

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Wills</i>	DATE <i>1/24/08</i>
--------------------	------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000386	<input checked="" type="checkbox"/> Prepare reply for the Director's signature DATE DUE <i>1/31/08</i>
2. DATE SIGNED BY DIRECTOR <i>C: Mr. Jenkins</i> <i>Cleared 1/31/08, attached.</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

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OFFICE OF DIRECTOR**

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1.	<i>[Signature]</i>		
2.	<i>[Signature]</i>		
3.	<i>[Signature]</i>		
4.			

per Wills - 1/24/08



House of Representatives

State of South Carolina

J. Roland Smith

District No. 84 - Aiken County
183 Edgar Street
Warrenville, SC 29851

Committees:

Ethics, Chairman
Ways and Means
Ways and Means Budget and Finance
Ways and Means Property Tax
Ways and Means Public Education and
Special Schools Subcommittee, Chairman
School Bus Specification Committee

519-B Blatt Building
Columbia, SC 29211

Tel. (803) 734-3114

January 23, 2008

RECEIVED

JAN 24 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Ms. Emma Forkner, Director
The Department of Health and Human Services
Post Office Box 8206
Columbia, SC 29202-8206

Re: The Margaret J. Weston Community Health Care Center, 4645 Augusta Road
Post Office Box 277, Clearwater, SC 29822; Tel. (803) 593-9283

Dear Ms. Forkner:

I was contacted on Tuesday, January 22, 2008, in my Columbia office, about the Margaret J. Weston Community Health Care Center by the Director, Dr. Coleman, concerning a cash flow problem. Apparently, they have billed the Department of Health and Human Services and believe they are due \$140,000. As I understand it, there may be a review of the entire payment.

The citizens of this area depend on the health care center for their doctor visits, medications and all services that are offered by the Margaret J. Weston Health Care Center, which serves a large portion of Aiken County. There is an outreach center in Jackson and Aiken, South Carolina, and many low-income citizens depend on the services provided by this health care center. I am enclosing documentation I received for your review.

We greatly appreciate your assistance in this matter and look forward to hearing from you very soon.

Sincerely,

A handwritten signature in cursive script that reads "J. Roland Smith".

J. Roland Smith

JRS/sse/jan23-08-2

cc: Dr. James L. Coleman, Jr., The Margaret J. Weston Health Care Center,
Executive Officer, Post Office Box 277, Clearwater, SC 29822

Enclosure



MARGARET J. WESTON
COMMUNITY HEALTH CENTERS
Dedicated to Your Health

FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
Rep J. Roland Smith	Dr. J. Coleman
COMPANY:	DATE:
	1/22/08
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
	12
PHONE NUMBER:	RE:
	Assistance with Cost Repc to DHHS

☒ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☒ PLEASE REPLY ☐ PLEASE RECYLE

NOTES/COMMENTS:

THANKS,
James

CONFIDENTIALITY NOTICE: The information contained within this notice is confidential and protected by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). It is intended only for the use of the individual or entity identified above. If you, as the reader of this message, are not the intended recipient, then you are hereby notified that any dissemination or distribution of the communication is prohibited. The HIPAA Privacy Rule is not waived by the parties sending the document. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the address below via U.S. Postal Service. Thank you for your cooperation in this matter.

4445 AUGUSTA ROAD
PO BOX 277
CLEARWATER, SC 29822
803.593.9283



MARGARET J. WESTON
COMMUNITY HEALTH CENTERS
Dedicated to Your Health

4645 August Road
P.O. Box 177
Clearwater, SC 29822
(803) 593-1283


January 22, 2008

Representative J. Roland Smith
District Number 84: Aiken County
519 B Blatt Bldg.
Columbia, South Carolina 29211

Greetings Representative Smith,

First of all, thank you for your quick response today concerning assistance needed for Margaret J. Weston. We are experiencing a financial crunch and need your help by calling over to DHHS to see if someone can pull our 2006-2007 Cost Report (ATTACHED) to settle it so that we can receive our reimbursement. If this cannot be done in its entirety, I would be appreciated if DHHS could send us a preliminary settlement amount to assist with our cash crunch until the report is completed. According to our Auditor's report, we are due approximately \$140,000. I thank you in advance for your assistance and if you should need more information, please do not hesitate to give me a call at (803) 593-9283 :120 (work); (803) 646-9447 (cell). Again, thank you!

