

Palm Beach County Health Department
2012-13 Low Income Pool (LIP) Tier-One Milestone (STC 61) Application

1. **Applicant:** Palm Beach County Health Department
- Medicaid Provider Number:** 0520331-50
2. **Provider Type:** County Health Department
3. **Amount Applying for:** \$3,368,663
4. **Identify as a New or Enhanced Program:** New

5. Description of the Delivery System and Affiliations with Other Health Care Service Providers:

Since 1948, the Palm Beach County Health Department (PBCHD) has evolved from a few fragmented programs offering medical care to migrant farm workers in the rural western part of the county and to the growing population on the Atlantic coast to a multifaceted institution with over 900 employees that focuses on disease prevention and control, primary care, health promotion and education, nutrition education, environmental health regulatory services and surveillance, emergency/disaster planning and response, and community health and wellness.

The Health Department's flagship clinic, the C.L. Brumback/Belle Glade Health Center, was founded in 1956 following a Federal Children's Bureau study on migrant workers in western Palm Beach County. Operating for over a half-century, this clinical site pioneered the migrant health center concept and is a model primary and preventive health care services program to meet the needs of adult and pediatric residents of the county's remote rural communities. The C.L. Brumback/Belle Glade Health Center achieved Federally Qualified Health Center (FQHC) designation by the U.S. Health Resources Services Administration (HRSA) nearly 35 years ago. The PBCHD, the local affiliate of the state department of health, has since grown to operate seven clinics throughout the county (located in Belle Glade, Delray Beach, Jupiter, Lantana, Pahokee, Riviera Beach, and West Palm Beach). Through a comprehensive community health improvement planning process conducted five years ago, access-to-care emerged as the most critical issue to be addressed. This revelation prompted the PBCHD to pursue, and successfully achieve, expansion of its HRSA-designated FQHC status from one to six sites. The Health Department also supported other area safety-net clinics in their efforts to attain FQHC status, one of whom just received this designation in 2012. PBCHD also delivers a Health Care for the Homeless program with federal grant support.

PBCHD is regarded as a safety net in the communities it serves. Area agencies and residents know the local Health Department for its stability, quality of care and extensive support of the needs of those with socio-economic challenges. PBCHD improves access to care by eliminating barriers. The Health Centers provide needed services to clients regardless of their ability to pay (financial barriers), offer staggered extended hours of operation across several clinics by opening at 7:00 a.m., remaining open until 7 p.m. and rotating Saturday hours (access barriers),

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provide transportation for patients to get to their appointments (transportation barriers), and deliver services and educational material that are culturally and linguistically sensitive to the patient population (cultural/language barriers). Local hospitals, mental health facilities, schools, day care centers, Migrant Associations and local government officials all refer clients in need of a “medical home” to the PBCHD, which builds a strong collaborative bond in the community.

Delivering services via partnership agreements with county government and other community agencies allows PBCHD to leverage its resources and reach larger segments of the underserved communities, comprised primarily of the poor and uninsured, including the homeless. These relationships facilitate a continuum-of-care for the target populations and ensure sustained effective communication to meet the community’s needs. PBCHD’s collaborative partnerships include, but are not limited to, the following:

- Provision of office space to the county’s Division of Human Services, the Health Care District, the Department of Children and Families (DCF) and Healthy Mothers/Health Babies and area specialists to serve PBCHD clients in an accessible location. The Division of Human Services assists eligible individuals/families in attaining economic stability and self-sufficiency through case management and provision of support services, such as assistance with housing, utilities, transportation, food and assisted-living placement. The Health Care District, the local taxing authority, provides different levels of health care coverage to eligible county residents who have been denied health care services by other agencies. At two of its Health Centers, PBCHD works with the DCF by supporting salaries of two DCF Medicaid workers to supplement the services provided by PBCHD financial counselors. This collaboration assures the efficient determination of patients’ eligibility, processing of their application, acquisition of coverage and assignment to one of PBCHD’s FQHCs as their primary provider. The Epilepsy Foundation provides onsite services to PBCHD clientele at two of the health centers and other volunteer specialists (e.g., cardiology, orthopedics, podiatry) serve multiple sites.
- Service contracts with COMPASS, Comprehensive Alcohol Rehabilitation Program (CARP), and Jerome Golden Center for Behavioral Health. COMPASS offers HIV services, case management, and education and provides outreach services targeting to gay, lesbian, transsexual and questioning youth. The Jerome Golden Center for Behavioral Health provides case management and treatment services to patients with mental health and CARP provides substance abuse services.
- Healthy Mothers/Healthy Babies Program that assists women with a variety of pre- and post-natal needs, delivers a program at the Lantana/Lake Worth Health Center known as the Lantana Centering Pregnancy Clinic. This unique “clinic” offers culturally sensitive prenatal care and parenting education to an at-risk Hispanic population in the Health Center’s catchment area using an international model of group prenatal care. Health Department personnel supplement these services with health education, including

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diabetes management and nutrition, as well as preconception and childbirth classes on-site for groups and individuals.

- The Lantana/Lake Worth Health Center works with the Guatemala-Mayan Center, Inc. serving the growing Guatemalan community in this service area. While the official language of Guatemala is Spanish, the majority speaks only the ancestral Mayan language, Q'anjob'al. The Guatemala-Mayan Center offers medical interpretation and transportation to and from the Lantana/Lake Worth Health Center and occupies space in the clinic to provide social service assistance.

- Lakeside Medical Center, owned and operated by the Health Care District and the county's sole public hospital, serves the rural western Palm Beach County communities bordering Lake Okeechobee. Its proximity to the C.L. Brumback/Belle Glade Health Center (under 2.5 miles) and the PBCHD's longstanding partnership with the Health Care District enables the coordination and delivery of quality health care. In addition, the hospital's newly accredited Family Medicine program (July, 2011) has five residency positions for each year of the three-year program for a total of fifteen positions. The hospital will serve as the main clinical training site and will partner with academic and community organizations, including the PBCHD, Nova Southeastern University, Florida Community Health Centers, and the West Palm Veterans Affairs Medical Center. PBCHD's partnership with this residency program will result in clinical rotations at the Belle Glade Health Center to help build awareness of the primary care medical needs in rural communities.

- In March 2012, the PBCHD/C.L. Brumback Health Center hosted the annual one-day event to deliver medical and social services to the western communities' underserved and uninsured. Joining forces with Glades PATCH (Planned Approach to Community Health), Everglades Area Health Education Center, Nova Southeastern University Health Professions Division, and 93 other agencies and businesses, health and human services were provided to 800 area residents. Services included medical screening, dental and optometric services, glucose, asthma, diabetes, and tuberculin skin testing, mammogram screenings, physical therapy, eye/hearing screenings, HIV testing, occupational therapy and health education and counseling. A variation of this event, spearheaded by the Quantum Foundation and called "Medical Home Day," entailed all 12 safety net health clinics in the county opening their doors on February 11, 2012, to provide free health care to 1,100 people.

- "Slam Dunk to a Healthier Lifestyle," a PBCHD initiative started in 2008 with support from community schools and area agencies, is a free event intended to bring the importance of health and wellness to the attention of at-risk young people, ages 15 through 24. By combining basketball activities with educational and skill-building workshops and health screenings (followed by lunch), the program focuses on empowering youth and young adults to make wise health and lifestyle choices. The

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event now occurs in three separate communities (West Palm Beach, Belle Glade and Lake Worth) and draws over 1,200 youth and family members. Participants receive incentives such as plaques/certificates, backpacks, gift cards and scholarships.

- Palm Beach County has approximately 135 organizations—non-profit, public sector and faith-based—that serve the community’s homeless in varied capacities. The need for these organizations to combine their efforts is widely acknowledged. Organizations such as the Homeless Coalition of Palm Beach County and the Homeless and Housing Alliance provide opportunities for relationship building among service providers, allowing for the coordination of planning efforts—both short and long term—to alleviate the pressures of an increasing demand for services combined with the decreasing allocations for funding mechanisms on which they rely. PBCHD has a voice and is a respected member of the Homeless Coalition of Palm Beach County (see annual report in the Appendices). The county and the community look to the Health Department as a leader in providing medical care to this vulnerable population. This collaborative and coordinated effort informs the content of this application.

