

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES
55 FARMINGTON AVENUE HARTFORD, CONNECTICUT 06105

ANNUAL REPORT
FEDERALLY QUALIFIED HEALTH CENTER (FQHC)

Date Submitted: _____ Date Received: _____

1. FQHC Name	<u>Charter Oak Health Center, Inc.</u>
Street Address	<u>21 Grand Street</u>
City, State, ZIP	<u>Hartford, CT 06106</u>
Telephone Number	<u>860-550-7524</u>
Contact Person	<u>Kathleen Hallahan</u>
Title	<u>CFO</u>

2. FQHC Medicaid Provider Number: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Medical</td> <td style="border-bottom: 1px solid black;">1992750855</td> </tr> <tr> <td>Dental</td> <td style="border-bottom: 1px solid black;">1225154446</td> </tr> <tr> <td>Mental Health</td> <td style="border-bottom: 1px solid black;">1134245350</td> </tr> <tr> <td>Other (Specify)</td> <td style="border-bottom: 1px solid black;">1396891404</td> </tr> <tr> <td> </td> <td style="border-bottom: 1px solid black;"> </td> </tr> </table>	Medical	1992750855	Dental	1225154446	Mental Health	1134245350	Other (Specify)	1396891404			3. Reporting Period: From <u>7/1/2020</u> To <u>6/30/2021</u>
Medical	1992750855										
Dental	1225154446										
Mental Health	1134245350										
Other (Specify)	1396891404										

4. Type of Control (Check One Only)

NONPROFIT ORGANIZATION

GOVERNMENT

STATE DISTRICT OTHER

COUNTY CITY

5. FQHC Owned By:

CERTIFICATION BY OFFICER OR ADMINISTRATOR OF CLINIC

I Hereby Certify That I Have Examined the Accompanying Worksheets Prepared By
Charter Oak Health Center, Inc. 1992750855
(FQHC Name)

For the Reporting Period Beginning 7/1/2020 and Ending 6/30/2021 and That to the Best of My Knowledge and Belief It Is a True, Correct and Complete Statement Prepared From the Books and Records of the FQHC In Accordance With Applicable Instructions, Except as Noted:

6. Signature (Officer or Administrator of FQHC)	Printed Name
	Kathleen Hallahan
Title	Date
CFO	

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES
ANNUAL REPORT
FEDERALLY QUALIFIED HEALTH CENTER (FQHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FQHC Name:	Charter Oak Health Center, Inc.	

Form A-1 (Direct Health Care Cost)

RECLASSIFICATIONS AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES							
COST CENTER	Salaried Personnel	Other Costs	Total	Reclass-ifications	Reclassified Trial Balance (Col 3 & 4)	Adjustments Increase (Decrease)	Net Expenses (Col 5 & 6)
A. DIRECT HEALTH CARE COST <i>(Excluding Dental, Mental Health & Other)</i>	I	II	III	IV	V	VI	VII
1. Staff Cost							
a. Physician	1,615,643	976,240	2,591,883		2,591,883		2,591,883
b. Physician Assistant	517,369	80,917	598,286		598,286		598,286
c. Nurse (APRN, Midwife, RN)	1,338,366	209,320	1,547,686		1,547,686		1,547,686
d. Other - Specify							
Nutrition (Registered Dietician, Diabetes Educ)	178,245	27,564	205,809		205,809		205,809
LPN	139,256	21,780	161,036		161,036		161,036
Optometrist	71,155	11,129	82,284		82,284		82,284
Podiatry	324,155	50,698	374,853		374,853		374,853
Medical Records	56,754	8,876	65,630		65,630		65,630
Other Personnel - Contract		103,600	103,600		103,600		103,600
Medical Assistants	773,347	120,951	894,298		894,298		894,298
Case Manager	57,082	8,928	66,010		66,010		66,010
			0		0		0
			0		0		0
Dental reclass to Healthcare			0	818,987	818,987		818,987
			0		0		0
e. Subtotal Direct Health Care Cost	5,071,372	1,620,003	6,691,375	818,987	7,510,362	0	7,510,362
2. Other Direct Health Care Cost							
a. Medical Supplies		184,553	184,553		184,553		184,553
b. Transportation		26,484	26,484		26,484		26,484
c. Depreciation - Medical Equipment		69,386	69,386		69,386		69,386
d. Professional Liability Insurance		45,704	45,704		45,704		45,704
e. Laboratory			0		0		0
f. Radiology	115,507	18,065	133,572		133,572		133,572
g. Physician-Administered Drugs		77,747	77,747		77,747		77,747
h. Other - Specify							
Building Depreciation		334,752	334,752		334,752		334,752
			0		0		0
			0		0		0
			0		0		0
			0		0		0
I. Subtotal Other Direct Health Care Cost	115,507	756,691	872,198	0	872,198	0	872,198
3. TOTAL DIRECT HEALTH CARE COST (1e & 2I)	5,186,879	2,376,694	7,563,573	818,987	8,382,560	0	8,382,560

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES
ANNUAL REPORT
FEDERALLY QUALIFIED HEALTH CENTER (FQHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FQHC Name: Charter Oak Health Center, Inc.		

