

# HEALTH CENTER

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## **1.0 Executive Summary**

Medical Partner, is a not-for-profit Community Health Center (CHC) with locations in Ohio. Medical Partner received Community Health Center Section 330(e) funding in 2007. Medical Partner, according to the current scope of project, operates six permanent service delivery locations, in Ohio, and one mobile delivery service location serving the residents of the County. Medical Partner provides the full complement of comprehensive primary health care services across the lifecycles. Services (on site and through referral) include oral health, mental health, substance abuse counseling, enabling services, specialty care/services, education, and comprehensive outreach. Medical Partner offers services to all residents of the County regardless of language, gender, socio-economic status, sexual orientation, physical and mental capacity, age, religion, housing status, and the ability to pay. Particular attention, however, is directed at reaching the low income, uninsured, underinsured, Medicaid/Medicare, and vulnerable populations.

Medical Partner has plans to add an additional service delivery location in Ohio through a partnership with School District (in the County). The proposed new service delivery location is located at and housed within Schools' Middle School. School is a K-12 school district serving students in Ohio, and the surrounding communities. Health Center service delivery location will provide primary health care services, during the school year, Monday through Friday from 8:00 a.m. until 5:00 p.m. Services at the proposed new service delivery location will be offered (primarily) to low income students, family members and staff within the School District.

Within School District, several schools have over 70% of students on free and reduced price lunches. According to program requirements to qualify for reduced price lunches students must have a household income between 130 and 185% of the Federal Poverty Level. In order to qualify for free lunch's students must have a household income of below 130% of the Federal Poverty Level. In several schools the rate of free and reduced lunches exceeds 90%.

The proposed new service delivery location is projected to open in 2015, providing access to (on sight or through referral) primary medical, dental, behavioral, and optical care.

Medical services will be provided by 1 ARNP and 1 Licensed Practical Nurse beginning in 2015. Optical services will begin around the same time with one Optometrist, one Optician, and 2 Optical Technicians. In the first year of operation, the proposed new service delivery location will provide 1,164 users with 2,912 medical encounters and 3,344 patients with 4,180 optical encounters. Of particular importance, the proposed new service delivery location will function as a primary care entry point for children (and their families) enrolled in Schools. The Medical Partner will become their primary care medical home.

## 1.1 Objectives

The objective of the Health Center is to:

- Provide access to primary medical, dental, behavioral and optical care (on sight or through referral).
- Increase the knowledge of positive and negative effects of smoking, obesity, vision and dental care.
- Improve the overall health of the School's student, staff, and family population through partnerships with school administration.
- Increase utilization of primary care and decrease the utilization of emergency services for non-emergent needs.

## 1.2 Mission

The mission of Medical Partner's Health Center is to improve community wellness through access to quality, affordable primary healthcare.

## 1.3 Vision

The Vision of Medical Partner's Health Center is to ensure the students of the Schools are in school, healthy, and ready to learn.

## 1.4 Values

The following values or beliefs define the culture in which the parties make key decisions and set priorities to best address and meet the needs of students. The parties value:

- Educational success and healthy life-styles
- Quality evidenced based health services
- Parents' and students' roles in making health care decisions
- Partnership, collaboration, and mutual respect in delivering services
- Multi-faceted and effective communication with students, families, and the community
- Culturally sensitive, compassionate, student centered, and family involved services
- Community engagement in planning, implementing, and assessing services

## 1.5 Keys to Success

The keys to success for Health Center are:

**Funding:** Access to start-up seed funding through Interact for Health, Vision Partner, The Deaconness Foundation, and other local grant providing foundations.

**Reception:** The center must be embraced and utilized by the students, families, faculty, and staff of School to provide sustaining funding through operations.

**Partnerships:** The center must establish and improve partnerships with community organizations, other healthcare providers, and the community at large to provide the best care and information to the community.

## 1.6 Needs Statement

School District is a large suburban district with a student body of nearly 10,000, and 1,000 employees. The school district serves students in Ohio and the surrounding areas. The population is economically diverse with household incomes range from \$0 to over \$200,000, and over 60% of the students are on free and reduced lunch. Diversities within the school economically and racially creates a challenging environment for designing both academic and health service interventions. The State Department of Education rates the District's student poverty status as medium to high.

Based on survey data collected in March-April 2015 of students, parents, faculty and staff of the Schools over 62% of parents would allow students to utilize the primary medical services at the Health Center, and 51% of adult respondents stated that they would utilize the services personally. In addition of adult respondents 10% of the students represented did not have access to a primary medical provider. However, it is important to note that the sample size for the survey was just short of 500, which could lead to a selection bias. It is expected that the actual rate of students without access to primary care is significantly higher across the district.

On average, the adults surveyed brush their teeth an average of 6.92 times per week (max 7, min 1). Nearly 50% of all adults exercise less than one time per week, and 27% rank their mental health as good, fair or poor. On average adults consume 2.601 Fast Food or Microwave Ready Meals per week (max 15. Min 0). 59% of adults have received a flu shot within the last 12 months. 39% of respondents are overweight or obese, 21% have high blood pressure, and 24% have joint and/or back pain.

Most parents in the district are 30-44 (62%). 88% if parents report a PCP, however 37% have not been to a PCP within the last 8 months. 21% of parents report not visiting the dentist in the last 12 months. Nearly 60% of parents have been to the emergency room for themselves in the last 12 months.

Faculty are typically 45-59 (42%), and the main source of insurance is via Allied Insurance (37.5%). The majority of staff report a PCP (89%). However, the majority of faculty have not been seen by a PCP in the last 8 months (40+%). 15% of Faculty do not have a dentist. There has been significant utilization of the emergency department with nearly 50% of faculty visiting an ER in the past 12 months for themselves.

The Health Center will provide accessible, affordable, and student/family-friendly services and augment the health services component of the District's coordinated school health program. It removes the principal access to health services obstacles identified in the surveys and is expected to reduce the number of health-related student absences. Underserved and economically disadvantaged students can particularly benefit from the Health Center. One of Medical Partner's practice sites is located approximately 1.3 miles from Middle School. In addition Medical Partner has a mobile dental unit, which can go directly to the school. This is a plus when a student requires referral for services not available at the SBHC, e.g., dental.

## ***2.0 Demographics***

The School is a large suburban district, serving nearly 10,000 students with nearly 1,000 faculty and staff. Household incomes in the area range from zero to over 200,000, and a racial composition from 20% minority to 80+% minority.

## ***3.0 Business Summary***

The Health Center will be operated by the County Health Consortium, Medical Partner. The School will provide space, utilities, and maintenance for the property.

### ***3.1 Location and Facilities***

The Health Center will open in Ohio. This location is centrally located for the school district. This location was strategically picked, as the school has one of the highest needs across the district, as nearly 80% of students are on free or reduced lunches. The facility is projected to be equipped with three medical exam rooms, one medical lab, independent waiting area, 2 optical exam rooms, optical fitting area, and optical dispensing room.

### ***3.2 Operating Procedures***

The Health Center will operate under an array of both medical and administrative guidelines. The major ones are the American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care, American Medical Association (AMA) Guidelines for Adolescent Preventive Services, American Academy of Ophthalmology (AAO), Federal 330 grant guidelines, Occupational Safety and Health Administration (OSHA) guidelines, and Patient Centered Medical Home (PCMH) standards. Medical Partner has policies and procedures already in place that can be adopted for the Health Center. Policies and procedures include:

- Enrollment and parental consent
- Health histories
- Referrals (internal and external)
- After hours coverage
- Hours of operation and scheduling
- Billing and collection
- Handling confidential visits
- Infection control and handling medical waste
- Laboratory testing compliance (Clinical Laboratory Improvement Amendments (CLIA))
- Staffing and responsibilities
- Staff orientation
- Handling and storage of medications
- Provider credentialing
- Coordination with external primary care physicians
- Medical records (Electronic)
- Parental involvement

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- Confidentiality and HIPAA including release of information
- Handling child abuse and neglect cases
- Care coordination with school nurses and school behavioral health providers
- Electronic data collection
- Handling emergencies including role in school emergency and disaster
- Facility and safety issues (OSHA)
- Incident and accident reporting
- Handling complaints
- Purchasing policies
- Quality improvement and evaluation

### **3.3 Program Goals**

*Refer to Logic Model and Process and Outcome documents in Appendix B.* The primary goal is to improve the health of School District students, faculty, and parents to help them fully realize their learning potential.



## 4.0 Operations and Management Plans

### 4.1 Services

The table that follows shows the proposed services to be offered on site and those to be referred to external providers. The Center may add more services, e.g., dental and behavioral health, as the program matures and funds are available.

Service	Onsite	Referral	Referral Source
Acute and chronic care treatment and management Well child/adolescent exams Sports/work/school physicals Treatment of minor injuries, suture removal Immunizations and injections Laboratory testing (CLIA Waived Tests) Behavioral health screening (including substance abuse)	x		.
Reproductive services (contraception and pregnancy)		x	Medical Partner sites or one of student's/parent's choice
Full Service Vision Screening	x		
Prescription Glass Dispensing	x		
24 hour/7 day coverage	x	x	Medical Partner providers when the Center is closed. Each covers on a rotation basis
Mental health counseling and psychiatric evaluation Partial hospitalization/day treatment		x	Behavioral Services
Substance abuse prevention and treatment		x	Behavioral Services
Substance abuse screening	x		
Oral health assessment (oral history, inspection of mouth)	x		
Dental (cleaning and restorative services)		x	Medical Partner's Dental Location
Medicaid Eligibility Assistance		x	
Health education/prevention	x	x	Established school programs
Primary Vision Care	x		
Care coordination including communication with parent/guardian and private physician	x		
Consultation/coordination with school staff (teachers, counselors, athletic coaches) and school-contracted behavioral health staff	x		

Using the experiences of established SBHCs as benchmarks, most visits are expected to result from referrals from the school nurses, and sports and work physicals. The District contracts with a behavioral health agency, to provide behavioral health and substance abuse services for students. School psychologists also play a major role in counseling students who struggle with social, emotional, and behavioral health problems.

