

RAN CARE

2017 ANNUAL REPORT

DEDICATION. HARD WORK. GROWTH.

RAN CARE
OF FLORIDA, INC.





TABLE OF CONTENTS

3	2017 BOARD OF DIRECTORS	GROUNDBREAKINGS & GRAND OPENINGS	BECAUSE PAN CARES
3	CLINIC LOCATIONS & FUTURE OPENINGS	8	12
4	A NOTE FROM THE PRESIDENT/CEO	COMMUNITY IMPACT	Hurricane Harvey Relief in Katy, TX
5	ABOUT US	9	ACCREDITATIONS & ASSOCIATIONS
	2017 STATISTICS	9	13
6	Patients by Race & Ethnicity	9	Florida Association of Community Health Centers
6	Patients by Income as Percent of Poverty Level	9	14
6	Patients by Principle Third Party Payer Source & Age Range	9	History of Community Health Centers in America
7	2017 Encounters at a Glance	10	14
7	2017 Financial Highlights	10	Accreditation Association for Ambulatory Health Care
		10	14
		ECONOMIC IMPACT	Patient-Centered Medical Home
		11	15
		11	FUTURE PLANS
		EMPOWERING & EQUIPPING	
		11	
		11	
		Fighting Colorectal Cancer	
		Diabetes Self-Management Education Program	

BOARD OF DIRECTORS

PRESIDENT/CEO

R. Michael Hill

OFFICERS CHAIR

Ruth Phren

VICE CHAIR

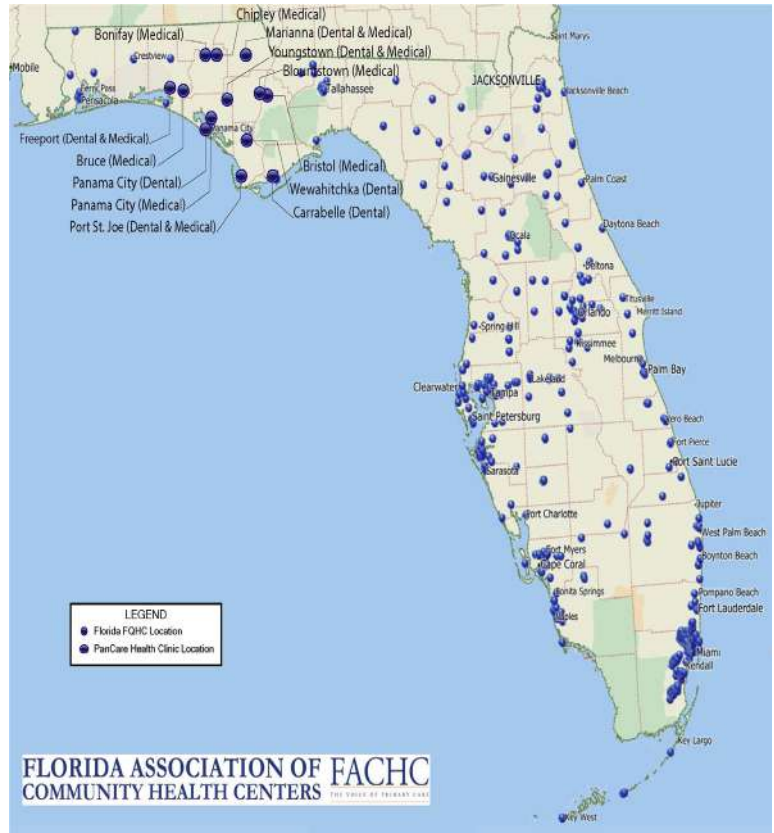
Ron Hardy

SECRETARY/ TREASURER

Hiep Le

DIRECTORS

Dottie Avery
Mary Brewington
Judy Bryte
Kay Daniel
Jonas Douglas
Lucia Esquivel
Ward McDaniel
Leon Miller
Maria Pouncey
Willie Ramsey
Dave Rutenberg
Freida Thibodeau



CLINICS & OPENINGS

CURRENT CLINICS

BLOUNTSTOWN (CALHOUN COUNTY)

PanCare Health (Medical & Behavioral Health)
16875 North Cayson Street | (850) 674-2244