Form A-3 (Direct Mental Health Care Cost)

RECLASSIFICATIONS AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES							
COST CENTER	Salaried Personnel	Other Costs	Total	Reclassifications	Reclassified Trial Balance (Col 3 & 4)	Adjustments Increase (Decrease)	Net Expenses (Col 5 & 6)
	I	II	III	IV	V	VI	VII
C. DIRECT MENTAL HEALTH CARE COST							
1. Staff Cost							
a. Psychologist			0		0		0
b. Social Worker		286,595	286,595		286,595		286,595
c. Other - Specify							
Psychiatrist		46,644	46,644		46,644		46,644
APRN		133,297	133,297		133,297		133,297
Other Clinicians		389,749	389,749		389,749		389,749
			0		0		0
			0		0		0
			0		0		0
			0		0		0
			0		0		0
d. Subtotal Direct Mental Health Care Cost	0	856,285	856,285	0	856,285	0	856,285
2. Other Direct Mental Health Care Cost							
a. Medical Supplies			0		0		0
b. Transportation			0		0		0
c. Depreciation - Mental Health Equipment			0		0		0
d. Professional Liability Insurance			0		0		0
e. Other - Specify							
Office Supplies, Printing and Postage		1,995	1,995		1,995		1,995
Maintenance Contracts & Repairs		87,864	87,864		87,864		87,864
Telephone & Communications		3,154	3,154		3,154		3,154
Outside Services/Occupancy		93,760	93,760		93,760		93,760
Depreciation - Building		40,920	40,920		40,920		40,920
f. Subtotal Other Direct Mental Health Care Cost	0	227,693	227,693	0	227,693	0	227,693
3. TOTAL DIRECT MENTAL HEALTH CARE COST (1d & 2f)							
	0	1,083,978	1,083,978	0	1,083,978	0	1,083,978
D. TOTAL DIRECT COST BEFORE NON-ALLOWABLE SERVICES							
	6,204,485	4,144,445	10,348,930	-	10,348,930	-	10,348,930

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FQHC Name: Charter Oak Health Center, Inc.		

Form A-5 (Overhead Cost)

RECLASSIFICATIONS AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES							
COST CENTER	Salaried Personnel	Other Costs	Total	Reclass-ifications	Reclassified Trial Balance (Col 3 & 4)	Adjustments Increase (Decrease)	Net Expenses (Col 5 & 6)
	I	II	III	IV	V	VI	VII
G. OVERHEAD - FACILITY COST							
a. Rent		32,600	32,600		32,600		32,600
b. Insurance		55,560	55,560		55,560		55,560
c. Interest on Mortgage or Loans			0		0		0
d. Utilities		308,760	308,760		308,760		308,760
e. Depreciation - Building		337,874	337,874		337,874		337,874
f. Depreciation - Equipment			0		0		0
g. Housekeeping & Maintenance		764,363	764,363		764,363		764,363
h. Other (Specify)							
Bank Fees/Credit Card Charges		33,338	33,338		33,338		33,338
			0		0		0
			0		0		0
			0		0		0
			0		0		0
I. Subtotal Overhead - Facility Cost	0	1,532,495	1,532,495	0	1,532,495	0	1,532,495
H. OVERHEAD - ADMINISTRATIVE COST							
a. Office Salaries	5,242,973	544,434	5,787,407		5,787,407		5,787,407
b. Depreciation - Office Equipment			0				0
c. Office Supplies		101,024	101,024		101,024		101,024
d. Legal			0		0		0
e. Accounting			0		0		0
f. Insurance			0		0		0
g. Telephone			0		0		0
h. Advertising-Help Wanted			0		0		0
i. Interest - Capital Loans			0		0		0
j. Other (Specify)							
Bad Debt Expense		584,281	584,281		584,281		584,281
Employee Benefits		1,105,281	1,105,281		1,105,281		1,105,281
Special Events		173,155	173,155		173,155		173,155
Other Expenses		2,949,511	2,949,511		2,949,511		2,949,511
			0		0		0
k. Subtotal Overhead - Administrative Cost	5,242,973	5,457,686	10,700,659	0	10,700,659	0	10,700,659
l. TOTAL OVERHEAD COST (GI+Hk)	5,242,973	6,990,181	12,233,154	-	12,233,154	-	12,233,154
J. GRAND TOTAL COSTS² (F+I)	11,680,425	11,773,414	23,453,839	-	23,453,839	-	23,453,839

² Reconciliation schedule is required if Line J, Column III does not agree to the Audited Financial Statements

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FQHC Name:	Charter Oak Health Center, Inc.	

Form B-1 (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)				Total Employee Hours and FTEs		
		Specialty	Compensation	Encounters	Employee Total Hours	FTEs (2080 hrs = 1 FTE)
		I	II	III	IV	V
<i>Provide itemized de-identified list (e.g., Physician 1)</i>		<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>
A.	PHYSICIAN					
1.	Biggers, Shaun	Women's Health	170,408	1,851	1,664	0.80
2.	Hornbeck, Nieves	Internal Medicine	253,516	6,160	2,621	1.26
3.	Naqvi, Syed	Internal Medicine	86,005	1,863	832	0.40
4.	Ricardo, John	Internal Medicine	112,611	1,886	1,248	0.60
5.	Thurber, Stephanie	Internal Medicine	109,230	1,946	1,165	0.56
6.	Wasserstein, David	Internal Medicine	43,171	364	416	0.20
7.	Donkoh, Fred	Pediatrics	209,803	2,269	2,096	1.01
8.	Mirvis, Bruce	Pediatrics	45,120	308	486	0.23
9.	Sobelman, Steven	Pediatrics	98,301	662	1,049	0.50
10.						0.00
Total Physician Encounters, Staff Hours and FTEs			1,128,165	17,309	11,577	5.56
B.	PHYSICIAN ASSISTANT					
1.	Watson, Stephanie	Women's Health	125,679	2,366	2,118	1.02
2.	Bergen Phillip	Internal Medicine	126,297	2,636	2,108	1.01
3.	Fachini, Andrea	Internal Medicine	129,943	3,147	2,177	1.05
4.	Windoloski, Samantha	Internal Medicine	135,450	3,008	2,237	1.08
5.						0.00
Total Physician Assistant Encounters, Hours and FTEs			517,369	11,157	8,640	4.16