In Regards,


James L. Coleman, Jr., Ed.D.
Chief Executive Officer
Margaret J. Weston Community Health Centers

FEDERALLY QUALIFIED HEALTH CENTER (FQHC) STATISTICAL DATA

Date Submitted:

Date Received:

1. FQHC Name and Address:

Margaret J. Weston Community Health Center
PO Box # 277
Clematis, South Carolina 29822

2. FQHC Number
FQC007

3. Reporting Period
From: 06/01/06 To: 05/31/07

4. Type of Control (Check One):
Voluntary Corporation ☐

Government Federal ☐ State ☐ City ☐
County ☐ Other ☐

5. FQHC Owned By:

6. Other: Federally Qualified Health Centers, Providers of Service including Rural Health Clinics, Hospitals, Skilled Nursing Facilities, Home Health Agencies, Suppliers or Other Entities That Are Owned or Related Through Common Ownership or Control to the Individual or Entity Listed in Item 5.

Provider Name	Location	Clinic or Provider No.

7. Names of Physicians Furnishing Services At the Federally Qualified Health Center or Under Agreements (As Described in Instructions) and Medicaid Billing Numbers.

Physician Name	Billing Number
Eric Schleuter	FQC007
Uday Doppalapudi	FQC007
Monica F. Manigo-Johnson	FQC007
Jeanne Gourdiné	FQC007
Robert V. Singh	FQC007

CERTIFICATION BY OFFICER OR ADMINISTRATOR OF CLIC

I hereby Certify That I have Examined The Accompanying Worksheets Prepared By Margaret J. Weston Health Center

(FQHC Name and Numbers) For the Reporting Period Beginning 06/01/06 And Ending 05/31/07

And That To The Best of My Knowledge And Belief, It Is A True, Correct And Complete Statement Prepared From the Books And Records Of The FQHC In Accordance With Applicable Instructions, Except As Noted

Signature (Officer or Administrator of FQHC):

Title:

EXECUTIVE DIRECTOR

Date:

10/2/07

AC NUMBER: PQ007		Compensation & Fringe Benefits	Medical Supplies	Purchased and Contract Services	Other	Total (Col. 1 thru 4)	Reclassifications	Reclassified Trail Balance (Col. 5 + 6)	Adjustments Increase (Decrease)	Net Expenses (Col. 7 + 8)
DIRECT COSTS		1	2	3	4	5	6	7	8	9
OVERHEAD COSTS										
32.	Administration	555,695		14,005	975	570,675		570,675		570,675
33.	Financial			9,851	15,900	25,751		25,751		25,751
34.	Advertising				22,906	22,906		22,906	(21,750)	1,156
35.	Legal				62,103	62,103		62,103	(2,500)	59,603
36.	Data Processing					0		0		0
37.	Housekeeping (Facilities)			43,895	3,196	47,091		47,091		47,091
38.	Rent/Lease				29,100	29,100		29,100		29,100
39.	Postage				5,864	5,864		5,864		5,864
40.	Supplies				53,456	53,456		53,456		53,456
41.	Insurance				6,835	6,835		6,835		6,835
42.	Telephone				10,823	10,823		10,823		10,823
43.	Utilities				44,313	44,313		44,313		44,313
44.	Maintenance and Repair				28,748	28,748		28,748		28,748
45.	Mortgage Interest				9,519	9,519		9,519		9,519
46.	Depreciation				73,070	73,070	(8,717)	64,354		64,354
47.	Amortization (Interest Expense)				296	296		296		296
48.	Recruitment				6,361	6,361		6,361		6,361
					40,154	40,154		40,154		40,154
50.	Medical Records				8,736	8,736		8,736		8,736
51.	Other Sales Tax, Licenses/Fees				17,603	17,603		17,603	(2,690)	14,912
52.	Lodging, Meals, CMB					0		0		0
53.	Bad Debts				44,118	44,118		44,118		44,118
54.	Miscellaneous				8,569	8,569		8,569	(2,806)	5,763
55.	Other Interest				2,939	2,939		2,939		2,939
56.	Total Overhead	555,695	0	67,751	495,583	1,119,029	(8,717)	1,110,312	(29,746)	1,080,566

