

AGENDA

BOARD OF DIRECTORS FINANCE AND FACILITIES COMMITTEE

January 22, 2022

4:00 – 5:00 PM



Zoom Meeting:

<https://zoom.us/j/96161703345?pwd=RGJQc24xQTNuNDIiViNyOFdiOXNVdz09>

Meeting ID: 961 6170 3345

Passcode: 970677

- I. WELCOME
- II. APPROVAL OF MINUTES (NOV & DEC MEETINGS)
- III. UPDATE TO COMMITTEE MEMBERSHIP
- IV. DECEMBER 2021 FINANCIALS
- V. 2022 CAPITAL BUDGET
- VI. POLICY AND PROCEDURES
 - Property Control Policy
 - Acceptable Use Policy
- VII. AUDIT UPDATES

Next Meeting: **Tuesday, February 15th 5:30 – 6:30 pm**

Investment Committee Meeting from 4:30 – 5:30 pm

Everyone deserves to go home.

Health Care for the Homeless

December 2021 Financial Results

Revenue:

- Overall revenue unfavorable to budget by (\$2.1M) primarily driven by Patient Service revenue.
- Grants – Unfavorable to budget (\$253k) through December. As we finalize audit schedules, expect this number to move slightly in a positive direction.
- Patient Service Revenue – Net PSR unfavorable to budget (\$1.8M)
 - Continuing to stabilize AthenaOne EMR and processes. December was hit hard by holidays and time off and was pretty much consistent with November billings (\$3k less)
- Contributions – below budget by (\$122k). Will also be finalizing private grant balances, expect some positive movement here as well.
- ACIS – At budget due to seeing a higher percentage of clients receiving qualifying services in a month compared to last year. Contract year goes from July 1 to June 30. Fully spent for year ending June 30, 2021 and new year began July 1, 2021.
- Other Sources – Favorable to budget \$83k –Pharmacy 340B rebate revenue slightly below budget and interest income slightly above budget

Expenses:

- Overall expenses \$1.2M favorable to budget driven primarily by salaries, benefits, and client assistance
- Salaries – Favorable to budget \$771k
 - Current active agency headcount of 229 vs. budget of 255 (26 favorable)
 - Approximately 25 open positions being actively recruited, 4 have recently been hired and have start dates.
- Employee benefits – favorable to budget by \$711k, due to lower than expected expenses as a percent of salary
- Contract Services – Unfavorable to budget (\$449k) – utilizing more temps to fill necessary positions while recruiting and unbudgeted EMR conversion expenses
- Pharmacy – Unfavorable to budget (\$671k) driven by higher number of total scripts
- Utilities – Unfavorable to budget (\$60k)
- Equipment – Unfavorable to budget (\$75k) because of additional necessary laptop purchases
- Remaining expense categories favorable to budget

Liquidity Management:

- All cash, including investments, equates to 201.8 DCOH. Operating cash on hand balances are 71.6 days.
- The lower operating DCOH are being impacted by
 - System conversion and catching up billings in the Athena system – have additional bandwidth helping work down the backlog
 - Grant receivables being worked as some city grant balances are experiencing end of year cyclical highs

Health Care for the Homeless
Statement of Activities
Dec-21
*** Draft Internal Statements - 1st Close**

	<u>Dec 21</u>	<u>Dec 21</u>			<u>Dec 20</u>		
	<u>Actual</u>	<u>Budget</u>	<u>Bud Var (\$)</u>	<u>Bud Var (%)</u>	<u>PY Actual</u>	<u>PY Var (\$)</u>	<u>PY Var (%)</u>
Grants	\$ 12,435,034	\$ 12,688,424	\$ (253,390)	-2%	\$ 11,727,242	\$ 707,792	6%
Patient Services, Net	\$ 6,434,674	\$ 8,259,086	\$ (1,824,412)	-22%	\$ 7,394,562	\$ (959,888)	-13%
Contributions	\$ 2,528,469	\$ 2,650,000	\$ (121,531)	-5%	\$ 3,045,799	\$ (517,330)	-17%
ACIS	\$ 1,062,114	\$ 1,076,543	\$ (14,429)	-1%	\$ 717,050	\$ 345,064	48%
Other Sources	\$ 4,497,576	\$ 4,415,004	\$ 82,572	2%	\$ 4,613,031	\$ (115,455)	-3%
Total Revenue	\$ 26,957,867	\$ 29,089,057	\$ (2,131,190)	-7%	\$ 27,497,684	\$ (539,817)	-2%
Salaries	\$ 14,877,680	\$ 15,648,461	\$ (770,781)	-5%	\$ 14,743,352	\$ 134,328	1%
Employee Benefits	\$ 3,357,783	\$ 4,068,600	\$ (710,817)	-17%	\$ 3,338,493	\$ 19,290	1%
Purchased Services	\$ -	\$ -	\$ -	0%	\$ 125,849	\$ (125,849)	-100%
Contract Services	\$ 702,698	\$ 253,348	\$ 449,350	177%	\$ 412,303	\$ 290,395	70%
Office Supplies	\$ 138,724	\$ 205,891	\$ (67,167)	-33%	\$ 207,369	\$ (68,645)	-33%
Client Assistance	\$ 2,603,651	\$ 3,172,508	\$ (568,856)	-18%	\$ 2,266,930	\$ 336,721	15%
Pharmacy	\$ 2,214,301	\$ 1,543,638	\$ 670,663	43%	\$ 1,552,531	\$ 661,770	43%
Medical Supplies	\$ 360,597	\$ 519,325	\$ (158,728)	-31%	\$ 473,919	\$ (113,322)	-24%
Business Operations	\$ 840,143	\$ 899,309	\$ (59,166)	-7%	\$ 811,689	\$ 28,454	4%
Staff Development	\$ 146,058	\$ 160,394	\$ (14,336)	-9%	\$ 182,387	\$ (36,329)	-20%
Building Operations	\$ 818,420	\$ 899,827	\$ (81,407)	-9%	\$ 833,031	\$ (14,611)	-2%
Utilities	\$ 390,030	\$ 330,372	\$ 59,658	18%	\$ 357,941	\$ 32,089	9%
Equipment	\$ 512,115	\$ 437,455	\$ 74,660	17%	\$ 496,015	\$ 16,100	3%
Fundraising Events	\$ 75,823	\$ 120,000	\$ (44,177)	-37%	\$ 193,186	\$ (117,363)	-61%
In-Kind Expense	\$ 37,097	\$ -	\$ 37,097	0%	\$ 139,854	\$ (102,757)	-73%
Interest Expense	\$ -	\$ -	\$ -	0%	\$ -	\$ -	0%
Depreciation	\$ 487,396	\$ 523,604	\$ (36,208)	-7%	\$ 507,657	\$ (20,261)	-4%
Total Operating Expenses	\$ 27,562,515	\$ 28,782,732	\$ (1,220,217)	-4%	\$ 26,642,506	\$ 920,009	3.5%
Net Operating Surplus (Shortfall)	\$ (604,648)	\$ 306,325	\$ (910,973)	-297%	\$ 855,178	\$ (1,459,826)	-171%
Unrealized Gain (Loss) Investments	\$ 593,670	\$ -	\$ 593,670		\$ 827,053	\$ (233,383)	-28%
Net Surplus (Deficit)	\$ (10,978)	\$ 306,325	\$ (317,303)	-104%	\$ 1,682,231	\$ (1,693,209)	-101%

