Regular Board Meeting
Jul 31, 2019 4:00 PM EDT

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A Regular Board meeting of the Board of Commissioners of the North Broward Hospital District will be held on Wednesday, July 31, 2019, at 4:00 p.m., at Broward Health Corporate Spectrum Location: 1700 Northwest 49 Street, Fort Lauderdale, Florida, 33309. The purpose of this Board meeting is to review and consider any matters within the Board’s jurisdiction.

Persons with disabilities requiring special accommodations in order to participate should contact the District by calling 954-473-7100 at least 48 hours in advance of the meeting to request such accommodations.

Any person who decides to appeal any decision of the District’s Board with respect to any matter considered at these meetings will need a record of the proceedings, and for such purpose, may need to ensure that a verbatim record of the proceedings is made which record includes testimony and evidence upon which the appeal is to be based.
EMERGENCY SPECIAL BOARD MEETING
PURSUANT TO CHAPTER 286, F.S. AND SECTION 189.015, F.S.
12:00 pm, June 28th, 2019

An Emergency Special Board of Commissioners meeting was held at 12:00 p.m. on June 28th, 2019 at the Broward Health Corporate Spectrum location, 1700 Northwest 49 Street, Fort Lauderdale, Florida.

1. NOTICE

Notice of this meeting is attached to the official Minutes as EXHIBIT I. The official Agenda for this meeting, as presented for the consideration of the Board, is attached to the official Minutes as EXHIBIT II.

This meeting was live streamed and is also available for viewing on the Broward Health website.

2. CALL TO ORDER

There being a quorum present, the meeting was called to order by Chairman Klein at 12:06 pm

3. ROLL CALL

Commissioners:
Present: Commissioner Andrew M. Klein, Chair
Commissioner Ray T. Berry, Secretary/Treasurer
Commissioner Nancy W. Gregoire
Commissioner Stacy L. Angier

Not Present: Commissioner Christopher T. Ure, Vice Chair
Commissioner Marie C. Waugh

Senior Leadership:
Additionally Present: Gino Santorio/President/CEO, Linda Epstein/Corporate General Counsel,
Brett Bauman/Associate, General Counsel, Nigel Crooks/Chief Internal Auditor

4. PLEDGE OF ALLEGIANCE Stacy L. Angier

Chairman Klein announced that the first order of business was for the Board of Commissioners to make a finding that an emergency situation existed affecting the health, welfare, or safety of the public and strict compliance with the usual notice requirements of the Sunshine Law, section 286.011, F.S. and Uniform Special District Accountability Act, section 189.015, F.S. was impracticable and caused an unreasonable delay in the ability of the Board and District to act in a swift and immediate manner to deal with such emergency.
MOTION It was moved by Commissioner Gregoire, seconded by Commissioner Angier, that:

A FINDING WAS MADE BY THE BOARD OF COMMISSIONER OF THE NORTH BROWARD HOSPITAL DISTRICT THAT AN EMERGENCY SITUATION AFFECTING THE HEALTH, WELFARE OR SAFETY OF THE PUBLIC EXISTED.

Motion carried unanimously.

Chairman Klein also shared that a personal emergency prevented a quorum on June 26th, 2019 and that the current meeting of June 28th, convened to only deal with the emergency item, as it required immediate action.

5. PUBLIC COMMENTS None

6. MEDICAL STAFF CREDENTIALING – Dr. Andrew Ta

6.1.) Broward Health North 6.2.) Broward Health Imperial Point
6.3.) Broward Health Coral Springs 6.4.) Broward Health Medical Center

Dr. Ta, CMO, gave a high level summary of the monthly medical credentialing report for the month of June, 2019.

MOTION It was moved by Commissioner Gregoire, seconded by Commissioner Angier, to:

APPROVE ITEMS (#6.1.) THROUGH (#6.4.) MEDICAL STAFF CREDENTIALING.

Motion carried unanimously.

* Chairman Klein reported that the decision of the Board to recredential the physicians needed to be ratified at the next board meeting.

7. ADJOURNMENT 12:13 pm

MOTION It was moved by Commissioner Angier, seconded by Commissioner Gregoire, that:

THE EMERGENCY SPECIAL BOARD MEETING BE ADJOURNED.

Motion carried unanimously.

Respectfully submitted,
Commissioner Ray T. Berry, Secretary/Treasurer
RESCHEDULED JUNE 2019
REGULAR BOARD MEETING
1:00 pm, July 9th, 2019

The Regular meeting of the Board of Commissioners of the North Broward Hospital District was held at 1:00 p.m. on July 9th, 2019 at the Broward Health Corporate Spectrum location, 1700 Northwest 49 Street, Fort Lauderdale, Florida.

1. NOTICE

Notice of this meeting is attached to the official Minutes as EXHIBIT I. The official Agenda for this meeting, as presented for the consideration of the Board, is attached to the official Minutes as EXHIBIT II.

This meeting was live streamed and is also available for viewing on the Broward Health website.

2. CALL TO ORDER

There being a quorum present, the meeting was called to order by Chairman Klein at 1:12 pm

3. BOARD MEMBERS

Commissioners:
Present: Commissioner Andrew M. Klein, Chair
Commissioner Ray T. Berry, Secretary/Treasurer
Commissioner Nancy W. Gregoire
Commissioner Stacy L. Angier
Commissioner Marie C. Waugh

Not Present: Commissioner Christopher T. Ure, Vice Chair

Senior Leadership:
Additionally Present: Gino Santorio/President/CEO, Alan Goldsmith/CAO, Alex Fernandez/CFO, Linda Epstein/General Counsel, Jerry Del Amo/Managing Sr. Associate, General Counsel, Brett Bauman/Associate General Counsel, Nigel Crooks/Chief Internal Auditor

4. THE PLEDGE OF ALLEGIANCE Ray T. Berry

* Pastor Alan Jackson led the public meeting with an invocation.

5. PUBLIC COMMENTS None

6. APPROVAL OF MINUTES
Approve May 29, 2019 Regular Board meeting minutes.

MOTION It was moved by Commissioner Angier, seconded by Commissioner Gregoire, to:

APPROVE THE REGULAR BOARD MEETING MINUTES, DATED MAY 29, 2019.

Motion carried unanimously.

7. CHIEF MEDICAL STAFF UPDATES 7.1.-7.4.

Medical staff updates were given by Dr. Lehr for Broward Health North and Dr. Morrison for Broward Health Medical Center. Both Dr. Penate with Broward Health Coral Springs and Dr. Jensen with Broward Health Imperial Point, were absent.

8. PRESENTATIONS

President/CEO Update, Gino Santorio

Mr. Santorio presented his full monthly report highlighting the five pillars of the organization and progress at each of the facilities. In closing, Mr. Santorio took a moment to commemorate and formally honor the Board of Commissioners by giving them each a plaque that citing quotes from the Sun-Sentinel on achievements the Board was directly responsible for.

9. CONSENT AGENDA

9.1. Medical Credentialing approval for BHMC, BHN, BHIP, BHCS
9.2. Acceptance of the Interim Financial Statement for the month of May, 2019
9.3. Systemwide, approve fully integrated Pharmacy Retail Management System, Script-Pro Inc.
9.4. Broward Health Medical Center, approve Psychiatry On-Call Coverage
9.5. Systemwide, approve funding for Locum Tenens Coverage
9.6. Approve specified changes to ensure compliance for Healthcare for the Homeless Grant, HRSA
9.7. GA-004-001 Compliance Department and Human Resource Protocol
9.8. GA-004-004 Duty to Report
9.9. GA-004-305 Non-Retaliation or Retribution

MOTION It was moved by Commissioner Gregoire, seconded by Commissioner Berry, that:

ITEMS 9.1. THROUGH 9.9. ON THE CONSENT AGENDA BE APPROVED.
Motion carried unanimously.

10. DISCUSSION AGENDA

10.1. Appointment of the Board of Directors of Broward Health ACO, Services, Inc.

MOTION It was moved by Commissioner Berry, seconded by Commissioner Angier, that:

AS THE SOLE MEMBER OF THE BROWARD HEALTH ACO SERVICES, INC., APPOINT THE EIGHT INDIVIDUALS TO SERVE AS MEMBERS OF THE ACO BOARD OF DIRECTORS.

Motion carried unanimously.

10.2. Announcement of Special Board Meeting related to Tax Exhibit and scheduling Tax Hearings

MOTION It was moved by Commissioner Angier, seconded by Commissioner Gregoire, that:

TO CALL A SPECIAL BOARD MEETING FOR THE PURPOSE OF ESTABLISHING THE TAX HEARINGS, AND ISSUING TAX NOTICES AND EXHIBITS AS APPROPRIATE.

Motion carried unanimously.

11. COMMENTS BY COMMISSIONERS

There were no closing comments given by the Board.

12. CLOSING OF PUBLIC SESSION AND OPENING OF ATTORNEY-CLIENT SESSION UNDER 286.011, F.S.

Chairman Klein read the following statement for the record.

On the May 22nd, 2019, Legal Committee public meeting, Former Interim General Counsel Gabe Imperato requested the opportunity to speak to the board in private regarding settlement negotiations and strategy sessions related to the district’s litigation expenditures of pending litigation.

Mr. Imperato acknowledged his request and again requested at the May 29th, 2019, Regular Board meeting that the board call a shade session specifically for these attorney/client discussions pertaining to the following cases pending in the Circuit Court of the 17th Judicial Circuit in and for Broward County, Florida.
Pauline Grant v. North Broward Hospital District d/b/a Broward Health, Lynn Barrett, Rocky Rodriguez, Christopher Ure, Linda Robison and Beverly Capasso, Case No. CACE 16-022981. District d/b/a Broward Health, Case No. CACE 17-022221 and CACE 17-009406, which were recently consolidated into one case.

In all three cases the North Broward Hospital District is represented by Mr. Ed Pozzuoli and Mr. Paul Lopez as legal counsel.

Pursuant to Section 286.011 (8) (d) Florida Statutes, I'm announcing that the closed meeting is about to begin, and will last approximately one hour.

The people who will be attending the closed meeting are Chairman Andrew Klein, Commissioners Angier, Gregoire, Waugh, Berry, CEO Santorio as the President/CEO and from the District's legal team, Linda Epstein, General Counsel; Gabe Imperato, Former Interim General Counsel; Gerald Del Amo, Senior Associate General Counsel and Brett Bauman, Associate General Counsel. Edward Pozzuoli and Paul Lopez will also be in attendance, as outside legal counsel representing the District on these three cases. Sandra Suarez, a Certified Court Reporter will also be present to transcribe the entire meeting. At this time, we will now closed the open portion of the meeting and we'll move to a closed attorney/client session. I'd ask that anyone other than those who will attend the closed meeting to please leave at this time. At the conclusion of the closed meeting, we will reopen the public portion of the meeting.

* Thereupon, the Open Board Meeting went into recess at 1:44 pm for the duration of the Closed Shade Session.

RECONVENE PUBLIC MEETING

Chairman Klein reopened the public portion of the meeting at 2:44 pm and entertained a motion to adjourn.

13. NEXT REGULAR BOARD MEETING

Next regularly scheduled Board of Commissioner's meeting will be held on August 28, 2019 at 4:00 p.m. at the Broward Health Corporate Office, Spectrum site, Suite 150, 1700 Northwest 49th Street, Ft. Lauderdale, Florida, 33309

14. ADJOURNMENT 2:52 pm

MOTION It was moved by Commissioner Klein, seconded by Commissioner Berry, that:

THE REGULAR BOARD MEETING BE ADJOURNED.
Motion carried unanimously.

Respectfully submitted,

Commissioner Ray T. Berry, Secretary/Treasurer
SUMMARY OF REQUEST

DATE: July 31, 2019

ITEM: MEDICAL STAFF BOARD ITEMS

REASON: APPROVED RECOMMENDATIONS AS EXHIBITED FROM THE MEDICAL EXECUTIVE COMMITTEE OF BROWARD HEALTH NORTH

COST: NOT APPLICABLE

ADDITIONAL INFORMATION: NONE

LEGAL REVIEW: NOT APPLICABLE

APPROVED:

_________________________  Date: July 31, 2019
Gino Santorio, President/CEO

_________________________  Date: July 16, 2019
Alice Taylor, Chief Executive Officer, Broward Health North

_________________________  Date: July 31, 2019
Andrew Ta, Chief Medical Officer, Broward Health
MEMORANDUM

TO: Board of Commissioners

FROM: Alice Taylor, Chief Executive Officer
       Broward Health North

DATE: July 31, 2019

SUBJECT: Medical Staff Board Items

The Medical Executive Committee of Broward Health North approved the recommendations as exhibited for:

1. Medical Staff Additions, Changes, Reappointments, and Resignation
2. Allied Health Staff Addition, Changes and Reappointments
3. Community Health Services Reappointment and Resignation

I, Gary Lehr, M.D., Chief of Staff at Broward Health North, do hereby attest that all pertinent and required information has been received and verified for providers being submitted to the Board of Commissioners for approval.

Therefore, it is requested that the Board of Commissioners approve these recommendations as submitted by the Medical Executive Committee at Broward Health North.
BROWARD HEALTH NORTH
ADDITIONS, CHANGES AND RESIGNATIONS

_____ Broward Health Medical Center       ____X_____ Broward Health North
_____ Broward Health Imperial Point       _____ Broward Health Coral Springs

The following Medical Staff Committees:

CREDENTIALS: 07/09/2019    MEDICAL COUNCIL: 07/10/2019

1. Approved MEC Business:
   • OPPE reports for September 2018 to April 2019 for OPPE

2. APPROVED THE FOLLOWING NEW PRACTITIONERS:

<table>
<thead>
<tr>
<th>Practitioner</th>
<th>Department</th>
<th>Privileges</th>
<th>Primary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raul Castellanos, M.D.</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>BHN</td>
</tr>
<tr>
<td>Nelson Cordero-Torres, M.D.</td>
<td>Medicine</td>
<td>Psychiatry</td>
<td>BHMC</td>
</tr>
<tr>
<td>Thomas Crum, Ph.D.</td>
<td>Medicine</td>
<td>Clinical Psychology</td>
<td>BHN</td>
</tr>
<tr>
<td>Carlo Guevara, M.D.</td>
<td>Surgery</td>
<td>Oral Maxillofacial</td>
<td>BHN</td>
</tr>
<tr>
<td>Eric Hensen, D.O.</td>
<td>Surgery</td>
<td>Otolaryngology</td>
<td>BHMC</td>
</tr>
<tr>
<td>Margaret Lott, M.D.</td>
<td>Medicine</td>
<td>Pediatrics</td>
<td>BHN-CHS</td>
</tr>
<tr>
<td>Sandeep Mendiratta, M.D.</td>
<td>Medicine</td>
<td>Psychiatry</td>
<td>BHIP</td>
</tr>
<tr>
<td>A. Morgado-Laureano, M.D.</td>
<td>Medicine</td>
<td>Interventional Rad.</td>
<td>BHMC</td>
</tr>
<tr>
<td>Erasmo Passaro, M.D.</td>
<td>Medicine</td>
<td>Telemedicine</td>
<td>BHMC</td>
</tr>
<tr>
<td>Joant Perdomo Espinal, M.D.</td>
<td>Medicine</td>
<td>Psychiatry</td>
<td>BHMC</td>
</tr>
<tr>
<td>Peter Ventre, M.D.</td>
<td>Medicine</td>
<td>Psychiatry</td>
<td>BHMC</td>
</tr>
<tr>
<td>Michael Williams, D.O.</td>
<td>Medicine</td>
<td>Infectious Disease</td>
<td>BHN</td>
</tr>
</tbody>
</table>

3. APPROVED THE FOLLOWING PRACTITIONER RESIGNATION(S):

<table>
<thead>
<tr>
<th>Practitioner</th>
<th>Specialty</th>
<th>Current Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jennifer Alexander, P.A.</td>
<td>Physician Assistant</td>
<td>Voluntary Resignation</td>
</tr>
<tr>
<td>Jeiny Glaze, P.A.</td>
<td>Physician Assistant</td>
<td>Voluntary Resignation</td>
</tr>
<tr>
<td>Gabriel Marrero, M.D.</td>
<td>PM&amp;R/Pain Med.</td>
<td>Voluntary Resignation</td>
</tr>
<tr>
<td>Steven Shapiro, M.D.</td>
<td>Pulmonary Med.</td>
<td>Voluntary Resignation</td>
</tr>
<tr>
<td>Guy V. Zingaro, M.D.</td>
<td>Gastroenterology</td>
<td>Voluntary Resignation</td>
</tr>
</tbody>
</table>

4. APPROVED CHANGE IN STATUS:

<table>
<thead>
<tr>
<th>Practitioner</th>
<th>Department</th>
<th>New Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. APPROVED A CHANGE IN SPONSORSHIP:

<table>
<thead>
<tr>
<th>Allied Health Practitioner</th>
<th>Department</th>
<th>New Sponsor:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yana Dodea, APRN</td>
<td>Surgery</td>
<td>John Malloy, DO and Steven Naide, MD</td>
</tr>
<tr>
<td>Erica Sahlgren, APRN</td>
<td>Surgery</td>
<td>Bruce Janke, MD, John Malloy, DO and Steven Naide, MD</td>
</tr>
<tr>
<td>John Karpiak, APRN</td>
<td>Surgery</td>
<td>J. Abbensetts, MD, J. Berne, MD, Mario Gomez, MD, Eric Johnson, MD, Michael Parra, MD, Ivan Puente, MD</td>
</tr>
</tbody>
</table>
6. ADDITIONAL/WITHDRAWAL PRIVILEGES

<table>
<thead>
<tr>
<th>Practitioner/Specialty</th>
<th>Department</th>
<th>Withdrawal/additional privilege</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firaz Hosein, D.O./Internal Med.</td>
<td>Medicine</td>
<td>Amended DOP for Hyperbarics</td>
</tr>
<tr>
<td>Richard Schultz, M.D./General Surg.</td>
<td>Surgery</td>
<td>Amended DOP for Hyperbarics</td>
</tr>
<tr>
<td>Naval Parikh, M.D./Internal Med.</td>
<td>Medicine</td>
<td>Adding Hyperbarics</td>
</tr>
<tr>
<td>Kush Tripathi, M.D./Pain Mgmt.</td>
<td>Surgery</td>
<td>Adding Kyphoplasty</td>
</tr>
</tbody>
</table>

Chief of Staff ____________________________ Date: July 16, 2019

Chief Executive Officer ____________________ Date: July 16, 2019

President/CEO ___________________________ Date: July 31, 2019

Gino Santorio 07/29/2019 16:09 Eastern Daylig
# BROWARD HEALTH NORTH

## MEDICAL STAFF REAPPOINTMENTS

**CREDENTIALS: 7/9/2019  MEDICAL COUNCIL: 7/10/2019**

### RECOMMENDED WITH NO CHANGE IN STATUS

<table>
<thead>
<tr>
<th>Physician</th>
<th>Department</th>
<th>Specialty</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Naaman Abdullah, MD</td>
<td>Surgery</td>
<td>Cardiovascular/Thoracic Surgery</td>
<td>Courtesy-Non-Primary</td>
</tr>
<tr>
<td>Abdon Borges, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Active-Primary</td>
</tr>
<tr>
<td>Juan Carbonell, MD</td>
<td>Medicine</td>
<td>Nephrology</td>
<td>Active-Primary</td>
</tr>
<tr>
<td>Kir-Wei Chen, MD</td>
<td>Surgery</td>
<td>Gynecology</td>
<td>Active-Non-Primary</td>
</tr>
<tr>
<td>Anasuya Gaonkar, MD</td>
<td>Emerg Med</td>
<td>Pediatric ER</td>
<td>Active-Primary</td>
</tr>
<tr>
<td>Neil Gershman, MD</td>
<td>Medicine</td>
<td>Allergy/Immunology</td>
<td>Consulting-Non-Primary</td>
</tr>
<tr>
<td>Mehmet Hepgur, MD</td>
<td>Medicine</td>
<td>Hematology/Oncology</td>
<td>Courtesy-Non-Primary</td>
</tr>
<tr>
<td>Radu Jacob, MD</td>
<td>Medicine</td>
<td>Nephrology</td>
<td>Courtesy-Non-Primary</td>
</tr>
<tr>
<td>Sergio Lenchig, MD</td>
<td>Medicine</td>
<td>Physical Medicine &amp; Rehab</td>
<td>Courtesy-Non-Primary</td>
</tr>
<tr>
<td>Ridwan Lin, MD</td>
<td>Medicine</td>
<td>Neurology</td>
<td>Active-Primary</td>
</tr>
<tr>
<td>Camil Sader, MD</td>
<td>Surgery</td>
<td>General Surgery</td>
<td>Active-Primary</td>
</tr>
</tbody>
</table>

### RECOMMENDED WITH CHANGE IN STATUS

<table>
<thead>
<tr>
<th>Physician</th>
<th>Department</th>
<th>Specialty</th>
<th>Current Status</th>
<th>Recommended Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rey Llones, MD</td>
<td>Surgery</td>
<td>Anesthesiology</td>
<td>Prov-2-Non-Pri</td>
<td>Consulting-Non-Primary</td>
</tr>
<tr>
<td>Cosme Manzarbeitia, MD</td>
<td>Surgery</td>
<td>General Surgery</td>
<td>Provisional-Non-Pri</td>
<td>Courtesy-Non-Primary</td>
</tr>
<tr>
<td>Ashneal Sharma, DO</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Provisional-Pri</td>
<td>Active-Primary</td>
</tr>
<tr>
<td>Jason Walters, MD</td>
<td>Surgery</td>
<td>Orthopaedics</td>
<td>Provisional-N</td>
<td>Active-Non-Primary</td>
</tr>
</tbody>
</table>

Reappointment Cycle: 7/31/2019 to 6/30/2021
## BROWARD HEALTH NORTH

### ALLIED HEALTH REAPPOINTMENTS

**CREDENTIALS:** 7/9/2019  |  **MEDICAL COUNCIL:** 7/10/2019

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Sponsor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paul Bertrand, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Dr. Naveen Gandreti et al.</td>
</tr>
<tr>
<td>Steve Fender, PA</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Drs. Paul Meli and Marc Ebersberger</td>
</tr>
<tr>
<td>Ashley Kleinkauf Wherry, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Dr. Naveen Gandreti et al.</td>
</tr>
<tr>
<td>Amanda Minnocci, PA</td>
<td>Emerg Med</td>
<td>Physician Assistant</td>
<td>Dr. Evan Boyar et al.</td>
</tr>
<tr>
<td>Sean Norden, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Dr. Naveen Gandreti et al.</td>
</tr>
<tr>
<td>Nicole Puleo, APRN</td>
<td>Surgery</td>
<td>Nurse Practitioner</td>
<td>Dr. John Coats and Matthew Moore</td>
</tr>
<tr>
<td>Debralee Ruocco, PA</td>
<td>Emergency Medicine</td>
<td>Physician Assistant</td>
<td>Dr. Evan Boyar, et al.</td>
</tr>
<tr>
<td>Erica Sahlgren, PA</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Drs. Bruce Janke, John Malloy &amp; Steven Naide</td>
</tr>
<tr>
<td>Tascine Seiveright, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Dr. Naveen Gandreti et al.</td>
</tr>
</tbody>
</table>

### NOT RECOMMENDED

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Reason</th>
</tr>
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<tbody>
<tr>
<td>None at this time</td>
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<td></td>
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</table>
BROWARD HEALTH NORTH

COMMUNITY HEALTH SERVICES
MEDICAL STAFF REAPPOINTMENTS

CREDENTIALS: 7/9/2019    MEDICAL COUNCIL: 7/10/2019

<table>
<thead>
<tr>
<th>Practitioner</th>
<th>Department</th>
<th>Specialty</th>
<th>Sponsor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angela Campbell, APRN</td>
<td>CHS Medicine</td>
<td>APRN</td>
<td>Dr. John Berges</td>
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Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Raul Castellanos, MD

Date of Birth: 01/16/1987
Citizenship: US
Primary Facility: Broward Health North
Other Broward Health Facilities: None
Specialty: Internal Medicine
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: None
Practice Name: Medical Specialist of South Florida, LLC

Primary Address Information:
2900 N Military Trail
Suite 210
Boca Raton, FL 33431
Phone: 561-931-3941
Fax: 561-961-4412
Email: Salcedob2018@gmail.com

ECFMG: N/A

Medical/Professional School: Florida State University College of Medicine
Tallahassee, FL
From: 05/30/2011
To: 05/18/2015
Degree: Doctor of Medicine

Internship: N/A

Residency: Jackson Memorial Hospital- Miami University
Miami, FL
From: 08/24/2015
To: 06/30/2018
Specialty: Internal Medicine

Fellowship: N/A

Hospital Affiliations/Work History:
Palms West Hospital
Loxahatchee, FL
From: 07/19/2018
To: Present
Specialty: Internal Medicine

Plantation General Hospital (HCA)
Plantation, FL
From: 01/22/2019
To: Present
Specialty: Internal Medicine

JFK Medical Center
Lake Worth, FL
From: 01/22/2019
To: Present
Specialty: Internal Medicine
Broward Health – Credentialing Abstract – Medical Staff Applicant

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| Board Certification:                         |                                      |
| Board: American Board of Internal Medicine   |                                      |
| Specialty: Internal Medicine                 |                                      |
| Certification Date: 08/20/2018                |                                      |
| Certification Expiration: 04/01/2020          |                                      |
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Nelson E Cordero-Torres, MD

Date of Birth: 09/29/1982
Citizenship: US
Primary Facility: Broward Health Imperial Point
Other Broward Health Facilities:
   Broward Health Medical Center
   Broward Health North
Specialty: Psychiatry
Dept. at Primary Facility: Psychiatry
Secondary Facility Depts.:
   Psychiatry
   Medicine
Practice Name: Ventre Medical Associates LLC
Website:

Primary Address Information:
   1400 East Oakland Park Boulevard
   Suite 210
   Oakland Park, FL 33334
   Phone: 954-561-6222
   Fax: 954-990-7650
   Email: Ashley@ventremedical.com

ECFMG: N/A

Medical/Professional School:
   Universidad Central del Caribe **AMA Verified**
   Cayey, PR
   From: 08/01/2004
   To: 12/01/2008
   Degree: MD

Gap:
   Interviewing for Residency programs and relocating from Puerto Rico to Florida
   From: 12/01/2008
   To: 07/01/2009

Internship: N/A

Residency:
   Jackson Memorial Hospital
   Miami, FL
   From: 07/01/2009
   To: 06/30/2013
   Specialty: Psychiatry

Fellowship: N/A

Hospital Affiliations/
Work History:
   Fort Lauderdale Hospital
   Fort Lauderdale, FL
   From: 12/15/2011
   To: 07/16/2015
   Specialty: Psychiatry

   Atlantic Shores Hospital
   Fort Lauderdale, FL
   From: 01/18/2012
   To: 06/05/2015
   Specialty: Psychiatry
Hospital Affiliations/Work History (continued):