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Form B-1 (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)				Total Employee Hours and FTEs		
		Specialty	Compensation	Encounters	Employee Total Hours	FTEs (2080 hrs = 1 FTE)
		I	II	III	IV	V
<i>Provide itemized de-identified list (e.g., Physician 1)</i>		<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>
A.	PHYSICIAN					
1.	Jurewicz, Ann	Podiatry	58,771	687	848	0.41
2.	Mongare, Japheth	Podiatry	171,140	3,422	2,081	1.00
3.	Mehwash, Abeeda	Optometrist	35,947	78	488	0.23
4.	Pesanti, Edward	Infectious Disease	20,790	221	416	0.20
5.	Pillai, Omprakash	Internal Medicine	53,301	1,311	624	0.30
6.	Castro, Raymond	Urgent Care	169,058	2,068	1,664	0.80
7.	D'Cunha, Sunil	Internal Medicine	244,326	5,443	2,117	1.02
8.						0.00
9.						0.00
10.						0.00
Total Physician Encounters, Staff Hours and FTEs			753,333	13,230	8,238	3.96
B.	PHYSICIAN ASSISTANT					
1.						0.00
2.						0.00
3.						0.00
4.						0.00
5.						0.00
Total Physician Assistant Encounters, Hours and FTEs			0	0	0	0.00

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES
ANNUAL REPORT
FEDERALLY QUALIFIED HEALTH CENTER (FOHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>	
C. NURSE (APRN, MIDWIFE, RN)						
1. Smith, Jillian	Women's Health	31,860	442	591	0.28	
2. Velazquez, Kristal	Women's Health	1,365		24	0.01	
3. Beresford, Geneva	Internal Medicine	31,923	219	444	0.21	
4. Breen, Cynthia	Internal Medicine	121,294	2,859	2,476	1.19	
5. Dube, Davina	Internal Medicine	60,073	868	1,080	0.52	
Total Nurse Practitioner		246,515	4,388	4,615	2.21	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1. McClendon, Daryl		2,530	29	14	0.01	
2. Duke, Nnennaya		75,180	606	416	0.20	
3. Brass, Bernard		187,810	943	1,007	0.48	
4. Mirvis, Bruce		234,506	1,056	1,239	0.60	
5.					0.00	
Total Physician Services Under Contract		500,026	2,634	2,676	1.29	
E. OTHER HEALTH CARE PRACTITIONER						
1. Reardon, Lorraine	Nutrition Services	85,998	854	2,080	1.00	
2. Molina, Diana	Radiology	46,797		2,389	1.15	
3. Gordon, Donna	Radiology	29,470		806	0.39	
Total Other Health Care Practitioner		162,265	854	5,275	2.54	

STATE OF CONNECTICUT
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ANNUAL REPORT
FEDERALLY QUALIFIED HEALTH CENTER (FOHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER							
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)				Total Employee Hours and FTEs			
		Specialty	Compensation	Encounters	Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
		I	II	III	IV	V	
		<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>
C.	NURSE (APRN, MIDWIFE, RN)						
1.	Eadie, Kimberly	Internal Medicine	44,190	817	843	0.41	
2.	Glines, Pamela	Internal Medicine	124,005	2,751	2,044	0.98	
3.	Hinchey, Jessica	Internal Medicine	33,276	383	645	0.31	
4.	Oleyer, Katie	Internal Medicine	126,903	2,272	2,204	1.06	
5.	Samson, Mary	Internal Medicine	23,346	354	319	0.15	
		Total Nurse Practitioner	351,720	6,577	6,055	2.91	
D.	PHYSICIAN SERVICES UNDER CONTRACT						
1.	Smith, Robert	Cardiology	22,080	270	192	0.09	
2.	Rodriguez, MaryAnn	Internal Medicine	7,840	201	112	0.05	
3.	Time Doc	Chronic Care Nursing	95,760			0.00	
4.						0.00	
5.						0.00	
		Total Physician Services Under Contract	125,680	471	304	0.14	
E.	OTHER HEALTH CARE PRACTITIONER						
1.	Mullings, Chelseann	Radiology	9,628		351	0.17	
2.	Owusu, Patrick	Radiology	29,612		819	0.39	
3.	Archilla, Keyla	Pharmacy	35,397		2,095	1.01	
		Total Other Health Care Practitioner	74,637	0	3,265	1.57	

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ANNUAL REPORT
FEDERALLY QUALIFIED HEALTH CENTER (FOHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	125,000	1,500	1,040	0.50	
C. NURSE (APRN, MIDWIFE, RN)						
1. Samuels, Patricia	Internal Medicine	1,097	27	16	0.01	
2. Santiago, Jennifer	Internal Medicine	118,511	2,866	2,100	1.01	
3. Wills, Stephanie	Internal Medicine	119,836	3,167	2,080	1.00	
4. Aby, Jincy	Women's Health	95,874		2,169	1.04	
5. Delacruz, Jeffrey	Internal Medicine	1,311		32	0.02	
Total Nurse Practitioner		336,629	6,060	6,397	3.08	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1. Boghosian, Karlos		1,760	48	13	0.01	
2. Brown, Bethune		480	6	4	0.00	
3. McNicholas, Matthew		41,800	911	328	0.16	
4. Spadaro, David		195,620	3,863	1,608	0.77	
5.					0.00	
Total Physician Services Under Contract		239,660	4,828	1,953	0.94	
E. OTHER HEALTH CARE PRACTITIONER						
1. Jimenez, Mariangelie	Pharmacy	20,165		1,285	0.62	
2. Juste-Saakov, Daphney	Pharmacy	5,076		329	0.16	
3. Rivera, Kiara	Pharmacy	1,562		124	0.06	
Total Other Health Care Practitioner		26,803	0	1,738	0.84	

