties.

**October 4. Registered Nurse Recruitment & Networking Event.** Halifax Health hosted this recruitment and networking event at Houligan's in Ormond Beach seeking registered nurses. Registered nurses and those considering a nursing career were encouraged to attend.

**October 5. Speakers and Sneakers Series.** Each month, Halifax Health Medical Center of Daytona Beach presents this educational program for residents that offers free monthly presentations featuring a wide variety of healthcare topics. Participants are encouraged to walk their choice of indoor and outdoor trails on the Halifax Health campus after the presentation event. Walking logs are available for participants.

**October 6: Daytona Blues Festival.** Halifax Health is proud to be a sponsor of the Daytona Blues Festival. This three-day music festival brings blues musicians from around the country to Daytona Beach. Funds raised benefit the Level II NICU (Neonatal Intensive Care Unit) at Halifax Health, in addition to other women and children's initiatives. October 6 is the festival's "Women in Blues Night" presented by Halifax Health.

**October 7: Mud Fest.** A part of the Live Your Life Well race series, this event takes place at Camp Winona in DeLeon Springs. [www.lylwseries.com](http://www.lylwseries.com).

**October 7. Celebrate Pink Event.** Tanger Outlets and Halifax Health have partnered for this event to raise breast cancer awareness. The daylong event will include a Pink Family Festival featuring face painting and balloon artists, music, a Halifax Health educational booth, an interactive art mural and a Zumbathon. Partial proceeds will support Halifax Health – Center for Oncology.

**October 8. Deltona Fire Department Open House.** 11 am – 3 pm.

**October 11. Halifax Health Live Your Life Well Radio on JOY 106.3 FM.** This weekly radio show, hosted by Halifax Health Team Members Rev. John Long and Sharon James, RN, features a variety of healthcare topics and community information. Topic: Center for Oncology's latest cancer treatment technology.

**October 18. Halifax Health Live Your Life Well Radio on JOY 106.3 FM.** This weekly radio show, hosted by Halifax Health Team Members Rev. John Long and Sharon James, RN, features a variety of healthcare topics and community information. Topic: Cardiac Pulmonary/COPD.

**October 25. Halifax Health Live Your Life Well Radio on JOY 106.3 FM.** This weekly radio show, hosted by Halifax Health Team Members Rev. John Long and Sharon James, RN, features a variety of healthcare topics and community information. Topic: Neuro/Stroke Awareness.

**October 28. American Cancer Society Making Strides Against Breast Cancer Walk.** Join our Halifax Health Lifesavers walk team once again in this annual walk/run, which is Volusia County's largest outdoor fundraising event. Riverfront Park, S. Beach Street, Daytona Beach.

**October 29. 6<sup>th</sup> Annual Lighthouse Loop Half Marathon & 5K.** A part of the Live Your Life Well Series, this race starts at the base of the Dunlawton Bridge in Port Orange. [www.lylwseries.com](http://www.lylwseries.com).

**November 1. Halifax Health Live Your Life Well Radio on JOY 106.3 FM.** This weekly radio show, hosted by Halifax Health Team Members Rev. John Long and Sharon James, RN, features a variety of healthcare topics and community information. Topic: Hospice and Palliative Care.

**November 1. Free Car Seat Safety Check.** Halifax Health – Healthy Communities is offering free car seat safety checks the first Wednesday of each month from 1:00 to 3:00 pm at Halifax Health Medical Center, France Tower. This program is presented in conjunction with SafeKids Volusia/Flagler Counties.

**November 2. 5<sup>th</sup> Annual Volusia Flagler Family YMCA Corporate 5K and Dance Party.** This event is held annually on City Island in downtown Daytona Beach. It is a part of the 2017 Live Your Life Well Race Series.

**November 2. Speakers and Sneakers Series.** Each month, Halifax Health Medical Center of Daytona Beach presents this educational program for residents that offers free monthly presentations featuring a wide variety of healthcare topics. Participants are encouraged to walk their choice of indoor and outdoor trails on the Halifax Health campus after the presentation event. Walking logs are available for participants.

**November 4. City of Port Orange 150<sup>th</sup> Year Celebration.** Halifax Health is a proud sponsor of this event.

**November 8. Halifax Health Live Your Life Well Radio on JOY 106.3 FM.** This weekly radio show, hosted by Halifax Health Team Members Rev. John Long and Sharon James, RN, features a variety of healthcare topics and community information. Topic: Care At Home.

**November 10. Halifax Health Veterans Day Event.** Halifax Health will honor Team Members who have served in the U.S. military.

**November 11. Halifax Health – Hospice 16<sup>th</sup> Annual Fall 5K Run & Walk.** This annual race event takes place in Port Orange and raises funds for hospice's Family Caregiver Program which plays an integral role in the health of both the patients and their caregivers. This race is part of the Live Your Life Well race series. [www.halifaxhealth.org/hospice/5k](http://www.halifaxhealth.org/hospice/5k).

**November 12. Deltona Honor & Remember 5K Run/Walk.** A part of the Live Your Life Well Series, this race honors and remembers the nation's veterans and first responders. The race starts in Dewey Boster Park in Deltona. [www.lylwseries.com](http://www.lylwseries.com).

**November 15. Halifax Health Live Your Life Well Radio on JOY 106.3 FM.** This weekly radio show, hosted by Halifax Health Team Members Rev. John Long and Sharon James, RN, features a variety of healthcare topics and community information. Topic: Diabetes Awareness.

**November 22. Halifax Health Live Your Life Well Radio on JOY 106.3 FM.** This weekly radio show, hosted by Halifax Health Team Members Rev. John Long and Sharon James, RN, features a variety of healthcare topics and community information.

**November 8. Halifax Health Live Your Life Well Radio on JOY 106.3 FM.** This weekly radio show, hosted by Halifax Health Team Members Rev. John Long and Sharon James, RN, features a variety of healthcare topics and community information. Topic: Holiday Blues/Mental Health and Tree of Remembrance.



# HALIFAX HEALTH

**Strategic & Community Health Planning Committee**

**Report will be provided at meeting**

Halifax Hospital Medical Center  
Audit and Finance Committee Meeting  
303 N. Clyde Morris Blvd., France Tower, Conference Room A  
Wednesday, August 30, 2017

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Present: Ted Serbousek, Chairman  
Ammar Hemaïdan, MD, Member & Member, Medical Staff  
Greg Motto, Member  
Decker Youngman, Member

Via Phone: Susan Schandel, Member & Treasurer, Board of Commissioners

Not Present: Daniel Francati, Member & Vice Chairman, Board of Commissioners

Also Present: Jeff Feasel, President & CEO  
Eric Peburn, Executive VP/Chief Financial Officer  
Shelly Shiflet, Chief Compliance Officer  
Bill Rushton, Director, Internal Audit  
Kent Bailey, Director of Finance  
Lisa Tyler, Corporate Controller  
Bob Wade, Compliance Expert  
Mark Billings, Executive VP/Chief Operating Officer  
Arvin Lewis, Senior VP/Chief Revenue Officer  
Alberto Tineo, Senior VP, Operations  
Bill Griffin, Director, System Research and Planning  
Jill Wheelock, Associate General Counsel  
Mary Jo Allen, Executive Director, Halifax Health Hospice  
Tony Trovato, Director of Business Operations, Halifax Health Hospice  
Ben Eby, Director of Finance, Halifax Health Hospice  
Charlena Kowatch, Deputy Chief Compliance Officer  
Dee Schaeffer, Government Affairs Officer/Ex. Director, Healthy Communities  
Dominick Damiani, Manager, Pharmacy  
Brandon Slaughter, RSM  
Charles Lee, JPMorgan  
David Hand, JPMorgan  
Eric Jordahl, Kaufman Hall

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The meeting was called to order at 4:00 p.m. by Ted Serbousek. Attendance was recorded. Chairman Serbousek indicated that the agenda would be modified so the guests would present at the onset of the meeting.

## AUDIT COMMITTEE

### 2017 RSM Client Service and Audit Plan

Discussion: Ms. Tyler introduced Mr. Slaughter to present the FY 2018 Client Service and Audit Plan. Mr. Slaughter led members through the audit scope, the expectations of RSM, highlighting the organization chart of the service team, the risk area and summary audit procedures and timeline. Brief discussion ensued.

Action: None required.

## OLD BUSINESS

Discussion: Deltona Financing Update, *Charles Lee, David Hand, Eric Jordahl*  
Mr. Peburn briefly highlighted key points from previous presentations regarding the Deltona hospital to include the projected cost totaling \$105 million, commitment to maintain cash position and briefly reporting the high level view of the financial impact. He then introduced Charles Lee and David Hand, both representing JPMorgan, and Eric Jordahl, representing Kaufman Hall, inviting them to present the Deltona Project Financing: Securities Lending Structure Overview.

The collective presentation included the securities lending agreement, the projected cash flows, the alternatives upon the maturity of the securities lending agreement, as well as a comparison of other products.

Action: None required.

## **MINUTES**

Discussion: Minutes from the May 8, 2017 Investment Committee Meeting and from the June 28, 2017 Audit & Finance Committee Meeting were reviewed.

Action: Mr. Youngman moved to approve the minutes as presented and recommends approval by the Halifax Health Board of Commissioners. Mr. Motto seconded the motion and it carried unanimously.

## **AUDIT COMMITTEE**

### **Corporate Compliance**

Discussion: Monthly Compliance Program Update Dashboard  
Ms. Shiflet presented the Compliance Dashboard for the months ended July 2017 and June 2017, referencing no issues in June 2017, but citing the attendance of the Compliance Committee fell short of the 70% or greater internal target in July 2017. Ms. Shiflet reported that Catherine Luchsinger, Chief Nursing Officer, has been added as a new member of the committee, which should help alleviate attendance issues in the future.

Action: None required.

Discussion: Responses to Compliance Effectiveness Report, CIA Year 3  
Ms. Shiflet referred members to the Response and Action Plans for the Corporate Integrity Agreement year ended March 9, 2017. This summary highlighted tasks and respective responses/expected plans for improvement. In closing, Ms. Shiflet deferred to Mr. Peburn to provide an update on the unclaimed property audit. Mr. Peburn stated that after meeting with representatives from the Florida Department of Financial Services, it is anticipated that this issue would be settled with no additional amounts due and no penalties or interest.

Action: None required.

### **Internal Audit**

Discussion: Mr. Rushton led committee members through the Audit Services Discussion and Analysis presentation, requesting approval of the Summary of Audit Follow up Report as of August 22, 2017 and the Summary of Internal Audit Report(s) – Pharmacy Controls Audit, Diversion ROC-Main Campus, and HCN Audit.

Discussion and questions ensued regarding the Pharmacy Controls Audit and Mr. Damiani was requested to join the committee at the table. Mr. Damiani reported the issues and discrepancies identified, sharing the steps taken to reduce risk and action plans in place.

Action: Mr. Youngman moved to approve the three internal audit reports - Pharmacy Controls Audit, Diversion ROC-Main Campus, and HCN Audit, as presented. Mr. Motto seconded the motion and it carried unanimously.

Action: Mr. Motto moved to approve the Summary of Audit Follow up Report as of August 22, 2017 as presented. Mr. Youngman seconded the motion and it carried unanimously.



## **FINANCE COMMITTEE**

### **FINANCIAL REPORT**

- Discussion: Mr. Peburn reviewed the July 2017 Financial Report, reporting the statistical and financial summaries, briefly reporting improvements regarding locums, staffing in Deltona, reduction of contract labor and Hospice performance.
- Action: Mr. Motto moved to approve the July 2017 and June 2017 Financial Reports and recommends approval by the Board of Commissioners. Mr. Youngman seconded the motion and it carried unanimously.

### **ACQUISITIONS, LEASES & DISPOSALS**

- Discussion: Capital Investment Strategy  
Mr. Bailey presented the Capital Investment Strategy monthly update (July and June 2017 summaries included in meeting materials).
- Action: None required.
- Discussion: Capital Expenditures \$50,000 and over
- |  |             |
|--|-------------|
| • IV Pumps   | \$2,316,642 |
| • New Smyrna Beach Family Practice – Office Expansion and Renovation | \$137,600   |
| • Ultrasound Machines for Intensive Care Units                       | \$99,375    |
| • Surgical Lighting for Cardiovascular                               | \$92,360    |
| • HDR Brachytherapy Equipment  | \$74,700    |
| • Cytology Equipment   | \$54,214    |
- Action: Mr. Youngman moved to approve the capital expenditures and recommends approval by the Board of Commissioners. Mr. Motto seconded the motion and it carried unanimously.
- Discussion: Disposals
- Action: Mr. Youngman moved to approve the disposals and recommends approval by the Board of Commissioners. Mr. Motto seconded the motion and it carried unanimously.
- Discussion: Comparison of Projected and Actual Financial Results for Significant Projects
- Action: No report; no action required.

### **OLD BUSINESS**

- Discussion: Meeting Request Tracker/Checklist (included in meeting packet)  
The tracker indicates an annual update regarding the Center for Rehabilitation Service Line is anticipated for the November 1, 2017 committee meeting.
- Action: None required.
- Discussion: FY 2018 Budget Update  
Mr. Peburn presented a schedule of operating margin changes (2.4%) since the August budget workshop due to:
- Decrease in Medicaid LIP reimbursement
  - Defined benefit pension expense increase – updated from actuarial report
  - Patient service revenue decrease due to the reduction in area wage index, offset by various margin improvements at Halifax Health Hospice
- Action: None required.

### **NEW BUSINESS**

- Discussion: Expected Investment Return, FY 2018  
Mr. Peburn reported that the expected investment return assumptions for FY 2018 were presented to the Investment Committee and were being brought to the committee for approval. The assumed outlook returns for FY 2018, and weighted assumed

return for Halifax Hospital Medical Center, HH Holdings, Foundation and Hospice accounts.

Action: Mr. Youngman moved to approve the expected investment return assumptions for FY 2018 as recommended by the Investment Committee. Mr. Motto seconded the motion and it carried unanimously.

#### **INFORMATIONAL REPORTS**

Discussion: The Discharged Based-Average Length of Stay and Case Mix Index, the Schedule of Uses of Property Taxes for June 2017, the Investment Performance Reports for July 2017 and June 2017, the Capital Expenditures, \$25,000 - \$50,000, and the Operating Leases, \$50,000-\$250,000 were presented under Information Only. The Capital Expenditures \$25,000 - \$50,000 were as follows:

- |   |                 |
|---|-----------------|
| • <i>Oncology Services Expansion for Port Orange</i>    | <i>\$49,900</i> |
| ▪ <i>Sleeper Chairs for Mother and Baby Unit</i>        | <i>\$40,537</i> |
| • <i>Patient Recliner Chairs for CVICU and CPCU</i>     | <i>\$34,390</i> |
| • <i>Dr. Lopez Pediatric Office – IT Infrastructure</i> | <i>\$30,000</i> |

The Operating Leases, \$50,000 - \$250,000 were as follows:

- |                                     |                                 |
|-------------------------------------|---------------------------------|
| • <i>Dr. Lopez Pediatric Office</i> | <i>\$5,434 monthly; 3 years</i> |
|-------------------------------------|---------------------------------|

Action: None required.

#### **OPEN DISCUSSION**

Discussion: None.

**NEXT MEETING DATE:** **TUESDAY, September 5, 2017, 5:05 p.m. –First Public Hearing, Board of Commissioners**  
Wednesday, November 1, 2017, 4:00 p.m. – Regular scheduled meeting  
Monday, November 13, 2017, 4:00 p.m. – Investment Committee meeting

#### **ADJOURNMENT**

Action: There being no further business, a motion was made and seconded to adjourn.

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Ted Serbousek, Chairman

**HALIFAX HEALTH MEDICAL CENTER  
SCHEDULE OF USES OF PROPERTY TAXES  
FOR THE TWELVE MONTHS ENDED SEPTEMBER 30, 2017**

		in mills
Gross property tax levy	\$11,251,944	0.7561
Tax discounts and uncollectible taxes	(299,879)	(0.0202)
Net property taxes collected	10,952,065	0.7359
Amounts paid to Volusia County and Cities:		
Tax collector and appraiser commissions	(374,316)	(0.0252)
Volusia County Medicaid matching assessment	(2,919,477)	(0.1962)
Redevelopment taxes paid to Cities	(585,370)	(0.0393)
Subtotal	(3,879,163)	(0.2607)
Net taxes available for community health, wellness and readiness	7,072,902	0.4752
Amounts paid for community health and wellness services:		
Preventive health services (clinics, Healthy Kids, etc.)	(1,344,485)	(0.0903)
Physician services	(8,801,230)	(0.5914)
Trauma services	(6,060,895)	(0.4073)
Pediatric and neonatal intensive care services	(325,433)	(0.0219)
Child and adolescent behavioral services	(601,977)	(0.0405)
Subtotal	(17,134,020)	(1.1514)
Deficiency of net taxes available to fund hospital operating expenses	(10,061,118)	(0.6762)
Uncompensated care provided by Halifax Health, <i>at cost</i>	(44,451,481)	(2.9870)
Total deficiency of net taxes available to fund hospital operating expenses and uncompensated care provided by Halifax Health, <i>at cost</i>	(54,512,599)	(3.6632)
Proforma tax levy to cover uncompensated care, at cost:		
Gross property tax levy		0.7561
Subsidized uncompensated care costs by operations		3.6632
Equivalent property tax levy expended *		4.4193

\* This is an equivalent levy for demonstration purposes only and is not intended to represent a proposed millage rate.

**Halifax Health**  
**Investment Manager Performance Report - through August 31, 2017**

		<b>August Performance</b>	<b>Calendar YTD</b>	<b>Calendar 2016</b>	<b>Fiscal Year</b>
<b>Fixed Income</b>					
VFSIX - Vangaurd Short-Term Investment Gr.	Perf	0.36%	2.34%	2.85%	1.50%
	BMK	0.35%	1.85%	1.56%	0.78%
VSGDX - Vanguard Short-Term Federal	Perf	0.21%	1.25%	1.24%	0.40%
	BMK	0.35%	1.43%	1.02%	0.26%
Ponder Short-term Government/Corporate	Perf	0.38%	1.88%	1.95%	0.51%
	BMK	0.35%	1.85%	1.56%	0.78%
Ponder US Treasury Account	Perf	0.12%	0.54%	0.30%	0.36%
	BMK	0.35%	1.43%	-0.44%	0.49%
Ponder Short-Term Government	Perf	0.27%	1.26%	0.88%	0.42%
	BMK	0.35%	1.43%	1.02%	0.26%
Ponder 2016 Project Fund	Perf	0.09%	0.46%	0.43%	0.90%
	BMK	0.20%	1.18%	0.29%	0.79%
<b>Weighted Composite</b>	<b>Perf</b>	<b>0.30%</b>	<b>1.82%</b>	<b>1.99%</b>	<b>1.08%</b>
	<b>BMK</b>	<b>0.35%</b>	<b>1.71%</b>	<b>1.07%</b>	<b>0.67%</b>
<b>Equities</b>					
DFSVX - DFA Small Cap Value	Perf	-2.55%	-3.67%	28.26%	10.83%
	BMK	-2.46%	-1.31%	31.74%	12.57%
DFLVX - DFA Large Cap Value	Perf	-0.94%	6.60%	18.89%	15.80%
	BMK	-1.16%	4.81%	17.34%	11.80%
DFIVX - DFA International Value	Perf	-0.11%	15.48%	8.41%	21.36%
	BMK	-0.02%	16.15%	2.75%	15.74%
DFEVX - DFA Emerging Markets	Perf	2.50%	26.80%	19.84%	25.57%
	BMK	2.23%	28.29%	11.19%	22.95%
VGELX - Vanguard Energy	Perf	-3.76%	-10.47%	33.18%	-5.58%
	BMK	-2.53%	-7.50%	27.66%	-0.62%
VENAX - Vanguard Energy Index	Perf	-5.50%	-16.94%	28.94%	-10.64%
	BMK	-2.53%	-7.50%	27.66%	-0.62%
VIGIX -Vanguard Large-Cap Growth	Perf	1.21%	19.09%	6.13%	18.59%
	BMK	1.83%	19.17%	7.08%	20.39%
VGHAX - Vanguard Health Care	Perf	-0.55%	17.94%	-8.94%	10.92%
	BMK	0.97%	17.03%	-6.83%	10.63%
VSGIX - Vanguard Small-Cap Growth	Perf	-0.36%	11.06%	10.74%	12.64%
	BMK	-0.12%	10.78%	11.32%	14.73%
<b>Weighted Composite</b>	<b>Perf</b>	<b>-0.57%</b>	<b>10.16%</b>	<b>15.17%</b>	<b>15.43%</b>
	<b>BMK</b>	<b>-0.31%</b>	<b>10.62%</b>	<b>13.82%</b>	<b>14.33%</b>

**Halifax Health**  
**Investment Manager Performance Report - through August 31, 2017**

	<b>Invested Balance</b>	<b>August Performance</b>	<b>Calendar YTD</b>	<b>Fiscal YTD</b>
<b>HH Holdings</b>				
VFSIX - Vanguard Short-Term Invest Grade	\$ 53,820,844	Perf 0.36% BMK 0.35%	2.34% 1.85%	1.50% 0.78%
Ponder Short-Term Gov't/Corporate	32,248,460	Perf 0.38% BMK 0.35%	1.88% 1.85%	0.51% 0.78%
Ponder US Treasury Account	73,644,996	Perf 0.12% BMK 0.35%	0.54% 1.43%	0.36% 0.49%
Total HH Holdings	<u>\$ 159,714,300</u>	Composite Budget	<b>0.25%</b> <b>1.42%</b>	<b>0.78%</b> <b>0.92%</b>
<b>HHMC</b>				
Ponder Short-Term Government	\$ 42,485,362	Perf 0.27% BMK 0.35%	1.26% 1.43%	0.42% 0.26%
VSGDX - Vanguard Short-Term Federal	64,798	Perf 0.21% BMK 0.35%	1.25% 1.43%	0.40% 0.26%
Wells Fargo Halifax Hospital Trust	555,872	Perf 0.08% BMK 0.35%	0.43% 1.43%	0.50% 0.26%
Ponder 2016 Project Fund	7,243,528	Perf 0.09% BMK 0.20%	0.46% 1.18%	0.90% 0.79%
Total HHMC	<u>\$ 50,349,560</u>	Composite Budget	<b>0.27%</b> <b>1.25%</b>	<b>0.43%</b> <b>0.92%</b>

**Halifax Health**  
**Investment Manager Performance Report - through August 31, 2017**

<b>Foundation</b>	<b>Invested Balance</b>	<b>August Performance</b>	<b>Calendar YTD</b>	<b>Fiscal YTD</b>
VFSIX - Vanguard Short-Term Invest Grade	\$ 22,595,423	Perf 0.36% BMK 0.35%	2.34% 1.85%	1.50% 0.78%
DFSVX - DFA Small Cap Value	3,490,421	Perf -2.55% BMK -2.46%	-3.67% -1.31%	10.83% 12.57%
DFIVX - DFA International Value	2,162,458	Perf -0.11% BMK -0.02%	15.48% 16.15%	21.36% 15.74%
DFEVX - DFA Emerging Markets	801,430	Perf 2.50% BMK 2.23%	26.80% 28.29%	25.57% 22.95%
DFLVX - DFA Large Cap Value	7,929,111	Perf -0.94% BMK -1.16%	6.60% 4.81%	15.80% 11.80%
VGELX - Vanguard Energy	439,288	Perf -3.76% BMK -2.53%	-10.47% -7.50%	-5.58% -0.62%
VENAX - Vanguard Energy Index	194,278	Perf -5.50% BMK -2.53%	-16.94% -7.50%	-10.64% -0.62%
VIGIX -Vanguard Large-Cap Growth	4,149,961	Perf 1.21% BMK 1.83%	19.09% 19.17%	18.59% 20.39%
VGHAX - Vanguard Health Care	738,803	Perf -0.55% BMK 0.97%	17.94% 17.03%	10.92% 10.63%
VSGIX - Vanguard Small-Cap Growth	4,052,994	Perf -0.36% BMK -0.12%	11.06% 10.78%	12.64% 14.73%
Total Foundation	<u>\$ 46,554,167</u>	Composite Budget	<b>-0.13%</b> <b>5.94%</b>	<b>8.50%</b> <b>3.67%</b>

**Halifax Health**  
**Investment Manager Performance Report - through August 31, 2017**

	<b>Invested Balance</b>	<b>August Performance</b>	<b>Calendar YTD</b>	<b>Fiscal YTD</b>
<b>Hospice</b>				
VFSIX - Vanguard Short-Term Invest Grade	\$ 34,741,472	Perf 0.36%	2.34%	1.50%
		BMK 0.35%	1.85%	0.78%
DFSVX - DFA Small Cap Value	5,423,018	Perf -2.55%	-3.67%	10.83%
		BMK -2.46%	-1.31%	12.57%
DFIVX - DFA International Value	3,343,250	Perf -0.11%	15.48%	21.36%
		BMK -0.02%	16.15%	15.74%
DFEVX - DFA Emerging Markets	1,432,272	Perf 2.50%	26.80%	25.57%
		BMK 2.23%	28.29%	22.95%
DFLVX - DFA Large Cap Value	12,445,152	Perf -0.94%	6.60%	15.80%
		BMK -1.16%	4.81%	11.80%
VGELX - Vanguard Energy	97,069	Perf -3.76%	-10.47%	-5.58%
		BMK -2.53%	-7.50%	-0.62%
VENAX - Vanguard Energy Index	517,816	Perf -5.50%	-16.94%	-10.64%
		BMK -2.53%	-7.50%	-0.62%
VIGIX - Vanguard Large-Cap Growth	6,802,111	Perf 1.21%	19.09%	18.59%
		BMK 1.83%	19.17%	20.39%
VGHAX - Vanguard Health Care	642,415	Perf -0.55%	17.94%	10.92%
		BMK 0.97%	17.03%	10.63%
VSGIX - Vanguard Small-Cap Growth	5,891,901	Perf -0.36%	11.06%	12.64%
		BMK -0.12%	10.78%	14.73%
 Total Hospice	 <u>\$ 71,336,476</u>	 Composite Budget	 <b>-0.10%</b> <b>6.03%</b>	 <b>8.66%</b> <b>3.67%</b>

**Halifax Health**  
**Investment Manager Performance Report - through August 31, 2017**

	<b>Invested Balance</b>	<b>August Performance</b>	<b>Calendar YTD</b>	<b>Fiscal YTD</b>
<b>Pension</b>				
VFSIX - Vanguard Short-Term Invest Grade	\$ 128,491,396	Perf 0.36%	2.34%	1.50%
		BMK 0.35%	1.85%	0.78%
DFSVX - DFA Small Cap Value	19,921,774	Perf -2.55%	-3.67%	10.83%
		BMK -2.46%	-1.31%	12.57%
DFIVX - DFA International Value	35,235,598	Perf -0.11%	15.48%	21.36%
		BMK -0.02%	16.15%	15.74%
DFEVX - DFA Emerging Markets	11,425,844	Perf 2.50%	26.80%	25.57%
		BMK 2.23%	28.29%	22.95%
DFLVX - DFA Large Cap Value	20,608,127	Perf -0.94%	6.60%	15.80%
		BMK -1.16%	4.81%	11.80%
VGELX - Vanguard Energy	4,050,791	Perf -3.76%	-10.47%	-5.58%
		BMK -2.53%	-7.50%	-0.62%
VENAX - Vanguard Energy Index	4,326,877	Perf -5.50%	-16.94%	-10.64%
		BMK -2.53%	-7.50%	-0.62%
VIGIX -Vanguard Large-Cap Growth	14,381,514	Perf 1.21%	19.09%	18.59%
		BMK 1.83%	19.17%	20.39%
VGHAX - Vanguard Health Care	9,364,810	Perf -0.55%	17.94%	10.92%
		BMK 0.97%	17.03%	10.63%
VSGIX - Vanguard Small-Cap Growth	13,539,234	Perf -0.36%	11.06%	12.64%
		BMK -0.12%	10.78%	14.73%
Wells Fargo Cash	1,981			
Wells Fargo Money Market	1,737,938			
Total Pension	<u>\$ 263,085,884</u>	Composite	<b>-0.12%</b>	<b>6.43%</b>
		Budget		6.19%
<b>Total Halifax Health, including Pension</b>	<u><b>\$ 591,040,387</b></u>			
<b>Total Halifax Health, excluding Pension</b>	<u><b>\$ 327,954,503</b></u>			



**Halifax Health**  
**Investment Manager Performance Report - through September 30, 2017**

		<b>September Performance</b>	<b>Calendar YTD</b>	<b>Calendar 2016</b>	<b>Fiscal Year</b>
<b>Fixed Income</b>					
VFSIX - Vangaurd Short-Term Investment Gr.	Perf	-0.14%	2.20%	2.85%	1.36%
	BMK	-0.27%	1.58%	1.56%	0.51%
VSGDX - Vanguard Short-Term Federal	Perf	-0.26%	0.98%	1.24%	0.13%
	BMK	-0.34%	1.09%	1.02%	-0.07%
Ponder Short-term Government/Corporate	Perf	-0.20%	1.69%	1.95%	0.33%
	BMK	-0.34%	1.09%	1.56%	0.51%
Ponder US Treasury Account	Perf	0.08%	0.62%	0.30%	0.44%
	BMK	-0.34%	1.09%	-0.44%	0.15%
Ponder Short-Term Government	Perf	-0.16%	1.10%	0.88%	0.26%
	BMK	-0.34%	1.09%	1.02%	-0.07%
Ponder 2016 Project Fund	Perf	0.06%	0.58%	0.43%	1.02%
	BMK	-0.12%	1.06%	0.29%	0.67%
<b>Weighted Composite</b>	<b>Perf</b>	<b>-0.11%</b>	<b>1.74%</b>	<b>1.99%</b>	<b>0.98%</b>
	<b>BMK</b>	<b>-0.30%</b>	<b>1.39%</b>	<b>1.07%</b>	<b>0.38%</b>
<b>Equities</b>					
DFSVX - DFA Small Cap Value	Perf	7.92%	3.96%	28.26%	19.61%
	BMK	7.08%	5.68%	31.74%	20.54%
DFLVX - DFA Large Cap Value	Perf	3.85%	10.70%	18.89%	20.25%
	BMK	2.96%	7.92%	17.34%	15.12%
DFIVX - DFA International Value	Perf	3.57%	19.60%	8.41%	25.69%
	BMK	2.59%	19.17%	2.75%	18.75%
DFEVX - DFA Emerging Markets	Perf	-2.24%	23.95%	19.84%	22.75%
	BMK	-0.40%	27.78%	11.19%	22.46%
VGELX - Vanguard Energy	Perf	8.35%	-2.99%	33.18%	2.31%
	BMK	8.06%	-0.04%	27.66%	7.40%
VENAX - Vanguard Energy Index	Perf	10.42%	-8.28%	28.94%	-1.33%
	BMK	8.06%	-0.04%	27.66%	7.40%
VIGIX -Vanguard Large-Cap Growth	Perf	1.04%	20.32%	6.13%	19.81%
	BMK	1.30%	20.72%	7.08%	21.95%
VGHAX - Vanguard Health Care	Perf	0.89%	18.99%	-8.94%	11.91%
	BMK	1.38%	18.65%	-6.83%	12.16%
VSGIX - Vanguard Small-Cap Growth	Perf	3.81%	15.29%	10.74%	16.93%
	BMK	5.45%	16.81%	11.32%	20.98%
<b>Weighted Composite</b>	<b>Perf</b>	<b>3.82%</b>	<b>13.63%</b>	<b>15.17%</b>	<b>19.43%</b>
	<b>BMK</b>	<b>3.60%</b>	<b>14.01%</b>	<b>13.82%</b>	<b>18.18%</b>

**Halifax Health**  
**Investment Manager Performance Report - through September 30, 2017**

	<b>Invested Balance</b>	<b>September Performance</b>	<b>Calendar YTD</b>	<b>Fiscal YTD</b>
<b>HH Holdings</b>				
VFSIX - Vanguard Short-Term Invest Grade	\$ 53,746,971	Perf -0.14%	2.20%	1.36%
		BMK -0.27%	1.58%	0.51%
Ponder Short-Term Gov't/Corporate	32,185,171	Perf -0.20%	1.69%	0.33%
		BMK -0.34%	1.09%	0.51%
Ponder US Treasury Account	73,704,944	Perf 0.08%	0.62%	0.44%
		BMK -0.34%	1.09%	0.15%
Total HH Holdings	<u>\$ 159,637,086</u>	Composite -0.05%	1.37%	0.73%
		Budget		1.00%
<b>HHMC</b>				
Ponder Short-Term Government	\$ 42,416,447	Perf -0.16%	1.10%	0.26%
		BMK -0.34%	1.09%	-0.07%
VSGDX - Vanguard Short-Term Federal	64,627	Perf -0.26%	0.98%	0.13%
		BMK -0.34%	1.09%	-0.07%
Wells Fargo Halifax Hospital Trust	551,270	Perf 0.07%	0.50%	0.50%
		BMK -0.34%	1.09%	-0.07%
Ponder 2016 Project Fund	205	Perf 0.06%	0.58%	1.02%
		BMK -0.12%	1.06%	0.67%
Total HHMC	<u>\$ 43,032,549</u>	Composite -0.16%	1.09%	0.26%
		Budget		1.00%

**Halifax Health**  
**Investment Manager Performance Report - through September 30, 2017**

	<b>Invested Balance</b>	<b>September Performance</b>	<b>Calendar YTD</b>	<b>Fiscal YTD</b>
<b>Foundation</b>				
VFSIX - Vanguard Short-Term Invest Grade	\$ 23,063,990	Perf -0.14% BMK -0.27%	2.20% 1.58%	1.36% 0.51%
DFSVX - DFA Small Cap Value	3,766,776	Perf 7.92% BMK 7.08%	3.96% 5.68%	19.61% 20.54%
DFIVX - DFA International Value	1,988,198	Perf 3.57% BMK 2.59%	19.60% 19.17%	25.69% 18.75%
DFEVX - DFA Emerging Markets	783,454	Perf -2.24% BMK -0.40%	23.95% 27.78%	22.75% 22.46%
DFLVX - DFA Large Cap Value	8,234,389	Perf 3.85% BMK 2.96%	10.70% 7.92%	20.25% 15.12%
VGELX - Vanguard Energy	475,951	Perf 8.35% BMK 8.06%	-2.99% -0.04%	2.31% 7.40%
VENAX - Vanguard Energy Index	214,513	Perf 10.42% BMK 8.06%	-8.28% -0.04%	-1.33% 7.40%
VIGIX -Vanguard Large-Cap Growth	4,193,118	Perf 1.04% BMK 1.30%	20.32% 20.72%	19.81% 21.95%
VGHAX - Vanguard Health Care	745,413	Perf 0.89% BMK 1.38%	18.99% 18.65%	11.91% 12.16%
VSGIX - Vanguard Small-Cap Growth	3,956,561	Perf 3.81% BMK 5.45%	15.29% 16.81%	16.93% 20.98%
Total Foundation	<u>\$ 47,422,363</u>	Composite Budget	<b>1.90%</b> <b>7.76%</b>	<b>10.56%</b> <b>4.00%</b>

**Halifax Health**  
**Investment Manager Performance Report - through September 30, 2017**

	<b>Invested Balance</b>	<b>September Performance</b>	<b>Calendar YTD</b>	<b>Fiscal YTD</b>
<b>Hospice</b>				
VFSIX - Vanguard Short-Term Invest Grade	\$ 34,193,713	Perf -0.14% BMK -0.27%	2.20% 1.58%	1.36% 0.51%
DFSVX - DFA Small Cap Value	5,852,386	Perf 7.92% BMK 7.08%	3.96% 5.68%	19.61% 20.54%
DFIVX - DFA International Value	3,462,531	Perf 3.57% BMK 2.59%	19.60% 19.17%	25.69% 18.75%
DFEVX - DFA Emerging Markets	1,400,147	Perf -2.24% BMK -0.40%	23.95% 27.78%	22.75% 22.46%
DFLVX - DFA Large Cap Value	11,667,209	Perf 3.85% BMK 2.96%	10.70% 7.92%	20.25% 15.12%
VGELX - Vanguard Energy	105,171	Perf 8.35% BMK 8.06%	-2.99% -0.04%	2.31% 7.40%
VENAX - Vanguard Energy Index	571,751	Perf 10.42% BMK 8.06%	-8.28% -0.04%	-1.33% 7.40%
VIGIX - Vanguard Large-Cap Growth	5,614,193	Perf 1.04% BMK 1.30%	20.32% 20.72%	19.81% 21.95%
VGHAX - Vanguard Health Care	648,163	Perf 0.89% BMK 1.38%	18.99% 18.65%	11.91% 12.16%
VSGIX - Vanguard Small-Cap Growth	5,513,022	Perf 3.81% BMK 5.45%	15.29% 16.81%	16.93% 20.98%
Total Hospice	<u>\$ 69,028,286</u>	Composite 1.88% Budget	7.68%	10.58% 4.00%

**Halifax Health**  
**Investment Manager Performance Report - through September 30, 2017**

	<b>Invested Balance</b>	<b>September Performance</b>	<b>Calendar YTD</b>	<b>Fiscal YTD</b>
<b>Pension</b>				
VFSIX - Vanguard Short-Term Invest Grade	\$ 132,311,686	Perf -0.14% BMK -0.27%	2.20% 1.58%	1.36% 0.51%
DFSVX - DFA Small Cap Value	21,499,087	Perf 7.92% BMK 7.08%	3.96% 5.68%	19.61% 20.54%
DFIVX - DFA International Value	33,978,622	Perf 3.57% BMK 2.59%	19.60% 19.17%	25.69% 18.75%
DFEVX - DFA Emerging Markets	11,169,572	Perf -2.24% BMK -0.40%	23.95% 27.78%	22.75% 22.46%
DFLVX - DFA Large Cap Value	21,401,560	Perf 3.85% BMK 2.96%	10.70% 7.92%	20.25% 15.12%
VGELX - Vanguard Energy	4,388,881	Perf 8.35% BMK 8.06%	-2.99% -0.04%	2.31% 7.40%
VENAX - Vanguard Energy Index	4,777,557	Perf 10.42% BMK 8.06%	-8.28% -0.04%	-1.33% 7.40%
VIGIX - Vanguard Large-Cap Growth	13,525,779	Perf 1.04% BMK 1.30%	20.32% 20.72%	19.81% 21.95%
VGHAX - Vanguard Health Care	9,448,611	Perf 0.89% BMK 1.38%	18.99% 18.65%	11.91% 12.16%
VSGIX - Vanguard Small-Cap Growth	13,553,646	Perf 3.81% BMK 5.45%	15.29% 16.81%	16.93% 20.98%
Wells Fargo Cash	302,302			
Wells Fargo Money Market	1,982			
Total Pension	<u>\$ 266,359,285</u>	Composite 1.84% Budget	8.06%	10.42% 6.75%
<b>Total Halifax Health, including Pension</b>	<u><b>\$ 585,479,569</b></u>			
<b>Total Halifax Health, excluding Pension</b>	<u><b>\$ 319,120,284</b></u>			

# INFORMATIONAL REPORT

September 2017

## **Capital Expenditures \$25,000 -- \$50,000**

DESCRIPTION	DEPARTMENT	SOURCE OF FUNDS	TOTAL
Omnicell Medication Dispensing Cabinet	Pharmacy	Working Capital	\$33,214
Vaginal CT/MRI Multi Channel Applicator for Radiation Oncology	Center for Radiation Oncology	Working Capital	\$29,473
Port Orange Care Center HVAC Replacement	Halifax Health Hospice	Working Capital	\$28,600*
Meditech Interface for Laboratory-Blood Glucose Meter	Laboratory	Working Capital	\$25,350

\*Note this needs to be brought to Hospice Board of Directors.

## **Operating Leases \$50,000 -- \$250,000**

DESCRIPTION	DEPARTMENT	REPLACEMENT Y/N	LEASE TERMS	INTEREST RATE	MONTHLY PAYMENT



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Mark Billings, Executive Vice President and Chief Operating Officer  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
Alberto Tineo, Vice President Operations  
DATE: September 18, 2017  
RE: Omnicell Medication Dispensing Cabinet

---

Halifax Health Pharmacy is requesting funds to purchase an Omnicell automated medication dispensing cabinet for the Port Orange Oncology Center.

The Omnicell unit will allow medications to be dispensed safely and securely. The automated equipment will help to prevent the diversion of controlled substances.

**TOTAL CAPITAL COSTS    \$33,214**



## Halifax Health Project Evaluation

### Omniceil Medication Dispensing Cabinet

Chief Operating Officer:	Mark Billings
Sr. Vice President, Operations:	Alberto Tineo
Director, Pharmacy:	Dominick Damiani
Finance Analysis by:	Steve Mach

### Summary

**Purpose:**

This project is to purchase an Omnicell automated medication dispensing cabinet for the Port Orange Oncology Center.

**Strategic Plan Core Competency Achievement:**

Physician Integration	
Care Coordination	X
Cost Management	
Information Technology	
Service Distribution	
Financial Position	
Scale	
Managed Care Contracting	
Competitive Position	

**Cornerstone:**

Safety	X
Compassion	
Image	
Efficiency	

**Investment Request for Approval** **\$33,214**

Recommendation for approval of the project is not based upon incremental return on investment.





# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Mark Billings, Executive Vice President and Chief Operating Officer  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
Alberto Tineo, Senior Vice President Operations  
DATE: October 17, 2017  
RE: Vaginal CT/MRI Multi Channel Applicator for Radiation Oncology

---

Halifax Health Center for Radiation Oncology is requesting funds to purchase a replacement Vaginal CT/MRI Multi Channel Applicator for the High Dose Radiation treatment system.

This system provides a unique treatment option for advanced vaginal and cervical tumors utilizing the High Dose Radiation treatment modality. The cylindrical applicator enables optimal dosage through its dome-shaped treatment channels. The equipment is non-metallic and fully compatible with CT and MRI imaging modalities. Use of this device reduces potential toxicity to adjacent organs. The existing applicator is not functioning. A loaner from the vendor is being utilized.

The project was approved at the Capital Investment Committee meeting on September 20, 2017.

**TOTAL CAPITAL COSTS    \$29,473**



## Halifax Health Project Evaluation

<b>Vaginal CT/ MRI Multi Channel Applicator for Radiation Oncology</b>
--

Chief Operating Officer:	Mark Billings
Sr. Vice President, Operations:	Alberto Tineo
Service Line Administrator, Oncology:	Debra Trovato
Finance Analysis by:	Steve Mach

### Summary

**Purpose:**

This project is to purchase a replacement vaginal CT/ MRI multi channel applicator used in the high dose radiation treatment modality for vaginal and cervical tumors.

**Strategic Plan Core Competency Achievement:**

Physician Integration		
Care Coordination	X	
Cost Management		
Information Technology		
Service Distribution		
Financial Position		
Scale		
Managed Care Contracting		
Competitive Position		

**Cornerstone:**

Safety	X
Compassion	X
Image	
Efficiency	

**Investment Request for Approval** **\$29,473**

Recommendation for approval of the project is not based upon incremental return on investment.