Health Care for the Homeless
FTE Rollforward
12/31/2021

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Actual		8-Feb				6/7/2021					11/15/2021	
Beginning balance	218	214	209	210	208	206	206	215	227	229	224	229
Hired	2	8	5	2	1	3	11	18	5	3	9	3
Terminated	-6	-13	-4	-4	-3	-3	-2	-6	-3	-8	-4	-3
Ending balance	214	209	210	208	206	206	215	227	229	224	229	229
Budgeted FTEs:	218	221	225	230	234	240	245	250	255	255	255	255
FTE Variance to Budget*:	4	12	15	22	28	34	30	23	26	31	26	26

Patient Services Revenue
By Team and Location

December 2021 Revenue

# Encounters					Revenue					Billable Encounters		Billable Encounter Percentages			
Fallsway	2021 Budget	2021 YTD	2020 YTD	2021 YTD	2021 Budget Revenue	2020 Actual Revenue YTD	2021 Actual Revenue YTD	2021 Budget Revenue YTD	Actual to Budget Variance	2020 Actual Billable Encs YTD	2021 Actual Billable Encs YTD	2021 Billable %			
		Budget	Actual	Actual								Budget	YTD	YTD	YTD
Addictions	4,379	4,379	3,722	2,967	\$ 822,751	\$ 662,771	\$ 486,076	\$ 822,751	\$ (336,675)	2,931	2,169	-26.0%	79%	79%	73%
Behavioral Health	12,838	12,838	11,576	9,242	\$ 1,919,753	\$ 1,520,736	\$ 1,277,108	\$ 1,919,753	\$ (642,645)	7,313	5,888	-19.5%	63%	63%	64%
Dental	2,689	2,689	782	568	\$ 36,862	\$ 9,690	\$ 9,239	\$ 36,862	\$ (27,623)	100	88	-12.0%	13%	13%	15%
Medical	20,247	20,247	23,587	20,909	\$ 2,359,143	\$ 2,627,648	\$ 1,987,784	\$ 2,359,143	\$ (371,359)	11,976	9,966	-16.8%	49%	51%	48%
Nursing	4,806	4,806	5,017	5,181	\$ 589,785	\$ 574,651	\$ 554,437	\$ 589,785	\$ (35,348)	2,544	2,479	-2.6%	51%	51%	48%
Occupational Therapy	1,032	1,032	743	890	\$ -	\$ -	\$ -	\$ -	\$ -	-	-	#DIV/0!	0%	0%	0%
Pediatrics	3,082	3,082	3,043	2,262	\$ 117,957	\$ 115,197	\$ 76,446	\$ 117,957	\$ (41,511)	509	342	-32.8%	16%	17%	15%
Psychiatry	5,256	5,256	6,496	5,640	\$ 1,113,220	\$ 1,308,525	\$ 1,021,742	\$ 1,113,220	\$ (91,478)	6,107	4,943	-19.1%	94%	94%	88%
Supportive Housing	16,931	16,931	15,736	19,294	\$ 412,849	\$ 339,633	\$ 384,370	\$ 412,849	\$ (28,480)	1,549	1,605	3.6%	10%	10%	8%
Bene/CM/Outreach	11,373	11,373	12,129	14,287	\$ -	\$ 7,158,850	\$ 5,797,202	\$ -	\$ 5,797,202	33,029	27,480	-16.8%			
Fallsway Total	82,633	82,633	82,831	81,240	\$ -	\$ 1,505	\$ 3,222	\$ -	\$ 3,222	7	14	100.0%	0%		
					\$ 7,372,320	\$ 7,160,355	\$ 5,800,424	\$ 7,372,320	\$ (1,571,896)	33,036	27,494	-16.8%	39%	40%	34%
Baltimore County															
Behavioral Health	506	506	602	177	\$ 69,551	\$ 79,516	\$ 17,949	\$ 69,551	\$ (51,602)	351	78	-77.8%	58%	58%	44%
Medical	1,581	1,581	1,179	1,455	\$ 278,202	\$ 195,308	\$ 244,438	\$ 278,202	\$ (33,764)	932	1,180	26.6%	79%	79%	81%
Bene/CM/Outreach	1,048	1,048	814	510	\$ -	\$ -	\$ -	\$ -	\$ -	-	-	#DIV/0!	0%		
Baltimore County Total	3,135	3,135	2,595	2,142	\$ 347,753	\$ 274,824	\$ 262,387	\$ 347,753	\$ (85,366)	1,283	1,258	-1.9%	49%	49%	59%
ODB Dental															
	630	630	271	-	\$ 16,520	\$ 7,054	\$ -	\$ 16,520	\$ (16,520)	62	-	-100.0%	23%	0%	#DIV/0!