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)		Specialty	Compensation	Encounters	Total Employee Hours and FTEs	
					Employee Total Hours	FTEs (2080 hrs = 1 FTE)
		I	II	III	IV	V
<i>Provide itemized de-identified list (e.g., Physician 1)</i>		<i>General Practitioner</i>	125,000	1,500	1,040	0.50
C.	NURSE (APRN, MIDWIFE, RN)					
1.	Johnson, Gilda	Internal Medicine	84,622		2,166	1.04
2.	Kelly, Briana	Internal Medicine	25,083		776	0.37
3.	Lesporis, Hannah	Internal Medicine	7,842		224	0.11
4.	Locke, Kelli	Internal Medicine	1,785		45	0.02
5.	Maddalena, Jaime	Internal Medicine	7,569		243	0.12
	Total Nurse Practitioner		126,901	0	3,454	1.66
D.	PHYSICIAN SERVICES UNDER CONTRACT					
1.						0.00
2.						0.00
3.						0.00
4.						0.00
5.						0.00
	Total Physician Services Under Contract		0	0	0	0.00
E.	OTHER HEALTH CARE PRACTITIONER					
1.	Antwi-Mensah, Eunice	Pharmacy	2,900		50	0.02
2.	Rosclair, Ludwig	Pharmacy	102,789		1,615	0.78
3.	Wozniak, John	Pharmacy	39,781		680	0.33
	Total Other Health Care Practitioner		145,470	0	2,345	1.13

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)		Specialty	Compensation	Encounters	Total Employee Hours and FTEs	
					Employee Total Hours	FTEs (2080 hrs = 1 FTE)
		I	II	III	IV	V
<i>Provide itemized de-identified list (e.g., Physician 1)</i>		<i>General Practitioner</i>	125,000	1,500	1,040	0.50
C.	NURSE (APRN, MIDWIFE, RN)					
1.	Mitchell, Lakeisha	Internal Medicine	29,095		652	0.31
2.	Petrone, Christal	Internal Medicine	30,410		815	0.39
3.	Proano, Carmen	Internal Medicine	75,653		2,103	1.01
4.	Rai, Rookmin	Internal Medicine	13,037		390	0.19
5.	Tardiff, Kari	Internal Medicine	10,090		348	0.17
Total Nurse Practitioner			158,285	0	4,308	2.07
D.	PHYSICIAN SERVICES UNDER CONTRACT					
1.						0.00
2.						0.00
3.						0.00
4.						0.00
5.						0.00
Total Physician Services Under Contract			0	0	0	0.00
E.	OTHER HEALTH CARE PRACTITIONER					
1.	Rivera, Daynesa	Pediatrics	57,922		2,294	1.10
2.	Graham, Beverly	Internal Medicine	66,846		2,149	1.03
3.	Ball, Nikeia	Urgent Care	14,488		474	0.23
Total Other Health Care Practitioner			139,256	0	4,917	2.36

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FEDERALLY QUALIFIED HEALTH CENTER (FOHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>	
C. NURSE (APRN, MIDWIFE, RN)						
1. Vasquez, Emma	Internal Medicine	40,385		1,192	0.57	
2. Willard, Nancy	Internal Medicine	10,054		296	0.14	
3. Wolfe-Taylor, Heather	Internal Medicine	40,869		1,299	0.62	
4. Caballero, Lissette	Urgent Care	13,275		306	0.15	
5. Garcia, Maria	Urgent Care	13,731		349	0.17	
Total Nurse Practitioner		118,314	0	3,442	1.65	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Physician Services Under Contract		0	0	0	0.00	
E. OTHER HEALTH CARE PRACTITIONER						
1. Bussolini, Diane	Nutrition Services	92,247	853	2,080	1.00	
2. Castro, Carmen	Medical Assistant	53,181			0.00	
3. Davis, Shateria	Medical Assistant	14,397			0.00	
Total Other Health Care Practitioner		159,825	853	2,080	1.00	

STATE OF CONNECTICUT
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FEDERALLY QUALIFIED HEALTH CENTER (FOHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>	
C. NURSE (APRN, MIDWIFE, RN)						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Nurse Practitioner		0	0	0	0.00	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Physician Services Under Contract		0	0	0	0.00	
E. OTHER HEALTH CARE PRACTITIONER						
1. Dorsinvil, Dadie	Medical Assistant	19,691			0.00	
2. Figueroa, Brontee	Medical Assistant	12,870			0.00	
3. Grant, Tieka	Medical Assistant	50,409			0.00	
Total Other Health Care Practitioner		82,970	0	0	0.00	

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FEDERALLY QUALIFIED HEALTH CENTER (FOHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>	
C. NURSE (APRN, MIDWIFE, RN)						
1.						0.00
2.						0.00
3.						0.00
4.						0.00
5.						0.00
Total Nurse Practitioner		0	0	0		0.00
D. PHYSICIAN SERVICES UNDER CONTRACT						
1.						0.00
2.						0.00
3.						0.00
4.						0.00
5.						0.00
Total Physician Services Under Contract		0	0	0		0.00
E. OTHER HEALTH CARE PRACTITIONER						
1.	Josey, Susanna	Medical Assistant	4,352			0.00
2.	Lee, Maria	Medical Assistant	17,383			0.00
3.	Luna, Darling	Medical Assistant	39,384			0.00
Total Other Health Care Practitioner			61,119	0	0	0.00

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FEDERALLY QUALIFIED HEALTH CENTER (FOHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>	
C. NURSE (APRN, MIDWIFE, RN)						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Nurse Practitioner		0	0	0	0.00	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Physician Services Under Contract		0	0	0	0.00	
E. OTHER HEALTH CARE PRACTITIONER						
1. Luna, Jazlineth	Medical Assistant	599			0.00	
2. Maldonado, Keila	Medical Assistant	542			0.00	
3. McLean, Lelia	Medical Assistant	41,753			0.00	
Total Other Health Care Practitioner		42,894	0	0	0.00	

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FEDERALLY QUALIFIED HEALTH CENTER (FOHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)				Total Employee Hours and FTEs		
Specialty		Compensation	Encounters	Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
I		II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>		<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>
C.	NURSE (APRN, MIDWIFE, RN)					
1.						0.00
2.						0.00
3.						0.00
4.						0.00
5.						0.00
	Total Nurse Practitioner		0	0	0	0.00
D.	PHYSICIAN SERVICES UNDER CONTRACT					
1.						0.00
2.						0.00
3.						0.00
4.						0.00
5.						0.00
	Total Physician Services Under Contract		0	0	0	0.00
E.	OTHER HEALTH CARE PRACTITIONER					
1.	Mendez, Rosalba	Medical Assistant	38,340			0.00
2.	Mendoza, Gustavo	Medical Assistant	37,562			0.00
3.	Molina, Lourdes	Medical Assistant	1,457			0.00
	Total Other Health Care Practitioner		77,359	0	0	0.00

