

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

Reporting Period:	From <u>7/1/2018</u>	To <u>6/30/2019</u>
FQHC Name:	COMMUNITY HEALTH CENTER, INC.	

7. Service Sites: List all service sites of the FQHC, including all FQHC-certified sites and any other non-FQHC service sites. Indicate whether the service site is FQHC certified. If a site or sites are not FQHC-certified, the associated costs should be reported on Form A-4 as non-allowable costs.

Provider Name	Location	FQHC Certified Yes/ No	Clinic/Provider No.
Community Health Center Inc.	675 Main Street, Middletown CT 06457	Yes	1164463840
Community Health Center Inc.	One Shaw's Cove, New London CT 06320	Yes	1982889309
Community Health Center Inc.	85 Lafayette Street, New Britain CT 06051	Yes	1912182338
Community Health Center Inc.	134 State Street, Meriden CT 06450	Yes	1720263148
Community Health Center Inc.	114 East Main Street, Clinton CT 06413	Yes	144735862
Community Health Center Inc.	49 Day Street, Norwalk CT 06854	Yes	1972788321
Community Health Center Inc.	481 Gold Star Hwy, Groton CT 06340	Yes	147334851
Community Health Center Inc.	8 Delay Street, Danbury CT 06810	Yes	1518139500
Community Health Center Inc.	5 N. Main Street, Enfield CT 06082	Yes	1679761027
Community Health Center Inc.	141 Franklin Street, Stamford CT 06901	Yes	1730311143
Community Health Center Inc.	59 North Main Street, Bristol CT 06010	Yes	1356676514
Community Health Center Inc.	51 North Elm Street, Waterbury CT 06702	Yes	1972866556
Community Health Center Inc., W.Y.A. Masters Manna	46 N. Plains Industrial Road, Wallingford CT 06492	Yes	1952591851
Community Health Center Inc., W.Y.A. Prudence Crandall	594 Burrirt Street, New Britain CT 06051	Yes	1952591851
Community Health Center Inc., W.Y.A. Shelter Now	43 St. Casimir Drive, Meriden CT 06450	Yes	1952591851
Community Health Center Inc., W.Y.A. Friendship Center	241 Arch Street, New Britain CT 06050	Yes	1952591851
Community Health Center Inc., W.Y.A. Eddy Shelter	1 LaBella Circle, Middletown CT 06457	Yes	1952591851
Community Health Center Inc., W.Y.A. New London	427 Huntington Avenue, New London CT 06320	Yes	1548677982
Community Health Center Inc., W.Y.A. City of Danbury Emergency	41 New Street, Danbury, CT 06810	Yes	1952591851
Community Health Center Inc.	76 New Britain Avenue, Hartford, CT 06106	Yes	1093163883

8. Related Parties: Related party information is reported on the following, which accompanies this cost report submission:

Select One:

SELECT ONE OF THE FOLLOWING OPTIONS:

None

COMPLETE CLINIC SITE LISTING FOR -				
FQHC Name:		COMMUNITY HEALTH CENTER INC.		
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Community Health Center Inc.	59 North Main Street, Bristol CT 06010	Yes	1356676514	
Community Health Center Inc.	51 North Elm Street, Waterbury CT 06702	Yes	1972866556	
Community Health Center Inc.	22 Fifth Street, Stamford, CT 06905	Yes	1457822934	
Community Health Center Inc.	76 New Britain Avenue, Hartford, CT 06106	Yes	1093163883	
Community Health Center Inc., W.Y.A. Masters Manna	46 N. Plains Industrial Road, Wallingford CT 06492	Yes	1952591851	
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Community Health Center Inc., W.Y.A. City of Danbury Emergency Shelter	41 New Street, Danbury, CT 06810	Yes	1952591851	

COMMUNITY HEALTH CENTER INC.

FY2019

Total Expenses per Audited Financial Statements	120,837,656
Bad Debt Reclassed	1,157,897
Presented as Revenue in FY19 AFS	
Reclassified in Medicaid Cost Report for consistency with prior years	
Total Expenses per Medicaid Cost Report	<u>121,995,553</u>
PER FORM A-5 GRANT TOTAL COSTS	121,995,607
DIFFERENCE / IMMATERIAL	<u>(54)</u>
Total Revenue per Audited Financial Statements	123,938,158
Bad Debt Reclassed	1,157,897
Presented as Revenue in FY19 AFS	
Reclassified in Medicaid Cost Report for consistency with prior years	
Total Revenue per Medicaid Cost Report	<u>125,096,055</u>
PER FORM P-15 REVENUES	125,096,055
DIFFERENCE / IMMATERIAL	<u>-</u>

FY2019

Sal 64,223,441.83
Ben 14,026,298.23
Adj 854,953.34

A2a	6,144,156.59
A2b	217,444.77
A2c	1,793,190.06
A2h	9,803,977.86
B2a	690,739.74
B2b	29,218.17
B2c	257,237.44
B2e	817,136.09
C2b	26,091.46
C2c	34,219.13
C2e	650,024.79
Eh1	144,052.04
Eh2	(700,249.63)
Ga	2,100,398.41
Gb	460,208.06
Gc	1,567,742.57
Gd	1,026,717.48
Ge	1,985,059.69
Gg	2,585,386.75
Gh	358,334.64
Hb	1,667,219.24
Hc	372,040.57
Hd	236,238.10
He	86,400.00
Hg	687,336.79
Hj	8,692,797.32
Admin	(0.00)

Grand Total 120,837,811.53

BAD DEBT 1,157,897.00

TOTAL EXP 121,995,708.53

Other Direct Healthcare Costs

Line

20

Advertising	6,598
American Express Clearing	3,630
CHC Donations	1,150
Cleaning / Housekeeping	703,750
Client Support - Dental	6,696
Client Support Miscellaneous	89
Client Support-Medical	20,701
Client Support-Misc	(70)
-Client Support-Misc-	67,974
Client Support-Miscellaneous	8,016
Client Support-Transportation	4,733
Client Support-Utilities	9,288
Computer Time	78,630
Continuing Education	192,446
Educational Materials	5,530
Equipment Leasing	97,845
Food Supplies	60,562
Health Fair Expense	4,771
HealthFair Expense	1,895
HealthFair Expenses	85
License and Certification	96,031
License and Certifications	1,185
Medical Lab	2,760
Medical Records / Archiving	880
Meetings and Conferences	81,313
Membership Dues	33,413
Miscellaneous Expense	15,543
Other Revenue	120,954
Other Transactions	850,370
Other-Contractual	1,951,253
Payroll Services	77,891
Postage	100,032
Postage/Freight	22
Prescription Drugs-340B Program	2,244,243
Prescription Drugs-340B Program CVS	451,758
Prescription Drugs-340B Program WALMAI	161,536
Printing Expense	40,307
Program Supplies	142,746
Property Taxes	147,420
Recruitment Costs	18,750
Temporary Help Expense	1,430,256
Translation Services	559,407
Other-Operator Error	929
Maintenance and Repairs	-
Medical Supplies PY	597
Client Support Misc	63

Grand Total

9,803,978

Reclass Public Relations and Weitzman
Bad Debt

500,783.33

851,756.43

11,156,517.62

Other Direct Dental Care Costs

Line

579

Cleaning / Housekeeping	139,289
Client Support - Dental	8,900
Client Support-Medical	695
Computer Time	3,055
Continuing Education	9,003
Dental Lab	362,141
Equipment Leasing	7,024
Food Supplies	1,183
License and Certification	17,638
Meetings and Conferences	11,026
Membership Dues	823
Miscellaneous Expense	859
Other-Uncompensated Care Credit	2,047
Payroll Services	15,832
Postage	3,066
Printing Expense	193
Program Supplies	5,080
Property Taxes	36,184
Translation Services	7,870
Other-Operator Error	185,228
Grand Total	817,136

Reclass Public Relations and Weitzman	108,370
Bad Debt	120,283

1,045,790

Other Direct Mental Health Care Costs

Line

American Express Clearing	860
Cleaning / Housekeeping	72,439
Client Support - BH	433
Client Support-Transportation	(20)
Computer Time	3,908
Continuing Education	42,290
Contractual Expense	64,126
Equipment Leasing	691
Food Supplies	3,338
License and Certification	22,803
Meetings and Conferences	15,894
Membership Dues	5,254
Miscellaneous Expense	1,105
Other-Uncompensated Care C	157,556
Payroll Services	14,146
Postage	3,119
Printing Expense	940
Program Supplies	8,892
Recruitment Costs	519
Rental Income	114,215
Temporary Help Expense	82,706
Translation Services	23,871
Other-Withheld fund	10,940
Grand Total	650,025

Reclass Public Relations and V	245,800
Bad Debt	185,856
	1,081,680

Non-Allowable Other Costs

Line

812

American Express Clearing	3
Cleaning / Housekeeping	5,347
-Client Support - Dental-	518
Client Support-Miscellaneous	13,131
Client Support-Transportation	2,260
Computer Time	3,827
Contractual Expense	47,697
Depreciation	19,539
Educational Materials	240
Equipment Leasing	600
Food Supplies	8,318
Gasoline	502
Health Fair Expense	415
Maintenance & Repairs	14,066
Meetings and Conferences	164
Membership Dues	2,282
Mileage	817
Minor Furniture Costs	1,485
Miscellaneous Expense	754
Office Supplies	2,354
Payroll Services	1,805
Phone Equipment	308
Postage	6,723
Postage/Freight	71
Printing Expense	8,280
Program Supplies	4,873
Property Taxes	10,477
Recruitment Costs	2,602
Rent	45,841
Telephone Expense	11,461
Travel	578
Travel Expense	2
Utilities	14,707
Water & Sewer Expense	1,436
RENT INTERCO - ELIMINATION	(1,040,963)
RENT - NIMAA	26,896
RENT - CECN	21,941
SUPPLIES - NURSES	2,275
SUPPLIES - NIMAA	51,686
SUPPLIES - CECN	4,432
Grand Total	(700,250)