6. Service Area:

Palm Beach County, located on the eastern coast of South Florida, is the largest county in the state covering 2,578 square miles, with a population of approximately 1.3 million (U.S. Census Bureau, 2010), nearly half of whom live in one of the county’s 38 diverse municipalities. The target areas for the Low-Income Pool Primary Care Start-up Project encompass Jupiter, Riviera Beach, West Palm Beach, and Lantana/Lake Worth on the coast and Pahokee in the rural western everglades agricultural area. Their respective zip codes and census tracts include the following:

- Jupiter (Zip Code: 33458, 33469, 33477, 33478; Census Tracts : 01.01, 01.02, 02.02, 02.04, 02.05, 02.06, 02.08, 02.09, 02.10, 02.11, 02.12, 02.13, 03.01, 03.03, 04.02, 04.03, 04.04. 78.22, 78.23)
- Riviera Beach (Zip Code: 33404; Census Tracts: 10.04, 12.00, 13.01, 13.02, 14.03, 14.04, 15.00)
- West Palm Beach (Zip Codes: 33401, 33407, 33409; Census Tracts: 10.02, 14.02, 16.00, 17.00, 18.01, 18.02, 19.04, 20.00, 21.00, 22.00, 23.00, 24.00, 26.00, 27.00, 28.00, 29.00, 30.00, 33.00)
- Lantana/Lake Worth (Zip Codes: 33460, 33461, 33462; Census Tracts: 42.01, 44.01, 44.02, 46.02, 47.02, 55.01, 56.00, 58.06)
- Pahokee (Zip Codes: 33438, 33476; Census Tracts: 80.01, 80.02)

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The PBCHD currently operates health centers to serve these areas and seeks LIP grant funding to expand capacity to meet the underserved and uninsured population’s growing medical and dental needs. Table 1 details the unduplicated patients by zip code of residence served by PBCHD FQHCs in the LIP Project catchment areas.

Table 1: PBCHD FQHC Unduplicated Patients by Zip Code of Residence

Patient Residence	PBCHD FQHC			
	Northeast	West Palm Beach	Lantana/Lake Worth	Pahokee
Jupiter	50	769	41	0
Riviera Beach	110	1,881	87	1
West Palm Beach	407	5,759	384	3
Lantana/Lake Worth	188	1,113	6,310	4
Pahokee	0	1	0	14
Other County Areas*	926	8,534	7,443	521
Total	1,681	18,057	14,265	543

Source: 2011 UDS Report (PBCHD, 2011)
 * Note the PBCHD FQHC locations listed above also serve residents in adjacent zip code areas

7. Service Area Characteristics (including demographics or population served and distribution of current population served by funding source, e.g., Medicaid, Medicare, uninsured, commercial insurance, etc.):

The large majority of the census tracts within the proposed LIP Project’s service area are deemed by the HRSA as both Health Professional Shortage Areas (HPSA) and Dental Health Professional Shortage Areas (DHPSA). All are considered Medically Underserved Areas/Having Medically Underserved Populations (HRSA, 2012). HRSA’s shortage and underserved designations are important indicators of need relating to a community’s health and level of health access. Palm Beach County has over 100 HPSAs, including the low-income populations of Lantana/Lake Worth and West Palm Beach, as well as the low-income/migrant farm-worker population of Belle Glade/Pahokee. For the Low-Income Pool target areas, the HPSA designation score is 17—that of designated grantee, the Palm Beach County Health Department—per HRSA guidelines.

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Table 2: Demographic Characteristics of LIP Project Catchment Areas

Target Area	Total Population	Race/Ethnicity			% Below FPL	% Un-emp.	% <u>></u> 25 Yrs & <u>No</u> HS Diploma	Eng. Lang. Iso-lated	Foreign Born
		White	Black	Hisp.					
Urban Eastern County									
Jupiter	54,017	95.0%	0.7%	12.2%	8.6%	6.4%	4.4%	6.5%	12.6%
Lake Worth [^]	34,910	38.1%	18.9%	39.6%	25.3%	9.0%	34.0%	39.1%	44.6%
Riviera Beach [^]	35,793	27.0%	66.0%	7.3%	23.1%	9.3%	17.8%	17.2%	16.7%
W. Palm Beach [^]	99,919	58.7%	33.7%	22.6%	17.4%	10.1%	26.6%	13.0%	25.4%
Rural Western County									
Belle Glade [^]	17,051	31.1%	65.3%	24.6%	33.6%	15.7%	37.8%	33.9%	22.1%
Pahokee [^]	6,649	28.9%	62.5%	21.5%	24.6%	16.6%	46.1%	17.9%	15.5%
Palm Bch. Co.	1,323,394	73.5%	17.3%	19.0%	14.2%	8.4%	12.8%	13.2%	23.2%
Florida	18,843,326	75.0%	16.0%	22.5%	16.5%	8.0%	14.5%	11.9%	19.4%
Source: U.S. Census Bureau (2010), ACS 1 or 3-year estimates; [^] HRSA-designated HPSA (2011)									

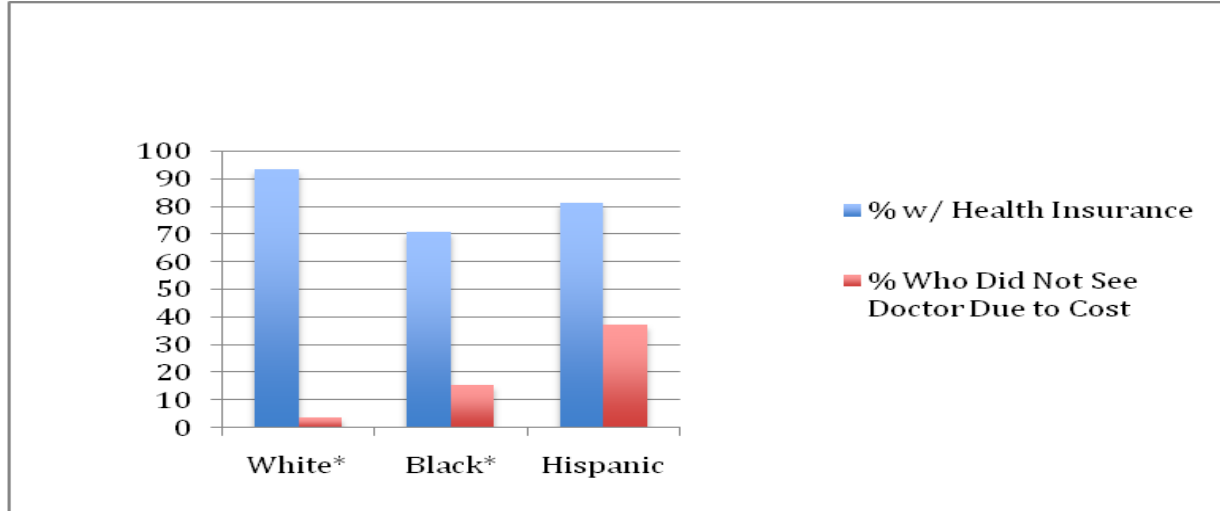
As background, South Florida has been especially impacted by the recent economic decline and slow recovery as reflected in: (1) over one quarter (i.e., 26.3 percent) of Palm Beach County residents under age 65 being uninsured (U.S. Census Bureau, 2010); and (2) Florida's having the second highest foreclosure rate in the nation, with Palm Beach and Broward Counties considered the "epicenter" of foreclosures in the state (RealtyTrac, 2011). Though the local population's unemployment levels are improving (down to 8.5 percent from 10.2 percent just a year ago [Workforce Alliance, 2012]), challenges persist, especially among historically low-income populations. Examination of a of the proposed Low-Income Pool project's catchment areas reveals many living in poverty who are English-language isolated and with poor educational attainment levels, all factors associated with dim employment and economic prospects (see Table 2).