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Mark Billings, Executive Vice President and Chief Operating Officer  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
Alberto Tineo, Senior Vice President Operations  
DATE: October 17, 2017  
RE: Meditech Interface for Laboratory-Blood Glucose Meter

---

Halifax Health Laboratory is requesting funds to purchase a Meditech Blood Glucose Meter (BGM) Interface. The BGM Interface will improve efficiencies and enhance patient safety.

The BGM interface will automatically generate a lab order and transfer the result to the electronic medical record (EMR). The clinician will have immediate access to the lab result and the capability to trend values and improve patient management. In addition, accessing the data in the patient's record greatly enhances the records audit for compliance of physician orders.

The project was approved at the Capital Investment Committee meeting on September 20, 2017.

**TOTAL CAPITAL COSTS    \$25,350**



## Halifax Health Project Evaluation

### Meditech Interface for Laboratory-Blood Glucose Meter

Chief Operating Officer:	Mark Billings
Sr. Vice President, Operations:	Alberto Tineo
Manager, Laboratory:	Laurie Koelker
Finance Analysis by:	Steve Mach

### Summary

#### Purpose:

This project is to purchase a Meditech Blood Glucose Meter interface to improve laboratory efficiency.

#### Strategic Plan Core Competency Achievement:

Physician Integration	
Care Coordination	X
Cost Management	
Information Technology	X
Service Distribution	
Financial Position	
Scale	
Managed Care Contracting	
Competitive Position	

#### Cornerstone:

Safety	X
Compassion	
Image	
Efficiency	X

Investment Request for Approval \$25,350

Recommendation for approval of the project is not based upon incremental return on investment.



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Eric Peburn, Executive Vice President and Chief Financial Officer  
CC: Mary Jo Allen, Executive Director-Halifax Health Hospice  
DATE: September 18, 2017  
RE: Port Orange Care Center HVAC Replacement

---

Halifax Health Hospice is requesting funds for the replacement of the HVAC system for the Port Orange Care Center. The system provides heating, ventilating and air conditioning to the volunteer center, kitchen, and pantry areas of the care center.

The current HVAC system is 23 years old and cannot keep the areas properly conditioned.

The project was approved at the Capital Investment Committee meeting on August 16, 2017.

**TOTAL CAPITAL COSTS    \$28,600**



## Halifax Health Project Evaluation

### Port Orange Care Center HVAC replacement

Chief Financial Officer:	Eric Peburn
Executive Director, HH Hospice:	Mary Jo Allen
Finance Analysis by:	Steve Mach

### Summary

#### Purpose:

This project will replace a HVAC system at the Halifax Health Hospice Port Orange Care Center. The system provides heating and air conditioning to the volunteer center, kitchen, and pantry areas of the care center.

#### Strategic Plan Core Competency Achievement:

Physician Integration	
Care Coordination	X
Cost Management	
Information Technology	
Service Distribution	X
Financial Position	
Scale	
Managed Care Contracting	
Competitive Position	

#### Cornerstone:

Safety	X
Compassion	
Image	X
Efficiency	

**Investment Request for Approval**     **\$28,600**

Recommendation for approval of the project is not based upon incremental return on investment.



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Bill Griffin, Director, Research and Planning  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
DATE: October 17, 2017  
RE: Sale of portion of Deltona parcel 120 Howland Blvd.

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The real estate parcel located at 120 Howland Boulevard, Deltona, consisting of 12.5 acres is owned by H.H. Holdings, Inc. (Holdings). Development of this parcel is being planned, including road and utility infrastructure.

Holdings has been approached by two potential buyers to sell approximately 5 acres of the 12.5 acre parcel. Utilizing the assistance of outside legal counsel, Holdings negotiated the 'highest and best offer' from the two buyers of \$375,000 per acre, for a total purchase price of \$1,875,000.

In addition, the potential buyer has agreed to fund a pro rata share of the cost for infrastructure of access road, utilities and platting. Estimated cost of Phase 1 road and utility infrastructure is \$787,000, the not to exceed prorata portion to be paid by Holdings is \$430,000.

Additional background on proposed sale:

- Buyer's proposed use: grocery and related retail
- Remaining parcel for Holdings development is approximately 5.9 acres, for urgent care, physician offices and support services
- Approximately 0.425 acres allocated for entry road and storm water retention

Evaluation of proposed selling price:

- Cost basis of land to be sold - \$1,175,200
- Net gain on sale – Approximately \$750,000

**We request the H. H. Holdings, Inc. Board of Directors provide approval to:**

- 1. Sell the real estate parcel described above and authorize the Chief Executive Officer or the Chief Financial Officer to execute any related sales documents or agreements.**
- 2. Incur capital costs of up to \$430,000 for the development of road and utility infrastructure for the property.**

# Proposed Site







# HALIFAX HEALTH

TO: Jeff Feasel, CEO, Halifax Health  
FROM: Deanna Schaeffer, President/CEO, Halifax Health Healthy Communities  
DATE: 10/25/17  
RE: Board Appointment Request

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Per the recommendation of the Halifax Health Healthy Communities Board of Directors at its meeting on October 18, 2017, I would like to respectfully request inclusion of the following Request for Board Re-appointment on the agenda for review and consideration at the next Halifax Health Board of Commissioners meeting:

Mr. Jeff Feasel, CEO – Halifax Health

Pending approval, Mr. Feasel will fulfill an additional three-year term beginning January 1, 2018 through December 31, 2020.

As always, your consideration of this request is appreciated.



# HALIFAX HEALTH

**To:** Jeff Feasel, Chief Executive Officer

**From:** Bill Rushton, Audit Services Director

**Date:** October 25, 2017

**Re:** Audit Services Report for Board of Commissioners Packet

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The Audit and Finance Committee assists the Board of Commissioners in its exercise of oversight of accounting and financial policies, operational controls and processes of the organization. This includes overseeing the audit plan, reviewing and approving audit reports and inquiring of auditors and management on internal controls to address risk. The Committee recommends acceptance of the Final Audit Reports referenced # 1, 2 and 3. A summary overview of each audit is enclosed within the Board of Commissioners packet.

#	Approval Date	Project	Objective(s)	Risk Area(s)
1	8/30/17	Pharmacy Controls Audit	Determined whether controls over pharmacy processes were functioning as Management intended.	Compliance, Diversion, Patient Safety
2	8/30/17	Regional Oncology Center-Main Campus	Assessed the Center's process controls over procurement and inventory of Scheduled II-V drugs.	Diversion
3	8/30/17	Halifax Health Call Network	Determined whether VHN administrative responsibilities are aligned with HCN procedures and agreements.	Compliance

## #1 - Pharmacy Controls Audit

Report Date: May 8, 2017

Location: Halifax Health

### AUDIT OBJECTIVES

Determined whether controls over certain pharmacy processes were functioning as Management intended.

### AUDIT SCOPE

- Tested medication reconciliations for Emergency Department (ED) patients transferred to J-Pod (Behavioral Services);
- Tested wasting procedures within Cardiac Care, Intensive Surgery & ED area;
- Assessed physical security controls within Child & Adolescent Behavioral Services (HBS) and Centers for Oncology(CO);
- Assessed controls over medication purchasing and receiving; and
- Assessed pharmacy management reporting.

**Locations:** HBS, CO, Twin Lakes Surgery Center and Halifax Health Medical Center

**Time Period:** July 1, 2016 through March 31, 2017

**Key Information System:** Not Applicable

**Data Selected:** Wasting Transactions, Patient Admissions, Medication Reconciliation Audit Reports, Omnisupplier User Access Reports, Sample Logs

**Scope Exclusions:** The scope of the audit did not include an assessment of retail pharmacy functions or compliance with regulations.

### SUMMARY OF ISSUE RISKS

Low Risk - 1	Moderate Risk - 4	High Risk - 2
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### AUDIT CONCLUSION

Pharmacy control testing identified areas for improvement related to samples, wasting, inventory control, medication lists and segregation of duties. These opportunities existed primarily due to missing or ineffective procedures. The lack of controls resulted in the following:

- Expired drugs included in sample inventory;
- Sample drugs missing and/or not recorded;
- Delays in wasting Schedule IIs; and
- Same person orders, receives and approves Schedule IIs.

As a result, Management will develop controls that will include policies and procedures, staff training and monitoring.

## #2 - Regional Oncology Center

Report Date: May 8, 2017

Location: Halifax Health

### AUDIT OBJECTIVES

Determined whether Regional Oncology Center (ROC) controls in place were monitoring, preventing and detecting diversion of controlled substances.

### AUDIT SCOPE

- Assessed department procurement and inventory controls for DEA classified Scheduled II-V drugs (a.k.a. controlled substances)

**Locations:** Halifax Health Main Campus

**Time Period:** July 1, 2016 through July 25, 2017

**Key Information System:** Not Applicable

**Data Selected:** Aria Physician Orders, Omnicell Requisition Orders

### SUMMARY OF ISSUE RISKS

Low Risk - 1	Moderate Risk - 0	High Risk - 2
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### AUDIT CONCLUSION

The ROC was missing process controls over the procurement and inventory of drugs, which resulted in incidents of diversion and theft of Scheduled II drugs. As a result, Management has developed controls that include the following:

- An inventory management process, that includes an Omnicell system, was installed to control inventory;
- Schedule II requisitions must have a Physician order; and
- Cameras were installed to monitor activity.

### # 3 - Health Call Network Audit

Report Date: August 15, 2017

Location: Halifax Health

#### AUDIT OBJECTIVES

Determined if Volusia Health Network's (VHN) administrative responsibilities over Halifax Call Network (HCN) and other charity claims are functioning as Management intended.

#### AUDIT SCOPE

The scope of the audit included examination and testing of the following VHN administrative processes:

- Provider Maintenance
- Rate Maintenance
- Claims receipts
- Claims adjudication

Internal Audit Service used Data Analytic Techniques (DAT) to identify incorrect physician reimbursement from Halifax and VHN reimbursement systems.

**Location(s):** VHN

**Time Period:** July 1, 2016 through December 31, 2016

**Key Information System:** TriZetto, Novatus, Meditech Accounts Payable

**Data Selected:** Adjudicated Claims, Physician Contracts, AP, Check Registers

**Scope Exclusions:** The scope of the audit did not include an assessment of VHN's outsourced remittance services.

#### AUDIT CONCLUSION

VHN processed 2K HCN claims totaling \$641K dollars in reimbursement from July 1, 2016 through December 31, 2016. The lack of Provider and Rate Maintenance process controls resulted in the following:

- Physician claims were not adjudicated in accordance with the agreement;
- Termination notices were not processed correctly by the TPA; and
- Claims were adjudicated and paid without a Physician agreement on file.

Halifax and VHN Management will work together to develop an environment that will include documented policies and procedures, monitoring and enhanced controls over Provider and Rate Maintenance files within the TriZetto application.

#### SUMMARY OF ISSUE RISKS

Low Risk - 1	Moderate Risk - 4	High Risk - 0
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**Halifax Health**  
**Summary Financial Narrative**  
**For the eleven months ended August 31, 2017**

The performance of Halifax Health compared to budget and long-range targets (S&P "A" rated medians) for key financial indicators is as follows.

Financial Indicator	YTD Actual FY 17	YTD Budget FY 17	YTD Actual vs. Budget	S&P "A"	YTD Actual FY 17 vs. S&P "A"
Total Margin	2.5%	1.9%	Favorable	5.8%	Unfavorable
Operating Margin	0.9%	0.9%	Neutral	3.6%	Unfavorable
EBIDA Margin	9.8%	9.4%	Favorable	13.1%	Unfavorable
Operating EBIDA Margin	8.3%	8.5%	Unfavorable	10.8%	Unfavorable
Adjusted Operating EBIDA Margin *	7.8%	8.3%	Unfavorable	N/A	N/A
Days Cash on Hand	251	262	Unfavorable	249	Favorable
Cash to Debt	97.3%	98.9%	Unfavorable	189.9%	Unfavorable
Debt to Capitalization	55.4%	56.0%	Favorable	29.1%	Unfavorable
OG MADS Coverage	2.04	2.07	Unfavorable	4.50	Unfavorable
OG Debt to Capitalization	54.4%	55.0%	Favorable	29.1%	Unfavorable

\* - Excludes investment income/loss of Foundation recorded as operating income.

**Halifax Health Medical Center**

*Statistical Summary--*

- Admissions for the month are greater than budget and last year; and for the fiscal year-to-date are less than budget and greater than last year.
- Patient days for the month and fiscal year-to-date are greater than budget and last year.
  - Observation patient days for the month and fiscal year-to-date are greater than budget and last year.
- Surgery volumes for the month and fiscal year-to-date are less than budget and last year.
- Emergency room visits for the month and fiscal year-to-date are less than budget and greater than last year.

*Financial Summary --*

- Net patient service revenue for the fiscal year-to-date is 3.0% greater than budget.
- Total operating expenses for the fiscal year-to-date are 2.9% greater than budget.
- Loss from operations fiscal year-to-date of \$72,000 compares unfavorably to budget by \$1.1 million.
- Nonoperating gains fiscal year-to-date of \$1.8 million, primarily consisting of net investment income, compares unfavorably to the budgeted amount by \$366,000.
- Increase in net position fiscal year-to-date of \$1.7 million compares unfavorably to budget by \$1.5 million.

**Halifax Health Hospice**

*Statistical Summary --*

- Patient days for the month are greater than budget and last year; and for the fiscal year-to-date are less than budget and last year.

*Financial Summary --*

- Net patient service revenue for the fiscal year-to-date is 4.4% less than budget.
- Loss from operations fiscal year-to-date of \$603,000 compares unfavorably to budget by \$1.2 million, due primarily to a Medicare settlement adjustment relating to fiscal year 2015 that reduced net patient service revenue by approximately \$1.2 million.
- Nonoperating gains fiscal year-to-date of \$6.4 million, including investment income of \$5.5 million, is greater than the budgeted amount by \$3.6 million.
- Increase in net position fiscal year-to-date of \$5.8 million compares favorably to budget by \$2.4 million.

**Halifax Health**  
**Summary Financial Indicators – Excluding Estimated Hurricane Matthew Costs**  
**For the eleven months ended August 31, 2017**

The performance of Halifax Health compared to budget and long-range targets (S&P “A” rated medians) for key financial indicators, including computations excluding \$1.8 million of estimated Hurricane Matthew related costs, is as follows.

Financial Indicator	YTD Actual FY 17	YTD Adjusted Actual FY 17 (2)	YTD Budget FY 17	YTD Adj. Actual vs. Budget	S&P "A"	YTD Adj. Actual FY 17 vs. S&P "A"
Total Margin	2.5%	2.8%	1.9%	Favorable	5.8%	Unfavorable
Operating Margin	0.9%	1.3%	0.9%	Favorable	3.6%	Unfavorable
EBIDA Margin	9.8%	10.2%	9.4%	Favorable	13.1%	Unfavorable
Operating EBIDA Margin	8.3%	8.7%	8.5%	Favorable	10.8%	Unfavorable
Adjusted Operating EBIDA Margin (1)	7.8%	8.2%	8.3%	Unfavorable	N/A	N/A
Days Cash on Hand	251	253	262	Unfavorable	249	Favorable
Cash to Debt	97.3%	97.8%	98.9%	Unfavorable	189.9%	Unfavorable
Debt to Capitalization	55.4%	55.2%	56.0%	Favorable	29.1%	Unfavorable
OG MADS Coverage	2.04	2.13	2.07	Favorable	4.50	Unfavorable
OG Debt to Capitalization	54.4%	54.3%	55.0%	Favorable	29.1%	Unfavorable

(1) - Excludes investment income/loss of Foundation recorded as operating income.

(2) - Financial indicators computed by excluding estimated Hurricane Matthew related expenses of \$1.8 million.

## Halifax Health Statistical Summary

Month Ended August 31,					Eleven Months Ended August 31,			
<u>2016</u>	<u>2017</u>	<u>Budget</u>	<u>Var.</u>		<u>2016</u>	<u>2017</u>	<u>Budget</u>	<u>Var.</u>
				<b><u>Inpatient Activity</u></b>				
1,619	1,597	1,623	-1.6%	HHMC Adult/Ped Admissions	17,368	17,325	17,574	-1.4%
127	179	157	14.0%	HHMCPO Adult/Ped Admissions	1,582	1,648	1,706	-3.4%
179	190	167	13.8%	Adult Psych Admissions	1,560	1,714	1,817	-5.7%
56	63	51	23.5%	Rehabilitative Admissions	599	697	564	23.6%
<b>1,981</b>	<b>2,029</b>	<b>1,998</b>	<b>1.6%</b>	<b>Total Adult/Ped Admissions</b>	<b>21,109</b>	<b>21,384</b>	<b>21,661</b>	<b>-1.3%</b>
8,482	8,396	8,136	3.2%	HHMC Adult/Ped Patient Days	90,643	91,866	87,997	4.4%
533	874	761	14.8%	HHMCPO Adult/Ped Patient Days	5,970	9,370	8,250	13.6%
1,530	1,626	1,834	-11.3%	Adult Psych Patient Days	16,175	15,696	19,445	-19.3%
901	844	866	-2.5%	Rehabilitative Patient Days	9,542	9,646	9,359	3.1%
<b>11,446</b>	<b>11,740</b>	<b>11,597</b>	<b>1.2%</b>	<b>Total Adult/Ped Patient Days</b>	<b>122,330</b>	<b>126,578</b>	<b>125,051</b>	<b>1.2%</b>
5.2	5.3	5.0	4.9%	HHMC Average Length of Stay	5.2	5.3	5.0	5.9%
4.2	4.9	4.8	0.7%	HHMCPO Average Length of Stay	3.8	5.7	4.8	17.6%
<b>5.2</b>	<b>5.2</b>	<b>5.0</b>	<b>4.4%</b>	<b>HHMC/ HHMCPO Average Length of Stay</b>	<b>5.1</b>	<b>5.3</b>	<b>5.0</b>	<b>6.9%</b>
8.5	8.6	11.0	-22.1%	Adult Psych Average Length of Stay	10.4	9.2	10.7	-14.4%
16.1	13.4	17.0	-21.1%	Rehabilitative Length of Stay	15.9	13.8	16.6	-16.6%
<b>5.8</b>	<b>5.8</b>	<b>5.8</b>	<b>-0.3%</b>	<b>Total Average Length of Stay</b>	<b>5.8</b>	<b>5.9</b>	<b>5.8</b>	<b>2.5%</b>
<b>369</b>	<b>379</b>	<b>374</b>	<b>1.2%</b>	<b>Total Average Daily Census</b>	<b>364</b>	<b>378</b>	<b>373</b>	<b>1.2%</b>
680	738	610	21.0%	HHMC Observation Patient Day Equivalents	6,918	7,371	6,725	9.6%
107	145	100	45.0%	HHMCPO Observation Patient Day Equivalents	1,091	1,440	1,035	39.1%
<b>787</b>	<b>883</b>	<b>710</b>	<b>24.4%</b>	<b>Total Observation Patient Day Equivalents</b>	<b>8,009</b>	<b>8,811</b>	<b>7,760</b>	<b>13.5%</b>
<b>25</b>	<b>28</b>	<b>23</b>	<b>21.7%</b>	<b>Observation Average Daily Census</b>	<b>24</b>	<b>26</b>	<b>23</b>	<b>13.0%</b>
199	156	186	-16.1%	HHMC Newborn Births	1,790	1,611	1,738	-7.3%
367	272	362	-24.9%	HHMC Nursery Patient Days	3,467	2,961	3,470	-14.7%
462	424	492	-13.8%	HHMC Inpatient Surgeries	4,943	4,808	5,275	-8.9%
1	14	1	1300.0%	HHMCPO Inpatient Surgeries	16	83	9	822.2%
<b>463</b>	<b>438</b>	<b>493</b>	<b>-11.2%</b>	<b>Total Inpatient Surgeries</b>	<b>4,959</b>	<b>4,891</b>	<b>5,284</b>	<b>-7.4%</b>
				<b><u>Inpatient Surgeries</u></b>				
157	143			Orthopedics	1,911	1,853		
90	74			General Surgery	896	767		
54	34			Neurosurgery	552	443		
17	34			Vascular	160	328		
23	20			Thoracic Surgery	237	291		
122	133			All Other	1,203	1,209		
<b>463</b>	<b>438</b>	<b>493</b>	<b>-11.2%</b>	<b>Total Inpatient Surgeries</b>	<b>4,959</b>	<b>4,891</b>	<b>5,284</b>	<b>-7.4%</b>

# Halifax Health Statistical Summary

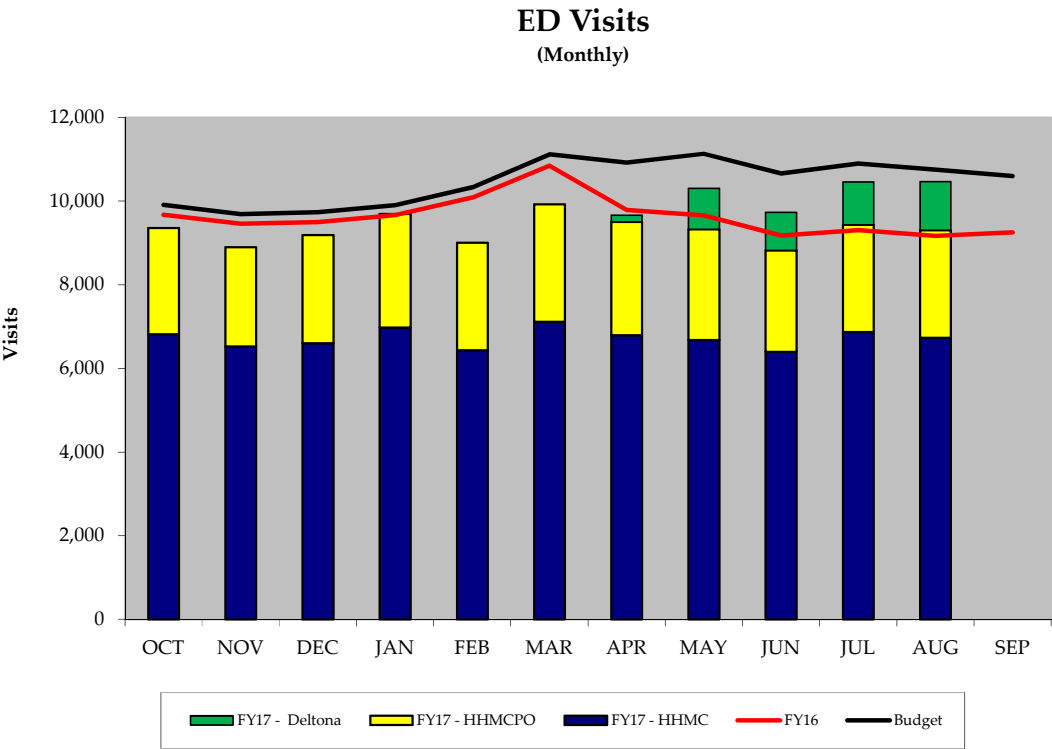
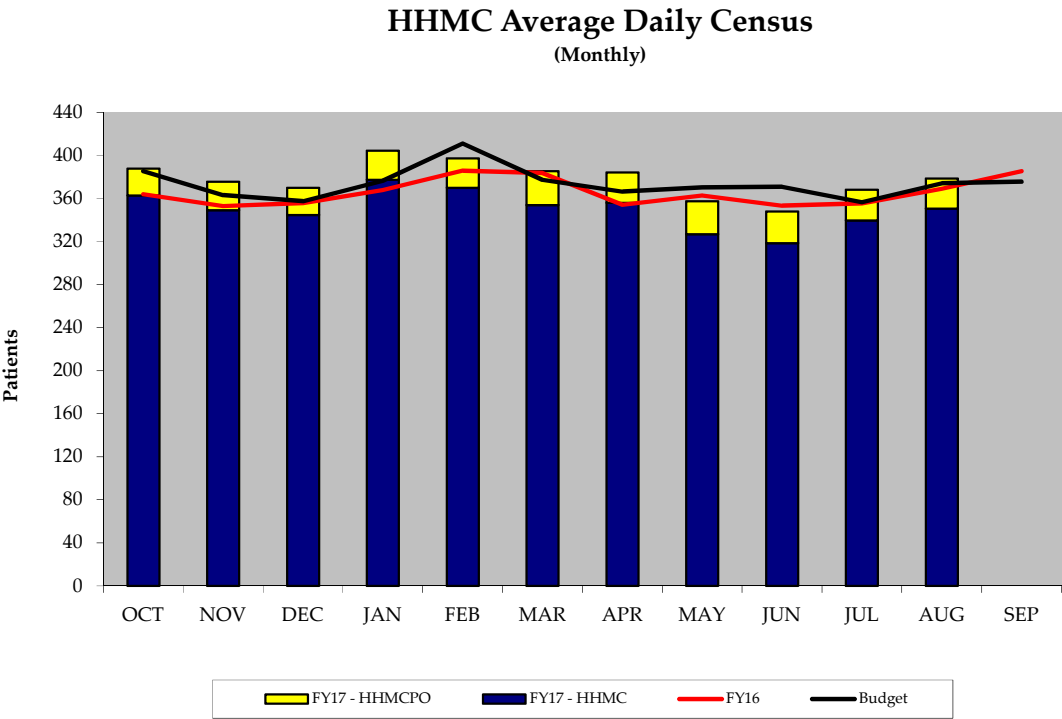
Month Ended				Eleven Months Ended				
August 31,				August 31,				
2016	2017	Budget	Var.		2016	2017	Budget	Var.



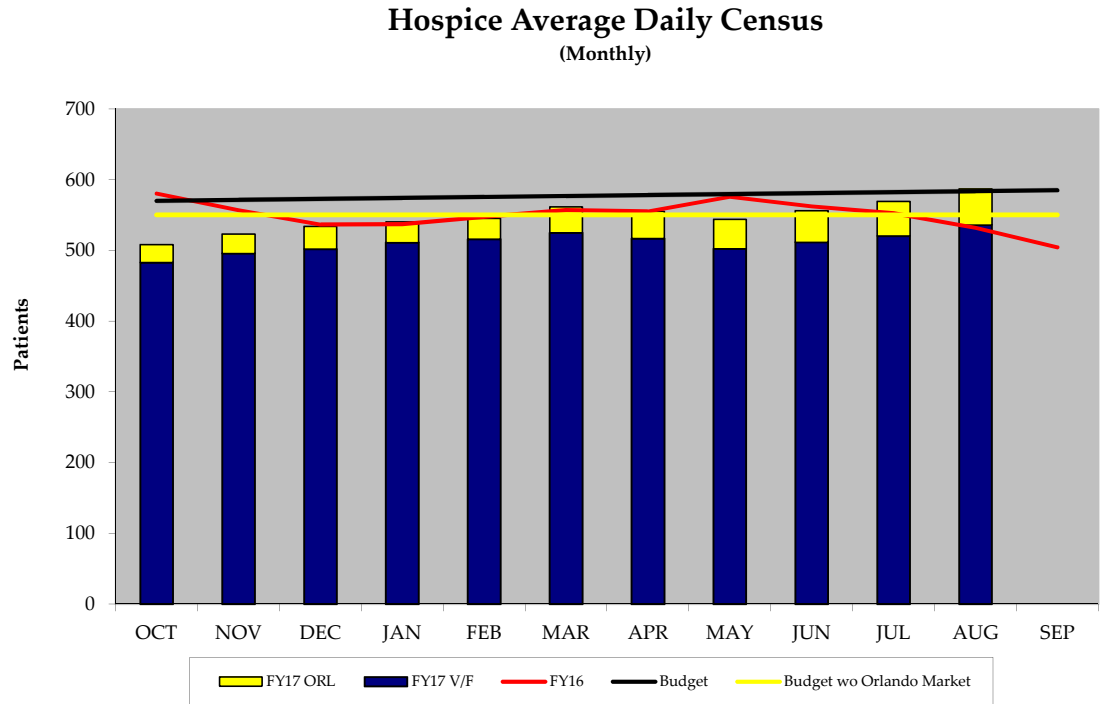
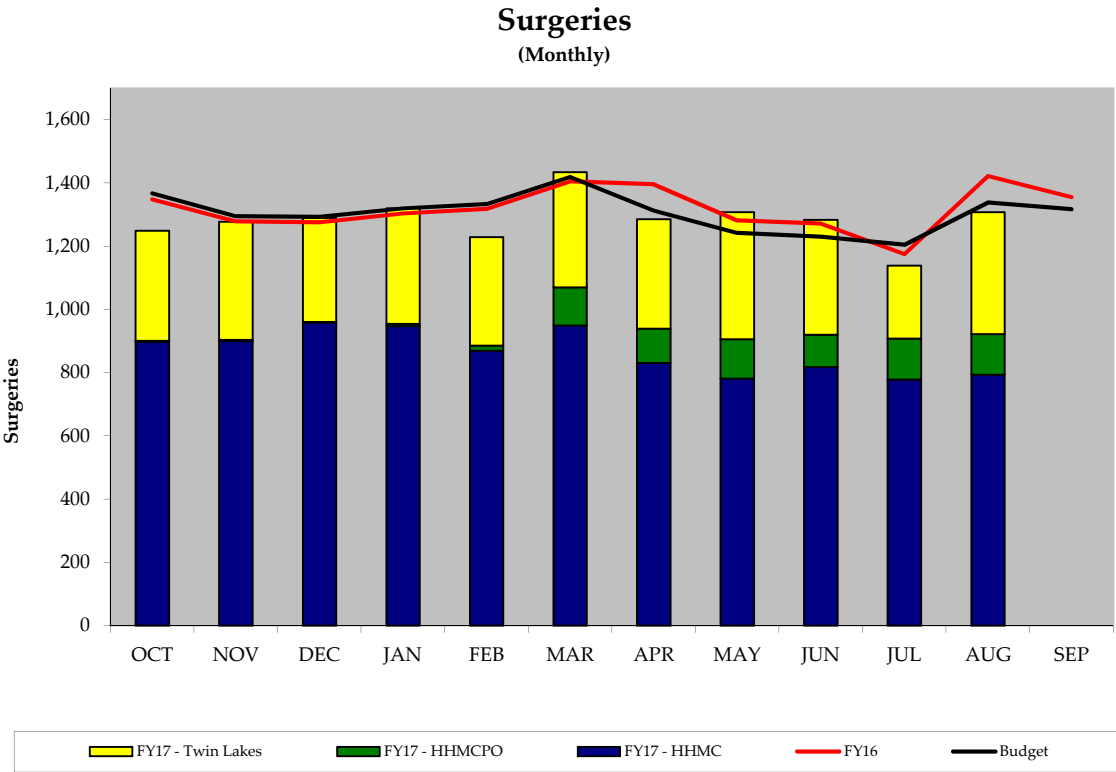
## Halifax Health Statistical Summary

Month Ended August 31,				Eleven Months Ended August 31,			
<u>2016</u>	<u>2017</u>	<u>Budget</u>	<u>Var.</u>	<u>2016</u>	<u>2017</u>	<u>Budget</u>	<u>Var.</u>
<b><u>Physician Practice Activity</u></b>							
<b><u>Primary Care Visits</u></b>							
322	476	687	-30.7%	Ormond Beach	2,811	3,725	7,419 -49.8%
1,136	1,062	1,133	-6.3%	Daytona Beach	11,878	11,163	11,848 -5.8%
578	661	681	-2.9%	Port Orange	4,410	7,423	9,824 -24.4%
366	350	478	-26.8%	Deltona	4,947	3,159	6,462 -51.1%
-	681	-	N/A	New Smyrna	-	3,444	- N/A
482	696	1,101	-36.8%	Ormond Beach (Women's/OB)	4,841	5,557	10,856 -48.8%
-	224	806	-72.2%	Ormond Beach - Urgent Care	-	1,141	8,866 -87.1%
<b>2,884</b>	<b>4,150</b>	<b>4,886</b>	<b>-15.1%</b>	<b>Primary Care Visits</b>	<b>28,887</b>	<b>35,612</b>	<b>55,275 -35.6%</b>
<b><u>Children's Medical Center Visits</u></b>							
865	844	1,360	-37.9%	Ormond Beach	8,070	9,315	12,684 -26.6%
421	298	432	-31.0%	Palm Coast	4,460	1,477	4,576 -67.7%
518	612	548	11.7%	Port Orange	5,072	5,566	5,369 3.7%
<b>1,804</b>	<b>1,754</b>	<b>2,340</b>	<b>-25.0%</b>	<b>Children's Medical Center Visits</b>	<b>17,602</b>	<b>16,358</b>	<b>22,629 -27.7%</b>
<b><u>Community Clinic Visits</u></b>							
562	479	532	-10.0%	Keech Street	4,653	4,606	4,407 4.5%
311	223	311	-28.3%	Adult Community Clinic	3,934	2,666	3,934 -32.2%
<b>873</b>	<b>702</b>	<b>843</b>	<b>-16.7%</b>	<b>Community Clinic Visits</b>	<b>8,587</b>	<b>7,272</b>	<b>8,341 -12.8%</b>

# Halifax Health Statistical Summary - Graphic



# Halifax Health Statistical Summary - Graphic



**Halifax Health**  
**Condensed Statement of Net Position**  
(\$ in thousands)

	August 31,		
	2017	2016	Change
<b><u>Assets</u></b>			
Cash and cash equivalents	\$41,607	\$54,644	(\$13,037)
Investments	269,863	262,890	6,973
Board designated assets	45,190	44,969	221
Accounts receivable	67,597	64,197	3,400
Restricted assets whose use is limited	13,690	19,131	(5,441)
Other assets	39,985	38,395	1,590
Deferred outflow - swap	33,119	44,636	(11,517)
Deferred outflow - loss on bond refunding	16,532	17,456	(924)
Deferred outflow - pension	27,466	37,204	(9,738)
Property, plant and equipment	352,469	359,928	(7,459)
Total Assets	\$907,518	\$943,450	(\$35,932)
<b><u>Liabilities and Net position</u></b>			
Accounts payable	\$29,755	\$30,987	(\$1,232)
Other liabilities	76,632	82,318	(5,686)
Net pension liability	106,228	130,372	(24,144)
Long-term debt	347,070	354,593	(7,523)
Premium on LTD, net	19,318	19,987	(669)
Long-term value of swap	33,119	44,636	(11,517)
Net position	295,396	280,557	14,839
Total Liabilities and Net position	\$907,518	\$943,450	(\$35,932)

**Halifax Health**  
**Statement of Cash Flows**  
(\$ in thousands)

Month ended August 31, 2017	Month ended August 31, 2016	Variance		Eleven Months ended August 31, 2017	Eleven Months ended August 31, 2016	Variance
			<b>Cash flows from operating activities:</b>			
\$46,834	\$43,392	\$3,442	Receipts from third party payors and patients	\$458,312	\$450,589	\$7,723
(22,019)	(22,085)	66	Payments to employees	(275,302)	(257,474)	(17,828)
(19,550)	(15,586)	(3,964)	Payments to suppliers	(177,648)	(166,418)	(11,230)
34	15	19	Receipt of ad valorem taxes	11,671	13,181	(1,510)
-	-	-	Receipt (payment) of State UPL funds, net	4,864	816	4,048
2,380	1,795	585	Other receipts	31,347	30,073	1,274
(3,935)	(3,636)	(299)	Other payments	(40,376)	(41,474)	1,098
3,744	3,895	(151)	Net cash provided by operating activities	12,868	29,293	(16,425)
			<b>Cash flows from noncapital financing activities:</b>			
25	754	(729)	Proceeds from donations received	893	1,923	(1,030)
-	-	-	Nonoperating gain (loss)	16	(6)	22
25	754	(729)	Net cash provided by noncapital financing activities	909	1,917	(1,008)
			<b>Cash flows from capital and related financing activities:</b>			
(1,804)	(2,186)	382	Acquisition of capital assets	(18,025)	(22,368)	4,343
(201)	(195)	(6)	Payment of long-term debt	(7,325)	(2,095)	(5,230)
-	-	-	Proceeds from issuance of long-term debt	-	175,424	(175,424)
-	558	(558)	Transfers to trustee held funds	5,474	(12,619)	18,093
-	-	-	Payment for defeasance of bonds	-	(168,728)	168,728
(337)	(356)	19	Payment of interest on long-term debt	(16,511)	(14,467)	(2,044)
-	-	-	Payment of bond issue costs	-	(1,774)	1,774
(2,342)	(2,179)	(163)	Net cash used in capital financing activities	(36,387)	(46,627)	10,240
			<b>Cash flows from investing activities:</b>			
237	1,623	(1,386)	Realized investment income (loss)	4,976	7,971	(2,995)
(230)	(12,956)	12,726	Purchases of investments/limited use assets	(8,932)	(113,946)	105,014
(39)	10,517	(10,556)	Sales/Maturities of investments/limited use assets	9,600	120,283	(110,683)
(32)	(816)	784	Net cash provided by (used in) investing activities	5,644	14,308	(8,664)
1,395	1,654	(259)	<b>Net increase (decrease) in cash and cash equivalents</b>	(16,966)	(1,109)	(15,857)
40,212	52,990	(12,778)	<b>Cash and cash equivalents at beginning of period</b>	58,573	55,753	2,820
\$41,607	\$54,644	(\$13,037)	<b>Cash and cash equivalents at end of period</b>	\$41,607	\$54,644	(\$13,037)

**Halifax Health**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

<b>Actual Month Ended August 31, 2017</b>	<b>Actual Month Ended August 31, 2016</b>	<b>Favorable (Unfavorable) Variance</b>		<b>Actual Eleven Months August 31, 2017</b>	<b>Actual Eleven Months August 31, 2016</b>	<b>Favorable (Unfavorable) Variance</b>
			Operating revenues:			
\$58,290	\$50,113	\$8,177	Net patient service revenue, before provision for bad debts	\$552,373	\$549,177	\$3,196
(14,290)	(7,800)	(6,490)	Provision for bad debts	(85,020)	(98,840)	13,820
44,000	42,313	1,687	Net patient service revenue	467,353	450,337	17,016
938	1,104	(166)	Ad valorem taxes	10,314	12,148	(1,834)
1,879	2,518	(639)	Other revenue	24,385	27,887	(3,502)
46,817	45,935	882	Total operating revenues	502,052	490,372	11,680
			Operating expenses:			
23,128	20,975	(2,153)	Salaries and benefits	255,377	235,185	(20,192)
6,757	6,998	241	Purchased services	71,781	72,742	961
8,669	8,443	(226)	Supplies	92,630	85,327	(7,303)
2,038	2,093	55	Depreciation and amortization	21,897	22,756	859
1,395	1,435	40	Interest	15,464	15,906	442
630	600	(30)	Ad valorem tax related expenses	6,847	6,919	72
845	746	(99)	Leases and rentals	8,722	8,323	(399)
2,460	2,320	(140)	Other	24,780	26,651	1,871
45,922	43,610	(2,312)	Total operating expenses	497,498	473,809	(23,689)
895	2,325	(1,430)	Excess of operating revenues over expenses	4,554	16,563	(12,009)
			Nonoperating revenues, expenses, and gains/(losses):			
237	1,623	(1,386)	Realized investment income/(losses)	4,975	7,972	(2,997)
106	(1,755)	1,861	Unrealized investment income/(losses)	2,276	3,703	(1,427)
25	754	(729)	Donation revenue	895	1,922	(1,027)
-	-	-	Interest - bond issue costs	-	(1,774)	1,774
-	-	-	Nonoperating gains/(losses), net	18	(6)	24
368	622	(254)	Total nonoperating revenues, expenses, and gains/(losses)	8,164	11,817	(3,653)
<b>\$1,263</b>	<b>\$2,947</b>	<b>(\$1,684)</b>	<b>Increase in net position</b>	<b>\$12,718</b>	<b>\$28,380</b>	<b>(\$15,662)</b>

**Halifax Health**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

Actual Month Ended August 31, 2017	Static Budget Month Ended August 31, 2017	Favorable (Unfavorable) Variance		Actual Eleven Months August 31, 2017	Static Budget Eleven Months August 31, 2017	Favorable (Unfavorable) Variance
			Operating revenues:			
\$58,290	\$48,312	\$9,978	Net patient service revenue, before provision for bad debts	\$552,373	\$522,866	\$29,507
(14,290)	(5,981)	(8,309)	Provision for bad debts	(85,020)	(66,146)	(18,874)
44,000	42,331	1,669	Net patient service revenue	467,353	456,720	10,633
938	938	-	Ad valorem taxes	10,314	10,314	-
1,879	2,036	(157)	Other revenue	24,385	23,504	881
46,817	45,305	1,512	Total operating revenues	502,052	490,538	11,514
			Operating expenses:			
23,128	23,675	547	Salaries and benefits	255,377	258,981	3,604
6,757	5,939	(818)	Purchased services	71,781	64,353	(7,428)
8,669	7,908	(761)	Supplies	92,630	85,762	(6,868)
2,038	2,003	(35)	Depreciation and amortization	21,897	21,859	(38)
1,395	1,407	12	Interest	15,464	15,502	38
630	628	(2)	Ad valorem tax related expenses	6,847	6,889	42
845	770	(75)	Leases and rentals	8,722	8,053	(669)
2,460	2,264	(196)	Other	24,780	24,770	(10)
45,922	44,594	(1,328)	Total operating expenses	497,498	486,169	(11,329)
895	711	184	Excess of operating revenues over expenses	4,554	4,369	185
			Nonoperating revenues, expenses, and gains/(losses):			
237	385	(148)	Realized investment income/(losses)	4,975	4,240	735
106	-	106	Unrealized investment income/(losses)	2,276	-	2,276
25	60	(35)	Donation revenue	895	656	239
-	-	-	Nonoperating gains/(losses), net	18	-	18
368	445	(77)	Total nonoperating revenues, expenses, and gains/(losses)	8,164	4,896	3,268
\$1,263	\$1,156	\$107	Increase in net position	\$12,718	\$9,265	\$3,453

**Halifax Health Medical Center**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

<b>Actual Month Ended August 31, 2017</b>	<b>Static Budget Month Ended August 31, 2017</b>	<b>Favorable (Unfavorable) Variance</b>		<b>Actual Eleven Months Ended August 31, 2017</b>	<b>Static Budget Eleven Months Ended August 31, 2017</b>	<b>Favorable (Unfavorable) Variance</b>
			Operating revenues:			
\$54,139	\$44,520	\$9,619	Net patient service revenue, before provision for bad debts	\$513,371	\$482,212	\$31,159
(13,996)	(5,882)	(8,114)	Provision for bad debts	(83,830)	(65,056)	(18,774)
40,143	38,638	1,505	Net patient service revenue	429,541	417,156	12,385
938	938	-	Ad valorem taxes	10,314	10,314	-
1,320	1,320	-	Other revenue	14,875	15,627	(752)
42,401	40,896	1,505	Total operating revenues	454,730	443,097	11,633
			Operating expenses:			
21,083	21,549	466	Salaries and benefits	232,419	235,586	3,167
5,562	4,793	(769)	Purchased services	60,222	52,363	(7,859)
8,446	7,669	(777)	Supplies	90,128	83,205	(6,923)
1,910	1,876	(34)	Depreciation and amortization	20,426	20,391	(35)
1,388	1,400	12	Interest	15,361	15,399	38
630	628	(2)	Ad valorem tax related expenses	6,847	6,889	42
665	602	(63)	Leases and rentals	6,805	6,234	(571)
2,305	2,010	(295)	Other	22,594	22,012	(582)
41,989	40,527	(1,462)	Total operating expenses	454,802	442,079	(12,723)
412	369	43	Excess (deficiency) of operating revenues over expenses	(72)	1,018	(1,090)
			Nonoperating revenues, expenses, and gains/(losses):			
176	197	(21)	Realized investment income/(losses)	2,582	2,172	410
247	-	247	Unrealized investment income/(losses)	(837)	-	(837)
5	-	5	Donation revenue	43	-	43
-	-	-	Nonoperating gains/(losses), net	18	-	18
428	197	231	Total nonoperating revenues, expenses, and gains/(losses)	1,806	2,172	(366)
\$840	\$566	\$274	Increase in net position	\$1,734	\$3,190	(\$1,456)