Overhead - Administrative Other Costs

Line

Advertising	16,054.21
American Express Clearing	27,270.29
BAD DEBT	104,950.00
Bank Fees	138,416.41
CHC Donations	2,900.00
Cleaning / Housekeeping	84,133.07
Client Support-Medical	401.46
-Client Support-Misc-	(2,800.00)
Client Support-Miscellaneous	884.91
Computer Time	528,889.37
Continuing Education	37,117.13
Contract Computer Consultant	7,575.43
Contractual Expense	198,177.93
Donations	7,290.00
Drugs-Prescription	3,523.05
Educational Materials	32,580.12
Equipment Leasing	475,765.97
Equipment Rental	238
Food Supplies	48,159
Gasoline	20,058
Health Fair Expense	13,450
Investment Expense	6,863
JCAHO Expense	1,789
License and Certification	95,182
Literature	5,388
Maintenance & Repairs	6,451
Medical Lab	826
Medical Records / Archiving	44,925
Medical Supplies	25
Meetings and Conferences	243,732
Membership Dues	63,929
Mileage	47,224
Miscellaneous Expense	167,620
Payroll Services	16,085
Postage	220,085
Postage/Freight	(77)
Printing Expense	64,704
Program Supplies	46,258
Property Taxes	81,928
Recruitment Costs	798,969
Special Events Expense	3,101
SP-Sequestration	312,617
SP-Withheld fund	1,997,831
Summer Program	1,375
Temporary Help Expense	533,460
Translation Services	61,079

Travel	165,381
PURCHASED SERVICES - NURSES	50,157
PURCHASED SERVICES - NIMAA	84,092
PURCHASED SERVICES - CECN	308,990
PROFESSIONAL SERVICES - NURSES	11,903
PROFESSIONAL SERVICES - NIMAA	765,174
PROFESSIONAL SERVICES - CECN	739,553
Meetings and Conferences	870
Continuing Education	190
Call Center - NB- - Continuing Education	83
Grand Total	8,692,797

Reclass of Public Relations and Weitzman

Line

Advertising	102,116.66
American Express Clearing	(16,864.56)
CHC Donations	6,250.00
Cleaning / Housekeeping	13,142.12
Client Support-Miscellaneous	13,750.00
Computer Software	10,559.47
Computer Time	8,629.73
Continuing Education	2,999.16
Contractual Expense	302,014.53
Educational Materials	1,099.94
Equipment Leasing	14,242.38
Food Supplies	7,471.60
Health Fair Expense	11,668.01
License and Certification	5,331.77
Literature	352.95
Medical Records / Archiving	1,769.51
Medical Supplies	742.27
Meetings and Conferences	72,019.65
Membership Dues	5,714.12
Mileage	8,242.92
Minor Computer Equipment	17,466.36
Minor Equipment	6,578.21
Minor Furniture Costs	2,099.49
Miscellaneous Expense	1,307
Office Supplies	12,947
Payroll Services	2,421
Postage	1,893
Printing Expense	59,493
Program Supplies	74,183
Telephone Expense	42,107
Temporary Help Expense	8,996
Translation Services	3,096
Travel	51,113
Grand Total	854,953

Reclass of Public Relations and Weitzman

Medical	500,783.33
Dental	108,370.42
Mental Health	245,799.59
TOTAL	854,953.34

SBHC Reclass Medical to Mental Health

Cost Center	A20	A20	A20
510100	3,614	17,394	6,233
510200	311	568	3,529
510300	0	6,899	4,306
510400	870	155	10,103
510500	554	2,492	3,828
510600	3,165	4,455	31,827
510700		4,238	2,570
510800		205	1,243
510900		1,745	114
511000	68	1,544	3,544
511600	149		4,649
533100			57
540300			440
540600	56	118	7,986
543000			-
543100	2,017		9,613
543200	521		2,282
543300			3,580
543400	95		723
543500	248		2,995
543600	66		4,479
543700			1,530
543800	59		6,716
543900	83	892	7,354
544100	2,540	369	4,433
544400			1,123
544500	72		6,055
544600	1,029	689	8,340
544700	307		6,517
544800	301	924	7,932
544900	457	2,267	1,535
545000			1,895
545100	59		19,003
545200			722
545500	1,471		2,731
545600	1,310	3,950	4,396
545900	837		1,035
546000			2,018
546100	1,856	2,777	6,319
546400	317	1,306	2,455
546700	62	851	5,572
546710	27		2,339
546720	498		3,812
546800	40	879	876
546900	92	568	1,818

547200			1,263
547300	650	1,916	5,523
547400	391		1,334
549000	46		24
549100	342		1,049
549200			118
549300	262		142
550000			899
551000			573
552000			376
553000			5,501
555000	896		4,052
560000	160		3,544
561000			798
561100	11		1,796
561200	23		2,380
561300	434		3,043
561600			762
561700	6		288
561800	59		5,033
561900	231		1,288
562000			193
562200			449
562300			660
562500			999
563000	251	49,036	54
563100	1,468	4,154	1,367
563200	1,933	1,402	2,229
563300			1,848
563400			1,706
563500	80		449
563600	117		1,661
563700			1,467
563800			227
563900			50
564000	14		1,720
564100	194		1,113
564200			397
564300			50
564400			354
564500	168		965
564600	208		45
564700	627		1,052
564800	570		2,613
565100			610
565200			729
565500			574
565600			566
565300			560
565400			500
Grand Total	32,292	111,795	275,620

Reclass of Bad Debt**ACCT**

210100	98,875
210300	150,274
210400	140,282
210500	34,564
210600	132,706
210700	20,427
210800	24,886
210900	44,268
211000	19,501
211100	39,141
211200	20,926
211300	32,869
211400	25,405
220100	1,012
220300	12,138
220700	722
240100	(1)
270100	4,706
310100	22,291
310200	6,405
310300	9,798
310400	17,457
310600	13,557
310800	13,866
310900	7,618
311200	(7)
311300	411
311400	461
320100	3,672
320300	6,561
320400	2,885
320600	3,335
320800	7,094
320900	294
321000	4,586
410100	36,896
410300	36,219
410400	20,440
410500	5,124
410600	27,335
410700	6,730
410800	11,613
410900	11,044
411000	6,507
411100	7,952
411200	2,660

411300	10,165
411400	3,170
510100	936
510200	589
510300	4,220
510400	2,559
510500	805
510600	1,112
510700	236
510800	1,712
511000	556
511600	132
543100	285
543200	1,804
543300	85
543400	(9)
543500	1,164
543600	98
543700	232
543800	411
543900	3,565
544100	1,179
544400	180
544500	253
544600	240
544700	1,237
544800	1,060
545000	264
545100	1,249
545200	510
545500	105
545600	3,095
545900	902
546100	2,200
546400	2,192
546700	247
546710	247
546800	423
546900	1,184
547200	40
547300	1,331
547400	609
549100	441
553000	3,827
555000	769
560000	348
561000	287
561200	185
561300	1,139
561700	822
561800	45
562000	379
562200	(180)
562500	352

563200	674
563400	157
563600	49
564000	182
564100	185
564600	157
Grand Total	<u>1,157,896</u>

Medical	802,700.60
Dental	120,283.38
Mental Health	185,855.91
SBHC	49,055.83
Grand Total	<u>1,157,895.72</u>

Payroll and Benefits

	Hours	Salaries	Benefits
	60,144.26	6,241,933.85	1,371,352.87
	18,100.50	1,037,074.44	227,845.25
	263,657.86	10,966,822.99	2,409,411.01
	407,972.08	9,853,855.00	2,164,892.00 M
	28,555.57	2,241,286	492,410.46
	44,254.32	1,809,084.54	397,455.87
	58,197.14	2,683,424.30	589,548.32 D
	40,469.53	1,669,724.72	366,838.52
	223,391.20	7,469,098.68	1,640,960.98
	25,882.77	2,140,639.26	470,298.45 MH
	11,884.38	348,011.06	76,458.03
	2,080.00	66,368.62	14,581.19
	18,424.32	1,223,511.39	268,805.45
	252,407.62	11,719,449.68	2,574,763.10
	221,223.00	3,552,021.83	780,379.20 ALLOC
	1,676,644.55	63,022,306.04	13,846,000.69
		1,201,136.00	180,197.00
Total Salary and Benefits		64,223,442.04	14,026,197.69

Medical Salary and Benefits Other**A1d NUMBERS**

Cost Center	Salary	Benefits
100100	78,374	17,219
100900	79,766	17,525
101100	86,373	18,976
101200	104,733	23,010
210100	1,167,779	256,561
210300	1,179,535	259,144
210400	594,522	130,617
210500	253,526	55,700
210600	1,058,925	232,646
210700	395,515	86,895
210800	654,989	143,901
210900	222,840	48,958
211000	231,078	50,768
211100	469,475	103,144
211200	197,222	43,330
211300	215,551	47,357
211400	1,140,049	250,469
211500	33,966	7,462
220100	112,756	24,772
220300	306,292	67,292
230100	61,846	13,588
240100	239,587	52,637
250100	367,358	80,709
270100	50,015	10,988
310800	36,648	8,052
410100	44,671	9,814
410600	43,381	9,531
410800	67,822	14,900
510300	15,950	3,504
510400	35,350	7,766
510600	437	96
544900	39,096	8,589
546100	40,794	8,962
563100	37,560	8,252
800000	117,711	25,861
800600	72,362	15,898