Mobile Clinic															
Behavioral Health	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	-	-	#DIV/0!	0%		
Medical	506	506	89	199	\$ 86,936	\$ 14,518	\$ 17,287	\$ 86,936	\$ (69,649)	69	147	113.0%	78%	78%	74%
Nursing	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	-	-	#DIV/0!	0%	0%	0%
Bene/CM/Outreach	506	506	90	7	\$ -	\$ -	\$ -	\$ -	\$ -	-	-	#DIV/0!			
Mobile Clinic Total	1,012	1,012	179	206	\$ 86,936	\$ 14,518	\$ 17,287	\$ 86,936	\$ (69,649)	69	147	113.0%	39%	39%	71%
CCP															
Behavioral Health	-	-	-	22	\$ -	\$ -	\$ 6,675	\$ -	\$ 6,675	-	60	#DIV/0!	0%		
Convalescent Care	3,938	3,938	4,025	1,888	\$ 434,688	\$ 427,423	\$ 232,808	\$ 434,688	\$ (201,881)	1,912	996	-47.9%	47%	48%	53%
Medical	-	-	81	106	\$ -	\$ 12,206	\$ 11,278	\$ -	\$ 11,278	59	45	-23.7%	0%		
Occupational Therapy	-	-	27	-	\$ -	\$ -	\$ -	\$ -	\$ -	-	-	#DIV/0!	0%	0%	0%
Bene/CM/Outreach	-	-	-	30	\$ -	\$ -	\$ -	\$ -	\$ -	-	-	#DIV/0!	0%		
CCP Total	3,938	3,938	4,133	2,046	\$ 434,688	\$ 439,628	\$ 250,761	\$ 434,688	\$ (183,928)	1,971	1,101	-44.1%	47%	48%	54%
West Baltimore															
Behavioral Health	782	782	722	979	\$ 130,406	\$ 114,856	\$ 150,184	\$ 130,406	\$ 19,777	507	660	30.2%	70%	70%	67%
Dental	1,063	1,063	199	-	\$ 21,735	\$ 3,798	\$ -	\$ 21,735	\$ (21,735)	51	-	-100.0%	26%	26%	0%
Medical	1,772	1,772	1,080	1,836	\$ 282,547	\$ 160,760	\$ 249,045	\$ 282,547	\$ (33,502)	781	1,194	52.9%	72%	72%	65%
Nursing	-	-	-	113	\$ -	\$ -	\$ 11,921	\$ -	\$ 11,921	-	55	#DIV/0!	0%	0%	49%
Bene/CM/Outreach	1,059	1,059	959	1,038	\$ -	\$ -	\$ 230	\$ -	\$ 230	-	1	#DIV/0!	0%	0%	0%
West Baltimore Total	4,676	4,676	2,960	3,966	\$ 434,688	\$ 279,413	\$ 411,380	\$ 434,688	\$ (23,309)	1,339	1,910	42.6%	45%	45%	48%
Total	96,024	96,024	92,969	89,600	\$ 8,692,905	\$ 8,175,793	\$ 6,742,238	\$ 8,692,905	\$ (1,950,667)	37,760	31,910	-15.5%	39.8%	40.6%	35.6%
Reserve at 5%					\$ (433,819)	\$ (408,790)	\$ (337,110)	\$ (433,819)	\$ 96,709						
Total Net revenue					\$ 8,259,086	\$ 7,767,003	\$ 6,405,128	\$ 8,259,086	\$ (1,853,958)						

Encounters by Department

Sorted by 2020 Encounters Agency Team Stats	YTD				Prior Month
	2020	2021	Diff	+/-	
Addictions	3,722	2,967	(755)	-20%	-36%
Dental	1,252	568	(684)	-55%	-72%
Supportive Housing	14,347	19,307	4,960	35%	42%
Medical	30,986	29,775	(1,211)	-4%	-11%
Mental Health	12,900	10,397	(2,503)	-19%	-24%
Psychiatry	6,496	5,640	(856)	-13%	-13%
Pediatrics	3,090	2,294	(796)	-26%	-32%
Occupational Therapy	770	890	120	16%	-14%
Convalescent Care	4,028	1,905	(2,123)	-53%	-50%
Case Management	10,552	13,343	2,791	26%	17%
Outreach	2,667	2,170	(497)	-19%	-3%
Benefits	770	344	(426)	-55%	-66%
Total Encounters	91,580	89,600	(1,980)	-2.2%	-6.6%

Fallsway	82,831	81,240	(1,591)	-2%	-6%
Baltimore County	2,595	2,142	(453)	-17%	-19%
ODB Dental	271	-	(271)	-100%	-100%
Mobile Clinic	179	206	27	15%	11%
CCP	4,133	2,046	(2,087)	-50%	-48%
West Baltimore	2,960	3,966	1,006	34%	19%