**Halifax Health Medical Center**  
**Net Patient Service Revenue**  
**(\$ in thousands)**

Actual Month Ended August 31, 2016		Actual Month Ended August 31, 2017		Static Budget Month Ended August 31, 2017			Actual Eleven Months Ended August 31, 2016		Actual Eleven Months Ended August 31, 2017		Static Budget Eleven Months Ended August 31, 2017	
\$146,749	100.00%	\$162,652	100.00%	\$152,554	100.00%	Gross charges	\$1,529,760	100.00%	\$1,680,883	100.00%	\$1,623,358	100.00%
(8,437)	-5.75%	(6,621)	-4.07%	(8,646)	-5.67%	Charity	(69,857)	-4.57%	(86,262)	-5.13%	(93,507)	-5.76%
(91,693)	-62.48%	(101,892)	-62.64%	(99,388)	-65.15%	Contractual adjustments	(950,535)	-62.14%	(1,081,250)	-64.33%	(1,047,639)	-64.54%
46,619	31.77%	54,139	33.29%	44,520	29.18%	Gross charges, before provision for bad debts	509,368	33.30%	513,371	30.54%	482,212	29.70%
(7,763)	-5.29%	(13,996)	-8.60%	(5,882)	-3.86%	Provision for bad debts	(98,006)	-6.41%	(83,830)	-4.99%	(65,056)	-4.01%
<b>\$38,856</b>	<b>26.48%</b>	<b>\$40,143</b>	<b>24.68%</b>	<b>\$38,638</b>	<b>25.33%</b>	<b>Net patient service revenue</b>	<b>\$411,362</b>	<b>26.89%</b>	<b>\$429,541</b>	<b>25.55%</b>	<b>\$417,156</b>	<b>25.70%</b>

**Halifax Health Hospice**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

Actual Month Ended August 31, 2017	Static Budget Month Ended August 31, 2017	Favorable (Unfavorable) Variance		Actual Eleven Months Ended August 31, 2017	Static Budget Eleven Months Ended August 31, 2017	Favorable (Unfavorable) Variance
			Operating revenues:			
\$4,151	\$3,792	\$359	Net patient service revenue, before provision for bad debts	\$39,002	\$40,654	(\$1,652)
(294)	(99)	(195)	Provision for bad debts	(1,190)	(1,090)	(100)
3,857	3,693	164	Net patient service revenue	37,812	39,564	(1,752)
168	199	(31)	Other revenue	1,843	2,190	(347)
4,025	3,892	133	Total operating revenues	39,655	41,754	(2,099)
			Operating expenses:			
1,978	2,051	73	Salaries and benefits	22,181	22,573	392
1,158	1,107	(51)	Purchased services	11,169	11,566	397
223	238	15	Supplies	2,499	2,548	49
61	60	(1)	Depreciation and amortization	738	735	(3)
175	163	(12)	Leases and rentals	1,861	1,763	(98)
153	184	31	Other	1,810	1,982	172
3,748	3,803	55	Total operating expenses	40,258	41,167	909
277	89	188	Excess (deficiency) of operating revenues over expenses	(603)	587	(1,190)
			Nonoperating revenues, expenses, and gains/(losses):			
61	188	(127)	Realized investment income/(losses)	2,393	2,068	325
(141)	-	(141)	Unrealized investment income/(losses)	3,113	-	3,113
20	60	(40)	Donation revenue	852	656	196
-	-	-	Nonoperating gains/(losses), net	-	-	-
(60)	248	(308)	Total nonoperating revenues, expenses, and gains/(losses)	6,358	2,724	3,634
\$217	\$337	(\$120)	Increase in net position	\$5,755	\$3,311	\$2,444

**Volusia Health Network / Halifax Management Systems**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

<b>Actual Month Ended August 31, 2017</b>	<b>Static Budget Month Ended August 31, 2017</b>	<b>Favorable (Unfavorable) Variance</b>		<b>Actual Eleven Months August 31, 2017</b>	<b>Static Budget Eleven Months August 31, 2017</b>	<b>Favorable (Unfavorable) Variance</b>
			Operating revenues:			
\$0	\$0	\$0	Net patient service revenue, before provision for bad debts	\$0	\$0	\$0
-	-	-	Provision for bad debts	-	-	-
-	-	-	Net patient service revenue	-	-	-
326	341	(15)	Other revenue	3,633	3,753	(120)
326	341	(15)	Total operating revenues	3,633	3,753	(120)
			Operating expenses:			
57	65	8	Salaries and benefits	667	707	40
36	35	(1)	Purchased services	376	383	7
-	1	1	Supplies	3	9	6
67	67	-	Depreciation and amortization	733	733	-
7	7	-	Interest	103	103	-
5	5	-	Leases and rentals	56	56	-
1	3	2	Other	12	37	25
173	183	10	Total operating expenses	1,950	2,028	78
153	158	(5)	Excess of operating revenues over expenses	1,683	1,725	(42)
			Nonoperating revenues, expenses, and gains/(losses):			
-	-	-	Realized investment income/(losses)	-	-	-
-	-	-	Unrealized investment income/(losses)	-	-	-
-	-	-	Donation revenue	-	-	-
-	-	-	Nonoperating gains/(losses), net	-	-	-
-	-	-	Total nonoperating revenues, expenses, and gains/(losses)	-	-	-
\$153	\$158	(\$5)	Increase in net position	\$1,683	\$1,725	(\$42)

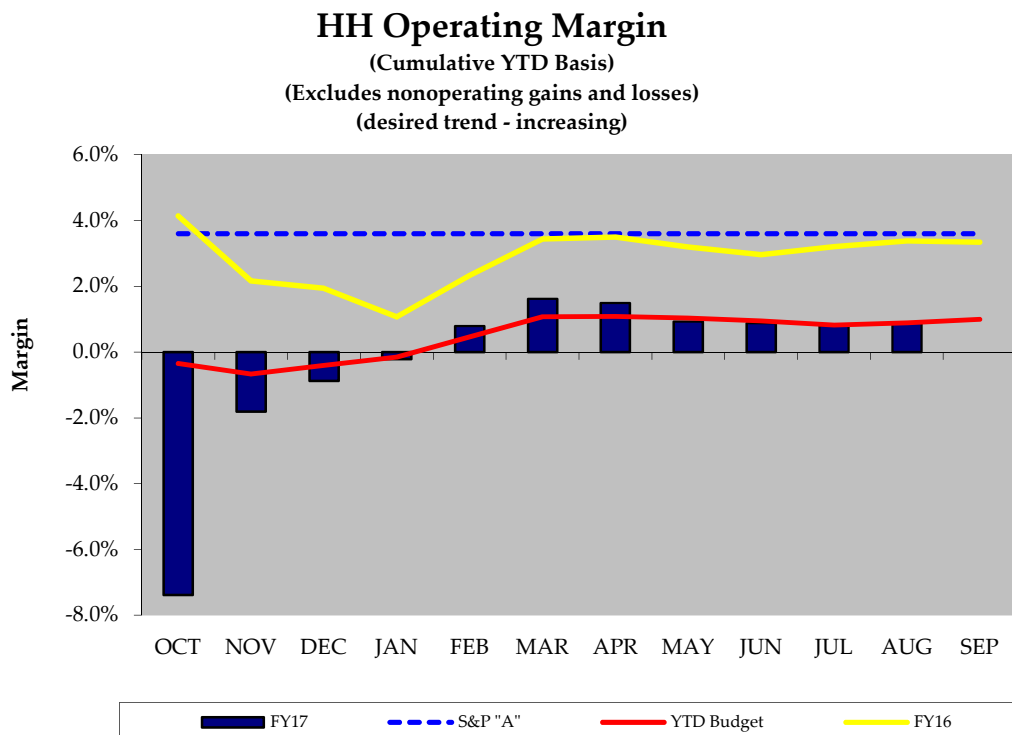
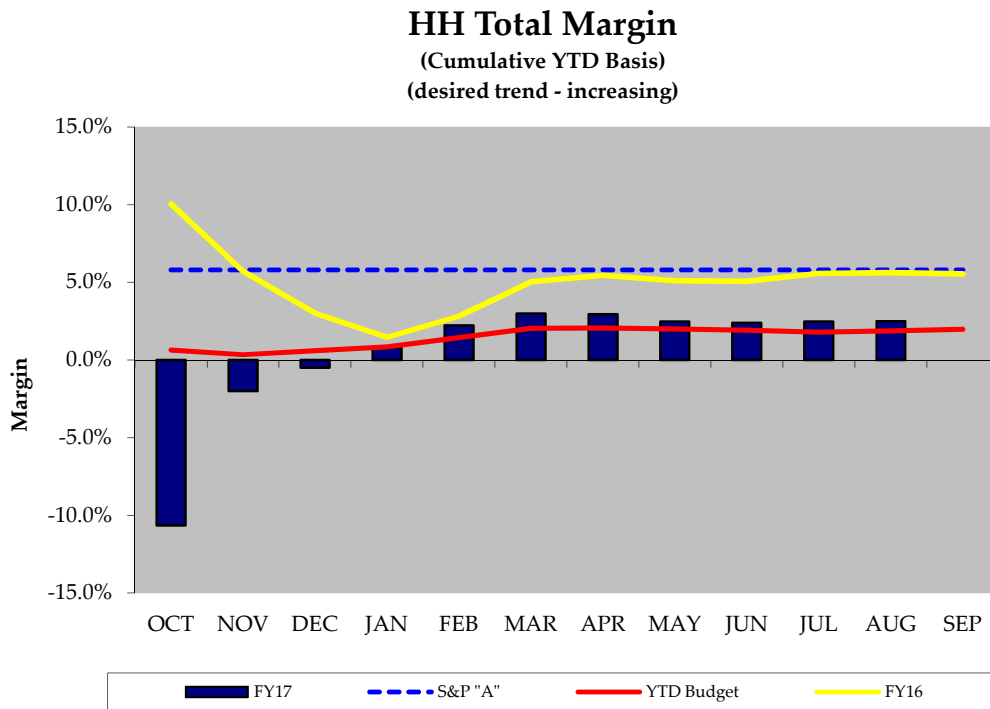
**Halifax Health Foundation**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

Actual Month Ended August 31, 2017	Static Budget Month Ended August 31, 2017	Favorable (Unfavorable) Variance		Actual Eleven Months August 31, 2017	Static Budget Eleven Months Ended August 31, 2017	Favorable (Unfavorable) Variance
			Operating revenues:			
\$0	\$0	\$0	Net patient service revenue, before provision for bad debts	\$0	\$0	\$0
-	-	-	Provision for bad debts	-	-	-
-	-	-	Net patient service revenue	-	-	-
37	105	(68)	Realized investment income/(losses)	1,245	1,155	90
(108)	-	(108)	Unrealized investment income/(losses)	1,714	-	1,714
136	71	65	Donation revenue	1,075	779	296
-	-	-	Other revenue	-	-	-
65	176	(111)	Total operating revenues	4,034	1,934	2,100
			Operating expenses:			
10	10	-	Salaries and benefits	110	115	5
1	4	3	Purchased services	14	41	27
-	-	-	Supplies	-	-	-
-	-	-	Depreciation and amortization	-	-	-
-	-	-	Interest	-	-	-
-	-	-	Leases and rentals	-	-	-
1	67	66	Other	364	739	375
12	81	69	Total operating expenses	488	895	407
\$53	\$95	(\$42)	Increase in net position	\$3,546	\$1,039	\$2,507

**Halifax Health Medical Center (Obligated Group)**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

Actual Month Ended August 31, 2017	Static Budget Month Ended August 31, 2017	Favorable (Unfavorable) Variance		Actual Eleven Months Ended August 31, 2017	Static Budget Eleven Months Ended August 31, 2017	Favorable (Unfavorable) Variance
			Operating revenues:			
\$54,139	\$44,520	\$9,619	Net patient service revenue, before provision for bad debts	\$513,371	\$482,212	\$31,159
(13,996)	(5,882)	(8,114)	Provision for bad debts	(83,830)	(65,056)	(18,774)
40,143	38,638	1,505	Net patient service revenue	429,541	417,156	12,385
938	938	-	Ad valorem taxes	10,314	10,314	-
1,320	1,320	-	Other revenue	14,875	15,627	(752)
42,401	40,896	1,505	Total operating revenues	454,730	443,097	11,633
			Operating expenses:			
21,083	21,549	466	Salaries and benefits	232,419	235,586	3,167
5,562	4,793	(769)	Purchased services	60,222	52,363	(7,859)
8,446	7,669	(777)	Supplies	90,128	83,205	(6,923)
1,910	1,876	(34)	Depreciation and amortization	20,426	20,391	(35)
1,388	1,400	12	Interest	15,361	15,399	38
630	628	(2)	Ad valorem tax related expenses	6,847	6,889	42
665	602	(63)	Leases and rentals	6,805	6,234	(571)
2,305	2,010	(295)	Other	22,594	22,012	(582)
41,989	40,527	(1,462)	Total operating expenses	454,802	442,079	(12,723)
412	369	43	Excess (deficiency) of operating revenues over expenses	(72)	1,018	(1,090)
			Nonoperating revenues, expenses, and gains/(losses):			
176	197	(21)	Realized investment income/(losses)	2,582	2,172	410
247	-	247	Unrealized investment income/(losses)	(837)	-	(837)
5	-	5	Donation revenue	43	-	43
-	-	-	Nonoperating gains/(losses), net	18	-	18
428	197	231	Total nonoperating revenues, expenses, and gains/(losses)	1,806	2,172	(366)
840	566	274	Increase in net position before other changes in net position	1,734	3,190	(1,456)
423	590	(167)	Income from affiliates	10,984	6,075	4,909
\$1,263	\$1,156	\$107	Increase in net position	\$12,718	\$9,265	\$3,453

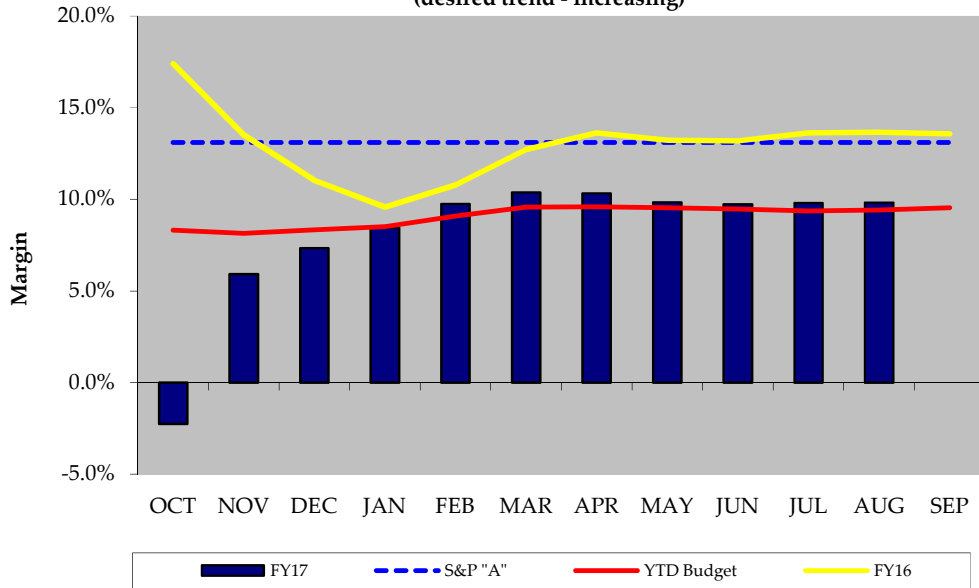
# Halifax Health Financial Summary - Graphic



# Halifax Health Financial Summary - Graphic

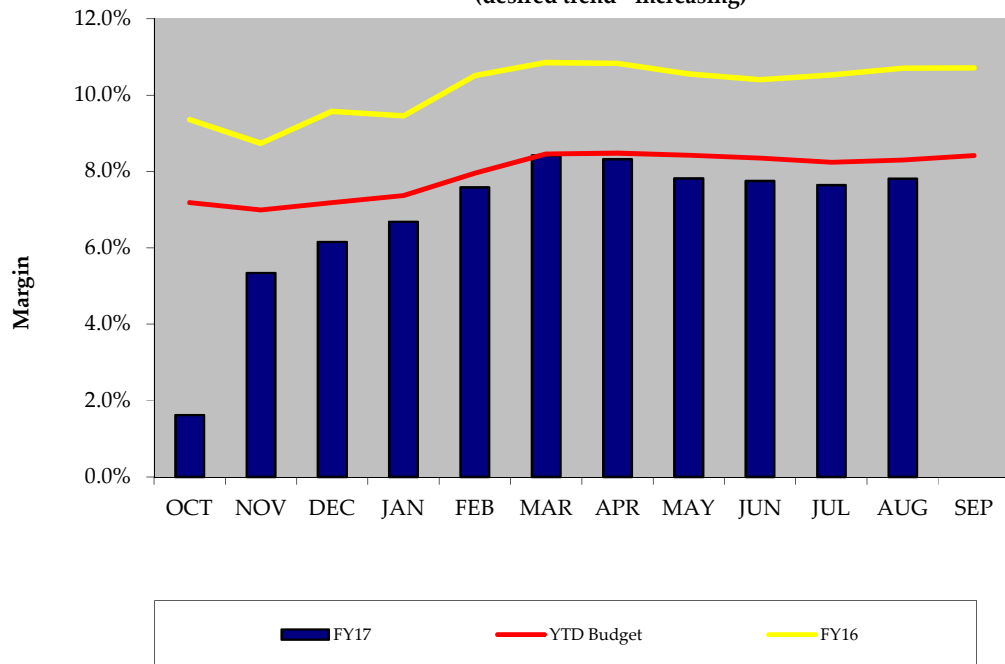
## HH EBIDA Margin

(Cumulative YTD Basis)  
(desired trend - increasing)



## HH Adjusted Operating EBIDA Margin

(Cumulative YTD Basis)  
(Excludes nonoperating gains and losses)  
(desired trend - increasing)



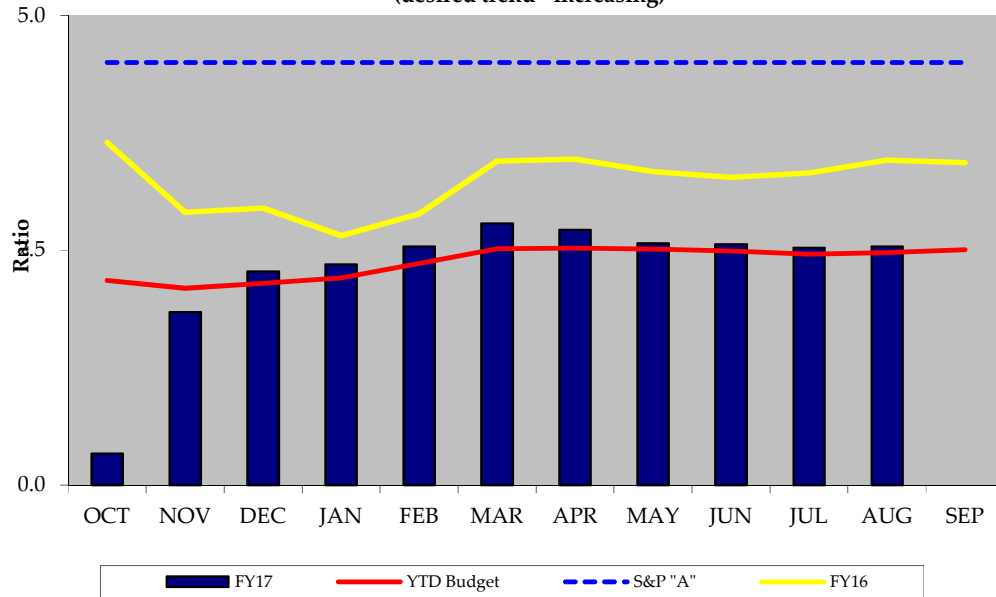
# Halifax Health Financial Summary - Graphic

## HH MADS Coverage Ratio

(Annualized Basis)

(Excludes unrealized investment gains/losses in accordance with covenant requirements)

(desired trend - increasing)

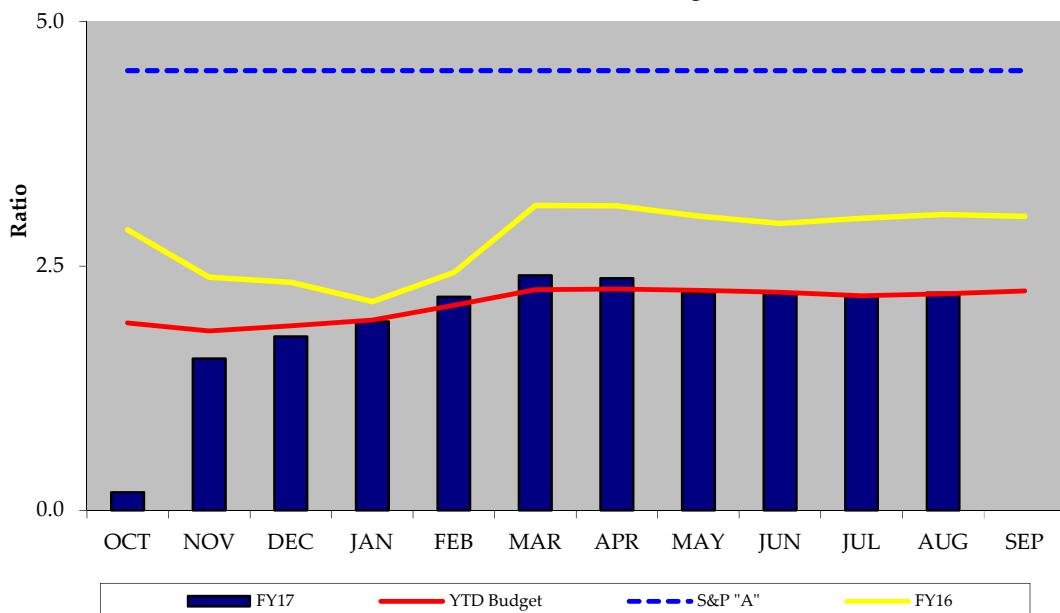


## HH MADS Coverage Ratio - Operations Only

(Annualized Basis)

(Excludes nonoperating gains and losses)

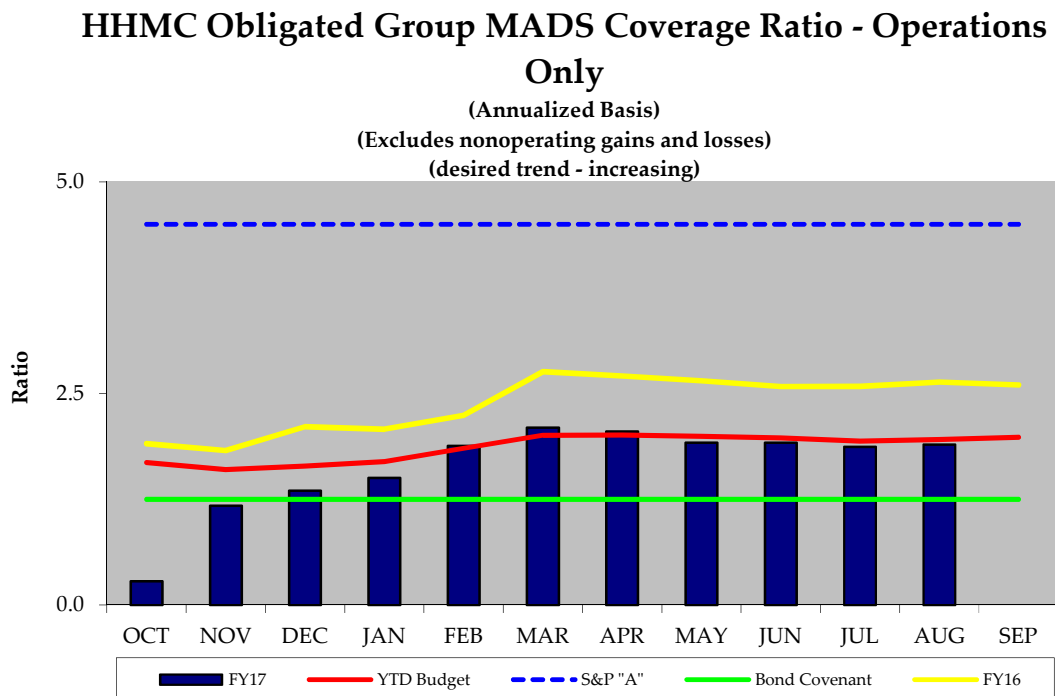
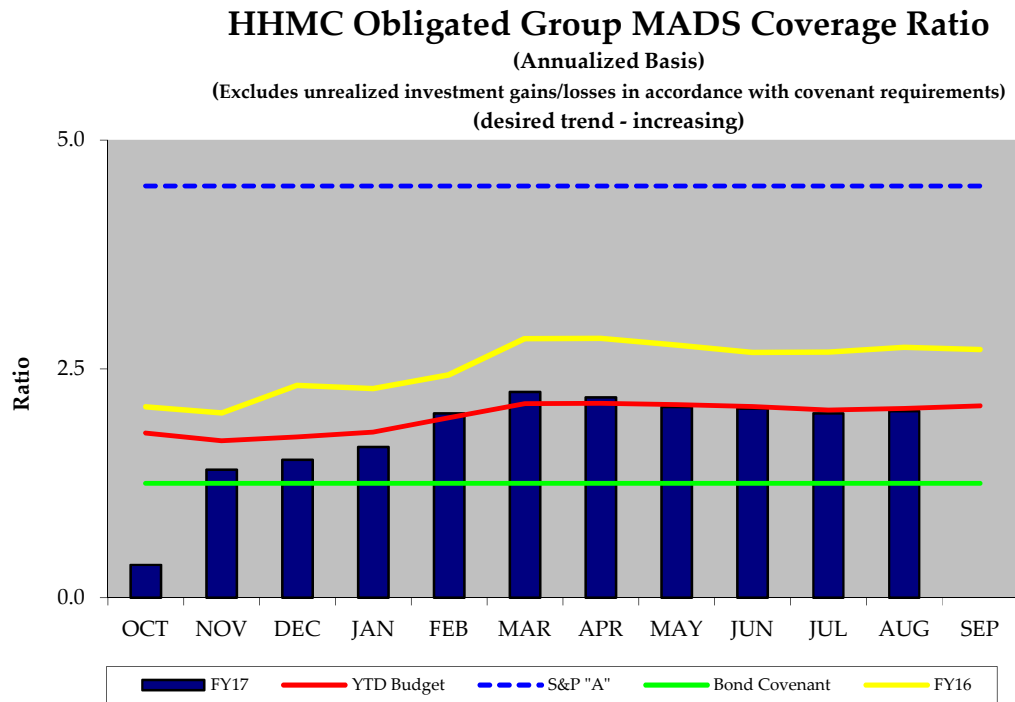
(desired trend - increasing)





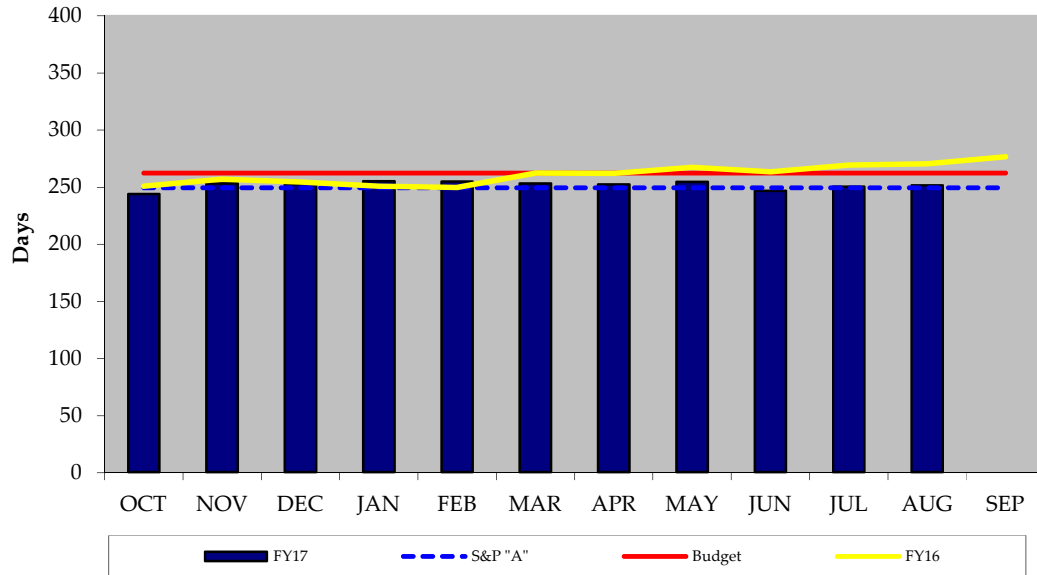
# Halifax Health

## Financial Summary - Graphic

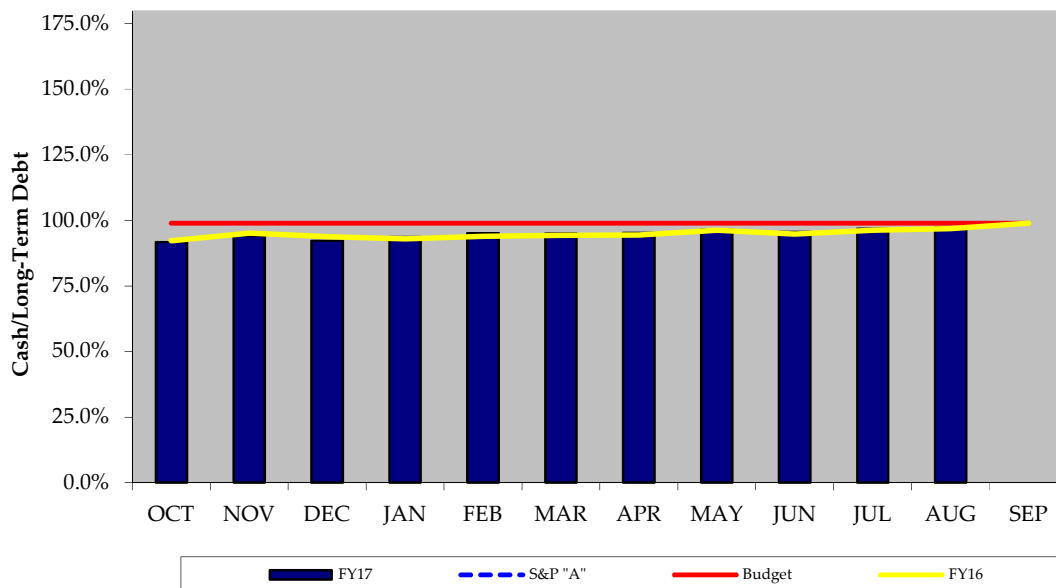


# Halifax Health Financial Summary - Graphic

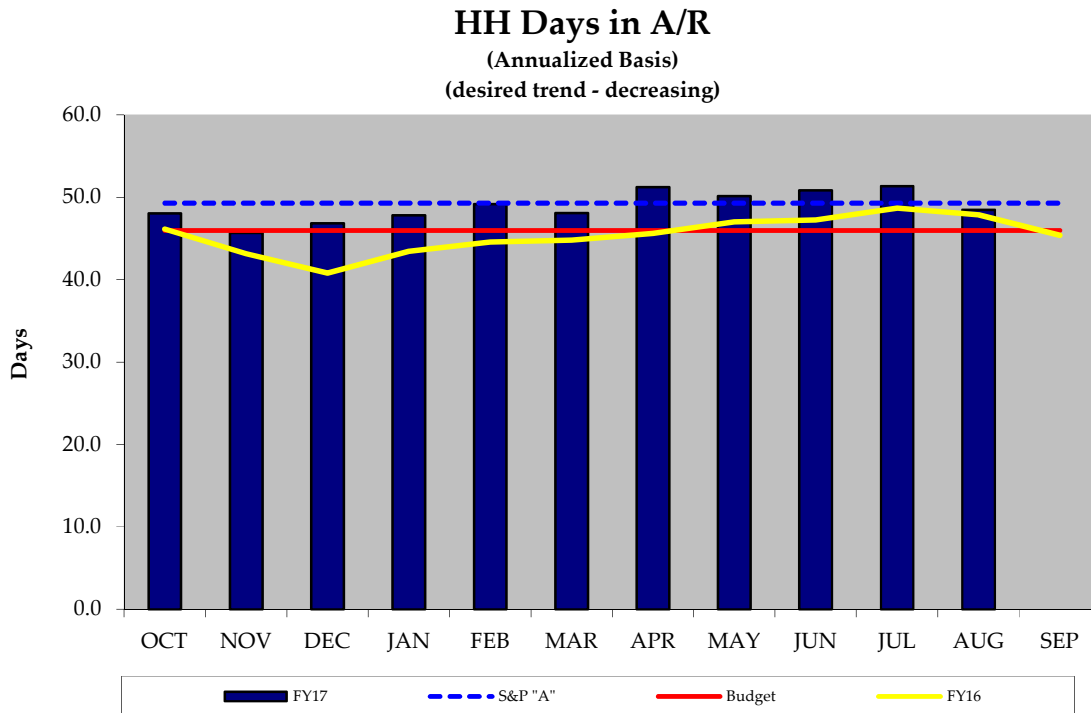
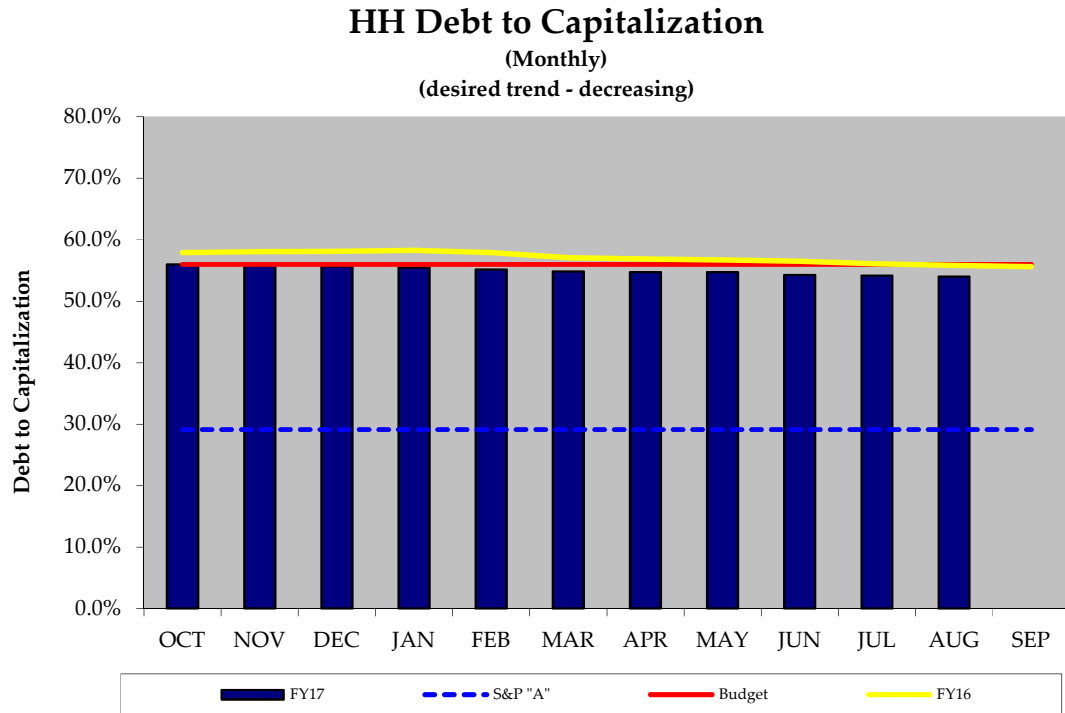
**HH Days Cash on Hand**  
(Annualized Basis)  
(desired trend - increasing)



**HH Cash/Debt**  
(Monthly)  
(desired trend - increasing)

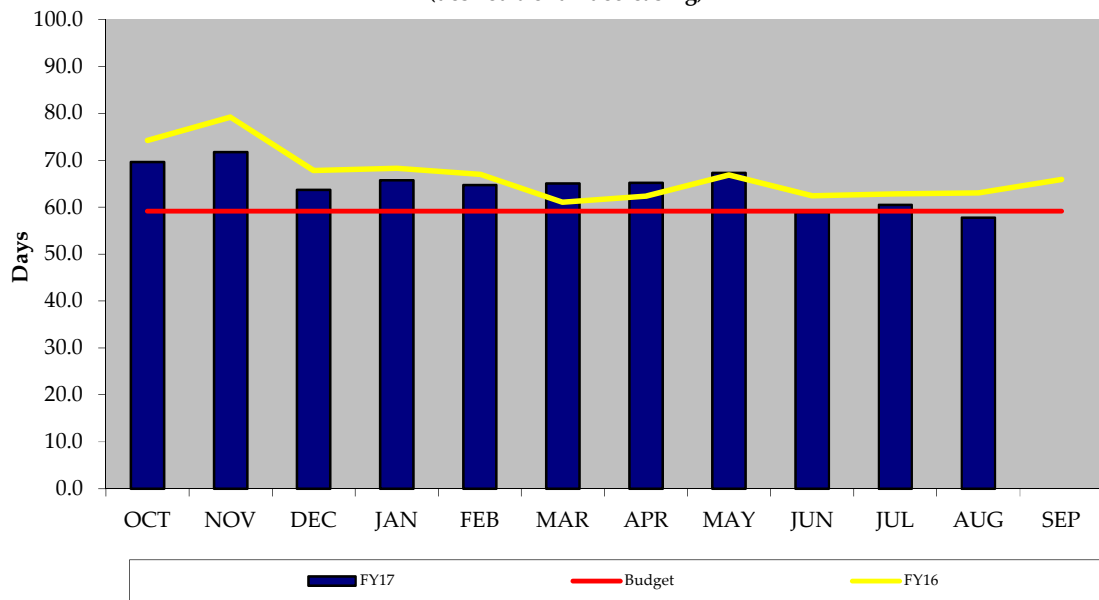


# Halifax Health Financial Summary - Graphic

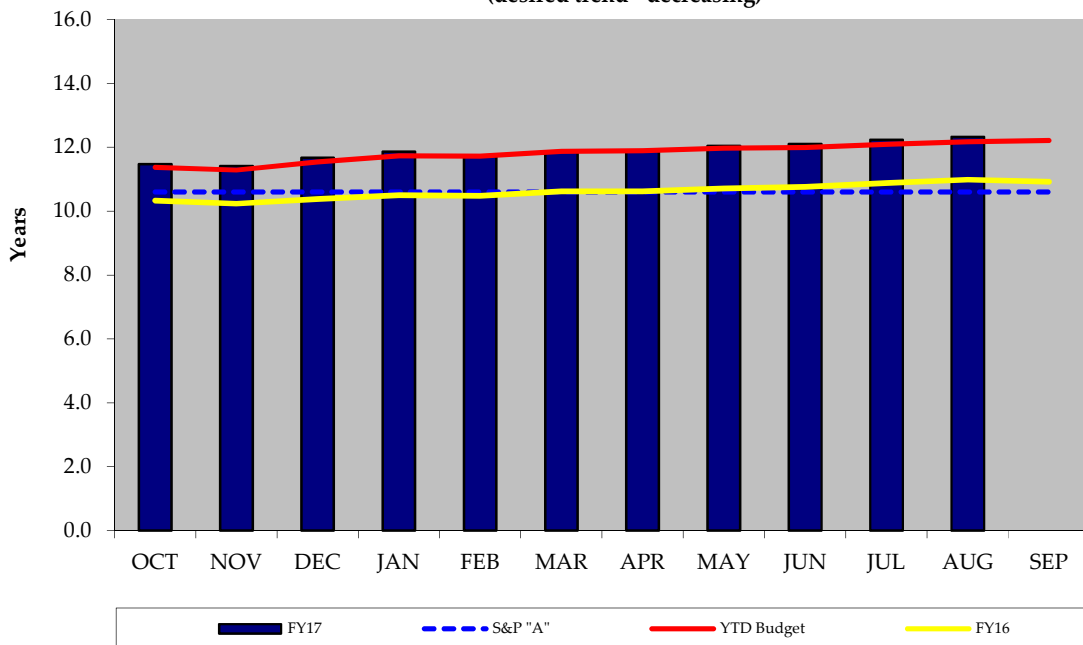


# Halifax Health Financial Summary - Graphic

**HH Average Payment Period**  
(Annualized Basis)  
(desired trend - decreasing)



**HH Average Age of Plant**  
(Annualized Basis)  
(desired trend - decreasing)



**Halifax Health**  
**Financial Ratios and Operating Indicators**  
**Definitions and Calculations**

Indicator	Definition	Calculation
Total Margin *	Gauges the relative efficiency with which the System produces its output.	$\frac{\text{Net Income}}{\text{Total Revenues}}$
EBIDA Margin *	Gauges the relative efficiency excluding capital costs with which the System produces its output.	$\frac{\text{Net income} + \text{Int} + \text{Depr} + \text{Amort}}{\text{Total Revenues}}$
MADS Coverage Ratio *	Measures profitability relative to the Maximum Principal and Interest Payment of Debt	$\frac{\text{Net Income} + \text{Depr} + \text{Amort} + \text{Int}}{\text{Maximum Annual Debt Service}}$
Days Cash on Hand	Measures the number of days of average cash expenses that the System maintains in cash and cash equivalents and unrestricted investments.	$\frac{\text{Unrestricted Cash and Investments}}{(\text{Total Expenses} - \text{Depr}) / \text{Days in Period}}$
Cash to Long-term Debt	Measures the percentage of unrestricted cash and investments to long-term debt.	$\frac{\text{Unrestricted Cash and Investments}}{\text{Long-term Debt}}$
Long-term Debt to Capitalization	Measures the reliance on long-term debt financing and ability to issue new debt.	$\frac{\text{Long-term Debt}}{\text{Long-term Debt} + \text{Net Position}}$
Days in Accounts Receivable	Measures the average time that receivables are outstanding, or the average collection period.	$\frac{\text{Accounts Receivable}}{\text{Net Patient Service Revenue} / \text{Days in Period}}$
Average Payment Period	Provides a measure of the average time that elapses before current liabilities are paid.	$\frac{\text{Current Liabilities}}{(\text{Total Expenses} - \text{Depr}) / \text{Days in Period}}$
Average Age of Plant	Provides a measure of the average age in years of the System's fixed assets.	$\frac{\text{Accumulated Depreciation}}{\text{Depreciation Expense}}$
Operating Margin	Gauges the relative operating efficiency with which the System produces its output.	$\frac{\text{Excess of Operating Revenues}}{\text{Total Operating Revenues} + \text{Bad Debt}}$
* Operations Only Indicators	Excludes realized and unrealized investment income, donations, and nonoperating gains and losses	

**Halifax Health**  
**Summary Financial Narrative**  
**For the twelve months ended September 30, 2017**

The performance of Halifax Health compared to budget and long-range targets (S&P "A" rated medians) for key financial indicators is as follows.