9,853,854.79 2,164,891.90

Allocated Direct Support \$ 2,081,484.79 457,302.21

GRAND TOTAL MEDICAL 11,935,339.59 2,622,194.11

MEDICAL BUSINESS - POSITIONS

Title	SALARY	FRINGE BEN
Access to Care Coordinator	432,091	94,930
Administrative Assistant	56,897	12,500
Advocate - Adult	6,187	1,359
Behavioral Health Clinician - Unlicensed	67,822	14,900
Call Center Specialist	44,558	9,789
Care Coordinator	181,311	39,834
Case Manager, Community Based Services	52,493	11,533
Case Mgr, Behavioral Health	55,890	12,279
Case Mgr, Ryan White Serv	11,842	2,602
Communications Specialist	55,885	12,278
Counselor/Tester	33,869	7,441
Diabetes Educator	38,527	8,464
Dietitian	231,353	50,828
Director, Center for Key Populations	118,889	26,120
HIM Associate	104,733	23,010
Home Visitor	232,405	51,059
Lead Dietitian	79,269	17,415
Medical Assistant	3,249,272	713,865
Operations Manager	588,789	129,357
Outreach Worker	99,267	21,809
Patient Services Associate	1,549,332	340,388
Patient Services Associate II	290,810	63,891
Patient Services Coordinator	41,815	9,187
Peer Outreach and Support	38,865	8,539
Perinatal Support Worker	26,087	5,731
Podiatrist	348,003	76,456
Program Coordinator	34,006	7,471
Project Manager	21,401	4,702
Project Mgr-Special Projects	72,362	15,898
Referral Coordinator	45,022	9,891
Research Technician	40,426	8,882
Security Officer	104,062	22,862
Senior Medical Assistant	745,030	163,683
Senior Patient Services Associate	598,686	131,531
Site Director	60,640	13,323
Sr Program Manager, Prenatal	86,668	19,041
Staff Nurse (less than 32 hrs)	9,293	2,042
SUB TOTAL	9,853,855	2,164,892
Allocated Direct Support Staff	2,081,485	457,302
TOTAL MEDICAL	11,935,340	2,622,194

Dental Salary and Benefits Data**B1c DATA**

Cost Center	Title	Salary	Benefits
100200		39,250	8,623
100700		41,842	9,193
210800		143,969	31,630
220300		72,931	16,023
240100		108,643	23,869
250100		139,631	30,677
310100		256,263	56,301
310200		99,457	21,851
310300		276,552	60,758
310400		248,770	54,655
310600		220,125	48,361
310800		118,796.34	26,099.56
310900		48,906.90	10,744.84
320100		118,690.89	26,076.39
320300		55797.60251	12258.7333
320800		90938.86956	19979.2696
410100		87563.32054	19237.6615
710100		64,924.44	14,263.90
800000		36,397.00	7,996.42
800100		116,249.68	25,540.05
800300		233,632.43	51,329.04
800500		64,093.83	14,081.42
B1c DATA		2,683,424.30	589,548.32
Allocated Direct Support Staff		451,106.77	99,108.16
TOTAL DENTAL		3,134,531.08	688,656.48

DENTAL BUSINESS - POSITIONS

Title	SALARY	FRINGE BEN
Access to Care Coordinator	154,291	33,898
Centralized Biller	41,842	9,193
Dental Assistant	919,730	202,065
Patient Services Associate	205,221	45,087
Program Coordinator	359,689	79,024
Program Director	337,477	74,144
Program Director, NP Program	143,969	31,630
Program Manager	338,036	74,267
Purchasing Clerk	39,250	8,623
Senior Patient Services Associate	143,918	31,619
SUB TOTAL	2,683,424	589,548
Allocated Direct Support Staff	451,107	99,108
TOTAL DENTAL	3,134,531	688,656

Medical Health Salary and Benefits Other

C1c TOTAL

Cost Center	Title	Salary	Benefits
240100		111,600	24,518
410100		376,986	82,824
410300		556,230	122,204
410400		261,151	57,375
410600		270,753	59,484
410800		309,294	67,952
411100		254,626	55,941

C1c TOTAL
Allocated Direct Support Staff

2,140,639.26	470,298.45
1,019,430.27	223,968.83
3,160,069.52	694,267.27

ALLOTTED TOTAL

ALLOTTED TOTAL

Cost Center Title	Salary	Benefits
100100	460,046	101,072
100400	88,341	19,409
100500	8,255	1,814
100600	634,196	139,333
100900	43,341	9,522
101100	777,237	170,759
210100	247,848	54,452
210300	289,207	63,539
210400	151,655	33,319
210500	57,212	12,569
210600	100,729	22,130
210700	51,750	11,370
210900	180,118	39,572
211300	159,835	35,116
211400	31,969	7,024
230100	51,326	11,276
800000	27,432	6,027
800500	191,527	42,078

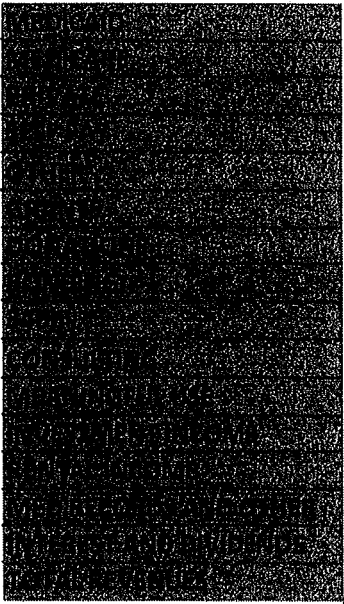
ALLOTTED TOTAL

3,552,021.83 780,379.20

Medical
Dental
Mental Health
TOTAL

2,081,484.79 457,302.21
451,106.77 99,108.16
1,019,430.27 223,968.83
3,552,021.83 780,379.20

EXPENSES



MEDICAL	DENTAL	BH	OTHER	
47,132,501	8,526,872	10,605,648	2,714,473	68,979,494
4,509,796	19,825	1,420,041	-	5,949,662
6,245,493	439,802	1,040,252	-	7,725,547
1,094,670	830,299	127,910	1,217,836	3,270,715
135,881	115,693	14,550	-	266,124
8,779,905	1,902,812	4,300,055	463,808	15,446,580
3,684,777	-	-	-	3,684,777
-	-	-	6,900,330	6,900,330
8,066,274	-	-	-	8,066,274
-	-	-	1,963,599	1,963,599
-	-	-	255,000	255,000
-	-	-	-	-
-	-	-	-	-
-	-	-	2,587,953	2,587,953
-	-	-	-	-
79,649,297	11,835,303	17,508,456	16,102,999	125,096,055

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

Reporting Period: From 7/1/2018 To 6/30/2019

FQHC Name: COMMUNITY HEALTH CENTER, INC.

Form A-2 (Direct Dental Care Cost)

RECLASSIFICATIONS AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES							
COST CENTER							
DIRECT DENTAL CARE COST							
	I	II	III	IV	V	VI	
	Salaries Personnel	Other Costs	Total	Reclassifications	Reclassified Trial Balance (Col 3 & 4)	Adjustments Increase (Decrease)	Net Expenses (Col 5 & 6)
1. Staff Cost							
a. Dentist	2,241,286	492,410	2,733,696		2,733,696		2,733,696
b. Dental Hygienst	1,809,085	397,456	2,206,540		2,206,540		2,206,540
c. Other - Specify							
	3,134,531	688,656	3,823,188		3,823,188		3,823,188
See Attachment A							
d. Subtotal Direct Dental Care Cost	7,184,901	1,578,523	8,763,424	0	8,763,424	0	8,763,424
2. Other Direct Dental Care Cost							
a. Dental Supplies		690,740	690,740		690,740		690,740
b. Transportation		29,218	29,218		29,218		29,218
c. Depreciation - Dental Equipment		257,237	257,237		257,237		257,237
d. Professional Liability Insurance							
e. Other - Specify							
See Attachment A		1,045,790	1,045,790		1,045,790		1,045,790
f. Subtotal Other Direct Dental Care Cost	0	2,022,985	2,022,985	0	2,022,985	0	2,022,985
3. TOTAL DIRECT DENTAL CARE COST (1d & 2f)							
	7,184,901	3,601,508	10,786,409	0	10,786,409	0	10,786,409

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

Reporting Period: From 7/1/2018 To 6/30/2019

FQHC Name: COMMUNITY HEALTH CENTER, INC.

Form A-3 (Direct Mental Health Care Cost)

RECLASSIFICATIONS AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES

COST CENTER	I Salaried Personnel	II Other Costs	III Total	IV Reclassifications	V Reclassified Trial Balance (Col 3 & 4)	VI Adjustments Increase (Decrease)	VII Net Expenses (Col 5 & 6)
C. DIRECT MENTAL HEALTH CARE COST							
1. Staff Cost							
a. Psychologist	1,669,725	366,839	2,036,563		2,036,563		2,036,563
b. Social Worker	7,469,099	1,640,961	9,110,060		9,110,060		9,110,060
c. Other - Specify	3,160,070	694,267	3,854,337		3,854,337		3,854,337
See Attachment A							
d. Subtotal Direct Mental Health Care Cost	12,298,893	2,702,067	15,000,960	0	15,000,960	0	15,000,960
2. Other Direct Mental Health Care Cost							
a. Medical Supplies							
b. Transportation		26,091	26,091	0	26,091		26,091
c. Depreciation - Mental Health Equipment		34,219	34,219	0	34,219		34,219
d. Professional Liability Insurance							
e. Other - Specify		1,081,680	1,081,680	729	1,082,410		1,082,410
See Attachment A							
f. Subtotal Other Direct Mental Health Care Cost	0	1,141,991	1,141,991	729	1,142,720	0	1,142,720
3. TOTAL DIRECT MENTAL HEALTH CARE COST (1d & 2f)							
	12,298,893	3,844,058	16,142,951	729	16,143,680	0	16,143,680
D. TOTAL DIRECT COST BEFORE NON-ALLOWABLE SERVICES	49,664,965	33,387,678	83,052,643	-	83,052,643	-	83,052,643

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

Reporting Period: From 7/1/2018 To 6/30/2019

FQHC Name: COMMUNITY HEALTH CENTER, INC.