BONIFAY (HOLMES COUNTY)

PanCare Health (Medical & Behavioral Health)
495 St. Johns Road | (850) 547-5547

BRUCE (WALTON COUNTY)

Muscogee Creek Tribal Health Center (Medical & Behavioral Health)
278 A Church Road | (850) 835-1015

BRISTOL (LIBERTY COUNTY)

PanCare Health (Medical & Behavioral Health)
11033 NW State Road 20 | (850) 643-1155

CARRABELLE (FRANKLIN COUNTY)

PanCare Health (Dental)
106 NE 5th Street | (850) 697-5000

CHIPLEY (WASHINGTON COUNTY)

PanCare Health (Medical & Behavioral Health)
1414 Main Street, Suite 4 | (850) 676-4926

FREEPORT (WALTON COUNTY)

PanCare Health (Medical, Dental, & Behavioral Health)
479 East Highway 20 | (850) 880-6568

MARIANNA (JACKSON COUNTY)

PanCare Health (Medical, Dental & Behavioral Health)
4126 Independent Drive | (850) 394-4907

PANAMA CITY (BAY COUNTY)

PanCare Health (Medical & Behavioral Health)
2309 East 15th Street | (850) 747-5272

PanCare Health (Dental)

403 East 11th Street | (850) 767-3350

PORT ST. JOE (GULF COUNTY)

PanCare Health (Medical Dental & Behavioral Health)
2475 Garrison Avenue | (850) 229-1043

WEWAHITCHKA (GULF COUNTY)

PanCare Health (Dental)
807 West Highway 22 | (850) 639-2028

FUTURE 2018 OPENINGS

YOUNGSTOWN (BAY COUNTY)

PanCare Health (Medical, Dental, & Behavioral Health)
12427 Highway 231 | (850) 753-3246

A NOTE FROM THE PRESIDENT/CEO



The year 2017 has been a great year for PanCare. We have continued to expand and grow at a phenomenal rate adding new clinical sites and personnel to the PanCare organization. Today PanCare's 140 employees serve a nine county area in 17 clinic locations and operate a fleet of five mobile clinics throughout northwest Florida.

None of PanCare's success would

have been possible without each employee's individual contribution and support of its mission of providing a comprehensive system of quality health care services which are easy accessible to all persons and families within its service area. As 2017 ends and a new year begins, we reflect on the year's accomplishments, both personal and professional, and celebrate our achievements.

It is an honor and personally rewarding for me to work with such a dedicated group of individuals who make-up the PanCare organization. Please join with me in celebrating our 2017 successes as we continue to expand health care access for all in our nine county service area. Among our key activities and achievements in 2017, PanCare has accomplished the following:

- Grown to exceed 140 employees providing primary care, behavioral health and dental services in a network consisting of ten medical and seven dental clinics.
- Provided 85,000 healthcare encounters consisting of primary medical care and behavioral health and dental services to 25,000 unique individual patients.
- Acquired and renovated a building with the award of a new access point competitive grant by HRSA to operate a comprehensive medical facility providing primary care, behavioral health and dental services for Jackson County and Marianna.
- Expanded PanCare's school dental services program to students in Gulf and Franklin Counties and opened a school based dental clinic in East Point, Florida.

- In cooperation with Bay District Public Schools established Behavioral Health Services at CC Washington Academy and Rosenwald High School and school based medical clinics at Lucille Moore and Springfield Elementary Schools to begin in January 2018.
- Expanded the Mobile Clinic program to five units with a dedicated full-time bilingual staff to manage and serve rural Northwest Florida. Loaned a mobile medical unit to Katy Clinic - Spring Branch Community Health Center | Houston, Texas for use following Hurricane Harvey for 90 days.
- Expanded the 340-B prescription drug program to include several regional and local pharmacy partners.
- Received a service expansion grant to establish Telehealth services at all PanCare fixed and mobile locations.
- Hosted Stand Up for Veterans events in all PanCare facilities and participated in two Veteran Stand Downs seeing 524 Veterans.
- Provided medical and dental services to 272 migrant families at health fairs in conjunction with Panhandle Area Education Collaborative and the Florida based Mexican Consulate in Quincy, Florida.