Financial Indicator	YTD Actual FY 17	YTD Budget FY 17	YTD Actual vs. Budget	S&P "A"	YTD Actual FY 17 vs. S&P "A"
Total Margin	2.3%	2.0%	Favorable	5.8%	Unfavorable
Operating Margin	0.6%	1.0%	Unfavorable	3.6%	Unfavorable
EBIDA Margin	9.7%	9.5%	Favorable	13.1%	Unfavorable
Operating EBIDA Margin	8.1%	8.6%	Unfavorable	10.8%	Unfavorable
Adjusted Operating EBIDA Margin *	7.4%	8.4%	Unfavorable	N/A	N/A
Days Cash on Hand	264	262	Favorable	249	Favorable
Cash to Debt	103.0%	98.9%	Favorable	189.9%	Unfavorable
Debt to Capitalization	55.4%	56.0%	Favorable	29.1%	Unfavorable

OG MADS Coverage	1.97	2.10	Unfavorable	4.50	Unfavorable
OG Debt to Capitalization	54.4%	55.0%	Favorable	29.1%	Unfavorable

\* -Excludes investment income/loss of Foundation recorded as operating income.

**Halifax Health Medical Center**

*Statistical Summary--*

- Admissions for the month and the fiscal year-to-date are less than budget and greater than last year.
- Patient days for the month and fiscal year-to-date are greater than budget and last year.
  - Observation patient days for the month are less than budget and last year; and for the fiscal year-to-date are greater than budget and last year.
- Surgery volumes for the month and fiscal year-to-date are less than budget and last year.
- Emergency room visits for the month and fiscal year-to-date are less than budget and greater than last year.

*Financial Summary --*

- Net patient service revenue for the fiscal year-to-date is 2.9% greater than budget.
- Total operating expenses for the fiscal year-to-date are 3.4% greater than budget.
- Loss from operations fiscal year-to-date of \$1.9 million compares unfavorably to budget by \$3.6 million.
- Nonoperating gains fiscal year-to-date of \$2.1 million, primarily consisting of net investment income, compares unfavorably to the budgeted amount by \$304,000.
- Increase in net position fiscal year-to-date of \$121,000 compares unfavorably to budget by \$4.0 million.

**Halifax Health Hospice**

*Statistical Summary --*

- Patient days for the month are greater than budget and last year; and for the fiscal year-to-date are less than budget and last year.

*Financial Summary --*

- Net patient service revenue for the fiscal year-to-date is 4.0% less than budget.
- Loss from operations fiscal year-to-date of \$775,000 compares unfavorably to budget by \$1.5 million, due primarily to a Medicare settlement adjustment relating to fiscal year 2015 that reduced net patient service revenue by approximately \$1.2 million.
- Nonoperating gains fiscal year-to-date of \$7.7 million, including investment income of \$6.8 million, is greater than the budgeted amount by \$4.7 million.
- Increase in net position fiscal year-to-date of \$6.9 million compares favorably to budget by \$3.2 million.

**Halifax Health**  
**Summary Financial Indicators – Excluding Estimated Hurricane Matthew**  
**and Hurricane Irma Costs**  
**For the twelve months ended September 30, 2017**

The performance of Halifax Health compared to budget and long-range targets (S&P “A” rated medians) for key financial indicators, including computations excluding \$3.15 million of estimated Hurricane Matthew and Hurricane Irma related costs, is as follows.

Financial Indicator	YTD Actual FY 17	YTD Adjusted Actual FY 17 (2)	YTD Budget FY 17	YTD Adj. Actual vs. Budget	S&P "A"	YTD Adj. Actual FY 17 vs. S&P "A"
Total Margin	2.3%	2.7%	2.0%	Favorable	5.8%	Unfavorable
Operating Margin	0.6%	0.9%	1.0%	Unfavorable	3.6%	Unfavorable
EBIDA Margin	9.7%	10.0%	9.5%	Favorable	13.1%	Unfavorable
Operating EBIDA Margin	8.1%	8.4%	8.6%	Unfavorable	10.8%	Unfavorable
Adjusted Operating EBIDA Margin (1)	7.4%	7.8%	8.4%	Unfavorable	N/A	N/A
Days Cash on Hand	264	267	262	Favorable	249	Favorable
Cash to Debt	103.0%	103.5%	98.9%	Favorable	189.9%	Unfavorable
Debt to Capitalization	55.4%	55.2%	56.0%	Favorable	29.1%	Unfavorable
OG MADS Coverage	1.97	2.06	2.10	Unfavorable	4.50	Unfavorable
OG Debt to Capitalization	54.4%	54.3%	55.0%	Favorable	29.1%	Unfavorable

(1)- Excludes investment income/loss of Foundation recorded as operating income.

(2)- Financial indicator computed by excluding estimated Hurricane Matthew and Hurricane Irma costs of \$3.15 million.

# Halifax Health Statistical Summary

Month Ended September 30,					Twelve Months Ended September 30,			
<u>2016</u>	<u>2017</u>	<u>Budget</u>	<u>Var.</u>		<u>2016</u>	<u>2017</u>	<u>Budget</u>	<u>Var.</u>
				<b><u>Inpatient Activity</u></b>				
1,561	1,441	1,575	-8.5%	HHMC Adult/Ped Admissions	18,929	18,760	19,149	-2.0%
133	185	153	20.9%	HHMCPO Adult/Ped Admissions	1,715	1,833	1,858	-1.3%
167	142	163	-12.9%	Adult Psych Admissions	1,727	1,856	1,980	-6.3%
56	66	51	29.4%	Rehabilitative Admissions	655	764	616	24.0%
<b>1,917</b>	<b>1,834</b>	<b>1,942</b>	<b>-5.6%</b>	<b>Total Adult/Ped Admissions</b>	<b>23,026</b>	<b>23,213</b>	<b>23,603</b>	<b>-1.7%</b>
8,598	7,811	7,895	-1.1%	HHMC Adult/Ped Patient Days	99,241	99,677	95,893	3.9%
612	965	738	30.8%	HHMCPO Adult/Ped Patient Days	6,582	10,335	8,988	15.0%
1,502	1,553	1,795	-13.5%	Adult Psych Patient Days	17,677	17,249	21,240	-18.8%
853	931	838	11.1%	Rehabilitative Patient Days	10,395	10,577	10,197	3.7%
<b>11,565</b>	<b>11,260</b>	<b>11,266</b>	<b>-0.1%</b>	<b>Total Adult/Ped Patient Days</b>	<b>133,895</b>	<b>137,838</b>	<b>136,318</b>	<b>1.1%</b>
5.5	5.4	5.0	8.1%	HHMC Average Length of Stay	5.2	5.3	5.0	6.1%
4.6	5.2	4.8	8.1%	HHMCPO Average Length of Stay	3.8	5.6	4.8	16.6%
<b>5.4</b>	<b>5.4</b>	<b>5.0</b>	<b>8.0%</b>	<b>HHMC/ HHMCPO Average Length of Stay</b>	<b>5.1</b>	<b>5.3</b>	<b>5.0</b>	<b>7.0%</b>
9.0	10.9	11.0	-0.7%	Adult Psych Average Length of Stay	10.2	9.3	10.7	-13.4%
15.2	14.1	16.4	-14.2%	Rehabilitative Length of Stay	15.9	13.8	16.6	-16.4%
<b>6.0</b>	<b>6.1</b>	<b>5.8</b>	<b>5.8%</b>	<b>Total Average Length of Stay</b>	<b>5.8</b>	<b>5.9</b>	<b>5.8</b>	<b>2.8%</b>
<b>386</b>	<b>375</b>	<b>376</b>	<b>-0.1%</b>	<b>Total Average Daily Census</b>	<b>366</b>	<b>378</b>	<b>373</b>	<b>1.1%</b>
714	575	610	-5.7%	HHMC Observation Patient Day Equivalents	7,632	7,946	7,334	8.3%
109	118	99	19.2%	HHMCPO Observation Patient Day Equivalents	1,200	1,558	1,135	37.3%
<b>823</b>	<b>693</b>	<b>709</b>	<b>-2.3%</b>	<b>Total Observation Patient Day Equivalents</b>	<b>8,832</b>	<b>9,504</b>	<b>8,469</b>	<b>12.2%</b>
<b>27</b>	<b>23</b>	<b>24</b>	<b>-4.2%</b>	<b>Observation Average Daily Census</b>	<b>24</b>	<b>26</b>	<b>23</b>	<b>13.0%</b>
191	147	180	-18.3%	HHMC Newborn Births	1,981	1,761	1,918	-8.2%
353	263	350	-24.9%	HHMC Nursery Patient Days	3,820	3,224	3,820	-15.6%
461	402	476	-15.5%	HHMC Inpatient Surgeries	5,403	5,211	5,751	-9.4%
1	6	1	500.0%	HHMCPO Inpatient Surgeries	17	89	10	790.0%
<b>462</b>	<b>408</b>	<b>477</b>	<b>-14.5%</b>	<b>Total Inpatient Surgeries</b>	<b>5,420</b>	<b>5,300</b>	<b>5,761</b>	<b>-8.0%</b>
				<b><u>Inpatient Surgeries</u></b>				
187	157			Orthopedics	2,097	2,010		
91	48			General Surgery	987	816		
41	38			Neurosurgery	593	480		
18	25			Vascular	178	353		
17	21			Thoracic Surgery	254	312		
108	119			All Other	1,311	1,329		
<b>462</b>	<b>408</b>	<b>477</b>	<b>-14.5%</b>	<b>Total Inpatient Surgeries</b>	<b>5,420</b>	<b>5,300</b>	<b>5,761</b>	<b>-8.0%</b>



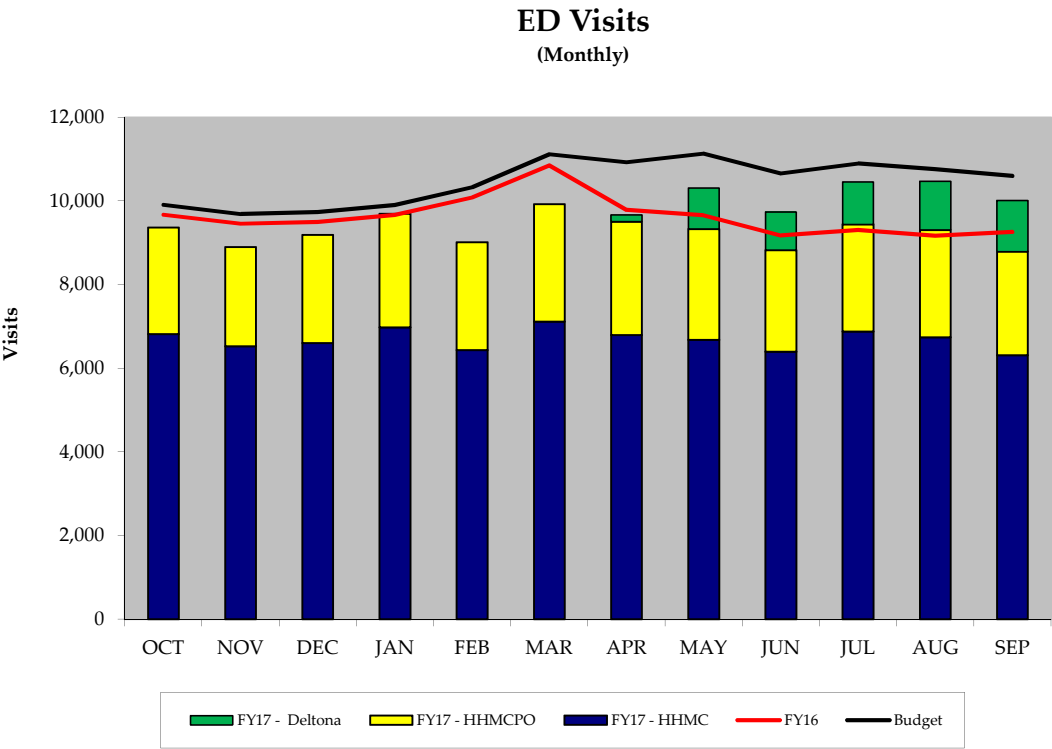
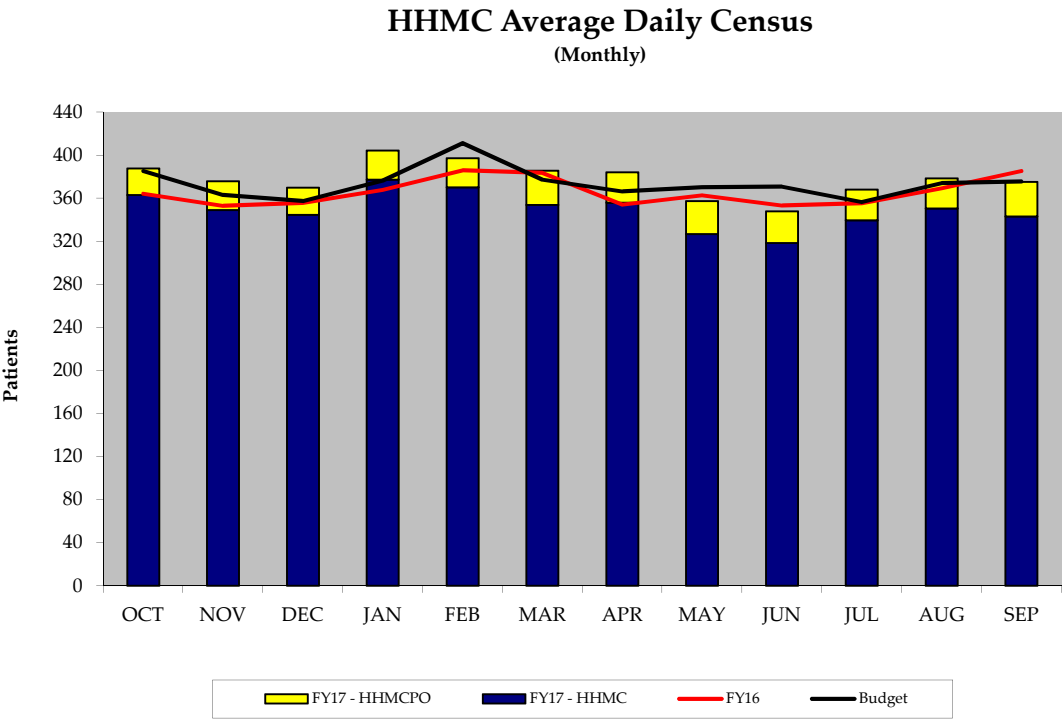
## Halifax Health Statistical Summary

Month Ended September 30,					Twelve Months Ended September 30,			
<u>2016</u>	<u>2017</u>	<u>Budget</u>	<u>Var.</u>		<u>2016</u>	<u>2017</u>	<u>Budget</u>	<u>Var.</u>
				<u>Outpatient Activity</u>				
6,683	6,314	6,568	-3.9%	HHMC ED Registrations	82,999	80,287	84,239	-4.7%
2,572	2,476	2,521	-1.8%	HHMCPO ED Registrations	32,581	30,999	33,783	-8.2%
0	1,222	1,509	-19.0%	Deltona ED Registrations	0	5,461	7,637	-28.5%
<b>9,255</b>	<b>10,012</b>	<b>10,598</b>	<b>-5.5%</b>	<b>Total ED</b>	<b>115,580</b>	<b>116,747</b>	<b>125,659</b>	<b>-7.1%</b>
441	325	450	-27.8%	HHMC Outpatient Surgeries	4,840	4,738	4,670	1.5%
71	1	75	-98.7%	HPC Outpatient Surgeries	1,137	311	1,167	-73.4%
0	72	0	0.0%	HHMCPO Outpatient Surgeries	3	732	4	18200.0%
382	284	316	-10.1%	Twin Lakes Surgeries	4,433	4,137	4,074	1.5%
<b>894</b>	<b>682</b>	<b>841</b>	<b>-18.9%</b>	<b>Total Outpatient Surgeries</b>	<b>10,413</b>	<b>9,918</b>	<b>9,915</b>	<b>0.0%</b>
				<u>Outpatient Surgeries</u>				
185	138			General Surgery	2,064	2,068		
175	118			Orthopedics	2,185	1,834		
84	89			Gastroenterology	1,176	1,038		
81	69			Obstetrics Gynecology	947	892		
66	55			Ophthalmology	736	740		
303	213			All Other	3,305	3,346		
<b>894</b>	<b>682</b>	<b>841</b>	<b>-18.9%</b>	<b>Total Outpatient Surgeries</b>	<b>10,413</b>	<b>9,918</b>	<b>9,915</b>	<b>0.0%</b>
				<u>Cardiology Procedures</u>				
14	11			Open Heart Cases	184	236		
135	121			Cardiac Caths	1,328	1,642		
33	16			CRM Devices	427	343		
38	37			EP Studies	373	458		
<b>220</b>	<b>185</b>	<b>157</b>	<b>17.8%</b>	<b>Total Cardiology Procedures</b>	<b>2,312</b>	<b>2,679</b>	<b>2,305</b>	<b>16.2%</b>
				<u>Interventional Radiology Procedures</u>				
7	6	6	0.0%	Vascular	93	71	80	-11.3%
157	147	179	-17.9%	Nonvascular	2,256	1,921	2,571	-25.3%
<b>164</b>	<b>153</b>	<b>185</b>	<b>-17.3%</b>	<b>Total Interventional Radiology Procedures</b>	<b>2,349</b>	<b>1,992</b>	<b>2,651</b>	<b>-24.9%</b>
<b>175</b>	<b>185</b>	<b>178</b>	<b>3.9%</b>	<b>GI Lab Procedures</b>	<b>2,295</b>	<b>2,400</b>	<b>2,287</b>	<b>4.9%</b>
				<u>HH Hospice Activity</u>				
				<u>Patient Days</u>				
14,447	16,161	16,500	-2.1%	Volusia/ Flagler	197,591	187,326	200,750	-6.7%
684.0	1,548	1,050	47.4%	Orange/ Osceola	3,668.0	13,905	10,038	38.5%
<b>15,131</b>	<b>17,709</b>	<b>17,550</b>	<b>0.9%</b>	<b>HH Hospice Patient Days</b>	<b>201,259</b>	<b>201,231</b>	<b>210,788</b>	<b>-4.5%</b>
				<u>Average Daily Census</u>				
482	539	550	-2.1%	Volusia/ Flagler	540	513	550	-6.7%
23	52	35	47.4%	Orange/ Osceola	10	38	28	38.5%
<b>505</b>	<b>591</b>	<b>585</b>	<b>0.9%</b>	<b>HH Hospice Average Daily Census</b>	<b>550</b>	<b>551</b>	<b>578</b>	<b>-4.5%</b>

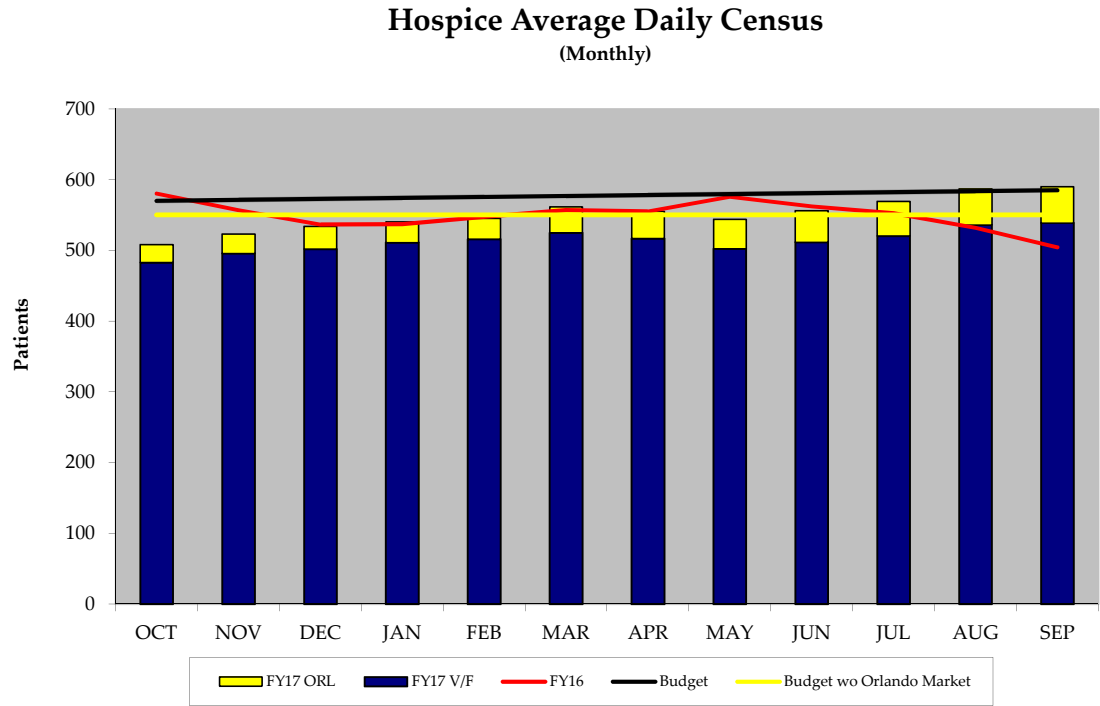
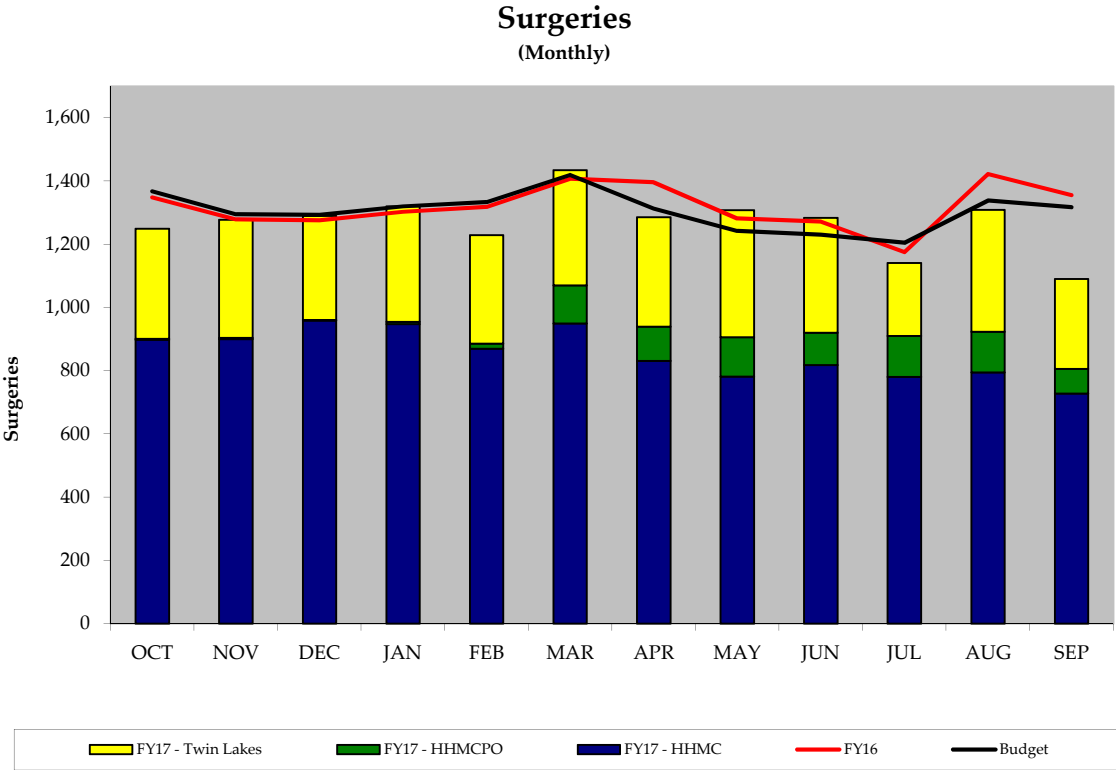
## Halifax Health Statistical Summary

Month Ended September 30,				Twelve Months Ended September 30,			
<u>2016</u>	<u>2017</u>	<u>Budget</u>	<u>Var.</u>	<u>2016</u>	<u>2017</u>	<u>Budget</u>	<u>Var.</u>
<b><u>Physician Practice Activity</u></b>							
<b><u>Primary Care Visits</u></b>							
315	230	664	-65.4%	Ormond Beach	3,126	3,955	8,083 -51.1%
1,057	904	1,097	-17.6%	Daytona Beach	12,935	12,067	12,944 -6.8%
493	452	673	-32.8%	Port Orange	4,903	7,875	10,497 -25.0%
217	230	463	-50.3%	Deltona	5,164	3,389	6,925 -51.1%
-	535	-	N/A	New Smyrna	-	3,979	- N/A
433	464	1,065	-56.4%	Ormond Beach (Women's/OB)	5,274	6,021	11,921 -49.5%
-	179	803	-77.7%	Ormond Beach - Urgent Care	-	1,320	9,669 -86.3%
<b>2,515</b>	<b>2,994</b>	<b>4,765</b>	<b>-37.2%</b>	<b>Primary Care Visits</b>	<b>31,402</b>	<b>38,606</b>	<b>60,039 -35.7%</b>
<b><u>Children's Medical Center Visits</u></b>							
789	483	1,316	-63.3%	Ormond Beach	8,859	9,798	14,000 -30.0%
391	198	418	-52.6%	Palm Coast	4,851	1,675	4,994 -66.5%
501	431	531	-18.8%	Port Orange	5,573	5,997	5,900 1.6%
<b>1,681</b>	<b>1,112</b>	<b>2,265</b>	<b>-50.9%</b>	<b>Children's Medical Center Visits</b>	<b>19,283</b>	<b>17,470</b>	<b>24,894 -29.8%</b>
<b><u>Community Clinic Visits</u></b>							
392	282	371	-24.0%	Keech Street	5,045	4,888	4,778 2.3%
199	111	199	-44.2%	Adult Community Clinic	4,133	2,777	4,133 -32.8%
<b>591</b>	<b>393</b>	<b>570</b>	<b>-31.1%</b>	<b>Community Clinic Visits</b>	<b>9,178</b>	<b>7,665</b>	<b>8,911 -14.0%</b>

# Halifax Health Statistical Summary - Graphic



# Halifax Health Statistical Summary - Graphic



**Halifax Health**  
**Condensed Statement of Net Position**  
(\$ in thousands)

	September 30,		
	2017	2016	Change
<b><u>Assets</u></b>			
Cash and cash equivalents	\$63,423	\$58,573	\$4,850
Investments	268,485	266,685	1,800
Board designated assets	45,158	45,053	105
Accounts receivable	62,459	60,604	1,855
Restricted assets whose use is limited	6,428	19,159	(12,731)
Other assets	45,507	39,672	5,835
Deferred outflow - swap	30,894	39,431	(8,537)
Deferred outflow - loss on bond refunding	16,455	17,351	(896)
Deferred outflow - pension	27,393	38,366	(10,973)
Property, plant and equipment	356,986	356,341	645
Total Assets	<u>\$923,188</u>	<u>\$941,235</u>	<u>(\$18,047)</u>
<b><u>Liabilities and Net position</u></b>			
Accounts payable	\$45,832	\$31,626	\$14,206
Other liabilities	78,392	82,993	(4,601)
Deferred inflow - pension	-	1,330	(1,330)
Net pension liability	106,856	129,142	(22,286)
Long-term debt	346,868	354,105	(7,237)
Premium on LTD, net	19,262	19,932	(670)
Long-term value of swap	30,894	39,431	(8,537)
Net position	295,084	282,676	12,408
Total Liabilities and Net position	<u>\$923,188</u>	<u>\$941,235</u>	<u>(\$18,047)</u>

**Halifax Health**  
**Statement of Cash Flows**  
(\$ in thousands)

Month ended September 30, 2017	Month ended September 30, 2016	Variance		Twelve Months ended September 30, 2017	Twelve Months ended September 30, 2016	Variance
			<b>Cash flows from operating activities:</b>			
\$41,857	\$43,266	(\$1,409)	Receipts from third party payors and patients	\$502,027	\$493,855	\$8,172
(21,951)	(19,220)	(2,731)	Payments to employees	(299,280)	(276,694)	(22,586)
(2,365)	(12,463)	10,098	Payments to suppliers	(179,607)	(178,881)	(726)
-	-	-	Receipt of ad valorem taxes	11,671	13,181	(1,510)
-	-	-	Receipt (payment) of State UPL funds, net	4,864	816	4,048
4,144	45	4,099	Other receipts	35,480	30,118	5,362
(3,472)	(2,663)	(809)	Other payments	(44,016)	(44,137)	121
18,213	8,965	9,248	Net cash provided by operating activities	31,139	38,258	(7,119)
			<b>Cash flows from noncapital financing activities:</b>			
120	57	63	Proceeds from donations received	1,013	1,980	(967)
(2)	(8)	6	Nonoperating gain (loss)	14	(14)	28
118	49	69	Net cash provided by noncapital financing activities	1,027	1,966	(939)
			<b>Cash flows from capital and related financing activities:</b>			
(6,606)	(1,473)	(5,133)	Acquisition of capital assets	(24,680)	(23,841)	(839)
(256)	(200)	(56)	Payment of long-term debt	(7,581)	(2,295)	(5,286)
-	-	-	Proceeds from issuance of long-term debt	-	175,424	(175,424)
7,248	-	7,248	Transfers to trustee held funds	12,722	(12,619)	25,341
-	-	-	Payment for defeasance of bonds	-	(168,728)	168,728
(292)	(294)	2	Payment of interest on long-term debt	(16,803)	(14,761)	(2,042)
-	-	-	Payment of bond issue costs	-	(1,774)	1,774
94	(1,967)	2,061	Net cash provided by (used in) capital financing activities	(36,342)	(48,594)	12,252
			<b>Cash flows from investing activities:</b>			
1,826	544	1,282	Realized investment income (loss)	6,802	8,515	(1,713)
(2,076)	(3,668)	1,592	Purchases of investments/limited use assets	(11,008)	(117,614)	106,606
3,605	6	3,599	Sales/Maturities of investments/limited use assets	13,205	120,289	(107,084)
3,355	(3,118)	6,473	Net cash provided by (used in) investing activities	8,999	11,190	(2,191)
21,780	3,929	17,851	<b>Net increase in cash and cash equivalents</b>	4,823	2,820	2,003
41,643	54,644	(13,001)	<b>Cash and cash equivalents at beginning of period</b>	58,600	55,753	2,847
<u>\$63,423</u>	<u>\$58,573</u>	<u>\$4,850</u>	<b>Cash and cash equivalents at end of period</b>	<u>\$63,423</u>	<u>\$58,573</u>	<u>\$4,850</u>

**Halifax Health**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

Actual Month Ended September 30, 2017	Actual Month Ended September 30, 2016	Favorable (Unfavorable) Variance		Actual Twelve Months September 30, 2017	Actual Twelve Months September 30, 2016	Favorable (Unfavorable) Variance
			Operating revenues:			
\$45,194	\$8,100	\$37,094	Net patient service revenue, before provision for bad debts	\$599,849	\$557,277	\$42,572
(5,219)	31,424	(36,643)	Provision for bad debts	(90,238)	(67,416)	(22,822)
39,975	39,524	451	Net patient service revenue	509,611	489,861	19,750
938	1,104	(166)	Ad valorem taxes	11,252	13,252	(2,000)
2,815	2,661	154	Other revenue	27,200	30,548	(3,348)
43,728	43,289	439	Total operating revenues	548,063	533,661	14,402
			Operating expenses:			
21,781	19,310	(2,471)	Salaries and benefits	279,206	254,495	(24,711)
6,604	8,169	1,565	Purchased services	78,891	80,911	2,020
8,736	8,020	(716)	Supplies	101,430	93,347	(8,083)
2,136	2,195	59	Depreciation and amortization	24,037	24,951	914
1,350	1,292	(58)	Interest	16,814	17,198	384
570	541	(29)	Ad valorem tax related expenses	7,417	7,460	43
821	819	(2)	Leases and rentals	9,591	9,142	(449)
2,427	1,501	(926)	Other	27,328	28,153	825
44,425	41,847	(2,578)	Total operating expenses	544,714	515,657	(29,057)
(697)	1,442	(2,139)	Excess (deficiency) of operating revenues over expenses	3,349	18,004	(14,655)
			Nonoperating revenues, expenses, and gains/(losses):			
1,826	765	1,061	Realized investment income/(losses)	6,801	8,737	(1,936)
(388)	(127)	(261)	Unrealized investment income/(losses)	1,886	3,576	(1,690)
121	52	69	Donation revenue	1,014	1,973	(959)
-	-	-	Interest - bond issue costs	-	(1,774)	1,774
(2)	(8)	6	Nonoperating gains/(losses), net	16	(14)	30
1,557	682	875	Total nonoperating revenues, expenses, and gains/(losses)	9,717	12,498	(2,781)
\$860	\$2,124	(\$1,264)	Increase in net position	\$13,066	\$30,502	(\$17,436)

**Halifax Health**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

Actual Month Ended September 30, 2017	Static Budget Month Ended September 30, 2017	Favorable (Unfavorable) Variance		Actual Twelve Months Ended September 30, 2017	Static Budget Twelve Months Ended September 30, 2017	Favorable (Unfavorable) Variance
			Operating revenues:			
\$45,194	\$47,109	(\$1,915)	Net patient service revenue, before provision for bad debts	\$599,849	\$569,975	\$29,874
(5,219)	(5,809)	590	Provision for bad debts	(90,238)	(71,955)	(18,283)
39,975	41,300	(1,325)	Net patient service revenue	509,611	498,020	11,591
938	938	-	Ad valorem taxes	11,252	11,252	-
2,815	2,030	785	Other revenue	27,200	25,535	1,665
43,728	44,268	(540)	Total operating revenues	548,063	534,807	13,256
			Operating expenses:			
21,781	22,577	796	Salaries and benefits	279,206	281,557	2,351
6,604	5,901	(703)	Purchased services	78,891	70,254	(8,637)
8,736	7,727	(1,009)	Supplies	101,430	93,489	(7,941)
2,136	2,030	(106)	Depreciation and amortization	24,037	23,889	(148)
1,350	1,401	51	Interest	16,814	16,903	89
570	628	58	Ad valorem tax related expenses	7,417	7,518	101
821	767	(54)	Leases and rentals	9,591	8,821	(770)
2,427	2,262	(165)	Other	27,328	27,032	(296)
44,425	43,293	(1,132)	Total operating expenses	544,714	529,463	(15,251)
(697)	975	(1,672)	Excess (deficiency) of operating revenues over expenses	3,349	5,344	(1,995)
			Nonoperating revenues, expenses, and gains/(losses):			
1,826	385	1,441	Realized investment income/(losses)	6,801	4,625	2,176
(388)	-	(388)	Unrealized investment income/(losses)	1,886	-	1,886
121	60	61	Donation revenue	1,014	716	298
(2)	-	(2)	Nonoperating gains/(losses), net	16	-	16
1,557	445	1,112	Total nonoperating revenues, expenses, and gains/(losses)	9,717	5,341	4,376
\$860	\$1,420	(\$560)	Increase in net position	\$13,066	\$10,685	\$2,381



**Halifax Health Medical Center**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

<b>Actual Month Ended September 30, 2017</b>	<b>Static Budget Month Ended September 30, 2017</b>	<b>Favorable (Unfavorable) Variance</b>		<b>Actual Twelve Months Ended September 30, 2017</b>	<b>Static Budget Twelve Months Ended September 30, 2017</b>	<b>Favorable (Unfavorable) Variance</b>
			Operating revenues:			
\$41,522	\$43,428	(\$1,906)	Net patient service revenue, before provision for bad debts	\$557,175	\$525,640	\$31,535
(5,150)	(5,710)	560	Provision for bad debts	(88,979)	(70,766)	(18,213)
36,372	37,718	(1,346)	Net patient service revenue	468,196	454,874	13,322
938	938	-	Ad valorem taxes	11,252	11,252	-
1,575	1,314	261	Other revenue	16,450	16,941	(491)
38,885	39,970	(1,085)	Total operating revenues	495,898	483,067	12,831
			Operating expenses:			
19,839	20,525	686	Salaries and benefits	254,305	256,111	1,806
5,267	4,793	(474)	Purchased services	65,994	57,156	(8,838)
8,472	7,495	(977)	Supplies	98,664	90,700	(7,964)
2,003	1,903	(100)	Depreciation and amortization	22,434	22,295	(139)
1,349	1,400	51	Interest	16,710	16,799	89
570	628	58	Ad valorem tax related expenses	7,417	7,518	101
645	602	(43)	Leases and rentals	7,498	6,836	(662)
2,055	2,010	(45)	Other	24,770	24,022	(748)
40,200	39,356	(844)	Total operating expenses	497,792	481,437	(16,355)
(1,315)	614	(1,929)	Excess (deficiency) of operating revenues over expenses	(1,894)	1,630	(3,524)
			Nonoperating revenues, expenses, and gains/(losses):			
413	197	216	Realized investment income/(losses)	2,995	2,369	626
(267)	-	(267)	Unrealized investment income/(losses)	(1,105)	-	(1,105)
117	-	117	Donation revenue	159	-	159
(2)	-	(2)	Nonoperating gains/(losses), net	16	-	16
261	197	64	Total nonoperating revenues, expenses, and gains/(losses)	2,065	2,369	(304)
(1,054)	\$811	(\$1,865)	Increase (decrease) in net position	\$171	\$3,999	(\$3,828)

**Halifax Health Medical Center**  
**Net Patient Service Revenue**  
**(\$ in thousands)**

Actual Month Ended September 30, 2016		Actual Month Ended September 30, 2017		Static Budget Month Ended September 30, 2017			Actual Twelve Months Ended September 30, 2016		Actual Twelve Months Ended September 30, 2017		Static Budget Twelve Months Ended September 30, 2017	
\$144,758	100.00%	\$144,289	100.00%	\$148,958	100.00%	Gross charges	\$1,674,518	100.00%	\$1,827,859	100.00%	\$1,772,316	100.00%
(28,621)	-19.77%	(16,141)	-11.19%	(8,413)	-5.65%	Charity	(98,477)	-5.88%	(102,403)	-5.60%	(101,920)	-5.75%
(111,422)	-76.97%	(86,626)	-60.04%	(97,117)	-65.20%	Contractual adjustments	(1,061,957)	-63.42%	(1,168,281)	-63.92%	(1,144,756)	-64.59%
4,715	3.26%	41,522	28.78%	43,428	29.15%	Gross charges, before provision for bad debts	514,084	30.70%	557,175	30.48%	525,640	29.66%
31,598	21.83%	(5,150)	-3.57%	(5,710)	-3.83%	Provision for bad debts	(66,409)	-3.97%	(88,979)	-4.87%	(70,766)	-3.99%
<b>\$36,313</b>	<b>25.09%</b>	<b>\$36,372</b>	<b>25.21%</b>	<b>\$37,718</b>	<b>25.32%</b>	<b>Net patient service revenue</b>	<b>\$447,675</b>	<b>26.73%</b>	<b>\$468,196</b>	<b>25.61%</b>	<b>\$454,874</b>	<b>25.67%</b>

**Halifax Health Hospice**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

Actual Month Ended September 30, 2017	Static Budget Month Ended September 30, 2017	Favorable (Unfavorable) Variance		Actual Twelve Months Ended September 30, 2017	Static Budget Twelve Months Ended September 30, 2017	Favorable (Unfavorable) Variance
			Operating revenues:			
\$3,672	\$3,681	(\$9)	Net patient service revenue, before provision for bad debts	\$42,674	\$44,335	(\$1,661)
(69)	(99)	30	Provision for bad debts	(1,259)	(1,189)	(70)
3,603	3,582	21	Net patient service revenue	41,415	43,146	(1,731)
132	199	(67)	Other revenue	1,975	2,390	(415)
3,735	3,781	(46)	Total operating revenues	43,390	45,536	(2,146)
			Operating expenses:			
1,881	1,978	97	Salaries and benefits	24,062	24,551	489
1,284	1,069	(215)	Purchased services	12,453	12,635	182
264	231	(33)	Supplies	2,763	2,779	16
66	60	(6)	Depreciation and amortization	804	795	(9)
171	160	(11)	Leases and rentals	2,032	1,924	(108)
241	182	(59)	Other	2,051	2,164	113
3,907	3,680	(227)	Total operating expenses	44,165	44,848	683
(172)	101	(273)	Excess (deficiency) of operating revenues over expenses	(775)	688	(1,463)
			Nonoperating revenues, expenses, and gains/(losses):			
1,413	188	1,225	Realized investment income/(losses)	3,806	2,256	1,550
(121)	-	(121)	Unrealized investment income/(losses)	2,991	-	2,991
4	60	(56)	Donation revenue	855	716	139
1,296	248	1,048	Total nonoperating revenues, expenses, and gains/(losses)	7,652	2,972	4,680
<b>\$1,124</b>	<b>\$349</b>	<b>\$775</b>	<b>Increase in net position</b>	<b>\$6,877</b>	<b>\$3,660</b>	<b>\$3,217</b>

**Volusia Health Network / Halifax Management Systems**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

<b>Actual Month Ended September 30, 2017</b>	<b>Static Budget Month Ended September 30, 2017</b>	<b>Favorable (Unfavorable) Variance</b>		<b>Actual Twelve Months Ended September 30, 2017</b>	<b>Static Budget Twelve Months Ended September 30, 2017</b>	<b>Favorable (Unfavorable) Variance</b>
			Operating revenues:			
\$0	\$0	\$0	Net patient service revenue, before provision for bad debts	\$0	\$0	\$0
-	-	-	Provision for bad debts	-	-	-
-	-	-	Net patient service revenue	-	-	-
331	341	(10)	Other revenue	3,964	4,094	(130)
331	341	(10)	Total operating revenues	3,964	4,094	(130)
			Operating expenses:			
51	64	13	Salaries and benefits	719	770	51
53	35	(18)	Purchased services	429	418	(11)
-	1	1	Supplies	3	10	7
67	67	-	Depreciation and amortization	799	799	-
1	1	-	Interest	104	104	-
5	5	-	Leases and rentals	61	61	-
1	3	2	Other	13	40	27
178	176	(2)	Total operating expenses	2,128	2,202	74
153	165	(12)	Excess of operating revenues over expenses	1,836	1,892	(56)
			Nonoperating revenues, expenses, and gains/(losses):			
-	-	-	Realized investment income/(losses)	-	-	-
-	-	-	Unrealized investment income/(losses)	-	-	-
-	-	-	Donation revenue	-	-	-
-	-	-	Nonoperating gains/(losses), net	-	-	-
-	-	-	Total nonoperating revenues, expenses, and gains/(losses)	-	-	-
\$153	\$165	(\$12)	Increase in net position	\$1,836	\$1,892	(\$56)