Form A-4 (Non-Allowable Direct Other Service Cost)

RECLASSIFICATIONS AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES

	I	II	III	IV	V	VI	VII
COST CENTER	Salaried Personnel	Other Costs	Total	Reclassifications	Reclassified Trial Balance (Col 3 & 4)	Adjustments Increase (Decrease)	Net Expenses (Col 5 & 6)
E. NON-ALLOWABLE DIRECT OTHER SERVICE COST							
1. Service							
a. Clinical Diagnostic Lab			0		0		0
b. Radiology			0		0		0
c. Prescription Drugs/Pharmacy	348,011	76,458	424,469		424,469		424,469
d. Battered Women	66,369	14,581	80,950		80,950		80,950
e. Homeless			0		0		0
f. WIC			0		0		0
g. Non-FQHC Sites			(700,250)		(700,250)		(700,250)
h. Other - Specify			324,249		1,525,385		1,525,385
See Attachment A	1,201,136		1,492,317		1,492,317		1,492,317
Non-Patient Care Subsidiaries	1,223,511		268,805		0		0
Participation in Affiliate Business			0		0		0
			0		0		0
			0		0		0
			0		0		0
			0		0		0
			0		0		0
			0		0		0
i. Total Non-Allowable Direct Other Service Cost	2,839,027	(16,156)	2,822,871	0	2,822,871	0	2,822,871
F. TOTAL DIRECT COST (D+E1)	52,503,992	33,371,522	85,875,514		85,875,514		85,875,514

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

Reporting Period: From 7/1/2018 To 6/30/2019
 FQHC Name: COMMUNITY HEALTH CENTER, INC.

Form A-5 (Overhead Cost)

COST CENTER		I	II	III	IV	V	VI	VII
OVERHEAD - FACILITY COST		Salaried Personnel	Other Costs	Total	Reclassifications	Reclassified Trial Balance (Col 3 & 4)	Adjustments Increase (Decrease)	Net Expenses (Col 5 & 6)
G.								
a.	Rent		2,100,398	2,100,398		2,100,398		2,100,398
b.	Insurance		460,208	460,208		460,208		460,208
c.	Interest on Mortgage or Loans		1,567,743	1,567,743		1,567,743	0	1,567,743
d.	Utilities		1,026,717	1,026,717		1,026,717		1,026,717
e.	Depreciation - Building		1,985,060	1,985,060		1,985,060		1,985,060
f.	Depreciation - Equipment		0	0		0		0
g.	Housekeeping & Maintenance		2,585,387	2,585,387		2,585,387		2,585,387
h.	Other (Specify)							
	Water/Sewer/Sanitation		358,335	358,335		358,335		358,335
			0	0		0		0
			0	0		0		0
			0	0		0		0
			0	0		0		0
I.	Subtotal/Overhead - Facility Cost	0	10,063,848	10,063,848	0	10,063,848	0	10,063,848
H.								
OVERHEAD - ADMINISTRATIVE COST								
a.	Office Salaries	11,719,450	2,574,763	14,294,213		14,294,213		14,294,213
b.	Depreciation - Office Equipment		1,667,219	1,667,219		1,667,219		1,667,219
c.	Office Supplies		372,041	372,041		372,041		372,041
d.	Legal		236,238	236,238		236,238		236,238
e.	Accounting		86,400	86,400		86,400		86,400
f.	Insurance		687,337	687,337		687,337		687,337
g.	Telephone		0	0		0		0
h.	Advertising-Help Wanted		0	0		0		0
i.	Interest - Capital Loans		8,692,797	8,692,797		8,692,797		8,692,797
j.	Other (Specify)							
	See Attachment A							
			0	0		0		0
			0	0		0		0
			0	0		0		0
k.	Subtotal Overhead - Administrative Cost	11,719,450	14,316,795	26,036,245	0	26,036,245	0	26,036,245
l.	TOTAL OVERHEAD COST (G+H+k)	11,719,450	24,400,643	36,120,092	-	36,120,092	-	36,120,092
j.	GRAND TOTAL COSTS² (F+l)	54,223,442	57,772,165	121,995,607	-	121,995,607	-	121,995,607

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

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

Reporting Period: From 7/1/2018 To 6/30/2019
 FQHC Name: COMMUNITY 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)	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>	General Practitioner	125,000	1,500	1,040	0.50	
A. PHYSICIAN						
1. See Form B-1 Detail		6,241,934	87,296	60,144	28.92	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
6.					0.00	
7.					0.00	
8.					0.00	
9.					0.00	
10.					0.00	
Total Physician Encounters, Staff Hours and FTEs		6,241,934	87,296	60,144	28.92	
B. PHYSICIAN ASSISTANT						
1. See Form B-1 Detail		1,037,074	25,367	18,101	8.70	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Physician Assistant Encounters, Hours and FTEs		1,037,074	25,367	18,101	8.70	

STATE OF CONNECTICUT
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FEDERALLY QUALIFIED HEALTH CENTER (FQHC)

Reporting Period: From 7/1/2018 To 6/30/2019

FQHC Name: COMMUNITY 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>						
C. NURSE (APRN, MIDWIFE, RN)	General Practitioner	125,000	1,500	1,040	0.50	
1. See Form B-1 Detail		10,966,823	157,319	292,748	140.74	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Nurse Practitioner				292,748	140.74	
D. PHYSICIAN SERVICES UNDER CONTRACT						
1. See Form B-1 Detail			26,481	18,007	8.66	
2.					0.00	
3.					0.00	
4.					0.00	
5.					0.00	
Total Physician Services Under Contract				18,007	8.66	
E. OTHER HEALTH CARE PRACTITIONER						
1. See Form B-1 Detail		658,625	26,347	17,916	8.61	
2.					0.00	
3.					0.00	
Total Other Health Care Practitioner				17,916	8.61	

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

Reporting Period: From 7/1/2018 To 6/30/2019
FQHC Name: COMMUNITY 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)	Specialty	Compensation	Encounters	Total Employee Hours and FTEs	
				Employee Total Hours	FTEs (2080 hrs = 1 FTE)
	I	II	III	IV	V
A. PHYSICIAN					
1	PHYSICIAN	188,732	3,089	2,080	1.00
2	PHYSICIAN	235,295	3,188	2,084	1.00
3	PHYSICIAN	196,941	3,172	2,074	1.00
4	PHYSICIAN	240,263	2,653	2,128	1.02
5	PHYSICIAN	182,351	1,418	1,823	0.88
6	PHYSICIAN	228,138	3,783	2,448	1.18
7	PHYSICIAN	207,530	3,776	2,168	1.04
8	PHYSICIAN	203,701	3,521	2,128	1.02
9	PHYSICIAN	244,327	2,946	2,184	1.04
10	PHYSICIAN	144,693	2,170	1,221	0.59
11	PHYSICIAN	265,475	483	2,080	1.00
12	PHYSICIAN	32,529	185	283	0.14
13	PHYSICIAN	248,824	3,723	2,187	1.05
14	PHYSICIAN	126,257	2,042	1,088	0.52
15	PHYSICIAN	27,837	226	282	0.14
16	PHYSICIAN	207,844	2,540	2,117	1.02
17	PHYSICIAN	238,908	2,784	2,118	1.02
18	PHYSICIAN	204,897	3,862	2,088	1.00
19	PHYSICIAN	236,424	3,351	2,094	1.01
20	PHYSICIAN	108,655	2,206	943	0.45
21	PHYSICIAN	236,198	2,916	2,092	1.01
22	PHYSICIAN	187,213	3,215	2,084	1.00
23	PHYSICIAN	169,088	2,761	1,768	0.85
24	PHYSICIAN	200,885	2,784	2,099	1.01
25	PHYSICIAN	239,811	3,613	2,124	1.02
26	PHYSICIAN	190,754	2,355	1,890	0.91
27	PHYSICIAN	183,407	2,497	1,818	0.92
28	PHYSICIAN	18,040	274	188	0.09
29	PHYSICIAN	139,251	677	1,330	0.64
30	PHYSICIAN	214,191	3,556	2,092	1.01
31	PHYSICIAN	210,740	4271	2,147	1.03
32	PHYSICIAN	190,680	2,115	2,102	1.01
33	PHYSICIAN	110,853	2,007	1,180	0.58
34	PHYSICIAN	173,187	2,237	1,764	0.85
35					
36					
37					
38					
39					
40					
Total Physician Encounters, Staff Hours and FTEs		6,241,934	87,296	60,144	28.93
B. PHYSICIAN ASSISTANT					
1	PHYSICIAN ASSISTANT	28,882	641	480	0.23
2	PHYSICIAN ASSISTANT	18,850	318	320	0.15
3	PHYSICIAN ASSISTANT	120,901	3,903	2,080	1.00
4	PHYSICIAN ASSISTANT	40,627	893	692	0.33
5	PHYSICIAN ASSISTANT	130,695	3,540	2,080	1.00
6	PHYSICIAN ASSISTANT	129,792	2,723	2,080	1.00
7	PHYSICIAN ASSISTANT	80,114	1,601	1,360	0.65
8	PHYSICIAN ASSISTANT - SUB TOTAL	487,513	11,748	9,009	4.33
Total Physician Assistant Encounters, Hours and FTEs		1,037,074	25,367	18,101	8.69
C. NURSE (APRN, MIDWIFE, RN)					
1	RN	97,217	44	2,128	1.02
2	RN	88,336	0	2,203	1.06
3	RN	96,754	197	2,123	1.02
4	RN	71,651	0	2,007	0.98
5	RN	65,927	0	2,090	1.00
6	RN	6,743	0	183	0.09
7	RN	75,350	0	2,175	1.05
8	APRN	100,888	937	2,181	1.05
9	APRN	119,102	2,572	1,920	0.92
10	APRN	87,751	2,582	1,659	0.80
11	APRN	101,438	2,385	2,088	1.00
12	APRN	93,937	2,066	1,664	0.80
13	APRN	54,234	748	1,052	0.51
14	APRN	12,348	209	359	0.17
15	RN	68,866	901	2,174	1.04
16	RN	10,719	64	262	0.13
17	RN	53,329	478	1,344	0.65
18	RN	20,875	179	596	0.29
19	LPN	52,593	443	2,014	0.97
20	LPN	9,703	87	396	0.19