PanCare's Board and I remain deeply committed to supporting and benefitting our communities by providing high quality healthcare services to our patients through research, education, outreach and strategic investment. We are grateful for continued support in helping PanCare achieve its goals and look forward to new opportunities in the coming year.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Hill". The signature is stylized and cursive.

R. Michael Hill,
President & CEO

ABOUT US & MISSION



ABOUT US

PanCare of Florida, Inc. (a.k.a. PanCare Health or PanCare) is a 501(c)(3) nonprofit organization based in Panama City. PanCare is committed to providing affordable primary and specialty medical, dental, and behavioral health care services to rural communities throughout Northwest Florida. We operate Federally Qualified Health Centers (FQHCs) in Bay, Calhoun, Franklin, Gulf, Holmes, Liberty, Walton, and Washington counties primarily to serve people on Medicaid, Medicare, and those who are uninsured. Our clinics are located in Blountstown, Bonifay, Bristol, Bruce, Carrabelle, Chipley, Freeport, Panama City, Port St. Joe, and Wewahitchka. PanCare also operates mobile units since many families and assisted living/nursing home residents (especially Medicaid recipients who need dental services) are unable to travel to our facilities for needed care. In addition to

Medicaid, Medicare, and many private health insurance plans for adults and children, PanCare provides services on a sliding fee scale basis for those who are uninsured. In keeping with our commitment to providing services to those in need, we never charge travel or setup fees to any host organization or patient served.

OUR MISSION

PanCare is committed to providing a comprehensive system of quality health care services which is easily accessed by all persons and families within our service areas through an efficient, community-based network of caring professionals who ensure the dignity and respect of each individual they serve.

2017 PATIENT ENCOUNTERS & PROFILES

PATIENTS BY RACE & ETHNICITY

DEMOGRAPHIC CHARACTERISTICS				
RACE	HISPANIC / LATINO	NON-HISPANIC / LATINO	UNREPORTED / REFUSED TO REPORT	TOTAL
Asian	12	277	-	289
Native Hawaiian	1	17	-	18
Other Pacific Islander	14	88	-	102
Black/African American	48	4,109	-	4,157
American Indian/Alaska Native	18	388	-	406
White	464	15,434	-	15,898
More Than One Race	72	215	-	287
Unreported / Refused to Report Race	739	1,095	503	2,337
TOTAL PATIENTS BY RACE	1,368	21,623	503	23,494

PATIENTS BY INCOME AS PERCENT OF POVERTY LEVEL

% OF POVERTY LEVEL	TOTAL
100% and Below	15,623
101 - 150 %	743
151 - 200 %	697
Over 200 %	1,552
Unknown	4,879
TOTAL PATIENTS BY POVERTY LEVEL	23,494

PATIENTS BY PRINCIPLE THIRD PARTY PAYER SOURCE & AGE RANGE

THIRD PARTY PAYER SOURCE	AGE RANGE IN YEARS		TOTAL
	0-17	18+	
TOTAL NONE / UNINSURED	2,092	6,868	8,960
Regular Medicaid (Title XIX)	5,460	5,564	11,024
CHIP Medicaid	174	0	174
TOTAL MEDICAID	5,634	5,564	11,198
Dually Eligible (Medicare & Medicaid)*	1	1,371	1,372
Medicare (Inclusive of Dually Eligible and Other Title XVIII Beneficiaries)	1	1,371	1,372
Other Public Insurance Non-CHIP (Specify: County Jail Inmates)	0	158	158
Other Public Insurance CHIP	0	0	0
TOTAL PUBLIC INSURANCE	0	158	158
TOTAL PRIVATE INSURANCE	316	1,490	1,806
TOTAL	8,043	15,451	23,494

ENCOUNTERS AT **A GLANCE**

MEDICAL	41,001
DENTAL	34,201
BEHAVIORAL HEALTH	2,210
TOTAL ENCOUNTERS	77,412
TOTAL UNIQUE PATIENTS	23,494

2017 FINANCIAL **HIGHLIGHTS**

HEALTH & HUMAN SERVICES GRANT (Medical, Dental & Behavioral Health)	\$ 7,187,012
GIFTS / IN-KIND GOODS (Direct Relief Supplies)	\$ 1,962,133
ALLOWANCES / DISCOUNTS TO PATIENTS	\$ 11,134,220