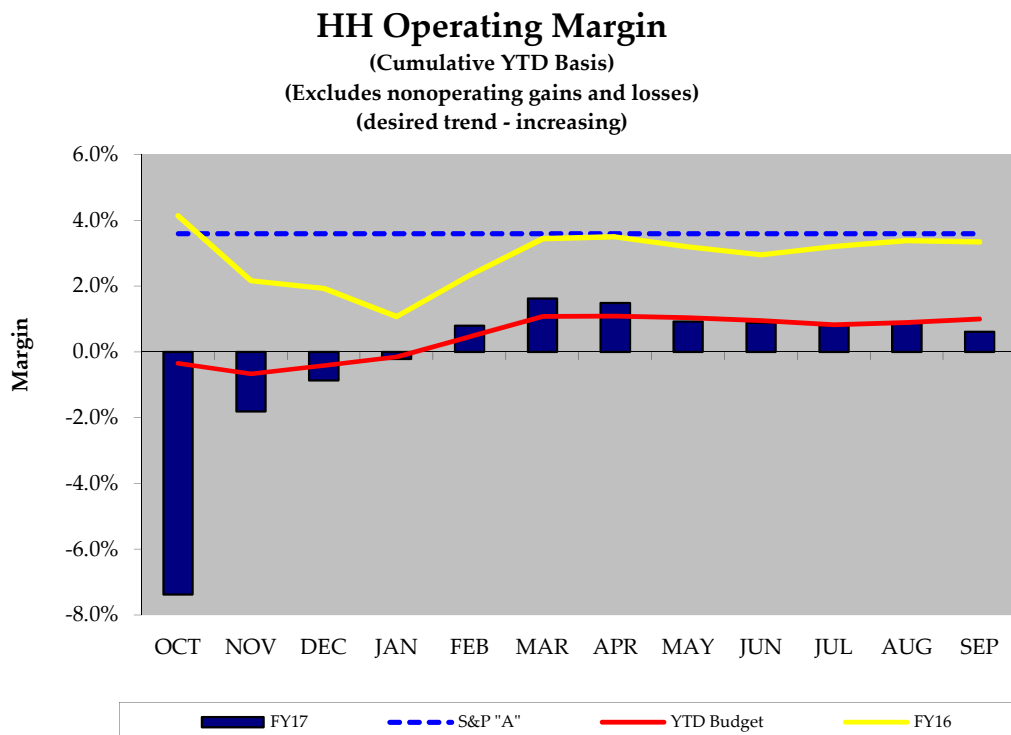
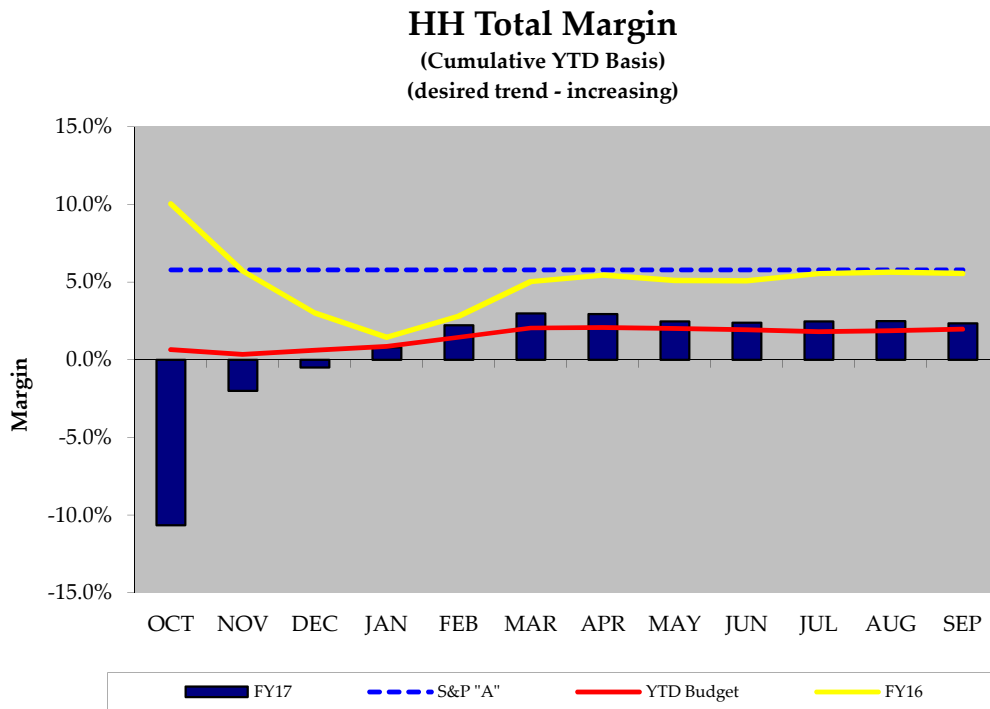
**Halifax Health Foundation**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

Actual Month Ended September 30, 2017	Static Budget Month Ended September 30, 2017	Favorable (Unfavorable) Variance		Actual Twelve Months September 30, 2017	Static Budget Twelve Months September 30, 2017	Favorable (Unfavorable) Variance
			Operating revenues:			
\$0	\$0	\$0	Net patient service revenue, before provision for bad debts	\$0	\$0	\$0
-	-	-	Provision for bad debts	-	-	-
-	-	-	Net patient service revenue	-	-	-
252	105	147	Realized investment income/(losses)	1,497	1,260	237
492	-	492	Unrealized investment income/(losses)	2,206	-	2,206
33	71	(38)	Donation revenue	1,108	850	258
-	-	-	Other revenue	-	-	-
777	176	601	Total operating revenues	4,811	2,110	2,701
			Operating expenses:			
10	10	-	Salaries and benefits	120	125	5
-	4	4	Purchased services	15	45	30
-	-	-	Supplies	-	-	-
-	-	-	Depreciation and amortization	-	-	-
-	-	-	Interest	-	-	-
-	-	-	Leases and rentals	-	-	-
130	67	(63)	Other	494	806	312
140	81	(59)	Total operating expenses	629	976	347
\$637	\$95	\$542	Increase in net position	\$4,182	\$1,134	\$3,048

**Halifax Health Medical Center (Obligated Group)**  
**Statements of Revenues, Expenses and Changes in Net Position**  
**(\$ in thousands)**

Actual Month Ended September 30, 2017	Static Budget Month Ended September 30, 2017	Favorable (Unfavorable) Variance		Actual Twelve Months September 30, 2017	Static Budget Twelve Months September 30, 2017	Favorable (Unfavorable) Variance
			Operating revenues:			
\$41,522	\$43,428	(\$1,906)	Net patient service revenue, before provision for bad debts	\$557,175	\$525,640	\$31,535
(5,150)	(5,710)	560	Provision for bad debts	(88,979)	(70,766)	(18,213)
36,372	37,718	(1,346)	Net patient service revenue	468,196	454,874	13,322
938	938	-	Ad valorem taxes	11,252	11,252	-
1,575	1,314	261	Other revenue	16,450	16,941	(491)
38,885	39,970	(1,085)	Total operating revenues	495,898	483,067	12,831
			Operating expenses:			
19,839	20,525	686	Salaries and benefits	254,305	256,111	1,806
5,267	4,793	(474)	Purchased services	65,994	57,156	(8,838)
8,472	7,495	(977)	Supplies	98,664	90,700	(7,964)
2,003	1,903	(100)	Depreciation and amortization	22,434	22,295	(139)
1,349	1,400	51	Interest	16,710	16,799	89
570	628	58	Ad valorem tax related expenses	7,417	7,518	101
645	602	(43)	Leases and rentals	7,498	6,836	(662)
2,055	2,010	(45)	Other	24,770	24,022	(748)
40,200	39,356	(844)	Total operating expenses	497,792	481,437	(16,355)
(1,315)	614	(1,929)	Excess (deficiency) of operating revenues over expenses	(1,894)	1,630	(3,524)
			Nonoperating revenues, expenses, and gains/(losses):			
413	197	216	Realized investment income/(losses)	2,995	2,369	626
(267)	-	(267)	Unrealized investment income/(losses)	(1,105)	-	(1,105)
117	-	117	Donation revenue	159	-	159
(2)	-	(2)	Nonoperating gains/(losses), net	16	-	16
261	197	64	Total nonoperating revenues, expenses, and gains/(losses)	2,065	2,369	(304)
(1,054)	811	(1,865)	Increase (decrease) in net position before other changes in net	171	3,999	(3,828)
1,914	609	1,305	Income from affiliates	12,895	6,686	6,209
\$860	\$1,420	(\$560)	Increase in net position	\$13,066	\$10,685	\$2,381

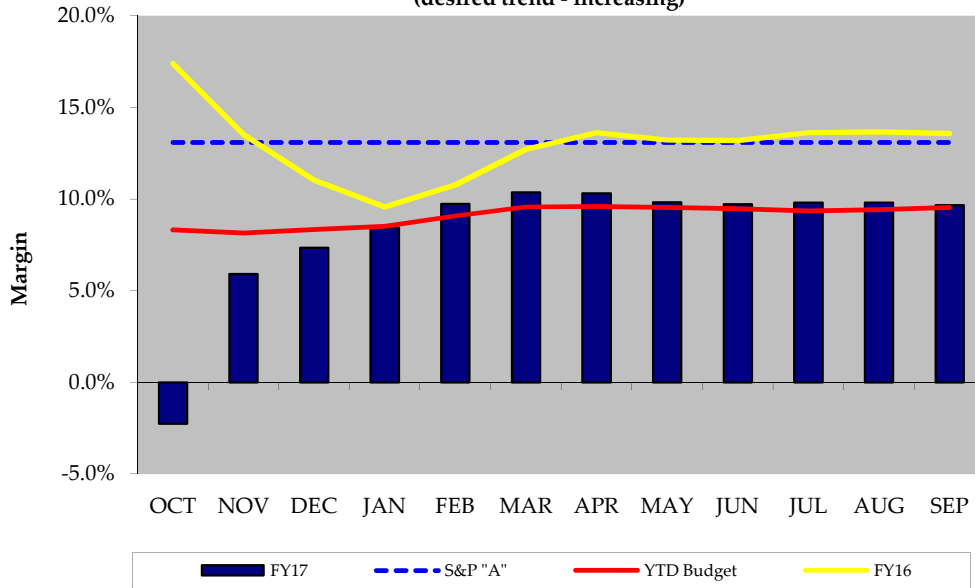
# Halifax Health Financial Summary - Graphic



# Halifax Health Financial Summary - Graphic

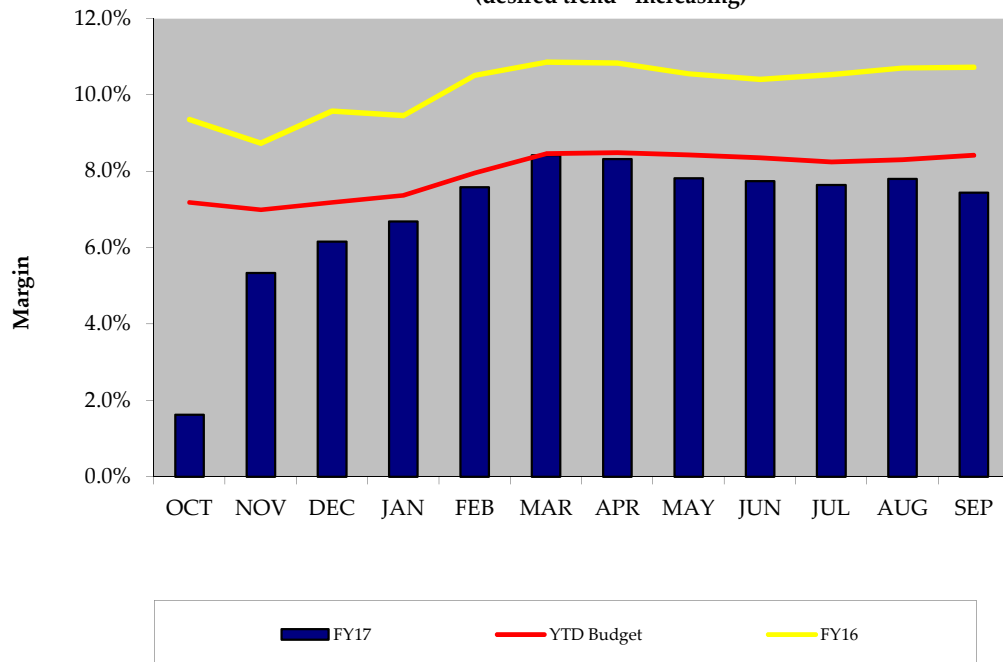
## HH EBIDA Margin

(Cumulative YTD Basis)  
(desired trend - increasing)



## HH Adjusted Operating EBIDA Margin

(Cumulative YTD Basis)  
(Excludes nonoperating gains and losses)  
(desired trend - increasing)





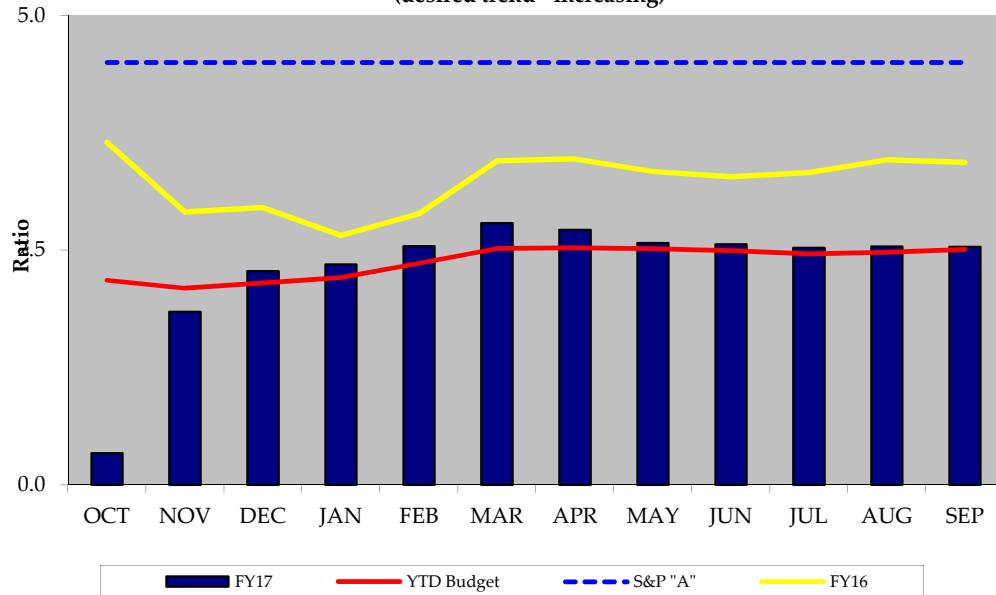
# Halifax Health Financial Summary - Graphic

## HH MADS Coverage Ratio

(Annualized Basis)

(Excludes unrealized investment gains/losses in accordance with covenant requirements)

(desired trend - increasing)

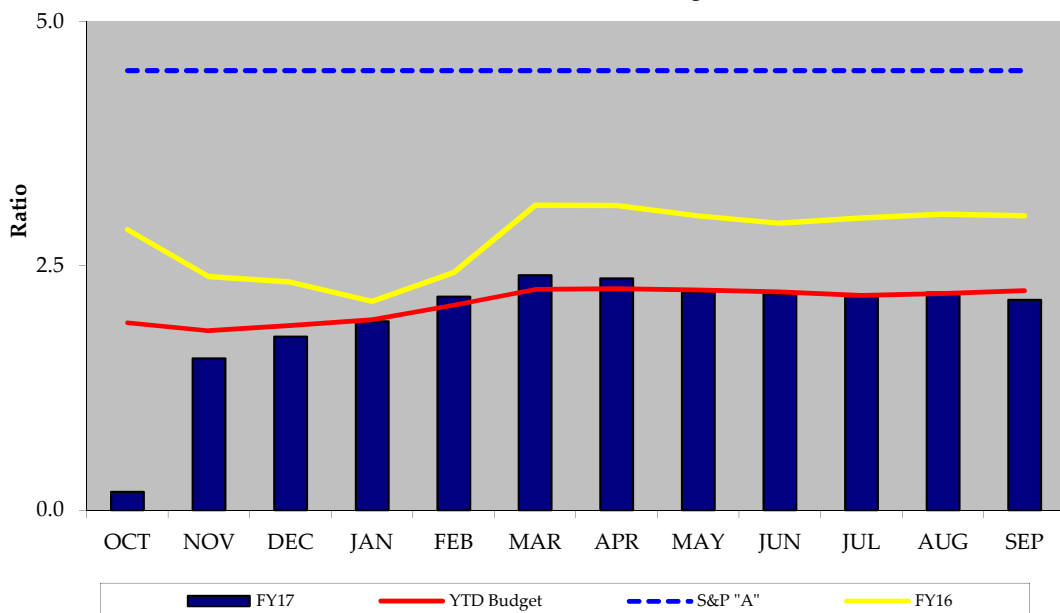


## HH MADS Coverage Ratio - Operations Only

(Annualized Basis)

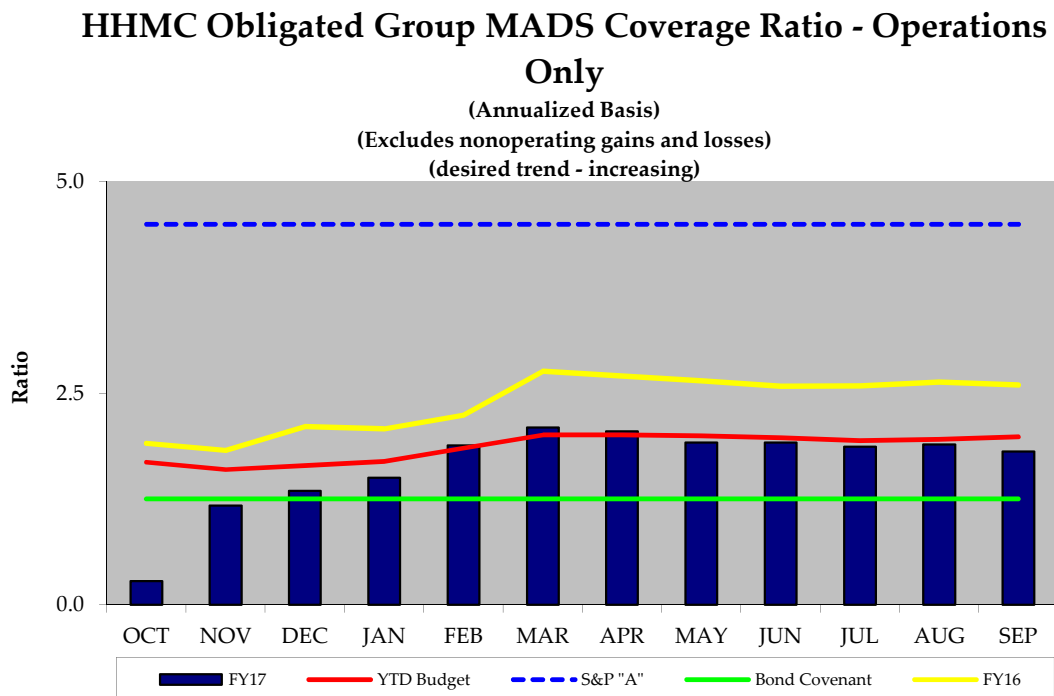
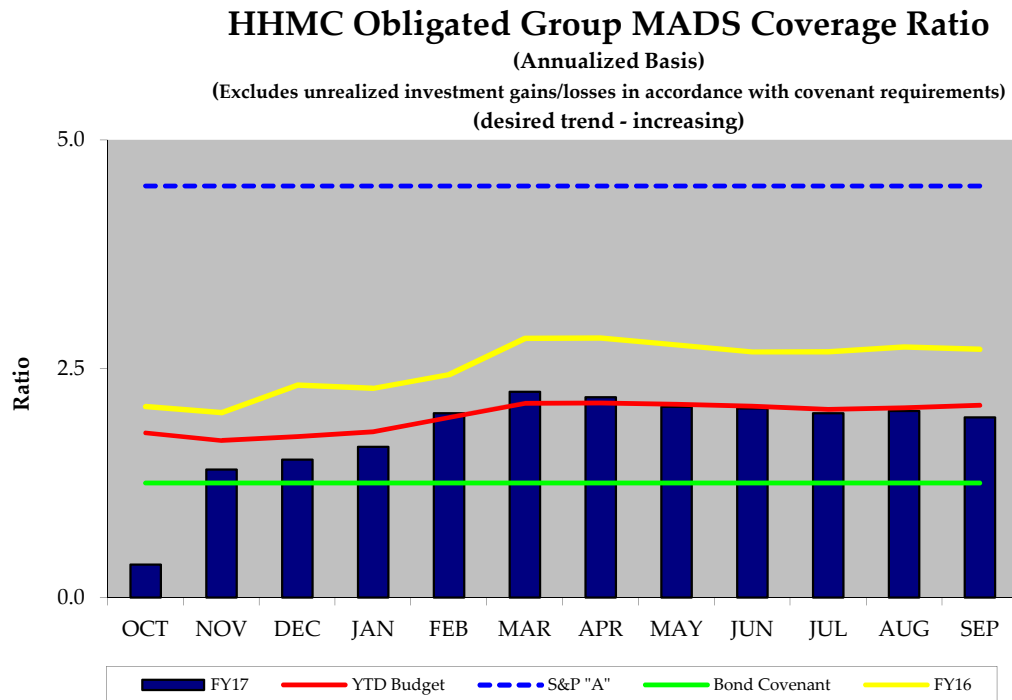
(Excludes nonoperating gains and losses)

(desired trend - increasing)



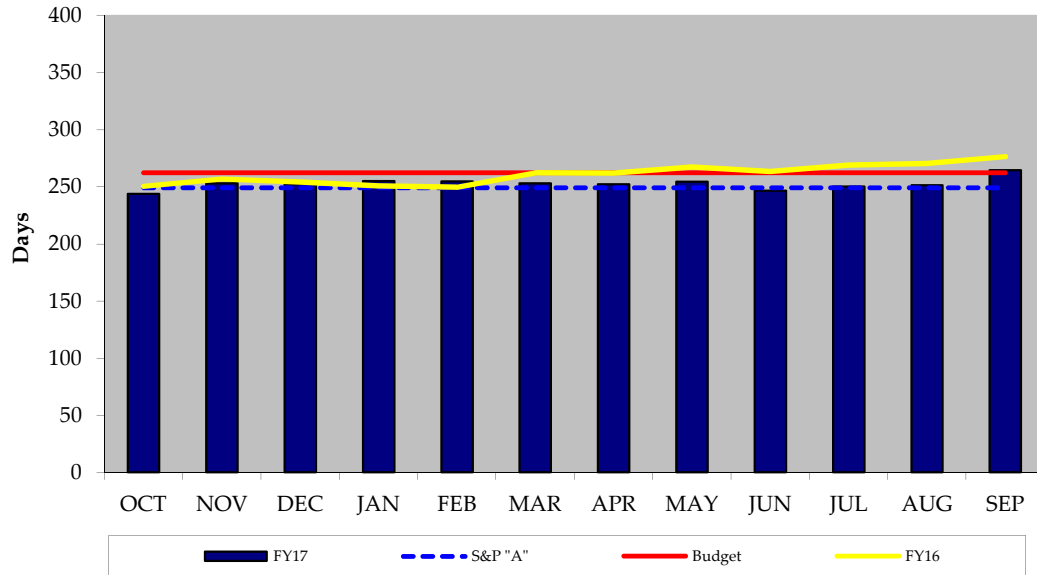
# Halifax Health

## Financial Summary - Graphic

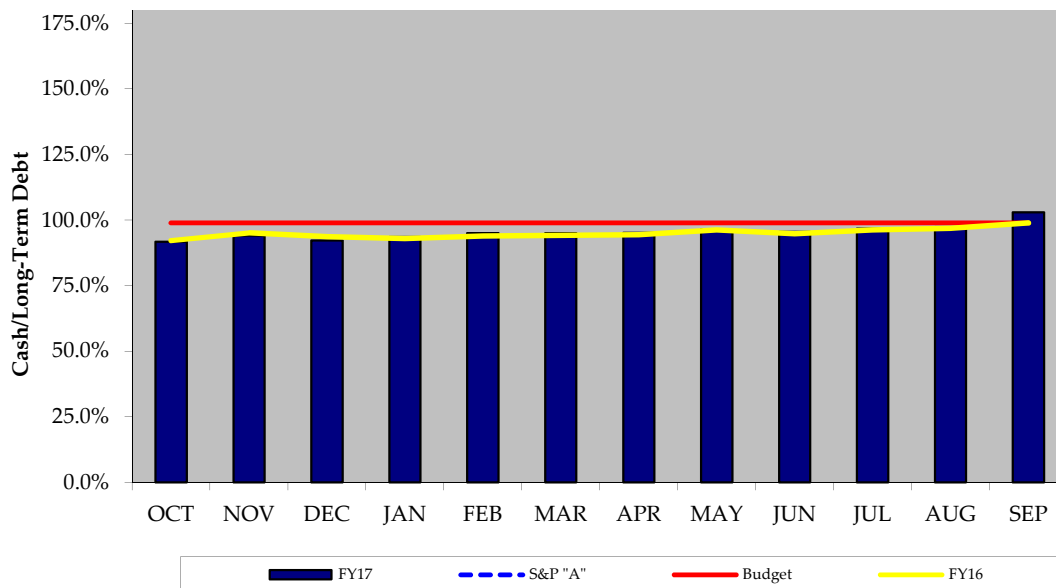


# Halifax Health Financial Summary - Graphic

## HH Days Cash on Hand (Annualized Basis) (desired trend - increasing)

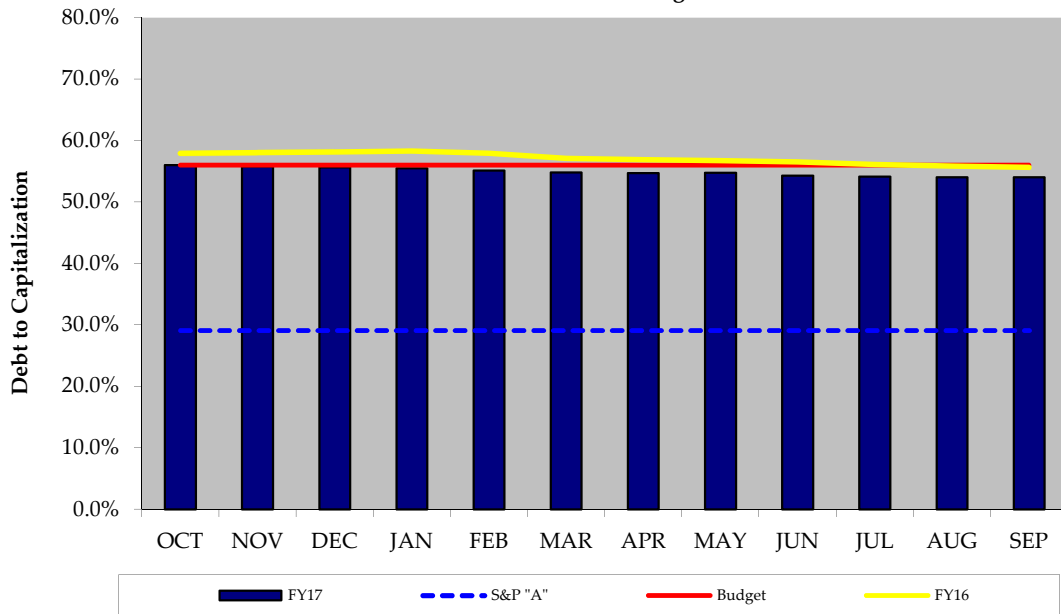


## HH Cash/Debt (Monthly) (desired trend - increasing)

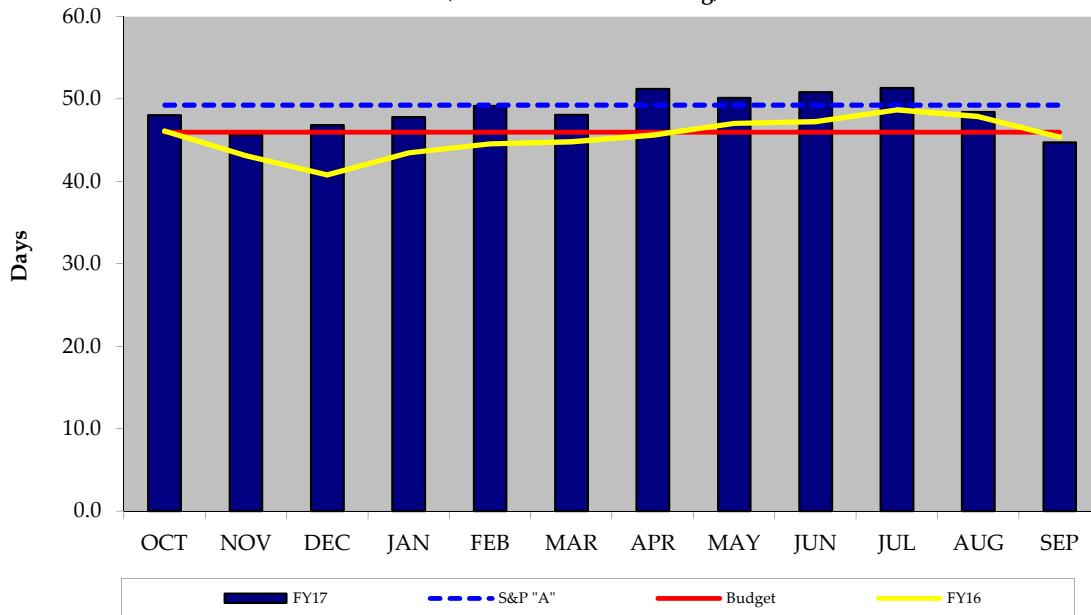


# Halifax Health Financial Summary - Graphic

**HH Debt to Capitalization**  
(Monthly)  
(desired trend - decreasing)

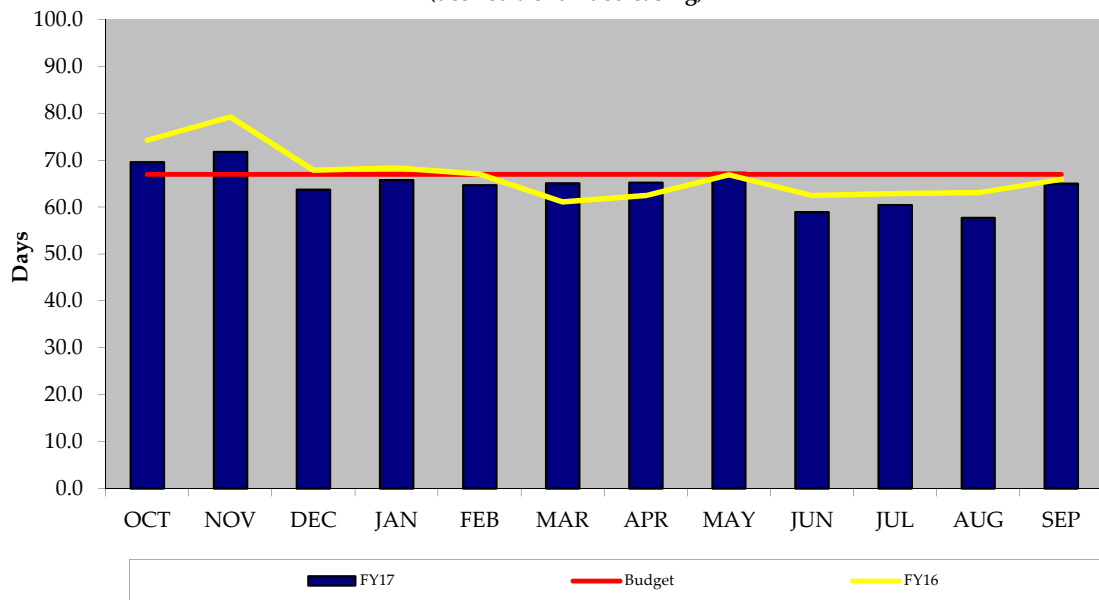


**HH Days in A/R**  
(Annualized Basis)  
(desired trend - decreasing)

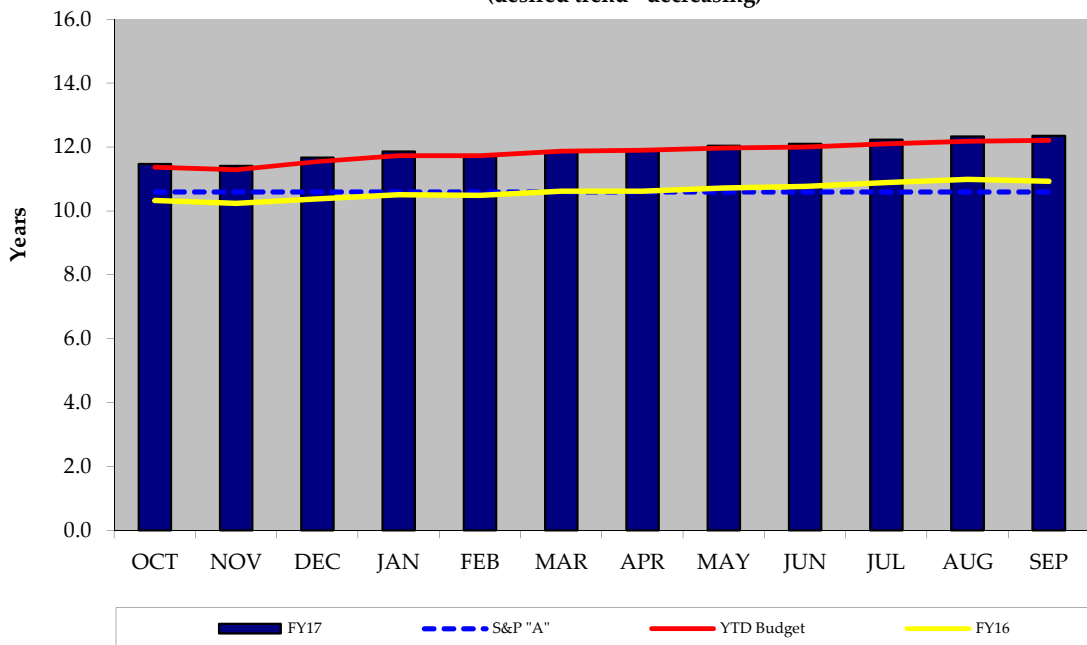


# Halifax Health Financial Summary - Graphic

## HH Average Payment Period (Annualized Basis) (desired trend - decreasing)



## HH Average Age of Plant (Annualized Basis) (desired trend - decreasing)



**Halifax Health**  
**Financial Ratios and Operating Indicators**  
**Definitions and Calculations**

Indicator	Definition	Calculation
Total Margin *	Gauges the relative efficiency with which the System produces its output.	$\frac{\text{Net Income}}{\text{Total Revenues}}$
EBIDA Margin *	Gauges the relative efficiency excluding capital costs with which the System produces its output.	$\frac{\text{Net income} + \text{Int} + \text{Depr} + \text{Amort}}{\text{Total Revenues}}$
MADS Coverage Ratio *	Measures profitability relative to the Maximum Principal and Interest Payment of Debt	$\frac{\text{Net Income} + \text{Depr} + \text{Amort} + \text{Int}}{\text{Maximum Annual Debt Service}}$
Days Cash on Hand	Measures the number of days of average cash expenses that the System maintains in cash and cash equivalents and unrestricted investments.	$\frac{\text{Unrestricted Cash and Investments}}{(\text{Total Expenses} - \text{Depr}) / \text{Days in Period}}$
Cash to Long-term Debt	Measures the percentage of unrestricted cash and investments to long-term debt.	$\frac{\text{Unrestricted Cash and Investments}}{\text{Long-term Debt}}$
Long-term Debt to Capitalization	Measures the reliance on long-term debt financing and ability to issue new debt.	$\frac{\text{Long-term Debt}}{\text{Long-term Debt} + \text{Net Position}}$
Days in Accounts Receivable	Measures the average time that receivables are outstanding, or the average collection period.	$\frac{\text{Accounts Receivable}}{\text{Net Patient Service Revenue} / \text{Days in Period}}$
Average Payment Period	Provides a measure of the average time that elapses before current liabilities are paid.	$\frac{\text{Current Liabilities}}{(\text{Total Expenses} - \text{Depr}) / \text{Days in Period}}$
Average Age of Plant	Provides a measure of the average age in years of the System's fixed assets.	$\frac{\text{Accumulated Depreciation}}{\text{Depreciation Expense}}$
Operating Margin	Gauges the relative operating efficiency with which the System produces its output.	$\frac{\text{Excess of Operating Revenues}}{\text{Total Operating Revenues} + \text{Bad Debt}}$
* Operations Only Indicators	Excludes realized and unrealized investment income, donations, and nonoperating gains and losses	

## CAPITAL EXPENDITURES & OPERATING LEASES

Audit & Finance Committee

September 2017

### **Capital Expenditures \$50,000 and over**

DESCRIPTION	DEPARTMENT	SOURCE OF FUNDS	TOTAL
Development of Road & Utility Infrastructure, West of Clyde Morris	Land	80% related land sale proceeds plus 20% from Highbridge Care	\$2,530,000
Acquisition of Orthopedic Medical Office	Physician Services	Working Capital	\$898,250
Gastroenterology (GI) Relocation Project	Surgical Services	Working Capital	\$683,995
Phase I Road & Utility Infrastructure, 120 Howland Blvd.	Land	Related land sale proceeds	\$430,000
Surgical Tables	Surgical Services	Working Capital	\$109,840
Urinalysis Analyzer	Laboratory	Working Capital	\$99,590
Orthopedic Surgical Table	Surgical Services	Working Capital	\$93,057

### **Operating Leases \$250,000 and over**

DESCRIPTION	DEPARTMENT	REPLACEMENT Y/N	LEASE TERMS	INTEREST RATE	MONTHLY PAYMENT



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Bill Griffin, Director, Research and Planning  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
DATE: October 26, 2017  
RE: Sale of a Portion of Vacant Land West of Clyde Morris Blvd.

---

The vacant real estate parcel located west of Clyde Morris Blvd (across from the main campus), consisting of 77+/- acres is owned by Halifax Hospital Medical Center ("**HHMC**"). Development of a portion of this parcel is planned, including road, stormwater, and utility infrastructure.

The HHMC Board of Commissioners previously approved (June 2015) a land lease of approximately 8 acres to Highbridge Care LLC ("**Highbridge**") for the development of a traumatic brain injury/spinal cord injury ("**TBI/SCI**") post-acute rehab and a memory care assisted living facility ("**ALF**"). During the development planning, both parties believe that a land sale to Highbridge rather than a lease would be in the best interest of both parties.

The negotiated purchase price for 11.68 acres of land depicted below (the "**Sale Parcel**") is \$2,336,000 (\$200,000 per acre), subject to adjustment once the lots are platted and a survey is obtained to confirm the acreage of the Sale Parcel.

In addition, Highbridge has agreed to fund a pro rata share of the cost of constructing access road, stormwater, and utility infrastructure for the overall site. HHMC's estimated cost of road, stormwater, and utility infrastructure is \$2,530,000, of which approximately 20% is to be paid by Highbridge, resulting in a total purchase price of \$2,852,880.00 (i.e. \$2,336,000 for the land and \$516,880.00 for Highbridge's pro rata share of the infrastructure construction costs). If the infrastructure construction contract comes in for less than the \$2,530,000, or if the survey establishes the Sale Parcel is less than 11.68 gross acres, Highbridge's contribution amount would decrease pro rata.

Additional background on proposed sale:

- This west Clyde Morris land was donated to the Halifax Hospital District in 1935, the book value includes the investment made for wetland mitigation
- Highbridge's proposed use: post-acute care spinal cord/traumatic head injury and memory care ALF.
- Provides new and needed service to our area with 30 TBI/SCI beds for post-acute care and a 20 bed transitional housing for these patients, also up to a 60 bed memory care ALF for those suffering from Alzheimer's disease and related disorders, with up to 115,000 enclosed square feet. Highbridge would reserve the right for a future Phase II project consisting of 30 TBI/SCI beds and 40 beds for transitional programs, up to an additional 52,000 enclosed square feet.
- Highbridge would make good faith efforts to make 1 TBI/SCI bed and 2 memory care ALF beds available to the District for uncompensated patient care (subject to reasonable availability)
- Complements Halifax Health existing services in trauma, stroke and brain injury



- HHMC has certain architectural design review and approval rights regarding Highbridge's development.
- Initiates development of the overall site to attract other interest/development
- Net Gain on sale – Approximately \$2 million

**We request the Halifax Hospital Medical Center Board of Commissioners provide approval to:**

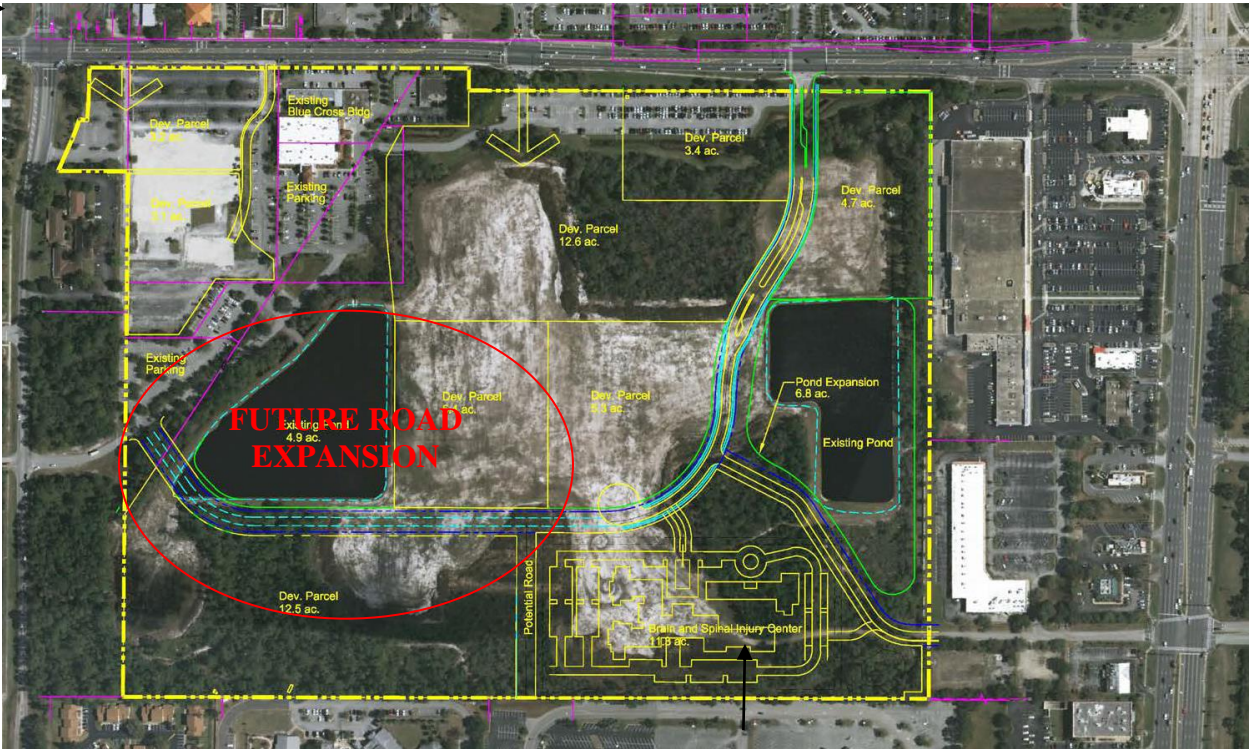
- 1. Sell the real estate parcel described above and authorize the Chief Executive Officer or the Chief Financial Officer to execute any related sales documents or agreements, plats, property owner's association documents, and related development approval documents.**
- 2. Incur capital costs of up to \$2,530,000 for the development of road, stormwater, and utility infrastructure for the overall site.**

*{Proposed Site Map On Next Page}*

Proposed Site West of Main Campus on Clyde Morris Blvd

ISB  
↓

Clyde Morris Blvd →



Proposed Site



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Bill Griffin, Director, Research and Planning  
Jeanne Connelly, Executive Director, Physician Services  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
DATE: October 17, 2017  
RE: Acquisition of Orthopedic Medical Office

---

Halifax Health is pursuing a strategic direction to develop a closely affiliated orthopedic service to best position Halifax Health to meet the access needs and choice options for the residents of the service area in need of orthopedic services and fulfill its mission. Orthopedics is a major service line requiring a closely affiliated relationship to meet the expectations of payers and patients for high value as demonstrated by positive outcomes and reduced cost of care.