AGENCY ENCOUNTERS													
2019			YTD	2020			YTD	YTD Diff	2021			YTD	YTD Diff
Jan	9,918	9,918	Jan	9,283	9,918	-	0%	Jan	7,518	7,518	(2,400)	-24.2%	
Feb	8,460	18,378	Feb	8,261	18,179	(199)	-1%	Feb	7,042	14,560	(3,619)	-19.9%	
Mar	9,534	27,912	Mar	7,783	25,962	(1,950)	-7%	Mar	9,226	23,786	(2,176)	-8.4%	
Apr	10,355	38,267	Apr	6,803	32,765	(5,502)	-14%	Apr	8,851	32,637	(128)	-0.4%	
May	10,265	48,532	May	6,847	39,612	(8,920)	-18%	May	7,494	40,131	519	1.3%	
Jun	9,049	57,581	Jun	7,491	47,103	(10,478)	-18%	Jun	8,138	48,269	1,166	2.5%	
Jul	10,087	67,668	Jul	7,649	54,752	(12,916)	-19%	Jul	7,704	55,973	1,221	2.2%	
Aug	9,750	77,418	Aug	6,909	61,661	(15,757)	-20%	Aug	4,197	60,170	(1,491)	-2.4%	
Sep	8,993	86,411	Sep	7,385	69,046	(17,365)	-20%	Sep	6,408	66,578	(2,468)	-3.6%	
Oct	10,338	96,749	Oct	7,784	76,830	(19,919)	-21%	Oct	6,965	73,543	(3,287)	-4.3%	
Nov	8,381	105,130	Nov	6,952	83,782	(21,348)	-20%	Nov	8,052	81,595	(2,187)	-2.6%	
Dec	8,406	113,536	Dec	6,504	90,286	(23,250)	-20%	Dec	8,005	89,600	(686)	-0.8%	
Total	113,536		Total	89,651				Total	89,600				

**Health Care for the Homeless
Statement of Activities
12/31/2021**

	2021 Annual Budget	Stmt Period Budget	Stmt Period Actual	Stmt Period Variance	% Spent - Stmt Pd Actual/ Annual Budget
Revenue					
Grant Revenue					
	12,688,424.09	12,688,424.09	12,435,034.40	(253,389.69)	98.00%
Total Grant Revenue	12,688,424.09	12,688,424.09	12,435,034.40	(253,389.69)	98.00%
Patient Service Revenue					
	8,259,086.00	8,259,086.00	6,434,673.66	(1,824,412.34)	63.32%
Other Revenue					
Pharmacy Rebate	4,122,063.00	4,122,063.00	3,927,857.19	(194,205.81)	95.28%
Rental Income	15,000.00	15,000.00	14,400.00	(600.00)	96.00%
Fee for Service Revenue	179,951.00	179,951.00	219,939.50	39,988.50	122.22%
Interest Income - Operations	97,990.00	97,990.00	313,907.03	215,917.03	320.34%
Miscellaneous/Meaningful Use	0.00	0.00	21,472.51	615,142.21	0.00%
Total Other Revenue	4,415,004.00	4,415,004.00	4,497,576.23	676,241.93	115.32%
Contributions Revenue					
Total Contributions Revenue	2,650,000.00	2,650,000.00	2,528,469.40	(121,530.60)	95.41%
ACIS Revenue					
Total ACIS Revenue	1,076,543.00	1,076,543.00	1,062,113.70	(14,429.30)	98.66%
Total Revenue	29,089,057.09	29,089,057.09	26,957,867.39	(2,742,385.00)	90.57%
Expenses					
Salaries					
	15,648,461.25	15,648,461.25	14,877,680.41	770,780.84	95.07%
Total Salaries	15,648,461.25	15,648,461.25	14,877,680.41	770,780.84	95.07%
Benefits					
	4,068,599.90	4,068,599.90	3,357,782.90	710,817.00	82.52%
Total Benefits	4,068,599.90	4,068,599.90	3,357,782.90	710,817.00	82.53%
Client Assistance					
	3,172,507.68	3,172,507.68	2,603,651.41	568,856.27	82.06%
Total Client Assistance	3,172,507.68	3,172,507.68	2,603,651.41	568,856.27	82.07%
Pharmacy					
	1,543,638.00	1,543,638.00	2,214,300.74	(495,271.58)	132.08%
Total Pharmacy	1,543,638.00	1,543,638.00	2,214,300.74	(495,271.58)	132.08%
Building Operations					
	899,827.02	899,827.02	818,419.75	81,407.27	90.95%
Total Building Operations	899,827.02	899,827.02	818,419.75	81,407.27	90.95%
Business Operations					
Legal Fees	0.00	0.00	855.00	(855.00)	0.00%
Other	899,309.37	899,309.37	839,288.23	60,021.14	93.32%
Total Business Operations	899,309.37	899,309.37	840,143.23	59,166.14	93.42%
Depreciation					
	523,604.00	523,604.00	487,396.10	36,207.90	93.08%
Total Depreciation	523,604.00	523,604.00	487,396.10	36,207.90	93.08%
Medical Supplies					
	519,325.01	519,325.01	360,596.54	158,728.47	69.43%
Total Medical Supplies	519,325.01	519,325.01	360,596.54	158,728.47	69.44%
Utilities					
	330,372.02	330,372.02	390,029.69	(59,657.67)	118.05%
Total Utilities	330,372.02	330,372.02	390,029.69	(59,657.67)	118.06%
Equipment					
	437,455.00	437,455.00	512,114.81	(74,659.81)	117.06%
Total Equipment	437,455.00	437,455.00	512,114.81	(74,659.81)	117.07%
Fundraising Events					
	120,000.00	120,000.00	75,822.95	44,177.05	63.18%
Total Fundraising Events	120,000.00	120,000.00	75,822.95	44,177.05	63.19%
Office Supplies					
	205,890.96	205,890.96	138,724.45	67,166.51	67.37%
Total Office Supplies	205,890.96	205,890.96	138,724.45	67,166.51	67.38%
In-Kind Expense					
	0.00	0.00	37,097.07	(37,097.07)	0.00%
Total In-Kind Expense	0.00	0.00	37,097.07	(37,097.07)	0.00%
Staff Development					
	160,393.59	160,393.59	146,057.59	14,336.00	91.06%
Total Staff Development	160,393.59	160,393.59	146,057.59	14,336.00	91.06%
Contract Services					
Other Professional Fees	0.00	0.00	14,118.00	(14,118.00)	0.00%