21 RN		117,888	21	2,103	1.01
22 RN		111,390	17	2,166	1.04
23 RN		71,360	11	1,357	0.65
24 APRN		58,829	563	1,712	0.82
25 APRN		58,829	564	1,712	0.82
26 RN		81,475	723	1,699	0.82
27 RN		62,080	428	1,900	0.91
28 ADMIN / STAFF		1,214	0	20	0.01
29 ADMIN / STAFF		21,552	1,340	864	0.42
30 ADMIN / STAFF		42,973	0	1,848	0.89
31 APRN		123,067	4,053	2,180	1.05
32 APRN		151,888	3,231	2,098	1.01
33 APRN		13,310	248	387	0.19
34 APRN		13,770	201	401	0.19
35 APRN		136,149	3,810	2,154	1.04
36 RN		79,365	1,183	2,137	1.03
37 RN		39,158	603	1,169	0.56
38 RN		71,801	961	2,088	1.00
39 RN		66,941	867	1,890	0.91
40 RN		47,289	708	1,216	0.58
41 RN		86,560	550	2,098	1.01
42 LPN		2,805	30	90	0.04
43 APRN		50,857	474	1,480	0.71
44 APRN		96,707	3,009	1,746	0.84
45 APRN		58,829	701	1,712	0.82
46 RN		3,735	0	59	0.03
47 RN		77,312	240	2,095	1.01
48 APRN		116,094	3,758	2,173	1.04
49 APRN		117,483	3,192	2,161	1.04
50 APRN		87,576	2,226	1,728	0.83
51 APRN		86,909	2,202	1,806	0.87
52 APRN		32,345	922	628	0.30
53 APRN		12,812	184	367	0.18
54 RN		59,118	681	1,738	0.84
55 RN		79,597	649	2,140	1.03
56 RN		55,239	437	1,476	0.71
57 RN		59,614	408	1,916	0.92
58 LPN		50,460	686	2,085	1.00
59 RN		77,837	574	2,193	1.05
60 RN		8,117	41	252	0.12
61 APRN		58,829	711	1,712	0.82
62 APRN		25,212	527	428	0.21
63 APRN		60,365	1,788	1,118	0.54
64 RN		78,843	563	2,128	1.02
65 RN		17,000	92	393	0.19
66 RN		89,912	677	2,127	1.02
67 RN		67,471	0	2,072	1.00
68 RN		101,133	0	2,082	1.00
69 RN		22,141	0	661	0.32
70 RN		82,661	0	2,174	1.04
71 RN		48,407	0	2,004	0.96
72 RN		43,033	0	1,681	0.81
73 RN		17,873	0	547	0.26
74 APRN		107,968	2,015	2,080	1.00
75 APRN		93,456	1,181	2,104	1.01
76 APRN		41,039	851	760	0.37
77 LPN		43,525	1,832	1,701	0.82
78 RN		70,138	388	2,088	1.00
79 RN		44,815	476	1,417	0.68
80 RN		48,564	354	1,188	0.57
81 RN		30,383	246	809	0.39
82 APRN		58,829	610	1,712	0.82
83 APRN		58,829	594	1,712	0.82
84 APRN		58,907	975	1,000	0.48
85 RN		54,823	216	1,619	0.78
86 RN		55,913	492	1,711	0.82
87 RN		35,595	0	1,413	0.68
88 RN		55,151	0	2,150	1.03
89 APRN		130,803	3,510	2,100	1.01
90 APRN		110,062	3,587	2,092	1.01
91 RN		11,367	39	312	0.15
92 APRN		143,969	1,884	2,105	1.01
93 APRN		102,881	2,769	2,120	1.02
94 APRN		65,538	1,389	1,392	0.67
95 RN		73,493	1,020	2,133	1.03
96 RN		15,101	92	406	0.20
97 RN		70,831	0	1,289	0.62
98 RN		45,947	0	2,074	1.00
99 RN		67,557	0	1,956	0.94
100 RN		68,114	806	1,843	0.89
101 RN		25,218	151	639	0.31
102 RN		61,894	613	1,670	0.80
103 APRN		124,736	3,218	2,118	1.02
104 APRN		32,184	562	556	0.27
105 APRN		108,088	1,339	2,351	1.13
106 RN		75,688	837	2,120	1.02
107 RN		72,964	805	2,116	1.02
108 RN		35,353	0	1,461	0.70
109 APRN		119,906	3,761	2,124	1.02
110 APRN		122,998	1,665	2,088	1.00

111	APRN	113,707	3,038	2,093	1.01
112	APRN	128,898	2,920	2,108	1.01
113	RN	91,667	507	2,163	1.04
114	RN	82,298	462	2,105	1.01
115	RN	89,856	0	2,104	1.01
116	RN	27,101	0	686	0.33
117	RN	50,432	0	1,156	0.58
118	RN	14,234	0	446	0.21
119	RN	23,181	0	616	0.30
120	RN	12,048	0	404	0.19
121	APRN	121,170	3,323	2,084	1.00
122	APRN	61,691	945	1,843	0.89
123	APRN	3,103	38	56	0.03
124	RN	78,426	230	2,146	1.03
125	RN	89,625	320	2,232	1.07
126	RN	58,327	121	1,375	0.68
127	LPN	59,674	270	1,855	0.89
128	RN	52,502	209	1,311	0.63
129	RN	58,126	90	1,419	0.68
130	RN	73,583	157	2,059	0.99
131	LPN	60,684	118	1,825	0.88
132	LPN	70,653	117	2,160	1.04
133	RN	2,514	20	65	0.03
134	RN	105,593	14	2,080	1.00
135	APRN	18,850	307	320	0.15
136	CNM	124,747	2,378	2,056	0.99
137	RN	78,808	304	2,081	1.00
138	RN	61,843	621	2,049	0.99
139	APRN	68,863	528	1,713	0.82
140	APRN	91,257	655	1,690	0.81
141	APRN	71,954	512	1,146	0.56
142	RN	85,489	152	2,131	1.02
143	APRN	63,804	358	1,733	0.83
144	APRN	129,378	616	1,825	0.88
145	APRN	27,243	195	356	0.17
146	APRN	96,781	1,737	2,105	1.01
147	APRN	99,676	1,348	2,134	1.03
148	APRN	94,958	1,639	2,083	1.00
149	APRN	91,130	1,512	2,080	1.00
150	APRN	97,629	2,296	2,120	1.02
151	APRN	107,741	2,606	2,375	1.14
152	APRN	30,043	477	690	0.33
153	APRN	10,636	0	228	0.11
154	APRN	96,284	1,240	2,180	1.05
155	APRN	61,364	938	1,384	0.67
156	APRN	92,367	1,072	2,104	1.01
157	APRN	45,268	563	1,002	0.48
158	APRN	40,158	428	930	0.45
159	APRN	72,045	743	1,807	0.87
160	APRN	86,188	584	1,455	0.70
161	APRN	96,464	912	2,083	1.00
162	APRN	91,285	1,444	2,063	1.00
163	APRN	80,236	763	1,828	0.88
164	APRN	73,043	1,080	1,563	0.75
165	APRN	97,000	1,455	2,080	1.00
166	APRN	78,448	1,877	1,682	0.81
167	APRN	13,088	28	295	0.14
168	APRN	40,590	189	870	0.42
169	APRN	58,863	528	1,713	0.82
170	APRN	CONTRACTED	1,011	1,891	0.91
171	APRN	CONTRACTED	659	1,606	0.77
172	APRN	CONTRACTED	150	281	0.13
173	APRN	CONTRACTED	2,295	4,292	2.06
174	APRN	CONTRACTED	303	567	0.27
175	APRN	CONTRACTED	1,097	2,051	0.99
176	APRN	CONTRACTED	1,693	3,640	1.70
177	APRN	CONTRACTED	624	1,167	0.58
178	APRN	CONTRACTED	884	1,653	0.79
179	APRN	CONTRACTED	2,177	4,071	1.96
180	RN	CONTRACTED	394	737	0.35
181	APRN	CONTRACTED	483	903	0.43
182	APRN	CONTRACTED	237	443	0.21
183	APRN	CONTRACTED	708	1,324	0.64
184	APRN	CONTRACTED	1,718	3,209	1.54
185	APRN	CONTRACTED	358	669	0.32
186	APRN	CONTRACTED	295	552	0.27
187	RN	CONTRACTED	72	135	0.06
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Total Nurse Practitioner			11,178,263	157,319	292,748	140.71