Given the nearly inextricable link of health insurance with employment in the U.S., it is not surprising that the county's Black and Hispanic populations are less likely to have this coverage, and by consequence, more likely to forego seeing a doctor due to cost (see Figure 1). In concrete terms, the county's Blacks and Hispanics were two and one half times less likely to see a doctor in the past year due to cost (CDC, 2010). Note that the percentage of residents in areas to benefit from the proposed LIP grant who do not have health insurance ranges from 22-27% in the West Palm Beach/Riviera Beach area to over 50% in the Lantana/Lake Worth area. Last year's PBCHD patient payor-source data show that half (50.4%) are uninsured. This amounts to over 32,000 of the 64,196 unduplicated patients served by the PBCHD in 2011. Of the remaining

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clients, 27.8% are covered through Medicaid and Medicare, and one-fifth (22.0%) have Health Care District or private insurance coverage.

Figure 1: Palm Beach County Health Care Access by Race/Ethnicity



* Non-Hispanic Source: CDC, 2010

As the proposed LIP project focuses in part in meeting the health care needs of the area’s homeless population, it is important to examine its prevalence in the county. The primary factors contributing to the issue of homelessness in Palm Beach County mimic those in communities across the nation, but are exacerbated by the disproportion between the lifestyles of some of the nation’s most affluent, whose multi-million dollar residences line the county’s waterways, and the reality of the day-to-day life of ordinary citizens, who find themselves struggling to pay exorbitant and continually increasing rents with salaries that are well below a living wage. Despite the considerable efforts of social service agencies and providers, faith-based organizations and compassionate individuals throughout Palm Beach County to both fight the causes of homelessness and assist those who find themselves without permanent shelter, the progress being made in combating this epidemic is consistently staved by its two primary contributing factors: a lack of affordable housing and an increase in poverty.

The total number of homeless individuals is fluid and difficult to accurately estimate. According to the National Law Center on Homelessness and Poverty (2010), “The foreclosure and economic crisis are significantly increasing homelessness and the number of families at risk of homelessness in cities and counties across the nation. . . with preliminary data from cities and organizations showing homelessness increases of as much as 20%.”

Some speculate that realistically, there are between 3,000-4,000 homeless individuals living in Palm Beach County on any given day. Though shelter counts are generally considered reliable, a warm winter evening often translates into a slow shelter night, and South Florida is often both blessed and cursed with above-average temperatures. Statistics related to family homelessness are assumed to be particularly low, as many families double up in lieu of entering the shelter

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system. Families are also missed due to their absence from camps or other gatherings of large numbers of homeless, where a significant percentage of the data related to unsheltered homeless is gathered during the point-in-time survey. Moreover, many homeless simply avoid being counted—parents for fear of losing their children, illegal immigrants for fear of being reported. Finally the Palm Beach County School District’s Homeless Education Assistance Resource Team tracks the status of and provides support services to its homeless students. In the 2009-10 academic year, the School District served over 1,900 homeless children and youth.

In broad terms, health disparities in Palm Beach County reflect what is found in other parts of the state and country. Namely, health status hinges upon one’s race/ethnicity, the oft-used proxy for socioeconomic status. Referring to Table 2, one can readily see the demographic distribution of the LIP areas PBCHD targets for this project. It is therefore no wonder that those residents living in poverty—disproportionately people of color—tend to have poor health outcomes as depicted in the sampling of local data below:

Low birth weight – Per the most recent annual birth rate data (FLDOH, 2010), the percent of non-White births (all ethnicities) in the county that are considered low birth weight (i.e., under 2,500 grams) is double that of White births of low birth weight (i.e., 13.6% vs. 6.8%). As low birth weight correlates highly with infant mortality, it is no surprise that the non-White infant mortality rate is 80% higher than the White infant mortality rate (8.5 vs. 4.7 per 1,000 live births). Note that Blacks bear the greatest burden of low birth weight and infant mortality in the county and has precipitated targeted interventions such as “Community Voice” and the “Healthy Beginnings” system. Among the census tracts of highest incidence of low birth weight infants in the county, nearly three dozen cluster around the LIP Project target areas.

Diabetes – The percentage of county residents diagnosed with diabetes ranges from 9.3% among Whites, 5.0% among Blacks, and 23.1% among Hispanics (CDC, 2010). It is evident that the Black population endures the preponderance of complications from this condition, having a diabetes mortality rate more than triple that of Whites (i.e., 37.6 vs. 11.2 age-adjusted rate).

Heart disease – The county’s age-adjusted death rate for heart disease (the leading cause of death) is 92.3 per 100,000 people. The Black population’s death rate is over 30% higher than White’s (Florida CHARTS, 2010).

HIV/AIDS – There are virtually no other groups of disease where disparities are more pronounced. Palm Beach County’s AIDS rate per 100,000 population in 2011 was 19.2. This rate reflects a rise from the previous year’s rate of 18.6 per 100,000. Also in 2011, the county’s HIV rate per 100,000 population was 30.7, considerably higher from 24.3 the previous year, perhaps a reflection of greater testing campaigns and surveillance. As is evident in the Table 3 data below, HIV/AIDS has a significant disproportionate impact on racial and ethnic minorities, with Blacks accounting for 63.1% of the AIDS cases and 55.8% of HIV cases, while representing only 17 percent of the population. In simpler and perhaps starker terms, the AIDS rate among Blacks is ten times that of Whites, and five times that of Hispanics.

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Table 3: Palm Beach Co. HIV and AIDS Cases/100,000 Population

Race/Ethnicity	AIDS		HIV	
	2010	2011	2010	2011
White	5.0	6.3	7.8	13.9
Black	74.4	71.6	93.6	101.0
Hispanic	16.9	13.2	21.5	25.3
Other*	N/A	N/A	N/A	N/A
Total	18.6	19.2	24.3	30.7

Source: Florida Bureau of STD, 2012

Homelessness – Homelessness inevitably causes serious health problems. Illnesses that are closely associated with poverty such as: tuberculosis, AIDS, malnutrition, or severe dental problems devastate the homeless population. Health problems that exist quietly at other income levels, such as alcoholism, mental illness, diabetes, hypertension, and physical disabilities are prominent on the streets. People without shelter fall prey to parasites, infections and violence. Although data on the oral health status of individuals who are homeless is limited, studies consistently report perceived and clinical evidence of dental needs as well as a low utilization of dental services for this population. Because homeless people often are uninsured and lack access to low-cost preventive health care, they go without care until relatively minor problems become urgent medical emergencies. Ultimately, most homeless people do get treated, but it is treatment of the most expensive sort, delivered in hospital emergency rooms and acute care wards. People who are homeless are more concerned with meeting immediate needs for shelter, food, clothing, and safety than with seeking health care. For some, the symptoms of their illnesses or bad experiences with the health care system in the past, has caused them to avoid health care. Undetected and untreated communicable diseases threaten the health of other homeless people in particular and of the public in general. These infectious and communicable diseases quickly escalate from personal trials to costly and deadly public health emergencies.

The clientele at the West Palm Beach Health Center (where the Homeless Program currently is housed) have a high prevalence of chronic disease and consistently require multiple health and community services. Moreover, the only providers within the service area willing to provide dental care to the homeless and uninsured populations are located at the West Palm Beach Health Center. Access to dental providers at this site is severely limited due to capacity constraints that result in a two to three month wait time for appointments. This problem is exacerbated by the area’s severe shortage of dental health care providers, primarily Medicaid providers, and a lack of dental insurance. The only dental services available for adult Medicaid recipients in Palm Beach County are emergency dental extractions and full dentures.

8. Organizational Chart and Point of Contact:

See Attachment 1.