CMS (Medicare/Medicaid) is rapidly moving to a bundled payment approach for orthopedic services. This methodology requires committed and active management to best practice care models to deliver quality outcomes and efficiency. The bundled payments include all the care associated with high volume orthopedic procedures (i.e., joint replacements), including pre hospital care and post hospital rehabilitation and recovery care. Successful performance under this methodology requires orthopedic surgeons to be committed and involved in the protocol development and management.

The most effective and efficient means of achieving this strategic position is to employ and partner with orthopedic physicians to create, implement and manage the system of orthopedic surgical services. Employing an established orthopedic surgeon provides the foundation for the recruitment of the next generation of orthopedic surgeons to meet the needs of our residents and the strategic direction of Halifax Health.

The integration of the practice of Dr. Norman Seltzer provides a well-respected, experienced orthopedic surgeon who has the capacity for an additional surgeon in his practice. Dr. Seltzer will enter into an employment agreement and continue to provide medical services in the purchased medical office.

The real estate has been appraised and the appraisals (3) support the real estate negotiated purchase price. The equipment and furnishings have also been appraised and the negotiated amount is supported by the appraisal.

We request that the Halifax Hospital Medical Center Board approve the acquisition of Dr. Seltzer's real estate, equipment and furnishing as reflected below.

## **TOTAL CAPITAL COSTS**

Office real estate (614 N. Peninsula Drive, Daytona Beach)	\$853,000
Office equipment, furnishings and IT infrastructure	<u>45,250</u>
Total	<u>\$898,250</u>



## Halifax Health

### Project Evaluation

#### Orthopedic Medical Office

Chief Financial Officer:	Eric Peburn
Executive Director, Physician Services:	Jeanne Connelly
Director, Research and Planning:	Bill Griffin
Finance Analysis by:	Steve Mach

#### Summary

##### Purpose:

The project is for the acquisition of an Orthopedic Medical Office and equipment.

##### Strategic Plan Core Competency Achievement:

Physician Integration	X
Care Coordination	X
Cost Management	
Information Technology	
Service Distribution	X
Financial Position	
Scale	
Managed Care Contracting	
Competitive Position	X

##### Cornerstone:

Safety	X
Compassion	X
Image	X
Efficiency	

Investment Request for Approval **\$898,250**

Recommendation for approval of the project is not based upon incremental return on investment.



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Mark Billings, Executive Vice President and Chief Operating Officer  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
Matt Petkus, Vice President Surgical Services  
DATE: October 19, 2017  
RE: Gastroenterology (GI) Relocation Project

---

Halifax Health Surgical Services is requesting funds to renovate space on the third floor of the Fountain building adjacent to the main operating room for the relocation of GI procedure services. The relocation project includes building two procedural suites and a cleaning room for scopes.

The project will improve operating efficiencies while enhancing patient and surgeon satisfaction. The operating efficiencies will provide an estimated internal rate of return of 39% and a payback of project costs of 2.1 years.

This project was approved by the Capital Investment Committee on October 18, 2017.

<b>TOTAL CAPITAL COSTS</b>	<b><u>\$683,995</u></b>
----------------------------	-------------------------



## Halifax Health Project Evaluation

### Relocation of Gastroenterology (GI) Lab

Chief Operating Officer:	Mark Billings
Vice President, Surgical Services:	Matt Petkus
Director, Surgical Services:	Deborah Moore
Finance Analysis by:	Steve Mach

### Summary

#### Purpose:

This project will relocate two GI procedural suites and a cleaning room adjacent to the third floor Main Operating Room.

#### Strategic Plan Core Competency Achievement:

Physician Integration	X
Care Coordination	X
Cost Management	X
Information Technology	
Service Distribution	
Financial Position	X
Scale	
Managed Care Contracting	
Competitive Position	X

#### Cornerstone:

Safety	X
Compassion	X
Image	X
Efficiency	X

#### Investment/Return:

	Investment Cash Flow	Operations Cash Flow	Cumulative Cash Flow
Year 0 <sup>1</sup>	(\$683,995)	\$0	(\$683,995)
Year 1	\$0	\$321,469	(\$362,526)
Year 2	\$0	\$327,898	(\$34,628)
Year 3	\$0	\$334,456	\$299,827
Year 4	\$0	\$341,145	\$640,972
Year 5	\$0	\$347,968	\$988,940
Terminal Value <sup>2</sup>	\$0	\$0	\$988,940

#### Decision Metrics

Required rate of Return	7.5%
Internal Rate of Return (IRR)	39.0%
5 Year Net Present Value (NPV)	\$664,078
Payback Period (in Years)	2.1

**Investment Request for Approval** **\$683,995**

<sup>1</sup> Includes capital acquisition and project startup costs

<sup>2</sup> Terminal value is estimated at \$0 for evaluation purposes.



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Mark Billings, Executive Vice President and Chief Operating Officer  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
Matt Petkus, Vice President Surgical Services  
DATE: September 18, 2017  
RE: Surgical Tables

---

Halifax Health Surgical Services is requesting funds to purchase two (2) surgical tables. The tables are needed to replace tables that have been removed from service because they cannot be repaired. The tables are more than 18 years old and repair parts are no longer available.

The new tables have a 650 pound weight capacity, provide additional safety features and accommodates full-length C-arm imaging in the operating room. The surgical tables will be used for a variety of surgeries including orthopedic and neurosurgery.

The project was approved at the Capital Investment Committee meeting on August 16, 2017.

**TOTAL CAPITAL COSTS    \$109,840**



## Halifax Health Project Evaluation

### Orthopedic Surgical Tables (2)

Chief Operating Officer:	Mark Billings
Vice President Surgical Services:	Matt Petkus
Director, Surgical Services:	Deb Moore
Finance Analysis by:	Steve Mach

### Summary

#### Purpose:

This project is to replace two (2) Orthopedic Surgical tables. The new model includes updated safety features and increased weight capacity.

#### Strategic Plan Core Competency Achievement:

Physician Integration	
Care Coordination	X
Cost Management	
Information Technology	
Service Distribution	X
Financial Position	
Scale	
Managed Care Contracting	
Competitive Position	

#### Cornerstone:

Safety	X
Compassion	
Image	
Efficiency	

**Investment Request for Approval**     **\$109,840**

Recommendation for approval of the project is not based upon incremental return on investment.





# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Mark Billings, Executive Vice President and Chief Operating Officer  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
Alberto Tineo, Senior Vice President Operations  
DATE: September 18, 2017  
RE: Urinalysis Analyzer

---

Halifax Health Laboratory is requesting funds to purchase a urinalysis analyzer. The current analyzer is in excess of 10 years old and has required frequent repairs.

The urinalysis analyzer is used to perform routine and STAT (immediate) analysis on urine specimens to determine infection or metabolic disorders. Urine analysis is one of the most highly requested STAT tests in the laboratory. Both the emergency department and the obstetrics emergency department rely on a timely turnaround time for patient throughput. The analyzer also performs body fluid analysis on cerebrospinal, pleural, peritoneal and synovial fluids.

The project was approved at the Capital Investment Committee meeting on August 16, 2017.

**TOTAL CAPITAL COST      \$99,590**



## Halifax Health Project Evaluation

### Urinalysis Analyzer

Chief Operating Officer:	Mark Billings
Sr. Vice President, Operations:	Alberto Tineo
Manager, Lab:	Laurie Koelker
Finance Analysis by:	Steve Mach

### Summary

#### Purpose:

This project is to replace urine analyzer used by the Lab department.

#### Strategic Plan Core Competency Achievement:

Physician Integration	
Care Coordination	X
Cost Management	
Information Technology	
Service Distribution	X
Financial Position	
Scale	
Managed Care Contracting	
Competitive Position	

#### Cornerstone:

Safety	X
Compassion	
Image	
Efficiency	

**Investment Request for Approval** \$99,590

Recommendation for approval of the project is not based upon incremental return on investment.



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Mark Billings, Executive Vice President and Chief Operating Officer  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
Matt Petkus, Vice President Surgical Services  
DATE: October 17, 2017  
RE: Orthopedic Surgical Table

---

Halifax Health Surgical Services is requesting funds to purchase a Hana orthopedic specialty table. This table is used primarily when performing anterior approach hip replacements.

Anterior approach hip replacement has become increasingly popular with patients due to the reduced muscle trauma, lessened blood loss, shorter hospital stay and reduced recuperation period. Due to the increase in these procedures, scheduling delays for these procedures have occurred.

The project was approved at the Capital Investment Committee meeting on September 20, 2017.

**TOTAL CAPITAL COSTS    \$93,057**



## Halifax Health Project Evaluation

### Hana Orthopedic Surgical Table

Chief Operating Officer:	Mark Billings
Vice President Surgical Services:	Matt Petkus
Director, Surgical Services:	Deb Moore
Finance Analysis by:	Steve Mach

### Summary

#### Purpose:

This project is to add a Hana orthopedic surgical table used in anterior approach hip replacement surgery.

#### Strategic Plan Core Competency Achievement:

Physician Integration	
Care Coordination	X
Cost Management	
Information Technology	
Service Distribution	X
Financial Position	
Scale	
Managed Care Contracting	
Competitive Position	

#### Cornerstone:

Safety	X
Compassion	X
Image	
Efficiency	

**Investment Request for Approval** **\$93,057**

Recommendation for approval of the project is not based upon incremental return on investment.

**Halifax Health Medical Center  
Capital Disposals  
OCTOBER 2017**

The Board hereby deems the following property to be surplus in that: the items are obsolete, their continued use would be uneconomical or inefficient, or they serve no useful function. Disposition of said property is therefore authorized pursuant to Florida Statutes, Chapter 274.

Asset #	Description	Department	Date Purchased	Disposition Status	Original Cost	Book Value
50799	BARCODE SCANNER	CATH LAB	04/22/99		2,000.00	-
59199	21" MEDICAL GRADE MONITOR	EP/PACER	04/26/17		2,950.00	-
55085	TOPSIDER KIT (infection control cube)	FACILITY OPERATIONS	12/01/05		2,750.25	-
45842	UPPER BODY ERGOMETER	PULMONARY REHABILITATION	05/04/94		2,464.50	-
45839	UPPER BODY ERGOMETER	CARDIAC REHABILITATION	05/04/94		2,464.50	-
52495	TEE TRANSDUCER	ECHO	03/03/11		28,000.00	-
49515	BIRTHING BED	LABOR & DELIVERY	08/17/98		9,369.60	-
49522	BIRTHING BED	LABOR & DELIVERY	08/17/98		9,369.60	-
55516	VITAL SIGNS MONITOR	HHPO ED	11/20/06		2,432.10	-
55513	VITAL SIGNS MONITOR	HHPO ED	11/20/06		2,432.10	-
56012	BIZHUB 350 COPIER	HHPO ED	02/01/07		3,160.00	-
50798	BARCODE SCANNER	CATH LAB	04/22/99		2,000.00	-
58073	SOFABED	5 NORTH	06/30/09		1,848.77	-
58084	SOFABED	5 NORTH	06/30/09		1,848.77	-
58092	SOFABED	5 NORTH	06/30/09		1,848.77	-
57561	RECLINER	5 NORTH	06/30/09		1,425.00	-
57562	RECLINER	5 NORTH	06/30/09		1,425.00	-
57563	RECLINER	5 NORTH	06/30/09		1,425.00	-
57564	RECLINER	5 NORTH	06/30/09		1,425.00	-
57565	RECLINER	5 NORTH	06/30/09		1,425.00	-
57566	RECLINER	5 NORTH	06/30/09		1,425.00	-
57567	RECLINER	5 NORTH	06/30/09		1,425.00	-
57570	RECLINER	5 NORTH	06/30/09		1,425.00	-
57571	RECLINER	5 NORTH	06/30/09		1,425.00	-
57572	RECLINER	5 NORTH	06/30/09		1,425.00	-
57573	RECLINER	5 NORTH	06/30/09		1,425.00	-
57577	RECLINER	5 NORTH	06/30/09		1,425.00	-
57579	RECLINER	5 NORTH	06/30/09		1,425.00	-
57580	RECLINER	5 NORTH	06/30/09		1,425.00	-
57581	RECLINER	5 NORTH	06/30/09		1,425.00	-
57582	RECLINER	5 NORTH	06/30/09		1,425.00	-
57583	RECLINER	5 NORTH	06/30/09		1,425.00	-
57584	RECLINER	5 NORTH	06/30/09		1,425.00	-
57585	RECLINER	5 NORTH	06/30/09		1,425.00	-
57587	RECLINER	5 NORTH	06/30/09		1,425.00	-
57588	RECLINER	5 NORTH	06/30/09		1,425.00	-
57589	RECLINER	5 NORTH	06/30/09		1,425.00	-
57590	RECLINER	5 NORTH	06/30/09		1,425.00	-
57592	RECLINER	5 NORTH	06/30/09		1,425.00	-
57593	RECLINER	5 NORTH	06/30/09		1,425.00	-
57594	RECLINER	5 NORTH	06/30/09		1,425.00	-
56514	AUTO-PRINT BAGGING SYSTEM	PHARMACY	07/02/07		19,300.00	-
35100	PROJECT SCREEN	MEDICAL STAFF SERVICES	10/01/87		1,502.16	-

**Total to be Disposed: \$ 132,791.12 \$ -**

**Halifax Health Medical Center  
Capital Disposals  
September 2017**

The Board hereby deems the following property to be surplus in that: the items are obsolete, their continued use would be uneconomical or inefficient, or they serve no useful function. Disposition of said property is therefore authorized pursuant to Florida Statutes, Chapter 274.

Asset #	Description	Department	Date Purchased	Disposition Status	Original Cost	Book Value
47118	LAMINAR FLOOD HOOD	PHARMACY	05/11/95		5,372.00	-
39396	CARPET EXTRACTOR W/ATTACH	ENV. SERVICES	02/14/90		1,889.00	-
45554	EXTRACTOR SELECTRIC	ENV. SERVICES	03/24/94		3,479.15	-
45899	VACUUM WIDE AREA W/ATTACH	ENV. SERVICES	05/13/94		1,450.00	-
46250	EXTRACTOR SELECTRIC	ENV. SERVICES	04/22/94		3,225.00	-
50174	BURNISHER	ENV. SERVICES	11/27/02		4,846.87	-
48525	EXTRACTOR SELECTRIC	ENV. SERVICES	05/30/94		3,225.00	-
57728	HELD HP SERVER BLADES	I.T.	06/30/09		21,540.98	-
59059	HELD HP SERVER BLADES	I.T.	11/23/11		38,000.00	-
56970	AMSCO TABLE	L & D	10/31/08		18,970.00	-
58516	HELD HP SERVER BLADES	I.T.	09/30/09		8,497.00	-
58517	HELD HP SERVER BLADES	I.T.	10/02/09		25,786.82	-
63009-12	10FT NORTEL STACKING CABLE	I.T.	06/30/09		987.87	-
45893	MAIL OPENER AUTO	PBFS ADMINISTRATION	05/04/94		1,993.25	-
56004	KUBE TOPSIDER ENCLOSURE	FACILITY OPERATIONS	02/14/07		1,045.93	-
56005	KUBE TOPSIDER ENCLOSURE	FACILITY OPERATIONS	02/14/07		1,045.93	-
56006	KUBE TOPSIDER ENCLOSURE	FACILITY OPERATIONS	02/14/07		1,045.93	-
56997	CT MARKER SET	RADIATION ONCOLOGY	12/19/08		2,333.00	-
54736	PACKAGING SYSTEMS/SOLIDS	PO PHARMACY	11/17/06		14,357.50	-
54737	PACKAGING SYSTEMS/LIQUIDS	PHARMACY	07/05/05		16,309.75	-
56759	FUJITSU LIFE BOOK LAPTOP W/SIGNATURE PAI HIM		02/25/08		1,774.23	-
48067	ICE MACHINE	CVICU	10/31/97		3,550.16	-
54386	ZOLL M SERIES BIPHASIC DEFIB/MONITOR	CVICU	06/29/04		9,883.88	-
50980	MED CART	7 EAST	03/09/00		2,199.00	-
50981	MED CART	7 EAST	03/09/00		2,199.00	-
54208	MINOLTA COPIER	LAB	02/20/04		4,437.00	-
56645	CYTOFUGE STAT SPIN	LAB HEMATOLOGY	10/02/07		2,995.00	-
54269	COPIER	FACILITY OPERATIONS	04/06/04		4,437.00	-
54554	MINOLTA DI251 COPIER	FACILITY OPERATIONS	04/06/04		2,987.00	-
41518	WATER CONDITIONER	FACILITY OPERATIONS	03/25/91		4,295.00	-
41622	CULLIGAN WATER SOFTNER	FACILITY OPERATIONS	03/25/91		4,095.00	-
46976	TRACTOR JOHN DEERE	FACILITY OPERATIONS	04/27/95		2,499.00	-
35096	CARPET & TILE IN MAINTENANCE OFFICE	FACILITY OPERATIONS	10/01/87		1,426.81	-
49766	RETRACTOR DIAMOND FLEX LIVER	OR	09/26/01		1,481.57	-
50371	RETRACTOR DIAMOND FLEX LIVER	OR	01/26/98		1,486.62	-
55417	AUTOMATED SINGLE SLIDE STAINER	ORMOND LAB	07/18/06		2,150.00	-
54456	INCUBATOR BID	MICRO-LAB	11/09/04		4,645.00	-
56974	ENDO CLIP APPLIER	OR	09/19/08		1,182.00	-
56975	ENDO CLIP APPLIER	OR	09/19/08		1,380.00	-
<b>Total to be Disposed:</b>					<b>\$ 234,504.25</b>	<b>\$ -</b>



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Bill Griffin, Director, Research and Planning  
CC: Eric Peburn, Executive Vice President and Chief Financial Officer  
DATE: October 26, 2017  
RE: Sale of a Portion of Vacant Land West of Clyde Morris Blvd.

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The vacant real estate parcel located west of Clyde Morris Blvd (across from the main campus), consisting of 77+/- acres is owned by Halifax Hospital Medical Center ("**HHMC**"). Development of a portion of this parcel is planned, including road, stormwater, and utility infrastructure.

The HHMC Board of Commissioners previously approved (June 2015) a land lease of approximately 8 acres to Highbridge Care LLC ("**Highbridge**") for the development of a traumatic brain injury/spinal cord injury ("**TBI/SCI**") post-acute rehab and a memory care assisted living facility ("**ALF**"). During the development planning, both parties believe that a land sale to Highbridge rather than a lease would be in the best interest of both parties.

The negotiated purchase price for 11.68 acres of land depicted below (the "**Sale Parcel**") is \$2,336,000 (\$200,000 per acre), subject to adjustment once the lots are platted and a survey is obtained to confirm the acreage of the Sale Parcel.

In addition, Highbridge has agreed to fund a pro rata share of the cost of constructing access road, stormwater, and utility infrastructure for the overall site. HHMC's estimated cost of road, stormwater, and utility infrastructure is \$2,530,000, of which approximately 20% is to be paid by Highbridge, resulting in a total purchase price of \$2,852,880.00 (i.e. \$2,336,000 for the land and \$516,880.00 for Highbridge's pro rata share of the infrastructure construction costs). If the infrastructure construction contract comes in for less than the \$2,530,000, or if the survey establishes the Sale Parcel is less than 11.68 gross acres, Highbridge's contribution amount would decrease pro rata.

Additional background on proposed sale:

- This west Clyde Morris land was donated to the Halifax Hospital District in 1935, the book value includes the investment made for wetland mitigation
- Highbridge's proposed use: post-acute care spinal cord/traumatic head injury and memory care ALF.
- Provides new and needed service to our area with 30 TBI/SCI beds for post-acute care and a 20 bed transitional housing for these patients, also up to a 60 bed memory care ALF for those suffering from Alzheimer's disease and related disorders, with up to 115,000 enclosed square feet. Highbridge would reserve the right for a future Phase II project consisting of 30 TBI/SCI beds and 40 beds for transitional programs, up to an additional 52,000 enclosed square feet.
- Highbridge would make good faith efforts to make 1 TBI/SCI bed and 2 memory care ALF beds available to the District for uncompensated patient care (subject to reasonable availability)
- Complements Halifax Health existing services in trauma, stroke and brain injury

- HHMC has certain architectural design review and approval rights regarding Highbridge's development.
- Initiates development of the overall site to attract other interest/development
- Net Gain on sale – Approximately \$2 million

**We request the Halifax Hospital Medical Center Board of Commissioners provide approval to:**

- 1. Sell the real estate parcel described above and authorize the Chief Executive Officer or the Chief Financial Officer to execute any related sales documents or agreements, plats, property owner's association documents, and related development approval documents.**
- 2. Incur capital costs of up to \$2,530,000 for the development of road, stormwater, and utility infrastructure for the overall site.**

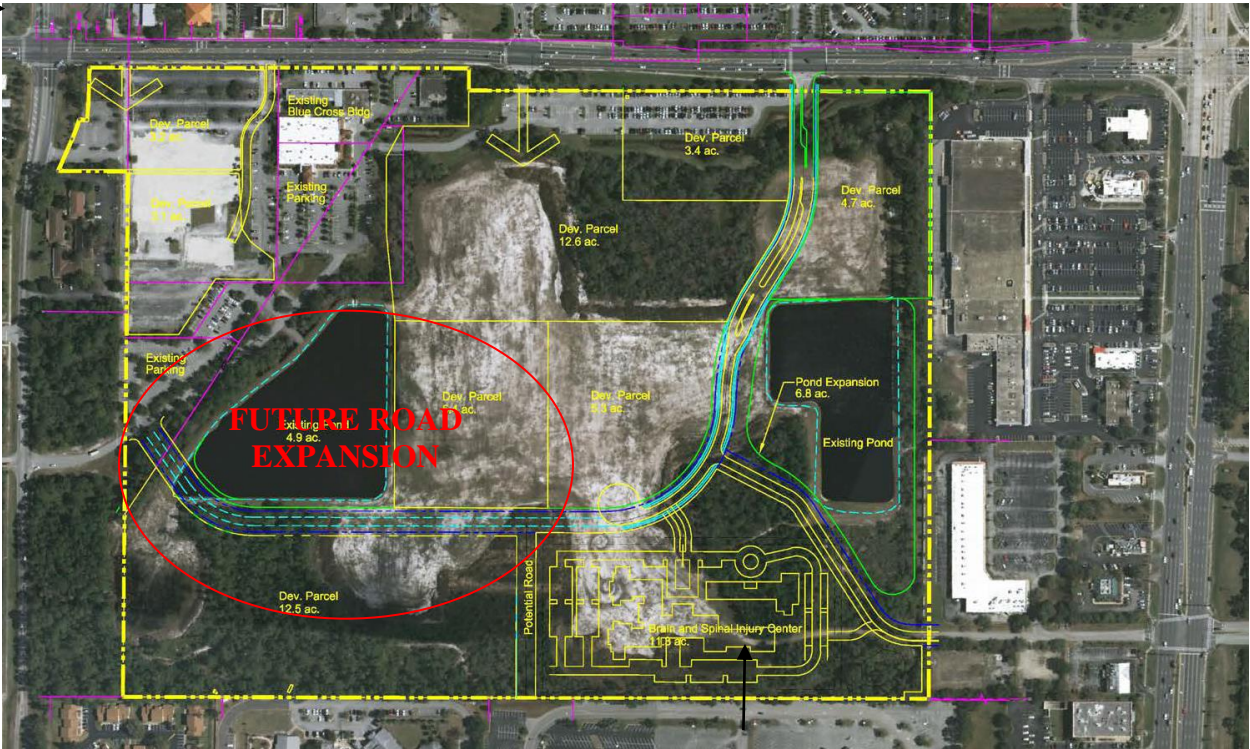
*{Proposed Site Map On Next Page}*



Proposed Site West of Main Campus on Clyde Morris Blvd

ISB  
↓

Clyde Morris Blvd →



Proposed Site



# HALIFAX HEALTH

To: Jeff Feasel, President & CEO  
From: Eric Peburn, Executive Vice President & Chief Financial Officer  
CC: Lisa Tyler, Corporate Controller  
Date: October 23, 2017  
Re: Banking and Treasury Services

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Halifax Health Accounting Department is requesting the Finance Committee and Board of Commissioners' approval to proceed with the addition of a relationship for banking and treasury services with US Bank.

Halifax Health entered into an agreement with AthenaHealth to become the provider for EMR and Practice Management Services. Based on their existing relationship and program specifications, it is recommended that we utilize their relationship with US Bank for deposit purposes to achieve optimum cost and time saving features of their system configurations.



# HALIFAX HEALTH

To: Jeff Feasel, President & CEO  
From: Eric Peburn, Executive Vice President & Chief Financial Officer  
CC: Vivian Gallo, General Counsel  
Lisa Tyler, Corporate Controller  
Date: October 25, 2017  
Re: Banking and Treasury Services – Intracoastal Bank

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Halifax Health Accounting Department, on behalf of the Medical Staff, is requesting the Finance Committee and Board of Commissioners' approval to proceed with the addition of a relationship for banking and treasury services for the benefit of Medical Staff with Intracoastal Bank.

The Medical Staff would like to develop this relationship based on Intracoastal Bank's focus on the community and local customer service.



# HALIFAX HEALTH

TO: Jeff Feasel, President and Chief Executive Officer  
FROM: Eric Peburn, Executive Vice President and Chief Financial Officer  
DATE: October 4, 2017  
RE: Interlocal Agreement – City of Deltona

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Effective January 4, 2016, Halifax Hospital Medical Center ("Halifax") and the City of Deltona ("City") entered into an Interlocal Agreement to cooperatively review the healthcare needs of Deltona residents and allow Halifax to establish healthcare facilities within the City. Meetings and communication between Halifax and the City have been ongoing to define the scope and nature of the healthcare services and facilities to be provided and developed by Halifax.

Halifax Bond Counsel has recommended certain additions to the Interlocal Agreement to facilitate securing financing for facilities to be constructed in the City by Halifax. Working with Bond Counsel, Halifax General Counsel and legal representative for the City, a revised Interlocal Agreement has been developed. The revised Interlocal Agreement is attached. This revised agreement adds the following:

1. Reference to the hospital to be constructed and the related Certificate of Need issued.
2. Joint desire for Halifax to finance, construct and operate a hospital facility and other healthcare facilities within the City, including issuance of revenue bonds as issuer or primary obligor.
3. References that Halifax will not levy taxes on the residents of the City.
4. Reference that Halifax will not expend ad valorem tax revenues generated from within Halifax's taxing district to finance construction of facilities within the City.
5. The term of the agreement is extended from 30 to 40 years.

The City Commission approved the revised agreement at its regularly scheduled meeting on October 2, 2017.

Approval of the revised Interlocal Agreement is requested of the Halifax Finance Committee and Board of Commissioners in order to facilitate and continue Halifax's strategic initiative of expanding access to care for the residents of the City and surrounding communities.

Attachment – Revised Interlocal Agreement, between Halifax Health and City of Deltona

**INTERLOCAL AGREEMENT BETWEEN  
HALIFAX HOSPITAL MEDICAL CENTER  
AND THE  
CITY OF DELTONA**

THIS INTERLOCAL AGREEMENT ("Agreement") is entered into this \_\_\_ day of \_\_\_\_\_, 2017 by and between the HALIFAX HOSPITAL MEDICAL CENTER, a special taxing district of the State of Florida ("Halifax"), and the CITY OF DELTONA, a municipality of the State of Florida ("City").

**WITNESSETH**

WHEREAS, the City has an interest in the health care needs of its citizens and those who work, recreate, and travel through its geographic boundaries; and

WHEREAS, Halifax was formed by the Florida Legislature for the purpose of providing health care services and facilities; and

WHEREAS, the City recognizes the benefits that will flow to individuals within the City's boundaries through an affiliation with Halifax to ensure that adequate health care facilities and services are located within the City which will best meet the geographic, economic, and population-related needs of the City; and

WHEREAS, the City recognizes the benefits of new jobs created by Halifax providing additional health care services within the City; and

WHEREAS, the City recognizes the benefit of providing City residents with additional choices of conveniently located health care services within the City; and

WHEREAS, the Halifax has made significant capital investments within the City, to include the opening of a new free-standing emergency department in the Halifax Crossings development; and

WHEREAS, the State of Florida, Agency for Health Care Administration, has issued a certificate of need, numbered 10429, to Halifax which permits the establishment of a hospital at the Halifax Crossings location; and

WHEREAS, Halifax is prepared to construct and operate a hospital on its campus at the Halifax Crossings location; and

WHEREAS, construction of the hospital by Halifax, in addition to providing a significant increase in healthcare resources for the City's citizens and visitors, will also provide

a significant economic impact to the City both in terms of additional jobs as well as the creation of ancillary businesses within the City; and

WHEREAS, §163.01, Florida Statutes, the Florida Interlocal Cooperation Act of 1969, authorizes local governmental entities to make the most efficient use of their powers by enabling them to cooperate on a basis of mutual advantage and, thereby, to provide services and facilities in a manner that will accord best with geographic, economic, population, and other factors influencing the needs and development of local communities; and

WHEREAS, the cooperative effort between the parties will mutually benefit the City and Halifax.

NOW THEREFORE, the parties agree as follows:

1. Halifax and the City agree that it is in their respective best interests to work cooperatively to review the health care needs present within the City.

2. Halifax and the City will strive to jointly address issues of mutual concern regarding the health care needs identified within the City and will work together to provide health care services within the City's boundaries to meet those needs. Such services may include, but shall not be limited to, a hospital, emergency and non-emergency primary care, medical offices, imaging centers, surgery centers, and specialty physician services.

3. Halifax and the City agree that, subject to all regulatory requirements, Halifax may establish and operate health care facilities in appropriate and agreed upon areas within the City, as identified by Halifax, in consultation with the City.

4. The City and Halifax desire that Halifax finances, constructs and operates a hospital at the Halifax Crossings Development, pursuant to certificate of need, numbered 10429, issued by the State of Florida, Agency for Health Care Administration, as well as medical offices and related health care services, in addition to the medical facilities heretofore established by Halifax within the City. The City hereby agrees to and authorizes Halifax to, directly or by and through one or more subsidiary or affiliated corporations, or a combination thereof, to operate in the jurisdiction of the City to provide healthcare facilities and services as contemplated by this Agreement. Such agreement and authorization includes the authority to finance, acquire, construct and operate health care facilities, including, but not limited to, an acute care hospital in Deltona, Florida, as authorized by the State of Florida, Agency for Health Care Administration, pursuant to CON #10429 (the "Hospital"), and other health care facilities, either directly or by and through one or more subsidiary or affiliated corporations, or a combination thereof, including, without limitation, issuing revenue bonds, either as issuer and primary obligor, or as a conduit issuer for the benefit of one or more subsidiary or affiliated corporations, to finance the acquisition, construction and equipping of healthcare facilities in the jurisdiction of the City pursuant to this Agreement, including the Hospital. However,

nothing in this Agreement shall authorize or permit Halifax to levy any tax upon the residents of the City or authorize, permit or require the City to expend ad valorem tax revenues from the City's operating or capital budget to finance the acquisition, construction or operation of healthcare facilities within the City. Furthermore, the City and Halifax acknowledge and agree that no part of the City of Deltona is within Halifax's taxing district, and nothing in this Agreement gives Halifax any authority to levy or otherwise impose or collect any tax on the citizens of, or property located in, the City of Deltona. The City and Halifax also acknowledge and agree that this Agreement does not authorize, permit or require Halifax to expend ad valorem tax revenues generated within Halifax's taxing district to finance the acquisition, construction or operation of healthcare facilities within the City.

5. Halifax and the City agree that considering the significant investment on the part of Halifax and the benefits accruing to the City and its residents, that this Agreement shall be in effect for an initial forty (40) year period from the date set forth above, with additional renewal options of similar term at the completion of the initial term or any renewal term.

6. Nothing in this Agreement shall be deemed in any way to create an obligation on the City to fund or otherwise participate in the construction of any facilities, it being the intent of the City and Halifax only that the City work cooperatively with Halifax to identify health care needs within the City of Deltona so that Halifax can achieve its mission of providing quality health care to the public. The City and Halifax acknowledge and agree that the City is not being asked to, and has absolutely no obligation to fund, out of its general fund or otherwise, any improvements that may be constructed by Halifax, and further that the City is not being asked to, and has absolutely no obligation to provide or otherwise participate in revenue bonding or in any way create a taxing district or be a part of the existing Halifax taxing district.

7. Notices. Any notices required under this Agreement shall be in writing and either hand delivered or sent by U.S. mail to the following:

a. If to City:

City Manager  
2345 Providence Boulevard  
Deltona, FL 32725

b. If to Halifax:

Vivian Gallo, Esq.  
General Counsel  
Halifax Health  
303 N. Clyde Morris Blvd.  
Daytona Beach, FL 32114

8. Authority to Enter this Agreement. The parties acknowledge and certify that each has the authority to enter this Agreement.

9. No Third Party Beneficiary. No person or entity, other than the City and Halifax, shall have any rights under this Agreement. There are no third party beneficiaries.

10. Sovereign Immunity. Nothing contained in this Agreement shall be deemed or interpreted to operate as a waiver of any party's sovereign immunity as the same may be legally applicable or available to any party.

11. Counterpart Originals. This Agreement may be executed in counterpart originals, each of which shall carry the same force and effect as the original.

12. Recording Agreement. Halifax hereby agrees to record this Agreement immediately following the effective date. The effective date of this Agreement shall be immediately after the recording of the Agreement with the Clerk of the Circuit Court of the County of Volusia.

13. Amendments. Amendments to the Agreement may be offered by either Party at any time. Proposed amendments shall be in writing and must be approved by a majority of the governing bodies of each Party. No amendment shall be effective until approved by the governing bodies of the City and Halifax.

14. Supremacy. The Parties agree and covenant, having given and received valuable consideration for the promises and commitments made herein, it is their desire, intent and firm agreement to be bound by and observe the terms of this Agreement. Except as otherwise provided by this Agreement or by law, in the event the terms of this Agreement conflict with previous agreements between the Parties, the terms of this Agreement shall control.

15. Entire Understanding. Except as otherwise specifically set forth herein or in any sub-agreement, this Agreement embodies and constitutes the entire understanding of the Parties with respect to the subject matters addressed herein, and all prior agreements, understandings, representations and statements, oral or written, are superseded by this Agreement. The City and Halifax further acknowledge that they each participated in drafting this Agreement, and in the event of a dispute regarding the Agreement, it shall not be construed by a court of competent jurisdiction or other tribunal more or less favorably on behalf of either Party on the basis of a claim that a Party did not participate in drafting the Agreement or any part thereof.

16. Severability. Any term or provision of this Agreement that is invalid or unenforceable in any situation in any jurisdiction shall not affect the validity or enforceability of the remaining terms and provision hereof or the validity or enforceability of the offending term or provision in any other situation or in any other jurisdiction.



17. Dispute Resolution. The Parties agree to resolve any dispute related to the interpretation or performance of this Agreement in accordance with the Florida Governmental Conflict Resolution Act, Chapter 64, Florida Statutes.

18. Governing Law and Venue. The laws of the State of Florida shall govern this Agreement, and venue for any action to enforce the provisions of this Agreement shall only be in the Circuit Court in and for Volusia County, Florida. Federal Jurisdiction and venue, if applicable shall only be in the Middle District of Florida, Orlando Division.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date set forth above.

CITY OF DELTONA, a Municipality  
of the State of Florida

By: \_\_\_\_\_  
John C. Masiarczyk, Sr., Mayor

Attest:

By: \_\_\_\_\_  
Joyce Raftery, CMC, City Clerk

Approved as to form and legality:

By: \_\_\_\_\_  
Marsha Segal-George, Esq.  
Acting Interim City Attorney

HALIFAX HOSPITAL MEDICAL CENTER,  
a special taxing district of the State of  
Florida

By: \_\_\_\_\_  
Chair, Board of Commissioners

Attest:

By: \_\_\_\_\_  
Secretary, Board of Commissioners

RESOLUTION NO. \_\_\_\_

A RESOLUTION OF THE BOARD OF COMMISSIONERS OF HALIFAX HOSPITAL MEDICAL CENTER, AS THE OBLIGATED GROUP REPRESENTATIVE, ON BEHALF OF THE OBLIGATED GROUP COMPRISED OF HALIFAX HOSPITAL MEDICAL CENTER AND H.H. HOLDINGS, INC. DECLARING THE OFFICIAL INTENT OF THE OBLIGATED GROUP TO REIMBURSE ITSELF FROM THE PROCEEDS OF DEBT TO BE ISSUED FOR EXPENSES TO BE INCURRED WITH RESPECT TO THE ACQUISITION, CONSTRUCTION, RENOVATION, EQUIPPING AND IMPROVEMENT OF HOSPITAL FACILITIES TO INCLUDE ALL REQUIRED SUPPORT INFRASTRUCTURE AND ANCILLARY SERVICES FOR A FULL SERVICE ACUTE CARE HOSPITAL LOCATED IN DELTONA, FLORIDA; PROVIDING CERTAIN FINDINGS AND AUTHORIZATIONS WITH RESPECT TO THE FOREGOING; AND PROVIDING AN EFFECTIVE DATE.

**NOW THEREFORE, BE IT RESOLVED** by the Board of Commissioners of Halifax Hospital Medical Center ("HHMC") that:

Section 1. Authority. This Resolution is adopted pursuant to the Constitution of the State of Florida, Chapter 2003-374, laws of Florida, as amended, and other applicable provisions of law.

Section 2. Definitions. All terms used herein in capitalized form, unless otherwise defined herein, shall have the same meaning as ascribed to them in the Master Trust Indenture dated as of June 1, 2006 (the "Master Indenture"), between HHMC, as the Obligated Group Representative on behalf of the Obligated Group thereunder (in such capacity, the "Obligated Group Representative"), and Wells Fargo Bank, National Association, as Master Trustee (in such capacity, the "Master Trustee").

Section 3. Findings.

(a) Pursuant to Section 2.03 of the Master Indenture, HHMC is designated as the Obligated Group Representative and is appointed as the agent of the Members of the Obligated Group with the power to prepare and execute on behalf of the Obligated Group documents in connection with the issuance of Obligations and Related Bonds.

(b) In connection with the acquisition, construction, renovation, equipping and improvement of healthcare facilities of the Obligated Group, including, but not limited to hospital facilities to include all required support infrastructure and ancillary

services for a full service acute care hospital located in Deltona, Florida (the "Project"), the Obligated Group expects to incur expenses for which the Obligated Group or an affiliate will advance internal funds.

(c) The Obligated Group intends to reimburse itself for all or a portion of such expenses related to the Project from the proceeds of debt to be issued on behalf of the Obligated Group.

Section 4. Declaration of Official Intent. HHMC, as the Obligated Group Representative, for and on behalf of the Obligated Group, hereby declares the official intent to be reimbursed from the proceeds of debt to be issued on behalf of the Obligated Group for expenses incurred with respect to the Project within 60 days prior to the date of this Resolution and subsequent to the date of this Resolution. This Resolution is intended as a declaration of official intent under Treasury Regulation Section 1.150-2. The debt to be issued to finance the Project is expected not to exceed an aggregate principal amount of \$115,000,000.

Section 5. Authorizations. The Chairman or Vice Chairman and Secretary or Assistant Secretary of HHMC are hereby authorized and empowered, collectively or individually, to take all action and steps and to execute all instruments, documents and contracts, as may be necessary or appropriate for the full, punctual and complete performance of all the matters contemplated herein, or as otherwise may be necessary or desirable to effectuate the purpose and intent of this Resolution.

Section 6. Effective Date. This Resolution shall become effective immediately upon its adoption.

Passed and Adopted in public session of the Board of Commissioners of Halifax Hospital Medical Center this \_\_\_\_ day of \_\_\_\_\_, 2017.

**HALIFAX HOSPITAL MEDICAL CENTER**

(SEAL)

By: \_\_\_\_\_  
Chairman

ATTEST:

By: \_\_\_\_\_  
Secretary



# HALIFAX HEALTH

To: Audit and Finance Committee and Board of Commissioners  
Cc: Jeff Feasel, Chief Executive Officer  
From: Shelly Shiflet, Vice President and Chief Compliance Officer  
Date: September 18, 2017  
Re: Compliance Dashboard Report for the month ended August 31, 2017

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Enclosed is the Compliance Program Dashboard Report for August 2017. Item III(2) did not meet the target defined on the report. The target is set for at least 70% of the 13 members to attend the Compliance Committee meeting. Eight (8) of the thirteen (13) members (or 61.5%) attended the August 2, 2017 Compliance Committee meeting:

Members Present:

Shelly Shiflet, Vice President and Chief Compliance Officer;  
Bill Griffin, Director, System Research and Planning;  
Khalelah Jones, Privacy Officer;  
Charlena Kowatch, Deputy Chief Compliance Officer;  
Arvin Lewis, Senior Vice President and Chief Revenue Officer;  
Tom Stafford, Vice President and Chief Information Officer;  
Eric Peburn, Executive Vice President and Chief Financial Officer; and,  
Jillian Wheelock, General Counsel Assistant (alternate for Vivian Gallo).