## **4.2 Volume Estimates**

Based on full capacity estimates with one ARNP and one LPN the Health Center can serve approximately 2,464 students with 6,160 medical encounters and 9,856 students with 12,320 optical encounters. It is estimated that the Health Center will serve 1,164 students with 2,912 medical encounters, and 3,344 students with 4,180 optical encounters, based on historical utilization of school based health centers, as well as the number of students, faculty, staff and family of the district.

## **4.3 Strategy and Implementation Summary**

### **4.3.1 SWOT Analysis**

The SWOT analysis allows the center to examine internal strengths and weaknesses the Health Center must address. It also allows us to examine the opportunities present, as well as potential threats.

#### **4.3.1.1 Strengths**

The Health Center has several strengths as compared to competition programs. They are as followed:

1. Knowledgeable and friendly staff. The center will go to great lengths to ensure that the correct staff are chosen for positions and have a passion for health care, specifically in the school based setting.
2. Center design. The center will ensure the proper amount of time is put into designing the center and making the ambiance enjoyable and appropriate for the task at hand.
3. Clear vision of the market need. The center has and will keep focused on the mission of promoting and improving the health of those attributed to the population of the Health Center.
4. Location. The location of the center will allow us to attract a larger number of people because the location is highly visible with an external and internal entrance, allowing for after hours and summer care.
5. Leadership. The leadership of both Medical Partner and the School are committed to the success of the Health Center.
6. Backing of Multiple Foundations. The Health Center has commitment from Interact for Health and a preliminary commitment from Vision Partner.
7. Vision Center. If fully implemented the Vision Partner's School Based Vision Center will be the second in the nation, providing a high level of media appeal.

#### **4.3.1.2 Weaknesses**

There are several weaknesses of the center that we will have to address to ensure continued success.

1. Knowledge of Health Center Progress. Leadership must ensure that the center is clearly marketed to students, faculty, staff, and parents to ensure volume.
2. Vision Center. If fully implemented the Vision Partner School Based Vision Center will be the second in the nation. It has worked in a Cincinnati Public School, however it has not yet been implemented on a large scale to date.

#### **4.3.1.3 Opportunities**

With the implementation of the Health Insurance Marketplace and the Expansion of Medicaid all have the ability to access affordable health services, particularly children. This could ensure the sustainability of the Health Center.

#### **4.3.1.4 Threats**

There are several threats to the success of the center:

1. Retail Immediate Care. Retailer Immediate Care is attractive to this population, as they are able to get care while they are within the store.
2. Retail Vision. Vision centers within retailers have historically had the edge on the market. However, if the Vision Partner is the first to screen students, it is likely that they will utilize the services internally.

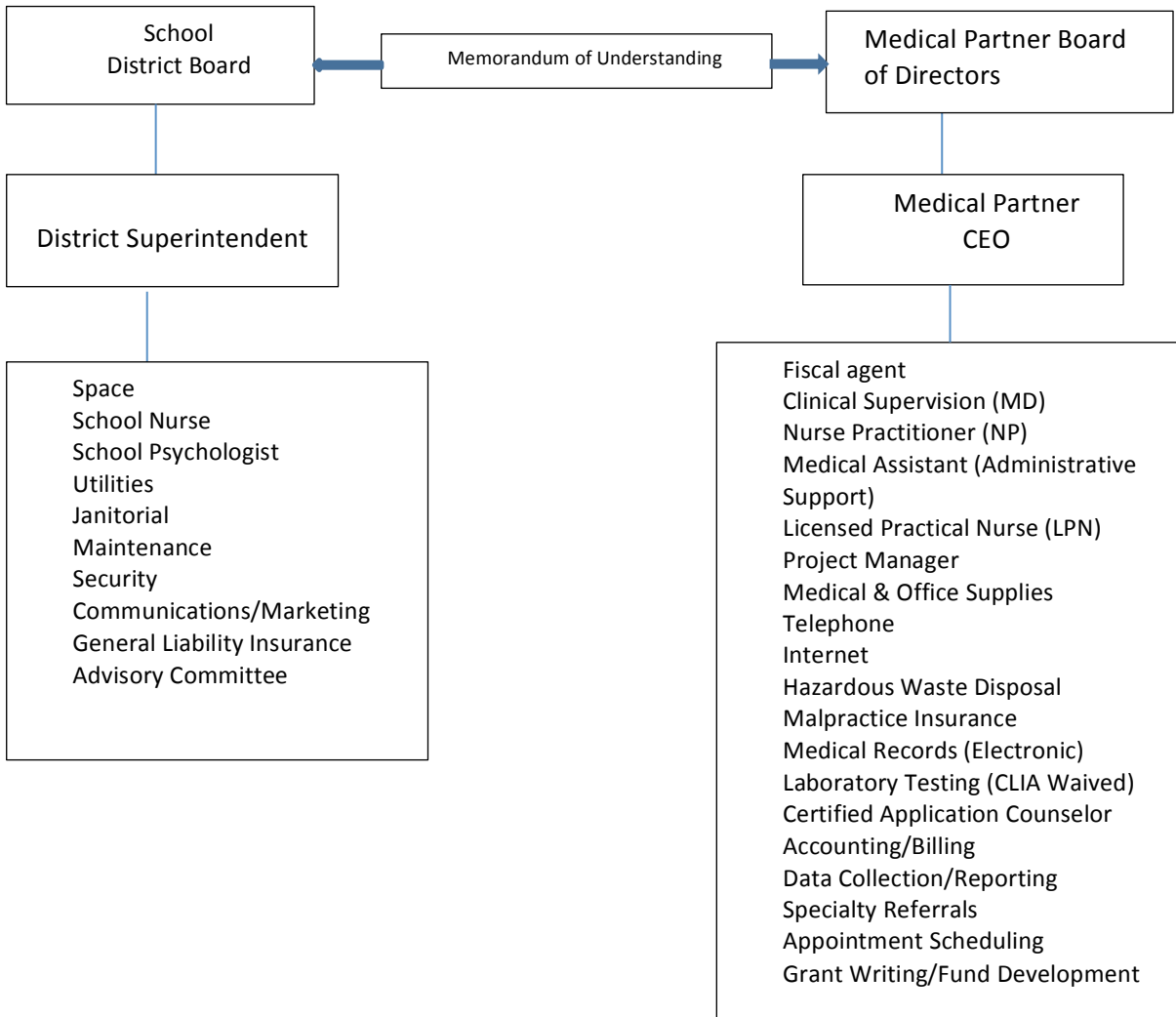
## 5.0 Personnel and Resources

The Health Center will be staffed initially with a ARNP and LPN working 40 hours per week, and a Certified Application Counselor available as needed. One of Medical Partner’s physicians will serve as the collaborating/supervising physician for the ARNP. Staff recruitment is the responsibility of Medical Partner’s Human Resources Recruiter.

### 5.1 Personnel Plan

#### 5.1.1 Leadership Team

Medical Partner will be responsible for operating the Health Center under the direction of its CEO in close collaboration with the Schools’ Superintendent or designee. A Memorandum of Understanding details the responsibility of both parties (See Appendix G). The chart that follows depicts the overall structure of the SBHC and the responsibilities of both parties.



## 5.1.2 Operations Team

### **Certified Nurse Practitioner: Currently Recruiting**

- Provides comprehensive primary care services
- Operates under current protocol/practice guidelines signed by the collaborating/supervising physician
- Maintains a close working relationship with the school nurse and behavioral health providers
- Supervises clinical support staff

Qualifications: Meets Medical Partner’s credentialing requirements with at three years practice experience in a primary care setting—preferably in a community health center or SBHC. Ability to handle confidential and sensitive information and relate to persons with diverse educational, socioeconomic, and ethnic backgrounds. Must be a Family Practice Nurse Practitioner.

### **Collaborating Physician: Currently Recruiting**

- Provides ongoing medical consultation for NP in accordance with Ohio State law.
- Is accessible to the NP at all times by telephone
- Performs chart reviews
- May provide direct care coverage in the NP’s absence.

Qualifications: Family practice physician with experience or post graduate training in adolescent health. Meets Medical Partner’s credentialing requirements

### **Licensed Practical Nurse (LPN): Currently Recruiting**

- Assists medical provider by taking vital signs, assisting with exams, answering and directing phone messages, cleaning and stocking rooms, screenings and appropriate documentation.
- Ensures effective patient flow
- Makes and pulls charts if applicable
- Schedules appointments, ensures billing information (encounter forms) are sent to the billing department or entered into the electronic practice management system if applicable.
- Follows up on referrals
- Performs routine lab screenings as permitted under State law
- Ensures enrollment, health history, consent, and HIPAA forms are completed

Qualifications: Licensed to practice in the State of Ohio with at least two years’ experience, preferably in a community practice setting. Demonstrated ability to work with children and adolescents. Ability to handle confidential and sensitive information and relate to persons with diverse educational, socioeconomic, and ethnic backgrounds.