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Point of Contact: John J. Campbell, Chief Financial Officer
561-671-4121; John_Campbell@doh.state.fl.us

9. Proposed Budget for Funding Detailing the Request:

The majority of grant funding requested in this application is allocated for salaries and benefits of medical and dental personnel needed to support expanding primary and oral health care and costs associated with the construction of a six-chair dental clinic at the Northeast Health Center, medical and non-medical supplies, and the proportion of utilities and services attributed to the project. See Budget Detail below as well as Excel workbook accompanying this proposal.

Statement of Revenues and Expenses	Total Project Year 1	WPB Dental	Northeast Dental	Lantana Dental	Northeast Medical	Pahokee Medical	Homeless Ctr. Medical	Jupiter Health Center	Chronic Disease Prevention
GRANT REVENUE									
IGT Match (42.27%)	1,423,935	40,438	683,927	44,078	184,839	180,825	167,031	101,227	21,570
Federal Match (57.73%)	1,944,728	55,228	934,069	60,199	252,442	246,960	228,121	138,250	29,459
Total Grant Revenue	3,368,663	95,666	1,617,996	104,277	437,281	427,785	395,152	239,477	51,029
GRANT EXPENSES									
Salary and Wages	938,239	61,868	-	68,325	224,736	230,159	227,955	95,852	29,344
Benefits	300,237	19,798	-	21,865	71,916	73,651	72,945	30,673	9,389
Supplies	423,198	12,223	-	12,310	107,345	105,478	80,032	94,714	11,096
Equipment	284,700	-	283,500	-	-	-	-	-	1,200
Contractual	87,793	1,777	-	1,777	33,284	18,497	14,220	18,238	-
Construction	1,334,496		1,334,496					-	-
Total Grant Expenses	3,368,663	95,666	1,617,996	104,277	437,281	427,785	395,152	239,477	51,029

10. Provide a Brief Summary of Your Proposed Project:

The PBCHD proposes to expand access to much needed health and dental services in the community and in so doing, provide better care, promote better health and reduce per-capita costs. This multifaceted effort, enabled by LIP grant funding, will include: (a) operating a satellite primary health care clinic at the newly opened homeless resource center (adjacent to the PBCHD’s West Palm Beach Health Center) to target the homeless population; (b) increasing capacity of the dental clinic at the West Palm Beach and Lantana/Lake Worth Health Centers to target the homeless population and those living at or below 200% of the federal poverty level; (c) creating a dental clinic at the Northeast Health Center to target the homeless population and those living at or below 150% of the federal poverty level; (d) instituting an emergency

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room diversion program at the Northeast Health Center targeting the homeless population as well as other low-income area residents traditionally seeking primary health care at the hospital ER; (e) expanding capacity at the Jupiter Health Center's maternity clinic to target pregnant women who otherwise would not begin prenatal care in the first trimester; (f) expanding Pahokee Health Center's women's health care program to target women who otherwise would not avail themselves of the annual screenings, family planning, and other preventive and chronic disease management programs offered; and (g) launching the National Diabetes Prevention Program at the Lantana/Lake Worth and West Palm Beach Health Centers to target those diagnosed with or self-identified as having pre-diabetes and helping them to adopt health lifestyles to prevent the chronic condition.

11. Describe plan for Identification of Participants for Inclusion in the Population to be Served in the Project:

Jupiter Health Center – The proposed expansion of the maternity clinic targets primarily the Hispanic women who seek prenatal care at the Health Center. Note that many of the clinic's maternity patients are of Guatemala-Mayan origin and do not speak Spanish, but rather Q'anjob'al, and are truly Native American, but oft misclassified (or self-identified) as Hispanic. Hence, they routinely are included in patient counts as Hispanic. As 12.2% of the area's residents are Hispanic, and nearly 40% report not seeking medical care due to cost, this population has been identified as the primary target for the augmented services.

Philip D. Lewis Homeless Resource Center – This year, the county opened the Homeless Resource Center. Through an operational agreement, the PBCHD was provided a 2,500 square foot space at no charge to operate an onsite clinic. The clinic is intended to operate eight hours per day, Monday through Friday (8 a.m. to 5 p.m.) and two hours per day on the weekend (9 a.m. to 11 a.m.) to provide medical care and medical clearances to the homeless population served by the Resource Center. Patients will be identified as homeless (per federal guidelines) when referred to the PBCHD onsite clinic for services.

Northeast Health Center – (1) The PBCHD proposes to augment its pediatric and refugee health care services by providing ER diversion for the nearby hospitals (i.e., St. Mary's and Columbia). Patients will be referred by the respective acute care facilities and will provide documentation of this referral. In addition, area mental health/substance abuse facilities (e.g., Jerome Golden Center for Behavioral Health, CARP, Hanley Center) and the homeless resource center will also be an identification and referral source for eligible clients requiring the services provided at Northeast Health Center. (2) The oral health services to be provided in the newly constructed dental clinic (beginning FY 2) will target: (a) adults and children living under 150% of the federal poverty level, including clients enrolled in Health Care District Coordinated Care Option 1, Healthy Palm Beaches Medicaid Managed Care Plan, Florida Medicaid Program, and miscellaneous programs as contracted by the PBCHD Dental Administration; and (b) the adult and pediatric homeless population referred by the Homeless Resource Center,

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West Palm Beach and Lantana/Lake Worth Health Centers – The expanded dental clinic capacity at both of these sites will target: (a) homeless individuals who either self-identify or are referred by the Homeless Resource Center; or (b) uninsured adults and children living below 200% of the federal poverty level.

Pahokee Health Center – The clinic’s Women’s Health Program targets teen and adult women seeking regular screening services (e.g., PAPs, clinical breast exams) as well as family planning methods and STI prevention and treatment services.

Coastal Health Centers Chronic Disease Prevention Programs – The PBCHD recently applied for and received pending status as a National Diabetes Recognized Program. Its trained Lifestyle Coaches are poised to begin delivering the program in the community to adults ages 18 years and older who have been diagnosed with or self-identified as having “pre-diabetes.” Potential National Diabetes Prevention Program participants will be identified either through documented blood glucose levels or having scored a nine or above on the pre-diabetes screening tool (see Attachment 2).

12. How Will Access to Primary Care Access System Services be Enhanced by This Project?

Capital improvements to clinical facilities, increased provider capacity, expanded service sites and ancillary activities described in this grant application will help to reduce the health status challenges and barriers to care previously described. As detailed below, the proposed medical and dental primary care and prevention projects will add an approximate 21,900 annual visit capacity to PBCHD.

The proposed project will entail:

- (1) Operating PBCHD’s Satellite Primary Health Care Clinic at the Philip D. Lewis Homeless Resource Center – In July 2012, the county opened the Philip D. Lewis Homeless Resource Center, the first of three such regional centers stipulated in the “Ten Year Plan to End Homelessness in Palm Beach County” (Palm Beach County Homeless Advisory Board, 2008). Conveniently located adjacent to the PBCHD’s West Palm Beach Health Center on 45th Street, the Center’s programming includes: Engagement Center; Interim Housing; Indoor Recreational Area for Children; Outdoor Recreational Area; Food Service; and Laundry. Through an operational agreement, the county provided a 2,500 square foot clinic onsite for operation by the PBCHD at no cost, stipulating that the Health Department provide the medical staff. This site has eight examination/treatment rooms in addition to office/consultation rooms, storage, laboratory services, and break-room space. Under this arrangement, the Health Department will provide onsite medical screenings and primary care services to the homeless population and refer clients requiring advanced medical attention or dental services to the neighboring full-service West Palm Beach Health Center. The clinic will operate eight hours per day Monday through Friday and four hours over the weekend and will oversee nurse triage 24/7 on premises for the housed residents (nurses

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provided by the Resource Center). A physician will be available on call for after-hours consultation as well as during weekends and holidays. This arrangement will serve as an emergency room diversion program, allowing for referrals for emergencies 24 hours per day, given PBCHD's partnership with mental health facilities and rehabilitation programs for substance and alcohol abuse. Due to budget constraints, the PBCHD is unable to provide the staffing necessary to meet its commitment to operate the onsite clinic. LIP grant funding will support clinic staffing as follows: registered nurse specialist (1.35 FTE), senior physician (1.0 FTE), advanced registered nurse practitioner (.35 FTE), medical assistant (1.35 FTE), senior clerk (1.35 FTE), medical coder (0.5 FTE) and finance support (0.1 FTE). When fully staffed and operational, this location will have the capacity to support approximately 4,200 visits annually.