Members Absent:

Mark Billings, Executive Vice President and Chief Operating Officer;  
Dr. Margaret Crossman, Chief Medical Officer;  
Maria Crumlich, Director, Hospice;  
Kim Fulcher, Senior Vice President and Chief Human Resources Officer; and,  
Alberto Tineo, Senior Vice President, Operations.

Feel free to contact the Board's Compliance Expert, Robert Wade, Esq., or me regarding any questions on this report.

Mr. Wade can be reached at: [rwade@kdlegal.com](mailto:rwade@kdlegal.com)  
Office: 574.485.2002

I can be reached at: [shelly.shiflet@halifax.org](mailto:shelly.shiflet@halifax.org)  
Office: 386.425.4970

**Recommended Action:** None. Information only.

**Halifax Health**  
**Corporate Compliance Program**  
**Board Report – 8/31/2017**

**ON TARGET**

**ALERT**

**I. EMPLOYEE AND BOARD EDUCATION** – Halifax Health’s compliance program and Corporate Integrity Agreement requires most employees to acknowledge the Code of Conduct within 30 days of hire. Employees who are considered “Covered Persons” are required to complete 1 hour of general compliance training within 30 days of hire and annually thereafter. Managers and others who are considered “Arrangements Covered Persons” must complete an additional hour of general education and 2 hours of arrangements training within 30 days of becoming an “Arrangements Covered Person,” and annually thereafter. Members of the Board are required to complete 6 hours (2 hours general, 2 hours arrangements, and 2 hours governance) of training within 30 days of becoming a member. The following is the status of education for Halifax Health’s employees:

	➤	<b>Code of Conduct Attestation<sup>1</sup></b>
	1. 4,260	Number of Covered Persons and Board Members required to complete as of end of period
	2. 100%	% of Covered Persons who have completed (On Target at 100%)

	➤	<b>CIA Required Training<sup>2</sup></b>
	1. 4,109	Number of Covered Persons and Board Members required to complete as of end of period
	2. 100%	% of Covered Persons who have completed (On Target at 100%)

**II. SANCTION CHECKS** - Halifax Health’s Corporate Integrity Agreement requires all “Covered Persons” be screened for exclusions from participation in federal programs monthly. During the period:

	➤	<b>Sanction Check for Covered Persons<sup>3</sup></b>
	1. 5,013	Number of Covered Persons as of the end of the period
	2. 100%	% of Covered Persons above who had no sanctions, based on monthly sanction check results (On Target at 100%)

**III. COMPLIANCE COMMITTEE** – Halifax Health has a Compliance Committee responsible for regulatory compliance matters, which meets monthly. Members of senior leadership across service lines as well as representatives from Hospice and the Medical Staff are represented. During the period:

	1. 13	Number of members on <i>Compliance Committee</i>
	2. 61.5%	% of members who attended the meeting (On Target at 70% or Greater) – meeting date 8/2/17
	3. 3	Number of meetings in the last quarter (On Target if 2 or more)

**IV. HELP LINE** [844-251-1880] or **halifaxhealth.ethicspoint.com**

	1. 4 / 61	Number of Help Line calls received during month/past 12 months
	2. 3 / 41	Of calls in 1, how many related to Human Resource issues
	3. 0	Number of open Help Line calls rated as High Priority as of 7/31/2017
	4. 0	Number of open Help Line calls rated as High Priority as of 8/31/2017
	5. 7	Number of Help Line calls closed since last month

**V. COMPLIANCE ISSUES**

	1. 29	Number of issues open as of 7/31/2017
	2. 11	Of the issues in item 1, ___ remain open as of 8/31/2017
	3. 18	Number of issues from item 1 closed as of 8/31/2017
	4. 62%	Percent of open issues from item 1 closed (On Target at 25% or Greater)

**VI. COMPLIANCE POLICIES** – Halifax Health’s Compliance Program involves the development, implementation and monitoring of policies to ensure the organization conducts business compliant with applicable statutes, rules and regulations. During the period:

	1. 2	Number of Compliance Policies reviewed/ updated in the last month (On Target at 1)
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**VII. BILLING AND CODING REVIEWS** - Halifax Health will conduct reviews as part of scheduled audits or to investigate concerns brought to the attention of the Compliance Committee or the Compliance Officer.

	1. 2	Number of concerns related to billing/coding received during the month
	2. 2	Number of concerns from #1 that required a billing/ coding review
	3. 2	Number of reviews from #1 still being investigated
	4. 0	Number of reviews from #1 closed or pending Committee review
	5. 2	Number of reviews from #1 expected to require repayment/processing of claims

<sup>1</sup> Code of Conduct Attestation – employees and vendors who meet the definition of a *Covered Person* and new Board Members.

<sup>2</sup> CIA Required Training – employees (except for housekeeping, maintenance and foodservice employees), Medical Staff who are party to a *Focus Arrangement* and vendors who meet the definition of a *Covered Person* and new Board Members.

<sup>3</sup> Sanction Check for Covered Persons - employees, Medical Staff and vendors who meet the definition of a *Covered Person*.



# HALIFAX HEALTH

To: Audit and Finance Committee and Board of Commissioners  
Cc: Jeff Feasel, Chief Executive Officer  
From: Shelly Shiflet, Vice President and Chief Compliance Officer  
Date: October 23, 2017  
Re: Compliance Dashboard Report for the month ended September 30, 2017

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Enclosed is the Compliance Program Dashboard Report for September 2017.

Feel free to contact the Board's Compliance Expert, Robert Wade, Esq., or me regarding any questions on this report.

Mr. Wade can be reached at: [rwade@kdlegal.com](mailto:rwade@kdlegal.com)  
Office: 574.485.2002

I can be reached at: [shelly.shiflet@halifax.org](mailto:shelly.shiflet@halifax.org)  
Office: 386.425.4970

**Recommended Action:** None. Information only.

**Halifax Health**  
**Corporate Compliance Program**  
**Board Report – 9/30/2017**

**ON TARGET**

**ALERT**

**I. EMPLOYEE AND BOARD EDUCATION** – Halifax Health’s compliance program and Corporate Integrity Agreement requires most employees to acknowledge the Code of Conduct within 30 days of hire. Employees who are considered “Covered Persons” are required to complete 1 hour of general compliance training within 30 days of hire and annually thereafter. Managers and others who are considered “Arrangements Covered Persons” must complete an additional hour of general education and 2 hours of arrangements training within 30 days of becoming an “Arrangements Covered Person,” and annually thereafter. Members of the Board are required to complete 6 hours (2 hours general, 2 hours arrangements, and 2 hours governance) of training within 30 days of becoming a member. The following is the status of education for Halifax Health’s employees:

	➤	<b>Code of Conduct Attestation<sup>1</sup></b>
	1. 4,280	Number of Covered Persons and Board Members required to complete as of end of period
	2. 100%	% of Covered Persons who have completed (On Target at 100%)

	➤	<b>CIA Required Training<sup>2</sup></b>
	1. 4,130	Number of Covered Persons and Board Members required to complete as of end of period
	2. 100%	% of Covered Persons who have completed (On Target at 100%)

**II. SANCTION CHECKS** - Halifax Health’s Corporate Integrity Agreement requires all “Covered Persons” be screened for exclusions from participation in federal programs monthly. During the period:

	➤	<b>Sanction Check for Covered Persons<sup>3</sup></b>
	1. 5,038	Number of Covered Persons as of the end of the period
	2. 100%	% of Covered Persons above who had no sanctions, based on monthly sanction check results (On Target at 100%)

**III. COMPLIANCE COMMITTEE** – Halifax Health has a Compliance Committee responsible for regulatory compliance matters, which meets monthly. Members of senior leadership across service lines as well as representatives from Hospice and the Medical Staff are represented. During the period:

	1. 14	Number of members on <i>Compliance Committee</i>
	2. 78.6%	% of members who attended the meeting (On Target at 70% or Greater) – meeting date 8/30/17
	3. 3	Number of meetings in the last quarter (On Target if 2 or more)

**IV. HELP LINE** [844-251-1880] or **halifaxhealth.ethicspoint.com**

	1. 5 / 66	Number of Help Line calls received during month/past 12 months
	2. 3 / 44	Of calls in 1, how many related to Human Resource issues
	3. 0	Number of open Help Line calls rated as High Priority as of 8/31/2017
	4. 0	Number of open Help Line calls rated as High Priority as of 9/30/2017
	5. 1	Number of Help Line calls closed since last month

**V. COMPLIANCE ISSUES**

	1. 25	Number of issues open as of 8/31/2017
	2. 14	Of the issues in item 1, __ remain open as of 9/30/2017
	3. 11	Number of issues from item 1 closed as of 9/30/2017
	4. 44%	Percent of open issues from item 1 closed (On Target at 25% or Greater)

**VI. COMPLIANCE POLICIES** – Halifax Health’s Compliance Program involves the development, implementation and monitoring of policies to ensure the organization conducts business compliant with applicable statutes, rules and regulations. During the period:

	1. 1	Number of Compliance Policies reviewed/ updated in the last month (On Target at 1)
--	------	--

**VII. BILLING AND CODING REVIEWS** - Halifax Health will conduct reviews as part of scheduled audits or to investigate concerns brought to the attention of the Compliance Committee or the Compliance Officer.

	1. 1	Number of concerns related to billing/coding received during the month
	2. 1	Number of concerns from #1 that required a billing/ coding review
	3. 1	Number of reviews from #1 still being investigated
	4. 0	Number of reviews from #1 closed or pending Committee review
	5. 1	Number of reviews from #1 expected to require repayment/processing of claims

<sup>1</sup> Code of Conduct Attestation – employees and vendors who meet the definition of a *Covered Person* and new Board Members.

<sup>2</sup> CIA Required Training – employees (except for housekeeping, maintenance and foodservice employees), Medical Staff who are party to a *Focus Arrangement* and vendors who meet the definition of a *Covered Person* and new Board Members.

<sup>3</sup> Sanction Check for Covered Persons - employees, Medical Staff and vendors who meet the definition of a *Covered Person*.

## 2018 Halifax Health Board of Commissioners & Committee Meeting Schedule

All meetings held at 4:00 p.m. (unless otherwise specified) at Halifax Health Medical Center  
France Tower Conf. Room A, 303 No. Clyde Morris Boulevard, Daytona Beach, FL

Halifax Health & District Website

halifaxhealth.org

halifaxhealthdistrict.org

Month	Investment Committee	Audit Committee	Finance Committee	Orientation/Education & Closed Strategic Planning	Board of Commissioners
January		1/3/18	1/3/18		1/8/18
February	2/12/18		2/28/18	2/5/18	
March					3/5/18
April				4/2/18	
May	5/14/18	5/2/18	5/2/18		5/7/18
June			6/27/18	6/4/18	
July					7/9/18
August	8/13/18	8/29/18	8/29/18	8/6/18	TBD - Budget Workshop
September					9/4/18
					TBD - First Public Hearing
					TBD - Final Public Hearing
October		10/31/18	10/31/18	10/1/18	
November	11/12/18				11/5/18
December				12/3/18	



**Halifax Health Board of Commissioners' Meeting**  
**AUXILIARY REPORT**  
**For**  
**September 2017**

**Volunteer Hours:** From October 1, 2016 to September 30, 2017, the Halifax Health Auxiliary donated **65,807** volunteer hours.

**Induction of 2018 Auxiliary Officers:** On Saturday, September 23<sup>rd</sup>, the Annual Installation of new Auxiliary Officers took place at the Palmetto Club. The following members of the Auxiliary were introduced and inducted by Jeff Feasel, President and CEO:

President- Liz Dusz  
1st Vice-Daphne Sapp  
2nd Vice-Connie St. Denny  
Treasurer-Joan Chase  
Assistant Treasurer-Cynthia Rose  
Recording Secretary-John Smith  
Corresponding Secretary-Tami Collins

Over 90 members of the Auxiliary as well as the Halifax Health Leadership Team were in attendance. W.G. Watts was appointed to the Manager of Auxiliary Services for Halifax Health and has helped to ensure a smooth transition for President elect, Liz Dusz.

The auxiliary also presented a check to Joe Petrock, Executive Director of the Foundation, in the amount of **\$101,010**.

During Volunteer Week, over 120 volunteers enjoyed an afternoon on the Halifax River dining on the River Cruise.

**Volunteer Recruitment & Training:** From March thru September, **96** new volunteers have been recruited and oriented.

Additionally, WG Watts and ten additional members of the auxiliary represented Halifax Health by attending the annual AFHAV Conference which was held in Ocala. The conference was held October 19<sup>th</sup>, 20<sup>th</sup> and 21<sup>st</sup> in Ocala.

**Therapy Dogs:** 24 Therapy Dog teams are busy and meeting the emotional needs of patients, staff, and visitors. 2018 Therapy Dog calendar are currently on sale. Therapy Dog teams continue to participate in community and hospital events and are a very positive part of the Halifax Health Auxiliary!

**Gift Shop:** Gift Shop sales are holding steady with sales in the amount of \$60,000, First Uniform sales \$20,000, and auxiliary sponsored vending machines, \$30,000. Gift Shop Manager Paul Thompson along with WG Watts assisted with the design of the future Gift Shop at the Halifax Health Deltona.

**Auxiliary Software:** The new Auxiliary Volunteer management software has been purchased, installed, and is now in use. Organization wide communications have been significantly improved with the ability to push messages to touchscreens, as well as easy mail merges for U.S. mail correspondence.

**Courtesy Carts** The new Polaris GEM models golf carts are fully functional and have received wonderful feedback from patients as well as volunteers.

**Stitch N Knit** The Stitch N Knit Auxiliary team continues to produce stuffed animal toys, prop pillows, nursing pillows, baby booties/mitts/hats, car seat pillows, burp pads, lap robes, ADL Busy Buddy activity pillows, oncology patient neck pillows and padded seatbelt covers for indwelling IV patients. Over 15,000 pieces were distributed over the past six months – each with a tag that says, “Made with Tender Loving Care –Halifax Auxiliary”

Sincerely,

W.G. Watts, Manager  
Halifax Health Auxiliary, Inc.



# HALIFAX HEALTH

TO: Jeff Feasel, President/CEO  
FROM: Joe Petrock, Executive Director, Foundation  
DATE: October 23, 2017  
RE: Halifax Health Foundation and Associates Boards' Semi-Annual Report  
March, 2017 – October, 2017

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The Foundation and Associates Boards consist of a combined 110 community leaders who financially assist and support the Foundation and Halifax Health. Through special events and the generosity of our donors, the Foundation has raised over \$930K year-to-date. Currently we have net assets of over \$42M. Since 1998, the Foundation has funded over \$13 million for the needs of the medical center including the purchase of state of the art technology/equipment and providing medical education for the staff.

The Foundation and Associates Boards welcomed the following speakers at our bimonthly meetings:

- February, 2017: Dr. Robert Feezor – Vascular Surgery and Endovascular Therapy  
UF Health – Halifax Health UF
- April, 2017: Dr. Lars Nelson, Bariatric Surgeon – Bariatric services offered at Halifax Health
- June, 2017: Emergency Department and Trauma Center tour
- August, 2017: Amanda Conn, Halifax Health Comprehensive Stroke Center

## **FOUNDATION FUND RAISING PROJECTS**

In an effort to increase its opportunity to raise funds and support Halifax Health, Halifax Health - Foundation, partners with numerous organization in the Volusia/Flagler County area. These partnerships are wonderful opportunities to help market Halifax Health, educate the community on the high quality of care Halifax provides, and promote the quality of our medical staff. Fundraising activities include:

**Employee Giving Campaign:** During the previous fiscal year, team members gave over \$50K

**March 24<sup>th</sup>: Mayor Derek Henry Daytona Beach Open Golf Tournament**

**March 25<sup>th</sup>: Halifax Health Tomoka Marathon**

The marathon, half marathon, and 5K Walk benefited Halifax Health Regional Oncology Program and Breast Cancer Treatment.

**May 6<sup>th</sup> and August 19<sup>th</sup>: Hero's Challenge**

A partnership between Halifax Health – Foundation and Elite Spine and Dr. Rachel Nakayama. This Fitness competitions involving firemen, policemen, and veterans raises money to benefit our Trauma Programs.

**May 13<sup>th</sup>: MayDay Memorial Surf Classic**

This annual national surfing classic, presented by Haley Watson in memory of her mother, benefits healthy heart care.

**May 13<sup>th</sup>: Peach Valley Appreciation Brunch**

Sponsored by Gale Lemerand, donors and Halifax Health team members were treated to brunch at Peach Valley Restaurant in Port Orange.

**May 21<sup>st</sup>: Howard Frank Memorial Deep Stack Charity Poker Tournament**

This celebrity poker tournament held at the Daytona Beach Kennel Club with proceeds benefiting Women and Children Health Initiatives at Halifax Health.

**June 2<sup>nd</sup>: Bahama Casual Event**

This year's event raised \$140K for our Foundation. The grand prize was a 2017 Chevrolet Camaro.

**August 26<sup>th</sup>: The Vince Carter Charity Gala**

A partnership between Halifax Health – Foundation and Embassy of Hope Foundation

**October 6<sup>th</sup> – 8<sup>th</sup>: Daytona Blues Festival**

An event organized by Dr. Pam Carbiener and her husband, Frank, benefiting Halifax Health's NICU

**October 19<sup>th</sup> & 20<sup>th</sup>: 44<sup>th</sup> Annual Daytona International Speedway Pro-Am Golf Classic**

This year's event raised more than \$230K and over \$3.4M since 2004.

**Upcoming events/partnerships benefitting Halifax Health Foundation**

- November, 2017:  
Online donation capabilities and the launch of Giving Tuesday National Initiative (the Tuesday before Thanksgiving)  
Angel Pin – patient/patient's family recognition of an "Angel" (team member) who has provided exceptional care
- December, 2017: Molto Bella Boutique shopping spree
- December, 2018: Sheriff Mike Chitwood Gala  
A fundraising gala will be held in early December with 50% of the proceeds benefiting our Trauma Program.



HALIFAX HEALTH

## Human Resources Executive Summary - August 2017



HALIFAX HEALTH

Recruitment				Turnover			
^Vacancy Rate		3.11%	New Hires	94	*Annualized Turnover Rate		19.47%
Number of Applications		2,380	FT	73	*Annualized RN Turnover Rate		13.91%
Average Days to Fill		38.7	PT	2	Terminated/Resigned		77
RNs		33.6	Casual Pool	19	Average Number of Employees		4,340
Allied Health		42.1	Core RNs	29	Average Number of FT /PT Employees		3,698
Employee Relations				Retention			
Employee of the Month:				Average Tenure of Active Employees		7.67	
Service Awards				Active Employees			
5 Year		11	Average Tenure 0 - 1 yr		31.22%		
10 Year		5	Average Tenure 2 - 5 yr		27.19%		
15 Year		2	Average Tenure 6 - 10 yr		11.27%		
20 Year		5	Average Tenure > 10 yr		30.32%		
25 Year		7					
30 Year		1	Seperations				
35 Year		-	Average Tenure 0 - 1 yr		58.44%		
40 Year			Average Tenure 2 - 5 yr		29.87%		
			Average Tenure 6 - 10 yr		3.90%		
			Average Tenure > 10 yr		7.79%		
*Organizational & Talent Development				Compensation			
**Inservice & Continuing Education			Total Evaluations Due	345	Includes 6 Month and Annual Performance Evals		
Number of Programs		1,187	Early/OnTime Evaluations	101			
Participants		11,843	Late Evaluations	98			
Instructions Hours		10,952	Outstanding Evaluations	146			
*Computer Based Learning		3,093	Avg Score	3.22			
			Avg Hourly Rate	\$ 25.54			
			RN Referral Bonuses Paid	\$ 6,000.00			
			At Max/Bonus Paid				
			Tuition Reimbursements	9@ \$4,945.080			
*Continuing Phycsician Education			Sign On/Relocation Bonuses	\$ 10,000.00			
Number of Programs		18	Nursing Loan Forgivness	5@ \$6,808.97			
Participants		351					
				Work / Life Benefits & Leave Programs			
*Continuing Clinical Education			Total Employees on Leave	75	Number of Benefits Eligible		3,720
Number of Programs		41	Worker's Compensation Claims	2	Number of 457 Plan Participants		53
Participants		609	Leave of Absence Requests	20	Number of 403(b) PlanParticipants		3,703
			Family Medical Leave Act Requests	50	1%-3% Contributions		2,799
*Medical Library			Military Leave Requests	1	4% or Higher Contributions		904
Patrons		312	Voluntary Summer Leave	2	* UNUM Wellness Claims Paid		29@ \$1950
Article Sources		206	Number of Retirements	7	Disability Claims Paid		
			Worker's Compensation Incidents	23	STD		8@ \$4,945.08
			Administrative Leave	0	LTD		
					Management		
Auxiliary				Visitor Access			
Volunteer Hours		5,422	Total Visitors	38,086			
			Halifax Main Campus	34,841			
			HHPO	1,951			
			HBS	1,294			

\*\*Based on statistics reported by Date

^Vacancy Rate =  $\frac{\text{Open Positions}}{\text{Entire House}}$ \*Turnover Rate =  $\frac{\text{FT \& PT Seperations}}{\text{Average FT \& PT Employees}}$



HALIFAX HEALTH

## Human Resources Executive Summary - September 2017



HALIFAX HEALTH

Recruitment				Turnover				
^Vacancy Rate		3.70%	New Hires		59	*Annualized Turnover Rate		21.14%
Number of Applications		1,526	FT		45	*Annualized RN Turnover Rate		19.62%
Average Days to Fill		38.9	PT		1	Terminated/Resigned		76
RNs		35.2	Casual Pool		13	Average Number of Employees		4,314
Allied Health		42.3	Core RNs		11	Average Number of FT /PT Employees		3,687
Employee Relations				Retention				
Employee of the Month:				Average Tenure of Active Employees		7.72		
Service Awards				Active Employees				
5 Year		14	Average Tenure 0 - 1 yr		30.74%			
10 Year		4	Average Tenure 2 - 5 yr		27.58%			
15 Year		15	Average Tenure 6 - 10 yr		11.24%			
20 Year		10	Average Tenure > 10 yr		30.44%			
25 Year		2	Seperations					
30 Year		3	Average Tenure 0 - 1 yr		51.32%			
35 Year		-	Average Tenure 2 - 5 yr		32.89%			
40 Year		-	Average Tenure 6 - 10 yr		3.95%			
			Average Tenure > 10 yr		11.84%			
*Organizational & Talent Development			Compensation					
**Inservice & Continuing Education			Total Evaluations Due		324	Includes 6 Month and Annual Performance Evals		
Number of Programs		1,257	Early/OnTime Evaluations		87			
Participants		12,588	Late Evaluations		108			
Instructions Hours		6,117	Outstanding Evaluations		129			
*Computer Based Learning		2,464	Avg Score		3.24			
			Avg Hourly Rate		\$ 25.60			
*Continuing Physician Education			RN Referral Bonuses Paid		\$ 6,000.00			
Number of Programs			At Max/Bonus Paid					
Participants			Tuition Reimbursements		356.19			
			Sign On/Relocation Bonuses		\$ 10,000.00			
*Continuing Clinical Education		18	Nursing Loan Forgivness		\$ 20,450.53			
Number of Programs		281						
Participants			Work / Life Benefits & Leave Programs					
*Medical Library		46	Total Employees on Leave		75	Number of Benefits Eligible		3,675
Patrons		226	Worker's Compensation Claims		2	Number of 457 Plan Participants		50
Article Sources			Leave of Absence Requests		18	Number of 403(b) PlanParticipants		3,712
			Family Medical Leave Act Requests		52	1%-3% Contributions		2,819
		204	Military Leave Requests		1	4% or Higher Contributions		893
		93	Voluntary Summer Leave		2	* UNUM Wellness Claims Paid		
			Number of Retirements		3	Disability Claims Paid		\$1,500
			Worker's Compensation Incidents		29	STD		8@\$13,080.65
			Administrative Leave		0	LTD		\$ -
						Management		\$ -
Auxiliary			Visitor Access					
Volunteer Hours		4,248	Total Visitors		30,943			
			Halifax Main Campus		28,186			
			HHPO		1,770			
			HBS		987			

# BIKETOBERFEST 2017 – STATISTICAL SNAPSHOT

*These data are made possible by all the Team Members with the Halifax Trauma Registry Office*



## General Statistics throughout Four (4) Day Event

	2013	2014	2015	2016	2017
Total 4-Day Trauma Admissions	40	36	45	39	41
Total Team Activations					20
Level 1 Activations	16	14	18	11	*
Level 2 Activations	0	0	0	0	*
Total Biktoberfest-Related Admissions	15	11	29	12	15
Total Biktoberfest-Related Team Activations	7	3	15	5	13
Biktoberfest Level 1 Activations	7	3	15	5	4
Biktoberfest Level 2 Activations	0	0	0	0	9

## Biktoberfest-Related Trauma Admission Statistics

	2013	2014	2015	2016	2017
Biktoberfest Related Admissions	15	11	29	12	15
Motorcycle Crash Admissions	14	10	27	10	15
Scooter, motorized	0	0	0	0	0
Motorcycle Driver (Passenger)	10 (4)	8 (2)	22 (5)	10 (0)	13 (2)
Helmet Usage	6 (40%)	6 (29%)	8 (28%)	1	5
Non-motorcycle related Injuries	1	1	2	2	0
Patients with Head Injuries	13	4	10	1	1
Average Age (median)	54 (55)	46 (44)	54 (55)	44 (44)	56 (55)
Gender	♂ 11 (73%) ♀ 4 (27%)	♂ 7 (64%) ♀ 4 (36%)	♂ 22 (76%) ♀ 7 (24%)	♂ 11 (92%) ♀ 1 (8%)	♂ 12 (80%) ♀ 3 (20%)
To O.R. from ED	0	2	2	5	2
To ICU from ED	9	4	12	1	4
To Floor from ED	5	5	13	6	6
To Home from ED (AMA)	0	0	1 (1)	0 (0)	2 (0)
Transfers In (out)	3 (0)	0 (0)	2 (0)	0 (0)	0 (0)
Arrived by Ambulance	13	11	26	8	15
Arrived by Helicopter	2	0	3	2	0
Arrived by Private Vehicle	0	0	0	2	0
In-hospital Deaths (wearing helmets)	5 (2)	0	1 (1)	N/A*	0
Hospital Length of Stay, Average (median)	5 (3)	5 (4)	6 (3)	2*	*
~ ICU LOS, Average (median)	4 (2)	5 (4)	4 (4)	2(1)	*
~ Ventilator Days, Average (median)	4 (3)	1 (1)	3 (2)	N/A*	*
Dead on Arrival (DOA)	0	0	0	0	1
Volusia Co Residence	4 (27%)	2 (18%)	6 (21%)	5 (42%)	4
Outside Volusia Co Residence	11 (73%)	9 (82%)	23 (79%)	7 (58%)	11
Outside Florida Residence	5 (33%)	5 (45%)	7 (24%)	1 (9%)	0

**\*Preliminary data\* The Hospital, Vent, and ICU Days can only be calculated on those patients that have already been discharged.**

### Definitions:

**Trauma Alert:** A severely injured patient identified as a *Trauma Alert* per Florida Administrative Code 64J - Trauma Triage Criteria & Methodology.

**Level 1 Activation:** A Full activation of the Trauma *team* for the most critically, unstable, injured patient requiring the immediate response of practitioner resources available upon the patients arrival.

**Level 2 Activation:** A tiered response of Trauma team members/resources called by the ED physician based on the EMS field report or initial triage of the self-presenting patient.

Halifax Health Foundation  
Meeting Minutes  
October 11, 2017

Meeting Called: 7:55 a.m.

Meeting Adjourned: 9:08

Halifax Foundation Attendees:

Larry Bartlett	Paul Joachimczyk	Dr. Michele Carter- Scott
Mary Bennett	John Lindsley	Budd Severino
Ronnie Bledsoe	Aubrey Long	Edith Shelley
Denise Breneman	Margaret Lyon	Jill Stephens
Jeffery Brock	Rick Martorano	Bobby Thigpen
Eleanor Callon	George Mirabal	Lisa Tyler
Doug Daniels	Frank Molnar	Larry Volenec
Joe Disanti	Steve Nameth	Dr. Deanna Wathington
Ray Donadio	Bill Olivari	W.G. Watts
Jeff Feasel	Glenn Padgett	Dr. Alex White
Chuck Grant	Carl Persis	Patti Earl
Mary Greenlees	Joe Petrock	Kathryn Nagib
John Guthrie	Jennifer Quattrochi	New member: Alex Doberstein
Buck Harris	Rafael Ramirez	

The meeting was called to order at 7:55 a.m. by Halifax Health Foundation Executive Director, Mary Bennett.  
Quorum present.

1. TOPIC:  
Minutes  
DISCUSSION:  
Aubrey Long, Secretary  
Approval of August 9, 2017 Halifax Foundation Board minutes.  
ACTION/FOLLOWUP:  
Motion and second for approval of minutes. Motion carried.
2. TOPIC:  
New Board Member Introduction  
DISCUSSION:  
Alex Doberstein, Reames Employee Benefits Solutions, Inc.
3. TOPIC:  
Announcements  
DISCUSSION:  
Denise Breneman, Director of Special Olympics Florida-Volusia County announced an upcoming event, Samples by the Sea for Special Olympics at The Shores Resort and Spa.



4. TOPIC:  
Halifax Health- Foundation Service Award  
DISCUSSION:  
Joe Petrock, Executive Director of Halifax Health Foundation presented awards to John Lindsley and Mary Greenlees in recognition of their exemplary service to the Foundation.
5. TOPIC:  
Check Presentation  
DISCUSSION:  
Don and Stacey Stoner, Runner's High Timing and Race Management presented Halifax Health Foundation a check for \$7,000. Proceeds were raised from the Tomoka Marathon.
6. TOPIC:  
Halifax Health Foundation Board Approval  
DISCUSSION:  
Approval to update the Labor and Delivery Unit  
ACTION/FOLLOWUP:  
Motion and second for approval. Motion carried.
7. TOPIC:  
Halifax Health Foundation Board Members/2017-2018 Foundation Officers  
DISCUSSION:  
All Foundation Members renewed their terms and selected Foundation Officers  
ACTION/FOLLOWUP:  
Motion and second for approval. Motion carried.

**PRESENTATION:**

TOPIC:  
Alzheimer's Association and Possible Cure  
DISCUSSION:  
Dr. Alex White of Progressive Medical Research educated the board on the studies, services, and treatments for Alzheimer. Also, a representative from the Alzheimer's Association provided the board with information on services that are provided in Volusia County.

**REPORTS**

1. TOPIC:  
Halifax Foundation Treasurers Report  
DISCUSSION:  
Joe Petrock, Executive Director of the of Halifax Health Foundation  
Foundation Board received the statement of net assets ending August 2017- \$4 million.  
ACTION/FOLLOWUP:  
Motion and second to accept report as presented. Motion carried.

2. TOPIC:  
Auxiliary Report  
DISCUSSION:  
Liz Dusz, President of the Auxiliary presented to the Board that the courtesy carts have been purchased and are currently being used for patients/visitors. Also, the Auxiliary department had a total of 4,000 volunteer hours for the month of September. On October 11, 2017 the Auxiliary department held a meet and greet with the therapy dogs in the France Tower.
3. TOPIC:  
Foundation Update  
DISCUSSION:  
Joe Petrock, Foundation Executive Director presented the Foundation Update which included information on Daytona Blues Festival, October 2017, 44<sup>th</sup> Annual DIS Pro-Am October 19<sup>th</sup>-20<sup>th</sup>, Sheriff Gala TBD, and a partnership with Embassy of Hope. Embassy of Hope will be collecting donations for food baskets.
4. TOPIC:  
President's Report  
DISCUSSION:  
John Guthrie, Director of Corporate Communication updated and answered questions regarding all services provided by Halifax Health. Please see Management Report.

Next Foundation Board of Directors Meeting will be on January 10, 2018. The meeting will be held in France Tower Conference Rooms E & F.

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Aubrey Long, Halifax Foundation Secretary

**Volusia Health Network  
Board of Directors' Meeting Minutes  
August 8, 2017 – 8:00 am**

**Call to order**

Dr. Hemaidan called the Board of Directors' meeting to order at 8:02 a.m.

**Members Present**

Ammar Hemaidan, MD – David Turetsky, MD - Joseph Bianchi, MD - Walter Durkin, MD - Brent Fulton, MD – Debbie Marz

**Others Present**

Lane Jennings, MD – David Billmeier, MD - Bob Williams - Natasha Leverett - Carol Alvarado - Jean Carroll

**Approval of Minutes**

A motion was made and seconded to accept the minutes, as presented, from the March 7, 2017 meeting. The minutes were approved as presented.

**Medical Director's Report**

Dr. Jennings reported the following:

- Cologuard is a colon cancer screening test which identifies genetic mutations. VHN will formally approve this test. The criteria will be: 50 years of age and older, patient must be asymptomatic, no polyps, no personal or family history of colon cancer.

**Administrative Report**

Mr. Williams reported the following:

- Mr. Williams began his report by thanking the board members for giving of their time and their willingness to serve. Mr. Williams also thanked the VHN staff for all they do.
- **Outpatient Pharmacy** – Looking into bringing an outside pharmacy in to provide bedside, ER, etc. pharmacy services to patients. Walgreens and Publix are a couple of options.
- **Bundle Payment Project** - Sepsis bundle payment project is doing very well on the in-patient side, but not doing well on the out-patient side.
- **Post-Acute Care Practice** – Medical director for the post-acute care practice will begin November 1, 2017. Brooks Rehabilitation in Jacksonville is doing really well in post-acute care. The physicians in the Halifax Health/Brooks Center for Inpatient Rehabilitation have offered to partner with Halifax Health in establishing a post-acute practice skilled nursing facility.

**Community Clinic** – 2 FQHC facilities opened in April. Halifax Health is transitioning the community clinic patients to these clinics.

### **Operations Report**

Natasha Leverett reported the following:

- **Precert Stats** – Utilization management have reviewed 976 cases since January.
- **Client Report** – Our client sales revenue is down since VHN has had a reduction in the number of clients.
- **Claims** – Average claims turnaround time is 0 days.
- **Gym Membership** – Members are taking advantage of their gym membership.
- **Board Vacancies** – VHN will have 2 board vacancies to fill in December; 1 physician and 1 community leader.

### **Adjournment**

There being no further business, Dr. Hemaïdan adjourned the Board of Directors' meeting at 8:25 a.m.

Minutes submitted by: Jean E. Carroll

Minutes reviewed by: Natasha Leverett, Operations Coordinator

**Volusia Health Network  
Peer Review Minutes  
August 8, 2017**

**Call to order**

Dr. Hemaidan called the Peer Review meeting to order at 8:25 am.

**Approval of Minutes**

A motion was made to accept the minutes, as presented, from the March 7, 2017 meeting. The minutes were approved as presented.

**Discussion**

Sixty providers were presented to the board for a two-year reappointment to Volusia Health Network.

**Action**

A motion was made to accept all the providers presented, as recommended by the credentials committee. Upon a vote, the motion carried.

**Discussion**

Nine providers were presented to the board for initial appointment to Volusia Health Network.

**Action**

A motion was made to accept all the providers presented, as recommended by the credentials committee. Upon a vote, the motion carried.

**Adjournment**

There being no further business, the Peer Review meeting was adjourned at 8:26 am.

Minutes submitted by: Jean E. Carroll

Minutes reviewed by: Natasha Leverett, Operations Coordinator

## **DRAFT**

### **HALIFAX HEALTHY COMMUNITIES Board of Directors Quarterly Meeting Minutes France Tower – Conference Rm “F” October 18, 2017**

Members Present: Gwen Azama-Edwards, Vice-Chair   Absent: Bob Snyder  
Patricia Boswell   Ed Connor  
Jeff Davidson  
Jeff Feasel

Others Present: Deanna Schaeffer, Healthy Communities  
Alicia Watson, Healthy Communities  
Steve Parris, Healthy Communities  
Cher Philio, Healthy Communities

Vice-Chair Azama-Edwards opened the meeting with a moment of silence in honor of Mr. Donald Quinn's recent death. The meeting was called to order at 4:02 p.m. Welcome and Introductions ensued. The minutes of April 19, 2017 were approved as written.

#### **CHAIRMAN'S REPORT/COMMENT:**

##### **Board Appointment:**

Vice-Chair Azama-Edwards informed the Board that Mr. Feasel's term on the Healthy Communities Board is scheduled to end on December 31, 2017. Discussion ensued.

Mr. Feasel stated that he would like to serve an additional three-year term. Vice-Chair Azama-Edwards opened the floor for a motion.

*Motion: Mr. Jeff Davidson made a motion for the Board to approve Mr. Feasel for reappointment to the Healthy Communities Board to serve an additional three-year term through December 31, 2020; and, for staff to submit a recommendation request for re-appointment to the Halifax Health Board of Commissioners for consideration at its next meeting. Ms. Boswell seconded the motion.*

*Action: By consensus of the Board, the motion carries.*

##### **Board Vacancy:**

Sadly, Vice-Chair Azama-Edwards informed the Board that the unfortunate and unexpected death of Chairman Don Quinn leaves a vacant seat on the Healthy Communities Board. The current term is through October 31, 2018. However, the seat may be filled for a full three year term. She inquired as to whether members have anyone they would like to recommend to fill the Board vacancy. Discussion ensued.

There being no recommendations at this time, the Board was advised that recommendations, along with a brief bio for the individual(s), may be emailed to Alicia at a later date for Board consideration at a future meeting.

## **DRAFT**

### **Election of Officers:**

Vice-Chair Azama-Edwards informed the Board that the Election of Officers will take place at the next meeting. The positions are Chair, Vice-Chair, and Secretary.

### **PRESIDENT/CEO REPORT – Deanna Schaeffer:**

#### **Legislative Update**

At the federal level, Ms. Schaeffer informed the Board that the large pharmaceutical companies are continuing their efforts to further limit or end the 340B Drug Program. If they are successful, the outcome would have a negative impact on Halifax's Hospitals, the Florida Departments of Health as well as the Federally Qualified Health Centers as all are current beneficiaries of the program. She stated that congressional hearings are currently underway. Discussion ensued.

Mr. Davidson inquired as to whether Ms. Schaeffer advocates for all hospitals in her role. Ms. Schaeffer replied that she advocates in the best interest of Halifax as well as the two-county area as a whole.

Ms. Schaeffer reported that there are some Affordable Care Act (ACA) changes pending; however, specific information as to what those are is unavailable at this time.

Vice-Chair Azama-Edwards asked if the 340B Program has an end date. Ms. Schaeffer responded that it does not.

At the state level, Ms. Schaeffer informed the Board that the legislative session will begin in January 2018, but committee meetings are currently underway. Several bills have been filed to date. Another significant Medicaid payment reduction for hospitals is on the table. Low Income Pool (LIP) dollars were approved in the amount of \$1.5 billion; however, because the state will not fund the program, local taxes support the state share. Due to the limited amount of available local taxes for the intergovernmental transfers (IGTs), fully funding the program is not likely. Estimates are that hospitals may be able to fund about \$700 million for the current fiscal year. There is some discussion about utilizing the Public Medical Assistance Trust Fund (PMATF) Tax as a replacement funding source for local tax dollars. Discussion ensued.

Vice-Chair Azama-Edwards inquired as to an explanation of the PMATF tax. Ms. Schaeffer explained that it is a tax imposed on hospitals revenue. Discussion ensued.

### **HEALTHY COMMUNITIES UPDATES:**

#### **Healthy Start**

Ms. Philio reviewed the Healthy Start report *Screening Results for Service Delivery Area (Volusia & Flagler County Residents) FY 17/18 Qtr 1*. All except one Healthy Start screening and consent goal were met or exceeded. The Quarter 1 rates were as follows:

- The infant screening rate of 90.07% exceeded the goal of 84.00%;
- The prenatal screening rate of 80.01% exceeded the goal of 78.00%;
- The women consenting to the prenatal screen rate of 93.69% exceeded the goal of 90.00%; and,
- The eligible prenatal referrals consenting to participation at the time of the screen rate of 95.53% did not meet the goal of 96.00%.

Ms. Philio explained that the Prenatal Screening Rate is normally above 100% because the formula used to calculate the percentages is based on an estimate of prenatal women as opposed to the actual

## **DRAFT**

number of prenatal women. However, there appears to be an additional unknown factor in the September percentages as that month is significantly higher which has an effect on the overall percentage in Quarter 1. The unknown issue was present in the data of all counties in that month. Unfortunately, the way the number is calculated is beyond Ms. Philio's control and she's not aware of a way to identify the cause of the additional increase. Discussion ensued.

Ms. Boswell stated that she would discuss this issue with Vital Statistics staff at the health department to inquire if they can offer additional information in this regard. Ms. Philio will reach out to Mr. Snyder to inquire of his Vital Statistics staff as well.

Ms. Philio informed the Board that the Healthy Start Coalition of Flagler and Volusia has partnered with the Volusia County Health Department to utilize space at the facility to provide community access to prenatal care and family services for pregnant moms utilizing opioids. Discussion ensued.

Mr. Feasel stated that the intent for opening Women's Care Now in Ormond Beach was to fulfill the unmet need for community access to pregnant moms as well. He inquired as to the number of clients receiving services at the health department location. Ms. Boswell stated that she was not aware. Ms. Philio stated that she is unaware as to the number of clients receiving services at that location, but she will find out and get back to Mr. Feasel in that regard. However, she added that the partnership at the health department location is geared towards prenatal moms with an opioid addiction. Dr. Carbiener completed a specialized training to help her wean those pregnant moms off of the drug, which is how the partnership came about. Discussion ensued.

Mr. Feasel inquired as to the number of local pregnant moms receiving services out of county and the reason why. Ms. Philio stated that according to a prior study she completed some years ago, there were about 1,750 Volusia and Flagler county prenatal moms combined receiving prenatal care services outside of the two-county area. The primary reasons for out of area travel was their geographic location as well as the location of delivering hospital at which their obstetrician had privileges. Ms. Philio will research this topic further and report back. Discussion ensued.

### **Healthy Kids and KidCare Outreach/Enrollment – Steve Parris:**

Mr. Parris referenced the provided Florida KidCare Enrollment as follows:

- Medicaid (08/17) – Volusia 54,324; and, Flagler 9,524;
- MediKids (10/17) – Volusia 704; and, Flagler 142;
- Children's Medical Services (10/17) – Volusia 274; and, Flagler 48; and,
- Healthy Kids (10/17) – Volusia 4,244; and, Flagler 923.

Mr. Feasel stated that he would like to know the Medicaid enrollment by county and age. He requested that Mr. Parris add a trend line to the report that is representative of the prior year's numbers. He stated that this would be helpful information to have when trying to determine possible causes for the decline in Medicaid. Discussion ensued.

Additionally, Mr. Feasel inquired as to whether staff has the ability to track month to month enrollment numbers for Volusia County Schools as well as the uninsured pediatric utilization in the emergency department. Ms. Schaeffer responded yes. Mr. Parris will put something together in this regard.

Mr. Parris reviewed a list of Healthy Communities' most recent community involvement activities. He informed the Board that the West Volusia KidCare funding application for FY 2017-18, which covers costs associated with 1.5 FTE servicing West Volusia, was approved by the West Volusia Hospital Authority.