GROUNDBREAKINGS & GRAND OPENINGS

PANCARE OPENS NEW CLINIC IN MARIANNA, FLORIDA

On September 19th, PanCare celebrated the opening of our newest healthcare facility in Marianna with a ribbon cutting and Grand Opening. The clinic, located on Independence Drive, provides medical, dental, and behavioral health services to those on Medicaid, Medicare, privately insured, and uninsured.

The project was funded by a \$1.8 million federal grant, allowing us to establish a new facility to serve patients in and around Jackson County with much needed and affordable health care. The facility

employs 9 people and anticipates serving approximately 3,000 patients in its first year.

PanCare's President and CEO, Mike Hill stated, "We enhance the medical community and access to care for people in need who may not have the resources to go to a private doctor or who don't have insurance."



COMMUNITY IMPACT

Throughout 2017, PanCare reached out to U.S. veterans and migrant workers, some of whom are homeless, by providing complimentary medical and dental services. These services were available, free of charge, to veterans during *Stand Down* events throughout North Florida and during PanCare's annual

Veterans Day *Stand Up for Veterans* celebrations at PanCare Clinics throughout the Florida Panhandle. In addition, migrant workers received medical and dental services, free of charge, on our mobile medical clinics at health fairs for migrant workers in North Florida.

VETERANS THAT RECEIVED COMPLIMENTARY MEDICAL & DENTAL SERVICES IN 2017

DATE	EVENT	MEDICAL	DENTAL
April 21 - 22	<i>Stand Down</i> - Tallahassee, FL	N/A	60
November 3	<i>Stand Down</i> - Fort Walton Beach, FL	N/A	22
November 3	<i>Stand Up for Veterans</i> - Panama City, FL	23	108
November 17	<i>Stand Up for Veterans</i> - Freeport, Port St Joe, Wewahitchka, Marianna, Chipley, Blountstown, Bristol, & Carrabelle, FL	4	96
TOTAL		27	286

MIGRANTS THAT RECEIVED COMPLIMENTARY MEDICAL & DENTAL SERVICES IN 2017

DATE	LOCATION	MEDICAL	DENTAL
June 19 - 20	Quincy, FL	158	141
October 28	Greensboro, FL	51	63
TOTAL		209	204

HOMELESS THAT RECEIVED COMPLIMENTARY MEDICAL SERVICES IN 2017

DATE	LOCATION	MEDICAL
June 24	Panama City, FL	35
October 21	Panama City, FL	35
TOTAL		70

TOTAL VETERANS, MIGRANTS & HOMELESS THAT RECEIVED COMPLIMENTARY MEDICAL & DENTAL SERVICES IN 2017

	MEDICAL	DENTAL
Veterans	27	286
Migrant Workers	209	204
Homeless	0	70
TOTAL	236	560

TOTAL AT A
GLANCE

ECONOMIC IMPACT

PANCARE HEALTH'S \$24 MILLION ECONOMIC IMPACT

Florida's federally qualified health centers (FQHCs) have provided comprehensive, culturally competent, high quality primary health care services to medically underserved communities for more than 45 years. There are 49 Florida FQHCs that treat 1.4 million patients at more than 485 locations statewide. Sites also include mobile medical, dental, and vision units.