**Medical Assistant (Administrative Support): To be hired when volume increases.**

- Answers phone
- Schedules appointments
- Ensures billing information (encounter forms) are sent to the billing department or entered into the electronic practice management system if applicable.
- Ensures enrollment, health history, consent, and HIPAA forms are completed
- Makes and pulls charts if applicable
- Assists medical provider as necessary

Qualifications: Certified Medical Assistant with at least two year's medical office experience handling both clinical and front office functions. Ability to handle confidential and sensitive information and relate to persons with diverse educational, socioeconomic, and ethnic backgrounds.

**Project Manager:**

The Project Manager works with the school board, school administration, teachers, families and students to develop a center based upon the needs and desires of each school system. The Project Manager will also be working and reporting on progress to Interact for Health a funder and any other funder who may sign on to the projects. Strong communication between partners is essential.

During the term of the project it will be essential to work with the partner to build capacity so that when the centers are opened we have a demand for services.

The project manager will assure each center is built to code, within budget, within the scope of practice of Medical Partner/HRSA

**Certified Application Counselor:**

Serves as resource and authorized representative for the Insurance Marketplace and Job and Family Services to explain and enroll persons in State provided programs such as Healthy Start, Medicaid, Food Stamps, the Insurance Marketplace, and cash assistance

Qualifications: High school diploma/GED with a minimum of 2 years related experience. Must possess the ability to handle confidential and sensitive information and relate to persons with diverse educational, socioeconomic, and ethnic backgrounds. Demonstrated strong customer service and conflict resolution skills.

### **Ophthalmologist (OD): Currently Being Recruited**

- Examine eyes, using observation, instruments and pharmaceutical agents, to determine visual acuity and perception, focus and coordination and to diagnose diseases and other abnormalities such as glaucoma or color blindness.
- Analyze test results and develop a treatment plan.
- Prescribe, supply, fit and adjust eyeglasses, contact lenses and other vision aids.
- Prescribe medications to treat eye diseases as state laws permits.
- Educate and counsel patients on contact lens care, visual hygiene, lighting arrangements and safety factors.
- Consult with and refer patients to ophthalmologist or other health care practitioner if additional medical treatment is determined necessary.

Qualifications: Licensed Ophthalmologist in the State of Ohio with experience or post graduate training. Meets Medical Partner's credentialing requirements

### **Optician: Currently Being Recruited**

- Measure clients' bridge and eye size, temple length, vertex distance, pupillary distance, and optical centers of eyes, using measuring devices.
- Verify that finished lenses are ground to specifications.
- Prepare work orders and instructions for grinding lenses and fabricating eyeglasses.
- Assist clients in selecting frames according to style and color, and ensure that frames are coordinated with facial and eye measurements and optical prescriptions.
- Maintain records of customer prescriptions, work orders, and payments.
- Perform administrative duties such as tracking inventory and sales, submitting patient insurance information, and performing simple bookkeeping.

Qualifications: Graduate of Opticianry program, licensed as directed by the State of Ohio by either the American Board of Opticianry (ABO) or National Contact Lens Examiners (NACLE).

### **Optical Technician: Currently Being Recruited**

- Produce quality eyewear through utilizing the Quality Manufacturing Program: selecting lenses, marking, taping, blocking, generating, fining and polishing, coating polycarbonate lenses, first (surface) inspecting, finish layout and blocking, making a frame pattern, edging, tinting and UV coating, grooving, hardening and drop-ball testing, safety monogramming, mounting and final inspecting.
- Responsible for basic operation, cleaning and ongoing maintenance of laboratory tools and equipment using established QMP maintenance procedures and calendars.
- Strives to improve technical knowledge through the completion of the Quality Manufacturing Program and continually applies that knowledge in the production of all eyewear.
- Utilizes product knowledge to determine the best manufacturing process for routine and special orders in order to produce top quality eyewear.
- Performs multiple tasks simultaneously with accuracy and thoroughness despite time pressures and customer volume.
- Is attentive to detail with all measurements, calculations, equipment settings and defective product.

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- Takes the initiative to notice and follow-up on discrepancies; suggests improvements; recommends solutions and does what is necessary to ensure customer satisfaction.
- Operates the V2k terminal inputting all lab statistics with accuracy and attention to detail.

Qualifications: High School Degree or GED, Vision Training (preferred), and experience using vision machines (preferred).

Clinical staff will be trained in child abuse reporter requirements, infection control, emergency care, including general first aid, and basic life support. Training will conform to community first aid and safety programs offered by the Red Cross.

### **5.1.3 Community Engagement Team**

A SBHC planning/advisory committee is set to be formed with the express purpose of leading the planning effort to open the Health Center. This will be the first foray into seeking input from a cross section of school and community representatives. The Committee will remain intact as the official SBHC Advisory Committee (SBHCAC) responsible for monitoring performance, providing input on policy, and reporting progress to the building school health advisory council. Each school building has an advisory council that works toward the goals set by the District School Health Advisory Council that is responsible for setting direction and policies for the District's coordinated school health program that encompasses students and staff. Ideally, the SBHCAC would be composed of six school staff: the Associate Superintendent, two school nurses, the athletic director, school principal(s), the Director of Curriculum; the health commissioner of a health department in the district, a School Board member, a parent, a representative from the behavioral health agency that provide behavioral health services at the school; and a community representative.

It is also important to note here that the District has a number of community committees and communication vehicles that will be used to routinely share information about the Health Center, in an effort to build and maintain strong community support. For example, a community breakfast is held quarterly attended by the District's business partners.

## **6.0 Marketing Strategy**

### **6.1 Product**

Our product is primary medical and optical care services for students, faculty, staff and families. Teachers, parents, and students were asked to complete surveys to determine the specific services they wanted the SBHC to provide. Those mentioned most frequently were treatment of minor illnesses, physical exams, and sports physicals. Dental, behavioral health, health promotion, and disease prevention (good nutrition, exercise, etc.) were also mentioned.



## **6.2 Service Delivery**

Exact procedures are being developed by a team consisting of school and Medical Partner staff. Students will access services by having a consent form signed by a parent or legal guardian on file, and receive permission from a teacher to come to the Health Center or be referred by the school nurse. Consent forms will be included in registration materials, sent home with students, and be available on line for parents/guardians to sign and send to the school throughout the year. The Center will be open 40 hours per week. The Health Center will be open five days per week from 8:00 AM-5:00 PM. As volume dictates the number of operating hours per week may be increased/decreased subject to available funding.

The Health Center will not turn any student away because of insurance status, health status, or because the student has an existing primary care provider. In the latter case the Center will make every effort to coordinate services with the student's primary care provider to avoid duplication. The student's primary care provider and parent/legal guardian will be given a summary of what occurred at each of the student's visits to the Health Center. Also, when providing referrals, the student/parent will be offered as many options as possible taking geographical, financial, insurance plan/coverage limitations, and other barriers into consideration.

Parental support is the most crucial success factor for the Center, so whenever possible and within the guidelines of adolescent confidentiality, parents/guardians will receive prior notification of any services to be provided to their child and given the option of being present during the visit. We recognize the importance of being family-centered and involving the student's family as age appropriate and with consent as necessary in caring for their child.

## **6.3 Pricing**

Medical Partner sets its fees using the Practice Management Information Corporation (PMIC) Medical Fees Manual. The Fee Schedule is reviewed at least annually and is developed based on the 62.5% percentile of the southwest Ohio region's usual and customary charge for medical services. The schedule of discounts for uninsured patients is updated annually when federal poverty guidelines are released and is the same scale used by all Medical Partner sites. The percentage discount is based on family size and annual household income less than 200% of federal poverty guidelines. Services can be discounted down to as low as \$23 per medical visit for families whose income is below 100% of poverty (See Appendix C for current Sliding Fee Scale Based on Federal Poverty Level Guidelines). No one is denied service due to their inability to pay. Co-pays for private insurances are based on the co-pay shown on the insurance card and verified with the insurance company. No money will be collected from students. Billing statements for services rendered will be mailed to the parent/guardian or the person identified as the responsible party.

Because Medical Partner is a federally qualified health center (FQHC) Medicaid reimbursement is on a set per visit payment system. Per visit rates are effective October 1st thru September 30th and are inflated by the Medicare Economic Index (MEI) in effect on October 1st of each year. Medical Partner has not been assigned a FQHC Medicaid per visit reimbursement rate for the Health Center, as of yet.

## 6.4 Messaging

The primary message in our promotional materials is services are high quality, save parents time, and support learning. Recognizing each audience has a different perspective on school-based services shaped by their knowledge base and needs, some tweaking is appropriate for each audience. The table below illustrates the primary messages for parents, students, school staff, community leaders, and local health care providers. The ultimate outcome is to encourage use of the Center and generate financial, personal, and political support from the community. All printed materials will contain the tagline as a constant reminder of the core purpose of opening the school-based health center.