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FEDERALLY QUALIFIED HEALTH CENTER (FOHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)				Total Employee Hours and FTEs		
		Specialty	Compensation	Encounters	Employee Total Hours	FTEs (2080 hrs = 1 FTE)
		I	II	III	IV	V
<i>Provide itemized de-identified list (e.g., Physician 1)</i>		<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>
C.	NURSE (APRN, MIDWIFE, RN)					
1.						0.00
2.						0.00
3.						0.00
4.						0.00
5.						0.00
	Total Nurse Practitioner		0	0	0	0.00
D.	PHYSICIAN SERVICES UNDER CONTRACT					
1.						0.00
2.						0.00
3.						0.00
4.						0.00
5.						0.00
	Total Physician Services Under Contract		0	0	0	0.00
E.	OTHER HEALTH CARE PRACTITIONER					
1.	Nair, Usha	Medical Assistant	41,242			0.00
2.	Narvaez, Luz	Medical Assistant	33,643			0.00
3.	Ortega, Griselle	Medical Assistant	15,321			0.00
	Total Other Health Care Practitioner		90,206	0	0	0.00

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FEDERALLY QUALIFIED HEALTH CENTER (FOHC)

Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FQHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	125,000	1,500	1,040	0.50	
C. NURSE (APRN, MIDWIFE, RN)						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Nurse Practitioner		0	0	0	0.00	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Physician Services Under Contract		0	0	0	0.00	
E. OTHER HEALTH CARE PRACTITIONER						
1. Ortiz, Meiling	Medical Assistant	4,677			0.00	
2. Padilla, Rosa	Podiatry Medical Assistant	36,066			0.00	
3. Pierre, Joanne	Medical Assistant	37,044			0.00	
Total Other Health Care Practitioner		77,787	0	0	0.00	

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FQHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	125,000	1,500	1,040	0.50	
C. NURSE (APRN, MIDWIFE, RN)						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Nurse Practitioner		0	0	0	0.00	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Physician Services Under Contract		0	0	0	0.00	
E. OTHER HEALTH CARE PRACTITIONER						
1. Puerta-Perez, Diana	Medical Assistant	40,893			0.00	
2. Ramirez, Jeanette	Podiatry Medical Assistant	58,177			0.00	
3. Ramos, Christie	Medical Assistant	17,382			0.00	
Total Other Health Care Practitioner		116,452	0	0	0.00	

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER					
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty I	Compensation II	Encounters III	Total Employee Hours and FTEs	
				Employee Total Hours IV	FTEs (2080 hrs = 1 FTE) V
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	125,000	1,500	1,040	0.50
C. NURSE (APRN, MIDWIFE, RN)					
1.					0.00
2.					0.00
3.					0.00
4.					0.00
5.					0.00
Total Nurse Practitioner		0	0	0	0.00
D. PHYSICIAN SERVICES UNDER CONTRACT					
1.					0.00
2.					0.00
3.					0.00
4.					0.00
5.					0.00
Total Physician Services Under Contract		0	0	0	0.00
E. OTHER HEALTH CARE PRACTITIONER					
1. Romero-Lazo, Norma	Optometry Medical Assistant	35,209			0.00
2. Santiago, Katiria	Medical Assistant	20,925			0.00
3. Torres, Maria	Medical Assistant	36,459			0.00
Total Other Health Care Practitioner		92,593	0	0	0.00

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>	
C. NURSE (APRN, MIDWIFE, RN)						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Nurse Practitioner		0	0	0	0.00	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Physician Services Under Contract		0	0	0	0.00	
E. OTHER HEALTH CARE PRACTITIONER						
1. Vasquez, Jennifer	Medical Assistant	43,390			0.00	
2. Willis, Victasia	Medical Assistant	17,086			0.00	
3. Yearwood, Lesley	Medical Assistant	40,453			0.00	
Total Other Health Care Practitioner		100,929	0	0	0.00	

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER					
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty I	Compensation II	Encounters III	Total Employee Hours and FTEs	
				Employee Total Hours IV	FTEs (2080 hrs = 1 FTE) V
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	125,000	1,500	1,040	0.50
C. NURSE (APRN, MIDWIFE, RN)					
1.					0.00
2.					0.00
3.					0.00
4.					0.00
5.					0.00
Total Nurse Practitioner		0	0	0	0.00
D. PHYSICIAN SERVICES UNDER CONTRACT					
1.					0.00
2.					0.00
3.					0.00
4.					0.00
5.					0.00
Total Physician Services Under Contract		0	0	0	0.00
E. OTHER HEALTH CARE PRACTITIONER					
1. Roldan, Annette	Medical Assistant Supervisor	50,245			0.00
2. Roman, Wanda	Medical Assistant - HCH	42,670			0.00
3. Begzadic, Elvedin	Medical Assistant Tech	35,227			0.00
Total Other Health Care Practitioner		128,142	0	0	0.00

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	125,000	1,500	1,040	0.50	
C. NURSE (APRN, MIDWIFE, RN)						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
	Total Nurse Practitioner	0	0	0	0.00	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
	Total Physician Services Under Contract	0	0	0	0.00	
E. OTHER HEALTH CARE PRACTITIONER						
1.	Szmigiel, Urszula	21,527			0.00	
2.	Teodoro, Joseph	518			0.00	
3.	Ware, Derrick	448			0.00	
	Total Other Health Care Practitioner	22,493	0	0	0.00	

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	125,000	1,500	1,040	0.50	
C. NURSE (APRN, MIDWIFE, RN)						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Nurse Practitioner		0	0	0	0.00	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Physician Services Under Contract		0	0	0	0.00	
E. OTHER HEALTH CARE PRACTITIONER						
1.	Dombkowski, Kristyn	Pharmacy Manager	24,332		0.00	
2.	Grant, Jesse	Case Manager	57,082		0.00	
3.	Begzadic, Elvedin	Medical Records	35,227		0.00	
	Total Other Health Care Practitioner		116,641	0	0.00	

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Reporting Period:	From <u>7/1/2020</u>	To <u>6/30/2021</u>
FOHC Name:	Charter Oak Health Center, Inc.	