Salaries-Mercy PSA	0.00	0.00	36,720.06	(36,720.06)	0.00%
Benefits-Mercy PSA	0.00	0.00	7,536.35	(7,536.35)	0.00%
Temporary Staff	0.00	0.00	162,758.77	(162,758.77)	0.00%
Other	253,348.00	253,348.00	481,564.48	(228,216.48)	190.08%
Total Contract Services	253,348.00	253,348.00	702,697.66	(449,349.66)	277.36%
Total Expenses	28,782,731.80	28,782,731.80	27,562,515.30	1,395,607.66	95.15%
Operating excess(deficit)	306,325.29	306,325.29	(604,647.91)	(910,973.20)	(169.86)%
Unrealized Gain on Investments	0.00	0.00	593,669.70	593,669.70	
Excess (deficit)	306,325.29	306,325.29	(10,978.21)	(317,303.50)	

Quarter 4 Summary

Weekly Encounters by Dept	Goal	Week of 10/4	Week of 10/11	Week of 10/18	Week of 10/25	Week of 11/1	Week of 11/8	Week of 11/15	Week of 11/29	Week of 12/6	Week of 12/13	Week of 12/20	Week of 12/27	Trend
Fallsway Medical	441	349	308	330	347	341	375	405	383	314	353	223	245	
Fallsway Nursing	246	167	133	196	159	159	161	201	184	181	193	179	213	
Occupational Therapy	55	26	25	37	28	30	31	41	37	34	23	19	11	
HCH - Baltimore County	107	53	54	58	48	51	57	47	51	57	19	16	35	
HCH - Mobile Clinic	22	8	13	10	8	15	13	20	6	12	14	3	37	
HCH - West Baltimore	119	81	69	84	86	84	93	95	61	97	98	65	33	
Total	989	684	602	715	676	680	730	809	722	695	700	505	574	
Overall % to Goal		68%	60%	71%	67%	68%	73%	81%	72%	69%	70%	50%	57%	

Departments	Goal	Quarter to	
		Date Avg	% To Goal
Fallsway Medical	454.48	330	73%
Fallsway Nursing	245.64	177	72%
Occupational Therapy	55.2	29	52%
HCH - Baltimore County	106.72	46	43%
HCH - Mobile Clinic	22.08	13	60%
HCH - West Baltimore	118.68	79	66%
Total	1002.8	673	67%

Weekly Encounter Summary

Weekly Encounters by Dept	GOAL		Week of 1-3		Week of 1-10
Fallsway Medical	454	!	337	✓	373
Fallsway Nursing	246	✓	199	✓	204
Psych OT	55	✗	25	✗	24
Baltimore County	136	✗	72	✗	75
West Baltimore	119	!	94	!	91
Mobile	22	✗	5	✗	11
Total	1032		732		778
% To Goal			71%		75%

% To Goal (Quarter to Date)

Departments	Goal	Quarter to Date	% To Goal
		Avg	
Fallsway Medical	454	355	78%
Fallsway Nursing	246	201	82%
Psych OT	55	24	43%
Baltimore County	136	58	43%
West Baltimore	119	93	78%
Mobile	22	10	43%
Total	1032	740	72%

HCH 2022 Capital Budget

1/24/2022

<u>Amount</u>	<u>Description</u>	<u>Notes</u>
109,495	Replace and expand network storage servers.	replace all storage which is between 6-8 year old, better speed and processing power
8,000	Replace Racks in 1st & 2nd floor IT closets	Replace worn equipment
17,000	Switch and Firewall for 620 & 725, Firewall for WB	Replace community site access points
37,000	Room 11 split into 2 rooms (includes 2 exam tables)	Add additional exam room capacity by splitting room 11
20,000	Development CRM system migration - capital portion	Development transition to a new CRM module, capitalized migration costs
35,000	Sprinkler project	Critical need to replace corroded pipes and assure no system leaks
150,000	Camera upgrade	Critical need to upgrade security cameras
20,000	Mail room upgrades	Reconfigure existing mailroom for better workflows
30,000	Exterior lighting upgrade	HCH sign, mural, and exterior lighting - transition to LED
30,000	Kitchenette	Joint commission risk - replace countertops and exposed wood - all kitchenettes
24,000	Stairwell update	Paint and floor refresh
20,000	Client Triage redesign	Approve design fees to engage architect about reconfiguring triage area
30,000	Dental Chairs	Replace ODB dental chair prior to reopening
30,000	New Vehicle	Replace existing vehicle from 2010 with high repair and maintenance costs
<hr/> 560,495		

Capital Budget 2022 Narrative

1/24/2022

Historical context:

For 2021 budget, initially had approved a \$1,329,000 capital budget. Of this approval, \$200,000 was coming from an OHI grant, which meant only \$1,129,000 was going to be coming out of HCH cash reserves.