Audience	Primary Message (s)	Rationale
Parent	<ul style="list-style-type: none"> <li>• Services offered, and who operates Center</li> <li>• No need to take time off from work when child has an appointment/becomes ill</li> <li>• Level of control of child’s use of services and communication with Center</li> <li>• Goal to keep students healthy and in school</li> </ul>	Need to ease parents concern about service quality, what happens during the visit, and show the benefit to them and their child
Student	<ul style="list-style-type: none"> <li>• Services offered</li> <li>• When Center open</li> <li>• What services are confidential</li> </ul>	More knowledge and their perception of the services provided will influence their use of services
Staff	<ul style="list-style-type: none"> <li>• Healthier students learn better</li> <li>• Reduces absenteeism</li> <li>• Makes teachers jobs easier by providing support for high-needs students</li> </ul>	School staff are concerned about education and learning. It’s their priority. If they see value they will support and facilitate their students use of the Center
Community Leaders	<ul style="list-style-type: none"> <li>• Emphasize that the Center is trying to support the successful education of the community’s children by improving their health status, and helping working parents. The end result is a stronger community</li> </ul>	This group can influence support from parents, policy makers, and potential funders
Local Health Care Providers	<ul style="list-style-type: none"> <li>• Will not take away their patients</li> <li>• Providers are licensed and qualified (credentialing requirements)</li> <li>• Will communicate and consult about services provided to their patients</li> <li>• Will refer patients back to them</li> </ul>	Providers value and wish to honor their commitment to care for their patients

## 6.5 Advertising

The plan for advertising the Health Center is outlined in the chart that follows. Changes may occur once the Center has been in operation, and the lessons learned show a need to alter the approach or methodology for a given group. Before the Center opens it is crucial there be widespread communication to all constituencies to avoid the spread of inaccurate and potentially damaging information about the Health Center services and general operations.

<b>Audience</b>	<b>What</b>	<b>When</b>	<b>Materials</b>	<b>Anticipated outcome</b>
Students	Present in classrooms	September 2015 and annually thereafter	Brochures	Students will know how to access SBHC.
	Present at school assemblies	Throughout year	Brochures	Self-referrals will increase.
	Periodic announcements on school PA system about SBHC	Monthly	Script	Students will be aware of any changes in services, staff, and hours.
	SBHC information posted in public places in school: halls, bulletin boards	Put up new information every three months or as needed	Posters	Students can be reminded of appointments or asked about compliance with treatment or referral outcomes
Parents	Newsletter	Quarterly	Articles	Parents will be aware of any changes in services, staff, and hours
	E-News (email)	Weekly		Parents will know how to allow students to access SBHC
	Web site	As needed		Parents will understand what services are available at the SBHC
	SBHC information in registration packets	Monthly or as needed		% of students with signed consent forms to use the SBHC will increase
School staff	Intranet web page	Updated monthly		Staff will understand what services are available and how students can access them
	Presentations in staff meetings and training sessions	August/September 2015, and anytime services substantially change		Staff will be able to answer student and parent questions about available services and how to access them

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Community	Press releases to local newspaper	September 2015 and twice annually thereafter	Article	Community will be made aware of services, how they are accessed, and current progress and outcomes.
	Present at City Council and community meetings	Throughout year	Fact sheets and progress reports	
	Information table at community health fairs and other events	Throughout year		
	Community Forums	Twice annually		
	Host Open House	To be determined. Possibly at the beginning of each school year		

A schedule of events will be established yearly to assure the appropriate materials are available and staff and others are aware of their roles.

### **7.0 Competitive Analysis**

There are several primary care physicians and group practices with offices within the Schools geographic boundary. However, none are safety-net providers who charge based on family income. Medical Partner has a site that is located approximately 1.3 miles from the school. However to get there does require private transportation and a parent to accompany the student if the student is new to the practice. Children’s Hospital community locations and primary care pediatrics clinic at the main campus are not in the District but the Hospital’s reputation and myriad of medical specialists is a draw for many parents so they are viewed as competitors. There are two urgent care center in the area.

## 7.1 Key Competitors

Competitor Name	Strengths	Weaknesses	Assets That SBHC Does Not Have	How GHC Differs From Competitor
	<p>Reputation Respected both locally and nationally by peers</p> <p>Specialists in adolescent medicine</p> <p>Open 40 hours per week</p> <p>Hospital receives County tax levy funds to support uncompensated care</p>	<p>Location not convenient for students/parents</p> <p>Difficult to get same day/urgent appointments</p>	<p>Corporate structure to help offset costs</p> <p>Large pool of specialists available</p> <p>Longevity, reputation, and strong community support</p>	<p>Services convenient for students</p>
	<p>Open 7 days per week, 77 hours.</p>	<p>Location not convenient for students/parents</p>	<p>X-ray services</p>	<p>Services convenient for students</p>
	<p>Hours of operation 8:30 AM-8:30 PM</p> <p>Participating provider in the Medicaid Managed Care plans</p>	<p>Only provides urgent care services</p>	<p>Evening hours</p>	<p>Provides both urgent and preventive services</p> <p>Services may be convenient for students</p>
	<p>Numerous providers accepting new patients.</p>	<p>Hours of operations may not be convenient for families</p>	<p>Longevity and loyal patient base</p> <p>Corporate structure to help offset costs</p> <p>Large pool of specialists available</p>	<p>Services may be convenient for students – however located approximately 5 miles away</p> <p>Can be the student's Medical Home</p>
	<p>Open 40 hours or more per week</p> <p>Participating provider in all the Medicaid Managed Care plans</p> <p>Discount for self pay patients</p>	<p>Hours of operations may not be convenient for families</p>	<p>Longevity and loyal patient base</p> <p>Corporate structure to help offset costs</p> <p>Large pool of specialists available</p>	<p>Services may be convenient for students</p> <p>Can be the student's Medical Home</p>
	<p>Open 40 or more hours</p>		<p>Evening and weekend</p>	<p>Services located in high</p>

## Health Center

	<p>per week.</p> <p>Convenient location with weekend hours</p> <p>Located within shopping plaza</p>		hours	traffic area
	<p>Open 40 or more hours per week.</p> <p>Convenient location with weekend hours</p> <p>Located within shopping plaza</p>		Evening and weekend hours	Services located in high traffic area
	<p>Open 40 or more hours per week.</p> <p>Convenient location with weekend hours</p> <p>Located within shopping plaza</p>		Evening and weekend hours	Services located in high traffic area

## 7.2 Key Collaborators

### Vision Partner

Vision Partner provides funding to implement School Based Vision Centers. Currently the foundation is working to implement numerous other locations across the USA, including a site within another School. Vision Partner has successfully implemented one School Based Vision Center at a Cincinnati Public School.

Vision Partner provides the business backing of Business Partner and a proven business model for School Based Vision Centers.

### Interact for Health

Interact for Health is a foundation started after ChoiceCare sold its HMO to Humana in 1997. The focus of Interact for Health is to improve the health of all in Greater Cincinnati. Interact for Health provides seed funding to plan, implement and operate sustainable health promotion agencies in the Greater Cincinnati Area. They have successfully implemented numerous School Based Health Centers within their service area and provided millions of dollars in funding for health promotion projects.

### School

Schools are located in Ohio with nearly 10,000 active students and nearly 1,000 faculty and staff. Leadership of the school system are engaged and in full support of the implementation of the Health Center.

## **7.3 Market Differentiation**

The urgent care centers offer sports physicals at a competitive price. Their hours are also convenient for working parents. This can appeal to families with health insurance and the uninsured as well. Working closely with the school's athletic department to design a parent/student friendly and economical sports physical program will be a means of maintaining a competitive advantage over the urgent care center. The Health Center must always stress the fact it is convenient for students, communicate effectively with parents, provide exemplary customer service, and build a cadre of community support. These attributes will buffer any threats from competitors. It is also important to note the Health Center is not intended to compete with a student's primary care physician, but be a partner in the student's care.

No entity can compete with Children's Hospital since it is the largest pediatric hospital in the area and has numerous pediatric specialists on staff. Community providers, including Medical Partner, routinely refer their pediatric patients to the Hospital's specialty clinics. This will be the practice at the Health Center in consultation with the student's primary care physician when applicable.

## **8.0 Financial Plan**

The following assumptions guided our financial projections

- Space will be available and rent free including utilities and maintenance
- We will receive an implementation grant spread over a five-year period from the Health Foundation to cover a portion of operating costs (personnel, supplies, IT support, etc.).
- We will receive an implementation grant from the Vision Partner Foundation to implement a School Based Vision Center.
- Staff salaries will be competitive based on Medical Partner's current compensation schedule
- Operating hours will remain at 40 hours per week recognizing that an increase may occur at some point based on demand and available funds. Personnel costs were calculated based on 22 hours per week for the CNP and LPN to allow for overtime.
- We will receive an average reimbursement from all payers of \$100 per medical visit and \$86 per optical visit.
- We will bill private insurance and self-pay parents
- Parents without insurance will be charged based on the current Medical Partner Schedule of Discounts
- The Health Center will be open in the summer or during the schools holiday breaks
- We will base our income projections using a conservative number of users and visits the first year.
- Payer mix will be 80% Medicaid, 5% private insurance, and 15% uninsured self-pay.

## **8.1 Startup Expenses**

Direct startup expenses for the Health Center have been included in Appendix A. Startup expenses may vary, and five tiered implementation plans have been created. These expenses include

opening the Health Center with both on sight Medical and Optical services. In all likelihood the actual startup expenses will be a mix of the five tiered plans.

## **8.2 Break-even Analysis**

Based on projected variable and fixed costs for the Health Center, it is estimated that the center will need to have approximately 2,631 medical encounters (see Appendix F for Calculations) and 4,400 optical encounters (See Appendix E for Calculations) in the first year to break even for operations. This means on average the staff of the medical center will need to see 11.95 patients per day and the optical center will need to see 20 patients per day, in order to break even for operations. With conservative growth estimates, it is projected that the Health Center will be able to break even after two full years of operations.



### **8.3 Cash Flow Projections**

Based on projected variable and fixed costs for the Health Center, it is estimated that the center will need to have approximately 2,631 medical encounters (see Appendix F for Calculations) and 4,400 optical encounters (See Appendix E for Calculations) in the first year to break even for operations. This means on average the staff of the medical center will need to see 11.95 patients per day and the optical center will need to see 20 patients per day, in order to break even for operations. With conservative growth estimates, it is projected that the Health Center will be able to break even after two full years of operations.