D	PHYSICIAN SERVICES UNDER CONTRACT					
1	PHYSICIAN	General Practitioner	CONTRACTED	43	29	0.01
2	PHYSICIAN	General Practitioner	CONTRACTED	163	111	0.05
3	PHYSICIAN	General Practitioner	CONTRACTED	152	103	0.05
4	PHYSICIAN	General Practitioner	CONTRACTED	141	96	0.05
5	PHYSICIAN	General Practitioner	CONTRACTED	359	244	0.12
6	PHYSICIAN	General Practitioner	CONTRACTED	175	119	0.06
7	PHYSICIAN	General Practitioner	CONTRACTED	173	118	0.06
8	PHYSICIAN	General Practitioner	CONTRACTED	166	113	0.05
9	PHYSICIAN	General Practitioner	CONTRACTED	213	145	0.07
10	PHYSICIAN	General Practitioner	CONTRACTED	169	115	0.06
11	PHYSICIAN	General Practitioner	CONTRACTED	38	26	0.01
12	PHYSICIAN	General Practitioner	CONTRACTED	41	28	0.01
13	PHYSICIAN	General Practitioner	CONTRACTED	197	134	0.06
14	PHYSICIAN	General Practitioner	CONTRACTED	71	48	0.02
15	PHYSICIAN	General Practitioner	CONTRACTED	206	140	0.07
16	PHYSICIAN	General Practitioner	CONTRACTED	123	84	0.04
17	PHYSICIAN	General Practitioner	CONTRACTED	218	148	0.07
18	PHYSICIAN	General Practitioner	CONTRACTED	253	172	0.08
19	PHYSICIAN	General Practitioner	CONTRACTED	237	161	0.08
20	PHYSICIAN	General Practitioner	CONTRACTED	271	184	0.09
21	PHYSICIAN	General Practitioner	CONTRACTED	69	47	0.02
22	PHYSICIAN	General Practitioner	CONTRACTED	5	3	0.00
23	PHYSICIAN	General Practitioner	CONTRACTED	156	106	0.05
24	PHYSICIAN	General Practitioner	CONTRACTED	146	99	0.05
25	PHYSICIAN	General Practitioner	CONTRACTED	169	115	0.06
26	PHYSICIAN	General Practitioner	CONTRACTED	299	203	0.10
27	PHYSICIAN	General Practitioner	CONTRACTED	229	156	0.07
28	PHYSICIAN	General Practitioner	CONTRACTED	59	40	0.02
29	PHYSICIAN	General Practitioner	CONTRACTED	70	48	0.02
30	PHYSICIAN	General Practitioner	CONTRACTED	170	116	0.06
31	PHYSICIAN	General Practitioner	CONTRACTED	13	9	0.00
32	PHYSICIAN	General Practitioner	CONTRACTED	176	121	0.06
33	PHYSICIAN	General Practitioner	CONTRACTED	65	44	0.02
34	PHYSICIAN	General Practitioner	CONTRACTED	1,598	1,087	0.52
35	PHYSICIAN	General Practitioner	CONTRACTED	140	95	0.05
36	PHYSICIAN	General Practitioner	CONTRACTED	1	1	0.00
37	PHYSICIAN	General Practitioner	CONTRACTED	170	116	0.06
38	PHYSICIAN	General Practitioner	CONTRACTED	77	52	0.03
39	PHYSICIAN	General Practitioner	CONTRACTED	1,322	899	0.43
40	PHYSICIAN	General Practitioner	CONTRACTED	9	6	0.00
41	PHYSICIAN	General Practitioner	CONTRACTED	240	163	0.08
42	PHYSICIAN	General Practitioner	CONTRACTED	165	112	0.05
43	PHYSICIAN	General Practitioner	CONTRACTED	31	21	0.01
44	PHYSICIAN	General Practitioner	CONTRACTED	149	101	0.05
45	PHYSICIAN	General Practitioner	CONTRACTED	74	50	0.02
46	PHYSICIAN	General Practitioner	CONTRACTED	1	1	0.00
47	PHYSICIAN	General Practitioner	CONTRACTED	147	100	0.05
48	PHYSICIAN	General Practitioner	CONTRACTED	696	473	0.23
49	PHYSICIAN	General Practitioner	CONTRACTED	1,049	713	0.34
50	PHYSICIAN	General Practitioner	CONTRACTED	63	43	0.02
51	PHYSICIAN	General Practitioner	CONTRACTED	892	607	0.29
52	PHYSICIAN	General Practitioner	CONTRACTED	203	138	0.07
53	PHYSICIAN	General Practitioner	CONTRACTED	134	91	0.04
54	PHYSICIAN	General Practitioner	CONTRACTED	247	168	0.08
55	PHYSICIAN	General Practitioner	CONTRACTED	79	54	0.03
56	PHYSICIAN	General Practitioner	CONTRACTED	140	95	0.05
57	PHYSICIAN	General Practitioner	CONTRACTED	312	212	0.10
58	PHYSICIAN	General Practitioner	CONTRACTED	392	267	0.13
59	PHYSICIAN	General Practitioner	CONTRACTED	23	16	0.01
60	PHYSICIAN	General Practitioner	CONTRACTED	120	82	0.04
61	PHYSICIAN	General Practitioner	CONTRACTED	41	28	0.01
62	PHYSICIAN	General Practitioner	CONTRACTED	234	159	0.08
63	PHYSICIAN	General Practitioner	CONTRACTED	49	33	0.02
64	PHYSICIAN	General Practitioner	CONTRACTED	49	33	0.02
65	PHYSICIAN	General Practitioner	CONTRACTED	374	254	0.12
66	PHYSICIAN	General Practitioner	CONTRACTED	1	1	0.00
67	PHYSICIAN	General Practitioner	CONTRACTED	15	10	0.00
68	PHYSICIAN	General Practitioner	CONTRACTED	602	545	0.26
69	PHYSICIAN	General Practitioner	CONTRACTED	30	20	0.01
70	PHYSICIAN	General Practitioner	CONTRACTED	288	198	0.09
71	PHYSICIAN	General Practitioner	CONTRACTED	3	2	0.00
72	PHYSICIAN	General Practitioner	CONTRACTED	270	184	0.09
73	PHYSICIAN	General Practitioner	CONTRACTED	180	122	0.06
74	PHYSICIAN	General Practitioner	CONTRACTED	42	29	0.01
75	PHYSICIAN	General Practitioner	CONTRACTED	69	47	0.02

76	PHYSICIAN	General Practitioner	CONTRACTED	1,573	1,070	0.51	
77	PHYSICIAN	General Practitioner	CONTRACTED	29	20	0.01	
78	PHYSICIAN	General Practitioner	CONTRACTED	413	281	0.14	
79	PHYSICIAN	General Practitioner	CONTRACTED	117	80	0.04	
80	PHYSICIAN	General Practitioner	CONTRACTED	473	322	0.15	
81	PHYSICIAN	General Practitioner	CONTRACTED	42	29	0.01	
82	PHYSICIAN	General Practitioner	CONTRACTED	43	29	0.01	
83	PHYSICIAN	General Practitioner	CONTRACTED	53	36	0.02	
84	PHYSICIAN	General Practitioner	CONTRACTED	83	56	0.03	
85	PHYSICIAN	General Practitioner	CONTRACTED	158	107	0.05	
86	PHYSICIAN	General Practitioner	CONTRACTED	77	52	0.03	
87	PHYSICIAN	General Practitioner	CONTRACTED	87	59	0.03	
88	PHYSICIAN	General Practitioner	CONTRACTED	175	119	0.06	
89	PHYSICIAN	General Practitioner	CONTRACTED	879	482	0.22	
90	PHYSICIAN	General Practitioner	CONTRACTED	181	109	0.05	
91	PHYSICIAN	General Practitioner	CONTRACTED	533	362	0.17	
92	PHYSICIAN	General Practitioner	CONTRACTED	127	86	0.04	
93	PHYSICIAN	General Practitioner	CONTRACTED	136	92	0.04	
94	PHYSICIAN	General Practitioner	CONTRACTED	147	100	0.05	
95	PHYSICIAN	General Practitioner	CONTRACTED	163	111	0.05	
96	PHYSICIAN	General Practitioner	CONTRACTED	38	26	0.01	
97	PHYSICIAN	General Practitioner	CONTRACTED	67	46	0.02	
98	PHYSICIAN	General Practitioner	CONTRACTED	34	23	0.01	
99	PHYSICIAN ASSISTANT	General Practitioner	CONTRACTED	469	319	0.15	
100	PHYSICIAN ASSISTANT	General Practitioner	CONTRACTED	1,069	727	0.35	
101	PHYSICIAN ASSISTANT	General Practitioner	CONTRACTED	880	598	0.29	
102	PHYSICIAN ASSISTANT	General Practitioner	CONTRACTED	2,697	1,834	0.88	
103							
104							
	Total Physician Services Under Contract			102	26,491	16,007	8.63

E. OTHER HEALTH CARE PRACTITIONER							
1	Dietician	Dietician		9,510	525	357	0.17
2	Dietician	Dietician		84,563	1,196	813	0.39
3	Dietician	Dietician		55,889	1,128	767	0.37
4	Dietician	Dietician		69,759	696	473	0.23
5	Dietician	Dietician		42,684	593	403	0.19
6	Dietician	Dietician		36,529	640	435	0.21
7	Dietician	Dietician		31,488	595	405	0.19
8	Podiatrist	Podiatrist		129,703	3,189	2,189	1.04
9	Podiatrist	Podiatrist		7,456	37	25	0.01
10	Podiatrist	Podiatrist		29,537	929	632	0.30
11	Podiatrist	Podiatrist		96,845	965	656	0.32
12	Podiatrist	Podiatrist		84,482	851	579	0.28
13							
14							
15							
16							
17							
18	Chiropractor	Chiropractor	CONTRACTED	987	871	0.32	
19	Chiropractor	Chiropractor	CONTRACTED	2,982	2,014	0.97	
20	Chiropractor	Chiropractor	CONTRACTED	3,307	2,249	1.08	
21	Chiropractor	Chiropractor	CONTRACTED	1,223	832	0.40	
22	Chiropractor	Chiropractor	CONTRACTED	1,011	687	0.33	
23	Chiropractor	Chiropractor	CONTRACTED	1,833	1,248	0.60	
24	Chiropractor	Chiropractor	CONTRACTED	3,680	2,502	1.20	
25							
26							
27							
28							
	Total Other Health Care Practitioner			658,626	26,347	17,918	8.60

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

Reporting Period: From 7/1/2018 To 6/30/2019
 FQHC Name: COMMUNITY 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 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., Dentist 1)</i>				
A. DENTIST				
1. See Form B-2 Detail	125,000	1,500	1,040	0.50
2.	2,241,286	37,190	30,611	14.72
3.				0.00
4.				0.00
5.				0.00
Total Dentist Encounters, Staff Hours and FTEs	2,241,286	37,190	30,611	14.72
B. DENTAL HYGIENIST				
1. See Form B-2 Detail	1,809,085	39,936	44,254	21.28
2.				0.00
3.				0.00
4.				0.00
5.				0.00
Total Dental Hygienist Encounters, Hours and FTEs	1,809,085	39,936	44,254	21.28
C. OTHER DENTAL PRACTITIONER				
1.				0.00
2.				0.00
3.				0.00
4.				0.00
5.				0.00
Total Other Dental Practitioner Encounters, Hours and FTEs	0	0	0	0.00