Subsequent to initial approval, HCH was able to apply for and successfully receive multiple grants to cover a significant portion of the capital budget expenses. The following items were funded through the following mechanisms:

- Heat Pump Replacement project \$605,000 of the \$660,000 was funded through HRSA ARP C8E Grant
- PA Overhead System of \$51,500 completely funded through H8F
- New vehicle for \$25,000 completely funded through H8F
- As a result, \$681,500 of the initial capital budget was funded through grants. The remaining balance from HCH cash reserves was \$447,500.

During the course of 2021, additional information was learned that resulted in the cancelation of four projects:

- \$20,000 for additional server storage (this is being rolled into a 2022 request to replace and expand network storage servers for \$109,495)
- \$205,000 for incremental power panels and generator power
- \$15,000 for West Baltimore move/signage
- \$25,000 for Garage weather proofing
- \$265,000 of the capital budget projects were purposefully canceled
- The net impact to HCH cash was \$182,500 for the year based on completed capital budget items
 - \$82,500 - Switch replacement
 - \$45,000 - Power grid assessment
 - \$55,000 – HVAC non grant portion

There are two projects still a work in progress status (CIP account):

- HVAC replacement project - \$990,000
 - 2020 capital approved - \$330,000
 - 2021 capital approved - \$660,000 total, \$605,000 funded by grants
 - HCH cash reserves impact = \$385,000
 - Balance remaining - \$385,000 (spending grant funds first)
- Dental Equipment replacement - \$200,000

- Pending a decision from HRSA on ability to carry over funding into 2022
- Potentially impacts HCH capital required

Current Proposal:

The 2022 capital proposal is for \$560,495 and includes continued investment in our IT infrastructure, software, and core building. See attached schedule for a full list of projects. The total impact to HCH cash reserves would be \$560,495, which is approximately \$73k over budgeted depreciation costs (\$487k). The continuation of previously approved capital projects from prior years are projected to have a cash impact of \$385k. Combined total cash impact in excess of depreciation is \$458k.

Property Control Policy



PURPOSE: Health Care for the Homeless (“the Agency”) will provide an accurate and auditable record of all of the Agency Property acquired, depreciated, and retired.

PROCEDURE:

1. **Property Records:** Property records will be maintained that include:
 - a. A description of the property
 - b. An HCH identification number
 - c. The location of the property
 - d. The status of the property
 - e. The acquisition date
 - f. The cost of the property
 - g. Estimated useful life of the asset
2. **Fixed Asset Inventory:**
 - a. The Agency will maintain and annually update a Fixed Assets Inventory of depreciable assets.
 - b. The Directors of Information Technology, Facilities, and Finance will be responsible for tagging the property with a “HCH identification number” and for maintaining the inventory in their respected areas. The inventory is part of the routine management of the property and is not intended as a record maintained by the Finance Office.
 - c. The information on the inventory will include:
 - i. date,
 - ii. ID tag number,
 - iii. description or type,
 - iv. removed/retired, and
 - v. comments.

In addition, inventory tags will be used for non-depreciable assets such as laptops and other electronics for tracking purposes, but not for depreciation.

3. **Retirement of Property:** When property is retired, the appropriate asset and accumulated depreciation accounts and asset accountability records shall be adjusted and any profit or loss reflected.
4. **Fully-Depreciated Asset:** Records of fully depreciated assets shall be maintained as long as the property is in continuous use.
5. **Disposable Items:** All small-dollar items of direct cost expected to be used and disposed within two years of purchase will not be tagged, inventoried and tracked.
6. **Database:** The maintenance of the Fixed Assets Database is under the supervision of the Director of Facilities.

REVIEW CYCLE

This policy will be reviewed every two years, or as deemed necessary based on the Agency need and to remain compliant with federal, state and local laws and regulations.

Signed by: Gary Welch
Position: Chief Financial Officer
Date: 3/31/2021

Previous review date: 3/19/2018

Acceptable Use Policy



BACKGROUND

Health Care for the Homeless (the Agency) invests in and maintains computing resources in order to record, track, manage and protect clients' health records and to support the productivity of staff members. These computing resources include, but are not limited to, software - such as electronic mail (email) and an Electronic Health Records (EHR) system, and hardware - such as desktops, laptops, smart phones, servers and networks.

It is the policy of the Agency that all staff members, volunteers, contractors and interns will protect health records and personally identifiable information on behalf of the Agency's clients, all staff members, and will comply fully with the Health Information Portability and Accountability Act (HIPAA).

PURPOSE

This policy establishes conditions of use, stipulates constraints and lays out best practices for all use of the Agency's computing resources. This policy applies to all Agency authorized users (defined below) and managed devices. Staff members must be aware that access to all computing resources is subject to monitoring by Health Care for the Homeless.