FQHC NUMBER: FQC007

PAGE FIVE

		AMOUNT
1.	Cost of FQHC Services Excluding Overhead (Page 1, Col 9, Line 18)	1,075,819
2.	Non-Reimbursable FQHC Costs Excluding Overhead (Page 2, Col. 9, Line 31)	331,951
3.	Cost of All Services Excluding Overhead (Sum of Line A1 plus Line A2)	1,407,769
4.	Percentage of Non-Reimbursable FQHC Costs (Line A2 Divided By Line A3)	23.58%
5.	Total Overhead (Page 3, Col. 9, Line 56)	1,080,566
6.	Overhead Applicable to Non-Reimbursable FQHC Costs (Line A4 times Line A5)	254,796
7.	Overhead Applicable to FQHC Services (Line A5 less Line A6)	825,770
8.	Total Costs of FQHC Services (Line A1 plus Line A7)	1,901,589
1.	Total FQHC Cost (Line A8)	1,901,589
2.	Total FQHC Adjusted Visits (Page 4, Line C2)	15,417
3.	FQHC Rate Per Visit (Line B1 Divide by Line B2)	123.34

PART II. SCHEDULE OF ADMINISTRATIVE EXPENSE

	ACCOUNT NUMBER	PER Reclassification & Adjustments			ADJUSTED
		BOOKS	DEBIT	CREDIT	
1. EXECUTIVE DIRECTOR - SALARY		101,067			116,545
3. EXECUTIVE MANAGER - SALARY		35,601			41,053
5. CHIEF INFORMATION OFFICER - SALARY		40,150			46,299
7. MEDICAL DIRECTOR - SALARY					0
9. OTHER - SALARY		64,141			73,964
11. CONTRACTED TEMP LABOR		14,005			14,005
13. OTHER CONSULTING FEES		975			975
15. PAYROLL TAXES / FRINGE BENEFITS		73,803		73,803	0
17.					0
19.					0
21.					0
					0
					0

PQHC NUMBER: PQCD07

PAGE SEVEN

PART III. ACCOUNT ANALYSIS - OTHER INCOME

ACCOUNT NO.

SOURCE	AMOUNT	DESCRIPTION
PHS Grants	660,681	330
Other Grants/Specify:	8,266	
Medicaid	351,680	Gross Charges less contractual adjustments
Self Pay/Sliding Fee Scale	694,313	Gross Charges less contractual adjustments
Medicare	173,784	Gross Charges less contractual adjustments
Commercial Insurance	253,098	Gross Charges less contractual adjustments
Other Third Party	105,184	Gross Charges less contractual adjustments
In-Kind Contributions (Drugs)	587,701	
Contributed Services (NHSC)	67,917	
Other Miscellaneous Revenue	44,930	See Attached Schedule
Net Cost Reports Settlements	(7,730)	
Net Deposits Overages	158	
Medical Records Income	2,905	
Interest Income	2,359	
TOTAL REPORTED	2,945,245	



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

January 31, 2008

The Honorable J. Roland Smith
House of Representatives
State of South Carolina
519-B Blatt Building
Columbia, S.C. 29211

Re: The Margaret J. Weston Community Health Care Center

Dear Representative Smith:

The South Carolina Department of Health and Human Services (SCDHHS) has prepared a tentative interim Medicaid settlement for the subject provider based upon the Department's preliminary review of the "as filed" June 1, 2006 through May 31, 2007 Medicaid cost report. As a result, we have submitted two payment adjustments totaling \$68,419 that the provider will receive on February 1, 2008. The Department will complete its final review of the Medicaid cost report and inform the provider of the results of our review by the middle of February.

If I can be of any further assistance, please feel free to contact me.