Broward Health Imperial Point
Ft Lauderdale, FL
From: 08/13/2013
To: Present
Specialty: Psychiatry

Broward Health Medical Center and Salah Foundation Children's Hospita
Ft Lauderdale, FL
From: 08/13/2013
To: Present
Specialty: Psychiatry

Broward Health Coral Springs
Coral Springs, FL
From: 06/25/2014
To: 03/30/2016
Specialty: Psychiatry

Broward Health North
Deerfield Beach, FL
From: 08/27/2014
To: 02/24/2016
Specialty: Psychiatry

Memorial Hospital Pembroke
Pembroke Pines, FL
From: 10/26/2016
To: Present
Specialty: Psychiatry

Fort Lauderdale Behavioral Health Center
Fort Lauderdale, FL
From: 07/24/2017
To: Present
Specialty: Psychiatry

Board Certification:
Board: American Board of Psychiatry and Neurology
Specialty: Psychiatry
Certification Date: 09/15/2014
MOC Reverification Date: 03/01/2020
Expiration Date: N/A
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Thomas A Crum, PhD

Date of Birth: 05/23/1969
Citizenship: US
Primary Facility: Broward Health North
Other Broward Health Facilities: None
Specialty: Psychology
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: None
Practice Name: Broward Health North
Website: www.browardhealth.org
Primary Address Information: N/A
ECFMG: Number: Date Issued: 
Medical/Professional School: Nova Southeastern University for Psychologica Studies
Ft. Lauderdale-Davie, FL
From: 08/01/1995 To: 08/31/2001
Degree: Ph.D
Internship: Miami Veterans Medical Center
Miami, FL
From: 08/28/2000 To: 08/24/2001
Specialty: Psychology
Residency: N/A
Fellowship: University of Miami Miller School of Medicine
Miami, FL
From: 09/01/2001 To: 06/15/2003
Specialty: Clinical Neuropsychology
Hospital Affiliations/ Work History:
Thomas A. Crum, Ph.D., PA
Hollywood, FL
From: 06/02/2003 To: 09/22/2017
Title: Neuropsychologist
Memorial Regional Hospital South
Hollywood, FL
From: 01/26/2011 To: Present
Specialty: Neuropsychology
Joe DiMaggio Children's Hospital
Hollywood, FL
From: 07/13/2017 To: Present
Specialty: Neuropsychology
Hospital Affiliations/
Work History (continued):

Memorial Hospital West
Pembroke Pines, FL
From: 09/25/2013
To: Present
Specialty: Neuropsychology

Board Certification:

Board: American Board of Professional Psychology
Specialty: Clinical Neuropsychology
Certification Date: 05/15/2010
MOC Reverification Date: N/A
Expiration Date: 12/31/2019

Thomas A Crum, PhD
Name: Carlo E Guevara, MD, DDS

Date of Birth: 01/15/1982

Citizenship: US

Primary Facility: Broward Health North

Other Broward Health Facilities:

Specialty(ies): Oral/ Maxillofacial Surgery

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: Surgery

Practice Name: South Florida Dental Implant and Facial Surgery Center

Primary Address Information:

2600 East Commercial Boulevard
Apartment 200
Fort Lauderdale, FL 33308
Phone: 954-566-0300
Fax: 954-566-9066
Email: info@drmatouk.com

ECFMG: N/A

Medical/Professional School: Columbia University Dental School
New York, NY
From: 09/05/2006
To: 05/18/2010
Degree: DDS

University of Florida College of Medicine
Gainesville, FL
From: 08/01/2011
To: 05/10/2014
Degree: MD

Internship: N/A

Residency: University of Florida College of Medicine-Shands Jacksonville
Jacksonville, FL
From: 07/01/2010
To: 06/30/2016
Specialty: Oral and Maxillofacial Surgery

Fellowship: University of Florida College of Medicine
Gainesville, FL
From: 07/01/2016
To: 06/30/2017
Specialty: Pediatric Cleft-Craniofacial Surgery

Hospital Affiliations/ Work History:

University of Florida- Dept of OMFS
Gainesville, FL
From: 07/01/2010
To: Present
Title: Clinical Assistant Professor
**Broward Health – Credentialing Abstract – Medical Staff Applicant**

| Hospital Affiliations/Work History (continued): | University of Florida Health  
Jacksonville, FL  
From: 08/31/2016  
To: 06/30/2017  
Specialty: Oral and Maxillofacial Surgery |

| Board Certification: | Board: American Board of Oral and Maxillofacial Surgery  
Specialty: Oral and Maxillofacial Surgery  
Certification Date: 03/01/2018  
Certification Expiration: 12/31/2028 |

Carlo E Guevara, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Eric Hensen DO

Date of Birth: 03/05/1962

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: Broward Health North

Specialty(ies): Otolaryngology

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Practice Name: All Star Recruiting Locums LLC
Website: www.allstarrecruiting.com

Primary Address Information: 6119 Lyons Road
Coconut Creek, FL 33073
Phone: 800-928-0229
Fax: 888-503-0752
Email: msuert@aol.com

ECFMG: N/A

Medical/Professional School: Michigan State University College of Osteopathic Medicine
East Lansing, MI
From: 05/01/1989
To: 05/07/1993
Degree: DO

Internship: Mount Clemens General Hospital
Mount Clemens, MI
From: 07/01/1993
To: 06/30/1994
Specialty: Traditional Rotating Internship

Residency: St. John Hospital and Medical Center
Detroit, MI
From: 07/01/1994
To: 06/30/1995
Specialty: General Surgery

Oklahoma State University
Stillwater, OK
From: 07/10/1995
To: 07/09/1998
Specialty: Otolaryngology and Facial Plastic Surgery

Fellowship: N/A

Hospital Affiliations/Work History:
Lakeside ENT (Private Practice)
Chesapeake, VA
From: 07/10/1998
To: 10/29/2006
Title: Otolaryngology

Eric Hensen, DO
Broward Health – Credentialing Abstract – Medical Staff Applicant

Alta Vista Regional Hospital
Las Vegas, NM
From: 10/30/2006
To: 05/08/2008
Specialty: Otolaryngology

Mercer County Community Hospital
Coldwater, OH
From: 09/24/2008
To: 08/14/2009
Specialty: Otolaryngology

Benefis Health System
Great Falls, MT
From: 08/01/2009
To: 10/01/2010
Specialty: Otolaryngology

Doctors Memorial Hospital
Perry, FL
From: 10/26/2010
To: 11/10/2011
Specialty: Otolaryngology

CompHealth
Salt Lake City, UT
From: 12/19/2011
To: 07/01/2012
Title: Locum Tenens Physician

Ocala Health System
Ocala, FL
From: 12/19/2011
To: 02/14/2012
Specialty: Otolaryngology

Melbourne Regional Medical Center
Melbourne, FL
From: 02/28/2012
To: 04/27/2013
Specialty: Otolaryngology

Capital Regional Medical Center (HCA)
Tallahassee, FL
From: 08/28/2012
To: 05/07/2013
Specialty: Otolaryngology

West Palm Beach VA Medical Center
West Palm Beach, FL
From: 10/15/2013
To: 12/13/2013
Specialty: Otolaryngology

Locumtenens.com
Alpharetta, GA
From: 10/15/2013
To: 09/04/2018
Title: Locum Tenens Physician

Eric Hensen, DO
Broward Health – Credentialing Abstract – Medical Staff Applicant

Lakeland Regional Medical Center
Lakeland, FL
From: 12/16/2013
To: Present
Specialty: Otolaryngology

All Star Recruiting
Deerfield Beach, FL
From: 06/03/2016
To: Present
Title: Locum Tenens Physician

Central Florida Regional Hospital
Sanford, FL
From: 06/17/2016
To: Present
Specialty: Otolaryngology

Phoenix Indian Medical Center
Phoenix, AZ
From: 07/01/2016
To: 10/28/2016
Specialty:

Onslow Memorial Hospital
Jacksonville, NC
From: 10/26/2016
To: 08/29/2017
Specialty: Otolaryngology

Northeast Alabama Regional Medical Center
Anniston, AL
From: 01/25/2017
To: 11/30/2017
Specialty: Otolaryngology

St Anthony’s Centura Health
Lakewood, CO
From: 02/20/2018
To: Present
Specialty: Otolaryngology

Orange Park Medical Center
Orange Park, FL
From: 04/04/2018
To: Present
Specialty: Otolaryngology

Community Hospital Health System
Franklin, TN
From: 07/19/2018
To: 11/23/2018
Specialty: Otolaryngology

Broward Health Medical Center
Fort Lauderdale, FL
From: 11/28/2018
To: Present
Specialty: Otolaryngology

Eric Hensen, DO
Broward Health – Credentialing Abstract – Medical Staff Applicant

Board Certification:

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Eric Hensen, DO
# Broward Health – Credentialing Abstract – Medical Staff Applicant

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<td>Practice Name:</td>
<td>Annie L Weaver Health Center</td>
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<td>Website: <a href="http://www.browardhealth.org">www.browardhealth.org</a></td>
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<td>Primary Address Information:</td>
<td>2011 NW 3rd Avenue</td>
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<td></td>
<td>Pompano Beach, FL 33060</td>
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<tr>
<td></td>
<td>Phone: 954-788-5901</td>
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<td>Fax: 954-788-0129</td>
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<td>Medical/Professional School:</td>
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<td>Pittsburgh, PA</td>
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<td>To: 07/05/2015</td>
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<td>Degree: MD</td>
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Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Sandeep Mendiratta MD

Date of Birth: 07/29/1981

Citizenship: US

Primary Facility: Broward Health Imperial Point

Other Broward Health Facilities:
Broward Health Medical Center
Broward Health North

Specialty(ies): Psychiatry

Dept. at Primary Facility: Psychiatry

Secondary Facility Depts.:
Psychiatry
Medicine

Practice Name: Ventre Medical Associates LLC
Website: www.ventremedical.com

Primary Address Information:
1400 East Oakland Park Boulevard
Suite 210
Oakland Park, FL 33334
Phone: 954-561-6222
Fax: 954-990-7650
Email: Ashley@ventremedical.com

ECFMG: N/A

Medical/Professional School: Kent State Univeristy/Northeastern Ohio University
Hartford, OH
From: 08/27/2001
To: 05/13/2006
Degree: MD

Internship/Residency:
University of Florida
Gainesville, FL
From: 07/01/2006
To: 06/01/2010
Specialty: Psychiatry

Fellowship: N/A

Hospital Affiliations/ Work History:
Compass Health Systems
North Miami Beach, FL
From: 07/21/2010
To: 05/06/2011
Specialty: Psychiatry

Broward Health Imperial Point
Ft Lauderdale, FL
From: 08/13/2010
To: Present
Specialty: Psychiatry

Fort Lauderdale Behavioral Health Center (Fort Lauderdale Hospital)
Ft Lauderdale, FL
From: 06/16/2017
To: Present
Specialty: Psychiatry

Sandeep Mendiratta, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Atlantic Shores Hospital
Fort Lauderdale, FL
From: 11/05/2010
To: 01/18/2014
Specialty: Psychiatry

South County Mental Health Center
Delray Beach, FL
From: 06/20/2011
To: 05/18/2012
Specialty: Psychiatry

Family Preservation Services
Riviera Beach, FL
From: 09/08/2011
To: 05/18/2012
Specialty: Psychiatry

North Shore Medical Center – FMC Campus
Fort Lauderdale, FL
From: 07/10/2012
To: 06/03/2014
Specialty: Psychiatry

University Hospital and Medical Center (HCA)
Tamarac, FL
From: 06/19/2012
To: Present
Specialty: Psychiatry

Broward Health Medical Center & Chris Evert Children’s Hospital
Fort Lauderdale, FL
From: 06/27/2012
To: Present
Specialty: Psychiatry

Broward Health North
Deerfield Beach, FL
From: 05/28/2014
To: 02/24/2016
Specialty: Psychiatry

Broward Health Coral Springs
Coral Springs, FL
From: 06/25/2014
To: 03/30/2016
Specialty: Psychiatry

Board Certification:
Board: American Board of Psychiatry and Neurology
Specialty: Psychiatry
Certification Date: 01/13/2012
MOC Expiration: 03/01/2020
Certification Expiration: N/A
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Andres Morgado-Laureano MD

Date of Birth: 05/02/1986

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:
- Broward Health Coral Springs
- Broward Health Imperial Point
- Broward Health North

Specialty(ies): Radiology

Dept. at Primary Facility: Radiology

Secondary Facility Depts.:
- Radiology
- Medicine

Practice Name: North Broward Radiologists PA
Website: https://nbradiologists.com/

Primary Address Information:
1801 South Perimeter Road
Suite 180
Fort Lauderdale, FL 33309
Phone: 954-839-8080
Fax: 954-839-8081
Email: ncuestas@nbradiologists.com

ECFMG: N/A

Medical/Professional School:
University of Puerto Rico School of Medicine
San Juan, PR
From: 06/01/2009
To: 06/30/2013
Degree: MD

Internship:
San Juan City Hospital
San Juan, PR
From: 07/01/2013
To: 06/30/2014
Specialty: Transitional Year

Residency:
University of Miami Miller School of Medicine
Miami, FL
From: 07/01/2014
To: 06/30/2018
Specialty: Radiology

Fellowship:
University of Miami Miller School of Medicine
Miami, FL
From: 07/01/2018
To: 06/30/2019
Specialty: Vascular and Interventional Radiology

Hospital Affiliations/Work History: N/A

Board Certification:
Board: American Board of Radiology
Specialty: Interventional Radiology and Diagnostic Radiology
Eligibility Date: 06/30/2019
Eligibility Expiration: 06/30/2026

Andres Morgado-Laureano, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Erasmo Passaro Sr., MD

Date of Birth: 12/05/1961

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:

Specialty(ies): Clinical Neurophysiology

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: Medicine

Practice Name: Advanced Medical Resources, LLC
Website: www.amrorservices.com

Primary Address Information:
2150 Town Square Place
Suite 290
Sugarland, TX 77479
Phone: 281-768-6747
Fax: 281-768-6755
Email: Emaldonado@amrorservices.com

ECFMG: N/A

Medical/Professional School:
Rutgers Robert Wood Johnson Medical School
Piscataway, NJ
From: 08/29/1984
To: 05/06/1988
Degree: MD

Internship:
University of California Los Angeles
Sylmar, CA
From: 06/24/1988
To: 06/23/1989
Specialty: Internal Medicine

Residency:
University of California San Diego
La Jolla, CA
From: 07/01/1989
To: 06/30/1990
Specialty: Psychiatry

University of California Los Angeles
Los Angeles, CA
From: 07/01/1990
To: 06/30/1993
Specialty: Neurology

Fellowship:
University of California Los Angeles
Los Angeles, CA
From: 07/01/1993
To: 06/30/1995
Specialty: Epilepsy and EEG

Erasmo Passaro, Sr.MD
## Hospital Affiliations/Work History:

**University of South Florida -Tampa General Hospital** "Unable to verify"

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<td>07/01/1995</td>
<td>12/31/1997</td>
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**University of Michigan**

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<tbody>
<tr>
<td>02/02/1998</td>
<td>05/10/2002</td>
<td>Assistant Professor of Neurology/Director, Adult Epilepsy Laboratory</td>
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**Bayfront Health System**

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<tr>
<th>From</th>
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<tbody>
<tr>
<td>07/10/2002</td>
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**Edward White Hospital**

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<tr>
<td>07/16/2002</td>
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**St. Anthony’s Hospital**

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<tbody>
<tr>
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**Johns Hopkin’s All Children’s Hospital**

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**Tampa General Hospital**

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**University of South Florida**

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<tr>
<td>10/01/2004</td>
<td>07/31/2007</td>
<td>Associate Professor (Affiliate)</td>
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**Florida Center for Neurology**

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<td>Florida Hospital - Carrollwood (INV)</td>
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<td>Regional Medical Center - Bayonet Point (HCA)</td>
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<td>New Port Richey, FL</td>
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**Broward Health – Credentialing Abstract – Medical Staff Applicant**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Joant Perdomo Espinal, MD</th>
</tr>
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<tbody>
<tr>
<td>Date of Birth:</td>
<td>05/18/1979</td>
</tr>
<tr>
<td>Citizenship:</td>
<td>Visa expiration: 09/25/2028</td>
</tr>
<tr>
<td>Primary Facility:</td>
<td>Broward Health Medical Center</td>
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</table>
| Other Broward Health Facilities: | Broward Health Imperial Point  
| | Broward Health North |
| Specialty: | Psychiatry |
| Dept. at Primary Facility: | Psychiatry |
| Secondary Facility Depts: | Psychiatry  
| | Medicine |
| Practice Name: | Ventre Medical Associates LLC  
| | Website: [www.ventremedical.com](http://www.ventremedical.com) |
| Primary Address Information: | 1400 East Oakland Park Boulevard  
| | Suite 210  
| | Oakland Park, FL 33334  
| | Phone: 954-561-6222  
| | Fax: 954-990-7650  
| | Email: Ashley@ventremedical.com |
| ECFMG: | Number: 0-573-741-5  
| | Date issued: 04/21/2006 |
| Medical/Professional School: | Universidad Instituto Tecnologico de Santo Domingo (INTEC)  
| | Santo Domingo,  
| | From: 08/01/1997  
| | To: 04/15/2004  
| | Degree: MD |
| Foreign Affiliations/Work History: | Fire Department of Santo Domingo  
| | Santo Domingo, DR  
| | From: 05/01/2004  
| | To: 10/30/2005  
| | Title: EMT  
| | Carol Morgan School of Santo Domingo  
| | Santo Domingo, DR  
| | From: 11/01/2005  
| | To: 05/30/2007  
| | Title: General Practitioner |
| Internship: | N/A |
| Residency: | Yale University Bridgeport Hospital  
| | Bridgeport, CT  
| | From: 07/01/2007  
| | To: 06/30/2009  
| | Specialty: Internal Medicine |
| Gap: | Relocating from Connecticut to Florida to start residency program  
| | From: 06/30/2009  
| | To: 07/01/2010 |
Residency: University of Miami Miller School of Medicine
Miami, FL
From: 07/01/2010
To: 06/30/2013
Specialty: Psychiatry

Fellowship: University of Miami Miller School of Medicine **Did not complete program**
Miami, FL
From: 07/01/2013
To: 06/30/2014
Specialty: Psychosomatic Medicine

Gap: On sabbatical leave to complete immigration paperwork
From: 06/30/2014
To: 06/08/2015

Hospital Affiliations/Work History:
Three Rivers Behavioral Health
West Columbia, SC
From: 06/08/2015
To: 12/03/2018
Specialty: Psychiatry

Ventre Medical Associates, LLC
Oakland Park, FL
From: 01/14/2019
To: Present
Title: Staff Psychiatrist

Broward Health Medical Center
Fort Lauderdale, FL
From: 04/24/2019
To: Present
Specialty: Psychiatry

Broward Health Imperial Point
Fort Lauderdale, FL
From: 04/24/2019
To: Present
Specialty: Psychiatry

Board Certification:
Board: American Board of Psychiatry and Neurology
Specialty: Psychiatry
Certification Date: 06/18/2017
MOC Expiration: 03/01/2020
Certification Expiration: N/A
Broward Health – Credentialing Abstract – Medical Staff Applicant

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<tr>
<th>Name:</th>
<th>Peter P Ventre MD</th>
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<td>Date of Birth:</td>
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<tr>
<td>Citizenship:</td>
<td>US</td>
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<tr>
<td>Primary Facility:</td>
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<td>Specialty(ies):</td>
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<td>Dept. at Primary Facility:</td>
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<td>Secondary Facility Depts.:</td>
<td>Medicine</td>
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<tr>
<td>Practice Name:</td>
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<tr>
<td>Website:</td>
<td><a href="http://www.ventremedical.com">www.ventremedical.com</a></td>
</tr>
<tr>
<td>Primary Address Information:</td>
<td>1400 East Oakland Park Boulevard, Suite 210, Oakland Park, FL 33334</td>
</tr>
<tr>
<td>Phone:</td>
<td>954-561-6222</td>
</tr>
<tr>
<td>Fax:</td>
<td>954-990-7650</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:Ashlay@ventremedical.com">Ashlay@ventremedical.com</a></td>
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<td>ECFMG:</td>
<td>Number: 0-639-436-1</td>
</tr>
<tr>
<td>Date Issued:</td>
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<td>Medical/Professional School:</td>
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<td>Santo Domingo, Dominican Republic</td>
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<td>To:</td>
<td>11/15/2001</td>
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<tr>
<td>Degree:</td>
<td>MD</td>
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<tr>
<td>Preparing for and taking the ECFMG and USMLE Exams. Volunteered services to the indigent community in Santo Domingo, Dominican Republic. Interviewing for Internship Training Programs, and moved to New York.</td>
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<td>Internship:</td>
<td>Cabrini Medical Center</td>
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<td>New York, NY</td>
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Peter P Ventre, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Hospital Affiliations/Work History:

Compass Health Systems
North Miami Beach, FL
From: 10/01/2008
To: 12/31/2010
Specialty: Psychiatry

Memorial Regional Hospital
Hollywood, FL
From: 02/25/2009
To: 08/24/2011
Specialty: Psychiatry

Atlantic Shores Hospital (facility closed)
Ft Lauderdale, FL
From: 04/22/2011
To: 01/16/2014
Specialty: Psychiatry

Broward Health Medical Center & Salah Foundation Children’s Hospital
Ft Lauderdale, FL
From: 06/24/2009
To: Present
Specialty: Psychiatry

University Hospital and Medical Center
Tamarac, FL
From: 06/25/2009
To: Present
Specialty: Psychiatry

Broward Health Imperial Point
Ft Lauderdale, FL
From: 10/29/2009
To: Present
Specialty: Psychiatry

Cleveland Clinic Florida
Weston, FL
From: 02/22/2018
To: Present
Specialty: Psychiatry

Memorial Pembroke Hospital
Pembroke Pines, FL
From: 10/28/2016
To: Present
Specialty: Psychiatry

Fort Lauderdale Behavioral Health Center (formerly Ft. Lauderdale Hospital)
From: 05/29/2017
To: Present
Specialty: Psychiatry

Board Certification:

Board: American Board of Psychiatry and Neurology
Specialty: Psychiatry
Certification Date: 06/04/2010
MOC Reverification Date: N/A
Certification Expiration: 12/31/2020

Peter P Ventre, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Michael D Williams DO

Date of Birth: 01/22/1984
Citizenship: US
Primary Facility: Broward Health North
Other Broward Health Facilities:
  Broward Health Coral Springs
  Broward Health Imperial Point
Specialty(ies): Infectious Disease
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: Medicine
Practice Name: Infectious Disease Consultants PA
Website: https://idccares.com/
Primary Address Information:
  2901 Coral Hills Drive
  Suite 220
  Coral Springs, FL 33065
  Phone: 954-345-0404
  Fax: 954-346-8315
  Email: maponte@idccares.com
ECFMG: N/A
Medical/Professional School: Nova Southeastern University
  Ft. Lauderdale, FL
  From: 08/02/2010
  To: 05/18/2014
  Degree: DO
Internship/Residency:
  Mount Sinai Medical Center
  Miami Beach, FL
  From: 07/01/2014
  To: 06/30/2017
  Specialty: Internal Medicine
Fellowship:
  Mount Sinai Beth Israel
  New York City, NY
  From: 07/01/2017
  To: 06/30/2019
  Specialty: Infectious Disease
Hospital Affiliations/Work History: N/A
Board Certification:
  Board: American Board of Internal Medicine
  Specialty: Infectious Disease
  Eligibility Date: 06/30/2019
  Eligibility Expiration: 06/30/2026
SUMMARY OF REQUEST

DATE: July 22, 2019

FACILITY: Broward Health Imperial Point

ITEM: Medical Staff Board Items

REASON: Approved recommendations as exhibited from the Medical Council of Broward Health Imperial Point.

COST: Not applicable

ADDITIONAL INFORMATION: None

LEGAL REVIEW: Not applicable

APPROVED: 

Gino Santoro 07/29/2019 07:21 Eastern Daylight

DATE: 7/22/2019

Netonda Reyes, CNO/COO

DATE: 

Andrew Ta 07/25/2019 18:37 Eastern Daylight
MEMORANDUM

TO:       Board of Commissioners

FROM:     Netonua Reyes, CNO/COO

DATE:     July 22, 2019

SUBJECT:  Medical Staff Board Items

The Medical Council at Broward Health Imperial Point, at its monthly meeting on July 16, 2019 approved the recommendations as exhibited for:

Medical Staff Changes and Additions
Medical Staff Reappointments

Allied Health Changes and Additions
Allied Health Reappointments

I, William Jensen, DO, Chief of Staff at Broward Health Imperial Point do hereby attest that all pertinent and required information has been received and verified for providers being submitted to the Board of Commissioners for approval.