- (2) Renovating Northeast Health Center to Accommodate a Dental Clinic and ER Diversion Services – The PBCHD has a long and successful history partnering with the county. Providing facilities to PBCHD for clinical and administrative operations is but one facet of their collaborative relationship. Together, they have constructed and remodeled facilities for the past 50 years. The Northeast Health Center, a county-owned building built in 1970, was renovated two years ago (with HRSA Capital Improvement Project support) and restored to its original function as a clinic. The schematic master plan prepared at the time allocated space for a future dental clinic (too costly to include in the HRSA-funded renovation). The Northeast Health Center occupies 14,210 square feet, with six patient examination rooms, client registration and waiting area, and laboratory. This clinical site operates five days per week, providing pediatric care and refugee screening services. The facility also houses PBCHD's communicable disease program staff (HIV/STI/TB).

Given the pronounced demand for oral health care in the county as well as the persistent need for medical services for the area's vulnerable residents, the PBCHD proposes to use LIP grant funding to modify the clinical site as follows:

- Build and outfit a full-service six-operatory dental clinic, four of which will be fully equipped for immediate use.
- Convert two spaces into isolation rooms for patients with tuberculosis; and
- Reconfigure work areas at the rear of the building to house personnel dislocated by the above renovations, streamline service delivery, and accommodate additional staff for the ER Diversion Program.

The renovations at Northeast Health Center will maximize use of existing space and thereby enable the PBCHD to meet pressing public health needs more efficiently and cost-effectively. A defined space of approximately 5,650 square feet at the southeast corner of the building will be remodeled to house six dental operatories, a small client waiting area, front desk area, space for dental records, space for a pannorex machine, a dark room, small conference room, doctor's office, sterilization area, laboratory area, and bathrooms. Current personnel dislocated by the renovation will be moved to a suite at the rear of the

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building. Please see Budget Attachments for the Architectural Site Plan. When staffed and operational in its first year of operation, this dental clinic location will have the capacity to support approximately 3,500 visits annually.

Northeast Health Center's central Palm Beach County location is in close proximity to two hospitals (St. Mary's and Columbia) and to several mental health/substance abuse rehabilitation facilities (Jerome Golden Center for Behavioral Health, CARP, Hanley Center). Many patients at these facilities do not have health insurance or a medical home and therefore use the hospital emergency room for their health care. An ER diversion program would decrease the number of patients inappropriately using the ER for non-emergent issues as well as reduce the financial strain that this misuse places on the hospital system. It will mimic the fast-track system used by many ERs to manage non-critical patients in a timely manner. As the Northeast Health Center already has the infrastructure in place to manage this patient population, the only infrastructure accommodation required for the ER-diversion program is installation of two negative-pressure rooms for use by patients seeking treatment at PBCHD as a result of the A.G. Holley State Hospital closure. LIP grant funding will support extending hours of operation beyond traditional clinic hours of Monday through Friday as well as on Saturdays to accommodate demand based on increase utilization of the service. Grant funding will support the ER diversion staff as follows: registered nurse specialist (1.0 FTE), senior physician (1.0 FTE), medical assistant (1.0 FTE), senior clerk (1.0 FTE), finance support (0.1 FTE). Note that no dental operational support is sought for FY 1 as construction of the dental clinic will require the entire year. When fully staffed and operational, this ER Diversion project will have the capacity to support approximately 4,200 visits annually.

(3) Increasing the Dental Clinic Capacity at the West Palm Beach Health Center (1150 45th Street) and Lantana/Lake Worth Health Center (1250 Southwinds Drive) – The Dental Division provides basic comprehensive dental services—emergency, restorative, and preventive—for the county's low-income residents. Services provided by fully licensed and credentialed dentists and hygienists include the following:

- Examinations, both emergency and comprehensive.
- Preventive services, including: prophylaxis, scaling, OHI, dental sealants, fluoride treatments and tobacco cessation counseling.
- Restorative care limited to silver alloy and tooth colored restorations.
- Emergency dental care.
- Oral surgical care, including extractions, biopsies and treatment of lesions.

The West Palm Beach Dental Clinic is located within the Health Center in a separate modern dental suite with nine dental operatories. On any given day, there is at least one and often two, empty and under-utilized dental operatories. The LIP grant funding will enable the dental clinic to add 0.2 FTE dentist, 0.2 FTE dental hygienist, and 0.4 FTE dental assistant to provide oral health care to the homeless population. Similarly, the Lantana/Lake Worth

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Dental Clinic is located within the Health Center in a separate dental suite with five operatories. In order to increase capacity, a full time dental assistant and part-time dentist (0.2 FTE) will be needed to manage the increase in homeless clients.

The dental clinic is currently providing comprehensive dental care to Medicaid-eligible children and limited emergency dental care to Medicaid-eligible adults, as well as comprehensive care to low-income residents at or below 150% of the Federal Poverty Level (FPL) who meet the eligibility requirements of the Health Care District (HCD). The HCD is a local taxing district that is responsible for providing health care services to low-income populations in Palm Beach County. Comprehensive dental care is also provided to all HIV+ clients with grant support from Ryan White Title I funds. As a self-funded public health dental program, expanded services and increased access to care are impossible without an adequate funding source for staffing. Therefore, the proposed oral health expansion program at the West Palm Beach and Lantana/Lake Worth Health Centers will enable the clinic to provide care to uninsured homeless populations.

Services provided will consist of preventive care and chair-side oral health education, emergency services, oral surgery, basic restorative services consisting of silver alloy and composite restorations, periodontal services (limited), and specialty dental care services that are available by referral to onsite pediatric and in-house oral surgery specialists. Outreach teams will travel to areas where the homeless live to administer care that is not provided elsewhere. In addition, case referral and coordination with other health care providers such as nurses, physicians, social workers and/or program coordinators will increase patient compliance with appointments and dental treatment.

Health benefits of the Homeless Oral Health Center include: (1) Delivery of essential diagnostic, emergency, preventive, restorative, and surgical services to the targeted homeless population, both adults and children; (2) Improved self-esteem, employment prospects, school performance, and quality-of-life resulting from elimination/amelioration of dental decay, chronic pain, and associated appearance and function; and (3) A boost in health status outcomes, as poor oral health is correlated with systemic problems such as diabetes, cardiovascular disease, and stroke, severe periodontal disease can lead to poor birth outcomes and preterm births, and early detection of cancerous lesions improve cancer survival rates. When fully staffed and operational, this expansion will have the capacity to support an additional 1,180 visits annually.

- (4) Expanding Capacity of Jupiter Health Center's Maternity Clinic – The Jupiter Health Center is a small clinic that provides adult primary care, immunizations, WIC and maternity services. The maternity clinic currently operates one day per week and serves, on average, 24-28 patients. The large majority of the pregnant clientele are from the Guatemala-Mayan population, only one third of whom reportedly receive first trimester care. This past year alone, the clinic had 892 maternity visits. Based on these figures, the PBCHD seeks LIP grant funding to expand its maternity clinic hours and offer an additional full day of obstetric and

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gynecological service with the ancillary support services available at the other Health Centers. This funding will support the following professional personnel, each at 0.4 FTE: an obstetrician, a registered nurse specialist, a phlebotomist, a health support technologist, and a health services representative to communicate with clientele in their native language and assist them in navigating the health care system, including application for maternity insurance. When fully staffed and operational, this expansion will have the capacity to support an additional 2,520 visits annually.