DEFINITIONS

1. **Authorized Users:** All staff members, board members, contractors, volunteers, auditors and interns who are granted access to the Agency's computing resources.
2. **Guest devices:** Computing devices that are managed and maintained by their owners. These devices may not meet the Agency's security standards.
3. **Information Technology (IT) Department:** The department within the Agency that is responsible for administering, managing and maintaining Agency computing resources and the IT Security Program.
4. **Managed devices:** Are computing resources such as desktop computers, laptops, encrypted thumb drives, smart phones, servers, network equipment, etc., that are purchased by the Agency and are maintained by the IT Department for use by authorized users.
5. **Personally Identifiable Information:** The Agency uses the Maryland state law definition, which includes a person's first name or initial and last name combined any of the following data elements:
 - a. Social Security Number,
 - b. Driver's license number,
 - c. Financial accounts including credit or debit cards in combination with any required security code, access code or password, or
 - d. Individual taxpayer identification number.
6. **Protected Health Information (PHI):** Individually identifiable health information held or transmitted by the Agency in any form or media, whether electronic, paper or oral. This individually identifiable health information includes demographic data that relate to:
 - a. An individual's past, present or future physical or mental health or condition,
 - b. The provision of health care to an individual, or
 - c. The past, present, or future payment for the provision of health care to an individual, and

- d. Identifies the individual or there is a reasonable basis to believe it can be used to identify the individual. This includes many common identifiers (e.g., name, address, birth date, Social Security number, picture, etc.).
- 7. **Remote Storage Device (RSD):** Portable storage devices that are able to download or upload data. e.g. USB thumb drives, CD Drives, DVD Drives, external hard drives, smart phones, iPods, etc.

POLICY

I. General: To protect PHI for all clients of the Agency:

1. All managed devices provided by the Agency are intended only for transacting Agency business, and are not for use by anyone other than the authorized user.
2. The Agency provides devices that will provide authorized users with access to the computing resources they need to be productive in their roles.
3. All information on an Agency device may be monitored or reviewed at any time by the Agency. This includes monitoring and reviewing the health of the device to ensure the operating system and applications are up to date and operating effectively, as well as any content on the device. Authorized users shall have no expectation of privacy in anything they create, store, send or receive using the Agency's computer equipment. The computing network and all related resources are the property of the Agency, and the Agency retains the right to limit personal use.
4. If criminal activity is suspected, the Agency reserves the right to turn over all information to law enforcement.
5. If a managed device breaks, becomes lost, stolen or otherwise no longer functional, the authorized user responsible for the device must immediately report it to their supervisor or the IT Department.
6. All devices assigned to authorized users remain the sole property of the Agency. All devices must be returned if the authorized user takes medical leave, extended leave or when their employment and/or association with the Agency is terminated. All devices must be returned in good condition, along with any accessories that were provided, such as power adapters, protective covers, privacy screens, etc.
7. All data stored locally on Agency desktops and laptops must be encrypted.
8. Authorized users shall lock their workstation before leaving it unattended. Password protected screen savers must be enabled to protect computer displays within 15 minutes of user inactivity. No authorized users shall leave their computer unattended with the user logged on.
9. Authorized users have an obligation to use their access in a responsible and informed way, conforming to proper etiquette, customs, courtesies and all applicable laws or regulations.
10. Authorized users must be aware that any misuse or abuse of the Agency's Information Technology resources reflect negatively upon the Agency's image to their clients and stakeholders and is to be avoided. Professionalism in all communications both internally and externally is of the utmost importance.
11. All authorized users must represent themselves and the Agency accurately and honestly through electronic information or service content whenever they are using an Agency device and/or Agency credentials.

12. Violations of this policy may lead to loss of privileges or disciplinary action up to and including termination.

II. Protection of Personal Health Information: The Agency has implemented the Centricity Practice System (CPS) to centrally manage all health care records for its clients. The Agency is committed to protecting the personal health information of all its clients. In order to do so, the Agency manages devices and reports with PHI in line with all laws and regulations. These include:

1. **Extracts and Custom Reports** - Requests for extracts of PHI must be submitted to the Health Informatics team to ensure that the extracts are stored and maintained in a secure manner.
2. **Storage of extracts and soft copy reports that contain PHI** - Extracts that contain PHI are to be stored in an Agency folder that has been set up with restricted access. Only team members authorized by the extract owner shall have access to the shared folder.
3. **Email** – *see section V. Email.*
4. **Remote Storage Devices** – *see section IV. Remote Storage Devices.*
5. When sending PHI or PII internally, it is strongly recommended that the files be encrypted using the Agency's Barracuda Networks encryption service.
6. When sending PHI or PII externally, it is required that staff utilize the Barracuda Networks encryption service for secure two-way exchange of information.
7. **Printing PHI** – The Agency requires authorized users to use their badge fob before retrieving any printouts in order to prevent unauthorized individuals from accessing PHI. Authorized users must not lend their fob or share their printer security code with others.
8. **Paper faxing PHI** – Received documents shall be removed promptly from the fax machine to prevent the document from being viewed by unauthorized individuals to view the PHI. When faxing externally, the fax number must be double checked and a fax cover sheet utilized.

III. Mobile Devices

1. All data sent and received over an Agency mobile device may be monitored or reviewed including all personal communications, texts, photos, web browsing history, social media usage, etc.
2. The Agency has a limited data allowance. Authorized users are prohibited from using Agency provided mobile devices to stream video, audio or music, or engage in any other activity that would cause excessive data usage. The cellular telephone bill will be reviewed monthly, and authorized users found to be using excessive data may lose cell phone privileges or receive disciplinary action.
3. Authorized users who are assigned a mobile device are expected to return a phone call or text promptly after being contacted by anyone at the Agency unless they are on PTO and have arranged for alternative coverage such as forwarding their phone calls or giving their phone to their supervisor.

4. Authorized users are prohibited from transacting Agency business on any mobile device while operating a vehicle. This includes holding the device or using it in hands free mode.
5. Authorized users shall set up a voice mail greeting.
6. The Agency will implement mobile device management software on all mobile devices that require Agency email access or access to Agency computing resources. The MDM will be installed on agency owned phones as well as personal phones that access Agency email and computing resources.
7. Authorized users that access Agency email and computing resources are expected to adhere to all requirements in sections V and VI below.