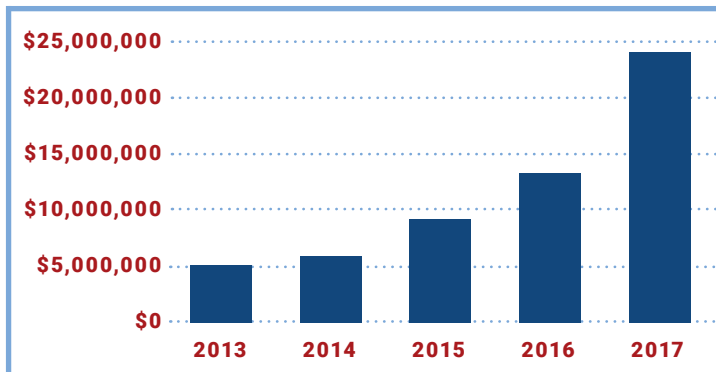
PanCare of Florida operates 17 locations across the Florida Panhandle (Bay, Calhoun, Franklin, Gulf, Holmes, Jackson, Liberty, Walton, and Washington Counties), including four mobile units. These sites provided 77,412 visits to 23,494 unduplicated patients in 2017 – of which 72.6% of those patients reporting their status had incomes at or below 200% of the poverty level and 85.8% of patients were either covered by Medicaid or had no insurance at all. Using IMPLAN modeling software, the state primary care

association, the Florida Association of Community Health Centers (FACHC), has determined the overall estimated economic impact of PanCare Health will be \$24.0 million in 2017.

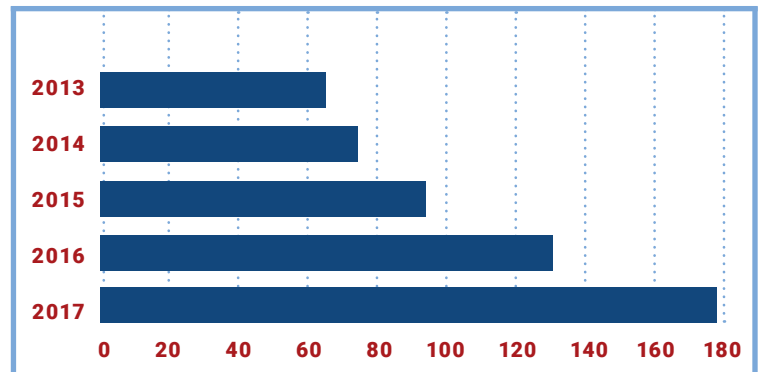
There is an additional return on investment of \$0.67 for each \$1.00 invested in PanCare.

PanCare Health acts as a valuable employer, accounting for 178 jobs in 2017 throughout their service area. In addition to the 104 positions at the health center (direct jobs), the 17 locations also contribute to 74 additional indirect/induced jobs as a result of respending of monies throughout the community, at large.

**PANCARE HEALTH ECONOMIC
IMPACT 2013 - 2017 (EST)**



**PANCARE HEALTH JOB
CREATION 2013 - 2017**



COUNTY	ECONOMIC IMPACT	JOB CREATION	ROI
Bay	\$18,124,663	120	\$0.77
Calhoun	\$515,717	5	\$0.32
Franklin	\$421,401	4	\$0.59
Gulf	\$1,104,180	15	\$0.53
Holmes	\$417,254	4	\$0.27
Jackson	\$1,561,952	8	\$0.31
Liberty	\$479,981	6	\$0.20
Walton	\$888,932	11	\$0.68
Washington	\$517,644	5	\$0.38
TOTAL	\$24,031,722	178	\$4.05

IMPACT AT A GLANCE

PANCARE'S EMPLOYEE & PAYROLL GROWTH IN 2017

MONTH	EMPLOYEES	PAYROLL
January 2017	109	\$506,623
December 2017	129	\$646,855

EMPOWERING & EQUIPPING

PANCARE EMPOWERS PATIENTS TO FIGHT COLORECTAL CANCER

According to the American Cancer Society, the second most common cancer deaths are the result of colorectal cancer. It can be prevented, treated, and cured, before it worsens.

In 2017, 720 of PanCare's patients between the ages of 50-75 were given a simple, inexpensive colorectal cancer screening test kit to be completed in the privacy of their home. This test makes screening easier because there are no diet or drug restrictions, and it is a convenient, user-friendly take home kit. Of the 720 test kits given out 44 came back with positive results. This positive result is a warning sign that requires additional follow up.

PanCare's goal is to deliver coordinated, quality colorectal cancer screening and follow up care that engages the patient and empowers them to complete needed care from screening throughout treatment and long-term follow up.

PanCare continues to work with the American Cancer Society to advance Florida's efforts to reach 80% by 2018, a national campaign to increase colorectal cancer screening to 80% among adults age 50 and older.