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

Reporting Period: From 7/1/2018 To 6/30/2019
FQHC Name: COMMUNITY 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 II	Encounters III	Total Employee Hours and FTEs		
			Employee Total Hours IV	FTEs (2080 hrs = 1 FTE) V	
A. DENTIST					
1 DENTIST	201,469	1,520	2,127	1.02	
2 DENTIST	26,460	391	370	0.18	
3 DENTIST	15,143	186	185	0.09	
4 DENTIST	180,523	2,444	2,080	1.00	
5 DENTIST	131,944	1,987	1,712	0.82	
6 DENTIST	21,320	211	261	0.13	
7 DENTIST	36,051	429	480	0.23	
8 DENTIST	6,334	225	106	0.05	
9 DENTIST	157,635	2,689	2,080	1.00	
10 DENTIST	124,962	2,041	1,673	0.80	
11 DENTIST	122,370	2,149	1,558	0.75	
12 DENTIST	160,969	2,875	2,102	1.01	
13 DENTIST	159,427	3,173	2,101	1.01	
14 DENTIST	141,892	2,016	1,852	0.89	
15 DENTIST	17,020	246	222	0.11	
16 DENTIST	171,506	2,939	2,161	1.04	
17 DENTIST	142,439	2,669	2,086	1.00	
18 DENTIST	159,269	2,603	2,080	1.00	
19 DENTIST	45,568	509	582	0.28	
20 DENTIST	18,879	117	216	0.10	
21 DENTIST	55,309	816	722	0.35	
22 DENTIST	145,795	1,932	1,800	0.87	
23 DENTIST	CONTRACT	1,076	732	0.35	
24 DENTIST	CONTRACT	1	1	0.00	
25 DENTIST	CONTRACT	1,038	706	0.34	
26 DENTIST	CONTRACT	908	617	0.30	
Total Dentist Encounters, Staff Hours and FTEs	2,241,286	37,190	30,611	14.72	
B. DENTAL HYGIENIST					
1 DENTAL HYGIENIST	98,341	2,163	2,247	1.08	
2 DENTAL HYGIENIST	86,465	2,616	2,089	1.00	
3 DENTAL HYGIENIST	82,927	2,103	1,861	0.89	
4 DENTAL HYGIENIST	77,424	1,874	1,866	0.90	
5 DENTAL HYGIENIST	85,326	1,932	2,091	1.01	
6 DENTAL HYGIENIST	31,519	1,047	788	0.38	
7 DENTAL HYGIENIST	58,395	1,506	1,566	0.75	
8 DENTAL HYGIENIST	24,638	175	1,191	0.57	
9 DENTAL HYGIENIST	18,300	46	875	0.42	
10 DENTAL HYGIENIST	92,739	2,191	2,123	1.02	
11 DENTAL HYGIENIST	72,930	1,604	1,665	0.80	
12 DENTAL HYGIENIST	72,468	1,731	1,706	0.82	
13 DENTAL HYGIENIST	61,767	1,278	1,534	0.74	
14 DENTAL HYGIENIST	57,850	1,425	2,123	1.02	
15 DENTAL HYGIENIST	96,526	1,930	2,107	1.01	
16 DENTAL HYGIENIST	38,002	1,064	823	0.40	
17 DENTAL HYGIENIST	87,420	2,698	2,153	1.04	
18 DENTAL HYGIENIST	105,829	249	2,080	1.00	
19 DENTAL HYGIENIST	18,062	196	429	0.21	
20 DENTAL HYGIENIST	25,168	125	704	0.34	
21 DENTAL HYGIENIST	84,024	2,741	2,068	0.99	
22 DENTAL HYGIENIST	50,550	1,180	1,197	0.58	
23 DENTAL HYGIENIST	51,611	1,037	1,218	0.59	
24 DENTAL HYGIENIST	74,759	2,150	1,789	0.86	
25 DENTAL HYGIENIST	33,936	425	787	0.38	
26 DENTAL HYGIENIST	62,645	1,657	1,546	0.74	
27 DENTAL HYGIENIST	44,451	702	1,014	0.49	
28 DENTAL HYGIENIST	32,594	574	812	0.39	
29 DENTAL HYGIENIST	79,708	1,520	1,720	0.83	
30 DENTAL HYGIENIST	3,611	77	84	0.04	
Total Dental Hygienist Encounters, Hours and FTEs	1,809,085	39,836	44,254	21.29	
C. OTHER DENTAL PRACTITIONER					
1					
2					
3					
4					
5					
6					
7					
8					
Total Other Dental Practitioner Encounters, Hours and FTEs	0	0	0	0.00	

STATE OF CONNECTICUT
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FEDERALLY QUALIFIED HEALTH CENTER (FQHC)

Reporting Period: From 7/1/2018 To 6/30/2019
 FQHC Name: COMMUNITY 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	Compensation	Encounters	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. See Form B-3 Detail	1,669,725	21,780	40,740	19.59
2.				0.00
3.				0.00
4.				0.00
5.				0.00
Total Psychologist Encounters, Staff Hours and FTEs	1,669,725	21,780	40,740	19.59
B. SOCIAL WORKER				
1. See Form B-3 Detail	7,469,099	120,034	223,391	107.40
2.				0.00
3.				0.00
4.				0.00
5.				0.00
Total Social Worker Encounters, Hours and FTEs	7,469,099	120,034	223,391	107.40
C. OTHER MENTAL HEALTH PRACTITIONER				
1. See Form B-3 Detail	2,063,838	15,675	21,923	10.54
2.				0.00
3.				0.00
4.				0.00
5.				0.00
Total Other Mental Health Practitioner Encounters, Hours and FTEs	2,063,838	15,675	21,923	10.54

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Reporting Period: From 7/1/2018 To 6/30/2019
FQHC Name: COMMUNITY 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	Compensation II	Encounters III	Total Employee Hours and FTEs	
			Employee Total Hours IV	FTEs (2080 hrs = 1 FTE) V
<i>Provide Reason for Inclusion (e.g., Psychologist)</i>				
A	PSYCHOLOGIST			
1	PSYCHOLOGIST	217,465	330	2,080 1.00
2	PSYCHOLOGIST	88,681	481	2,088 1.00
3	PSYCHOLOGIST	9,602	130	399 0.19
4	PSYCHOLOGIST	68,835	1,378	2,049 0.99
5	PSYCHOLOGIST	106,471	1,255	2,080 1.00
6	PSYCHOLOGIST	75,967	1,300	2,108 1.01
7	PSYCHOLOGIST	58,892	654	1,285 0.61
8	PSYCHOLOGIST	85,211	1,393	2,143 1.03
9	PSYCHOLOGIST	71,225	1,511	2,085 1.00
10	PSYCHOLOGIST	77,444	1,182	1,819 0.87
11	PSYCHOLOGIST	50,938	864	1,352 0.65
12	PSYCHOLOGIST	88,452	1,051	1,919 0.92
13	PSYCHOLOGIST	74,028	1,620	2,095 1.01
14	PSYCHOLOGIST	74,452	845	2,116 1.02
15	PSYCHOLOGIST	33,775	444	795 0.38
16	PSYCHOLOGIST	8,661	112	353 0.17
17	PSYCHOLOGIST	91,400	1,390	2,106 1.01
18	PSYCHOLOGIST	48,796	716	1,183 0.57
19	PSYCHOLOGIST	81,763	1,340	2,120 1.02
20	PSYCHOLOGIST	22,337	173	510 0.25
21	PSYCHOLOGIST	41,530	510	1,692 0.81
22	PSYCHOLOGIST	42,732	640	1,741 0.84
23	PSYCHOLOGIST	73,948	1,108	2,276 1.09
24	PSYCHOLOGIST	77,192	955	2,097 1.01
26	PSYCHOLOGIST	CONTRACTED	226	154 0.07
28	PSYCHOLOGIST	CONTRACTED	172	117 0.06
27				
28				
29				
Total Psychologist Encounters, Staff Hours and FTEs		1,669,725	21,790	40,740 19.58

B SOCIAL WORKER				
1	LPC	94,548	1,323	2,105 1.01
2	LCSW	39,485	24	1,074 0.52
3	LCSW	71,871	1,327	1,585 0.76
4	LCSW	61,213	668	1,458 0.70
5	LCSW	74,735	1,515	2,084 1.00
6	CADC	84,158	1,309	2,108 1.01
7	LCSW	21,701	267	597 0.29
8	LCSW	34,213	277	968 0.47
9	LPC	16,023	100	480 0.23
10	LCSW	76,070	1,432	2,061 0.99
11	LCSW	71,823	1,123	1,938 0.93
12	LCSW	67,851	859	1,833 0.93
13	PsyD	42,384	659	1,726 0.83
14	LCSW	83,469	1,559	2,092 1.01
15	LCSW	78,787	1,345	2,110 1.01
16	Jr. LPC	62,451	465	1,746 0.84
17	LCSW	18,435	213	552 0.27
18	LCSW	99,907	1,499	2,374 1.14
19	LCSW	62,348	1,419	1,962 0.94
20	LCSW	1,693	16	41 0.02
21	PsyD	42,045	582	1,713 0.82
22	LMFT	83,432	1,655	2,161 1.04
23	LCSW	72,409	1,279	2,088 1.00
24	LCSW	64,158	687	1,922 0.92
25	LPC	46,860	601	1,156 0.56
26	LCSW	72,681	1,225	1,902 0.91
27	LCSW	70,779	2,226	2,143 1.03
28	LCSW	55,962	763	1,520 0.73
29	LPC	64,250	969	1,864 0.90
30	LCSW	60,381	1,011	1,578 0.76
31	PhD	42,021	594	1,712 0.82
32	LMFT	52,323	877	1,640 0.79
33	LPC	50,568	767	1,374 0.66
34	LCSW	73,197	1,640	2,112 1.02
35	LCSW	85,058	1,292	2,084 1.00
36	LCSW	69,649	763	1,860 0.90
37	LCSW	70,237	1,082	2,044 0.98
38	LPC	72,640	1,062	2,082 1.00
39	LCSW	77,963	1,454	2,082 1.00
40	LCSW	73,343	1,144	2,084 1.00
41	PsyD	70,284	514	2,101 1.01
42	LCSW	80,985	943	2,108 1.01
43	LCSW	67,225	1,396	2,083 1.00
44	LCSW	69,219	1,184	2,080 1.00