- (5) Expanding Capacity at Pahokee Health Center – Two years ago, the Health Department renovated and converted (with capital improvement project grant support) a state-owned building into a clinical facility. The new clinic site is 2,248 square feet with four examination rooms and is where PBCHD delivers integrated family planning, maternity, newborn, pediatric, immunization and WIC services to an isolated and vulnerable rural community with high rates of teen births and STIs. LIP funding is requested to support the following professional personnel (each at 1.0 FTE), a physician, registered nurse specialist, medical assistant and senior clerk as well as a 0.5 FTE phlebotomist and financial counselor, a 0.25 FTE coder and a 0.15 finance support position. When fully staffed and operational, this location will have the capacity to support approximately 6,300 visits annually.
- (6) Enhancing Coastal Health Centers' Chronic Disease Prevention Program – The PBCHD, having recently received pending status as a National Diabetes Recognized Program, is poised to begin delivering the program in the community to adults ages 18 years and older who have been diagnosed with or self-identified as having “pre-diabetes.” Two of its health promotion/education personnel have been Master Trained as Lifestyle Coaches for the National Diabetes Prevention Program, an evidence-based program demonstrated to prevent diabetes (and therefore reduce the risk for related chronic conditions) in participants diagnosed with “pre-diabetes.” Current grant funding from the Florida Department of Health is enabling PBCHD to offer the program to up to two community-based sites. LIP grant funding will enable the Health Department to hire a health education specialist (1.0 FTE) not only to offer several sessions of the 22-week course at the Lantana/Lake Worth and West Palm Beach Health Centers, but also to promote the program to area physicians, nutritionists and local employer wellness coordinators who may refer their clients/constituents to participate. The health education specialist will travel to Atlanta for the mandatory Lifestyle Coach training by Diabetes Training and Technical Assistance Center Master Trainers. Operational funds will support provision of incentives (e.g., restricted gift cards for purchase of healthy food) to participants to retain them for the duration of this intensive program. It is anticipated that this prevention program will reach 200 participants in its first year of operation.

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13. Does the enhancement include hours of operation after 5:00 pm and/or on weekends at existing sites, or the establishment of a new clinic site?

As described above, enhancements include establishment of a new dental clinic site as well as expanded capacity through additional medical, dental, and ancillary personnel. Note that the coastal full service health centers of West Palm Beach, Lantana/Lake Worth and Delray Beach each already offer Saturday clinical hours once per month (either from 8 a.m. to noon or 8 a.m. to 1 p.m.) to broaden health care access. During the second fiscal year, with the hiring of the dental staff for the newly opened Northeast Health Center Dental Clinic, new staff will work one Saturday a month at each of the West Palm Beach and Lantana/Lake Worth Health Centers, adding dental care to the services provided. PBCHD's onsite clinic at the Philip D. Lewis Homeless Resource Center will remain open until 7 p.m. Monday through Friday (thereby adding four operational hours to the clinic) and will add onsite and on-call staff for Saturday operations. The maternity clinic at Jupiter Health Center will add one day per week to its operations. Finally, the National Diabetes Prevention Program will be delivered at the West Palm Beach Health and Lantana/Lake Worth Health Centers with the clinics are open for extended weekday or weekend hours.

14. Describe your capability to serve minority and culturally diverse populations:

PBCHD's role as an FQHC is to serve as a community safety net. Community agencies favorably regard PBCHD for its stability, quality of care and extensive support to the needs of those with socio-economic challenges that often are disproportionately borne by minorities. Language and cultural barriers that many of PBCHD's clients face compound economic difficulties. In an effort to reduce, if not eliminate, these barriers, Health Center personnel have instituted the following measures:

- Provide services to clients regardless of their ability to pay;
- Have extended hours of operation and a 24-hour medical on-call system to accommodate work schedules that prevent one's attending to their health care needs;
- Offer transportation for patients to get to their appointments;
- Train all personnel to deliver culturally competent care;
- Post signs and related educational materials in English, Spanish and Haitian Creole;
- Deliver services and educational content that are culturally and linguistically sensitive to the patient population (e.g., nutrition classes consider the clients' culture and preferred cuisine);
- Ensure adequate staffing of bilingual personnel (i.e., English/Spanish, English/Haitian-Creole), the availability of medical interpreters as needed, and access to the phone translation services; and
- Provide financial counseling and navigation services, to facilitate application for various health insurance and assistance programs and coordination of care with other health care delivery partners such as specialty care providers and hospitals.

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15. Describe how you will identify and address health care diversity issues as well as health care literacy barriers:

In addition to providing medical and dental care, the Health Department conducts outreach and educational activities as well as provides assistance to clients in applying for Medicaid, Medicare and Health Care District insurance benefits through a Patient Navigator/Financial Counselor. This process has benefited not only the patient but also the Health Centers as it has shifted some uninsured clients into the category of those with insurance and has provided reimbursement for services rendered as well as additional access to services that clients without insurance coverage would have difficulty accessing on their own. This program has been incorporated into the FQHC business plan and will facilitate long-term success of this project.

16. Describe measures and data sources that you will use to evaluate the effectiveness of each initiative comprising your project:

The following LIP Project Outcomes parallel and/or complement those articulated in PBCHD's most recent FQHC renewal application:

- Operate Satellite Primary Health Care Clinic at the Philip D. Lewis Homeless Resource Center: By the end of the project period, increase the % of homeless adults with a diagnosed mental disorder access to appropriate quality mental health services from 25% to > 35% as measured by chart audits.
- Expand Dental Capacity at West Palm Beach, Lantana/Lake Worth and Northeast Health Centers: By the end of the project period, increase the % of homeless adults and children with access to preventive dental care from 0% to 11% as measured by reports.
- Expand Medical Capacity at Pahokee and Northeast Health Centers: By the end of the project period, increase the % of adult patients 18 to 75 years with a diagnosis of Type 1 or Type 2 diabetes whose most recent hemoglobin A1c (HbA1c) during the measurement year is $\leq 9\%$ (under control) from 68% to 70% as measured by chart audits.
- Expand Medical Capacity at Pahokee and Northeast Health Centers: By the end of the project period, increase the % of adult patients 18 to 75 years with diagnosed hypertension whose most recent systolic blood pressure measurement $\leq 140/90$ from 60% to 65% as measured by chart audits.

Additional outcomes for this proposed LIP Project include:

- Expand Medical Capacity at Northeast Health Center: By the end of the project year, increase the % of patients diverted from inappropriate Emergency Room use from 0% to 10%.
- Expand Medical Capacity at Jupiter Health Center: By the end of the project year, increase the % of maternity patients entering care in the first trimester from 0% to 10%.

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- Expand Medical Capacity at Pahokee Health Center: By the end of the project year, increase the % of women’s health program patients over the age of 21 years who receive an annual PAP exam by 10%.
- Expand Medical Capacity at Pahokee Health Center: By the end of the project year, increase the % of women’s health program patients under the age of 26 years who receive an annual Chlamydia screening by 10%.
- Enhance Coastal Health Centers’ Chronic Disease Prevention Program: By the end of the project year, 80% of the National Diabetes Prevention Program participants will demonstrate at five percent weight loss and thereby reduce their risk for developing diabetes as measured by the National Diabetes Prevention Program database.