Sincerely,

Emma Forkner
Director

EF/wschn

209 384 ✓



House of Representatives

State of South Carolina

J. Roland Smith

District No. 84 - Aiken County
183 Edgar Street
Warrenville, SC 29851

Committees:

Ethics, Chairman
Ways and Means
Ways and Means Budget and Finance
Ways and Means Property Tax
Ways and Means Public Education and
Special Schools Subcommittee, Chairman
School Bus Specification Committee

519-B Blatt Building
Columbia, SC 29211

Tel. (803) 734-3114

January 23, 2008

RECEIVED

JAN 24 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Ms. Emma Forkner, Director
The Department of Health and Human Services
Post Office Box 8206
Columbia, SC 29202-8206

Re: The Margaret J. Weston Community Health Care Center, 4645 Augusta Road
Post Office Box 277, Clearwater, SC 29822; Tel. (803) 593-9283

Dear Ms. Forkner:

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We greatly appreciate your assistance in this matter and look forward to hearing from you very soon.

Sincerely,

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J. Roland Smith

JRS/sse/jan23-08-2

cc: Dr. James L. Coleman, Jr., The Margaret J. Weston Health Care Center,
Executive Officer, Post Office Box 277, Clearwater, SC 29822

Enclosure



MARGARET J. WESTON
COMMUNITY HEALTH CENTERS
Dedicated to Your Health

FACSIMILE TRANSMITTAL SHEET

TO:

Rep J. Roland Smith

COMPANY:

FROM:

Dr. J. Coleman

DATE:

1/22/08

FAX NUMBER:

TOTAL NO. OF PAGES INCLUDING COVER:

12

PHONE NUMBER:

RE:

Assistance with Cost Reps to DHHS

☒ URGENT

FOR REVIEW



PLEASE COMMENT

☒ PLEASE REPLY



PLEASE RECYCLE

NOTES/COMMENTS:

THANKS,

James

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4645 AUGUSTA ROAD

PO BOX 277

CLEARWATER, SC 29822

803.593.9283



MARGARET J. WESTON
COMMUNITY HEALTH CENTERS
Dedicated to Your Health

4645 Augusta Road
P.O. Box 177
Clearwater, SC 29822
(803) 593-1283

January 22, 2008

Representative J. Roland Smith
District Number 84: Aiken County
519 B Blatt Bldg.
Columbia, South Carolina 29211

Greetings Representative Smith,

First of all, thank you for your quick response today concerning assistance needed for Margaret J. Weston. We are experiencing a financial crunch and need your help by calling over to DHHS to see if someone can pull our 2006-2007 Cost Report (ATTACHMENT D) to settle it so that we can receive our reimbursement. If this cannot be done in its entirety, I would be appreciated if DHHS could send us a preliminary settlement amount to assist with our cash crunch until the report is completed. According to our Auditor's report, we are due approximately \$140,000. I thank you in advance for your assistance and if you should need more information, please do not hesitate to give me a call at (803) 593-9283 or 120 (work); (803) 646-9447 (cell). Again, thank you!

In Regards,

James L. Coleman, Jr., Ed.D.
Chief Executive Officer
Margaret J. Weston Community Health Centers

FEDERALLY QUALIFIED HEALTH CENTER (FQHC) STATISTICAL DATA

Date Submitted:

Date Received:

1. FQHC Name and Address:

Margaret J. Weston Community Health Center
PO Box # 277
Clearwater, South Carolina 29822

2. FQHC Number

FQC007

3. Reporting Period

From: 06/01/06

To: 05/31/07

4. Type of Control (Check One):

Voluntary Corporation ☐

Government Federal ☐ State ☐ City ☐

County ☐ Other ☐

5. FQHC Owned By:

6. Other: Federally Qualified Health Centers, Providers of Service Including Rural Health Clinics, Hospitals, Skilled Nursing Facilities, Home Health Agencies, Suppliers or Other Entities That Are Owned or Related Through Common Ownership or Control to the Individual or Entity Listed in Item 5.

Provider Name	Location	Clinic or Provider No.

7. Names of Physicians Furnishing Services At the Federally Qualified Health Center or Under Agreements (As Described in Instructions) and Medicaid Billing Numbers.