1	APRN	111,600	1,093	1,684	0.81
2	MD	85,922	398	517	0.25
3	MD	79,100	353	620	0.30
4	APRN	12,782	281	221	0.11
5	APRN	13,477	107	366	0.18
6	APRN	13,548	40	207	0.10
7	APRN	144,768	1,728	2,185	1.05
8	PhD	7,867	0	143	0.07
9	MD	199,624	1,049	1,527	0.73
10	APRN	136,470	1,713	2,080	1.00
11	APRN	60,432	679	947	0.46
12	APRN	122,424	1,241	2,083	1.00
13	MD	140,171	1,015	1,248	0.60
14	APRN	120,880	1,275	1,840	0.88
15	MD	270,753	2,138	2,080	1.00
16	MD	309,284	957	2,077	1.00
17	MD	254,626	1,608	2,100	1.01
18					0.00
19					0.00
20					0.00
21					0.00
22					0.00
23					0.00
24					0.00
25					0.00
26					0.00
27					0.00
28					0.00
29					0.00
30					0.00
31					0.00
32					0.00
Total Other Mental Health Practitioner Encounters, Hours and FTEs		2,063,838	15,675	21,923	10.55

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FEDERALLY QUALIFIED HEALTH CENTER (FQHC)

Reporting Period: From 7/1/2018 To 6/30/2019

FQHC Name: COMMUNITY 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	Encounters	Total Hours	FTEs (2,080 hrs = 1 FTE)		
A. HEALTH CARE PRACTITIONERS	4	500,000	150,000	100,000	2	1	10,000	8,320	4.00		
1. PHYSICIAN		6,241,934	239,170	169,980	7	6	87,296	60,144	28.92		
2. PHYSICIAN ASSISTANT		1,037,074	121,170	89,990	2	2	25,367	18,101	8.70		
3. NURSE (APRN, MIDWIFE, RN)		11,178,263	142,910	42,880	38	43	157,319	292,748	140.74		
4. PHYSICIAN SERVICES UNDER CONTRACT					0	8	26,481	18,007	8.66		
5. OTHER HEALTH PROFESSIONALS									0.00		
6. OTHER ALLIED HEALTH PROFESSIONALS		9,594,226	84,420	37,440	24	18			0.00		
7. OTHER HEALTH CARE PRACTITIONERS		658,625	255,810	64,230	4	3	26,347	17,916	8.61		
Total Health Care	0	28,710,122			75	80	322,810	406,916	195.63		
B. DENTAL PRACTITIONERS											
1. DENTIST		2,241,286	176,590	137,060	1	2	37,190	30,611	14.72		
2. DENTAL HYGIENIST		1,809,085	102,050	79,990	1	1	39,936	44,254	21.28		
3. OTHER DENTAL PRACTITIONERS							0	0	0.00		
Total Dental	0	4,050,370			2	3	77,126	74,866	36.00		
C. MENTAL HEALTH PRACTITIONERS											
1. PSYCHIATRIST		1,278,680	291,170	219,970	1	2	8,913	12,375	5.95		
2. PSYCHOLOGIST		1,669,725	199,980	44,990	3	1	21,780	40,740	19.59		
3. LICENSED CLINICAL SOCIAL WORKER		979,275	89,700	58,240			15,277	27,941	13.43		
4. PSYCHIATRIC APRN		785,158	133,310	69,990	3	1	6,762	9,548	4.59		
5. OTHER MENTAL HEALTH PRACTITIONERS		6,489,823	85,040	49,990	14	9	104,757	195,450	93.97		
Total Mental Health	0	11,202,661			21	13	157,489	286,055	137.53		

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FEDERALLY QUALIFIED HEALTH CENTER (FQHC)

Reporting Period:	From	7/1/2018	To	6/30/2019
FQHC Name:	COMMUNITY HEALTH CENTER, INC.			

Form C (Cost Adjustment & Allocation)

COST ADJUSTMENT AND ALLOCATION		
A.	Direct Cost Title XIX Services (P5 - Form A-3, Line D, Col. VII)	83,052,643
B.	Direct Cost Other Services (P6 - Form A-4, Line E.1.i, Col. VII)	2,822,871
C.	Total Direct Costs (A+B)	85,875,514
D.	Portion of Title XIX Services (A/C)	96.71%
E.	Total Overhead Cost (P7 - Form A-5, Line I, Col. VII)	36,120,092
F.	Overhead Cost Applicable to Title XIX Services (DxE)	34,931,741
G.	Total Title XIX Services Cost (A+F)	117,984,384
H.	Thirty Percent (30%) of Total Title XIX Svc Cost (Gx.30)	35,395,315
I.	Cost Adjustment (Lower of H-F or Zero)	-
J.	Allowable Title XIX Overhead Cost (F+I)	34,931,741
K.	Direct Costs	
	1. Health Care Services (P3 - Form A-1, Line A3, Col. VII)	56,122,554
	2. Dental Services (P4 - Form A-2, Line B3, Col. VII)	10,786,409
	3. Mental Health Services (P5 - Form A-3, Line C3, Col. VII)	16,143,680
	4. Total Direct Costs (K1 thru K3)	83,052,643
L.	Direct Costs as a % of Total	
	1. Health Care Services (K1/K4)	67.57%
	2. Dental Services (K2/K4)	12.99%
	3. Mental Health Services (K3/K4)	19.44%
M.	Allocated Allowable Overhead Cost	
	1. Health Care Services (JxL1)	23,603,377
	2. Dental Services (JxL2)	4,537,633
	3. Mental Health Services (JxL3)	6,790,730
	4. Total Allowable Title XIX Overhead Cost (M1 thru M3)	34,931,740

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FEDERALLY QUALIFIED HEALTH CENTER (FQHC)

Reporting Period: From 7/1/2018 To 6/30/2019

FQHC Name: COMMUNITY 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)	56,122,554
B. Allowable Overhead Cost (P13 - Form C, Line M1)	23,603,377
C. Total Allowable Health Care Cost (A+B)	79,725,931
D. Encounters (P12 - Form B-4, Health Care Total)	322,810
E. Allowable Health Care Cost Per Encounter (C/D)	246.97

II. Dental

A. Direct Dental Care Cost (P4 - Form A-2, Line B3, Col. VII)	10,786,409
B. Allowable Overhead Cost (P13 - Form C, Line M2)	4,537,633
C. Total Allowable Dental Cost (A+B)	15,324,042
D. Encounters (P12 - Form B-4, Dental Total)	77,126
E. Allowable Dental Cost Per Encounter (C/D)	198.69

III. Mental Health

A. Direct Mental Health Care Cost (P5 - Form A-3, Line C3, Col. VII)	16,143,680
B. Allowable Overhead Cost (P13 - Form C, Line M3)	6,790,730
C. Total Allowable Mental Health Cost (A+B)	22,934,410
D. Encounters (P12 - Form B-4, Mental Health Total)	157,489
E. Allowable Mental Health Cost Per Encounter (C/D)	145.63

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Reporting Period: From 7/1/2018 To 6/30/2019
 FQHC Name: COMMUNITY HEALTH CENTER, INC.

		I	II	III	IV	V
REVENUES		Excluding Dental, Mental Health & Other	Dental	Mental Health	Other	Total (Col. I thru IV)
A. Operating Revenue						
1.	Medicaid	47,132,501	8,526,872	10,605,648	2,714,473	68,979,494
2.	Private	6,245,493	439,802	1,040,252		7,725,547
3.	Medicare	4,509,796	19,825	1,420,041		5,949,662
4.	Patient Cash/Self Pay	1,094,670	830,299	127,910	1,217,836	3,270,715
5.	Other - Specify	135,881	115,693	14,550		266,124
6.	Total (1 thru 5)	59,118,341	9,932,491	13,208,401	3,932,309	86,191,542
B. Other Revenue						
1.	Contributions					0
2.	Grants	8,779,905	1,902,812	4,300,055	463,808	15,446,580
3.	Interest					0
4.	Donations	3,684,777				3,684,777
5.	Other - Specify Bonding	0				0
6.	Other - Specify 340B				6,900,330	6,900,330
7.	Other - Specify Consulting	8,066,274				8,066,274
8.	Other - Specify Meaningful Use	0			1,963,599	1,963,599
9.	Other - Specify Investment Income				255,000	255,000
10.	Other - Specify Medical Records and Other				2,587,953	2,587,953
11.	Total (1 thru 10)	20,530,956	1,902,812	4,300,055	12,170,690	38,904,513
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)		79,649,297	11,835,303	17,508,456	16,102,999	125,096,055

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Reporting Period: From 7/1/2018 To 6/30/2019

FQHC Name: COMMUNITY HEALTH CENTER, INC.

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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FEDERALLY QUALIFIED HEALTH CENTER (FQHC)

Reporting Period:	From	7/1/2018	To	6/30/2019
FQHC Name:	COMMUNITY HEALTH CENTER, INC.			

Form G (Cost Disallowance and Offset)

COST DISALLOWANCE AND OFFSET

A.	Cost Disallowance	
1.	Entertainment	
2.	Fines and penalties	
3.	Bad debt	
4.	Cost of actions to collect receivables	
5.	Advertising, except for recruitment of personnel	
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	
12.	Membership dues for public relations	
13.	Cost not related to patient care	
14.	Interest	
15.	Pass through expenses	
16.	Total (1 thru 15)	0
B.	Cost Offset (Expense Recovery)	
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)	0