Therefore, it is recommended that the Board of Commissioners approve these recommendations as submitted from the Medical Council at Broward Health Imperial Point.
OFFICE OF THE MEDICAL STAFF
William Jensen, DO
Chief of Staff
Joel Gellman, MD
Chairman, Department of Medicine
Chance Kaplan, MD
Vice Chief of Staff
Jonathan Levine, MD
Chairman, Department of Surgery
Howard Lewkowitz, MD
Past Chief of Staff
Sandeep Mendiratta, MD
Chairman, Department of Psychiatry
Richmond Estacio, MD
Secretary/Treasurer

BROWARD HEALTH IMPERIAL POINT
MEDICAL STAFF CHANGES AND ADDITIONS

Broward Health Medical Center
Broward Health Imperial Point
Broward Health North
Broward Health Coral Springs

The following Medical Staff Committees:
CREDENTIALS COMMITTEE: 7/8/2019 MEDICAL COUNCIL: 7/16/2019

Approved the following New Members – Medical Staff:
RECOMMENDED FOR MEDICAL STAFF MEMBERSHIP AND CLINICAL PRIVILEGES
Appointment Cycle: 7/31/2019 to 6/30/2021

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<tr>
<td>Yehuda Michelov, MD</td>
<td>Surgery</td>
<td>Orthopedic Surgery</td>
<td>BHCS</td>
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<tr>
<td>Sean Miller, MD</td>
<td>Medicine</td>
<td>Hospital Medicine</td>
<td>BHCS</td>
</tr>
<tr>
<td>Ian Morales, MD</td>
<td>Medicine</td>
<td>Pulmonary/ Critical Care Medicine</td>
<td>BHIP</td>
</tr>
<tr>
<td>Andres Morgado-Laureano, MD</td>
<td>Medicine</td>
<td>Radiology</td>
<td>BHMC</td>
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Approved the following New Members – Allied Health:

<table>
<thead>
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<th>Name</th>
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<th>Sponsor(s)</th>
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<td>Adam Polak, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>Cesar Carralero, DO</td>
</tr>
</tbody>
</table>

Accepted the following Addition of Privileges

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Requested Privileges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mazhar Majid, MD</td>
<td>Medicine</td>
<td>Cardiology</td>
<td>Interventional Cardiology</td>
</tr>
<tr>
<td>Gayan Poovendran, MD</td>
<td>Medicine</td>
<td>Sports Medicine</td>
<td>Coolie Procedure – Knee only</td>
</tr>
</tbody>
</table>

Accepted the following Updated Privileges

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Privileges</th>
<th>Updated Privileges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ron Arison, MD</td>
<td>Medicine</td>
<td>Undersea &amp; Hyperbaric Medicine</td>
<td>Completed updated delineation of privileges</td>
</tr>
<tr>
<td>Francisco Bermudez, MD</td>
<td>Medicine</td>
<td>Undersea &amp; Hyperbaric Medicine</td>
<td>Completed updated delineation of privileges</td>
</tr>
<tr>
<td>Juan Bravo, MD</td>
<td>Medicine</td>
<td>Undersea &amp; Hyperbaric Medicine</td>
<td>Completed updated delineation of privileges</td>
</tr>
<tr>
<td>Julio Montejo, DO</td>
<td>Medicine</td>
<td>Undersea &amp; Hyperbaric Medicine</td>
<td>Completed updated delineation of privileges</td>
</tr>
</tbody>
</table>
Approved the following Medical Staff Reappointments and Status Changes:

**RECOMMENDED WITH NO CHANGE IN STATUS – 2 YEARS**
Reappointment Cycle: 7/31/2019 to 6/30/2021

<table>
<thead>
<tr>
<th>Physician</th>
<th>Department</th>
<th>Specialty</th>
<th>Current Status</th>
<th>Recommended Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neil Gersham, MD</td>
<td>Medicine</td>
<td>Allergy/Immunology</td>
<td>Active</td>
<td>Consulting</td>
</tr>
<tr>
<td>Kevin Kessler, MD</td>
<td>Surgery</td>
<td>Orthopedic Surgery</td>
<td>Active</td>
<td>Consulting</td>
</tr>
<tr>
<td>Sergio Lenchig, MD</td>
<td>Surgery</td>
<td>Pain Medicine / Physical Medicine</td>
<td>Active</td>
<td>Consulting</td>
</tr>
<tr>
<td></td>
<td></td>
<td>and Rehab</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nirmal Nathan, MD</td>
<td>Surgery</td>
<td>Plastic Surgery</td>
<td>Active</td>
<td></td>
</tr>
<tr>
<td>Wisam Zakko, MD</td>
<td>Medicine</td>
<td>Gastroenterology</td>
<td>Active</td>
<td></td>
</tr>
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**RECOMMENDED WITH CHANGE IN STATUS – 2 YEARS**
Reappointment Cycle: 7/31/2019 to 5/31/2021

<table>
<thead>
<tr>
<th>Physician</th>
<th>Department</th>
<th>Specialty/</th>
<th>Current Status</th>
<th>Recommended Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>William Dickerson, MD</td>
<td>Medicine</td>
<td>Gastroenterology / Internal Medicine</td>
<td>Courtesy</td>
<td>Consulting</td>
</tr>
<tr>
<td>Mehmet Hegpur, MD</td>
<td>Medicine</td>
<td>Hematology / Oncology</td>
<td>Provisional II</td>
<td>Consulting</td>
</tr>
<tr>
<td>Betina Louis, MD</td>
<td>Medicine</td>
<td>Hospital Medicine</td>
<td>Provisional</td>
<td>Courtesy</td>
</tr>
<tr>
<td>Neil Miransky, DO</td>
<td>Medicine</td>
<td>Palliative Care / Family Medicine</td>
<td>Active</td>
<td>Consulting</td>
</tr>
<tr>
<td>Michael Perez, MD</td>
<td>Surgery</td>
<td>General Surgery / DaVinci</td>
<td>Courtesy</td>
<td>Consulting</td>
</tr>
<tr>
<td>Ashneal Sharma, DO</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Provisional</td>
<td>Active</td>
</tr>
<tr>
<td>Jason Walters, MD</td>
<td>Surgery</td>
<td>Orthopedic Surgery</td>
<td>Courtesy</td>
<td>Active</td>
</tr>
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**RECOMMENDED WITH CHANGE IN STATUS – 1 YEAR**
Reappointment Cycle: 7/31/2019 to 6/30/2020

<table>
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<th>Department</th>
<th>Specialty</th>
<th>Current Status</th>
<th>Recommended Status</th>
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<tbody>
<tr>
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Approved the following AHP Reappointments and Status Changes:

**AHP RECOMMENDED WITH NO CHANGE IN STATUS – 2 YEARS**
Reappointment Cycle: 7/31/2019 to 6/30/2021

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty/</th>
<th>Sponsor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christine Collins, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Robert Baylis, MD</td>
</tr>
<tr>
<td>Yana Dodea, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Ron Arison, MD; Alexander Parr, MD; Francisco Bermudez, MD</td>
</tr>
<tr>
<td>Stephen Fender, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Marc L. Ebersberger, MD; Ayisha Livingstone, MD</td>
</tr>
<tr>
<td>Amanda Minnocci, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>Cesar Carralero, DO</td>
</tr>
<tr>
<td>Sean Joseph Norden, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Manuel Longo, MD</td>
</tr>
<tr>
<td>Nicole Puleo, APRN</td>
<td>Surgery</td>
<td>Nurse Practitioner</td>
<td>John Coats, MD; Matthew Moore, MD; Luis Romero, MD</td>
</tr>
<tr>
<td>Mark Ramos, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>Bharat Gupta, MD</td>
</tr>
<tr>
<td>Debralee Ruocco, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>Cesar Carralero, DO</td>
</tr>
<tr>
<td>Erica Sahlgren, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Jason Walters, MD; Ron Arison, MD; Alexander Parr, MD</td>
</tr>
<tr>
<td>Ashley (Kleinkauf) Wherry, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Manuel Longo, MD</td>
</tr>
</tbody>
</table>
Accepted the following Resignations – Medical Staff:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Privileges</th>
<th>Status</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cesar Fernandez-Pedemonte, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Active</td>
<td>Voluntary – Failure to reapply</td>
</tr>
<tr>
<td>Luis Gonzalez, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Provisional II</td>
<td>Voluntary – Failure to reapply</td>
</tr>
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</table>

Accepted the following Resignations – Allied Health Professionals:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Privileges</th>
<th>Status</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jennifer Alexander, PA</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>AHP</td>
<td>Voluntary – Practice Change</td>
</tr>
<tr>
<td>Kevin Lee Pittman, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>AHP</td>
<td>Voluntary – Contract Term</td>
</tr>
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</table>

Accepted the following Change of Sponsor(s) – Allied Health

<table>
<thead>
<tr>
<th>Allied Health Provider</th>
<th>Department</th>
<th>Specialty</th>
<th>Change of Sponsor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ophelia Dacosta-Green, APRN</td>
<td>Surgery</td>
<td>Nurse Practitioner</td>
<td>Add: Kush Tripathi, MD</td>
</tr>
<tr>
<td>Yandy Palenzuela-Rodriguez, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>Delete: Stephen Renae, MD, Add: Samer Diab-Agha, MD</td>
</tr>
</tbody>
</table>

I, William Jensen, DO, Chief of Staff at Broward Health Imperial Point, do hereby attest that all pertinent and required information has been received and verified for providers being submitted to the Board of Commissioners for approval.

William Jensen, DO, Chief of Staff  
Netonua Reyes, CNO/COO  
Gino Santorio, President/CEO  

Date: 7/22/2019  
Date: 7/22/2019  
Date: 

Gino Santorio 07/29/2019 16:09 Eastern Daylight
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Yehuda Michelov, D.O.

Date of Birth: 07/04/1974

Citizenship: US

Primary Facility: Broward Health Coral Springs

Other Broward Health Facilities:

Specialty(ies): Orthopaedic Surgery

Dept. at Primary Facility: Surgery

Secondary Facility Depts.:

Practice Name: Top Tier Orthopedics and Center for Joint Replacement

Primary Address Information: 1100 South State Road 7
Suite 201
Margate, FL 33068
Phone: 954-329-9166

ECFMG: N/A

Medical/Professional School: New York College Of Osteopathic Medicine
New York Institute Of Technology
Old Westbury, NY
From: 07/01/2005
To: 05/17/2009
Degree: DO

Internship:

Rowan University School of Osteopathic Medicine
Stratford, NJ
From: 06/15/2009
To: 06/21/2010
Specialty: Chief Intern

Residency:

Rowan University School of Osteopathic Medicine
Stratford, NJ
From: 06/15/2009
To: 06/30/2014
Specialty: Orthopedic Surgery

Fellowship:

CAMC Health Education and Research Institute
Charleston, WV
From: 08/01/2014
To: 07/31/2015
Specialty: Orthopedic Trauma & Total Joint Replacement

Hospital Affiliations/Work History:

NYU Lutheran Medical Center
Brooklyn, NY
From: 08/06/2015
To: 08/17/2016
Title: Orthopedic Surgeon

Community Orthopedics and Center for Joint Replacement Co.
Margate, FL
From: 08/24/2016
To: Present
Title: Orthopedic Surgeon
Broward Health – Credentialing Abstract – Medical Staff Applicant

Westside Regional Medical Center (HCA)
Plantation, FL
From: 09/01/2016
To: Present
Specialty: Orthopedic Surgery

University Hospital and Medical Center (HCA)
Tamarac, FL
From: 09/15/2016
To: Present
Specialty: Orthopedic Surgery

Northwest Medical Center (HCA)
Margate, FL
From: 09/15/2016
To: Present
Specialty: Orthopedic Surgery

Plantation General Hospital (HCA)
Plantation, FL
From: 10/03/2016
To: Present
Specialty: Orthopedic Surgery

Outpatient Surgical Services-Plantation
Plantation, FL
From: 01/16/2019
To: Present
Specialty: Orthopedic Surgery

Board Certification:
Board: American Osteopathic Board of Orthopedic Surgery
Specialty: Orthopedic Surgery
Certification Date: 05/07/2018
Certification Expiration: 12/31/2028

Yehuda Michelov, D.O.
# Broward Health – Credentialing Abstract – Medical Staff Applicant

**Name:** Sean A Miller, MD  
**Date of Birth:** 11/11/1969  
**Citizenship:** US  
**Primary Facility:** Broward Health Coral Springs  
**Other Broward Health Facilities:** Broward Health Imperial Point  
**Specialty(ies):** Internal Medicine, Hospital Medicine  
**Dept. at Primary Facility:** Medicine  
**Secondary Facility Depts.:** Medicine  
**Practice Name:** Schumacher Clinical Partners  
**Primary Address Information:** 3000 Coral Hills Drive  
Coral Springs, FL 33065  
Phone: 954-344-3296  
Fax: 954-796-3922  
Email: karen_windhorst@schumacherclinical.com  
**Medical/Professional School:** University of Cincinnati College of Medicine  
Cincinnati, OH  
From: 09/01/1994  
To: 06/01/1998  
Degree: MD  
**Internship:** N/A  
**Residency:** University Hospital of Cincinnati  
Cincinnati, OH  
From: 07/01/1998  
To: 06/30/2001  
Specialty: Internal Medicine  
**Fellowship:** N/A  
**Hospital Affiliations/Work History:**  
University Hospital of Cincinnati  
Cincinnati, OH  
From: 07/25/2000  
To: 07/01/2003  
Title: Internal Medicine  
Select Hospital formerly known as A2 Healthcare **Unable to Verify-no records on file**  
University Hospital of Cincinnati, OH  
From: 07/01/2003  
To: 03/31/2005  
Title: Hospital Medicine  
Doctors’ Urgent Care / AmCare  
Milford, OH  
From: 04/13/2005  
To: 07/06/2008  
Title: Faculty
**Hospital Affiliations/ Work History (continued):**

<table>
<thead>
<tr>
<th>Hospital/Location</th>
<th>From</th>
<th>To</th>
<th>Specialty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mercy Mt. Airy Hospital, Cincinnati, OH</td>
<td>11/29/2007</td>
<td>10/31/2009</td>
<td>Internal Medicine</td>
</tr>
<tr>
<td>Mercy Health Partners, Cincinnati, OH</td>
<td>05/07/2008</td>
<td>01/29/2009</td>
<td>Internal Medicine</td>
</tr>
<tr>
<td>Mercy Hospital Fairfield, Fairfield, OH</td>
<td>01/27/2009</td>
<td>07/20/2010</td>
<td>Internal Medicine</td>
</tr>
<tr>
<td>Jupiter Medical Center (EM), Jupiter, FL</td>
<td>04/01/2010</td>
<td>12/06/2018</td>
<td>Internal Medicine</td>
</tr>
<tr>
<td>Martin Memorial Health Systems, Inc., Stuart, FL</td>
<td>07/26/2017</td>
<td>Present</td>
<td>Hospital Medicine</td>
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</table>

**Board Certification:**

<table>
<thead>
<tr>
<th>Board</th>
<th>Specialty</th>
<th>Certification Date</th>
<th>Certification Expiration</th>
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</thead>
<tbody>
<tr>
<td>American Board of Internal Medicine</td>
<td>Internal Medicine</td>
<td>09/01/2001</td>
<td>12/31/2021</td>
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</tbody>
</table>

Sean A Miller, MD
Name: Ian J Morales MD

Date of Birth: 07/07/1970

Citizenship: US

Primary Facility: Broward Health Imperial Point

Other Broward Health Facilities: None

Specialties: Pulmonary Critical Care Medicine
Internal Medicine

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: None

Practice Name: George P. Azar, Jr. MD PA
Website: N/A

Primary Address Information: 5333 N Dixie Highway
Suite 201
Oakland Park, FL 33334
Phone: 954-491-3440
Fax: 954-491-8510
Email: ian770@hotmail.com

ECFMG: Number: 0-554-757-5
Date Issued: 10/29/1996

Medical/Professional School: Universidad Nacional Autonomo De Honduras
Tegucigalpa, Honduras
From: 07/01/1987
To: 11/01/1995
Degree: MD

Gaps: Enrolled in USMLE Preparation Course, and went on vacation.
From: 11/02/1995
To: 06/30/1997

Residency: University of Florida
Jacksonville, FL
From: 07/01/1997
To: 06/30/2000
Specialty: Internal Medicine

Fellowship: Mayo Clinic
Rochester, MN
From: 07/01/2000
To: 06/30/2003
Specialty: Pulmonary Disease/Critical Care

Ian J Morales, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Hospital Affiliations/ Work History:

Cookeville Regional Medical Center
Cookeville, TN
From: 07/01/2003
To: 06/01/2004
Specialty: Pulmonary Disease/Critical Care

Nashville General Hospital
Nashville, TN
From: 06/01/2004
To: 07/31/2006
Specialty: Pulmonary Disease/Critical Care

University of Miami Hospital
Miami, FL
From: 08/01/2006
To: 07/01/2009
Specialty: Pulmonary Disease/Critical Care

Palms West Hospital
Loxahatchee, FL
From: 02/06/2007
To: 07/29/2009
Specialty: Critical Care Medicine

JFK Medical Center (HCA)
Atlantis, FL
From: 03/29/2007
To: 02/28/2010
Specialty: Critical Care Medicine

Kendall Regional Medical Center (HCA)
Miami, FL
From: 06/27/2007
To: 10/01/2014
Specialty: Critical Care Medicine

Aventura Hospital and Medical Center (HCA)
Aventura, FL
From: 04/17/2008
To: 10/30/2008
Specialty: Critical Care Medicine

Palmetto General Hospital (Tenet)
Hialeah, FL
From: 09/25/2008
To: 09/30/2011
Specialty: Pulmonary Disease/Critical Care

Holy Cross Hospital
Fort Lauderdale, FL
From: 08/17/2010
To: 10/17/2017
Specialty: Internal Medicine/Pulmonary Disease

Westside Regional Medical Center (HCA)
Plantation, FL
From: 09/23/2010
To: 08/30/2012
Specialty: Pulmonary Disease

Ian J Morales, MD
| **Hospital Affiliations/ Work History (continued):** | **Memorial Hospital West**  
**Pembroke Pines, FL**  
From: 10/27/2010  
To: 01/29/2014  
Specialty: Pulmonary Disease |
| --- | --- |
|  | **Memorial Hospital Miramar**  
**Miramar, FL**  
From: 10/27/2010  
To: 09/24/2014  
Specialty: Pulmonary Disease |
|  | **Memorial Hospital Pembroke**  
**Pembroke Pines, FL**  
From: 10/27/2010  
To: 09/24/2014  
Specialty: Pulmonary Disease |
|  | **Plantation General Hospital (HCA)**  
**Plantation, FL**  
From: 12/15/2010  
To: 08/21/2013  
Specialty: Critical Care Medicine |
|  | **Broward Health Medical Center & Chris Evert Children’s Hospital**  
**Fort Lauderdale, FL**  
From: 08/31/2011  
To: 02/28/2018  
Specialty: Critical Care Medicine |
|  | **Sister Emmanuel Hospital**  
**Miami, FL**  
From: 03/06/2012  
To: 12/01/2018  
Specialty: Critical Care Medicine |
|  | **South Miami Hospital**  
**South Miami, FL**  
From: 06/30/2014  
To: Present  
Specialty: Critical Care Medicine |
|  | **St. Mary’s Medical Center**  
**West Palm Beach, FL**  
From: 09/15/2015  
To: 06/20/2017  
Specialty: Critical Care Medicine |
|  | **West Palm Hospital**  
**West Palm Beach, FL**  
From: 10/28/2015  
To: 03/31/2016  
Specialty: Internal Medicine/Critical Care Medicine/Pulmonary Disease |
|  | **Westside Regional Medical Center**  
**Plantation, FL**  
From: 11/05/2015  
To: 10/05/2017  
Specialty: Internal Medicine/Pulmonary Disease |

*Ian J Morales, MD*
Broward Health – Credentialing Abstract – Medical Staff Applicant

Capital Regional Medical Center
Tallahassee, FL
From: 11/17/2015
To: 09/14/2017
Specialty: Internal Medicine/Critical Care Medicine

Good Samaritan Medical Center
West Palm Beach, FL
From: 12/23/2015
To: 06/27/2017
Specialty: Pulmonary Disease

Mariners Hospital
Tavernier, FL
From: 11/18/2016
To: Present
Specialty: Pulmonary Disease

West Kendall Baptist Hospital
Miami, FL
From: 12/18/2016
To: Present
Specialty: Pulmonary Disease

Baptist Hospital of Miami
Miami, FL
From: 12/08/2016
To: Present
Specialty: Pulmonary Disease

Homestead Hospital
Homestead, FL
From: 12/12/2016
To: Present
Specialty: Pulmonary Disease

Doctors Hospital
Miami, FL
From: 12/15/2016
To: Present
Specialty: Pulmonary Disease

Board Certification:
Board: American Board of Internal Medicine
Specialty: Internal Medicine
Certification Date: 08/22/2000
MOC Reverification: N/A
Certification Expiration: 12/31/2020

Board: American Board of Internal Medicine
Specialty: Critical Care Medicine
Certification Date: 11/09/2011
MOC Reverification: N/A
Certification Expiration: 12/31/2021

Board: American Board of Internal Medicine
Specialty: Pulmonary Disease
Certification Date: 11/05/2003
MOC Reverification: N/A
Certification Expiration: 12/31/2023

Ian J Morales, MD
**Broward Health – Credentialing Abstract – Medical Staff Applicant**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Andres Morgado-Laureano MD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth:</td>
<td>05/02/1986</td>
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<tr>
<td>Citizenship:</td>
<td>US</td>
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<tr>
<td>Primary Facility:</td>
<td>Broward Health Medical Center</td>
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<td>Other Broward Health Facilities:</td>
<td>Broward Health Coral Springs</td>
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<td></td>
<td>Broward Health Imperial Point</td>
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<td></td>
<td>Broward Health North</td>
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<tr>
<td>Specialty(ies):</td>
<td>Radiology</td>
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<td>Dept. at Primary Facility:</td>
<td>Radiology</td>
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<tr>
<td>Secondary Facility Depts.:</td>
<td>Radiology, Medicine</td>
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<tr>
<td>Practice Name:</td>
<td>North Broward Radiologists PA</td>
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<tr>
<td>Website:</td>
<td><a href="https://nbradiologists.com/">https://nbradiologists.com/</a></td>
</tr>
<tr>
<td>Primary Address Information:</td>
<td>1801 South Perimeter Road, Suite 180, Fort Lauderdale, FL 33309</td>
</tr>
<tr>
<td></td>
<td>Phone: 954-839-8080</td>
</tr>
<tr>
<td></td>
<td>Fax: 954-839-8081</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:ncuestas@nbradiologists.com">ncuestas@nbradiologists.com</a></td>
</tr>
<tr>
<td>ECFMG:</td>
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</tr>
<tr>
<td>Medical/Professional School:</td>
<td>University of Puerto Rico School of Medicine, San Juan, PR</td>
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<tr>
<td></td>
<td>From: 08/01/2009</td>
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<td></td>
<td>To: 06/30/2013</td>
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<td></td>
<td>Degree: MD</td>
</tr>
<tr>
<td>Internship:</td>
<td>San Juan City Hospital, San Juan, PR</td>
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<tr>
<td></td>
<td>From: 07/01/2013</td>
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<td>To: 06/30/2014</td>
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<tr>
<td>Residency:</td>
<td>University of Miami Miller School of Medicine, Miami, FL</td>
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<tr>
<td></td>
<td>From: 07/01/2014</td>
</tr>
<tr>
<td></td>
<td>To: 06/30/2018</td>
</tr>
<tr>
<td></td>
<td>Specialty: Radiology</td>
</tr>
<tr>
<td>Fellowship:</td>
<td>University of Miami Miller School of Medicine, Miami, FL</td>
</tr>
<tr>
<td></td>
<td>From: 07/01/2018</td>
</tr>
<tr>
<td></td>
<td>To: 06/30/2019</td>
</tr>
<tr>
<td></td>
<td>Specialty: Vascular and Interventional Radiology</td>
</tr>
<tr>
<td>Hospital Affiliations/Work History:</td>
<td>N/A</td>
</tr>
<tr>
<td>Board Certification:</td>
<td>American Board of Radiology</td>
</tr>
<tr>
<td></td>
<td>Interventional Radiology and Diagnostic Radiology</td>
</tr>
<tr>
<td></td>
<td>Eligibility Date: 06/30/2019</td>
</tr>
<tr>
<td></td>
<td>Eligibility Expiration: 06/30/2026</td>
</tr>
</tbody>
</table>

Andres Morgado-Laureano, MD
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Adam Polak APRN

Date of Birth: 04/04/1983
Citizenship: US
Primary Facility: Broward Health Imperial Point
Other Broward Health Facilities:
  - Broward Health Coral Springs
  - Broward Health North
Specialty: Nurse Practitioner
Dept. at Primary Facility: Medicine
Secondary Facility Depts.:
  - Medicine
  - Emergency Medicine
Physician Sponsorship:
  - Evan L Boyar, MD
  - Cesar W. Carralero, DO
  - Gary Lai, DO
Practice Name: Envision Physician Services
Website: www.envision.com
Primary Address Information:
  - Emergency Department
  - 6401 N. Federal Highway
  - Fort Lauderdale, FL 33308
  - Phone: 954-776-8610
  - Fax: 954-776-8521
  - Email: Kim.Durcan@envisionhealth.com
Professional School:
  - Simmons College
  - Boston, MA
  - From: 03/17/2014
  - To: 08/31/2016
  - Degree: Masters
  - Major: Family Nurse Practitioner
Gap: Applied for privileges and awaited the credentialing process.
  - From: 09/01/2016
  - To: 11/08/2016
Hospital Affiliations/Work History:
  - Northwest Medical Center (HCA)
    - Margate, FL
    - From: 11/09/2016
    - To: Present
    - Specialty: Advanced Practice Registered Nurse
Board Certification:
  - Board: American Academy of Nurse Practitioners
  - Specialty: Family Nurse Practitioner (FNP)
  - Certification Date: 09/19/2016
  - Certification Expiration: 09/18/2021

Adam Polak, APRN
SUMMARY OF REQUEST

DATE: July 31, 2019

FACILITY: Broward Health Coral Springs

ITEM: Medical Staff Board Items

REASON: Approved Recommendations as Exhibited From the Medical Executive Committee of Broward Health Coral Springs

COST: Not applicable

ADDITIONAL INFORMATION: See Attached

SUBMITTED FOR LEGAL COUNSEL REVIEW: Not applicable

APPROVED:

Gino Santorio 07/29/2019 07:21 Eastern Daylight
President/CEO

Andrew Ta 07/25/2019 18:38 Eastern Daylight
Chief Medical Officer

Jared Smith 7/22/19
CEO
MEMORANDUM

TO: Board of Commissioners

FROM: Jared Smith, CEO

DATE: July 31, 2019

SUBJECT: Medical Staff Board Items

The Medical Executive Committee at Broward Health Coral Springs, at its monthly meeting on July 16, 2019, approved the recommendations as exhibited for the following:

Medical Staff Changes and Additions
Medical Staff Reappointments

Allied Health Changes and Additions
Allied Health Reappointments

I, Israel Penate, MD, Chief of Staff at Broward Health Coral Springs, do hereby attest that all pertinent and required information has been received and verified for providers being submitted to the Board of Commissioners for approval.