Form B-1 *Continued* (Compensation, Encounters, Hours, FTEs - Health Care)

HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
HEALTH CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs (Excluding Dental, Mental Health, and Other)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs		
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)	
	I	II	III	IV	V	
<i>Provide itemized de-identified list (e.g., Physician 1)</i>	<i>General Practitioner</i>	<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>	
C. NURSE (APRN, MIDWIFE, RN)						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Nurse Practitioner		0	0	0	0.00	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1.					0.00	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Physician Services Under Contract		0	0	0	0.00	
E. OTHER HEALTH CARE PRACTITIONER						
1. Szmigiel, Urszula	Medical Records	21,527			0.00	
2.					0.00	
3.					0.00	
Total Other Health Care Practitioner		21,527	0	0	0.00	

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FQHC Name:	Charter Oak Health Center, Inc.	

Form B-2 (Compensation, Encounters, Hours, FTEs - Dental Care)

DENTAL SERVICES COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER				
DENTAL CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs	Compensation	Encounters	Total Employee Hours and FTEs	
			Employee Total Hours	FTEs (2080 hrs = 1 FTE)
	II	III	IV	V
<i>Provide itemized de-identified list (e.g., Dentist 1)</i>	125,000	1,500	1,040	0.50
A. DENTIST				
1. Hasija, Sonam	145,748	471	2,080	1.00
2. Kaur, Harjit	143,860	525	2,080	1.00
3. Quesada, Lilian	147,884	646	2,080	1.00
4. Singh, Kanwalpreet	152,352	1,009	2,089	1.00
5. Salas, Moises (Contracted Pediatric Dentist)	135,696	956		0.00
Total Dentist Encounters, Staff Hours and FTEs	725,540	3,607	8,329	4.00
B. DENTAL HYGIENIST				
1. Boudewyns, Emily	92,752	121	2,083	1.00
2. Swaby, Norman	91,508	84	2,081	1.00
3.				0.00
4.				0.00
5.				0.00
Total Dental Hygienist Encounters, Hours and FTEs	184,260	205	4,164	2.00
C. OTHER DENTAL PRACTITIONER				
1. Bell, Juanita	48,528		2,080	1.00
2. Bajramovic, Senada	34,519		2,085	1.00
3. Douglas, Odean	41,047		2,086	1.00
4. Laureano, Esmeralda	35,981		2,080	1.00
5. Rodriguez, Marianela	39,495		2,082	1.00
Total Other Dental Practitioner Encounters, Hours and FTEs	199,570	0	10,413	5.00

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FQHC Name:	Charter Oak Health Center, Inc.	

Form B-2 (Compensation, Encounters, Hours, FTEs - Dental Care)

DENTAL SERVICES COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER				
DENTAL CARE COMPENSATION, ENCOUNTERS, HOURS, & FTEs	Compensation	Encounters	Total Employee Hours and FTEs	
			Employee Total Hours	FTEs (2080 hrs = 1 FTE)
	II	III	IV	V
<i>Provide itemized de-identified list (e.g., Dentist 1)</i>	125,000	1,500	1,040	0.50
A. DENTIST				
1.				0.00
2.				0.00
3.				0.00
4.				0.00
5.				0.00
Total Dentist Encounters, Staff Hours and FTEs	0	0	0	0.00
B. DENTAL HYGIENIST				
1.				0.00
2.				0.00
3.				0.00
4.				0.00
5.				0.00
Total Dental Hygienist Encounters, Hours and FTEs	0	0	0	0.00
C. OTHER DENTAL PRACTITIONER				
1. Brooks, Michael	43,932		2,130	1.02
2.				0.00
3.				0.00
4.				0.00
5.				0.00
Total Other Dental Practitioner Encounters, Hours and FTEs	43,932	0	2,130	1.02

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FQHC Name:	Charter Oak Health Center, Inc.	

Form B-3 (Compensation, Encounters, Hours, FTEs - Mental Health Care)

MENTAL HEALTH SERVICES COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER						
MENTAL HEALTH SERVICES COMPENSATION, ENCOUNTERS, HOURS, & FTEs			Total Employee Hours and FTEs			
			Employee Total Hours	FTEs (2080 hrs = 1 FTE)		
<i>Provide itemized de-identified list (e.g., Psychologist 1)</i>			<i>125,000</i>	<i>1,500</i>	<i>1,040</i>	<i>0.50</i>
A.	PSYCHOLOGIST					
1.	Madonick, Steven (Psychiatrist, Contracted)	46,644	136	208	0.10	
2.	Lemaster, Matthew (APRN, Contracted)	32,102	74	173	0.08	
3.	Richardson, Melissa (APRN, Contracted)	43,526	244	260	0.13	
4.	Russell, Janice (APRN, Contracted)	57,669	116	607	0.29	
5.					0.00	
Total Psychologist Encounters, Staff Hours and FTEs		179,941	570	1,248	0.60	
B.	SOCIAL WORKER					
1.	Dobo, Coleen (SW, SVP Admin)	27,150	0	208	0.10	
2.	McQuaid,-Robert, Joeli (SW, Admin 50%)	145,687	354	2,080	1.00	
3.	Ramos Merced, Anabell (SW, Admin 50%)	113,758	980	2,080	1.00	
4.					0.00	
5.					0.00	
Total Social Worker Encounters, Hours and FTEs		286,595	1,334	4,368	2.10	
C.	OTHER MENTAL HEALTH PRACTITIONER					
1.	Parlante, Patricia (LClinician, Contracted)	32,464	21	10	0.00	
2.	Scott, Patrick (LClinician, Contracted)	95,522	1,449	2,080	1.00	
3.	Vo, Giang (LClinician, Contracted)	29,099	428	433	0.21	
4.	Blackmer, Rachel (NLClinician, Contacted)	7,861	22	173	0.08	
5.	Avila Jr., Jose A (NLClinician, Contracted)	54,932	530	693	0.33	
Total Other Mental Health Practitioner Encounters, Hours and FTEs		219,878	2,450	3,389	1.62	