Physician Name	Billing Number
Eric Schleuter	FQC007
Uday Doppalapudi	FQC007
Monica F. Manigo-Johnson	FQC007
Jeanine Gourline	FQC007
Robert V. Singh	FQC007

CERTIFICATION BY OFFICER OR ADMINISTRATOR OF CLIC

I hereby Certify That I have Examined The Accompanying Worksheets Prepared By Margaret J. Weston Health Center.

(FQHC Name and Numbers) For the Reporting Period Beginning 06/01/06 And Ending 05/31/07

And That To The Best of My Knowledge And Belief, It is A True, Correct And Complete Statement Prepared From the

Books And Records Of The FQHC In Accordance With Applicable Instructions, Except As Noted

Signature (Officer or Administrator of FQHC):

Title:

EXECUTIVE DIRECTOR

Date:

06/20/07

C NUMBER: FQC007										PAGE ONE
DIRECT COSTS		Compensation & Fringe Benefits	Medical Supplies	Purchased and Contract Services	Other	Total (Col. 1 thru 4)	Reclassifications	Reclassified Trail Balance (Col. 5 + 6)	Adjustments Increase (Decrease)	Net Expenses (Col. 7 + 8)
		1	2	3	4	5	6	7	8	9
REIMBURSABLE COSTS										
1.	Medical	793,418	69,560			862,978		862,978		862,978
2.	Laboratory - Medical	47,476	73			47,549		47,549		47,549
3.	Radiology - Medical					0		0		0
4.	Dental	117,446	21,688	8,713		147,847		147,847		147,847
5.	Podiatry					0		0		0
6.	Psych/Counseling Services					0		0		0
7.	Health Education					0		0		0
8.	Nutrition					0		0		0
9.	Social Work					0		0		0
10.	Depreciation/Medical Equip.					0		0		0
11.	Depreciation/Dental Equip.					0	8,717	8,717		8,717
12.	Continuing Medical Education				3,099	3,099		3,099		3,099
13.	Professional Dues/License					0		0		0
14.						0		0		0
15.	Hazardous Waste			5,630		5,630		5,630		5,630
16.	Other/Specify					0		0		0
17.						0		0		0
18.	Total Reimbursable Costs	958,340	91,321	14,343	3,099	1,067,102	8,717	1,075,819	0	1,075,819

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MANAGEMENT REPORT

0004

C NUMBER: FQC007		PAGE TWO							
DIRECT COSTS		Compensation & Fringe Benefits	Medical Supplies	Purchased and Contract Services	Other	Total (Col. 1 thru 4)	Reclassified Trail Balance (Col. 5 + 6)	Adjustments Increase (Decrease)	Net Expenses (Col. 7 + 8)
		1	2	3	4	5	6	7	9
NON-REIMBURSABLE COSTS									
17.	Education (Group)					0	0	0	0
18.	Outreach					0	0	0	0
19.	Community Services					0	0	0	0
20.	Environmental					0	0	0	0
21.	Pharmacy	117,583	786,694	15,375		919,652	919,652	(587,701)	331,951
22.	Radiology/Technical					0	0	0	0
23.	In-Patient and Delivery					0	0	0	0
24.	Client Transportation					0	0	0	0
25.	Family Planning					0	0	0	0
26.	Laboratory Reference			16,426		16,426	16,426	(16,426)	(0)
27.	Case Management (PICM)					0	0	0	0
28.	In-Home Services (PP/IHV)					0	0	0	0
29.	Family Support Services					0	0	0	0
30.	WIC/Breastfeeding/Nutrition Education					0	0	0	0
30a.	Optometry					0	0	0	0
30b.						0	0	0	0
30c.						0	0	0	0
31.	Total Non-Reimbursable Costs	117,583	786,694	31,801	0	936,078	0	(604,127)	331,951