DIABETES SELF-MANAGEMENT EDUCATION PROGRAM

PanCare's Diabetes Self-Management Education (DSME) program is accredited by American Association of Diabetes Educators (AADE) and is delivered through individual visits with our diabetes educators. We are thrilled to be able to provide this program at our clinics throughout the Panhandle as part of our commitment to the

community and providing education and training to assist our patients in managing their diabetes.

The content of each educational session is tailored to meet each individual's need. The education sessions include videos, demonstrations, and free materials to take home and review. These classes are excellent for individuals who have been newly diagnosed with diabetes, as well as, those who have had diabetes for many years. There is a lot to learn and the classes provide valuable information that cannot be learned at regular clinic appointments. Attending these classes helps our patients stay up to date on new information, medications, etc., that encourage and assist them to manage his/her diabetes.

Successes:

- 769 scheduled appointments in 2017.
- A woman lost 18 pounds and her A1C dropped from 8.9 to 7.1.
- A man's A1C went from 13.4 to 7.4 in 3 months.
- A man lost 23 pounds and his A1C dropped from 7.0 to 6.4 in 4 months.

We are excited and encouraged with these results and are looking forward to more success stories in 2018.





PANCARE AIDS IN HURRICANE HARVEY **RELIEF**

In late August, Hurricane Harvey made landfall near Corpus Christi, Texas. Harvey's effects were widespread and decimated the Spring Branch Community Health Center in Katy, Texas, located about 30 miles west of Houston.

When the PanCare leadership team learned of the destruction of the Spring Branch facility, we knew we must jump into action and assist. We assembled a small team that drove through the night to deliver a mobile medical clinic to Katy, Texas, providing immediate access to medical care to the residents of this small community.

According to Sean Golder, Regional Operations Manager, "The Spring Branch facility provides primary health care for several hundred people in that community. With the clinic out of operation, the local folks had nowhere to go, so they were chomping at the bit to receive care."

PanCare delivered one of its medical mobile buses and left it in Katy until the Texas clinic could reopen months later.



ACCREDITATIONS, ASSOCIATIONS, & MORE

FLORIDA ASSOCIATION OF COMMUNITY HEALTH CENTERS

The Florida Association of Community Health Centers (FACHC) is designated as Florida's Primary Care Association (PCA). The mission of FACHC is to improve access to quality health services by bringing together agencies, legislators and key persons who are able to affect health care services. Learn more about FACHC and the Federally Qualified Health Centers (FQHCs) detailed in this report at www.fachc.org. To learn more about FQHCs visit the U.S. Bureau of Primary Care (BPHC) website at www.bphc.hrsa.gov/index.html.

Florida's Federally Qualified Health Centers (FQHCs) have provided comprehensive, culturally competent, quality primary health care services to medically underserved communities for more than 45 years. Sites include brick- and-mortar clinics as well as mobile medical, dental, and vision units.

FACHC understands that the leading goal of Florida's Federally Qualified Health Centers (FQHCs) is to provide quality primary healthcare services to the various underserved, uninsured, and/or special populations that they serve. This goal would be unattainable if not for dedicated clinical staff ensuring that all Floridians, regardless of insurance or income status, have a permanent medical home.

A key component of FACHC's role in assisting Florida's FQHCs in their efforts to ensure the highest quality primary medical health care is providing training and technical assistance to the centers, while also coordinating with partners around the state, across the region, and throughout the nation.

There has always been a need to provide safe, affordable, and quality oral health services to Florida's population – whether or not they have health insurance. Education and awareness of the importance of proper oral health care has been increasing; likewise the need and demand for services has also increased. While Florida's FQHCs have been responding through expansion of facilities and staff, FACHC has increased its efforts to help centers and partners enhance the capacity needed to strengthen the Oral Health Safety Net.



HISTORY OF COMMUNITY HEALTH CENTERS IN AMERICA

America's health centers owe their existence to a remarkable turn of events in U.S. history and to a number of determined community health and civil rights activists who fought more than 50 years ago to improve the lives of Americans living in deep poverty and in desperate need of health care.