IV. Remote Storage Devices

1. Remote storage devices (RSD) can be lost, misplaced or stolen. Any unencrypted data on a lost, misplaced or stolen RSD is at risk of compromise and is a potential breach of HIPAA regulations. Therefore, access to RSDs shall be turned off by default on all managed devices for all authorized users.
2. Authorized users who receive an exception will be provided with an encrypted RSD that will protect Agency sensitive data and PHI. The encrypted RSD shall be used for Agency purposes only. Lending out the encrypted RSD to anyone is strictly prohibited.
3. Authorized users must sign a statement acknowledging their responsibility to protect the RSD and the data it stores.
4. Authorized users who are issued an encrypted RSD will maintain an 10-character password with at least three of the following: upper case letters, lower case letters, digits and special characters.
5. Authorized users must not transfer PHI from their remote storage device to any other device or organization, unless the following conditions are met:
 - a. The authorized user is providing required PHI to another covered entity, or
 - b. The authorized user is providing required PHI to an organization that has a signed Business Associate Agreement (BAA) with the Agency, or
 - c. The authorized user is providing required PHI to authorized governmental agencies.
6. Authorized users shall not transfer Agency-related sensitive or confidential data to any other device or organization unless it has been authorized from a Director level or above.
7. If an RSD is lost or stolen, it must be reported immediately to the IT Department.

V. Email

1. The Agency maintains an email system to support its mission. All data and information sent and received through the agency email system including, but not limited to, messages, attachments, photos, calendar appointments, reminders, etc. are the property of the Agency and may be monitored at any time without the permission of authorized users. The Agency retains the right to review or audit all information sent or received via the Agency email system.
2. PHI and PII must not be sent to any external email address outside of the Agency unless it is encrypted. This includes attachments or screen shots containing PHI/PII and PHI/PII in the text body of an email. Users must use caution when sending email outside of the Agency. Email features like auto-fill make it easy to send or forward an email to the

wrong address, which can result in sharing of PHI outside the Agency, which is considered a breach under HIPAA. Authorized users are expected to verify that all recipients have an Agency or organization email address (sending to personal/non-organizational email addresses is prohibited), and have prior knowledge the PHI/PII is being sent.

3. If PHI must be transmitted electronically to an external entity, the authorized user must encrypt the email using the Agency's encryption service (instructions can be found in the Email Encryption Guide).
4. The email system is for Agency use only. Any personal messages sent or received are subject to monitoring and are property of the Agency. Authorized users have no reasonable expectation of privacy with respect to any communications conducted over Agency email. Even deleted messages and attachments are accessible by administrators.
5. Authorized users must act as stewards of Agency resources. It is prohibited to send, forward or reply to chain letters, junk mail, jokes, multimedia files (such as videos or songs) and executable files.
6. Authorized users shall not use the Agency email to send, upload, receive, download any copyrighted materials, trade secrets or proprietary information without the appropriate authorization of the owner of this material.
7. The Agency email system shall not be used to create or foster a hostile environment. This includes sending, forwarding or replying to emails that contain offensive language, including messages of a sexual nature, racially insensitive material, gender specific comments, comments on sexual orientation, religious or political beliefs, national origin or comments related to a disability.
8. The Agency email system shall not be used to solicit donations for personal charities, advertise or run a business, or solicit for commercial purpose, including advertising items for sale. It is not to be used for religious or political causes, or to support outside organizations, unless sanctioned by executive staff as part of the Agency's mission.
9. The Agency reserves the right to limit the ability to send emails to Agency-wide distribution lists at its discretion.
10. When an Agency-wide distribution list is used, users shall use the bcc feature to mitigate risk that someone will 'reply all'.
11. Users shall not forward PHI, PII or Agency Confidential information to their personal email account(s).

VI. Internet

1. The Agency provides access to the internet for use by authorized users. Providing this access represents a considerable investment on the part of the Agency. Access to the internet is for the benefit of the Agency and shall be used primarily to transact Agency business.
2. The Agency maintains the right to monitor the volume of internet traffic and the content of all internet traffic. Access to the internet is not anonymous. The Agency maintains the right to identify and associate the content downloaded or accessed with the user ID of all authorized users.
3. The Agency maintains the right to block sites that may impact productivity, contribute to a hostile work environment or pose a cyber-security risk.

4. PHI and PII shall not be sent or received over the internet unless it is encrypted. Authorized personnel must contact their supervisor or the IT Department for guidance on how to encrypt files if they are required to transmit or receive PHI or PII.
5. The internet shall not be used to create or foster a hostile environment. This includes downloading, uploading or viewing content that contains offensive language, including messages or pictures of a sexual nature, racially insensitive material, gender specific comments, comments on sexual orientation, religious or political beliefs, national origin or comments related to a disability.
6. Authorized users shall not use the internet to send, upload, receive, or download any copyrighted materials, trade secrets or proprietary information without the appropriate authorization of the owner of this material.
7. Authorized users are prohibited from using the internet to violate federal, state or local laws. Use of the internet or any Agency resources for illegal activity is grounds for disciplinary action up to and including dismissal.
8. The internet shall not be used to solicit donations for personal charities, advertise or run a business, or solicit for commercial purpose including advertising items for sale. It is not to be used for religious or political causes, or to support outside organizations unless sanctioned by executive staff as part of the Agency's mission.

REVIEW CYCLE

This policy will be reviewed every three years, or as deemed necessary based on the Agency need and to remain compliant with federal, state and local laws and regulations.

Signed by: Marc Fratus Position: Director of Information Technology Date: 12/28/2020 Reviewed every three years
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