Therefore, it is requested that the Board of Commissioners approve these recommendations as submitted from the Medical Executive Committee at Broward Health Coral Springs.
BROWARD HEALTH CORAL SPRINGS
MEDICAL STAFF CHANGES AND ADDITIONS

Broward Health Medical Center
Broward Health Imperial Point

Broward Health North

Broward Health Coral Springs

The following Medical Staff Committees:

CREDENTIALS COMMITTEE: July 11, 2019
MEDICAL EXECUTIVE COMMITTEE: July 16, 2019

Approved MEC New Business: None

Approved the following New Members - Medical Staff:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Primary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abdullah, Naaman, MD</td>
<td>Surgery</td>
<td>Cardiovascular / Thoracic Surgery</td>
<td>BHMC</td>
</tr>
<tr>
<td>Bjekic, Gordana, MD</td>
<td>Medicine</td>
<td>Pulmonary Critical Care; Sedation</td>
<td>BHCS</td>
</tr>
<tr>
<td>Blanchard, Lucia, DO</td>
<td>Medicine</td>
<td>Cardiovascular Disease</td>
<td>BHCS</td>
</tr>
<tr>
<td>Koller, Darwin, MD</td>
<td>Pediatrics</td>
<td>Pediatric Emergency Medicine; Sedation</td>
<td>BHMC</td>
</tr>
<tr>
<td>Morgado-Laureano, Andres, MD</td>
<td>Medicine</td>
<td>Radiology; Sedation</td>
<td>BHMC</td>
</tr>
<tr>
<td>Riaz, Hasan, MD</td>
<td>Medicine</td>
<td>Critical Care; Sedation</td>
<td>BHCS</td>
</tr>
<tr>
<td>Ryschon, Timothy, MD</td>
<td>Pediatrics</td>
<td>Pediatric Emergency Medicine; Sedation</td>
<td>BHMC</td>
</tr>
<tr>
<td>Williams, Michael, DO</td>
<td>Medicine</td>
<td>Infectious Disease</td>
<td>BHN</td>
</tr>
</tbody>
</table>

Approved the following New Members - Allied Health:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Sponsor</th>
<th>Primary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crawford, Charleye, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner (Neuro)</td>
<td>Sonia Kalirao, MD</td>
<td>BHCS</td>
</tr>
<tr>
<td>Naissance, Whidlet, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner (Internal Medicine)</td>
<td>Kathleen Joseph-McBean, MD</td>
<td>BHCS</td>
</tr>
<tr>
<td>Polak, Adam, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner (Emergency Med)</td>
<td>Gary Lai, DO</td>
<td>BHIP</td>
</tr>
</tbody>
</table>

Accepted the following Addition of Privileges:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Requested Privilege(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gabai Hernandez, Heather, MD</td>
<td>OBGYN</td>
<td>Obstetrics / Gynecology</td>
<td>DaVinci Surgical System</td>
</tr>
<tr>
<td>Silva, Barbara, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner (Critical Care)</td>
<td>Advanced Registered Nurse Practitioner – Critical Care</td>
</tr>
</tbody>
</table>
Accepted the following Status Changes:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Current Status</th>
<th>Status Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Garcia, Enzo, MD</td>
<td>Pediatrics</td>
<td>Pediatric Critical Care</td>
<td>Consulting</td>
<td>Courtesy</td>
</tr>
<tr>
<td>Pann, Melvin, MD</td>
<td>Surgery</td>
<td>General Surgery</td>
<td>Courtesy</td>
<td>Honorary</td>
</tr>
<tr>
<td>Teman, Allen, MD</td>
<td>Medicine</td>
<td>Neurology</td>
<td>Provisional</td>
<td>Honorary</td>
</tr>
</tbody>
</table>

Approved the following Medical Staff Reappointments and Status Changes:

**RECOMMENDED WITH NO CHANGE IN STATUS – 2 YEARS**

Reappointment Cycle: 07/31/2019 – 07/30/2021

<table>
<thead>
<tr>
<th>Physician</th>
<th>Department</th>
<th>Specialty</th>
<th>Recommended Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Bender, Kevin, MD</td>
<td>Medicine</td>
<td>Cardiovascular Disease</td>
<td>Active</td>
</tr>
<tr>
<td>2. Chandran, Kutty, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Active</td>
</tr>
<tr>
<td>3. Chen, Kir-Wei, MD</td>
<td>OBGYN</td>
<td>Obstetrics / Gynecology; Robotic Surgery</td>
<td>Active</td>
</tr>
<tr>
<td>4. Christopher, Kurt, MD</td>
<td>OBGYN</td>
<td>Obstetrics / Gynecology</td>
<td>Courtesy</td>
</tr>
<tr>
<td>5. Desouza, Allison, MD</td>
<td>OBGYN</td>
<td>Obstetrics / Gynecology</td>
<td>Active</td>
</tr>
<tr>
<td>6. Furia, Allen, MD</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Active</td>
</tr>
<tr>
<td>7. Gandhi, Chintan, MD</td>
<td>Medicine</td>
<td>Hematology / Oncology</td>
<td>Active</td>
</tr>
<tr>
<td>8. Gershom, Neil, MD</td>
<td>Medicine</td>
<td>Allergy / Immunology</td>
<td>Consulting</td>
</tr>
<tr>
<td>9. Jacob, Radu, MD</td>
<td>Medicine</td>
<td>Nephrology</td>
<td>Courtesy</td>
</tr>
<tr>
<td>10. Lief, Matthew, DO</td>
<td>Surgery</td>
<td>Urology</td>
<td>Active</td>
</tr>
<tr>
<td>11. Madiefsky, Lawrence, DPM</td>
<td>Surgery</td>
<td>Podiatry</td>
<td>Active</td>
</tr>
<tr>
<td>12. Miloscia, John, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Active</td>
</tr>
<tr>
<td>13. Pearl, Robert, DO</td>
<td>OBGYN</td>
<td>Obstetrics / Gynecology</td>
<td>Active</td>
</tr>
<tr>
<td>14. Reynolds, Ivonne, DO</td>
<td>OBGYN</td>
<td>Obstetrics / Gynecology; Robotic Surgery</td>
<td>Active</td>
</tr>
<tr>
<td>15. Yates, Essie, MD</td>
<td>Surgery</td>
<td>Plastic Surgery</td>
<td>Courtesy</td>
</tr>
</tbody>
</table>

**RECOMMENDED WITH CHANGES IN STATUS – 2 YEARS**

Reappointment Cycle: 07/31/2019 – 07/30/2021

<table>
<thead>
<tr>
<th>Physician</th>
<th>Department</th>
<th>Specialty</th>
<th>Current Status</th>
<th>Recommended Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Arbeitman, Lori, MD</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Courtesy</td>
<td>Active</td>
</tr>
<tr>
<td>2. Averbuch, Philip, MD</td>
<td>Surgery</td>
<td>Orthopaedic Surgery</td>
<td>Courtesy</td>
<td>Affiliate</td>
</tr>
<tr>
<td>3. Epstein, Herman, MD</td>
<td>OBGYN</td>
<td>Obstetrics / Gynecology; Robotic Surgery</td>
<td>Active</td>
<td>Courtesy</td>
</tr>
<tr>
<td>4. Kalia, Jessica, DO</td>
<td>Pediatrics</td>
<td>Neonatology</td>
<td>Provisional</td>
<td>Active</td>
</tr>
<tr>
<td>5. Leung, Jim, MD</td>
<td>Medicine</td>
<td>Family Medicine</td>
<td>Active</td>
<td>Affiliate</td>
</tr>
<tr>
<td>6. Liang, Jennifer, MD</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Active</td>
<td>Courtesy</td>
</tr>
<tr>
<td>7. Lin, Ridwan, MD</td>
<td>Medicine</td>
<td>Neurology</td>
<td>Courtesy</td>
<td>Consulting</td>
</tr>
<tr>
<td>8. Louis, Betina, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Provisional</td>
<td>Active</td>
</tr>
<tr>
<td>9. Mazzurco, Jamie, DO</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Provisional</td>
<td>Courtesy</td>
</tr>
<tr>
<td>10. Polakoff, Richard, MD</td>
<td>Medicine</td>
<td>Cardiovascular Disease</td>
<td>Active</td>
<td>Courtesy</td>
</tr>
<tr>
<td>11. Salamon, Joel, MD</td>
<td>Surgery</td>
<td>Pain Management</td>
<td>Courtesy</td>
<td>Consulting</td>
</tr>
<tr>
<td>12. Segui, Maikel, DDS</td>
<td>Surgery</td>
<td>Oral / Maxillofacial</td>
<td>Active</td>
<td>Courtesy</td>
</tr>
<tr>
<td>13. Weiner, Douglas, MD</td>
<td>Medicine</td>
<td>Pulmonary Critical Care</td>
<td>Active</td>
<td>Courtesy</td>
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</table>
RECOMMENDED WITH CHANGE IN STATUS – 1 YEAR
Reappointment Cycle: 07/31/2019 – 07/30/2020

<table>
<thead>
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<th>Physician</th>
<th>Department</th>
<th>Specialty</th>
<th>Current Status</th>
<th>Recommended Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Moore, Ronald, MD</td>
<td>Surgery</td>
<td>Bariatric Surgery; Robotic Surgery; Sedation</td>
<td>Provisional</td>
<td>Provisional II</td>
</tr>
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</table>

Approved the following AHP Reappointments and Status Changes:

AHP RECOMMENDED WITH NO CHANGE IN STATUS – 2 YEARS
Reappointment Cycle 07/31/2019 – 07/30/2021

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Sponsor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Dodea, Yana, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant (Surgery)</td>
<td>Joseph Corallo, MD; Herman Epstein, MD; Bernard Zaragoza, MD</td>
</tr>
<tr>
<td>2. Fender, Stephen, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant (Ortho)</td>
<td>Marc Ebersberger, MD</td>
</tr>
<tr>
<td>4. Norden, Sean CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Gladys Cardenas, DO</td>
</tr>
<tr>
<td>5. Puleo, Nicole, APRN</td>
<td>Surgery</td>
<td>Nurse Practitioner (Neuro Surgery)</td>
<td>Matthew Moore, MD; John Coats, MD; Luis Romero, MD</td>
</tr>
<tr>
<td>6. Sahlgren, Erica, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant (Ortho)</td>
<td>Richard Berkowitz, MD</td>
</tr>
<tr>
<td>7. Wherry, Ashley, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Gladys Cardenas, DO</td>
</tr>
</tbody>
</table>

Accepted the following Resignations – Medical Staff:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Status</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Fisch, Amy, DO</td>
<td>Surgery</td>
<td>Anesthesiology</td>
<td>Active</td>
<td>Voluntary Resignation (contract change)</td>
</tr>
<tr>
<td>2. Raskin, David, MD</td>
<td>Medicine</td>
<td>Hematology / Oncology</td>
<td>Courtesy</td>
<td>Voluntary Resignation (no explanation provided)</td>
</tr>
<tr>
<td>3. Spires, Tina, DO</td>
<td>Medicine</td>
<td>Emergency Medicine</td>
<td>Active</td>
<td>Voluntary Resignation (provider’s choice)</td>
</tr>
<tr>
<td>4. Taveras-Uceta, Dulce, MD</td>
<td>Medicine</td>
<td>Wound Care</td>
<td>Courtesy</td>
<td>Voluntary Resignation (practice change)</td>
</tr>
<tr>
<td>5. Vilasuso, Javier, MD</td>
<td>Surgery</td>
<td>Pain Management</td>
<td>Provisional</td>
<td>Voluntary Resignation (failure to meet MS Bylaws)</td>
</tr>
<tr>
<td>6. Walters, Jason, MD</td>
<td>Surgery</td>
<td>Orthopaedic Surgery; Orthopaedic Sports Medicine</td>
<td>Courtesy</td>
<td>Voluntary Resignation (practice change)</td>
</tr>
</tbody>
</table>
### Accepted the following Resignations – Allied Health Professional:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Sponsor(s)</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Alexander, Jennifer, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Marc Ebersberger, MD</td>
<td>Voluntary Resignation (practice change)</td>
</tr>
<tr>
<td>2. Glaze, Jeimy, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Christopher Hollowell, MD; Michael Tyler, MD; Mini Varghese, MD; Michael Zahalsky, MD</td>
<td>Voluntary Resignation (relocation)</td>
</tr>
<tr>
<td>3. Grenier, Jocelyn, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Bernard Zaragoza, MD</td>
<td>Voluntary Resignation (relocation)</td>
</tr>
<tr>
<td>4. Nair, Supriya, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Gladys Cardenas, DO</td>
<td>Voluntary Resignation (contract change)</td>
</tr>
<tr>
<td>5. Saint Louis, Glacha, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Gladys Cardenas, DO</td>
<td>Voluntary Resignation (contract change)</td>
</tr>
<tr>
<td>6. West-Williams, Marvette, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Gladys Cardenas, DO</td>
<td>Voluntary Resignation (contract change)</td>
</tr>
</tbody>
</table>

### Accepted the following Change of Sponsor(s) – Allied Health:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Add/Delete Sponsor</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Dacosta-Green, Ophelia, APRN</td>
<td>Surgery</td>
<td>Nurse Practitioner (Pain Management)</td>
<td>ADD: Kush Tripathi, MD</td>
</tr>
<tr>
<td>2. Silva, Barbara, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner (Critical Care)</td>
<td>ADD: Isabel Novela, MD</td>
</tr>
</tbody>
</table>

Chief of Staff: [Signature]  
Date: 7/22/19

BHCS/CEO: [Signature]  
Date: 7/22/19

President, CEO: [Signature]  
Gino Santorio 07/29/2019 16:10 Eastern Daylight

Date: ___/___/___
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Naaman Abdullah, MD

Date of Birth: 02/11/1966

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:
- Broward Health Imperial Point
- Broward Health Coral Springs

Specialty: Cardiothoracic Surgery

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: Surgery

Practice Name: Naaman Abdullah, MD

Primary Address Information:
21110 Biscayne Blvd
Suite 430
Aventura, FL 33137
Phone: 305-851-6005
Fax: 305-851-3117
Email: SuzyG@NAbullahMD.com

ECFMG:
Number: 418-760-5
Date Issued: 09/02/1990

Medical/Professional School:
Dow Medical College, University of Karachi, Pakistan
Karachi,
From: 07/01/1983
To: 01/03/1990
Degree: MD

Gap:
Preparing for USMLE and relocating to the US.
From: 02/01/1990
To: 06/30/1990

Internship:
Jackson Memorial Hospital
Miami, FL
From: 07/01/1990
To: 06/23/1991
Specialty: General Surgery

Residency:
Jackson Memorial Hospital
Miami, FL
From: 07/01/1991
To: 06/30/1995
Specialty: General Surgery

Fellowship:
University of Miami/Jackson Memorial Hospital
Miami, FL
From: 07/01/1995
To: 06/30/1997
Specialty: Thoracic Surgery

Hospital Affiliations/Work History:
David Galbut, MD and Associates
Miami, FL
From: 07/01/1997
To: 03/31/2016
Title: Cardiothoracic Surgery

Naaman Abdullah, MD
Hospital Affiliations/Work History (continued):

Broward Health Imperial Point
Ft Lauderdale, FL
From: 10/15/1997
To: 10/28/1998
Specialty: Cardiothoracic Surgery

Aventura Hospital and Medical Center
Aventura, FL
From: 08/05/1998
To: Present
Specialty: Cardiovascular Surgery

Kendall Regional Medical Center
Miami, FL
From: 08/05/1998
To: 03/01/2010
Specialty: Cardiovascular Surgery

Hollywood Medical Center (acquired by Memorial Regional Hospital South)
Miami, FL
From: 03/01/1999
To: 11/25/2009
Specialty: Cardiothoracic Surgery

Jackson Memorial Hospital
Miami, FL
From: 04/01/1999
To: Present
Specialty: Cardiothoracic Surgery

Jackson North Medical Center
North Miami Beach, FL
From: 04/01/1999
To: Present
Specialty: Cardiothoracic Surgery

Parkway Regional Medical Center (Jackson North)
North Miami Beach, FL
From: 04/01/1999
To: Present
Specialty: Cardiovascular Surgery

North Shore Medical Center (Tenet)
Miami, FL
From: 06/22/1999
To: Present
Specialty: Cardiothoracic Surgery

Westchester General Hospital
Miami, FL
From: 02/05/2001
To: Present
Specialty: Cardiothoracic Surgery

University of Miami Hospital (Cedars)
Miami, FL
From: 02/15/2001
To: 10/29/2017
Specialty: Cardiothoracic Vascular Surgery

Naaman Abdullah, MD
### Hospital Affiliations/Work History (continued):

<table>
<thead>
<tr>
<th>Hospital Affiliation</th>
<th>From</th>
<th>To</th>
<th>Specialty</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Miami Hospital</td>
<td>05/07/2002</td>
<td>Present</td>
<td>Cardiac Surgery</td>
</tr>
<tr>
<td>Homestead Hospital</td>
<td>07/29/2004</td>
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<td>Doctors Memorial Hospital</td>
<td>09/27/2004</td>
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<td>03/24/2009</td>
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<td>Westside Regional Medical Center (HCA)</td>
<td>01/17/2014</td>
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<td>Plantation General Hospital</td>
<td>01/07/2016</td>
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<td>Kendall Regional Medical Center</td>
<td>04/06/2016</td>
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</table>

Naaman Abdullah, MD
| Hospital Affiliations/Work History (continued) | University of Miami Hospital and Clinics  
Miami, FL  
From: 10/25/2017  
To: Current  
Specialty: Cardiothoracic Vascular Surgery  
| JFK Medical Center  
Atlantis, FL  
From: 11/28/2017  
To: Present  
Specialty: Cardiovascular Surgery |  
| **Board Certification:** | Board: American Board of Thoracic Surgery  
Specialty: Thoracic and Cardiac Surgery  
Certification Date: 06/05/1998  
MOC Reverification Date: N/A  
Certification Expiration: 12/31/2028 |  

Naaman Abdullah, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Gordana Bjekic, MD

Date of Birth: 04/08/1965
Citizenship: US
Primary Facility: Broward Health Coral Springs
Other Broward Health Facilities: None
Specialty: Pulmonary Critical Care
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: None
Practice Name: NuView Telehealth LLC
Website: nuviewhealth.com

Primary Address Information: 1825 NW Corporate Boulevard
Suite 105
Boca Raton, FL 33431
Phone: 561-299-3657
Fax: 561-299-3570
Email: trousseau@nuviewhealth.com

ECFMG: Number: 0-457-735-9
Date Issued: 07/17/1992

Medical/Professional School: University of Novi Sad
Novi Sad,
From: 10/01/1984
To: 08/31/1991
Degree: MD

Hospital Affiliations/ Work History: Primary Care Practice
Becej, Yugoslavia
From: 10/01/1991
To: 01/31/1992
Title: Primary Care Physician

Gap: Studying for the FLEX and relocating from Serbia to the US
From: 02/01/1992
To: 05/31/1992

Internship: N/A

Residency: Presbyterian St Lukes Medical Center
New York, NY
From: 06/19/1992
To: 06/30/1995
Specialty: Internal Medicine

Fellowship: Columbia Presbyterian Medical Center
New York, NY
From: 07/01/1995
To: 06/30/1997
Specialty: Pulmonary

Gordana Bjekic, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Hospital Affiliations/Work History (continued):
Private Practice
Palatka, FL
From: 06/01/1997
To: 07/01/2000
Specialty: Pulmonary Disease

Fellowship (continued):
Mount Sinai School of Medicine
New York, NY
From: 07/01/2000
To: 06/30/2001
Specialty: Critical Care Medicine

Gap:
Relocating from New York to Florida awaiting credentialing approval
From: 07/01/2001
To: 09/30/2001

Hospital Affiliations/Work History:
University of Miami Hospital formerly Cedar Medical Center
Miami, FL
From: 10/11/2001
To: 01/20/2003
Specialty: Critical Care / Internal Medicine

San Francisco Critical Care Group
San Francisco, CA
From: 09/16/2002
To: 06/09/2014
Title: Pulmonary Critical Care Medicine

California Pacific Medical Center
San Francisco, CA
From: 10/28/2002
To: 07/01/2014
Specialty: Pulmonary Disease

Kindred Hospital South Florida (INV)
Ft. Lauderdale, FL
From: 06/27/2014
To: Present
Specialty: Internal Medicine

Aventura Hospital and Medical Center
Aventura, FL
From: 07/10/2014
To: Present
Specialty: Pulmonary Disease/Critical Care Medicine

Gordana Bjekic MD PA
Aventura, FL
From: 08/11/2014
To: Present
Title: Pulmonary Disease/Critical Care Medicine

Jackson North Medical Center
North Miami Beach, FL
From: 04/27/2017
To: Present
Specialty: Pulmonary Disease/Critical Care Medicine

Gordana Bjekic, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Hospital Affiliations/Work History:

Capital Regional Medical Center (HCA)
Tallahassee, FL
From: 05/15/2017
To: 02/01/2018
Specialty: Pulmonary Disease/Critical Care Medicine

Good Samaritan Medical Center
West Palm Beach, FL
From: 07/17/2017
To: Present
Specialty: Pulmonary Disease/Critical Care Medicine

St Mary’s Medical Center
West Palm Beach, FL
From: 01/19/2018
To: Present
Specialty: Critical Care Medicine/Pulmonary Disease

Mad River Community Hospital
Arcata, CA
From: 01/31/2018
To: Present
Specialty: Pulmonary Disease

JFK Medical Center
Lake Worth, FL
From: 03/27/2018
To: Present
Specialty: Critical Care Medicine/Pulmonary Disease

Jupiter Medical Center (EM)
Jupiter, FL
From: 04/05/2018
To: Present
Specialty: Critical Care Medicine

Frank R Howard Memorial Hospital
Willits, CA
From: 06/12/2018
To: Present
Specialty: Internal Medicine

Board Certification:

Board: American Board of Internal Medicine
Specialty: Internal Medicine
Certification Date: 08/23/1995
MOC Reverification Date: 04/01/2020
Expiration Date: N/A

Board: American Board of Pulmonary Disease
Specialty: Pulmonary Disease
Certification Date: 11/19/1997
MOC Reverification Date: 04/01/2020
Expiration Date: N/A

Board: American Board of Internal Medicine
Specialty: Critical Care Medicine
Certification Date: 11/07/2001
MOC Reverification Date: 04/01/2021
Expiration Date: N/A

Gordana Bjekic, MD
<table>
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<tr>
<th>Name:</th>
<th>Lucia Blanchard, DO</th>
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<tbody>
<tr>
<td>Date of Birth:</td>
<td>03/06/1978</td>
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<tr>
<td>Citizenship:</td>
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<td>Primary Facility:</td>
<td>Broward Health Coral Springs</td>
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<td>Other Broward Health Facilities:</td>
<td>Broward Health Medical Center, Broward Health North</td>
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<td>Dept. at Primary Facility:</td>
<td>Medicine</td>
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<td>Practice Name:</td>
<td>North Broward Hospital District</td>
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<tr>
<td>Primary Address Information:</td>
<td>3100 Coral Hills Drive, Suite 302, Coral Springs, FL 33065</td>
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<td>Medical/Professional School:</td>
<td>Nova Southeastern University College of Osteopathic Medicine, Fort Lauderdale, FL</td>
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<td>From:</td>
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</table>
Name: Darwin M Koller, MD

Date of Birth: 09/18/1971

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:

- Broward Health Coral Springs

Specialty: Pediatric Emergency Medicine

Dept. at Primary Facility: Emergency Medicine

Secondary Facility Depts.:

- Emergency Medicine

Practice Name: TIVA Healthcare

Primary Address Information:

- 7700 West Sunrise Blvd
- Plantation, FL 33322
- Phone: 954-939-7009
- Fax: 954-615-3695
- Email: Jillean.McEwan@tivahealthcare.com

ECFMG: N/A

Medical/Professional School: Eastern Virginia Medical School
- Norfolk, VA
- From: 08/11/1995
- To: 05/22/1999
- Degree: MD

Internship:

None

Residency:

Connecticut Children's Medical Center
- Hartford, CT
- From: 07/01/1999
- To: 06/30/2002
- Specialty: Pediatrics

Fellowship:

University of Louisville Norton Children's Hospital
- Louisville, KY
- From: 07/01/2002
- To: 06/30/2005
- Specialty: Pediatric Emergency Medicine

Hospital Affiliations/Work History:

- Children's Hospital at Erlanger
  - Chattanooga, TN
  - From: 07/28/2005
  - To: 06/28/2018
  - Specialty: Pediatric Emergency

- Columbus Regional Medical Center Midtown INV
  - Columbus, GA
  - From: 08/21/2018
  - To: Present
  - Specialty: Pediatric Emergency
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Darwin M Koller, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Andres Morgado-Laureano MD

Date of Birth: 05/02/1986
Citizenship: US

Primary Facility: Broward Health Medical Center
Other Broward Health Facilities: Broward Health Coral Springs
                                            Broward Health Imperial Point
                                            Broward Health North

Specialty(ies): Radiology
Dept. at Primary Facility: Radiology
Secondary Facility Depts.: Radiology
                                            Medicine

Practice Name: North Broward Radiologists PA
Website: https://nhradiologists.com/

Primary Address Information: 1801 South Perimeter Road
                              Suite 180
                              Fort Lauderdale, FL 33309
                              Phone: 954-839-8080
                              Fax: 954-839-8081
Email: nwuetsg@nhradiologists.com

ECFMG: N/A

Medical/Professional School: University of Puerto Rico School of Medicine
San Juan, PR
From: 08/01/2009
To: 06/30/2013
Degree: MD

Internship: San Juan City Hospital
San Juan, PR
From: 07/01/2013
To: 06/30/2014
Specialty: Transitional Year

Residency: University of Miami Miller School of Medicine
Miami, FL
From: 07/01/2014
To: 05/30/2018
Specialty: Radiology

Fellowship: University of Miami Miller School of Medicine
Miami, FL
From: 07/01/2018
To: 06/30/2019
Specialty: Vascular and Interventional Radiology

Hospital Affiliations/ Work History: N/A

Board Certification:
Board: American Board of Radiology
Specialty: Interventional Radiology and Diagnostic Radiology
Eligibility Date: 06/30/2019
Eligibility Expiration: 06/30/2026

Andres Morgado-Laureano, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Hasan Riaz, MD

Date of Birth: 09/14/1981

Citizenship: US

Primary Facility: Broward Health North

Other Broward Health Facilities: Broward Health Imperial Point
Broward Health Medical Center
Broward Health Coral Springs

Specialty(ies): Nephrology
Critical Care Medicine

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: Medicine

Practice Name: NuView Telehealth LLC

Primary Address Information: 1825 NW Corporate Blvd
Suite 105
Boca Raton, FL
Phone: 561-299-3667
Fax: 561-299-3670

ECFMG: Number: 0-709-861-9
Date Issued: 10/12/2007

Medical/Professional School: Nishtar Medical College
Multan, Pakistan
From: 01/01/2000
To: 03/15/2005
Degree: MBBS

Foreign Internship:
Nishtar Hospital
Multan, Pakistan
From: 05/01/2005
To: 10/31/2005
Specialty: Internal Medicine

Mayo Hospital
Lahore, Pakistan
From: 11/01/2005
To: 04/30/2006
Specialty: Internal Medicine

Foreign Work History:
Fatima Medical Center
Pakistan
From: 05/01/2006
To: 08/31/2007
Specialty: Physician

Gap:
Relocated from Pakistan to the US
From: 05/01/2006
To: 08/31/2007

Residency:
University of Florida College of Medicine Jacksonville
Jacksonville, FL
From: 07/01/2008
To: 06/30/2011
Specialty: Internal Medicine

Hasan Riaz, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Fellowship:
Jackson Memorial Hospital **AMA Verified**
Miami, FL
From: 07/01/2011
To: 06/30/2012
Specialty: Geriatric Medicine

University of Florida College of Medicine Jacksonville
Jacksonville, FL
From: 07/07/2012
To: 06/30/2014
Specialty: Nephrology

Mercy Medical Center
St. Louis, MO
From: 07/07/2018
To: 06/30/2019
Specialty: Critical Care Medicine

Hospital Affiliations/Work History:
Broward Health Medical Center and Salah Foundation Children’s Hospital
Ft Lauderdale, FL
From: 07/30/2014
To: Present
Specialty: Nephrology

Broward Health North
Deerfield Beach, FL
From: 07/30/2014
To: Present
Specialty: Nephrology

Holy Cross Hospital
Fort Lauderdale, FL
From: 10/17/2014
To: 06/20/2018
Specialty: Nephrology Internal Medicine

Broward Health Imperial Point
Ft Lauderdale, FL
From: 11/19/2014
To: Present
Specialty: Nephrology

Board Certification:
Board: American Board of Internal Medicine
Specialty: Internal Medicine
Certification Date: 01/01/2012
MOC Reverification: N/A
Certification Expiration: 12/31/2021