## **DRAFT**

Additionally, Mr. Parris informed the Board that the open enrollment period for the Health Care Marketplace will begin on November 1, 2017; however, it will be for a shorter period and will end on December 15, 2017 (Reference *KidCare/Marketplace Outreach Activities and Program Highlights*).

### **Safe Kids Outreach**

Mr. Parris reported the following Safe Kids program update:

#### **A. Child Passenger Safety Program**

- The monthly car seat check-up events at Halifax Medical Center on the 1<sup>st</sup> Wednesday of the month continue to be well attended.
- Healthy Communities held its first monthly car seat check-up event at the Halifax Health – Emergency Department of Deltona on June 22<sup>nd</sup>. The events will be held on the 4<sup>th</sup> Thursday of each month. Attendance was slow initially, but has begun to pick up in recent months. The next event will be October 26<sup>th</sup>.
- Healthy Communities continues to provide car seat checks/installations during the week at its office location. Referrals are coming from numerous sources including fire departments, police departments, and Healthy Start. During the summer months staff assisted numerous grandparents with the installation of car seats that were to be used for grandchildren who were visiting.
- A Child Passenger Safety Technician Certification training to certify more City of Palm Coast firefighters is scheduled for November 13 - 15.
- Additionally, a Child Passenger Safety Technician Recertification Course is scheduled for December 7<sup>th</sup>.
- The Halifax Foundation approved \$4,370 to assist with the purchasing of car seats to be made available to families within the community who are in need.

#### **B. 2017 and 2018 Safe Kids Swim Scholarship Program**

- 741 scholarships were provided for children during the 2017 program. An additional 16 children received lessons through the City of Daytona; however, they did not provide the required documentation for reimbursement thus they are not included in the final count.
- The Rotary Club of Daytona Beach, of which Vice-Chair Azama-Edwards is a member, provided a \$1,000 for the swim scholarship program.
- Healthy Communities also received \$400 from the Ormond Beach Kiwanis Club for the swim scholarship program.
- The Halifax Foundation approved \$8,000 for the Safe Kids Swim Scholarship Program. Further, the Halifax Foundation has opened the opportunity for Healthy Communities' Safe Kids program to be a benefactor of the upcoming City of Daytona Beach Mayor's Golf Tournament.
- The County Council has approved \$10,000 for the Safe Kids Swim Scholarship Program for 2018. This year Healthy Communities received \$8,179 from the County.
- The members of the Halifax Employee Community Service Fund also approved \$8,500 for the Safe Kids Swim Scholarship Program for 2018. Healthy Communities received \$7,500 from the Fund for 2017.

#### **C. Never Leave Your Child Alone - Kids In Hot Cars**

## **DRAFT**

- So far this year, 40 children have died after being left in hot cars. Six of these children lived in Florida.
- Mr. Parris had the opportunity to do two radio interviews, one for the Halifax “Live Your Life Well” show on Joy FM; and, the other on WDBO highlighting the issues of never leaving children in hot cars, water safety, and other summer safety issues.

Healthy Communities has added a Safe Kids Coalition of Volusia and Flagler Counties Facebook page. Find us and like us at [www.facebook.com/safekidsvf](http://www.facebook.com/safekidsvf).

Ms. Schaeffer informed the Board that there is currently a legislative bill proposed that would apply a penalty for leaving children in hot cars. Discussion ensued.

### **OTHER BUSINESS**

Ms. Boswell informed the Board that she would like to partner with the tourist industry to educate visitors and increase awareness of the top three causes of death locally—drowning, safe sleep, and trauma. Vice-Chair Azama-Edwards suggested that Ms. Boswell and Mr. Parris contact Mr. Bob Davis of the Lodging & Hospitality Association of Volusia County to inquire about ways to work together with them to increase awareness of the local initiatives.

Mr. Davidson reported that he serves on the Board of the Bonner Chiles Foundation. The foundation will be hosting its third annual golf event in April 2018. Event participation is open to the public and all proceeds will benefit the Chiles Academy. Additional information will be provided at a later time.

### **ADJOURNMENT**

There being no further business, the meeting of October 18, 2017 adjourned. The next meeting is scheduled for Wednesday, January 17, 2018 at 4:00 p.m., unless otherwise notified.





# HALIFAX HEALTH

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# Halifax Health

## Q3-FY2017 Quality Board Report (April 2017 – June 2017)



HALIFAX HEALTH

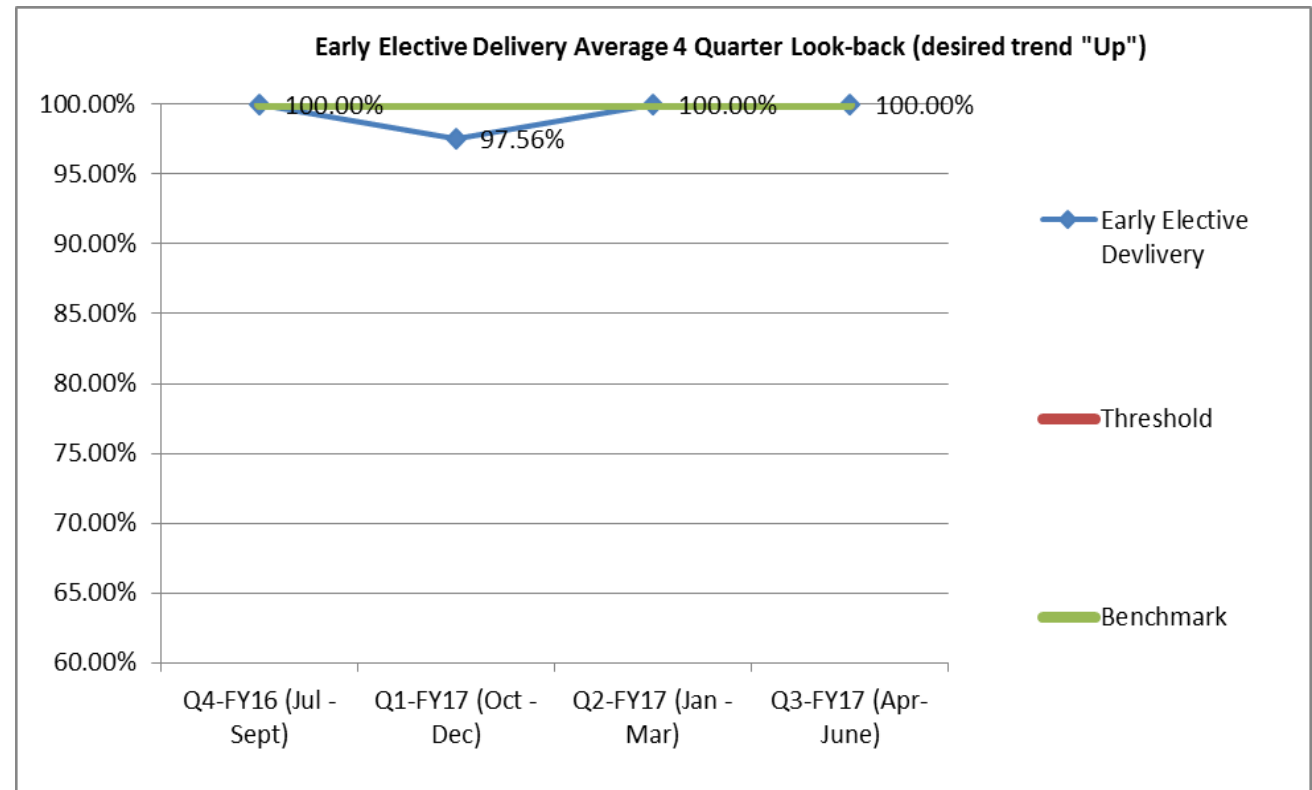
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# Core Measures

## (Early Elective Delivery between 37 and 39 weeks)

Early Elective Delivery	
FY 2016 Final Score	FY to date 2017 Score
100%	*99.08%

\*1 patient fallout  
October 2016



# Mortalities

## Halifax Reporting (Truven)

1. Only counts mortalities in-house
2. We measure all payer types
3. Any inpatient mortality will count

## CMS Reporting (Hospital Compare)

1. All mortalities 30 days out
2. Only Medicare patients
3. If a patient is enrolled in a hospice program they are excluded (or w/in the last 12 months)



# Inpatient Mortality (AMI, PN, CHF only)

<u>Mortality Measure Description</u>	FY 2016	FY 2017 YTD (Oct - June)	FY16 Truven Mean (Nat'l )
Acute Myocardial Infarction	● 5.91%	● 7.02%	7.19%
<i>Measure Failure Count</i>	14	12	
<i>Denominator Count</i>	237	171	
<i>Average Length of Stay</i>	3.4	3.7	
Congestive Heart Failure	● 2.17%	● 2.33%	2.52%
<i>Measure Failure Count</i>	8	7	
<i>Denominator Count</i>	369	300	
<i>Average Length of Stay</i>	4.4	5.0	
Pneumonia <b>(New Population in FY17)</b>	● 0.71%	● 2.68%	5.32%
<i>Measure Failure Count</i>	3	16	
<i>Denominator Count</i>	421	597	
<i>Average Length of Stay</i>	4.7	6.7	

New Pneumonia population FY16 rate      3.07%  
 (To include sepsis with secondary pneumonia)

# Inpatient Mortality Rates

<u>Mortalities Description</u>	FY 2016	FY 2017 YTD (Oct - June)	FY16 Truven Mean
COPD Qualified Mortality Rate	● 0.32%	● 0.32%	0.46%
<i>Measure Failure Count</i>	1	1	
<i>Denominator Count</i>	309	310	
<i>Average Length of Stay</i>	3.9	3.6	
CABG Qualified Mortality Rate	● 0.77%	● 1.82%	2.68%
<i>Measure Failure Count</i>	1	2	
<i>Denominator Count</i>	130	110	
<i>Average Length of Stay</i>	6.9	7.3	
Stroke Qualified Mortality Rate	● 5.10%	● 3.13%	5.54%
<i>Measure Failure Count</i>	20	9	
<i>Denominator Count</i>	392	288	
<i>Average Length of Stay</i>	5.1	6.3	

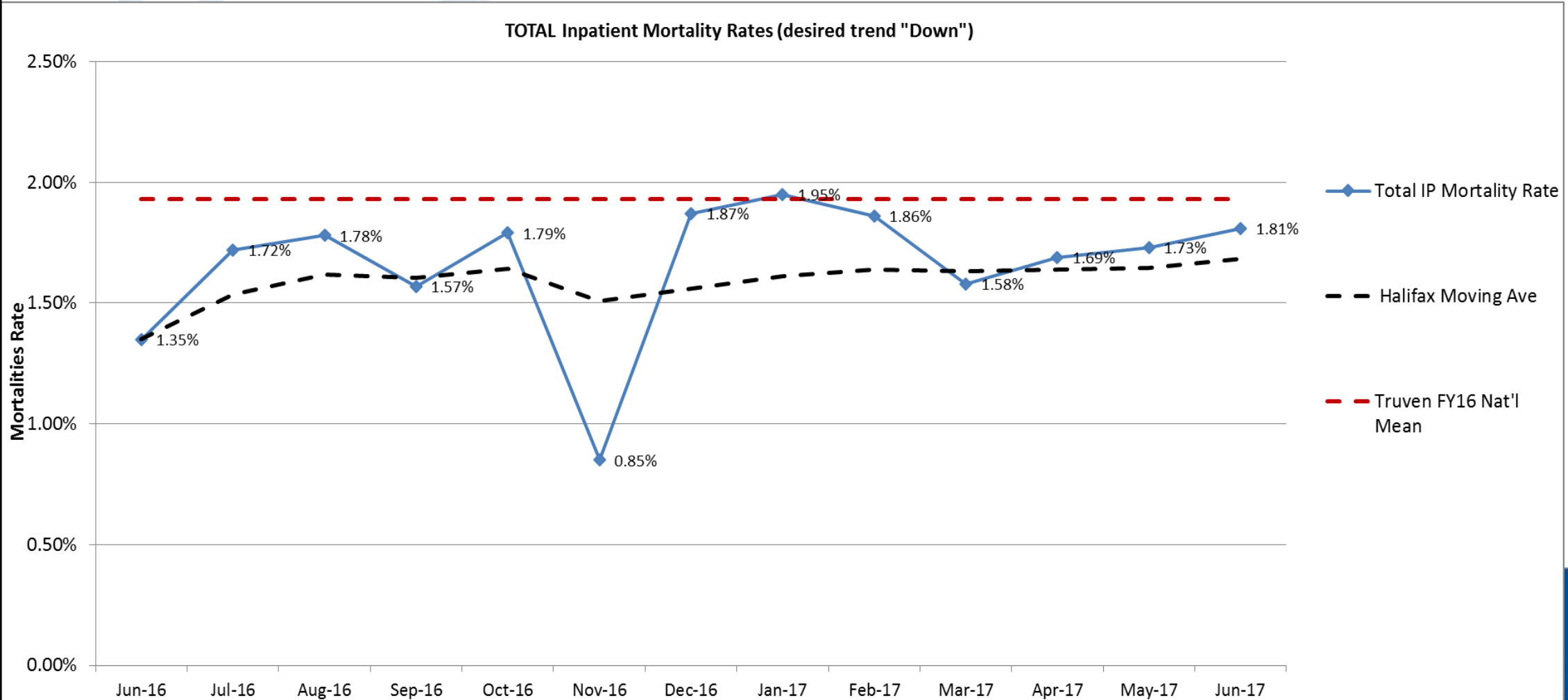
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# Inpatient Mortality (all mortalities)



# Readmissions

## Halifax Reporting (Truven)

1. Must be readmitted to Halifax
2. We measure all payer types
3. Does not count if index discharge was AMA
4. A readmission visit can qualify for another index admission

## CMS Reporting (Hospital Compare)

1. Can be readmitted to any facility
2. Only Medicare patients
3. Does not count if index discharge was AMA
4. A readmission visit cannot qualify as another index admission



# Readmissions (AMI, PN, CHF, COPD, CABG)

<u>Readmission Measure Description</u>	FY 2016	FY 2017 YTD (Oct - June)	FY2016 Truven Mean (Nat'l)
Acute Myocardial Infarction	● 9.55%	● 9.58%	10.86%
<i>Measure Failure Count</i>	21	16	
<i>Denominator Count</i>	220	167	
<i>AMI Average Length of Stay</i>	3.4	3.7	
Congestive Heart Failure	● 15.07%	● 13.96%	16.19%
<i>Measure Failure Count</i>	55	43	
<i>Denominator Count</i>	365	308	
<i>CHF Average Length of Stay</i>	4.4	5.0	
Pneumonia <b>(New Population in FY17)</b>	● 9.55%	● 12.42%	12.41%
<i>Measure Failure Count</i>	38	78	
<i>Denominator Count</i>	398	628	
<i>Pneumonia Average Length of Stay</i>	4.7	6.7	
Chronic Obstructive Pulmonary Disease	● 11.94%	● 12.42%	15.40%
<i>Measure Failure Count</i>	37	40	
<i>Denominator Count</i>	310	322	
<i>COPD Average Length of Stay</i>	3.9	3.6	

FY16 = 12.40% (with new population)



# Readmissions (CABG, Stroke, Hip/Knee only)

	FY 2016	FY 2017 YTD (Oct- June)	FY2016 Truven Mean (Nat'l)
<u>Readmission Measure Description</u>			
Knee Arthroplasty	● 0.83%	● 1.84%	3.27%
<i>Measure Failure Count</i>	4	7	
<i>Denominator Count</i>	483	380	
<i>Knee Arthroplasty Average Length of Stay</i>	3.1	2.5	
Hip Arthroplasty	● 5.52%	● 5.32%	3.71%
<i>Measure Failure Count</i>	26	21	
<i>Denominator Count</i>	471	395	
<i>Hip Arthroplasty Average Length of Stay</i>	3.4	3.5	
CABG	● 9.30%	● 8.26%	8.71%
<i>Measure Failure Count</i>	12	9	
<i>Denominator Count</i>	129	109	
<i>CABG Average Length of Stay</i>	6.9	7.3	
Stroke Readmissions	● 11.32%	● 10.47%	7.29%
<i>Measure Failure Count</i>	43	31	
<i>Denominator Count</i>	380	296	
<i>Stroke Average Length of Stay</i>	5.1	6.3	

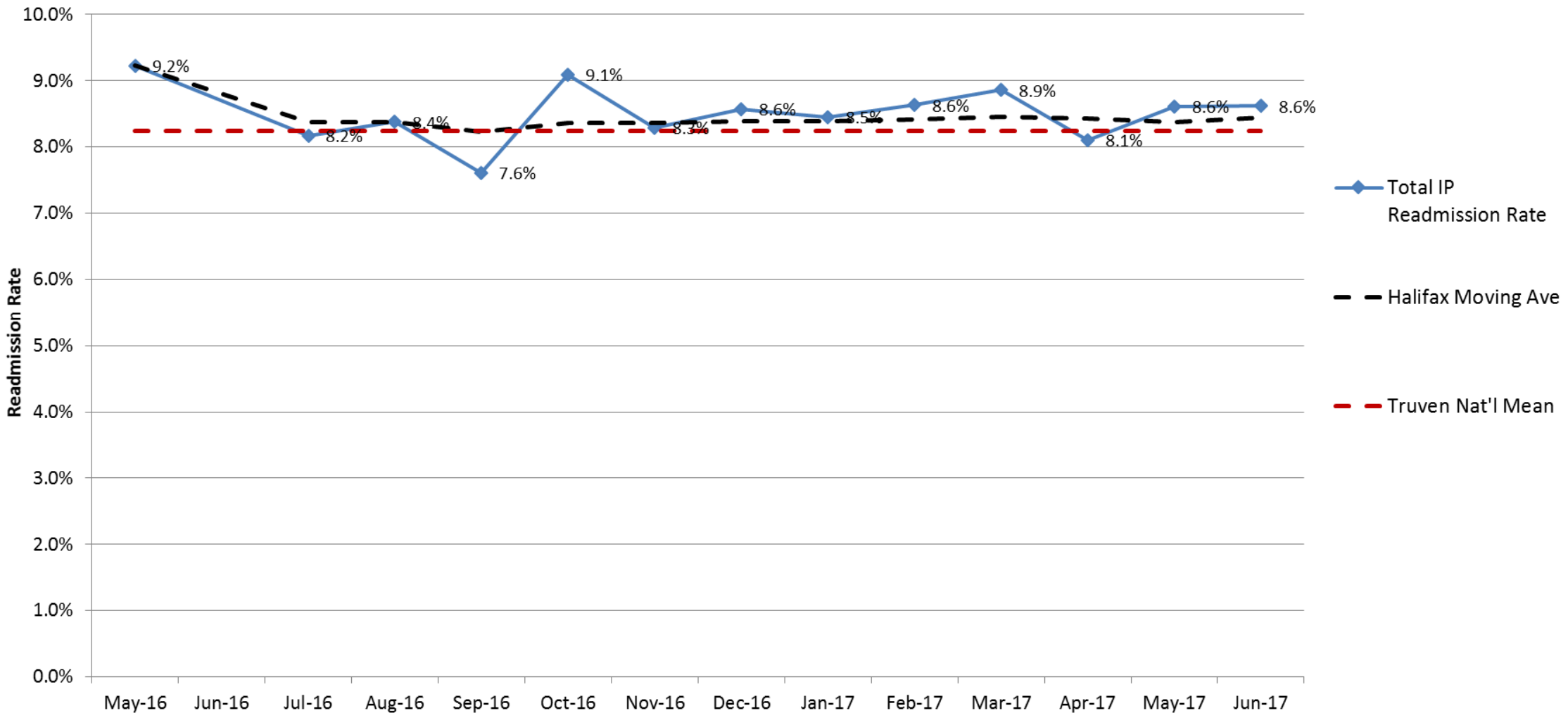
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# 30-Day Readmissions (all readmissions)

TOTAL Inpatient Readmission Rates (desired trend "Down")

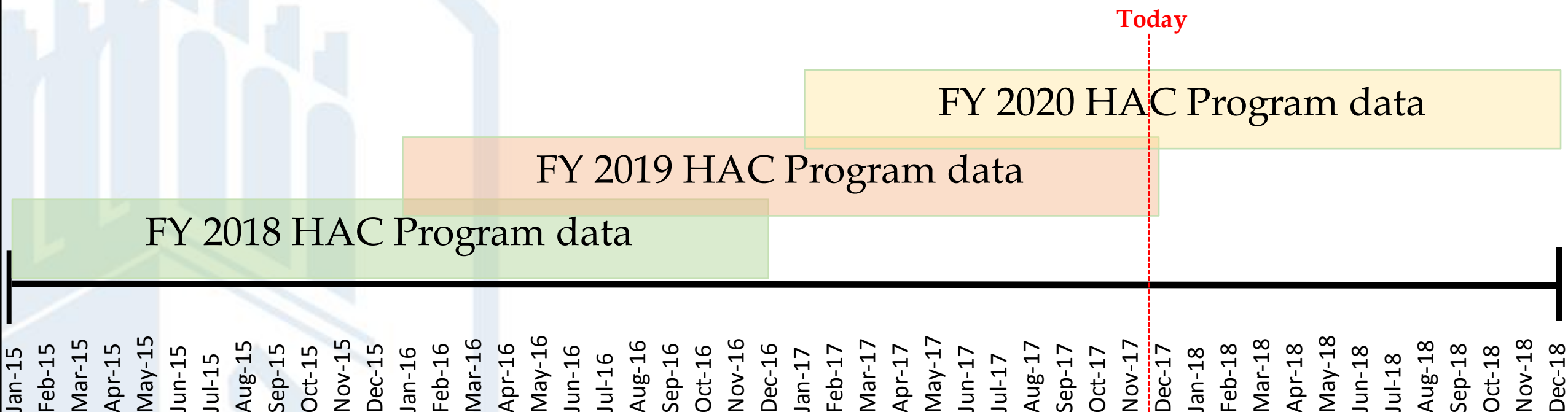


# FY18 HAC Program Review



# HAC Program Timeline

(January 2015 - December 2018)



# HAC Measures

- CAUTI
- CLABSI
- SSI
- MRSA
- C-diff

**85%**  
**weighting**

- PSI-90 (10 Adverse Event Indicators)

**15%**  
**weighting**



Formula:

Observed Infections /  
Expected Infections

# Opportunities

Performance Information	FY 2018 Halifax Score	FY 2018 National Score		Difference
CLABSI Expected number of infections decreased by 20	1.874	0.946		0.982
CAUTI Expected number of infections decreased by 21	1.661 - 21 infections	0.971		0.690
SSIs	1.093	0.948		0.145
MRSA	1.060	0.982		0.078
C-diff	0.520	0.959		0.439

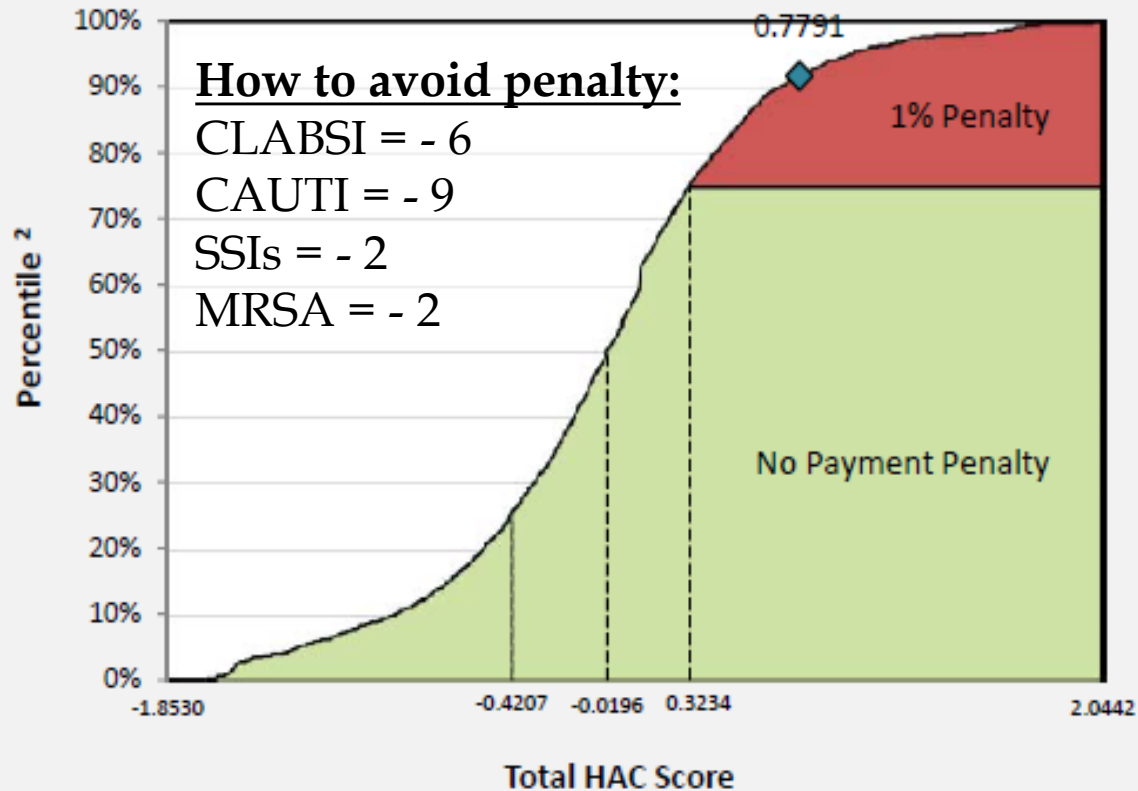
LOWER scores desired

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# Financial Impact

## Estimated Program Impact



### Hospital Revenue Exposure Estimate:

Estimated FFY 2018 Revenue	\$57,322,039
Revenue at Risk For Payment Reduction (1%)	\$573,200

### Total HAC Score Performance Summary:

Estimated Total HAC Score	0.7791
Lowest Total HAC Score Receiving Payment Penalty <sup>2</sup>	0.3234

### HAC Payment Penalty Determination:<sup>2</sup>

Hospital Estimated to be in the Top (worst) Quartile?	YES
Estimated HAC Program Payment Impact	(\$573,200)

Source: Florida Hospital Association "At Risk" HAC report – Sept 2017

# Catheter-Associated Urinary Tract Infections (CAUTI) (Standard Infection Ratio)

HAIs Measure Description <i>(SIR = observed infections / expected infections)</i>	FY 2015	FY 2016	FY 2017 YTD (Oct - June)	CMS VBP Benchmarks	
				Threshold (Based on <u>FY-2019</u> Indicators)	Benchmark (Based on <u>FY-2019</u> Indicators)
CAUTI (ICUs Only) SIR	🔴 1.37	🔴 0.95	🔴 1.19	0.82	0.00
Observed number of CAUTIs	57	36	22		
Expected number of CAUTIs	41.5	37.7	18.5		
CAUTI (All Units) SIR	🔴 1.46	🟡 0.819	🔴 1.48	0.82	0.00
Observed number of CAUTIs	88	49	48		
Expected number of CAUTIs	60.1	59.8	32.4		

Q3 Average Catheter day of event = **15.6 days**

15 of the 25 infections happened on catheter **day 10+**

# Central Line Associated Blood Stream Infections (CLABSI) (Standard Infection Ratio)

HAIs Measure Description (SIR = <i>observed infections / expected infections</i> )	FY 2015	FY 2016	FY 2017 YTD (Oct- June)	CMS VBP Benchmarks	
				Threshold (Based on FY- <u>2019</u> Indicators)	Benchmark (Based on <u>FY-2019</u> Indicators)
<b>CLABSI (ICUs Only) SIR</b>	🟡 0.85	🟡 0.60	🔴 1.04	0.86	0.00
Observed number of CLABSIs	23	14	10		
Expected number of CLABSIs	27.2	23.5	9.6		
<b>CLABSI (All Units) SIR</b>	🟡 0.82	🟡 0.721	🔴 1.43	0.860	0.00
Observed number of CLABSIs	35	24	21		
Expected number of CLABSIs	42.5	33.3	14.7		

Q3 Average line day of event = 15.8 days

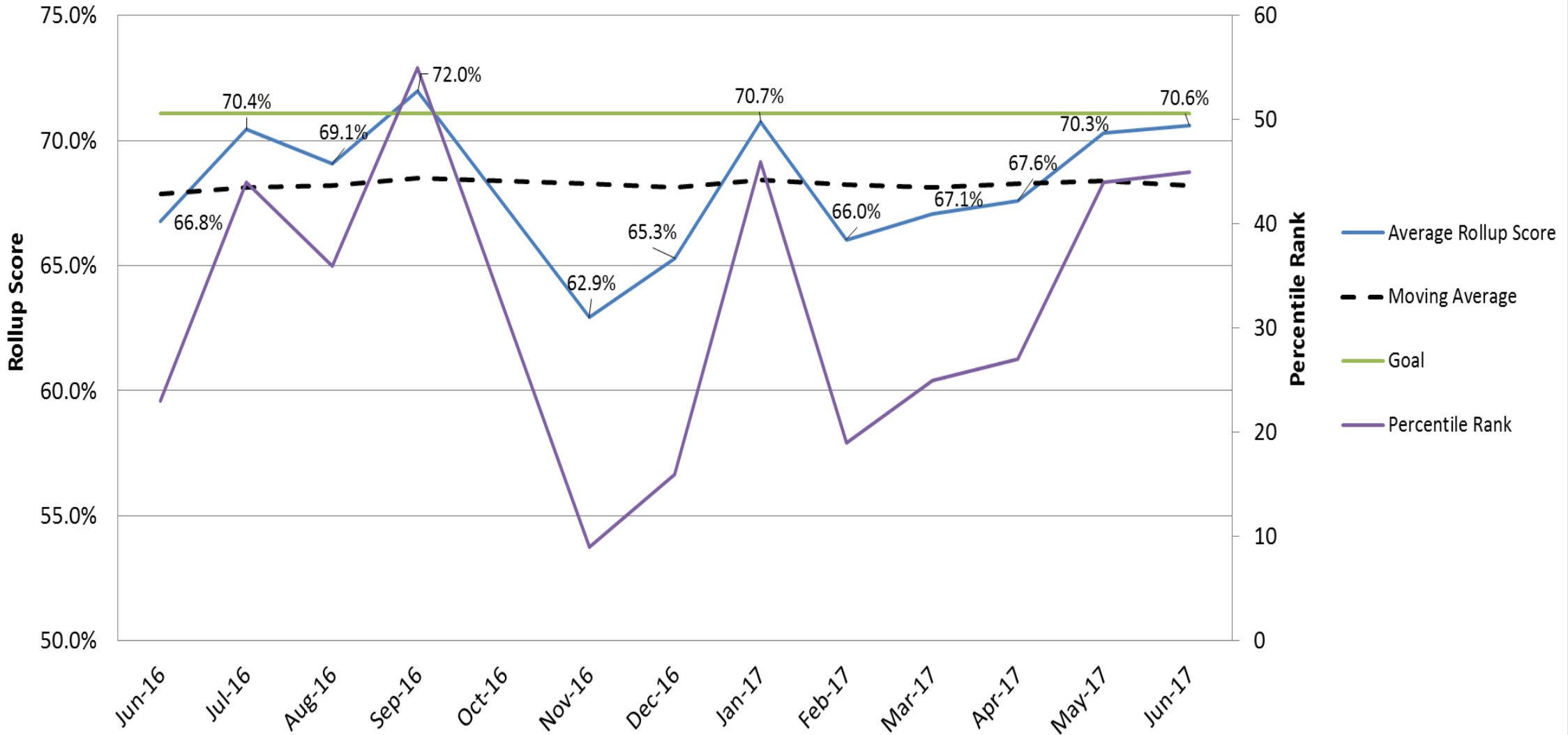
4 of the 6 infections happened on line day 10+

# Surgical Site Infections, MRSA & C-diff (Standard Infection Ratio)

HAIs Measure Description (SIR = <i>observed infections / expected infections</i> )				CMS VBP Benchmarks	
	FY 2015	FY 2016	FY 2017 to Date (Oct - June)	Threshold (Based on FY- 2019 Indicators)	Benchmark (Based on FY-2019 Indicators)
<b>SSI (Colon) SIR</b>	● 0.89	● 0.941	● 0.33	0.78	0.00
Observed number of Colon Infections	12	16	3		
Expected number of Colon Infections	13.5	17.0	9.0		
Procedure Count	213	241	157		
<b>SSI (Abdominal Hysterectomy) SIR</b>	● 1.11	● 0.357	● 0.91	0.76	0.00
Observed number of Abd. Hyst. Infections	3	1	2		
Expected number of Abd. Hyst. Infections	2.7	2.8	2.2		
Procedure Count	212	214	162		
<b>**C-Diff (Hospital Onset, excludes psych and CIR) SIR</b>	● 0.52	● 0.857	● 0.94	0.924	0.113
Observed number of events	52	71	61		
Expected number of events	99.9	82.80	65.10		
<b>**MRSA (Hospital Onset, excludes psych and CIR) SIR</b>	● 0.32	● 2.26	● 1.05	0.854	0.000
Observed number of events	5	14	5		
Expected number of events	15.4	6.20	4.77		

# HCAHPS

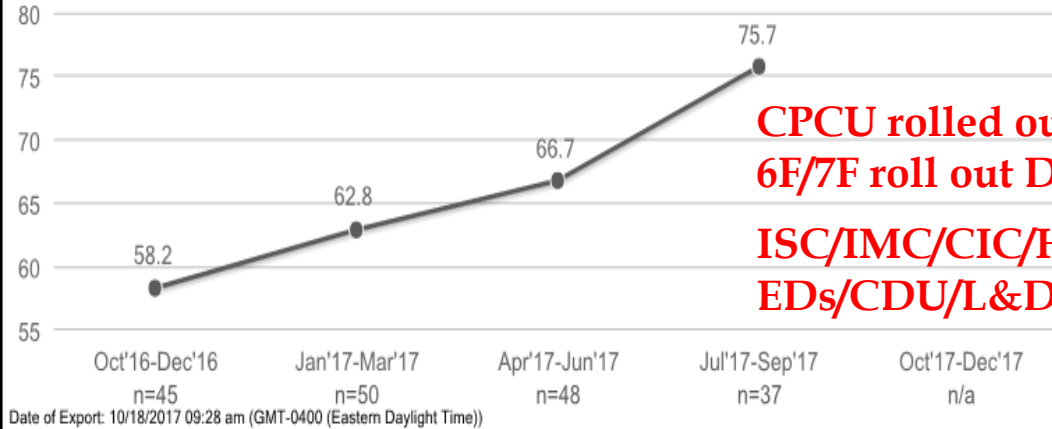
Overall FYTD 2016 & 2017 HCAHPS





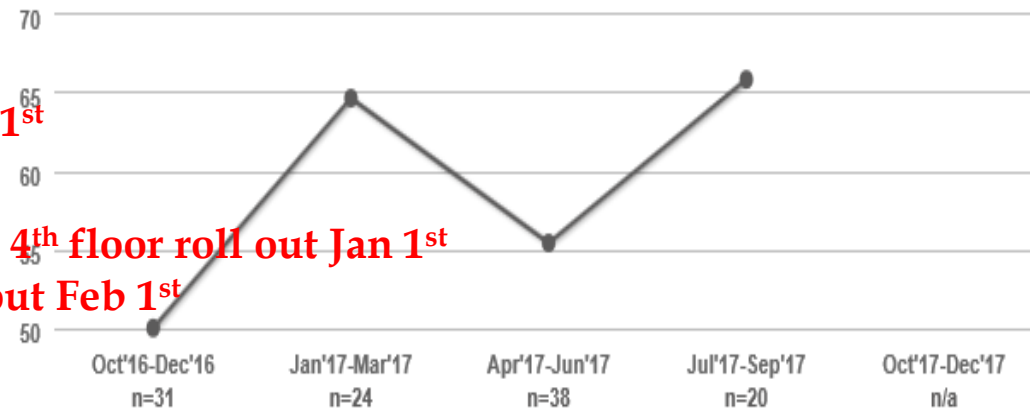
# HCAHPS PI Improvement Outcomes

Inpatient - 5 North  
Halifax Health  
Top Box by Discharge Date  
Domain - CAHPS - Comm w/ Nurses

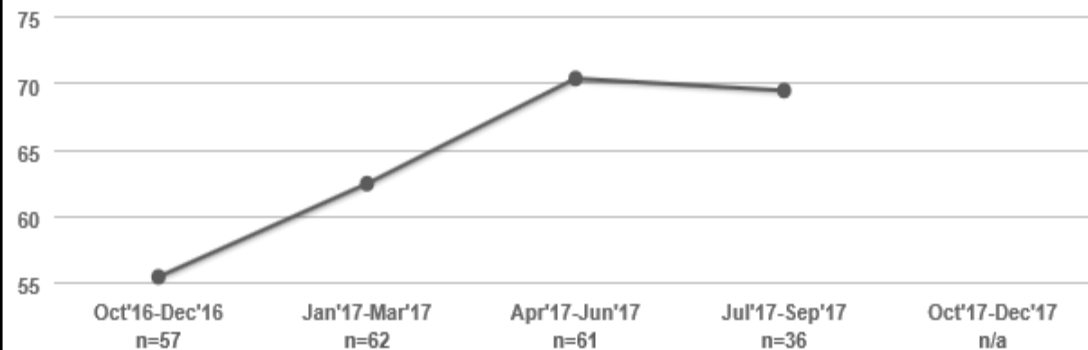


**CPCU rolled out Oct 1<sup>st</sup>**  
**6F/7F roll out Dec 1<sup>st</sup>**  
**ISC/IMC/CIC/HHPO 4<sup>th</sup> floor roll out Jan 1<sup>st</sup>**  
**EDs/CDU/L&D roll out Feb 1<sup>st</sup>**

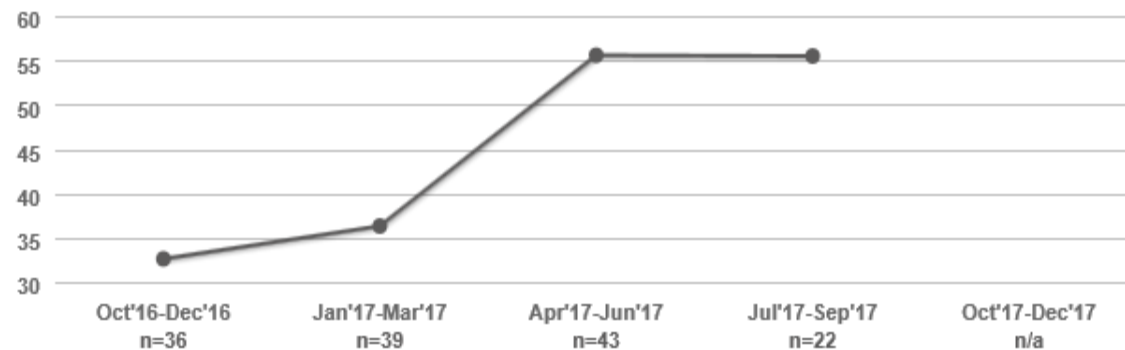
Inpatient - 5 North  
Halifax Health  
Top Box by Discharge Date  
Domain - CAHPS - Comm About Medicines (CMS View Applied)



Inpatient - 4 North  
Halifax Health  
Top Box by Discharge Date  
Domain - CAHPS - Comm w/ Nurses



Inpatient - 4 North  
Halifax Health  
Top Box by Discharge Date  
Domain - CAHPS - Comm About Medicines (CMS View Applied)





# Questions?







HALIFAX  
HEALTH



**DELTONA HOSPITAL** PROJECT UPDATE

06 NOVEMBER 2017



# AGENDA

1. **Schedule**
2. **Project Update**
3. **Project Summary**
4. **Budget Update**





# SCHEDULE

**09.18.2017** Early Structural Package **Issued**

**11.06.2017** Board Approval

**11.20.2017** Foundation Start

**11.30.2017** GMP

**12.02.2017** CON Deadline

**12.2017** Ground Breaking (Date TBD)

**03.14.2017** Construction Documents



# PROJECT UPDATE

- 1. Site fill has been completed**
- 2. AHCA Hold Harmless has been received**
  1. Application submitted for site utilities permit
  2. Site Utilities work out to bid
- 3. Team is working on numbers and adjusting for market escalation**
- 4. 22 November 2017 - Early Structural Package Issuance**
- 5. Construction Document phase in progress**
- 6. Monthly Owner/Architect/Contractor meetings have commenced**



# PROJECT SUMMARY

30 MED/SURG BEDS | 12 ICU BEDS | 202,242 SF NEW CONSTRUCTION | 2 EQUIPPED ORs | 1 EQUIPPED CATH/IR

## PROJECT SCOPE

The Halifax Health Deltona Hospital will include a six-level hospital, a supporting central energy plant, surface parking and space for future campus growth.

Direct access will be provided from the new hospital to an existing free standing emergency department and proposed medical office building.

## LEVEL 01

Lab  
Pharmacy  
Imaging  
Lobby/Admit  
Food Service  
Chapel  
Materials Mgmt  
Gift Shop  
Biomed  
EVS/Facility Eng.

## LEVEL 02

Pre-Admit Test  
Prep (12)  
PACU (6)  
Endoscopy (1)  
Central Sterile  
Surgery Waiting  
Surgery (2 Built & Equipped, 2 Shell)  
Cath/IR ( 2 Built - 1 Equipped)

## LEVEL 03

Mechanical Mezzanine

## LEVEL 04

ICU (12)  
Shell (18 Future M/S)

## LEVEL 05

Med/Surg (30)

## LEVEL 06

Shell (30 Future M/S)

## CEP

Built to accommodate  
Vertical expansion

## FSED

Current – 10 Exam Rooms  
Future – 6 Observation Rooms  
13 New Exam Rooms



# BUDGET UPDATE



## Master Project Budget Estimate H.H. Holdings, Inc. - Deltona Hospital

ADAMS® August 24, 2017 (updated based on SD Documents and Cost Management dated 06/29/17)

Project: H. H. Holdings, Inc. - Deltona Hospital

Location: Deltona, Florida

Total Gross Square Feet: 157,956 adjusted per decisions from Executive Meeting 06/29/2017

Total Shelled Square Feet: 39,922 adjusted per decisions from Executive Meeting 06/29/2017

Cost Code	Summary	Budget	Cost Per GSF	Comments
	Group 1000: Site Acquisition and Assessment	\$33,442	\$0.17	
	Group 2000: Designers and Consultants	\$7,447,350	\$37.64	
	Group 3000: Construction	\$75,153,993	\$379.80	
	Group 4000: Equipment and Furnishings	\$14,649,663	\$74.03	
	Group 5000: Fees, Testing, Inspections and Administration	\$2,369,251	\$11.97	
	Group 6000: Financing Expense	\$0	\$0.00	Not included
	Group 7000: Contingency and Escalation	\$5,244,231	\$26.50	5.0% = Percent of Total Cost
	<b>Total Estimated Cost</b>	<b>\$104,897,930</b>	<b>\$530.11</b>	





# NEXT STEPS

- **Project Approval**
- **Early Structural Package**
- **Ground Breaking** – 12/2017 (Date TBD)





HK\$