C NUMBER: PQ007		Compensation & Fringe Benefits	Medical Supplies	Purchased and Contract Services	Other	Total (Col. 1 thru 4)	Reclassifications	Reclassified Trail Balance (Col. 5 + 6)	Adjustments Increase (Decrease)	Net Expenses (Col. 7 + 8)
DIRECT COSTS		1	2	3	4	5	6	7	8	9
OVERHEAD COSTS										
								570,675		570,675
32.	Administration	555,695		14,005	975	570,675		570,675		570,675
33.	Financial			9,851	15,900	25,751		25,751		25,751
34.	Advertising				22,906	22,906		22,906	(21,750)	1,156
35.	Legal				62,103	62,103		62,103	(2,500)	59,603
36.	Data Processing					0		0		0
37.	Housekeeping (Facilities)			43,895	3,196	47,091		47,091		47,091
38.	Rent/Lease				29,100	29,100		29,100		29,100
39.	Postage				5,864	5,864		5,864		5,864
40.	Supplies				53,456	53,456		53,456		53,456
41.	Insurance				6,835	6,835		6,835		6,835
42.	Telephone				10,823	10,823		10,823		10,823
43.	Utilities				44,313	44,313		44,313		44,313
44.	Maintenance and Repair				28,748	28,748		28,748		28,748
45.	Mortgage Interest				9,519	9,519		9,519		9,519
46.	Depreciation				73,070	73,070	(8,717)	64,354		64,354
47.	Amortization (Interest Expense)				296	296		296		296
48.	Recruitment				6,361	6,361		6,361		6,361
					40,154	40,154		40,154		40,154
50.	Medical Records				8,736	8,736		8,736		8,736
51.	Other: Sales Tax, Licenses/Fees				17,603	17,603		17,603	(2,690)	14,912
52.	Lodging, Meals, CMB					0		0		0
53.	Bad Debts				44,118	44,118		44,118		44,118
54.	Miscellaneous				8,569	8,569		8,569	(2,806)	5,763
55.	Other Interest				2,939	2,939		2,939		2,939
56.	Total Overhead	555,695	0	67,751	495,583	1,119,029	(8,717)	1,110,312	(29,746)	1,080,566

FQHC NUMBER: FQ0007			PAGE FOUR					
POSITIONS			FTE PERSONNEL			VISITS		
			UNDER AGREEMENT	STAFF	TOTAL	ON SITE	OFF SITE	TOTAL
			1	2	3	4	5	6
1.	Physicians		0.00	2.30	2.30	6,691		6,691
2.	Midlevels		0.00	2.17	2.17	5,517		5,517
3.	Subtotal		0.00	4.47	4.47	12,208	0	12,208
4.	Psychiatrists							0
5.	Dentists			0.99	0.99	1,200		1,200
6.	Therapists							0
7.	Medical Social Workers							0
8.	Psychologists							0
9.	Other (Specify)							0
10.	Physicians Under Contract							0
11.								0
12.								0
13.								0
14.								0
15.	Total		0.00	5.46	5.46	13,408	0	13,408
Medical Team Productivity								
1.	Total Physician and Midlevel Visits (Col. 6, Line A3)							12,208
2.	Total Medical Team FTEs (Col. 3 Line A1 plus one-half Line A2)							3.30
3.	Minimum Medical Team Productivity (Line B2 times 4,200)							14,217
4.	Physician and Midlevel Visits To Be Used in Rate Determination (Greater of Line B1 or Line B3)							14,217
Provider Visits								
1.	Total Provider Visits Less Physician and Midlevel Visits (Col. 6, Line A15 less Col. 6, Line A3)							1,200
2.	Total Provider Visits for Rate Determination (Line C1 plus Line B4)							15,417

FQHC NUMBER: FQC007

PAGE FIVE

		AMOUNT
1.	Cost of FQHC Services Excluding Overhead (Page 1, Col 9, Line 18)	1,075,819
2.	Non-Reimbursable FQHC Costs Excluding Overhead (Page 2, Col. 9, Line 31)	331,951
3.	Cost of All Services Excluding Overhead (Sum of Line A1 plus Line A2)	1,407,769
4.	Percentage of Non-Reimbursable FQHC Costs (Line A2 Divided By Line A3)	23.58%
5.	Total Overhead (Page 3, Col. 9, Line 56)	1,080,566
6.	Overhead Applicable to Non-Reimbursable FQHC Costs (Line A4 times Line A5)	254,796
7.	Overhead Applicable to FQHC Services (Line A5 less Line A6)	825,770
8.	Total Costs of FQHC Services (Line A1 plus Line A7)	1,901,589
1.	Total FQHC Cost (Line A8)	1,901,589
2.	Total FQHC Adjusted Visits (Page 4, Line C2)	15,417
3.	FQHC Rate Per Visit (Line B1 Divide by Line B2)	123.34