Board: American Board of Internal Medicine
Specialty: Nephrology
Certification Date: 11/09/2016
MOC Reverification: 04/01/2020
Certification Expiration: N/A

Board: American Board of Internal Medicine
Specialty: Critical Care Medicine
Eligibility Date: 06/30/2019
Eligibility Expiration: 06/30/2026

Hasan Riaz, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Timothy W Ryschon MD

Date of Birth: 08/12/1961
Citizenship: US
Primary Facility: Broward Health Medical Center
Other Broward Health Facilities: Broward Health Coral Springs
Specialty(ies): Pediatrics
Dept. at Primary Facility: Pediatrics
Pediatric Emergency
Secondary Facility Depts.: Pediatrics
Practice Name: Envision Physician Services
Website: www.environ.com

Primary Address Information: 1600 South Andrews Avenue
2nd Floor Pediatrics
Fort Lauderdale, FL 33316
Phone: 954-335-5810
Fax: 954-485-5277
Email: Kim.Durcan@encare.com

ECFMG: N/A
Medical/Professional School: University of Nebraska Medical Center
Omaha, NE
From: 08/29/1983
To: 05/31/1988
Degree: MD

Internship/Residency: University Of Utah School Of Medicine
Salt Lake City, UT
From: 06/24/1988
To: 06/30/1991
Specialty: Pediatrics

Hospital Affiliations/Work History: Sanford Pediatrics (Unable to verify – records unavailable)
Sanford, ME
From: 07/01/1991
To: 02/01/1992
Specialty: Pediatric Emergency

Shady Grove Adventist Hospital
Rockville, MD
From: 02/26/1992
To: 02/18/1998
Specialty: Pediatric Emergency

Rosebud HIS Health Center
Rosebud, SD
From: 04/02/1995
To: 02/14/2005
Specialty: Pediatric Emergency

Timothy W Ryschon, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Rosebud Diabetes Prevention Center
Rosebud, SD
From: 02/01/2005
To: 05/31/2009
Specialty: Pediatric Emergency

Midwest Health Partners
Norfolk, NE
From: 08/01/2005
To: 07/31/2010
Title: Pediatrics

Regional West Medical Center (formerly Platte Valley Pediatrics)
Scottsbluff, NE
From: 12/26/2006
To: 09/01/2009
Title: Pediatric Emergency

Children’s Hospital of Colorado
Aurora, CO
From: 04/01/2008
To: 09/30/2012
Specialty: Pediatric Emergency

Norfolk Medical Group, LLC
Norfolk, NE
From: 07/01/2010
To: 05/31/2011
Title: Pediatrics

Phoenix Children’s Hospital
Phoenix, AZ
From: 09/23/2011
To: 09/01/2017
Specialty: Pediatrics

Rose Medical Center
Denver, CO
From: 05/23/2012
To: 01/22/2014
Specialty: Pediatrics

North Suburban Medical Center
Thornton, CO
From: 05/23/2012
To: 09/26/2017
Specialty: Pediatric Emergency

Carepoint PC Health
Greenwood Village, CO
From: 05/01/2012
To: 01/25/2016
Title: Pediatrics Emergency

North Colorado Medical Center
Greeley, CO
From: 09/19/2013
To: 05/01/2017
Specialty: Pediatrics

Timothy W Ryachon, MD
St. James Healthcare
Butte, MT
From: 01/07/2013
To: 03/03/2014
Specialty: Pediatrics

Holy Rosary Healthcare
Miles City, MT
From: 04/18/2013
To: 04/18/2013
Specialty: Pediatrics (Temp Privileges Only)

Swedish Medical Center
Englewood, CO
From: 09/25/2013
To: 06/01/2016
Specialty: Pediatric Emergency

Sunrise Children's Hospital
Las Vegas, NV
From: 09/28/2015
To: Present
Specialty: Pediatrics/Emergency

Presbyterian St. Lukes Medical Center (HCA)
Denver, CO
From: 10/23/2013
To: 06/18/2017
Specialty: Pediatric Emergency

West Florida Hospital (HCA)
Pensacola, FL
From: 05/10/2016
To: 03/05/2019
Specialty: Pediatric Emergency

Capital Regional Medical Center (HCA)
Tallahassee, FL
From: 05/24/2016
To: 03/06/2019
Specialty: Pediatric Emergency

Gulf Coast Regional Medical Center
Panama City, FL
From: 05/25/2016
To: Present
Specialty: Pediatric Emergency

Fort Walton Beach Medical Center (HCA)
Fort Walton Beach, FL
From: 09/07/2016
To: Present
Specialty: Pediatric Emergency

Brandon Regional Hospital (HCA)
Brandon, FL
From: 10/03/2016
To: 10/02/2018
Specialty: Pediatric Emergency

Timothy W Ryschon, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Sunrise Children’s Hospital
Las Vegas, NV
From: 05/01/2017
To: 12/31/2018
Specialty: Pediatrics/Emergency

Sacred Heart Hospital
Pensacola, FL
From: 10/18/2018
To: Present
Specialty: Pediatric Emergency

Board Certification:

Board: American Board of Pediatrics
Specialty: Pediatrics
 Certification Date: 10/27/2008
 Certification Expiration: 02/15/2020

Timothy W Ryschon, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Michael D Williams DO

Date of Birth: 01/22/1984
Citizenship: US
Primary Facility: Broward Health North
Other Broward Health Facilities:
Broward Health Coral Springs
Broward Health Imperial Point

Specialty(ies): Infectious Disease
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: Medicine

Practice Name: Infectious Disease Consultants PA
Website: https://dccares.com/

Primary Address Information:
2901 Coral Hills Drive
Suite 220
Coral Springs, FL 33065
Phone: 954-345-0404
Fax: 954-346-8315
Email: maponte@dccares.com

ECFMG: N/A

Medical/Professional School:
Nova Southeastern University
Ft. Lauderdale, FL

From: 08/02/2010
To: 05/18/2014
Degree: DO

Internship/Residency:
Mount Sinai Medical Center
Miami Beach, FL

From: 07/01/2014
To: 06/30/2017
Specialty: Internal Medicine

Fellowship:
Mount Sinai Beth Israel
New York City, NY

From: 07/01/2017
To: 06/30/2019
Specialty: Infectious Disease

Hospital Affiliations/Work History: N/A

Board Certification:
Board: American Board of Internal Medicine
Specialty: Infectious Disease
Eligibility Date: 06/30/2019
Eligibility Expiration: 06/30/2026
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Charleye D Crawford, APRN

Name:

Date of Birth: 12/12/1981

Citizenship: US

Primary Facility: Broward Health Coral Springs

Other Broward Health Facilities:

Broward Health North

Specialty: Nurse Practitioner

Dept. at Primary Facility: Medicine

Secondary Facility Depts.:

Medicine

Physician Sponsorship: Sonia K Kalirao, MD

Practice Name: The Neurology Institute LLC

Primary Address Information:

5441 N University Drive
Suite 101
Coral Springs, FL 33067
Phone: 954-803-9002
Fax: 954-933-2305
Email: mcolantuno@neurofl.com

Professional School:

South University
Savannah, GA
From: 10/22/2016
To: 02/28/2018
Degree: MSN
Major: Family Nurse Practitioner

Hospital Affiliations/Work History:

Memorial Regional Hospital
Hollywood, FL
From: 07/17/2014
To: Present
Title: Registered Nurse

The Neurology Institute LLC
Coral Springs, FL
From: 01/07/2019
To: Present
Title: Advanced Practice Registered Nurse

Kindred Healthcare
Hollywood, FL
From: 03/01/2019
To: Present
Specialty: Advanced Practice Registered Nurse

Board Certification:

Board: American Academy of Nurse Practitioners
Specialty: Family Nurse Practitioner (FNP)
Certification Date: 07/31/2018
Certification Expiration: 07/30/2023
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Whidlet Naissance APRN

Date of Birth: 09/09/1977
Citizenship: US
Primary Facility: Broward Health Coral Springs
Other Broward Health Facilities: None
Specialty: Nurse Practitioner
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: None
Physician Sponsorship: Kathleen Joseph-McBean, MD
Practice Name: Schumacher Clinical Partners
Website: www.scp-health.com/
Primary Address
Information: 3000 Coral Hills Drive
Coral Springs, FL 33065
Phone: 954-344-3296
Fax: 954-796-3922
Email: Karen.Windhorst@scp-health.com
Professional School: Florida International University
Miami, FL
From: 05/13/2013
To: 08/09/2014
Degree: Master
Major: Family Health Nurse Practitioner

Hospital Affiliations/
Work History:
Mount Sinai Medical Center
Miami Beach, FL
From: 11/15/2013
To: 05/01/2015
Title: Registered Nurse
Mount Sinai Medical Center
Miami Beach, FL
From: 05/19/2015
To: Present
Specialty: Nurse Practitioner
Rmed LLC Medical Group
West Palm Beach, FL
From: 04/02/2018
To: Present
Title: Registered Nurse
Schumacher Clinical Partners
Hollywood, FL
From: 09/01/2018
To: Present
Title: Nurse Practitioner
Board Certification:
Board: American Nurses Credentialing Center
Specialty: Family Nurse Practitioner
Certification Date: 11/10/2014
Certification Expiration: 11/09/2019

Whidlet Naissance, APRN
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Adam Polak APRN

Date of Birth: 04/04/1983

Citizenship: US

Primary Facility: Broward Health Imperial Point

Other Broward Health Facilities: Broward Health Coral Springs
                                 Broward Health North

Specialty: Nurse Practitioner

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: Medicine
                           Emergency Medicine

Physician Sponsorship: Evan L Boyar, MD
                       Cesar W. Carralero, DO
                       Gary Lai, DO

Practice Name: Envision Physician Services
Website: www.envision.com

Primary Address Information:
EmergencyB Department
6401 N. Federal Highway
Fort Lauderdale, FL 33308
Phone: 954-776-8610
Fax: 954-776-8521
Email: Kim.Durcan@envisionhealth.com

Professional School: Simmons College
                    Boston, MA
From: 03/17/2014
To: 08/31/2016
Degree: Masters
Major: Family Nurse Practitioner

Gap: Applied for privileges and awaited the credentialing process.
     From: 09/01/2016
     To: 11/08/2016

Hospital Affiliations/Work History:
Northwest Medical Center (HCA)
Margate, FL
From: 11/09/2016
To: Present
Specialty: Advanced Practice Registered Nurse

Board Certification:
Board: American Academy of Nurse Practitioners
Specialty: Family Nurse Practitioner (FNP)
Certification Date: 09/19/2016
Certification Expiration: 09/18/2021
SUMMARY OF REQUEST

DATE: July 31, 2019

FACILITY: Broward Health Medical Center

ITEM: Medical Staff Board Items

REASON: Approved Recommendations as Exhibited From the Medical Executive Committee of Broward Health Medical Center

COST: N/A

ADDITIONAL INFORMATION: See Attached

SUBMITTED FOR LEGAL COUNSEL REVIEW: N/A

APPROVED:

[Signature]
Heather Havericak, Interim Chief Executive Officer

[Signature]
Andrew Ta 07/25/2019 18:37 Eastern Daylight Time

[Signature]
Gino Santoro, Broward Health, Chief Executive Officer
MEMORANDUM

TO: Board of Commissioners
FROM: Heather Havericak, Interim Chief Executive Officer
DATE: July 31, 2019
SUBJECT: Medical Staff Board Items

The Medical Executive Committee at Broward Health Medical Center, at its monthly meeting on July 9, 2019 approved the recommendations as exhibited for the following:

- Medical Staff Changes and Additions
- Allied Health Changes and Additions
- Community Health Services Changes and Additions
- Medical Staff Reappointments
- Allied Health Reappointments
- Community Health Services & Urgent Care Center Reappointments
- Committee Service Recommendations

I, Michael A. Morrison, MD, Chief of Staff at BHMC, do hereby attest that all pertinent and required information has been received and verified for providers being submitted to the Board of Commissioners for approval.

Therefore, it is requested that the Board of Commissioners approve these recommendations as submitted from the Medical Executive Committee at Broward Health Medical Center.

HH/MA
NORTH BROWARD HOSPITAL DISTRICT
MEDICAL STAFF CHANGES AND ADDITIONS

√Broward Health Medical Center       _____  Broward Health North

_____  Broward Health Imperial Point   _____  Broward Health Coral Springs

The following Medical Staff Committees:

CREDSIALS COMMITTEE: July 2, 2019       MEDICAL EXECUTIVE COMMITTEE: July 9, 2019

**APPROVED THE FOLLOWING NEW MEMBERS:**

<table>
<thead>
<tr>
<th>Doctor</th>
<th>Department</th>
<th>Privileges</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nathaniel Drexler, DO</td>
<td>Medicine</td>
<td>Critical Care Medicine</td>
<td>Provisional</td>
</tr>
<tr>
<td>Yves Jodesty, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Provisional</td>
</tr>
<tr>
<td>Carlo Guevara, MD</td>
<td>Surgery</td>
<td>Oral Maxillofacial Surgery</td>
<td>Provisional</td>
</tr>
<tr>
<td>Darwin Koller, MD</td>
<td>Em. Medicine</td>
<td>Pediatric Emergency Medicine</td>
<td>Provisional</td>
</tr>
<tr>
<td>Ian Kowalski, DO</td>
<td>Medicine</td>
<td>Palliative Care/Internal Medicine</td>
<td>Provisional</td>
</tr>
<tr>
<td>Phillip Miner, MD</td>
<td>Pediatrics</td>
<td>Pediatric Neurology</td>
<td>Provisional</td>
</tr>
<tr>
<td>Andres Morgado-Laureano, MD</td>
<td>Radiology</td>
<td>Radiology</td>
<td>Provisional</td>
</tr>
<tr>
<td>Jovana Obadovic, MD</td>
<td>Em. Medicine</td>
<td>Emergency Medicine</td>
<td>Provisional</td>
</tr>
<tr>
<td>Erasmo Passaro, MD</td>
<td>Medicine</td>
<td>Telemedicine Neurology</td>
<td>Provisional</td>
</tr>
<tr>
<td>Ekta Sharma, DO</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Provisional</td>
</tr>
<tr>
<td>Yungping Wang, DO</td>
<td>Medicine</td>
<td>Critical Care Medicine</td>
<td>Provisional</td>
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**APPROVED THE FOLLOWING NEW MEMBERS ALLIED HEALTH PRACTITIONERS:**

<table>
<thead>
<tr>
<th>Provider</th>
<th>Department</th>
<th>Physician Sponsor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tamara Coleburn, APRN</td>
<td>Medicine</td>
<td>S. Kumar, MD</td>
</tr>
</tbody>
</table>

**APPROVED THE FOLLOWING NEW MEMBER(S) (CHS):**

<table>
<thead>
<tr>
<th>Provider</th>
<th>Privileges</th>
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</thead>
<tbody>
<tr>
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**APPROVED THE FOLLOWING NEW ALLIED HEALTH PROFESSIONALS (CHS):**

<table>
<thead>
<tr>
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<th>Physician Sponsor</th>
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<tbody>
<tr>
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**APPROVED THE FOLLOWING NEW MEMBER(S) URGENT CARE CENTERS:**

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<tr>
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<th>Privileges</th>
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<tbody>
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**APPROVED THE FOLLOWING NEW ALLIED HEALTH PROFESSIONAL(S) URGENT CARE CENTERS:**

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**REQUEST FOR DELETION PRIVILEGES/SETTING:**

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<tr>
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<th>Department</th>
<th>Specialty</th>
<th>Privileges/Setting Deleted</th>
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<tr>
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**REQUEST FOR ADDITIONAL PRIVILEGES/SETTING:**

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<tr>
<th>Provider</th>
<th>Department</th>
<th>Specialty</th>
<th>Privileges Requested</th>
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</thead>
<tbody>
<tr>
<td>Noel Alonso, MD</td>
<td>Emergency Medicine</td>
<td>Pediatric Em. Medicine</td>
<td>Core to Laundry List</td>
</tr>
<tr>
<td>Arnoux Blanchard, MD</td>
<td>Medicine</td>
<td>Cardiology/Int. Med</td>
<td>Core to Laundry List</td>
</tr>
<tr>
<td>Emmanouil Palaios, MD</td>
<td>Surgery</td>
<td>Transplant/Gen Surgery</td>
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</table>
REQUEST FOR ADDITIONAL SPONSOR

<table>
<thead>
<tr>
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<th>Department</th>
<th>Sponsor</th>
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<tbody>
<tr>
<td>Mikel Calderon, PA-C</td>
<td>Surgery</td>
<td>A. Ellowitz, MD</td>
</tr>
<tr>
<td>Elizabeth Elliot, PA-C</td>
<td>Medicine</td>
<td>S. Kumar, MD</td>
</tr>
<tr>
<td>John Karpik, APRN</td>
<td>Surgery</td>
<td>J. Abbensetts, MD; E. Johnson, DO; M. Parra, MD; J. Berne, MD; I. Puente, MD; M. Gomez, DO</td>
</tr>
<tr>
<td>Rebecca McLaughlin, PA-C</td>
<td>Medicine</td>
<td>S. Kumar, MD</td>
</tr>
<tr>
<td>Yandy Palenzuela-Rodriguez, PA-C</td>
<td>Medicine</td>
<td>S. Diab Agha, MD; S. Kumar, MD; Y. Hamwi, MD</td>
</tr>
<tr>
<td>Bret Sharf, PA-C</td>
<td>Medicine</td>
<td>S. Kumar, MD</td>
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REQUEST FOR DELETION OF SPONSORSHIP:

<table>
<thead>
<tr>
<th>Provider</th>
<th>Department</th>
<th>Sponsor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yandy Palenzuela-Rodriguez, PA-C</td>
<td>Medicine</td>
<td>Stephen Renae, MD</td>
</tr>
<tr>
<td>Brittany Poole, PA-C</td>
<td>Surgery</td>
<td>Jacob Landes, DO</td>
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</tbody>
</table>

REQUEST FOR CHANGE IN STATUS

<table>
<thead>
<tr>
<th>Provider</th>
<th>Department</th>
<th>Specialty</th>
<th>Current Status</th>
<th>New Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paula Anderson-Worts, DO</td>
<td>Family Medicine</td>
<td>Family Medicine</td>
<td>Courtesy</td>
<td>Affiliate</td>
</tr>
<tr>
<td>David Droller, MD</td>
<td>Medicine</td>
<td>Infectious Disease</td>
<td>Sr. Active</td>
<td>Honorary</td>
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REQUEST FOR CHANGE IN PRIMARY FACILITY

<table>
<thead>
<tr>
<th>Provider</th>
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<th>New Primary Facility:</th>
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REQUEST FOR LEAVE OF ABSENCE

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<tr>
<th>Provider</th>
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<tbody>
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APPROVED THE FOLLOWING MEDICAL STAFF RESIGNATIONS:

<table>
<thead>
<tr>
<th>Doctor</th>
<th>Department</th>
<th>Reason</th>
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<tbody>
<tr>
<td>Alex Birman, MD</td>
<td>ObGyn</td>
<td>Voluntary- Failure to Reapply</td>
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<tr>
<td>David Max, PhD</td>
<td>Psychiatry</td>
<td>Voluntary- Failure to Reapply</td>
</tr>
<tr>
<td>Diane Sanders, DO</td>
<td>Family Medicine</td>
<td>Voluntary</td>
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<tr>
<td>Daveda Maharaj, DO</td>
<td>Surgery</td>
<td>Voluntary</td>
</tr>
<tr>
<td>Lisa Sanches, MD</td>
<td>ObGyn</td>
<td>Voluntary</td>
</tr>
<tr>
<td>Seth Trifiro, MD</td>
<td>Medicine</td>
<td>Voluntary</td>
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APPROVED THE FOLLOWING RESIGNATIONS AHP:

<table>
<thead>
<tr>
<th>Provider</th>
<th>Department</th>
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<tbody>
<tr>
<td>Stephen Fender, PA-C</td>
<td>Surgery</td>
</tr>
<tr>
<td>Yaketerina Grigol, PA-C</td>
<td>Medicine</td>
</tr>
<tr>
<td>Jacqueline Simon, APRN</td>
<td>Psychiatry</td>
</tr>
</tbody>
</table>
5.6.3 FAILURE TO PAY DUES

If a member has failed to pay his or her dues on or before the due date, notice shall be given to the member and a reasonable period of time shall be specified in the Notice by which the member must remit all past due amounts. The Notice shall further provide that the member's failure to remit the delinquent dues will be deemed a voluntary resignation of his or her membership.

In the event a member who has voluntarily resigned under this Section seeks in the future to apply for Medical Staff membership, in addition to all such qualifications and obligations set forth in these Bylaws for membership, the applicant must, as a condition precedent, remit his or her delinquent dues as of the date of his or her resignation.

<table>
<thead>
<tr>
<th>Name</th>
<th>First</th>
<th>Last</th>
<th>Initial</th>
<th>Title</th>
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<tbody>
<tr>
<td>LaPorta</td>
<td>Katherine</td>
<td>A</td>
<td>PA-C</td>
<td></td>
</tr>
<tr>
<td>Allan</td>
<td>Mohammad</td>
<td>MD</td>
<td></td>
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</tr>
<tr>
<td>Amin</td>
<td>Neel</td>
<td>Haris h</td>
<td>MD</td>
<td></td>
</tr>
<tr>
<td>Bell</td>
<td>John</td>
<td>E</td>
<td>DO</td>
<td></td>
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<tr>
<td>Campbell</td>
<td>Joseph</td>
<td>E</td>
<td>PA-C</td>
<td></td>
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<tr>
<td>Carney</td>
<td>Daniel</td>
<td>C</td>
<td>DO</td>
<td></td>
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<tr>
<td>Elzind</td>
<td>Elham</td>
<td>H</td>
<td>MD</td>
<td></td>
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<tr>
<td>Fisher</td>
<td>Cherie</td>
<td>F</td>
<td>MD</td>
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<tr>
<td>Flores</td>
<td>Monica</td>
<td>M</td>
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<tr>
<td>Harrington</td>
<td>Tory</td>
<td>A</td>
<td>APRN</td>
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<tr>
<td>Hirschfield</td>
<td>Larry</td>
<td>S</td>
<td>MD</td>
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<tr>
<td>Hoffman</td>
<td>Lara</td>
<td>W</td>
<td>PA-C</td>
<td></td>
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<tr>
<td>Hoover</td>
<td>Natalie</td>
<td>N</td>
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<tr>
<td>Jamroz</td>
<td>Tatiana</td>
<td>MD</td>
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<tr>
<td>Lee</td>
<td>Steve</td>
<td>C</td>
<td>MD</td>
<td></td>
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<tr>
<td>Leider</td>
<td>Lindsay</td>
<td>D</td>
<td>CNM</td>
<td></td>
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<tr>
<td>Lustig</td>
<td>Chava</td>
<td>F</td>
<td>DO</td>
<td></td>
</tr>
<tr>
<td>Mandelkorn</td>
<td>Jeffrey</td>
<td>D</td>
<td>PhD</td>
<td></td>
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<tr>
<td>Michaels</td>
<td>Amy</td>
<td></td>
<td>PA-C</td>
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<tr>
<td>Oates</td>
<td>Tyshan</td>
<td></td>
<td>PA-C</td>
<td></td>
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<tr>
<td>Owens</td>
<td>Jeanette</td>
<td>M</td>
<td>PA-C</td>
<td></td>
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<tr>
<td>Pinchinat</td>
<td>Patrick</td>
<td>MD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rathnam</td>
<td>Amberpet</td>
<td>Y</td>
<td>MD</td>
<td></td>
</tr>
<tr>
<td>Schottenstein</td>
<td>Julie</td>
<td>A</td>
<td>DPM</td>
<td></td>
</tr>
<tr>
<td>Thorpe</td>
<td>Janet</td>
<td></td>
<td>APRN</td>
<td></td>
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<tr>
<td>Wells</td>
<td>Carlianne</td>
<td>R</td>
<td>PA-C</td>
<td></td>
</tr>
<tr>
<td>Zimmer</td>
<td>Kathy</td>
<td>A</td>
<td>PA-C</td>
<td></td>
</tr>
</tbody>
</table>
APPROVED THE FOLLOWING REAPPOINTMENTS: See attached List.

Chief of Staff: ___________________________ Date: 7/10/19

BHMC CEO: ______________________________ Date: 7/10/19

President, CEO: ________________________ Date: ______________

Gino Santorio 07/29/2019 16:09 Eastern Daylig
July 31, 2019

Board of Commissioners
North Broward Hospital District
303 SE 17th Street
Fort Lauderdale, FL 33316

Re:  Reappointment Recommendations
     Medical Staff

Dear Members of the Board:

The Medical Executive Committee, at its July 9, 2019 meeting, approved the recommendation of the clinical departments with regard to the reappointment of members of the Medical Staff at Broward Health Medical Center.

Therefore, the attached Medical Staff Reappointments are hereby submitted for your review and approval.