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Form B-3 (Compensation, Encounters, Hours, FTEs - Mental Health Care)

MENTAL HEALTH SERVICES COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER				
MENTAL HEALTH SERVICES COMPENSATION, ENCOUNTERS, HOURS, & FTEs			Total Employee Hours and FTEs	
	Compensation	Encounters	Employee Total Hours	FTEs (2080 hrs = 1 FTE)
<i>Provide itemized de-identified list (e.g., Psychologist 1)</i>				
	125,000	1,500	1,040	0.50
A. PSYCHOLOGIST				
1.				0.00
2.				0.00
3.				0.00
4.				0.00
5.				0.00
Total Psychologist Encounters, Staff Hours and FTEs	0	0	0	0.00
B. SOCIAL WORKER				
1.				0.00
2.				0.00
3.				0.00
4.				0.00
5.				0.00
Total Social Worker Encounters, Hours and FTEs	0	0	0	0.00
C. OTHER MENTAL HEALTH PRACTITIONER				
1. Vargas, Roberto (NLClinician, Contracted)	33,316	608	1,040	0.50
2. Mojica, Darniel (NLClinician, Contracted)	87,019	1,217	2,080	1.00
3. Santiago, Luis (NLClinician, Contracted)	42,069	530	693	0.33
S, Sikpi (NLClinician, Contracted)	3,729	0	16	0.01
5. Chakraborty, Bharati S (NLClinician, Contracted)	3,738	146	120	0.06
Total Other Mental Health Practitioner Encounters, Hours and FTEs	169,871	2,501	3,949	1.90

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FQHC Name: Charter Oak Health Center, Inc.

Form B-4 (Summary Compensation, Encounters, Hours, FTEs)

SUMMARY COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER TYPE									
SUMMARY COMPENSATION, ENCOUNTERS, HOURS, AND FTEs BY PRACTITIONER TYPE	Number of Practitioners	Total Compensation	Compensation Range		Turnover		Encounters	Employee Hours and FTEs	
			High	Low	Hires	Departures		Employee Total Hours	FTEs (2,080 hrs = 1 FTE)
	4	500,000	150,000	100,000	2	1	10,000	8,320	4.00
A. HEALTH CARE PRACTITIONERS									
1. PHYSICIAN	16	1,881,498	253,516	43,171			30,539	19,815	9.53
2. PHYSICIAN ASSISTANT	4	517,369	135,450	125,679			11,157	8,640	4.15
3. NURSE (APRN, MIDWIFE, RN)	30	1,338,364	126,903	1,097			17,025	28,271	13.59
4. PHYSICIAN SERVICES UNDER CONTRACT	11	865,366	386,820	2,530			7,933	4,933	2.37
5. OTHER HEALTH PROFESSIONALS									0.00
6. OTHER ALLIED HEALTH PROFESSIONALS									0.00
7. OTHER HEALTH CARE PRACTITIONERS	55	1,739,368	102,789	1,562			1,707	19,620	9.43
Total Health Care	116	6,341,965			0	0	68,361	81,279	39.07
B. DENTAL PRACTITIONERS									
1. DENTIST	5	290,216	152,352	143,860			3,607	8,329	4.00
2. DENTAL HYGIENIST	2	184,260	92,752	91,508			205	4,164	2.00
3. OTHER DENTAL PRACTITIONERS	6	243,502	48,528	34,519			0	12,543	6.03
Total Dental	13	717,978			0	0	3,812	25,036	12.03
C. MENTAL HEALTH PRACTITIONERS									
1. PSYCHIATRIST	1	46,644	46,644	46,644			136	208	0.10
2. PSYCHOLOGIST									0.00
3. LICENSED CLINICAL SOCIAL WORKER	3	286,595	145,687	27,150			1,334	4,368	2.10
4. PSYCHIATRIC APRN	3	133,297	57,669	32,102			434	1,040	0.50
5. OTHER MENTAL HEALTH PRACTITIONERS	10	389,749	95,522	3,729			4,951	7,338	3.53
Total Mental Health	17	856,285			0	0	6,855	12,954	6.23

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Form C (Cost Adjustment & Allocation)

COST ADJUSTMENT AND ALLOCATION		
A.	Direct Cost Title XIX Services (P5 - Form A-3, Line D, Col. VII)	10,348,930
B.	Direct Cost Other Services (P6 - Form A-4, Line E.1.i, Col. VII)	871,755
C.	Total Direct Costs (A+B)	11,220,685
D.	Portion of Title XIX Services (A/C)	92.23%
E.	Total Overhead Cost (P7 - Form A-5, Line I, Col. VII)	12,233,154
F.	Overhead Cost Applicable to Title XIX Services (DxE)	11,282,638
G.	Total Title XIX Services Cost (A+F)	21,631,568
H.	Thirty Percent (30%) of Total Title XIX Svc Cost (Gx.30)	6,489,470
I.	Cost Adjustment (Lower of H-F or Zero)	(4,793,168)
J.	Allowable Title XIX Overhead Cost (F+I)	6,489,470
K.	Direct Costs	
	1. Health Care Services (P3 - Form A-1, Line A3, Col. VII)	8,382,560
	2. Dental Services (P4 - Form A-2, Line B3, Col. VII)	882,392
	3. Mental Health Services (P5 - Form A-3, Line C3, Col. VII)	1,083,978
	4. Total Direct Costs (K1 thru K3)	10,348,930
L.	Direct Costs as a % of Total	
	1. Health Care Services (K1/K4)	81.00%
	2. Dental Services (K2/K4)	8.53%
	3. Mental Health Services (K3/K4)	10.47%
M.	Allocated Allowable Overhead Cost	
	1. Health Care Services (JxL1)	5,256,471
	2. Dental Services (JxL2)	553,552
	3. Mental Health Services (JxL3)	679,448
	4. Total Allowable Title XIX Overhead Cost (M1 thru M3)	6,489,471

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FQHC Name:	Charter Oak Health Center, Inc.	