Among those determined to change these conditions was H. Jack Geiger, then a young doctor and civil rights activist who, while studying in South Africa, witnessed how a unique community-based health care model had brought about astonishing health improvements for the poorest citizens of that country.

Moving on the opportunity presented by President Lyndon B. Johnson's War on Poverty initiatives in the early 1960s, Dr. Geiger and other health care pioneers submitted proposals to the federal Office of Economic Opportunity to establish health centers in medically underserved inner city and rural areas of the country based on the same health care model Geiger had studied in South Africa. Funding for the first two "Neighborhood Health Centers" (as they were then called) – one in Boston, Massachusetts, and the other in Mound Bayou, Mississippi – was approved in 1965, and the Community Health Centers Program was launched.

The health center model that emerged targeted the roots of poverty by combining the resources of local communities with federal funds to establish neighborhood clinics in both rural and urban areas around America. It was a formula that not only empowered communities to establish and direct health services at the local level via consumer-majority governing boards, but also generated compelling proof that affordable and accessible health care produced compounding benefits.

Community health centers serve as the primary medical home for 25 million people in 9,200 rural and urban communities across America. These community-based "family doctors" enjoy longstanding bipartisan support by administrations and policymakers at all levels, as well as in both the private and public sectors. (*Source: National Association of Community Health Centers*)



ACCREDITATION ASSOCIATION FOR AMBULATORY HEALTH CARE, INC.

The Accreditation Association for Ambulatory Health Care, founded in 1979, is the leader in ambulatory health care accreditation with more than 6,000 organizations accredited nationwide. AAAHC accredits a variety of organizations including ambulatory surgery centers, office-based surgery centers, endoscopy centers, student health centers, military health care clinics, and large medical and dental practices. AAAHC serves as an advocate for the provision of high-quality health care through the development of nationally recognized standards and through its survey and accreditation programs. AAAHC accreditation is recognized as a symbol of quality by third-party payers, medical organizations, liability insurance companies, state and federal agencies, and the public.



PATIENT-CENTERED MEDICAL HOME

PanCare is accredited by the Accreditation Association for Ambulatory Health Care (AAAHC) as a Patient-Centered Medical Home (PCMH). This is a mark of excellence honoring the fact that PanCare Health adopts best practices and complies with nationally recognized standards of care.

The PCMH is a model of care in which patients are engaged in a direct relationship with a chosen provider who coordinates a cooperative team of healthcare professionals, takes collective responsibility for the comprehensive integrated care provided to the patient, and advocates and arranges appropriate care with other qualified providers and community resources as needed.

The PCMH encompasses five functions and attributes: Comprehensive Care; Patient-Centered; Coordinated Care; Accessible Services; Quality and Safety.

PLANNING FOR THE **FUTURE**

PanCare of Florida has many plans to grow and expand their facilities and services in 2018. Those plans include continuing the promotion of telehealth services. Telehealth encompasses a broad variety of technologies and tactics to deliver virtual medical health and education services. Telehealth is a means to enhance access to care and health education by overcoming transportation and other barriers experienced by underserved populations, especially in rural areas. Telehealth services can be used for primary care, dentistry, counseling and specialty medical care.

In the spring of 2018, PanCare will partner with Bay District Schools to provide a LPN at Springfield and Lucille Moore Elementary to perform school nurse services. In the fall of 2018, PanCare will expand the program to include telehealth medical and behavioral health services in select elementary schools.

In 2017, PanCare administered the 340-B Program through contractual agreements with numerous pharmacies in Panama City. The 340-B program was created to allow covered entities to

purchase drugs at a reduced rate in order to provide patients with affordable access to medications, as well as to maintain the comprehensive services they provide to their vulnerable patients. In 2018, PanCare will further expand patient access to affordable medications by opening our own retail pharmacy.

In the spring of 2018, PanCare plans to open a new \$1.25 million facility in Youngstown. The 4,300 square foot clinic will employ a staff of 9 including an Advanced Registered Nurse Practitioner, a Dentist and a Licensed Clinical Social Worker.





403 East 11th Street | Panama City, FL 32401
(850) 747-5599 | pancare@pancarefl.org
WWW.PANCAREFL.ORG

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