Very truly yours,

[Signature]

Heather Havericak, Interim CEO

HH/MA
# BHMC Medical Staff Reappointments
## July 2019

### Recommended with No Change in Status
Reappointment Cycle: 7/31/2019 – 6/30/2021

<table>
<thead>
<tr>
<th>Physician</th>
<th>Specialty</th>
<th>Department</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mick Abae, MD</td>
<td>Endocrinology/Infertility</td>
<td>ObGyn</td>
<td>Consulting</td>
</tr>
<tr>
<td>Naaman Abdullah, MD</td>
<td>Cardiothoracic Surgery</td>
<td>Surgery</td>
<td>Courtesy</td>
</tr>
<tr>
<td>Julia Belkowitz, MD</td>
<td>No Clinical Privileges</td>
<td>Family Medicine</td>
<td>Affiliate</td>
</tr>
<tr>
<td>Juan Carbonell, MD</td>
<td>Nephrology</td>
<td>Medicine</td>
<td>Active</td>
</tr>
<tr>
<td>Daniel Castellanos, MD</td>
<td>No Clinical Privileges</td>
<td>Psychiatry</td>
<td>Affiliate</td>
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<tr>
<td>Rebecca Cherner, DO</td>
<td>Family Medicine</td>
<td>Family Medicine</td>
<td>Active</td>
</tr>
<tr>
<td>Peter Cohen, DO</td>
<td>Family Medicine</td>
<td>Family Medicine</td>
<td>Affiliate</td>
</tr>
<tr>
<td>Roberto Cubeddu, MD</td>
<td>Cardiology/Internal Medicine</td>
<td>Medicine</td>
<td>Consulting</td>
</tr>
<tr>
<td>Herman Epstein, MD</td>
<td>ObGyn/Robotic Surgery</td>
<td>ObGyn</td>
<td>Active</td>
</tr>
<tr>
<td>Jean Ferber, MD</td>
<td>Trauma/Critical Care</td>
<td>Surgery</td>
<td>Courtesy</td>
</tr>
<tr>
<td>Jarrod Frydman, DO</td>
<td>Family Medicine</td>
<td>Family Medicine</td>
<td>Courtesy</td>
</tr>
<tr>
<td>Margaret Goresek, MD</td>
<td>Pediatric Infectious Disease/Pediatrics</td>
<td>Pediatrics</td>
<td>Consulting</td>
</tr>
<tr>
<td>Mehmeh Hepgur, MD</td>
<td>Hem/Onc</td>
<td>Medicine</td>
<td>Active</td>
</tr>
<tr>
<td>Frank Hull, MD</td>
<td>Pulmonary/Critical Care</td>
<td>Medicine</td>
<td>Active</td>
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<tr>
<td>Radu Jacob, MD</td>
<td>Nephrology</td>
<td>Medicine</td>
<td>Active</td>
</tr>
<tr>
<td>Neil Miransky, DO</td>
<td>Family/Palliative Care/Medicine</td>
<td>Family Medicine</td>
<td>Active</td>
</tr>
<tr>
<td>Ronald Moore, MD</td>
<td>General/Bariatric Surgery</td>
<td>Surgery</td>
<td>Active</td>
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<tr>
<td>Jerome Obed, DO</td>
<td>Dermatology</td>
<td>Medicine</td>
<td>Active</td>
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<tr>
<td>Hector Ortiz, MD</td>
<td>Pediatric Emergency Medicine</td>
<td>Emergency Medicine</td>
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<tr>
<td>Nelia Sanchez-Crespo, MD</td>
<td>Internal Medicine</td>
<td>Medicine</td>
<td>Active</td>
</tr>
<tr>
<td>Caren Singer, MD</td>
<td>Internal Medicine</td>
<td>Medicine</td>
<td>Sr. Active</td>
</tr>
<tr>
<td>Tiffany Sizemore-Ruiz, DO</td>
<td>Cardiology/Internal Medicine</td>
<td>Medicine</td>
<td>Active</td>
</tr>
<tr>
<td>Luis Soro, DO</td>
<td>Dermatology</td>
<td>Medicine</td>
<td>Consulting</td>
</tr>
<tr>
<td>Jason Walters, MD</td>
<td>Ortho/Ortho Sports Med</td>
<td>Surgery</td>
<td>Courtesy</td>
</tr>
<tr>
<td>Essie Yates, MD</td>
<td>Plastic Surgery</td>
<td>Surgery</td>
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### Recommended with Change in Status
Reappointment Cycle: 7/31/2019 – 6/30/2021

<table>
<thead>
<tr>
<th>Physician</th>
<th>Specialty</th>
<th>Department</th>
<th>Current Status</th>
<th>New Status</th>
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<tr>
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<td>Family Medicine</td>
<td>Family Medicine</td>
<td>Courtesy</td>
<td>Affiliate</td>
</tr>
<tr>
<td>Jeffrey Goorland, MD</td>
<td>Emergency Medicine</td>
<td>Emergency Medicine</td>
<td>Provisional I</td>
<td>Active</td>
</tr>
<tr>
<td>Claire Katz, MD</td>
<td>Internal Medicine</td>
<td>Medicine</td>
<td>Active</td>
<td>Courtesy</td>
</tr>
<tr>
<td>Adel Khatib, DDS</td>
<td>Dentistry</td>
<td>Surgery</td>
<td>Provisional I</td>
<td>Courtesy</td>
</tr>
<tr>
<td>Cosme Manzarbeitia, MD</td>
<td>Transplant/Gen Surg</td>
<td>Surgery</td>
<td>Provisional I</td>
<td>Active</td>
</tr>
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</table>
### Recommended with Change in Status
Reappointment Cycle: 7/31/2019 – 6/30/2020

<table>
<thead>
<tr>
<th>Physician</th>
<th>Specialty</th>
<th>Department</th>
<th>Current Status</th>
<th>New Status</th>
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</thead>
<tbody>
<tr>
<td>Ashneal Sharma, DO</td>
<td>Internal Medicine</td>
<td>Medicine</td>
<td>Provisional I</td>
<td>Provisional II</td>
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</table>

### Reappointments – Allied Health Professional Staff
Recommended with No Change in Status
Reappointment Cycle: 7/31/2019 – 6/30/2021

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Sponsor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Syed Abbas-Rodriguez, APRN-CNM</td>
<td>ObGyn</td>
<td>Nurse Midwife</td>
<td>A. Gonzalez-Garcia, MD</td>
</tr>
<tr>
<td>Yana Dodea, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>H. Epstein, MD</td>
</tr>
<tr>
<td>Luis Garzon, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>A. Villafranca, MD, PA</td>
</tr>
<tr>
<td>Natalie Hunter, APRN</td>
<td>Surgery</td>
<td>Nurse Practitioner</td>
<td>A. Labbie, MD; R. Gosalbez, MD; M. Castellon, MD</td>
</tr>
<tr>
<td>Phillip Lacson, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>W. Allaf, MD</td>
</tr>
<tr>
<td>Lisa Miransky, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>N. Miransky, DO</td>
</tr>
<tr>
<td>Amanda Minnoci, PA-C</td>
<td>Emergency Medicine</td>
<td>Physician Assistant</td>
<td>E. Boyar, MD; G. Lai, DO; C. Carralero, MD</td>
</tr>
<tr>
<td>Sean Norden, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>E. Czinn, MD; G. Cardenas, DO; M. Longo, MD; P. Jordan, MD</td>
</tr>
<tr>
<td>Brittany Poole, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>M. Wells, MD; K. Shrock, MD</td>
</tr>
<tr>
<td>Mark Ramos, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>B. Gupta, MD</td>
</tr>
<tr>
<td>Jamie Richardson, CRNA-APRN</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>E. Czinn, MD</td>
</tr>
<tr>
<td>Debralee Ruocco, PA-C</td>
<td>Emergency Medicine</td>
<td>Physician Assistant</td>
<td>B, Menendez, MD; E. Boyar, MD; C. Carralero, DO</td>
</tr>
<tr>
<td>Brigitte Shaw, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>L. Mandel, MD</td>
</tr>
<tr>
<td>Ashley Wherry, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>E. Czinn, MD; M. Longo, MD; N. Gandreti, MD; G. Cardenas, DO</td>
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### Community Health Services Medical Staff Reappointments
Recommended with NO Change in Status
Reappointment Cycle: 7/31/2019 – 6/30/2021

<table>
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<tr>
<th>Physician</th>
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<tbody>
<tr>
<td>Lori Marcu, MD</td>
<td>Family Medicine</td>
<td>Associate</td>
<td>Associate</td>
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### Community Health Services AHP Reappointments
Recommended with NO Change in Status
Reappointment Cycle: 7/31/2019 – 6/30/2021

<table>
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<tr>
<th>Name</th>
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<td></td>
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<tr>
<td>Physician</td>
<td>Department</td>
<td>Specialty</td>
<td>Recommended Status</td>
</tr>
<tr>
<td>-----------</td>
<td>------------</td>
<td>-----------</td>
<td>--------------------</td>
</tr>
<tr>
<td>None</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

The above applicants have been reviewed by Quality and Health Information Management; they have met the required criteria to be reappointed.

* = Quality review report cited various outcomes, met criteria to be reappointed.
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Nathaniel J Drexler, DO

Date of Birth: 11/26/1982

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: None

Specialty: Critical Care Medicine

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: None

Practice Name: Dhanvan, LLC

Primary Address Information: 7420 NW 5th Street
Suite 103
Plantation, FL 33317
Phone: 954-474-4704
Fax: 954-587-8685
Email: suvanesh@aol.com

ECFMG: N/A

Medical/Professional School: Nova Southeastern College of Osteopathic Medicine
Fort Lauderdale, FL
From: 09/03/2008
To: 05/27/2012
Degree: Doctor of Osteopathic Medicine

Internship: Palmetto General Hospital
Hialeah, FL
From: 07/01/2012
To: 09/30/2013
Specialty: Traditional Rotating Internship

Residency: Broward Health Medical Center
Fort Lauderdale, FL
From: 07/01/2013
To: 09/30/2015
Specialty: Internal Medicine

Hospital Affiliations/ Work History:

Lakeland Medical Center
Lakeland, FL
From: 10/01/2015
To: 08/09/2016
Specialty: Internal Medicine

Locum Leaders
Alpharetta, GA
From: 10/07/2015
To: 08/12/2016
Title: Contacted Locum Tenens Hospitalist

Nathaniel J Drexler, DO
Broward Health – Credentialing Abstract – Medical Staff Applicant

Hospital Affiliations/Work History (continued):

Lee Memorial Health System
Fort Myers, FL
From: 01/28/2016
To: 05/01/2017
Specialty: Internal Medicine

Fellowship:

Palmetto General Hospital
Hialeah, FL
From: 07/01/2016
To: 07/31/2018
Specialty: Critical Care Medicine

Hospital Affiliations/Work History:

South Miami Hospital
South Miami, FL
From: 07/18/2018
To: Present
Specialty: Critical Care / Internal Medicine

Baptist Hospital of Miami
Miami, FL
From: 09/18/2018
To: Present
Specialty: Critical Care / Internal Medicine

West Kendall Baptist Hospital
Miami, FL
From: 09/21/2018
To: Present
Specialty: Critical Care / Internal Medicine

Board Certification:

Board: American Board of Internal Medicine
Specialty: Internal Medicine
Certification Date: 09/15/2016
Certification Expiration: 12/31/2028

Board: American Board of Internal Medicine
Specialty: Critical Care Medicine
Eligibility Date: 07/31/2016
Eligibility Expiration: 07/31/2025

Nathaniel J Drexler, DO
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Yves Jodesty MD

Date of Birth: 03/23/1948
Citizenship: US
Primary Facility: Broward Health North
Other Broward Health Facilities: Broward Health Medical Center

Specialty(ies): Internal Medicine
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: Medicine
Practice Name: Yves Jodesty, MD
Website: www.teamhealth.com

Primary Address Information:
1040 NW 10th Avenue
Fort Lauderdale, FL 33311
Phone: 954-728-9200
Fax: 954-728-8660
Email: jodesty@aol.com

ECFMG:
Number: 0-275-173-3
Date Issued: 12/27/1978

Medical/Professional School:
Universidad Autonoma de Guadalajara
Guadalajara, Mexico
From: 01/01/1972
To: 01/01/1976
Degree: MD

Worked in Mexico and studying for ECFMG before transitioning to New York to start training internship training at Columbia College.
From: 01/02/1978
To: 12/31/1979

Internship:
Columbia College of Physicians and Surgeons–Harlem Hospital Center
New York, NY
From: 01/01/1980
To: 12/31/1980
Specialty: Internal Medicine

Residency:
Columbia College of Physicians and Surgeons–Harlem Hospital Center
New York, NY
From: 01/01/1981
To: 12/31/1982
Specialty: Internal Medicine

Fellowship:
Columbia College of Physicians and Surgeons–Harlem Hospital Center
New York, NY
From: 07/01/1984
To: 06/30/1986
Specialty: Internal Medicine/Pulmonary

Yves Jodesty, MD
# Broward Health – Credentialing Abstract – Medical Staff Applicant

## Hospital Affiliations/Work History:

<table>
<thead>
<tr>
<th>Hospital / Location</th>
<th>From</th>
<th>To</th>
<th>Specialty</th>
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<tbody>
<tr>
<td>Drew Hamilton Clinic, New York, NY</td>
<td>08/01/1986</td>
<td>07/31/1987</td>
<td>Internal Medicine</td>
</tr>
<tr>
<td>Columbia University, New York, NY</td>
<td>08/01/1987</td>
<td>06/30/1998</td>
<td>Instructor for Clinical Medicine</td>
</tr>
<tr>
<td>Liberty Health Care Center, Miami, FL</td>
<td>07/01/1988</td>
<td>09/30/1989</td>
<td>Internal Medicine</td>
</tr>
<tr>
<td>Sunrise Medical Center, Fort Lauderdale, FL</td>
<td>10/01/1989</td>
<td>03/31/1997</td>
<td>Internal Medicine</td>
</tr>
<tr>
<td>Broward Health Medical Center, Fort Lauderdale, FL</td>
<td>03/22/1996</td>
<td>09/28/2016</td>
<td>Internal Medicine</td>
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<tr>
<td>Manor Medical Center (Private Practice), Fort Lauderdale, FL</td>
<td>03/25/1996</td>
<td>Present</td>
<td>Internal Medicine</td>
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<tr>
<td>Broward Health North, Deerfield Beach, FL</td>
<td>03/24/1999</td>
<td>Present</td>
<td>Internal Medicine</td>
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<tr>
<td>FLACS (Teamhealth), Sunrise, FL</td>
<td>07/01/2006</td>
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## Board Certification:

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<tr>
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<td>American Board of Internal Medicine</td>
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Yves Jodesty, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Carlo E Guevara, MD, DDS

Date of Birth: 01/15/1982
Citizenship: US

Primary Facility: Broward Health North
Other Broward Health Facilities: Broward Health Medical Center

Specialty(ies): Oral/Maxillofacial Surgery
Dept. at Primary Facility: Surgery
Secondary Facility Depts.: Surgery
Practice Name: South Florida Dental Implant and Facial Surgery Center

Primary Address Information: 2600 East Commercial Boulevard
Apartment 200
Fort Lauderdale, FL 33305
Phone: 954-566-0300
Fax: 954-566-9066
Email: info@drmatouk.com

ECFMG: N/A

Medical/Professional School: Columbia University Dental School
New York, NY
From: 09/05/2005
To: 05/18/2010
Degree: DDS

University of Florida College of Medicine
Gainesville, FL
From: 08/01/2011
To: 05/10/2014
Degree: MD

Internship: N/A

Residency: University of Florida College of Medicine-Shands Jacksonville
Jacksonville, FL
From: 07/01/2010
To: 06/30/2016
Specialty: Oral and Maxillofacial Surgery

Fellowship: University of Florida College of Medicine
Gainesville, FL
From: 07/01/2016
To: 06/30/2017
Specialty: Pediatric Cleft-Craniofacial Surgery

Hospital Affiliations/Work History: University of Florida- Dept of OMFS
Gainesville, FL
From: 07/01/2010
To: Present
Title: Clinical Assistant Professor

Carlo E Guevara, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

**Hospital Affiliations/Work History (continued):**
University of Florida Health
Jacksonville, FL

<table>
<thead>
<tr>
<th>From</th>
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<tr>
<td>06/31/2016</td>
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**Board Certification:**

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<tbody>
<tr>
<td>American Board of Oral and Maxillofacial Surgery</td>
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<td>03/01/2018</td>
<td>12/31/2028</td>
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</table>

Carlo E. Guevara, MD
Broward Health – Credentialing Abstract -- Medical Staff Applicant

Name: Darwin M Koller, MD

Date of Birth: 09/16/1971

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: Broward Health Coral Springs

Specialty: Pediatric Emergency Medicine

Dept. at Primary Facility: Emergency Medicine

Secondary Facility Dept.: Emergency Medicine

Practice Name: TIVA Healthcare

Primary Address Information: 7700 West Sunrise Blvd
Plantation, FL 33322
Phone: 954-939-7009
Fax: 954-616-3596
Email: Jillean McEwan@tivahealthcare.com

ECFMG: N/A

Medical/Professional School: Eastern Virginia Medical School
Norfolk, VA
From: 08/11/1995
To: 05/22/1999
Degree: MD

Internship: None

Residency: Connecticut Children’s Medical Center
Hartford, CT
From: 07/01/1999
To: 06/30/2002
Specialty: Pediatrics

Fellowship: University of Louisville Norton Children’s Hospital
Louisville, KY
From: 07/01/2002
To: 06/30/2005
Specialty: Pediatric Emergency Medicine

Hospital Affiliations/Work History:

- Children’s Hospital at Erlanger
  Chattanooga, TN
  From: 07/28/2005
  To: 06/28/2018
  Specialty: Pediatric Emergency

- Columbus Regional Medical Center Midtown INV
  Columbus, GA
  From: 08/21/2018
  To: Present
  Specialty: Pediatric Emergency

Darwin M Koller, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

<table>
<thead>
<tr>
<th>Board Certification:</th>
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<tr>
<td>Specialty:</td>
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<td>Certification Date:</td>
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<tr>
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<td>Certification Date:</td>
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Darwin M Koller, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: **Ian Kowalski, DO**

Date of Birth: 07/24/1980

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:

- Broward Health Imperial Point

Specialty(ies): Palliative Care Medicine
- Internal Medicine

Dept. at Primary Facility: Medicine

Secondary Facility Depts.:
- Medicine

Practice Name: Palliative Care Associates

Website: www.pallmed.com

Primary Address Information:
- 500 South East 17th Street
- Suite 301
- Fort Lauderdale, FL 33316
- Phone: 954-639-1364
- Fax: 954-752-7080
- Email: christine@pallmed.com

ECFMG: N/A

Medical/Professional School: Nova Southeastern College of Osteopathic Medicine
- Fort Lauderdale, FL

From: 07/01/2011
To: 05/15/2015
Degree: DO

Internship: N/A

Residency:
- Broward Health Medical Center
- Fort Lauderdale, FL

From: 07/01/2015
To: 06/30/2018
Specialty: Internal Medicine

Fellowship:
- Broward Health Medical Center
- Fort Lauderdale, FL

From: 07/01/2018
To: 06/30/2019
Specialty: Hospice & Palliative Medicine

Hospital Affiliations/Work History: N/A
### Broward Health – Credentialing Abstract – Medical Staff Applicant

<table>
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<tr>
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Ian Kowalski, DO
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Philip T Miner MD
Date of Birth: 09/04/1945
Citizenship: US
Primary Facility: Broward Health Medical Center
Other Broward Health Facilities: None
Specialty(ies): Pediatric Neurology
Dept. at Primary Facility: Pediatrics
Secondary Facility Depts.: None
Practice Name: All Star Recruiting Locums LLC
Website: http://www.allstarrecruiting.com/
Primary Address Information: 800 Fairway Drive
Suite 300
Deerfield Beach, FL 33441
Phone: 800-928-0229
Fax: 888-503-0752
Email: elegg@astlocums.com
ECFMG: N/A
Medical/Professional School: Sidney Kimmel Medical College at Thomas Jefferson University
Philadelphia, PA
From: 08/01/1965
To: 06/30/1970
Degree: MD
Internship: Children's National Medical Center
Washington, DC
From: 07/01/1970
To: 06/30/1971
Specialty: Pediatrics
Residency: Valley Medical Center (University Medical Center California)
Madera, CA
From: 07/01/1971
To: 06/30/1972
Specialty: Pediatrics
Military Service: United States Army
Europe
From: 07/01/1972
To: 06/30/1976
Residency: Letterman Army Medical Center (Unable to verify – facility closed)
San Francisco, CA
From: 07/01/1976
To: 06/30/1977
Specialty: Pediatrics
Military Service: United States Army
Newport News, VA
From: 07/01/1977
To: 06/30/1979

Philip T Miner, MD
# Broward Health – Credentialing Abstract – Medical Staff Applicant

**Fellowship:**
University of Cincinnati Medical Center  
Cincinnati, OH  
From: 07/01/1979  
To: 06/30/1982  
Specialty: Pediatric Neurology

**Hospital Affiliations/Work History:**
University of Oklahoma  
Oklahoma City, OK  
From: 07/01/1982  
To: 12/31/1983  
Title: Assistant Clinical Profess of Pediatric Neurology

Private Practice – Pediatric Neurology  
Oklahoma City, OK  
From: 07/01/1983  
To: 12/31/1984  
Specialty: Pediatric Neurology

Michael Reese Hospital *(Unable to verify – facility closed)*  
Chicago, IL  
From: 01/01/1984  
To: 12/31/1993  
Specialty: Pediatric Neurology

Medical Center of Central Georgia – Navicent  
Macon, GA  
From: 09/01/1994  
To: 08/31/1997  
Specialty: Pediatric Neurology

Swedish American Hospital  
Rockford, IL  
From: 09/22/1997  
To: 01/25/2018  
Specialty: Pediatric Neurology

Rockford Health System  
Rockford, IL  
From: 09/25/1997  
To: 09/28/2018  
Specialty: Pediatric Neurology

OSF Saint Anthony Medical Center  
Rockford, IL  
From: 06/15/1998  
To: 05/31/2010  
Specialty: Pediatric Neurology

Orlando Health Arnold Palmer Hospital  
Orlando, FL  
From: 03/27/2017  
To: Present  
Specialty: Pediatric Neurology

**Board Certification:**
Board: American Board of Psychiatry and Neurology  
Specialty: Neurology with Special Qualifications in Child Neurology  
Certification Date: 11/30/1987  
Certification Expiration: Lifetime Certification

Philip T. Miner, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Board: American Board of Pediatrics
Specialty: Pediatrics
Certification Date: 07/01/1978
Certification Expiration: Lifetime Certification

Philip T Miner, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Andres Morgado-Laureano MD

Date of Birth: 05/02/1986

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:
- Broward Health Coral Springs
- Broward Health Imperial Point
- Broward Health North

Specialty(ies): Radiology

Dept. at Primary Facility: Radiology

Secondary Facility Depts.: Radiology
- Medicine

Practice Name: North Broward Radiologists PA
Website: https://nbradiologists.com/

Primary Address Information:
1901 South Perimeter Road
Suite 180
Fort Lauderdale, FL 33309
Phone: 954-839-8080
Fax: 954-839-8081
Email: ncuestas@nbradiologists.com

ECFMG: N/A

Medical/Professional School:
University of Puerto Rico School of Medicine
San Juan, PR
From: 06/01/2009
To: 06/30/2013
Degree: MD

Internship:
San Juan City Hospital
San Juan, PR
From: 07/01/2013
To: 06/30/2014
Specialty: Transitional Year

Residency:
University of Miami Miller School of Medicine
Miami, FL
From: 07/01/2014
To: 06/30/2018
Specialty: Radiology

Fellowship:
University of Miami Miller School of Medicine
Miami, FL
From: 07/01/2018
To: 06/30/2019
Specialty: Vascular and Interventional Radiology

Hospital Affiliations/Work History: N/A

Board Certification:
Board: American Board of Radiology
Specialty: Interventional Radiology and Diagnostic Radiology
Eligibility Date: 06/30/2019
Eligibility Expiration: 06/30/2026

Andres Morgado-Laureano, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Jovana Obradovic MD

Date of Birth: 09/25/1989

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:
- Broward Health Coral Springs
- Broward Health Imperial Point
- Broward Health North

Specialty(ies):
- Emergency Medicine

Dept. at Primary Facility:
- Emergency Medicine

Secondary Facility Depts.:
- Medicine
- Emergency Medicine

Practice Name: Envision Physician Services
Website: www.envision.com

Primary Address Information:
- 1600 South Andrews Avenue
  Emergency Department
  Fort Lauderdale, FL 33316
  Phone: 954-355-5199
  Fax: 954-355-5113
  Email: Kim.Durcan@emcare.com

ECFMG: N/A

Medical/Professional School: University of Central Florida
Orlando, FL
- From: 05/04/2012
- To: 05/20/2019
- Degree: MD

Internship/Residency:
- Orlando Health Emergency Medicine
  Orlando, FL
- From: 07/01/2016
- To: 07/01/2019
- Specialty: Emergency Medicine

Fellowship: N/A

Hospital Affiliations/Work History: N/A

Board Certification:
- Board: American Board of Emergency Medicine
- Specialty: Emergency Medicine
- Eligibility Date: 06/30/2019
- Eligibility Expiration: 06/30/2028

Jovana Obradovic, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Erasmo Passaro Sr., MD

Date of Birth: 12/05/1961

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:

Specialty(ies): Clinical Neurophysiology, Telemedicine, Neurology

Dept. at Primary Facility: Medicine

Secondary Facility Depts.:

Practice Name: Advanced Medical Resources, LLC
Website: www.amrorservices.com

Primary Address Information:
2150 Town Square Place
Suite 290
Sugarland, TX 77479
Phone: 281-768-5747
Fax: 281-768-5735
Email: Emaldonado@amrorservices.com

ECFMG: N/A

Medical/Professional School:
Rutgers Robert Wood Johnson Medical School
Piscataway, NJ
From: 08/29/1984
To: 05/06/1988
Degree: MD

Internship:
University of California Los Angeles
Sylmar, CA
From: 05/24/1988
To: 06/23/1989
Specialty: Internal Medicine

Residency:
University of California San Diego
La Jolla, CA
From: 07/01/1989
To: 06/30/1990
Specialty: Psychiatry

University of California Los Angeles
Los Angeles, CA
From: 07/01/1990
To: 06/30/1993
Specialty: Neurology

Fellowship:
University of California Los Angeles
Los Angeles, CA
From: 07/01/1993
To: 06/30/1995
Specialty: Epilepsy and EEG

Erasmo Passaro, Sr. MD
# Broward Health – Credentialing Abstract – Medical Staff Applicant

**Hospital Affiliations/ Work History:**

| University of South Florida - Tampa General Hospital **Unable to verify** |
| From: 07/01/1995 |
| To: 12/31/1997 |
| Title: Clinical Assistant Professor of Neurology |

**Gap:**

| Relocated from Florida to Michigan |
| From: 01/01/1998 |
| To: 01/31/1998 |

| University of Michigan |
| From: 02/02/1998 |
| To: 05/10/2002 |
| Title: Assistant Professor of Neurology/Director, Adult Epilepsy Laboratory |

**Gap:**

| Relocated from Michigan to Florida |
| From: 05/11/2002 |
| To: 07/09/2002 |

**Bayfront Health System**

| St. Petersburg, FL |
| From: 07/10/2002 |
| To: Present |
| Specialty: Neurology |

**Edward White Hospital**

| St. Petersburg, FL |
| From: 07/16/2002 |
| To: 11/24/2014 |
| Specialty: Neurology |

**St. Anthony’s Hospital**

| St. Petersburg, FL |
| From: 08/01/2002 |
| To: Present |
| Specialty: Neurology |

**Johns Hopkins All Children’s Hospital**

| St. Petersburg, FL |
| From: 08/01/2002 |
| To: Present |
| Specialty: Clinical Neurophysiology |

**Tampa General Hospital**

| Tampa, FL |
| From: 06/30/2003 |
| To: Present |
| Specialty: Clinical Neurophysiology |

**University of South Florida**

| Tampa, FL |
| From: 10/01/2004 |
| To: 07/31/2007 |
| Title: Associate Professor (Affiliate) |

**Florida Center for Neurology**

| St. Petersburg, FL |
| From: 04/01/2009 |
| To: Present |
| Title: Director of Practice |

Erasmo Passaro, St.MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Hospital Affiliations/
Work History (continued):

Florida Hospital - Carrollwood (INV)
Tampa, FL
From: 02/24/2010
To: 08/31/2017
Specialty: Neurology

Florida Hospital Tampa
Tampa, FL
From: 02/24/2010
To: Present
Specialty: Teleneurology

Palms of Pasadena Hospital
St. Petersburg, FL
From: 10/01/2013
To: 12/31/2017
Specialty: Neurology

St. Joseph's Hospital (Baycare)
Tampa, FL
From: 06/25/2014
To: Present
Specialty: Clinical Neurophysiology