Form D (Allowable Cost per Encounter)

ALLOWABLE COST PER ENCOUNTER

I. Health Care Cost (Excluding Dental and Mental Health)

A.	Direct Health Care Cost (P3 - Form A-1, Line A3, Col. VII)	8,382,560
B.	Allowable Overhead Cost (P13 - Form C, Line M1)	5,256,471
C.	Total Allowable Health Care Cost (A+B)	13,639,031
D.	Encounters (P12 - Form B-4, Health Care Total)	68,361
E.	Allowable Health Care Cost Per Encounter (C/D)	199.51

II. Dental

A.	Direct Dental Care Cost (P4 - Form A-2, Line B3, Col. VII)	882,392
B.	Allowable Overhead Cost (P13 - Form C, Line M2)	553,552
C.	Total Allowable Dental Cost (A+B)	1,435,944
D.	Encounters (P12 - Form B-4, Dental Total)	3,812
E.	Allowable Dental Cost Per Encounter (C/D)	376.69

III. Mental Health

A.	Direct Mental Health Care Cost (P5 - Form A-3, Line C3, Col. VII)	1,083,978
B.	Allowable Overhead Cost (P13 - Form C, Line M3)	679,448
C.	Total Allowable Mental Health Cost (A+B)	1,763,426
D.	Encounters (P12 - Form B-4, Mental Health Total)	6,855
E.	Allowable Mental Health Cost Per Encounter (C/D)	257.25

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Form E (Revenues)

REVENUES		I	II	III	IV	V
A.	Operating Revenue	Excluding Dental, Mental Health & Other	Dental	Mental Health	Other	Total (Col. I thru IV)
1.	Medicaid	6,210,567	392,330	737,113		7,340,010
2.	Private					0
3.	Medicare	643,488	353	101,319		745,160
4.	Patient Cash/Self Pay	288,639	76,412	4,644		369,695
5.	Other - Specify <u>Pharmacy</u>	2,742,352				2,742,352
6.	Total (1 thru 5)	9,885,046	469,095	843,076	0	11,197,217
B.	Other Revenue					
1.	Contributions					0
2.	Grants	8,578,721	794,075	372,008		9,744,804
3.	Interest					0
4.	Donations					0
5.	Other - Specify <u>Third Party</u>	1,320,133	37,417	84,286		1,441,836
6.	Other - Specify <u>Other Revenue</u>	3,544,791				3,544,791
7.	Other - Specify <u>Bad Debt</u>	(392,681)	(75,158)	(116,442)		(584,281)
8.	Other - Specify _____					0
9.	Other - Specify _____					0
10.	Other - Specify _____					0
11.	Total (1 thru 10)	13,050,964	756,334	339,852	0	14,147,150
C.	Other Revenue (Include revenue generated by non-approved FQHC sites)					
1.	Other - Specify _____					0
2.	Other - Specify _____					0
3.	Other - Specify _____					0
4.	Other - Specify _____					0
5.	Other - Specify _____					0
6.	Other - Specify _____					0
7.	Total (1 thru 7)	0	0	0	0	0
D.	Total Revenue (A6+B11+C7)	22,936,010	1,225,429	1,182,928	0	25,344,367

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Form F (Grants and Contributions)

GRANTS AND CONTRIBUTIONS (EXCLUDING THE PUBLIC HEALTH SERVICES GRANTS)

A.	Contributions	ACTUAL
	1. Services (<i>Excluding Dental, Mental Health and Other</i>)	
	2. Dental	
	3. Mental Health	
	4. Other - Specify _____	
	Other - Specify _____	
	Other - Specify _____	
	Other - Specify _____	
	Other - Specify _____	
	5. Total (1 thru 4)	0

B.	Grants (<i>Excluding PHS</i>)	
	1. Services (<i>Excluding Dental, Mental Health and Other</i>)	
	2. Dental	
	3. Mental Health	
	4. Other - Specify _____	
	Other - Specify _____	
	Other - Specify _____	
	Other - Specify _____	
	Other - Specify _____	
	5. Total (1 thru 4)	0

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Form G (Cost Disallowance and Offset)

COST DISALLOWANCE AND OFFSET

COST DISALLOWANCE AND OFFSET		
A.	Cost Disallowance	
	1. Entertainment	
	2. Fines and penalties	
	3. Bad debt	584,281
	4. Cost of actions to collect receivables	
	5. Advertising, except for recruitment of personnel	137,576
	6. Contingent reserves	
	7. Legal, Accounting and professional services incurred in connection with rehearing, arbitration, or judicial proceedings pertaining to the reimbursement approved by the Commissioner	
	8. Fundraising	
	9. Amortization of goodwill	
	10. Directors fees	
	11. Contributions	328,361
	12. Membership dues for public relations	
	13. Cost not related to patient care	
	14. Interest	33,338
	15. Pass through expenses	
	16. Total (1 thru 15)	1,083,556
B.	Cost Offset (<i>Expense Recovery</i>)	
	1. Refunds - Medicaid Outreach	
	2. Rent Income	
	3. In-Kind Medical Supplies	
	4. In-Kind Dental Supplies	
	5. In-Kind Computer Supplies	
	6. In-Kind Advertising	
	7. Total (1 thru 6)	0
C.	Total Cost Disallowance and Offset (A16+B7)	1,083,556