### **8.4 Sustainability Plan**

Our plan for financial sustainability includes billing for services from the onset and closely monitoring visits by payer source and profit and loss information on a monthly basis. Corrective actions will be taken to address negative performance variances.

It is expected that the first year volume will be approximately 2,200 medical encounters and 4,180 optical encounters, based on conservative estimates from historical and survey data resulting in a net loss of \$367,338, excluding grants. It is projected that the Health Center will also operate at a loss for year 2 with 2,640 medical encounters and 5,016 optical encounters resulting in a next loss of \$38,474. Based on a conservative declining growth pattern, it is projected that years 3-5 the Health Center will become sustainable with a projected net gain on operations of \$3,919 , \$40,291, and \$51,843 in years 3, 4 and 5, respectively (see Appendix D for detailed 5 Year Projections).

## 9.0 Risk Management Strategy

Medical Partner has risk management policies in place that will be followed in operating the Health Center. The District may have school risk management policies that are broader in scope and the plan is to look at both parties policies and look for overlaps and gaps. Once this is accomplished a common set of policies will be adopted for the Health Center. The major risk reduction categories and the respective strategy/ies that have been identified thus far are as follows. This is not an all-inclusive list.

Category	Risk Reduction Strategy
Initial and Ongoing Staff Competency	<ul style="list-style-type: none"> <li>• Criminal background checks before hiring</li> <li>• Basic safety training (CPR, blood borne pathogens, medication administration) annually</li> <li>• Skills assessment upon hiring and assessed annually</li> <li>• Initial credentialing and credentialing of licensed clinical providers</li> <li>• Validation of CEU compliance for licensed clinical providers</li> </ul>
Service Provision	<ul style="list-style-type: none"> <li>• Validation of adherence to clinical practice guidelines (evidenced based practice) through chart review</li> <li>• Ongoing monitoring of compliance with 330 FQHC and other Federal guidelines</li> <li>• Ongoing monitoring of compliance with applicable accreditation/certification standards and contractual agreements</li> <li>• Informed consent policy</li> </ul>
Other	<ul style="list-style-type: none"> <li>• Policy for reporting incidents/accidents</li> <li>• Confidentiality and handling of medical records policy</li> <li>• Methods for students to be dismissed from care or refused care</li> <li>• Method for handling hostile student or parent</li> </ul>

## 10.0 Exit Strategy

Although considered highly unlikely, in the event the Health Center would have to close the parties would address the areas shown on the chart that follows in a professional and expedient way. The expectation is that the leaders of both organizations would jointly work on exit plan strategies. For example, the methods to be used to communicate with parents, students, school staff, SBHC staff, and the community is best accomplished in a collaborative manner.

<b>Areas</b>	<b>Strategy</b>	<b>Person/Organization Responsible</b>
Staff	At least three months' notice to staff if possible. Determine if staff can be used at other Medical Partner locations	Medical Partner HR Generalist and CEO
School Contracted Partners and Medical Partner Contracted Partners if applicable	Notify as soon as possible	Schools Associate Superintendent/ Medical Partner CEO
Students' Medical Records	Transfer to medical home provider	Medical Partner
Communication with School District	Notify Superintendent, Associate Superintendent, and Project Manager immediately of closure and exit plan	Medical Partner CEO
Communication with Parents	Notify parents/students as far in advance as possible of date of closure and process to transfer records to new/existing medical home provider	School
Communication with Community	Notify community as far in advance as possible, but after notifying school, parents, and students	School/ Medical Partner
Debtors	Paid in accordance with normal Medical Partner payment processes. Notification of closure not applicable.	Not Applicable
Funders	Notify HRSA of site closure and submit Change in Scope. Notify funders as far in advance as possible and make arrangements to give back any unused funds granted specifically for SBHC operations	Medical Partner

## Health Center

Excess cash reserves	No anticipated excess cash reserves	Not Applicable
Assets	Furniture and equipment handled in accordance with federal guidelines	Medical Partner CFO

# APPENDIX A

## TABLES AND CHARTS

# Health Center

## Table 1: Direct Startup Expenses

### Start Up Expenses

<i>Medical Equipment*</i>	Worst	Low-Average	Average	High-Average	Best
DISPENSER GLOVE	\$ 31.53	\$ 31.53	\$ 31.53	\$ 31.53	\$ 31.53
SHARPS CABINET F/5.4QT COLL	\$ 105.72	\$ 105.72	\$ 105.72	\$ 105.72	\$ 105.72
PULSE OXIMETER, NELLCOR PORTAB	\$ 494.88	\$ 494.88	\$ 494.88	\$ 494.88	\$ 494.88
EYEWASH STATION OPTIKLENS I	\$ 88.63	\$ 88.63	\$ 88.63	\$ 88.63	\$ 88.63
SCALE DIG PHY LB/KG W/HTROD	\$ 349.45	\$ 349.45	\$ 349.45	\$ 349.45	\$ 349.45
STOOL EXAM PNEU PEBBLE GRV	\$ 390.00	\$ 390.00	\$ 390.00	\$ 390.00	\$ 390.00
TABLE EXAM REC/STRG BASE	\$ 2,432.25	\$ 2,432.25	\$ 2,432.25	\$ 2,432.25	\$ 2,432.25
TABLE TOP 20X/22X PEBBLE GRV	\$ 1,085.85	\$ 1,085.85	\$ 1,085.85	\$ 1,085.85	\$ 1,085.85
SPLINTER REMOVAL KIT	\$ 20.70	\$ 20.70	\$ 20.70	\$ 20.70	\$ 20.70
SYRINGE 4OZ EAR W/SHIELD CHR	\$ 164.52	\$ 164.52	\$ 164.52	\$ 164.52	\$ 164.52
CART UTILITY 3-SHELF S/S HD	\$ 196.90	\$ 196.90	\$ 196.90	\$ 196.90	\$ 196.90
LIGHT EXAM 35W HALOGEN BEIGE	\$ 156.32	\$ 156.32	\$ 156.32	\$ 156.32	\$ 156.32
BASE F/CLEARLITE W/CASTERS	\$ 26.99	\$ 26.99	\$ 26.99	\$ 26.99	\$ 26.99
WHEELCHAIR 18in W/FIXED	\$ 151.49	\$ 151.49	\$ 151.49	\$ 151.49	\$ 151.49
MONITOR SPOT BP/P/T	\$ 1,215.51	\$ 1,215.51	\$ 1,215.51	\$ 1,215.51	\$ 1,215.51
STAND MOBILE F/SPOT LXI	\$ 307.89	\$ 307.89	\$ 307.89	\$ 307.89	\$ 307.89
BP CUFF SM CHILD ABP	\$ 14.91	\$ 14.91	\$ 14.91	\$ 14.91	\$ 14.91
BP CUFF LG ADULT LONG ABP	\$ 20.95	\$ 20.95	\$ 20.95	\$ 20.95	\$ 20.95
BP CUFF CHILD ABP	\$ 14.91	\$ 14.91	\$ 14.91	\$ 14.91	\$ 14.91
CHARGER UNIV W/71900HNDLS(2)	\$ 513.75	\$ 513.75	\$ 513.75	\$ 513.75	\$ 513.75
OPHTHALMOSCOPE 3.5V HALOGEN	\$ 166.71	\$ 166.71	\$ 166.71	\$ 166.71	\$ 166.71
OTOSCOPE DIAG W/SPEC 3.5V	\$ 96.00	\$ 96.00	\$ 96.00	\$ 96.00	\$ 96.00
DEFIB AED+ W/RX	\$ 1,481.26	\$ 1,481.26	\$ 1,481.26	\$ 1,481.26	\$ 1,481.26
<i>Technical Equipment</i>					
Computers	\$ 4,000.00	\$ 3,750.00	\$ 3,500.00	\$ 3,250.00	\$ 3,000.00
Router	\$ 1,600.00	\$ 1,400.00	\$ 1,200.00	\$ 1,000.00	\$ 800.00
Printer	\$ 1,000.00	\$ 800.00	\$ 600.00	\$ 550.00	\$ 500.00
Computer Wall Mounts	\$ 1,900.00	\$ 1,700.00	\$ 1,500.00	\$ 1,450.00	\$ 1,400.00
Prescription Printer	\$ 1,200.00	\$ 1,000.00	\$ 800.00	\$ 750.00	\$ 700.00
<i>Misc Large Equipment</i>					
Refrigerator	\$ 700.00	\$ 600.00	\$ 500.00	\$ 450.00	\$ 400.00
Safe	\$ 700.00	\$ 600.00	\$ 500.00	\$ 450.00	\$ 400.00
<i>Office Furniture</i>					
Physician Office Desk	\$ 1,400.00	\$ 1,200.00	\$ 1,000.00	\$ 900.00	\$ 800.00
Front Desk	\$ 700.00	\$ 600.00	\$ 500.00	\$ 450.00	\$ 400.00
Waiting Room Chairs	\$ 770.00	\$ 660.00	\$ 550.00	\$ 495.00	\$ 440.00
Office Chairs	\$ 2,040.00	\$ 1,920.00	\$ 1,800.00	\$ 1,680.00	\$ 1,560.00
Break Room Furniture	\$ 700.00	\$ 600.00	\$ 500.00	\$ 450.00	\$ 400.00
Bulletin/Dry Erase Board	\$ 350.00	\$ 300.00	\$ 250.00	\$ 200.00	\$ 150.00

(cont.)