Initiative	Measures
Operate PBCHD’s Satellite Primary Health Care Clinic at the Philip D. Lewis Homeless Resource Center	<u>Homeless</u> <ul style="list-style-type: none"> ▪ Unduplicated homeless clients ▪ Patient encounters for homeless clients ▪ Referrals for mental health services <u>Data Source</u> : HMS Portal, HMS Adhoc Report Viewer, Chart Audits
Increase Capacity @ West Palm Beach and Lantana/Lake Worth Dental Clinics	<u>Homeless</u> (to begin FY 1) & <u>Uninsured @ 200% FPL</u> (to begin FY 2) <ul style="list-style-type: none"> ▪ Unduplicated homeless clients ▪ Patient encounters for homeless clients <u>Data Source</u> : HMS Portal, HMS Adhoc Report Viewer, Chart Audits/Quarterly Random Sampling
Renovate Northeast Health Center to Accommodate Dental Clinic and Expanded Primary Health and Communicable Disease Services (to begin FY 2)	<u>Dental</u> <ul style="list-style-type: none"> ▪ Unduplicated children and adults living at 150% of FPL ▪ Patient encounters for eligible children and adults <u>Dental and Medical</u> <ul style="list-style-type: none"> ▪ Unduplicated homeless clients ▪ Patient encounters for homeless clients <u>Medical</u> <ul style="list-style-type: none"> ▪ Patient encounters identified as ER diversions ▪ Chronic disease management indicators <u>Data Sources</u> : HMS Report Portal and HMS Adhoc Report Viewer
Expand Capacity of Jupiter Health Center’s Maternity Clinic	<u>Maternity</u> <ul style="list-style-type: none"> ▪ Unduplicated patients entering prenatal care in the first trimester <u>Data Source</u> : HMS Report Portal
Expand Capacity at Pahokee Health Center’s Women’s Health Services Program	<u>Women’s Health</u> <ul style="list-style-type: none"> ▪ Unduplicated patients > age 21 years receiving annual PAP exam ▪ Unduplicated patients < age 26 years receiving Chlamydia screening ▪ Chronic disease management indicators <u>Data Source</u> : HMS Report Portal

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Enhance Coastal Health Centers' (West Palm Beach, Lantana/Lake Worth) Chronic Disease Prevention Programs	<u>Diabetes Prevention</u> <ul style="list-style-type: none"> ▪ Unduplicated patients > age 18 years participating in the National Diabetes Prevention Program ▪ Baseline and weekly BMI, nutritional intake and physical activity <u>Data Source:</u> National Diabetes Prevention Program Database
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The interventions proposed for PBCHD’s LIP project support Triple AIM objectives of better care, better health and reduced costs. In terms of “better care,” by increasing access and providing a medical home, the health centers are in a position to prevent illness and mitigate complications from advanced chronic and communicable conditions. Moreover, by targeting the uninsured and underserved, PBCHD promotes health equity, as these are the very populations experiencing the disparities. By augmenting an existing system, as is the case with PBCHD’s network of FQHC sites, efficient operations are readily attainable. Regarding “better health,” the above efforts promote prevention. The ER diversion and homeless resource center onsite clinic facilitate identification of mental health and substance abuse issues and appropriate referral to area partners. The disease management and prevention programs emphasize practical healthy lifestyle changes to improve health conditions. Finally, related to “costs,” steps to provide better care resulting in better health intuitively reduces utilization of costly interventions.

17. Describe data collection and reporting capabilities including systems and staffing resources, provide a reporting template:

The PBCHD uses the Florida Department of Health’s Health Management System (HMS) as its electronic management system. HMS’ report portal offers a myriad of reports that allow management to monitor programs, systems, and health outcomes. The portal includes Uniform Data System (UDS) reports to streamline the sharing of mandatory information with HRSA. In addition, data are collected and analyzed through chart audits as part of the agency’s quality assurance program. Dental and medical data collection is conducted by frontline staff who enter encounter data and diagnoses. Dental reporting is managed by the Dental Administrative Offices who use internal staff consisting of an administrative assistant, staff assistant, senior clerk, and dental director to access the HMS reporting model. Medical reporting is managed on a quarterly basis by the Health Access Director, with Health Center staff able to run their own reports onsite as needed. In addition, the Dental office performs the quality assurance functions by conducting chart audits while a medical QI team conducts the monthly medical chart audits.

The various reports accessible to staff will be sufficient to efficiently and effectively produce needed reports. The reporting template would resemble the table below.

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Dental						
Clinic Name	Unduplicated Patients	Patient Encounters	% Homeless			
Homeless Program						
West Palm Bch	XXX	XXX	XXX			
Lantana/Lk Worth	XXX	XXX	XXX			
Northeast	XXX	XXX	XXX			
Uninsured Program (beginning FY 2)						
West Palm Bch	XXX	XXX	XXX			
Lantana/Lk Worth	XXX	XXX	XXX			
Northeast	XXX	XXX	XXX			
Medical						
Clinic Name	Unduplicated Patients	Patient Encounters	% ER Diversion	Chronic Disease Mgmt	1st Trimest. Prenatal Care	Women's Hlth Screens
Homeless Res Ctr	XXX	XXX	XXX			
Jupiter	XXX	XXX			XXX	
Pahokee				XXX		XXX
Northeast			XXX	XXX		
Chronic Disease Prevention						
Clinic Name	Unduplicated Patients	Patient Encounters	Weight	Food Intake	Physical Activity	
West Palm Bch	XXX	XXX	XXX	XXX	XXX	
Lantana/Lk Worth	XXX	XXX	XXX	XXX	XXX	

18. Provide a letter of commitment from the local match fund source on that entity's letterhead:

See Attachment 3. Please note that since the issuance of the letter, the match amount has decreased from \$1,497,291 to \$1,423,935.

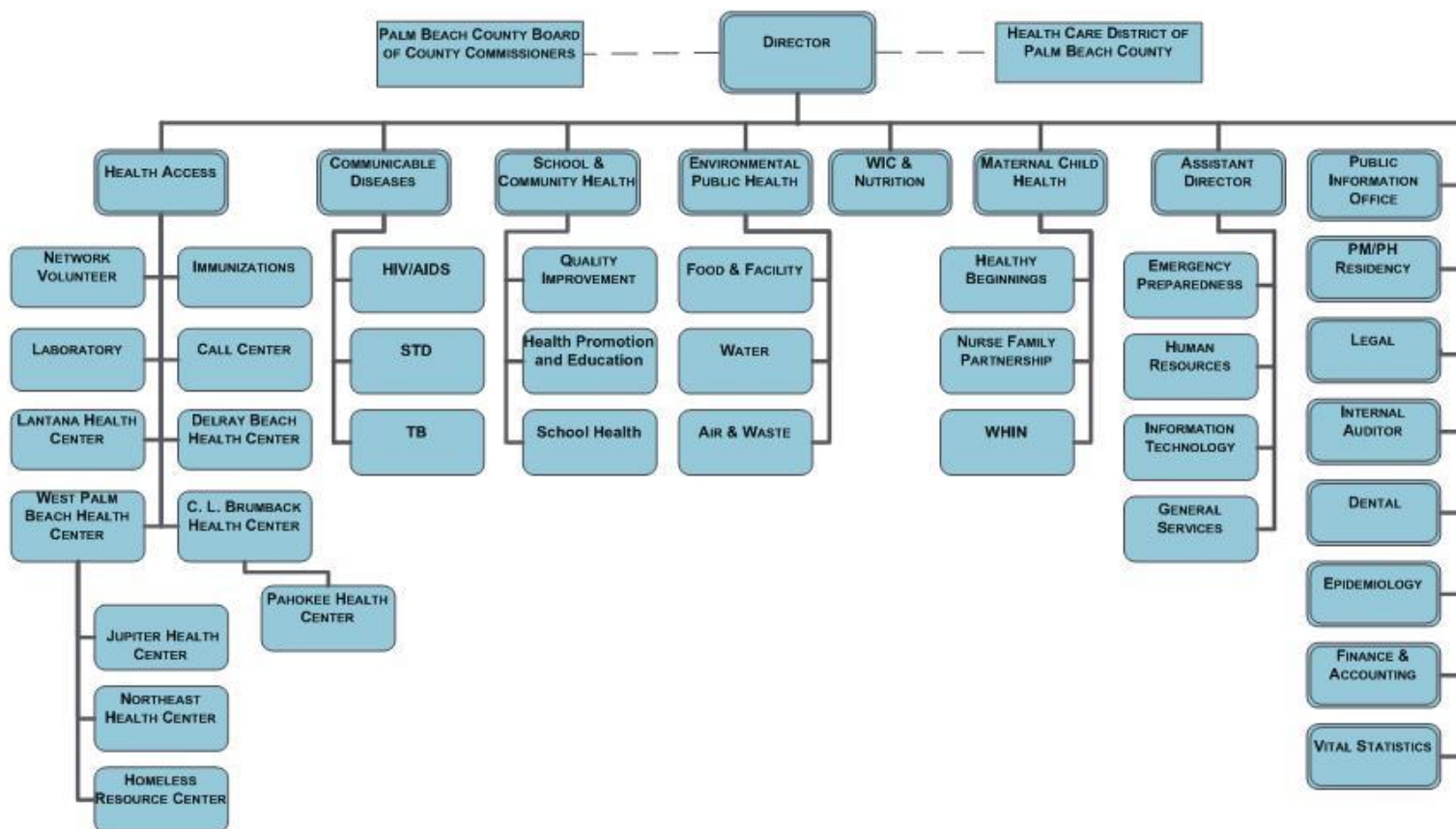
Please see attach excel document with itemized project budget and associated attachments.