PART II. SCHEDULE OF ADMINISTRATIVE EXPENSE

	ACCOUNT NUMBER	PER Reclassification & Adjustments			ADJUSTED
		BOOKS	DEBIT	CREDIT	
1. EXECUTIVE DIRECTOR - SALARY		101,067			116,545
3. EXECUTIVE MANAGER - SALARY		35,601			41,053
5. CHIEF INFORMATION OFFICER - SALARY		40,150			46,299
7. MEDICAL DIRECTOR - SALARY					0
9. OTHER - SALARY		64,141			73,964
11. CONTRACTED TEMP LABOR		14,005			14,005
13. OTHER CONSULTING FEES		975			975
15. PAYROLL TAXES / FRINGE BENEFITS		73,803		73,803	0
17.					0
19.					0
21.					0
					0

PQHC NUMBER: PQ0007

PAGE SEVEN

PART III. ACCOUNT ANALYSIS - OTHER INCOME

ACCOUNT NO.

SOURCE	AMOUNT	DESCRIPTION
PHS Grants	660,681	330
Other Grants/Specify:	8,266	
Medicaid	351,680	Gross Charges less contractual adjustments
Self Pay/Sliding Fee Scale	694,313	Gross Charges less contractual adjustments
Medicare	173,784	Gross Charges less contractual adjustments
Commercial Insurance	253,098	Gross Charges less contractual adjustments
Other Third Party	105,184	Gross Charges less contractual adjustments
In-Kind Contributions (Drugs)	587,701	
Contributed Services (NHSC)	67,917	
Other Miscellaneous Revenue	44,930	See Attached Schedule
Net Cost Reports Settlements	(7,730)	
Net Deposits Overages	158	
Medical Records Income	2,905	
Interest Income	2,359	
TOTAL REPORTED	2,945,245	

FQHC NUMBER: FQC007			FROM: 06/1 TO: 05/31/07					ATTACHMENT B
ADJUSTMENT TO EXPENSES								
	DESCRIPTION	LINE NO.	PAGE NO.	TRIAL BLANCE NO.	AMOUNT	SUMMARY AMOUNT		
1	In-Kind Contribution (SCIP)	21	TWO	7480-10-0	(36,819)		1	
2	In-Kind Contribution (PFIZER)	21	TWO	7480-30-0	(550,882)	(587,701)	2	A
3							3	
4	Purchased Laboratory Services	26	TWO	7510-40-0	(16,426)	(16,426)	4	B
5							5	
6	Marketing/Promotion	34	THREE	6610-00-0	(21,750)	(21,750)	6	C
7							7	
8	Lawsuit Settlement	35	THREE	8335-00-0	(2,500)	(2,500)	8	D
9							9	
10	Finance Charges	51	THREE	9310-00-0	(1,584)		10	
11	Penalties and Late Fees	51	THREE	6790-00-0	(1,096)		11	
12	Bank Services Charges	51	THREE	6700-00-0	(10)	(2,690)	12	E
13							13	
14	Refreshments (General)	54	THREE	6970-00-0	(1,457)		14	
15	Refreshments (Board)	54	THREE	6680-00-0	(760)		15	
16	Board of Directors Expenses	54	THREE	6660-00-0	(589)	(2,806)	16	F
17							17	
18							18	
19	RECLASSIFICATION:						19	
20							20	
21	Depreciation Expense	11	ONE	8660-00-0	8,717	8,717	21	G
22	Depreciation Expense	46	THREE	8660-00-0	(8,717)	(8,717)	22	G
23							23	
24							24	
25							25	
26							26	
27							27	
28							28	
29							29	
30							30	