# Health Center

## *Vision Center Start Up Expenses*

Estimated Costs from Vision Partner**	\$ 303,000.00	\$ 290,500.00	\$ 278,000.00	\$ 265,500.00	\$ 300,000.00
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## *Other Misc. Start up Expenses*

Technical Assistance	\$ 12,000.00	\$ 11,000.00	\$ 10,000.00	\$ 9,000.00	\$ 8,000.00
IT Support	\$ 7,000.00	\$ 6,000.00	\$ 5,000.00	\$ 4,000.00	\$ 3,000.00
License, Fees, Dues	\$ 3,000.00	\$ 2,500.00	\$ 2,000.00	\$ 1,500.00	\$ 1,000.00
Provider Recruitment/Training	\$ 20,000.00	\$ 17,500.00	\$ 15,000.00	\$ 12,500.00	\$ 10,000.00
LPN Recruitment/Training	\$ 5,000.00	\$ 4,500.00	\$ 4,000.00	\$ 3,500.00	\$ 3,000.00
Marketing	\$ 8,000.00	\$ 7,000.00	\$ 6,000.00	\$ 5,500.00	\$ 5,000.00
Management Allocation	\$ 35,000.00	\$ 32,500.00	\$ 30,000.00	\$ 27,500.00	\$ 25,000.00
Insurance	\$ 2,500.00	\$ 2,250.00	\$ 2,000.00	\$ 1,750.00	\$ 1,500.00
Cleaning	\$ 2,500.00	\$ 2,000.00	\$ 1,500.00	\$ 1,250.00	\$ 1,000.00
Repairs/Maintenance	\$ 10,000.00	\$ 7,500.00	\$ 5,000.00	\$ 4,000.00	\$ 3,000.00
Security	\$ 5,000.00	\$ 4,000.00	\$ 3,000.00	\$ 2,750.00	\$ 2,500.00
Educational Materials	\$ 7,000.00	\$ 6,000.00	\$ 5,000.00	\$ 4,000.00	\$ 3,000.00
Signage	\$ 3,500.00	\$ 3,000.00	\$ 2,500.00	\$ 2,250.00	\$ 2,000.00
Legal Fees	\$ 4,000.00	\$ 3,000.00	\$ 2,000.00	\$ 1,750.00	\$ 1,500.00
Printing and Publication	\$ 2,000.00	\$ 1,750.00	\$ 1,500.00	\$ 1,250.00	\$ 1,000.00
Misc. Expenses	\$ 15,000.00	\$ 12,500.00	\$ 10,000.00	\$ 7,500.00	\$ 5,000.00

<b>Total Start Up Expenses</b>	<b>\$ 471,087.12</b>	<b>\$ 438,157.12</b>	<b>\$ 405,227.12</b>	<b>\$ 377,102.12</b>	<b>\$ 395,977.12</b>
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\*Based on 3 Exam Rooms, Quote dated April 2015, McKesson

\*\* Based on Estimates from discussion with Vision Partner

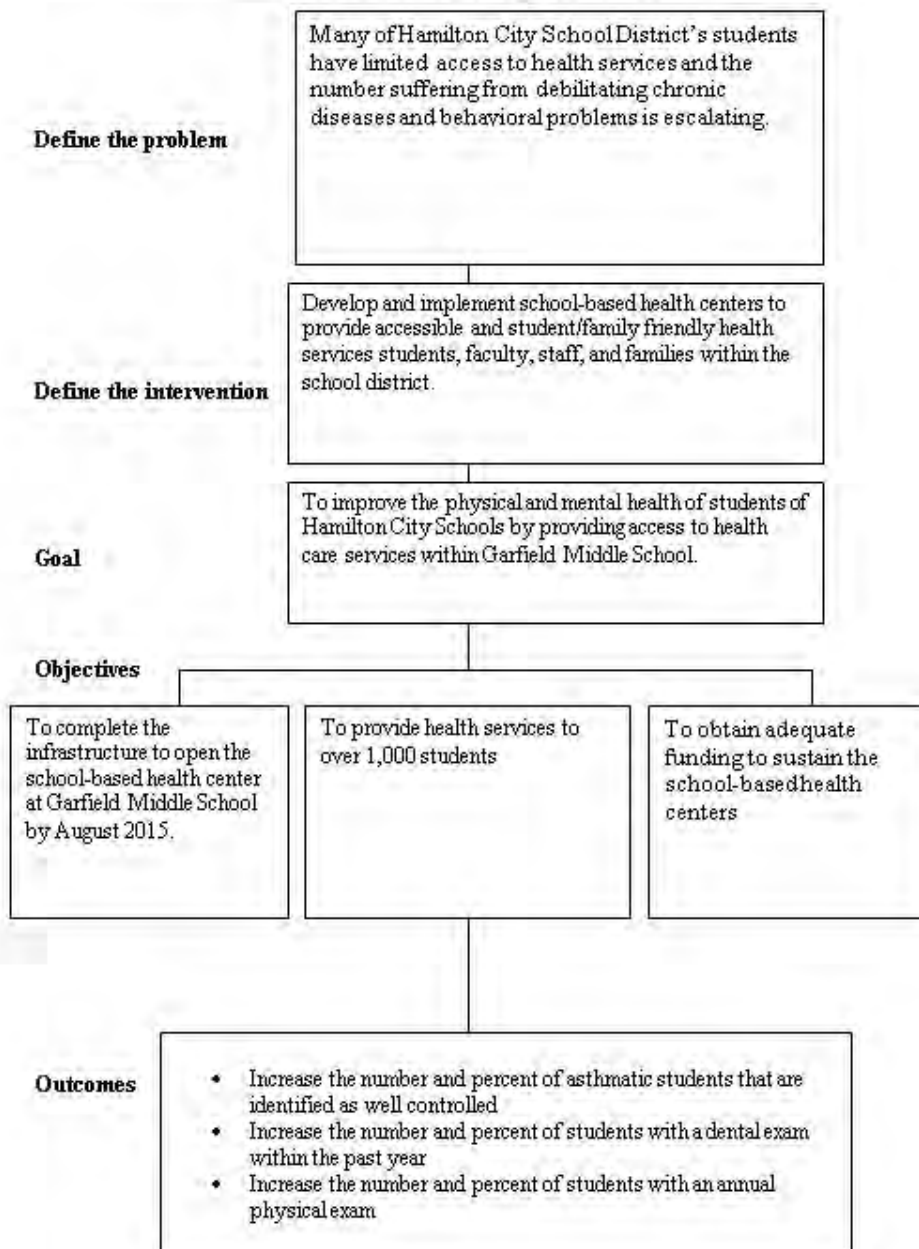




# APPENDIX B

## LOGIC MODEL

**Garfield Health Center Logic Model**



## APPENDIX C

### SLIDING FEE SCALE BASED ON FEDERAL POVERTY LEVEL GUIDELINES



210 S. 2<sup>nd</sup> Street, 2<sup>nd</sup> Floor  
 Hamilton, OH 45011-2802  
 Phone: 513.454-1460  
 Fax: 513.454-1484

Sliding Fee Scale Based  
 ON  
 Federal Poverty Level Guidelines

2015

Family Size	ANNUAL INCOME				Full Fee
	Level 1	Level 2	Level 3	Level 4	
1	0.00 to \$11,770.00	\$11,770.01 to \$15,564.00	\$15,564.01 to \$19,538.00	\$19,538.01 to \$23,540.00	Over \$23,540.01
2	0.00 to \$15,930.00	\$15,930.01 to \$21,187.00	\$21,187.01 to \$26,443.00	\$26,443.01 to \$31,860.00	Over \$31,860.01
3	0.00 to \$20,090.00	\$20,090.01 to \$26,720.00	\$26,720.01 to \$33,349.00	\$33,349.01 to \$40,180.00	Over \$40,180.01
4	0.00 to \$24,250.00	\$24,250.01 to \$32,252.00	\$32,252.01 to \$40,255.00	\$40,255.01 to \$48,500.00	Over \$48,500.01
5	0.00 to \$28,410.00	\$28,410.01 to \$37,785.00	\$37,785.01 to \$47,160.00	\$47,160.01 to \$56,820.00	Over \$56,820.01
6	0.00 to \$32,570.00	\$32,570.01 to \$43,318.00	\$43,318.01 to \$54,066.00	\$54,066.01 to \$65,140.00	Over \$65,140.01
7	0.00 to \$36,730.00	\$36,730.01 to \$48,850.00	\$48,851.01 to \$60,791.00	\$60,792.01 to \$73,460.00	Over \$73,460.01
8	0.00 to \$40,890.00	\$40,890.01 to \$54,383.00	\$54,384.01 to \$67,877.00	\$67,877.01 to \$81,870.00	Over \$81,870.01
	Patient Pays <b>\$23.00</b>	Patient Pays <b>\$40.00</b>	Patient Pays <b>\$60.00</b>	Patient Pays <b>\$80.00</b>	Patient Pays <b>All Charges</b>

- Level 1 Patient pays \$23.00
- Level 2 Patient pays \$40.00
- Level 3 Patient pays \$60.00
- Level 4 Patient pays \$80.00
- Full Fee Patient pays all charges

If a patient has income greater than the full fee column:  
 Collect the income information but, it is not necessary to add the income in Next Gen.  
 Patient is required to pay full fee.