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800 CLEMATIS STREET, WEST PALM BEACH, FL 33401-5107
www.pbchd.com

ORGANIZATIONAL CHART



“CHAMPIONS FOR THE HEALTHIEST COMMUNITY IN THE NATION”

Palm Beach County Health Department
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Prediabetes You Could Be at Risk

Prediabetes means your blood glucose (sugar) is higher than normal, but not yet diabetes. Diabetes is a serious disease, which can cause heart attack, stroke, blindness, kidney failure, or loss of toes, feet or legs. Type 2 diabetes can be delayed or prevented in people with prediabetes, however, through effective lifestyle programs. Take the first step. Find out your risk for prediabetes.

Take the Test — Know Your Score!

Answer these seven simple questions. For each “Yes” answer, add the number of points listed. All “No” answers are 0 points.

	Yes	No
Are you a woman who has had a baby weighing more than 9 pounds at birth?	1	0
Do you have a sister or brother with diabetes?	1	0
Do you have a parent with diabetes?	1	0
Find your height on the chart. Do you weigh as much as or more than the weight listed for your height? (See chart below)	5	0
Are you younger than 65 years of age and get little or no exercise in a typical day?	5	0
Are you between 45 and 64 years of age?	5	0
Are you 65 years of age or older?	9	0

Total points for all “yes” responses:

At-Risk Weight Chart

Height	Weight (in Pounds)	Height	Weight (in Pounds)
4’10”	129	5’8”	177
4’11”	133	5’9”	182
5’0”	138	5’10”	188
5’1”	143	5’11”	193
5’2”	147	6’0”	199
5’3”	152	6’1”	204
5’4”	157	6’2”	210
5’5”	162	6’3”	216
5’6”	167		
5’7”	172		

**Palm Beach County Health Department
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Know Your Score

9 or more points: High risk for having prediabetes now. Please bring this form to your health care provider soon.

3 to 8 points: Probably not at high risk for having prediabetes now. To keep your risk level below high risk:

- If you're overweight, lose weight
- Be active most days
- Don't use tobacco
- Eat low-fat meals including fruits, vegetables, and whole-grain foods
- If you have high cholesterol or high blood pressure, talk to your health care provider about your risk for type 2 diabetes

What if I Scored a '9' or Higher on the Test? How Can I Get Tested for Prediabetes?

Individual or group health insurance: See your health care provider. If you don't have a provider, ask your insurance company about providers who take your insurance. Deductibles and copays may apply.

Medicaid: See your health care provider. If you don't have a provider, contact a state Medicaid office or contact your local health department.

Medicare: See your health care provider. Medicare will pay the cost of testing if the provider has a reason for testing. If you don't have a provider, contact your local health department.

No insurance: Contact your local health department for more information about where you could be tested or call your local health clinic.

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Health Care District
PALM BEACH COUNTY

| DEDICATED TO THE HEALTH OF OUR COMMUNITY |

| www.hcdpbc.org

July 30, 2012

To whom it may concern,

On behalf of the Health Care District of Palm Beach County, I am pleased to provide this letter of commitment to the Agency for Health Care Administration for the 2012-2013 Low Income Pool Tier-One Milestone (STC 61) Application that is being submitted by the Palm Beach County Health Department.

The Palm Beach County Health Department proposes to build out a six-chair dental operatory in its Northeast Health Center. Additionally, their application will support expansion of dental services at the West Palm Beach and Lantana Health Centers for the homeless; expand women's health services at their newly renovated Pahokee Glades Health Center, and provide an emergency room diversion medical practice at Northeast Health Center in Riviera Beach and staffing for the newly opened Lewis Homeless Resource Center on 45th Street in West Palm Beach. The proposal also expands maternity services at the Jupiter Health Center.

The Health Care District commits to provide the local match for the application. The amount of the local match is \$ \$1,497,291

The Health Care District is a local taxing authority, codified under the statutes of the state of Florida, and is eligible to provide the local match for this application.

Sincerely,

A handwritten signature in cursive script that reads "R. Wiewora".

Ronald J. Wiewora, MD, MPH, FACP, FACPM
Chief Executive Officer

ATTACHMENT 2

BUDGET DETAIL

Year 1: July 2012-June 2013

Palm Beach CHD - Lip tier-One Milestone

Statement of Revenues and Expenses	Total Project Year 1	WPB Dental	Northeast Dental	Lantana Dental	Northeast Medical	Pahokee Medical	Homeless Ctr. Medical	Jupiter Health Center	Chronic Disease Prevention
GRANT REVENUE									
IGT Match (42.27%)	1,423,935	40,438	683,927	44,078	184,839	180,825	167,031	101,227	21,570
Federal Match (57.73%)	1,944,728	55,228	934,069	60,199	252,442	246,960	228,121	138,250	29,459
Total Grant Revenue	3,368,663	95,666	1,617,996	104,277	437,281	427,785	395,152	239,477	51,029
GRANT EXPENSES									
Salary and Wages	938,239	61,868	-	68,325	224,736	230,159	227,955	95,852	29,344
Benefits	300,237	19,798	-	21,865	71,916	73,651	72,945	30,673	9,389
Supplies	423,198	12,223	-	12,310	107,345	105,478	80,032	94,714	11,096
Equipment	284,700	-	283,500	-	-	-	-	-	1,200
Contractual	87,793	1,777	-	1,777	33,284	18,497	14,220	18,238	-
Construction	1,334,496		1,334,496					-	-
Total Grant Expenses	3,368,663	95,666	1,617,996	104,277	437,281	427,785	395,152	239,477	51,029

BUDGET DETAIL

Year 2: July 2013-June 2014

Palm Beach CHD - Lip tier-One Milestone

Statement of Revenues and Expenses	Total Project Year 2	WPB Dental	Northeast Dental	Lantana Dental	Northeast Medical	Pahokee Medical	Homeless Ctr. Medical	Jupiter Health Center	Chronic Disease Prevention
GRANT REVENUE									
IGT Match (42.27%)	911,289	40,470	172,178	44,110	184,890	180,798	167,082	101,200	20,561
Federal Match (57.73%)	1,244,587	55,271	235,152	60,242	252,513	246,923	228,192	138,213	28,081
Total Grant Revenue	2,155,876	95,741	407,330	104,352	437,403	427,721	395,274	239,413	48,642
GRANT EXPENSES									
Salary and Wages	1,195,057	61,868	256,818	68,325	224,736	230,159	227,955	95,852	29,344
Benefits	382,407	19,798	82,182	21,865	71,913	73,648	72,942	30,670	9,389
Supplies	486,731	12,298	64,442	12,385	107,470	105,417	80,157	94,653	9,909
Equipment	-	-	-	-	-	-	-	-	-
Contractual	91,681	1,777	3,888	1,777	33,284	18,497	14,220	18,238	-
Construction	-								
Total Grant Expenses	2,155,876	95,741	407,330	104,352	437,403	427,721	395,274	239,413	48,642