# APPENDIX D

## 5 YEAR FINANCIAL PROJECTIONS

5 Year Projection

INCOME	2015	2016	2017	2018	2019
<b>Operating Income</b>					
Medical	242,000	271,040	298,144	321,996	341,315
<b>Total INCOME</b>	<b>\$ 242,000</b>	<b>\$ 271,040</b>	<b>\$ 298,144</b>	<b>\$ 321,996</b>	<b>\$ 341,315</b>
<b>EXPENSES</b>					
<b>Salaries and Wages</b>					
NP	\$ 105,000.00	\$ 110,250.00	\$ 115,762.50	\$ 121,550.63	\$ 127,628.16
MD/DO (Consultation Time)	\$ 2,100.00	\$ 2,205.00	\$ 2,315.25	\$ 2,431.01	\$ 2,552.56
LPN	\$ 45,760.00	\$ 48,048.00	\$ 50,450.40	\$ 52,972.92	\$ 55,621.57
Benefits and Taxes	\$ 38,215.00	\$ 40,125.75	\$ 42,132.04	\$ 44,238.64	\$ 46,450.57
<b>Direct Supplies</b>					
Office (\$1.50 / Encounter)	\$ 3,630.00	\$ 4,065.60	\$ 4,472.16	\$ 4,829.93	\$ 5,119.73
Supplies (\$2 / Encounter)	\$ 4,840.00	\$ 5,420.80	\$ 5,962.88	\$ 6,439.91	\$ 6,826.31
Pharmacy Supplies (\$0.25 / Encounter)	\$ 605.00	\$ 677.60	\$ 745.36	\$ 804.99	\$ 853.29
Lab Fees (\$0.15 / Encounter)	\$ 363.00	\$ 406.56	\$ 447.22	\$ 482.99	\$ 511.97
<b>CME &amp; Travel</b>					
Provider CME	\$ 1,000.00	\$ 1,050.00	\$ 1,102.50	\$ 1,157.63	\$ 1,215.51
Local Travel	\$ 500.00	\$ 525.00	\$ 551.25	\$ 578.81	\$ 607.75
Staff CME	\$ 750.00	\$ 787.50	\$ 826.88	\$ 868.22	\$ 911.63
<b>Other Expenses</b>					
Business Insurance	\$ 2,000.00	\$ 2,100.00	\$ 2,205.00	\$ 2,315.25	\$ 2,431.01
Telephone and Internet	\$ 7,000.00	\$ 7,350.00	\$ 7,717.50	\$ 8,103.38	\$ 8,508.54
Postage	\$ 1,000.00	\$ 1,050.00	\$ 1,102.50	\$ 1,157.63	\$ 1,215.51
Marketing/Outreach	\$ 3,000.00	\$ 3,150.00	\$ 3,307.50	\$ 3,472.88	\$ 3,646.52
Payroll Processing	\$ 1,000.00	\$ 1,050.00	\$ 1,102.50	\$ 1,157.63	\$ 1,215.51
Banking Fees	\$ 1,000.00	\$ 1,050.00	\$ 1,102.50	\$ 1,157.63	\$ 1,215.51
Printing Fees	\$ 1,500.00	\$ 1,575.00	\$ 1,653.75	\$ 1,736.44	\$ 1,823.26
Licenses, Fees and Dues	\$ 3,000.00	\$ 3,150.00	\$ 3,307.50	\$ 3,472.88	\$ 3,646.52
Security	\$ 3,500.00	\$ 3,675.00	\$ 3,858.75	\$ 4,051.69	\$ 4,254.27
Project Manager	\$ 18,720.00	\$ 19,656.00	\$ 20,638.80	\$ 21,670.74	\$ 22,754.28
Billing	\$ 16,698.00	\$ 18,701.76	\$ 20,571.94	\$ 22,217.69	\$ 23,550.75
Other	\$ 5,000.00	\$ 5,250.00	\$ 5,512.50	\$ 5,788.13	\$ 6,077.53
<b>Total Operating Expenses</b>	<b>\$ 266,181</b>	<b>\$ 281,320</b>	<b>\$ 296,849</b>	<b>\$ 312,658</b>	<b>\$ 328,638</b>
<b>NET INCOME, before equipment</b>	<b>\$ (24,181)</b>	<b>\$ (10,280)</b>	<b>\$ 1,295</b>	<b>\$ 9,338</b>	<b>\$ 12,677</b>
Medical	70,000	-	-	-	-
<b>Total EXPENSES</b>	<b>\$ 336,181</b>	<b>\$ 281,320</b>	<b>\$ 296,849</b>	<b>\$ 312,658</b>	<b>\$ 328,638</b>
<b>NET INCOME, before grants</b>	<b>\$ (94,181)</b>	<b>\$ (10,280)</b>	<b>\$ 1,295</b>	<b>\$ 9,338</b>	<b>\$ 12,677</b>
Medical	\$ 100,000.00				
<b>NET INCOME</b>	<b>\$ 5,819</b>	<b>\$ (10,280)</b>	<b>\$ 1,295</b>	<b>\$ 9,338</b>	<b>\$ 12,677</b>

## 5 Year Projection

INCOME	2015	2016	2017	2018	2019
Optical	255,640	319,550	383,460	421,806	442,896
<b>Total INCOME</b>	<b>\$ 255,640</b>	<b>\$ 319,550</b>	<b>\$ 383,460</b>	<b>\$ 421,806</b>	<b>\$ 442,896</b>
EXPENSES					
<b>Salaries and Wages</b>					
OD	\$ 105,000.00	\$ 110,250.00	\$ 115,762.50	\$ 121,550.63	\$ 127,628.16
Optician	\$ 45,000.00	\$ 47,250.00	\$ 49,612.50	\$ 52,093.13	\$ 54,697.78
Tech	\$ 33,000.00	\$ 34,650.00	\$ 36,382.50	\$ 38,201.63	\$ 40,111.71
Benefits and Taxes	\$ 45,750.00	\$ 48,037.50	\$ 50,439.38	\$ 52,961.34	\$ 55,609.41
<b>Direct Supplies</b>					
Office (\$0.50 / Encounter)	\$ 1,540.00	\$ 1,925.00	\$ 2,310.00	\$ 2,541.00	\$ 2,668.05
Supplies (\$0.50 / Encounter)	\$ 1,540.00	\$ 1,925.00	\$ 2,310.00	\$ 2,541.00	\$ 2,668.05
Free Glasses (\$20 / Glass, 9% Enc.)	\$ 5,544.00	\$ 6,930.00	\$ 8,316.00	\$ 9,147.60	\$ 9,604.98
<b>CME &amp; Travel</b>					
Provider CME	\$ 1,000.00	\$ 1,050.00	\$ 1,102.50	\$ 1,157.63	\$ 1,215.51
Local Travel	\$ 500.00	\$ 525.00	\$ 551.25	\$ 578.81	\$ 607.75
Staff CME	\$ 1,500.00	\$ 1,575.00	\$ 1,653.75	\$ 1,736.44	\$ 1,823.26
<b>Other Expenses</b>					
Business Insurance	\$ 500.00	\$ 525.00	\$ 551.25	\$ 578.81	\$ 607.75
Telephone and Internet	\$ 1,000.00	\$ 1,050.00	\$ 1,102.50	\$ 1,157.63	\$ 1,215.51
Postage	\$ 500.00	\$ 525.00	\$ 551.25	\$ 578.81	\$ 607.75
Marketing/Outreach	\$ 500.00	\$ 525.00	\$ 551.25	\$ 578.81	\$ 607.75
Payroll Processing	\$ 800.00	\$ 840.00	\$ 882.00	\$ 926.10	\$ 972.41
Banking Fees	\$ 500.00	\$ 525.00	\$ 551.25	\$ 578.81	\$ 607.75
Printing Fees	\$ 250.00	\$ 262.50	\$ 275.63	\$ 289.41	\$ 303.88
Licenses, Fees and Dues	\$ 2,000.00	\$ 2,100.00	\$ 2,205.00	\$ 2,315.25	\$ 2,431.01
Security	\$ -	\$ -	\$ -	\$ -	\$ -
Project Manager	\$ 18,720.00	\$ 19,656.00	\$ 20,638.80	\$ 21,670.74	\$ 22,754.28
Billing	\$ 17,639.16	\$ 22,048.95	\$ 26,458.74	\$ 29,104.61	\$ 30,559.84
Other	\$ 2,000.00	\$ 2,100.00	\$ 2,205.00	\$ 2,315.25	\$ 2,431.01
<b>Total Operating Expenses</b>	<b>\$ 284,783</b>	<b>\$ 304,275</b>	<b>\$ 324,413</b>	<b>\$ 342,603</b>	<b>\$ 359,734</b>
<b>NET INCOME, before equipment</b>	<b>\$ (29,143)</b>	<b>\$ 15,275</b>	<b>\$ 59,047</b>	<b>\$ 79,203</b>	<b>\$ 83,163</b>
Optical	285,000	25,000	25,000	25,000	25,000
<b>Total EXPENSES</b>	<b>\$ 569,783</b>	<b>\$ 329,275</b>	<b>\$ 349,413</b>	<b>\$ 367,603</b>	<b>\$ 384,734</b>
<b>NET INCOME, before grants</b>	<b>\$ (314,143)</b>	<b>\$ (9,725)</b>	<b>\$ 34,047</b>	<b>\$ 54,203</b>	<b>\$ 58,163</b>
Optical	\$ 300,000.00				
<b>NET INCOME</b>	<b>\$ (14,143)</b>	<b>\$ (9,725)</b>	<b>\$ 34,047</b>	<b>\$ 54,203</b>	<b>\$ 58,163</b>

## 5 Year Projection

INCOME	2015	2016	2017	2018	2019
<b>Operating Income</b>					
Medical	242,000	271,040	298,144	321,996	341,315
Optical	255,640	319,550	383,460	421,806	442,896
<b>Total INCOME</b>	<b>\$ 497,640</b>	<b>\$ 590,590</b>	<b>\$ 681,604</b>	<b>\$ 743,802</b>	<b>\$ 784,212</b>
<b>EXPENSES</b>					
<b>Salaries and Wages</b>					
<i>Medical</i>					
NP	\$ 105,000.00	\$ 110,250.00	\$ 115,762.50	\$ 121,550.63	\$ 127,628.16
MD/DO (Consultation Time)	\$ 2,100.00	\$ 2,205.00	\$ 2,315.25	\$ 2,431.01	\$ 2,552.56
LPN	\$ 45,760.00	\$ 48,048.00	\$ 50,450.40	\$ 52,972.92	\$ 55,621.57
Benefits and Taxes	\$ 38,215.00	\$ 40,125.75	\$ 42,132.04	\$ 44,238.64	\$ 46,450.57
<i>Optical</i>					
OD	\$ 105,000.00	\$ 110,250.00	\$ 115,762.50	\$ 121,550.63	\$ 127,628.16
Optician	\$ 45,000.00	\$ 47,250.00	\$ 49,612.50	\$ 52,093.13	\$ 54,697.78
Tech	\$ 33,000.00	\$ 34,650.00	\$ 36,382.50	\$ 38,201.63	\$ 40,111.71
Benefits and Taxes	\$ 45,750.00	\$ 48,037.50	\$ 50,439.38	\$ 52,961.34	\$ 55,609.41
<b>Direct Supplies</b>					
<i>Medical</i>					
Office (\$1.50 / Encounter)	\$ 3,630.00	\$ 4,065.60	\$ 4,472.16	\$ 4,829.93	\$ 5,119.73
Supplies (\$2 / Encounter)	\$ 4,840.00	\$ 5,420.80	\$ 5,962.88	\$ 6,439.91	\$ 6,826.31
Pharmacy Supplies (\$0.25 / Encounter)	\$ 605.00	\$ 677.60	\$ 745.36	\$ 804.99	\$ 853.29
Lab Fees (\$0.15 / Encounter)	\$ 363.00	\$ 406.56	\$ 447.22	\$ 482.99	\$ 511.97
<i>Optical</i>					
Office (\$0.50 / Encounter)	\$ 1,540.00	\$ 1,925.00	\$ 2,310.00	\$ 2,541.00	\$ 2,668.05
Supplies (\$0.50 / Encounter)	\$ 1,540.00	\$ 1,925.00	\$ 2,310.00	\$ 2,541.00	\$ 2,668.05
Free Glasses (\$20 / Glass, 9% Enc.)	\$ 5,544.00	\$ 6,930.00	\$ 8,316.00	\$ 9,147.60	\$ 9,604.98
<b>CME &amp; Travel</b>					
<i>Medical</i>					
Provider CME	\$ 1,000.00	\$ 1,050.00	\$ 1,102.50	\$ 1,157.63	\$ 1,215.51
Local Travel	\$ 500.00	\$ 525.00	\$ 551.25	\$ 578.81	\$ 607.75
Staff CME	\$ 750.00	\$ 787.50	\$ 826.88	\$ 868.22	\$ 911.63
<i>Optical</i>					
Provider CME	\$ 1,000.00	\$ 1,050.00	\$ 1,102.50	\$ 1,157.63	\$ 1,215.51
Local Travel	\$ 500.00	\$ 525.00	\$ 551.25	\$ 578.81	\$ 607.75
Staff CME	\$ 1,500.00	\$ 1,575.00	\$ 1,653.75	\$ 1,736.44	\$ 1,823.26
<b>Other Expenses</b>					
Business Insurance	\$ 2,500.00	\$ 2,625.00	\$ 2,756.25	\$ 2,894.06	\$ 3,038.77
Telephone and Internet	\$ 8,000.00	\$ 8,400.00	\$ 8,820.00	\$ 9,261.00	\$ 9,724.05
Postage	\$ 1,500.00	\$ 1,575.00	\$ 1,653.75	\$ 1,736.44	\$ 1,823.26
Marketing/Outreach	\$ 3,500.00	\$ 3,675.00	\$ 3,858.75	\$ 4,051.69	\$ 4,254.27
Payroll Processing	\$ 1,800.00	\$ 1,890.00	\$ 1,984.50	\$ 2,083.73	\$ 2,187.91
Banking Fees	\$ 1,500.00	\$ 1,575.00	\$ 1,653.75	\$ 1,736.44	\$ 1,823.26
Printing Fees	\$ 1,750.00	\$ 1,837.50	\$ 1,929.38	\$ 2,025.84	\$ 2,127.14
Licenses, Fees and Dues	\$ 5,000.00	\$ 5,250.00	\$ 5,512.50	\$ 5,788.13	\$ 6,077.53
Security	\$ 3,500.00	\$ 3,675.00	\$ 3,858.75	\$ 4,051.69	\$ 4,254.27



## Health Center

Project Manager	\$ 37,440.00	\$ 39,312.00	\$ 41,277.60	\$ 43,341.48	\$ 45,508.55
Billing	\$ 34,337.16	\$ 40,750.71	\$ 47,030.68	\$ 51,322.30	\$ 54,110.60
Other	\$ 7,000.00	\$ 7,350.00	\$ 7,717.50	\$ 8,103.38	\$ 8,508.54
<b>Total Operating Expenses</b>	<b>\$ 550,964</b>	<b>\$ 585,595</b>	<b>\$ 621,262</b>	<b>\$ 655,261</b>	<b>\$ 688,372</b>
<b>NET INCOME, before equipment</b>	<b>\$ (53,324)</b>	<b>\$ 4,995</b>	<b>\$ 60,342</b>	<b>\$ 88,540</b>	<b>\$ 95,840</b>
Medical	70,000	-	-	-	-
Optical	285,000	25,000	25,000	25,000	25,000
<b>Total Non-Recurring Expenses</b>	<b>\$ 355,000</b>	<b>\$ 25,000</b>	<b>\$ 25,000</b>	<b>\$ 25,000</b>	<b>\$ 25,000</b>
<b>Total EXPENSES</b>	<b>\$ 905,964</b>	<b>\$ 610,595</b>	<b>\$ 646,262</b>	<b>\$ 680,261</b>	<b>\$ 713,372</b>
<b>NET INCOME, before grants</b>	<b>\$ (408,324)</b>	<b>\$ (20,005)</b>	<b>\$ 35,342</b>	<b>\$ 63,540</b>	<b>\$ 70,840</b>
Medical	\$ 100,000.00	\$ -	\$ -	\$ -	\$ -
Optical	\$ 300,000.00	\$ -	\$ -	\$ -	\$ -
<b>Total Non-Recurring Income</b>	<b>\$ 400,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>NET INCOME</b>	<b>\$ (8,324)</b>	<b>\$ (20,005)</b>	<b>\$ 35,342</b>	<b>\$ 63,540</b>	<b>\$ 70,840</b>



# APPENDIX E

## SCHOOL BASED VISION CENTER BREAK EVEN ANALYSIS

**Breakeven Analysis**

Optical

Breakeven Point (units):

4,113
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**Sales volume analysis:**

Sales volume per period (units)	0	550	1,100	1,650	2,200	2,750	3,300	3,850	4,400	4,950	5,500
Sales price per unit	86.00	86.00	86.00	86.00	86.00	86.00	86.00	86.00	86.00	86.00	86.00
Fixed costs per period	342,219.00	342,219.00	342,219.00	342,219.00	342,219.00	342,219.00	342,219.00	342,219.00	342,219.00	342,219.00	342,219.00
Variable costs	0.00	1,540.00	3,080.00	4,620.00	6,160.00	7,700.00	9,240.00	10,780.00	12,320.00	13,860.00	15,400.00
Total costs	342,219.00	343,759.00	345,299.00	346,839.00	348,379.00	349,919.00	351,459.00	352,999.00	354,539.00	356,079.00	357,619.00
Total sales	0.00	47,300.00	94,600.00	141,900.00	189,200.00	236,500.00	283,800.00	331,100.00	378,400.00	425,700.00	473,000.00
Net profit (loss)	(342,219.00)	(296,459.00)	(250,699.00)	(204,939.00)	(159,179.00)	(113,419.00)	(67,659.00)	(21,899.00)	23,861.00	69,621.00	115,381.00

# APPENDIX F

## SCHOOOL BASED MEDICAL CENTER BREAK EVEN ANALYSIS

**Breakeven Analysis**

**Medical**

**Breakeven Point (units):**

2,631
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**Sales volume analysis:**

Sales volume per period (units)	0	220	440	660	880	1,100	1,320	1,540	1,760	1,980	2,200
Sales price per unit	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00
Fixed costs per period	234,657.00	234,657.00	234,657.00	234,657.00	234,657.00	234,657.00	234,657.00	234,657.00	234,657.00	234,657.00	234,657.00
Variable costs	0.00	2,376.00	4,752.00	7,128.00	9,504.00	11,880.00	14,256.00	16,632.00	19,008.00	21,384.00	23,760.00
Total costs	234,657.00	237,033.00	239,409.00	241,785.00	244,161.00	246,537.00	248,913.00	251,289.00	253,665.00	256,041.00	258,417.00
Total sales	0.00	22,000.00	44,000.00	66,000.00	88,000.00	110,000.00	132,000.00	154,000.00	176,000.00	198,000.00	220,000.00
Net profit (loss)	(234,657.00)	(215,033.00)	(195,409.00)	(175,785.00)	(156,161.00)	(136,537.00)	(116,913.00)	(97,289.00)	(77,665.00)	(58,041.00)	(38,417.00)

# APPENDIX G

## MEMORANDUM OF UNDERSTANDING