South Florida Baptist Hospital (Baycare - INV)
Plant City, FL
From: 08/12/2014
To: Present
Specialty: Neurology

Northside Hospital
Saint Petersburg, FL
From: 02/22/2017
To: Present
Specialty: Neurology

Oak Hill Hospital
Brookeville, FL
From: 10/26/2017
To: Present
Specialty: Neurology

Largo Medical Center (HCA)
Largo, FL
From: 11/28/2017
To: Present
Specialty: Neurology

Regional Medical Center - Bayonet Point (HCA)
Hudson, FL
From: 11/29/2017
To: Present
Specialty: Clinical Neurophysiology

Morton Plant North Bay Hospital
New Port Richey, FL
From: 08/14/2018
To: Present
Specialty: Clinical Neurophysiology

Erasmo Passaro, Sr.MD
### Board Certification

<table>
<thead>
<tr>
<th>Board</th>
<th>Specialty</th>
<th>Certification Date</th>
<th>Certification Expiration</th>
<th>Recertification Date</th>
<th>Recertification Expiration</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Board of Psychiatry and Neurology</td>
<td>Neurology</td>
<td>04/30/1995</td>
<td>12/31/2005</td>
<td>02/09/2015</td>
<td>12/31/2025</td>
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<td>American Board of Psychiatry and Neurology</td>
<td>Clinical Neurophysiology</td>
<td>04/05/1997</td>
<td>12/31/2007</td>
<td>05/01/2017</td>
<td>12/31/2027</td>
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<td>American Board of Psychiatry and Neurology</td>
<td>Epilepsy</td>
<td>10/28/2013</td>
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<td>03/01/2020</td>
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<td>American Board of Psychiatry and Neurology</td>
<td>Sleep Medicine</td>
<td>11/01/2007</td>
<td>11/20/2017</td>
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<td>12/31/2027</td>
</tr>
</tbody>
</table>
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Ekta Sharma DO

Date of Birth: 01/31/1989

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: None

Specialty(ies): Pediatrics

Dept. at Primary Facility: Pediatrics

Secondary Facility Depts.: None

Practice Name: North Broward Hospital District
Website: www.browardhealth.org

Primary Address Information: 2866 E Oakland Park Blvd
2nd Floor
Fort Lauderdale, FL 33306
Phone: 954-462-8323
Fax: 954-463-1149
Email: p3thomas@browardhealth.org

ECFMG: N/A

Medical/Professional School: Edward Via College of Osteopathic Medicine-Carolinas Campus
Spartanburg, SC

From: 07/01/2011
To: 05/23/2015
Degree: DO

Internship:
Broward Health Medical Center
Fort Lauderdale, FL
From: 07/01/2015
To: 06/30/2016
Specialty: Family Medicine

Residency:
Broward Health Medical Center
Fort Lauderdale, FL
From: 07/01/2016
To: 06/30/2019
Specialty: Pediatrics

Fellowship: N/A

Hospital Affiliations/Work History: N/A

Board Certification:
Board: American Osteopathic Board of Pediatrics
Specialty: Pediatrics
Eligibility Date: 06/30/2019
MOC Reverification Date: N/A
Eligibility Expiration: 06/30/2026
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Yungping Wang, DO

Date of Birth: 08/30/1979

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: None

Specialty: Critical Care Medicine

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: None

Practice Name: Dhanvan, LLC

Primary Address Information: 7420 NW 5th Street
                                    Suite 103
                                    Plantation, FL 33317
                                    Phone: 954-474-4704
                                    Fax: 954-587-8686
                                    Email: suvanesh@aol.com

ECFMG: N/A

Medical/Professional School: Touro University
                                    Henderson, NV
From: 07/01/2007
To: 06/30/2011
Degree: DO

Internship: N/A

Residency: Plaza Medical Center of Ft. Worth
                                    Ft. Worth, TX
From: 07/11/2011
To: 06/30/2014
Specialty: Internal Medicine

Fellowship: Palmetto General Hospital
                                    Hialeah, FL
From: 07/01/2014
To: 06/30/2016
Specialty: Critical Care Medicine

Hospital Affiliations/ Work History: Palmetto General Hospital
                                    Hialeah, FL
From: 06/23/2014
To: Present
Specialty: Internal Medicine/Critical Care Medicine

Naples Community Hospital
Naples, FL
From: 06/16/2016
To: 11/17/2017
Specialty: Critical Care Medicine

Yungping Wang, DO
### Hospital Affiliations

**Work History (continued):**

<table>
<thead>
<tr>
<th>Hospital Affiliation</th>
<th>Location</th>
<th>From</th>
<th>To</th>
<th>Specialty</th>
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</thead>
<tbody>
<tr>
<td>Baptist Hospital of Miami</td>
<td>Miami, FL</td>
<td>10/17/2017</td>
<td>Present</td>
<td>Critical Care Medicine</td>
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<tr>
<td>Wellington Regional Medical Center</td>
<td>Wellington, FL</td>
<td>10/30/2017</td>
<td>05/22/2018</td>
<td>Critical Care Medicine</td>
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<tr>
<td>West Kendall Baptist Hospital</td>
<td>Miami, FL</td>
<td>01/18/2018</td>
<td>Present</td>
<td>Critical Care Medicine</td>
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</tbody>
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### Board Certification

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<tr>
<th>Board</th>
<th>Specialty</th>
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<tr>
<td>American Osteopathic Board of Internal Medicine</td>
<td>Internal Medicine</td>
<td>09/10/2014</td>
<td>12/31/2024</td>
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<tr>
<td>American Osteopathic Board of Internal Medicine</td>
<td>Critical Care Medicine</td>
<td>08/20/2018</td>
<td>12/31/2028</td>
</tr>
</tbody>
</table>

Yungping Wang, DO
<table>
<thead>
<tr>
<th>Name:</th>
<th>Tamara Coleburn, APRN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth:</td>
<td>08/30/1983</td>
</tr>
<tr>
<td>Citizenship:</td>
<td>US</td>
</tr>
<tr>
<td>Primary Facility:</td>
<td>Broward Health Medical Center</td>
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<tr>
<td>Other Broward Health Facilities:</td>
<td>None</td>
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<tr>
<td>Specialty:</td>
<td>Nurse Practitioner</td>
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<tr>
<td>Dept. at Primary Facility:</td>
<td>Medicine</td>
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<td>Secondary Facility Depts.:</td>
<td>None</td>
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<tr>
<td>Physician Sponsorship:</td>
<td>Sunil Kumar, MD</td>
</tr>
<tr>
<td>Practice Name:</td>
<td>Dhanvan, LLC</td>
</tr>
<tr>
<td>Primary Address Information:</td>
<td>7420 NW 5th Street Suite 103 Plantation, FL 33317 Phone: 954-474-4704 Fax: 954-587-8686 Email: <a href="mailto:suvanesh@aol.com">suvanesh@aol.com</a></td>
</tr>
<tr>
<td>Professional School:</td>
<td>South University Royal Palm Beach, FL From: 01/07/2016 To: 09/15/2018 Degree: MSN Major: Family Nurse Practitioner</td>
</tr>
<tr>
<td>Hospital Affiliations/Work History:</td>
<td>Aventura Hospital and Medical Center Aventura, FL From: 02/08/2008 To: Present Title: Respiratory Therapist Holy Cross Hospital Fort Lauderdale, FL From: 01/10/2017 To: 01/29/2019 Title: Respiratory Therapist Board Certification: Board: American Nurses Credentialing Center Specialty: Family Nurse Practitioner Certification Date: 12/05/2018 Certification Expiration: 12/05/2023</td>
</tr>
</tbody>
</table>

Tamara Coleburn, APRN
GA-004-012 Gifts, Gratuities, and Business Courtesies

I. Purpose

Federal and State laws and the regulations promulgated there under (including those which are commonly referred to as the anti-kickback, Stark, and civil monetary penalty statutes and regulations) prohibit the acceptance of any item of value (remuneration) made directly or indirectly, in cash or in kind, that may induce or appear to induce the purchase, recommendation to purchase or referral of any kind of health care goods, services, or items reimbursed by a federal or state health care program such as Medicare and Medicaid. Consequently, the acceptance of any gifts or business courtesies from any third-parties with whom Broward Health conducts business or who are seeking to do business with Broward Health, may implicate Federal and State prohibitions.

Broward Health adopted a Conflicts of Interest policy with additional disclosure requirements to mitigate potential or actual conflicts of interest. Therefore, this policy is intended to provide parameters for appropriate decision-making regarding the acceptance or provision of gifts and business courtesies, whether such gifts or gratuities are offered by patients, vendors, suppliers,

II. Key Terms

Please see Broward Health policy GA-004-237, Policies and Procedures Glossary, for all definitions.

III. Policy

Broward Health is a publicly funded institution with an obligation to preserve public trust and to provide an environment where those engaged by or working in the work environment are free from Conflicts of Interest. At Broward Health, we strive to conform to the highest standards of institutional and professional ethics. This policy is intended to provide non-exhaustive guidelines regarding the acceptance or provision of gifts and business gratuities, whether such gifts or gratuities are offered by patients, vendors, suppliers,
Certain gifts and donations may be permissible. Other gifts/gratuities (often those provided by referral sources, vendors/suppliers) could be considered a potential conflict of interest or illegal “kickback” (e.g. payment(s) or gift(s) which are intended to induce the referral or business to the party making the gift). Accepting any gift or gratuity intended to induce or reward referrals or to result in the purchase of goods or services is strictly prohibited.

A. OVERALL POLICY: To prevent any perception that judgments or medical decisions are influenced by factors other than fulfilling the mission of Broward Health, the best interests of our patients, and the community we serve, all workforce members are prohibited from offering, soliciting, or accepting gifts or other items of equivalent value to influence the provision for or contracting of services. Additionally workforce members are prohibited from accepting any gifts from referral sources and vendors/suppliers, including but not limited to physician offices, manufacturers and suppliers of pharmaceuticals, medical devices, equipment, and supplies, unless considered nominal (i.e. promotional items such as pens and similar items as long as the promotional item does not exceed nominal value and/or does not appear to influence the workforce member’s duties and judgment at Broward Health).

B. IMPROPER INDUCEMENTS: As Broward Health is a public institution and is a recipient of state and federal healthcare funds, our workforce members are prohibited from accepting cash or anything of value (“kickbacks”) in exchange for purchasing, leasing, ordering, or recommending the purchase, lease, or ordering of any goods, facilities, services or other items covered by Medicare or Medicaid.

C. ACCEPTING GIFTS, COURTESIES, OR PAYMENTS:

1. Cash gifts or gratuities: Cash or cash equivalents are inappropriate as a gift and may not be accepted. Any workforce member who gives or accepts cash as a gift or gratuity to or from patients, family members, visitors, vendors/suppliers, sales representatives, referral sources, and others will be subject to disciplinary action.

2. Non-monetary gifts: During special occasions (e.g. the holiday season, Nurse’s Week, etc.), patients and vendors may give nominal and perishable items such as food, popcorn, cookies, etc. provided that the nonmonetary gift is infrequent, modest, shared among the entire department, and does not appear to influence workforce members’ duties and judgment at Broward Health.

3. Business Courtesies: Business courtesies of personal benefit, such as tickets to a sporting event, theatrical event, or golf outing may not be accepted.

4. Monetary Gifts to the Hospitals: Patients or families that request information about opportunities to give to the hospital or any operational area should be referred to the Broward Health Foundation. Monetary gifts received by any facility of Broward Health should be promptly forwarded to the Broward Health Foundation or other area approved to receive donations in accordance with policy (e.g. CDTC). The recipient shall abide by Broward Health donation policies and procedures regarding receipt of donation.

5. Gifts of equipment: Gifts, offers, or donations of equipment to any facility should be coordinated through the facility’s Administration. Prior to the acceptance of any gift, offer, or donation of equipment, the equipment should be evaluated based on Broward Health’s selection policies and procedures, approved by the facility’s Administration, and coordinated through the Broward Health Foundation or other area approved.
6. **Gifts from vendors**: Gifts from vendors/suppliers or referral sources, including, but not limited to community physician offices, manufacturers and suppliers of pharmaceuticals, medical devices, equipment and supplies, are prohibited.

7. **Offers of payment or benefit for services**: If a payment or benefit is offered by another party in return for some service by a workforce member, the workforce member must report the offer immediately to their manager or the Corporate Compliance Department for determination of whether the arrangement is appropriate and whether the workforce member can accept.

8. **Donations**: The Broward Health Foundation and CDTC have the discretion to accept or decline donations. Further information regarding donations can be found in Receipt of Donations – Accounting of Receipts/Disbursements of Donated Funds/Property/Equipment Policy.

**D. PROVISION OF GIFTS TO VENDORS/SUPPLIERS, REFERRAL SOURCES, ETC.**

1. **Inducement of referrals**: Federal law and Broward Health policy makes it unacceptable for workforce members to give gifts, cash, or other benefits to vendors, outside providers or suppliers, unless the gift or benefit is of a nominal value. Such activities are therefore prohibited.

2. **Promotional items**: The Corporate Marketing Department and/or other departments at Broward Health may develop promotional items of nominal value that promote awareness of Broward Health’s clinical programs and missions for referral sources or patients that is consistent with Broward Health’s mission and is not or does not appear to be utilized to gain referrals or business to Broward Health.

**IV. Procedures**

A. Activities which are (or appear to be) in violation of this policy should be immediately reported to management or the Corporate Compliance Department. Based on Broward Health’s Code of Conduct and Non-Retaliation Policy, GA-004-305, any reporter may be anonymous if desired. Workforce members who violate this policy will be subject to disciplinary action including, but not limited to, disciplinary action, suspension of hospital privileges, or termination of employment/contractual relationship.

B. Hospital managers and administration shall be responsible for helping to enforce this policy. All violations must be reported to the Corporate Compliance Department for appropriate corrective action (as required) and resolution.

**V. Related Policies and Compliance Documents**

- Broward Health Code of Conduct
- Conflicts of Interest, Policy No. GA-004-015

**VI. References**

N/A

**Attachments:**

- Gifts, Gratuities, and Business Courtesies Matrix
Gifts and Gratuities
Guideline

Definitions:

Gifts: Items of value that include, but are not limited to, cash and cash equivalents, meals and other food items, flowers, promotional items, discounts, travel and/or lodging expenses, tickets to sporting events or entertainment events, tickets to hospital sponsored events (e.g. golf outings and galas), vendor sponsored educational sessions and payment for seminars and conferences.

Nominal Value: Limited value as not to be reasonably perceived as an attempt to affect the judgment of the recipient or induce referrals. For purposes of these guidelines, employees and physicians may use their best judgment to assign a reasonable estimated value to the gifts.

<table>
<thead>
<tr>
<th>Type</th>
<th>Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>General</td>
<td>Generally, employees and physicians are prohibited from soliciting, accepting, or providing gifts. Gifts should never be accepted if they are intended to influence the individual in taking an action or making a decision or to reward the individual for work done at Broward Health. Items provided to physicians are dictated by Broward Health’s Non-Monetary Compensation to Physicians and Immediate Family Members Policy and CMS Requirements.</td>
</tr>
<tr>
<td></td>
<td>Acceptance of cash or cash equivalents (e.g. gift cards) by any Broward Health employee or physician from patients, families and vendors is never acceptable.</td>
</tr>
<tr>
<td></td>
<td>Staff may accept infrequent perishable items of nominal value that can be shared amongst the entire department (i.e. flowers, pizza) from patients. In addition, items which are nominal in value and solely promotional in nature, such as items bearing a vendor’s logo or given to commemorate an event, are acceptable on an occasional basis.</td>
</tr>
<tr>
<td></td>
<td>If the particular, on the spot circumstances dictate that the gift be accepted (e.g. to avoid a confrontation or insulting the giver of the gift because of cultural considerations), then the gift should be accepted but the Corporate Compliance Department must be notified immediately and the gift turned over to them. The Corporate Compliance Department will log the event in Comply Track and determine the disposition of the gift.</td>
</tr>
<tr>
<td></td>
<td>It is not appropriate for Broward Health employees or physicians to solicit items for personal or departmental use.</td>
</tr>
</tbody>
</table>
| Solicitation of Gifts | This includes, but is not limited to, gifts, payments or loans from a vendor, physician or physician group, patient, patient’s family or any other individual or entity doing business with Broward Health.

Soliciting gifts from vendors or individuals affiliated with the entity, including physicians, for the purpose of holding a department party or celebration week is not permitted. Inquiries from vendors and physicians regarding departmental parties or celebration weeks shall be referred to the entity CEO in conjunction with their respective Regional Compliance Manager. |
| Gifts from Patients and their Families | No gifts or items of value should be solicited or accepted from patients or their families, but rather the patient should be thanked, politely informed of Broward Health policy against acceptance of gifts, and directed to the Broward Health Foundation where the gift can be accepted on behalf of Broward Health.

Staff may accept infrequent perishable items of nominal value that can be shared amongst the entire department (i.e. flowers, pizza) from patients. |
| Gifts from Vendors | It is inappropriate for Broward Health or any of its employees and physicians to request or receive goods and/or services from any vendor for personal use or enjoyment. No vendor may offer gifts, monies or business services to Broward Health employees or physicians that could violate Federal Anti-Kickback statues.

Items which are nominal in value and solely promotional in nature, such as items bearing a vendor’s logo or given to commemorate an event, are acceptable on an occasional basis. |
| Conferences, Seminars and Educational Events | Payments by vendors for conferences and seminars attended by Broward Health employees are not permitted unless included in that particular vendor’s contractual arrangement with Broward Health. If attendance is required at a conference, seminar or user group, payment shall be made by the respective Broward Health operating entity.

Vendor sponsored educational events, which may include continuing education credits, (such as lunch and learns) at a Broward Health entity or other local venue are permissible if the following criteria are met: 1) the primary purpose of the education must be the distribution of objective scientific information or educational activity; 2) acceptance of education support must never be made, conditioned on or related in any way to preexisting or future business relationships with the vendor; 3) Broward Health management must be present to supervise any educational event. |
discussion, and 4) all educational events at a Broward Health entity involving continuing education credits will be
governed by the applicable Learning and Development Department processes (including compliance with ACCME
Standards). Meals associated with such events must be in accordance with Broward Health policy.

Meals and other food items provided by vendors without an approved educational purpose or legitimate business
purpose are not permitted, unless approved by Broward Health senior management. Broward Health is a drug and
alcohol-free campus and use of Broward Health funds for the purchase of alcohol is not permitted.

Paid transportation, meals and or lodging for product evaluation from a potential or existing vendor is not
permitted, unless negotiated and address in the vendor’s contractual arrangement with Broward Health. All
expenses related to this process shall be paid by the respective Broward operating entity.

| Drug Samples | Individuals licensed to prescribe and dispense medications may accept Drug Samples from Industry for distribution
to patients.

No drug samples that are not on the Hospital formulary may be given to hospital patients.

Distribution of Drug Samples to persons other than patients carries the inference that such Drug Sample is a gift and
carries risk to Broward Health and the individual’s reputation. Individuals who interact with Industry representatives
concerning Drug Samples are strongly discouraged from accepting Drug Samples unless particular samples pose
significant benefits are generally not used by the general population, are usually needed quickly, and whose
benefits outweigh the regulatory, safety, security, and other risks posed by such samples.

For example, easily affordable or obtainable items that could be viewed as inappropriate (e.g. a widely used, over
the counter product found at a supermarket) but accept Samples for more expensive items that pose a problem for
the Broward Health population or items that should reach the patient quickly after the patient encounter, and
generally would not be viewed as inappropriate (e.g. an antibiotic).

| Gifts Exchanged pursuant to Personal Friendships | An employee who has become friends with an individual who has a business relationship with the Company and
who engages in the practice of exchanging personal (non-work related) gifts with that individual may do so without
any limits, provided the employee does not include the gift as a business expense for tax purposes and does not
charge the Company or otherwise receive reimbursement from the Company to cover this expense. |
<table>
<thead>
<tr>
<th>Non-Broward Health Events</th>
<th>However, personal gifts that may lead to an appearance of impropriety or undue influence in conduct of his/her responsibilities at Broward Health shall never be accepted.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Meals and Entertainment</td>
<td>Broward Health recognizes that attendance at non-Broward Health events, such as golf outings, and galas, may serve a beneficial business purpose. However, since the value associated with these events is not nominal, payment by vendors is not permitted. If attendance at such events is deemed warranted, payment shall be made by the respective operating entity.</td>
</tr>
<tr>
<td>Business Meals and Entertainment</td>
<td>Business meals include reasonable amounts spent on food and other refreshments purchased in surroundings conducive to and including a business discussion with vendors, customers, or other clients.</td>
</tr>
<tr>
<td>Business Meals and Entertainment</td>
<td>Broward Health will reimburse entertainment expenses only provided that the entertainment will directly benefit Broward Health, or if it directly precedes or follows a substantial and bona fide business discussion for the purposes of obtaining business benefit.</td>
</tr>
<tr>
<td>Business Meals and Entertainment</td>
<td>Business entertainment expenses include, such items as the cost of meals and beverages, and the cost of transportation directly related to the above.</td>
</tr>
<tr>
<td>Business Meals and Entertainment</td>
<td>Entertainment expenses not designated as meals require additional evaluation on the travel expense report. The expense reporting will include date, names of the individuals, titles, and companies, as well as the business purpose. The most senior employee present should pay all the business entertainment expenses.</td>
</tr>
<tr>
<td>Business Meals and Entertainment</td>
<td>Employees should always use their judgment and common sense when charging business meals an entertainment.</td>
</tr>
<tr>
<td>Support for Research Related Activities</td>
<td>All Industry gifts/support for research-related activities must be processed through Broward Health Contracts Administration. Grants, awards, and/or donations to support research or education may be accepted by Broward Health only if: (i) the Industry Support is accompanied with the vendor’s certification that the support is given to support Broward Health research or education and is not intended to influence purchasing decisions or research</td>
</tr>
<tr>
<td><strong>Charitable Gifts from Vendors/Industry</strong></td>
<td>Any charitable gift provided by vendors/industry need to be governed and overseen by the Broward Health Foundation or other area approved by Broward Health to receive donations (e.g. CDTC) to ensure that such support does not introduce an actual or perceived conflict of interest.</td>
</tr>
<tr>
<td><strong>Invitation to speak or provide consulting genuine services</strong></td>
<td>Broward Health employees are permitted to accept provided that (1) presentation or consulting engagement is in the form of an honorarium or compensation for time and expenses; (2) presentations or consulting engagements must be of scientific/academic merit and/or benefit to Broward Health; (3) individual receives fair market value compensation for specific, legitimate services provided and work actually performed.</td>
</tr>
</tbody>
</table>
| **Industry Representatives (IR’s)** | IR’s are authorized to promote their organization’s products and disseminate information subject to the following parameters:  
  a) IR’s shall confine their promotional activities within the Hospital to attending medical staff, nurse practitioners, pharmacy management staff, management staff in areas where the particular Vendor’s supplies and equipment could be used, and the Procurement & Strategic Sourcing Department.  
  b) IRs will comply with all decisions of the Medical Board and its subcommittees, such as the Formulary and Therapeutics Committee.  
  c) IR’s are not permitted to promote medications, supplies or equipment contrary to applicable Hospital Policies or Guidelines.  
  d) Food may not be provided by an IR within the Hospital except as part of an educational program that meets the criteria outlined in BH policy.  
  e) Gifts, such as pens, notepads, or any other promotional item bearing the Vendor’s logo or information, may not be distributed within the Hospital.  
  f) IRs may not post any notices in the Hospital that promote their products or any program that they sponsor. Program notices only may be posted by a Hospital representative responsible for that program in accordance with Hospital policies for posting notices. Promotional materials may only be given to an individual during an appointment and may not be left in Hospital areas, including public areas. |
| **Donations** | The receipt of donations is dictated by Broward Health Foundation or other area authorized by Broward Health to receive donations (e.g. CDTC) policy and procedures. |
SUMMARY OF REQUEST

DATE: July 31st, 2019

FACILITY: Broward Health Corporate

PROGRAM/PRODUCT LINE: Broward Health Corporate & Ambulatory Division

REQUEST: Request of Board of Commissioners of the North Broward Hospital District to authorize the President/CEO to execute a 10 year lease for approximately 10,000 rentable square footage (RSF) of first floor space at 1801 West Sample Road; Deerfield Beach, FL. in the amount of $3,783,080.

PURPOSE: Lease acquisition

CAPITAL REQUIRED: To be determined pending negotiations. Any capital required will be amortized in the lease and/or budgeted separately.

FISCAL IMPACT: $3,783,080 over a 10 year operational lease.

<table>
<thead>
<tr>
<th>Base Rent With 3% Yearly</th>
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<th>S.F Input</th>
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BUDGET STATUS: Budgeted
LEGAL REVIEW: The contract is subject to General Counsel’s review and approval as to legal form and conditioned on no material changes in the approved business terms.

APPROVED: __________________________________________

DATE: ____________________________

Gino Santorio, President/CEO BH
MEMORANDUM

TO: Board of Commissioners

FROM: Gino Santorio, President/CEO BH

DATE: July 31st, 2019

SUBJECT: Request of Board of Commissioners of the North Broward Hospital District to authorize the President/CEO to execute a 10 year lease for approximately 10,000 rentable square footage (RSF) of first floor space at 1801 West Sample Road; Deerfield Beach, FL. in the amount of $3,783,080.

BACKGROUND

The subject suite containing 10,075 rentable square feet, in the building commonly known as 1801 Med Center (the “Building”), and whose street address is 1801 W. Sample Road, Deerfield Beach, Florida 33064. The Premises are outlined on the plan attached to the Lease as Exhibit A.

The Term “Office Parcel” shall mean that certain tract or parcel of land upon which the Building is located, as more particularly shown as Tract 1 and Tract 3 on Exhibit A-1 attached hereto.

The term “Project” shall collectively refer to those certain tracts or parcels more particularly shown on Exhibit A-1 as (a) Tract 1, (b) Tract 2, and (c) Tract 3.

Term is for one hundred twenty (120) full calendar months. Subject to the terms and conditions, tenant shall have the option to renew the Term for two (2) additional terms of five (5) years.

ACTION/PROJECT DESCRIPTION

Request of Board of Commissioners of the North Broward Hospital District to authorize the President/CEO to execute a 10 year lease for approximately 10,000 rentable square footage (RSF) of first floor space at 1801 West Sample Road; Deerfield Beach, FL. in the amount of $3,783,080.
FINANCIAL/BUDGETARY IMPACT

$3,783,080 over 10 year operational lease.

<table>
<thead>
<tr>
<th>Base Rent With 3% Yearly</th>
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JUSTIFICATION

Broward Health Ambulatory Division and Physician Group has strategic needs with a recruitment plan for growth. Broward Health North existing medical office building has a high lease occupancy rate requiring Broward Health to expand access points. This location is approximately 1.5 miles from Broward North campus which facilitates proximity and growth.

STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to execute a 10 year lease for approximately 10,000 rentable square footage (RSF) of first floor space at 1801 West Sample Road; Deerfield Beach, FL in the amount of $3,783,080.
SUMMARY OF REQUEST

DATE: July 31st, 2019

FACILITY: Broward Health Corporate

PROGRAM/PRODUCT LINE: Broward Health Corporate & Ambulatory Division

REQUEST: Request of Board of Commissioners of the North Broward Hospital District to authorize the President/CEO to execute a 5 years and 3 months lease for approximately 3,250 rentable square footage (RSF) of floor space at 8320 W. Sunrise Boulevard, Suite 200, Plantation, Florida 33322 in the amount of $260,201.

PURPOSE: Lease acquisition

CAPITAL REQUIRED: To be determined pending negotiations. Any capital required will be amortized in the lease and/or budgeted separately.

FISCAL IMPACT: $260,201 over 5 year operational lease.

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</table>

BUDGET STATUS: Budgeted

LEGAL REVIEW: The contract is subject to General Counsel’s review and approval as to legal form and conditioned on no material changes in the approved business terms.

APPROVED: Gino Santorio 07/21/2019 13:07 Eastern Daylight Time

DATE: ____________________

Gino Santorio, President/CEO BH
MEMORANDUM

TO: Board of Commissioners
FROM: Gino Santorio, President/CEO BH
DATE: July 31st, 2019
SUBJECT: Request of Board of Commissioners of the North Broward Hospital District to authorize the President/CEO to execute a 5 years and 3 months lease for approximately 3,250 rentable square footage (RSF) of floor space at 8320 W. Sunrise Boulevard, Suite 200, Plantation, Florida 33322 in the amount of $260,201.

BACKGROUND

The subject suite containing 3,250 rentable square feet, in the building commonly known as Plantation Pavilion (the “Building”), and whose street address is 8320 W. Sunrise Boulevard, Suite 200, Plantation, Florida 33322.

The Term “Premises” shall mean that LANDLORD leases to TENANT upon the terms and conditions stated herein the following described property (hereinafter Leased Premises), consisting of approximately 3,250 square feet, to wit: Suite No. 200, Plantation Pavilion.

Term is for sixty-three (63) full calendar months.

ACTION/PROJECT DESCRIPTION

Request of Board of Commissioners of the North Broward Hospital District to authorize the President/CEO to execute a 5 years and 3 months lease for approximately 3,250 rentable square footage (RSF) of floor space at 8320 W. Sunrise Boulevard, Suite 200, Plantation, Florida 33322 in the amount of $260,201.
FINANCIAL/BUDGETARY IMPACT

$260,201 over 5 years and 3 month’s operational lease.

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<tr>
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</table>

JUSTIFICATION

Broward Health Ambulatory Division and Physician Group has strategic needs with a recruitment plan for growth. Broward Health Ambulatory Division doesn’t have an existing primary care presence in Plantation, Florida service area. This location is approximately 12.8 miles from Broward Health Medical Center campus and 9.9 miles from Broward Health Coral Springs which facilitates new access point and growth.

STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to execute a 5 years and 3 months lease for approximately 3,250 rentable square footage (RSF) of floor space at 8320 W. Sunrise Boulevard, Suite 200, Plantation, Florida 33322 in the amount of $260,201.
2019 Community Health Needs Assessment

Prepared By:

BROWARD HEALTH®
Community Health Needs Assessment

A dynamic process involving multiple sectors of the community

Draw upon qualitative and quantitative population health status data

Identify unmet community needs to improve the health of vulnerable populations: the poor, homeless and disenfranchised

Enable community-wide establishment of health priorities
Why do a Needs Assessment?

Affordable Care Act

Section 501(r)(3) requires a community health needs assessment (CHNA) at every three years

An implementation strategy to meet the community health needs identified through the CHNA

JCAHO Standards

The needs of the community must guide service delivery

IRS Form 990 Requirement

Manner in which community information and health care needs are assessed

Opportunity

Identify unmet community needs to improve the health of vulnerable populations

Improve coordination of hospital with other efforts to improve community health
IRS Requirement for CHNA

1. **Community served** by the hospital.

2. **Process and methods** used to conduct the assessment, including list of all of the collaborating organizations.

3. A description of how the hospital took into account **input from persons** who represent the broad interests of the community.

4. A **prioritized** description of all of the community health needs identified through the CHNA.

5. A description of the **existing resources available** to meet the community health needs identified.
Define the community

Collect data: quantitative and qualitative

Advisory Council reviews data and identifies unmet needs and service gaps

Advisory Council prioritizes needs

BRHPC summarizes in a Community Health Needs Assessment Report

BH develops a Community Health Plan
### Defining the Community: Primary Service Areas (PSAs)

<table>
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<th>Primary Service Areas</th>
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Data Collection and Presentation

**Quantitative Data**
- U.S. Bureau of the Census
- American Community Survey
- Florida Charts
- Broward Regional Health Planning Council Health Data Warehouse
  - Broward Health Hospital data
  - Hospital Utilization
  - Chronic Diseases
  - Prevention Quality Indicators
  - Diagnosis Related Groupings

**Qualitative Data**
- Youth Risk Behavior Survey
- Behavioral Risk Factor Surveillance System
- PRC Community Health Needs Assessment in Broward County
- Focus Groups
- Community Conversations (Town Hall Meetings)
- Key Informant Interviews
Prioritizing the Need: Role of Advisory Council

- ACA: Input from “persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health.”
- Guide the assessment process
- Act as a sounding board and assist in obtaining community input
- Once the assessment is completed, may participate with the Planning Team in evaluating health issues and priorities with BH
- Engage in collaborative action planning on an ongoing basis
<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
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<tbody>
<tr>
<td>Alan Goldsmith</td>
<td>EVP/CAO</td>
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<tr>
<td>Aldo Calvo, MD</td>
<td>Medical Director, Community Health Services</td>
<td>Broward Health Community Health Services</td>
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<tr>
<td>Alex Fernandez</td>
<td>Chief Financial Officer</td>
<td>Broward Health Corporate</td>
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<tr>
<td>Alice Taylor</td>
<td>CEO</td>
<td>Broward Health North</td>
</tr>
<tr>
<td>Allen Jackson</td>
<td>Pastor</td>
<td>Ark Restoration Church International</td>
</tr>
<tr>
<td>Ana Calderon Randazzo</td>
<td>Executive Director, CDTC</td>
<td>Children’s Special Needs</td>
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<tr>
<td>Barry Gallison</td>
<td>Corporate Director, Quality and Risk</td>
<td>Broward Health Corporate</td>
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<tr>
<td>Bernice Shorter-Meares</td>
<td>Regional Manager, Pharmacy</td>
<td>Broward Health Community Health Services</td>
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<tr>
<td>Beth Cherry</td>
<td>SVP, Physician Practices</td>
<td>Broward Health Corporate</td>
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<tr>
<td>Cara Boyarin</td>
<td>Wellness Coordinator</td>
<td>Broward Health Medical Center</td>
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<tr>
<td>Carolyn Carter</td>
<td>CNO</td>
<td>Broward Health Medical Center</td>
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<tr>
<td>Carolyn Michaels</td>
<td>Executive Vice President</td>
<td>Greater Fort Lauderdale Chamber</td>
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<tr>
<td>Dan Lindblade</td>
<td>President/CEO</td>
<td>Greater Fort Lauderdale Chamber</td>
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<td>Daniel Oatmeyer</td>
<td>Battalion Chief/EMS Bureau &amp; Special Events</td>
<td>City of Fort Lauderdale Fire/EMS</td>
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<td>Darrell Cunningham</td>
<td>Community Partnerships Division Director</td>
<td>Broward County Human Services</td>
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<td>David Clark</td>
<td>AVP, Corporate Services</td>
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<td>Denise Moore</td>
<td>VP, Corporate Marketing and Communications</td>
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<tr>
<td>Diana Arteaga</td>
<td>VP, Government Relations &amp; Community Affairs</td>
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<td>Donna DeFornzo</td>
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<td>City of Deerfield Beach</td>
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<tr>
<td>Jonathan Watkins</td>
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<td>Broward Health Imperial Point</td>
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<td>Laura Ganci</td>
<td>Director of Research</td>
<td>Children's Services Council</td>
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<tr>
<td>Linda Cooke</td>
<td>Chair, BHMC Community Relations Council</td>
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<td>Lou Cimaglia</td>
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<td>Urban League of Broward County</td>
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<tr>
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<td>Broward Regional Health Planning Council, Inc.</td>
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<td>Health Support Manager, Center for Active Aging</td>
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<td>Sandra Coutain</td>
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<tr>
<td>Sarah Sabin</td>
<td>Director, Grants Administration</td>
<td>Broward Health Corporate</td>
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<tr>
<td>Shawn Preston</td>
<td>VP, Children's Services</td>
<td>Arc Broward</td>
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<tr>
<td>Shira Fowlkes</td>
<td>Data Analyst</td>
<td>Broward Regional Health Planning Council, Inc.</td>
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<tr>
<td>Shirley Snipes</td>
<td>Planning Director</td>
<td>Aging and Disability Resource Center</td>
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<tr>
<td>Sophia Mantovanelli</td>
<td>Manager, Clinical Informatics</td>
<td>Broward Health Corporate</td>
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<tr>
<td>Steve Schauder</td>
<td>Director of Development</td>
<td>SunServe</td>
</tr>
<tr>
<td>Steven Marcus, Ed.D.</td>
<td>President/CEO</td>
<td>Health Foundation of South Florida</td>
</tr>
<tr>
<td>Sue Gallagher</td>
<td>Chief Innovation Officer</td>
<td>Children's Services Council</td>
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<tr>
<td>Tiana Blount</td>
<td>AVP, Community Health Services</td>
<td>Broward Health Community Health Services</td>
</tr>
<tr>
<td>Todd Draizin</td>
<td>District Chief, Fire</td>
<td>Broward Sheriff's Office</td>
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<tr>
<td>Vince Johnson</td>
<td>Director of Strategic Operations</td>
<td>Broward Health Community Health Services</td>
</tr>
<tr>
<td>Vincenzo Averaimo</td>
<td>AVP, Clinical Services - Ambulatory Division</td>
<td>Broward Health Corporate</td>
</tr>
<tr>
<td>Meeting Dates</td>
<td>Draft Agenda</td>
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</tbody>
</table>
| December, 13, 2018  | 1. Introduction: Planning and Process  
                     2. Broward County Quantitative Data Presentation (Part I)  
                     3. Stakeholder Discussion  
                     4. Identify Needs & Gaps                                           |
| January 10, 2019    | 1. Broward County Quantitative Data Presentation (Part II)  
                     2. Stakeholder Discussion  
                     3. Identify Needs & Gaps                                           |
| February 28, 2019   | 1. BH Quantitative Data Presentation (Part I)  
                     2. Stakeholder Discussion  
                     3. Identify Needs & Gaps                                           |
| March 14, 2019      | 1. BH Quantitative Data Presentation (Part II)  
                     2. BH Community Services Presentation  
                     3. Stakeholder Discussion  
                     4. Identify Needs & Gaps                                           |
| March 28, 2019      | 1. Crime and Behavioral Health Data Presentation  
                     2. Qualitative Data Presentation (Part I)  
                     3. Stakeholder Discussion  
                     4. Identify Needs & Gaps                                           |
| April 11, 2019      | 1. Qualitative Data Presentation (Part II)  
                     2. Summary of Data/Needs/Gaps  
                     3. Stakeholder Discussion  
                     4. Prioritization Process                                           |
Data Overview
### Total Population, Broward & Florida, 2017

<table>
<thead>
<tr>
<th></th>
<th>2017 Broward</th>
<th>2017 Florida</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Population</strong></td>
<td>Number: 1,935,878, Percent: 100%</td>
<td>Number: 20,984,400, Percent: 100%</td>
</tr>
<tr>
<td><strong>Male</strong></td>
<td>Number: 944,164, Percent: 48.8%</td>
<td>Number: 10,254,267, Percent: 48.9%</td>
</tr>
<tr>
<td><strong>Female</strong></td>
<td>Number: 991,714, Percent: 51.2%</td>
<td>Number: 10,730,133, Percent: 51.1%</td>
</tr>
<tr>
<td><strong>0-17</strong></td>
<td>Number: 411,799, Percent: 21.3%</td>
<td>Number: 4,200,780, Percent: 20.0%</td>
</tr>
<tr>
<td><strong>18-64</strong></td>
<td>Number: 1,209,760, Percent: 62.5%</td>
<td>Number: 12,568,388, Percent: 59.9%</td>
</tr>
<tr>
<td><strong>65+</strong></td>
<td>Number: 314,319, Percent: 16.2%</td>
<td>Number: 4,215,232, Percent: 20.1%</td>
</tr>
<tr>
<td><strong>White</strong></td>
<td>Number: 1,177,288, Percent: 60.8%</td>
<td>Number: 15,768,315, Percent: 75.1%</td>
</tr>
<tr>
<td><strong>Black</strong></td>
<td>Number: 558,202, Percent: 28.8%</td>
<td>Number: 3,394,508, Percent: 16.2%</td>
</tr>
<tr>
<td><strong>Hispanic</strong></td>
<td>Number: 574,026, Percent: 29.7%</td>
<td>Number: 5,370,860, Percent: 25.6%</td>
</tr>
<tr>
<td><strong>Asian</strong></td>
<td>Number: 68,978, Percent: 3.6%</td>
<td>Number: 588,087, Percent: 2.8%</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td>Number: 65,795, Percent: 6.8%</td>
<td>Number: 679,604, Percent: 5.9%</td>
</tr>
</tbody>
</table>

1,935,878 Residents in Broward County

22,363 Births
12,427 Migrants

15,976 Deaths

18,756 net population increase

55-64 age group had largest growth from 2016-2017

6,768

30%
of residents are Hispanic/Latino
Median Income
$56,842

13.1%
of all Broward residents have an income below the poverty line

17.7%
families with female head of household live below the poverty line

3.9%
Unemployment Rate

3.0%
Job Growth

21.1%
Employed in education, health or social services

270,550 students in Broward County Public Schools

89.4% of adult population has a high school diploma or higher

32.7% of adult population has a bachelor’s degree or higher
Entry into Prenatal Care

1st Trimester Prenatal Care rates have gone down (74 to 72.9).

3rd Trimester or No Care rates have gone up (8.2 to 9.1).

The number of uninsured in Broward has increased by 0.1% in the past 3 years

Black babies are at a higher risk of negative birth outcomes when compared to their White counterparts.

<table>
<thead>
<tr>
<th></th>
<th>Low Birth Weight</th>
<th>Preterm Births</th>
<th>Infant Mortality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black Babies</td>
<td>13.6%</td>
<td>14.2%</td>
<td>8.4%</td>
</tr>
<tr>
<td>White Babies</td>
<td>7.1%</td>
<td>8.6%</td>
<td>2.5%</td>
</tr>
</tbody>
</table>
Heart Diseases account for the highest number of deaths in Broward County, representing 23.3% of all deaths with a rate of 142.0.

Unintentional Injuries are responsible for the most Years of Potential Life Loss with a rate of 1,598.1.

Major Causes of Death that Did Not Meet HP2020 Goals

- Heart Disease: 103.4, 142.0
- Cerebrovascular Disease: 34.8, 58.7
- Unintent. Injury: 36.4, 52.4
- CLRD: 18.7, 37.0

Major Causes of Death That Met HP2020 Goals

- Diabetes Mellitus: 66.6, 18.8
- Cancer: 161.4, 146.1
The Total Sexually Transmitted Infection Rate for Broward County has been increasing since 2013. Going from 639.4 to 884.1.

Chlamydia 599.0 per 100,000

Gonorrhea 209.1 per 100,000

2,227.9 Chlamydia Rate per 100,000

566.7 Gonorrhea Rate per 100,000

Rates Among 15-19 Year Old Females

The AIDS rate in Broward has been decreasing since 2013. Going from 22.8 to 13.9.

The HIV rate in Broward has had an overall increase since 2013. Going from 36.6 to 37.9.
Chronic Conditions

$1.8 BILLION

Amount charged for chronic conditions in all BH hospitals combined.

Hypertension had the highest number of chronic condition cases in BH hospitals which accounted for over $808 million charges in 2017.

Medicare was the payer source with the highest chronic condition charges in 2017.

Congestive Heart Failure had the largest case-charge gap with $339 million being charged for less than 5 thousand cases.
Chronic Conditions

Service Area Statistics

Charges increased from 2015-2017 for chronic conditions in the BH PSAs by 4.6% while cases decreased by 9.1%.

Emergency Department Statistics

Emergency Department visits have decreased while admissions have increased over the past 3 years.

In 2017, PSA 33311 had the most cases and highest charges for each chronic conditions.
Avoidable Hospital Visits

Visit Classification

[81] Minor – problems are self-limited or of minor severity

[82] Low/Moderate – problems are low to moderate severity

Payer Source

[81] cases - self pay

[82] - Medicaid

Age Group

18-39
0-17

Race

White
Black
Prevention Quality Indicators

The most PQI cases and highest charges were for Congestive Heart Failure.

Medicare paid the greatest proportion of charges for most of the PQIs except for low birth weight (Medicaid) and perforated appendicitis (Private).

33311 had the highest cases for the majority of the observed PQIs with the exception of:
* Perforated appendicitis (33065)
* Bacterial pneumonia and urinary infections (33064)

33311 also had the highest charges for the majority of the observed PQIs with the exception of:
* Perforated appendicitis (33313)
* Bacterial pneumonia and urinary infections (33064).
Diagnosis Related Groups

Orthopedics had the highest number of discharges while general surgery had the highest charges in 2017.

Thoracic surgery had the highest average length of stay with an average of 24.0 days for 560 patients.
Consistent Themes Across Qualitative Study

- Affordability as significant barrier to access
- Lack of insurance coverage
- Continuity of care/Discharge planning
- Cultural Competency
- Immigration status
- Education about resources
- Integration of resources (one-stop shop)
- Racial equity training
- Customer service (people skills)
- Language barriers
- Use of technology (Telemedicine, EHR)
## BH: Prioritizing the Needs in 2019

<table>
<thead>
<tr>
<th>Rank</th>
<th>Data Source</th>
<th>Access to Care</th>
<th>Social Determinants of Health</th>
<th>Preventive Care</th>
<th>Community Education</th>
<th>Quality of Care</th>
<th>Substance Abuse / Mental Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Qualitative: Focus Groups, Key Informants&lt;br&gt;Quantitative: US Bureau of the Census, Florida Charts</td>
<td>• Affordability for co-pays and medication&lt;br&gt;• Immigration status&lt;br&gt;• Continuity of Care&lt;br&gt;• Enrollment into ACA and Medicaid&lt;br&gt;• Coordination of care / Linkage to services&lt;br&gt;• Children with special needs</td>
<td>• Housing Quality and Affordability&lt;br&gt;• Poverty and homelessness&lt;br&gt;• Hunger/Food Insecurities&lt;br&gt;• Language and literacy (reading level)&lt;br&gt;• Elevation of the Economic well-being of the community through participation in the Anchor Hospital Initiative</td>
<td>• Prenatal Care&lt;br&gt;• Prevention of Low Birthweight and Infant Mortality (emphasis on black mothers and infants)&lt;br&gt;• Screenings for chronic disease</td>
<td>• Chronic Disease Self-Management&lt;br&gt;• Navigation of the system&lt;br&gt;• Health education and promotion</td>
<td>• Consideration for diversity issues including languages spoken, patients with disabilities, gender, LGBTQ, and race&lt;br&gt;• Diversification and training of clinical and non-clinical staff</td>
<td>• Prevention of opioid death rate&lt;br&gt;• Adolescent mental health / suicide prevention</td>
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<tr>
<td>2</td>
<td>Qualitative: Focus Groups, Key Informants&lt;br&gt;Quantitative: BRHPC Health Data Warehouse, Florida Charts</td>
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<td>3</td>
<td>Qualitative: Focus Groups, Key Informants&lt;br&gt;Quantitative: US Bureau of the Census, BRHPC Health Data Warehouse, Florida Charts</td>
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<td>4</td>
<td>Qualitative: Focus Groups, Key Informants&lt;br&gt;Quantitative: US Bureau of the Census, Florida Charts</td>
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<td>6</td>
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### Data Source
- **Qualitative:** Focus Groups, Key Informants
- **Quantitative:** US Bureau of the Census, Florida Charts, BRHPC Health Data Warehouse, Florida Charts
For More Information

For more information, contact:

Regine Kanzki, MPH  
Division Director  
rkanzki@brhpc.org  
www.brhpc.org
SUMMARY OF REQUEST

DATE: July 31, 2019

FACILITY: Broward Health Regional Hospitals

PROGRAM/PRODUCT LINE: Laboratory Services/Hematology

REQUEST: Approval for the lease of eight (8) hematology analyzers under a five year lease agreement with Sysmex of America, Inc. Each medical center would lease two upgraded Sysmex instruments. Distribution as follows: Broward Health Medical Center, two XN9100 model instruments, and Broward Health North, Broward Health Imperial Point and Broward Health Coral Springs two XN2000 model instruments.

PURPOSE: The current five (5) year Sysmex of America, Inc. equipment lease agreement (agreement #1010001) will expire on August 17, 2019. A new five year lease agreement will offer upgraded equipment, as well as provide a supply cost savings of $207,000 over the term of the agreement.

CAPITAL REQUIRED: Not applicable.

FISCAL IMPACT: The equipment lease expense over the five year term total is $1,622,000.

BUDGET STATUS: Yes

LEGAL REVIEW: The contract is subject to General Counsel’s review and approval as to legal form and conditioned on no material changes in the approved business terms.

APPROVED: ___________________________ DATE: ____________
Gino Santorio, President/CEO BH
MEMORANDUM

TO: Board of Commissioners

FROM: Gino Santorio President/CEO BH

DATE: July 31, 2019

SUBJECT: Approval for the lease of eight (8) hematology analyzers under a five year lease agreement with Sysmex of America, Inc. Each medical center would lease two upgraded Sysmex instruments. Distribution as follows: Broward Health Medical Center, two XN9100 model instruments, and Broward Health North, Broward Health Imperial Point and Broward Health Coral Springs two XN2000 model instruments.

BACKGROUND

For the past five years, Broward Health Hospital Laboratories have used Sysmex XN hematology equipment (instruments) for complete blood cell counts and automated differential testing. These diagnostic laboratory tests aid the physician with diagnosing patients with hematologic blood disorders, such as anemia (iron deficiency, sickle cell), bleeding abnormalities, infections, blood cell cancers, and various other hematologic disease states.

The current Sysmex of America, Inc. lease agreement will expire on August 17, 2019. This agreement includes an equipment lease for eight (8) instruments and a supply agreement for reagents. The request to remain with Sysmex of America, Inc. brand of instrumentation is based on the following value added factors:

- Broward Health labs currently use Sysmex XN instrumentation and reagents for hematology diagnostic testing.
- Employees are familiar with the instrument technology, operation and maintenance. Thereby, reducing the need for training time.
- Continuity will exist for complete blood cell count normal ranges versus switching to a new manufacturer which would require validation studies and establishment of new normal range values.
The new five year equipment lease agreement will offer eight (8) new and upgraded instruments and will include service. The new agreement offers a supply (reagent) cost savings of $41,400 per year for the Broward Health system; resulting in a $207,000 savings over the five year term of the agreement.

**ACTION/PROJECT DESCRIPTION**

Approval for the lease of eight (8) hematology analyzers under a five year lease agreement with Sysmex of America, Inc. Each medical center would lease two upgraded Sysmex instruments. Distribution as follows: Broward Health Medical Center, two XN9100 model instruments, and Broward Health North, Broward Health Imperial Point and Broward Health Coral Springs two XN2000 model instruments.

**FINANCIAL/BUDGETARY IMPACT**

The equipment lease expense over the five year term total is $1,622,000.

**JUSTIFICATION**

- The new agreement will generate a five year operational supply cost savings of $207,000 for the Broward Health System.
- The upgraded equipment will offer improved workflow over current practices by eliminating weekly and monthly instrument maintenance.
- The upgraded equipment will also bring key clinical enhancements for patient testing, which will reduce the need for the technologist to make manual blood cell smears.

**STAFF RECOMMENDATION**

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO in accordance with section 24 (d) of the North Broward Hospital District Charter, to approve the lease of eight (8) Sysmex XN instruments for a cost of $1,622,000 including instrument service and supply that would be a cost savings of $207,000 over a five (5) year contractual agreement with Sysmex of America, Inc.
I. Purpose

Broward Health is a publicly funded institution with an obligation to preserve public trust and to provide an environment where workforce members at Broward Health are free from actual or perceived conflicts of interest. Broward Health has adopted this system-wide Policy for the purposes of setting forth organizational requirements and policy with respect to Conflicts of Interest; identifying those corporate entities and workforce members subject to certain requirements under the Policy; and explaining the requirements and activities associated with identifying and ethically resolving Conflicts of Interest on the part of workforce members affiliated with Broward Health.

Identification and resolution of Conflicts of Interest which may exist on the part of workforce members is required by standards promulgated by the Florida Ethics Commission, Florida Statutes, The Joint Commission, the Internal Revenue Code and Treasury Regulations governing tax-exempt organizations and by requirements placed upon providers by Medicare and Medicaid program regulations. Broward Health has adopted this Policy not only to meet the above-stated requirements, but also as a matter of corporate responsibility, sound management practice, and to afford protection, where available, in cases in which some duality of interest exists.

II. Key Terms

Conflict of Interest: Occurs in any situation in which a person cannot make fair decisions because they will be affected by the results, or serves or represents two distinct entities (or persons). A "conflict of interest" in the traditional sense encompasses situations in which a person has actually neglected or breached a duty to one entity to the benefit of another, situations in which a person has used his or her position with one entity to advance personal gain or the gain of another entity, and situations in which there is a potential for breaching a duty to one entity. When this occurs, an independent observer may reasonably question whether a workforce member’s professional actions or decisions are determined or affected by considerations of personal gain or benefit, whether direct, indirect, financial, or otherwise.

Conflicts of interest include a variety of situations in which a workforce member is faced with conflicting loyalties. Traditionally of most concern are those situations in which regard for a private interest may lead to a disregard of the workforce member’s duties towards Broward Health. Frequently these arise when personal economic interests conflict with the duties towards the system. For example, a conflict occurs when a workforce member influences a decision of the system, department, or decision of a patient if a personal economic benefit to the workforce member may arise from that decision. There may be conflict
of interest when a physician procures equipment from an entity in which he or she is a spokesperson. In this situation, the physician may have the opportunity to use his or her position and influence within Broward Health to advance his or her personal economic gain.

Other conflicts may arise that inhibit the workforce member’s duty of loyalty or commitment to Broward Health. These conflicts, as well as those that represent conflicting time commitments, are considered “conflicts of commitment.” For example, a workforce member may enter into part-time employment with an entity which impairs his or her ability to perform their duties at Broward Health.

Conflicts may also arise even in instances where the workforce member will not receive any economic benefit from the outside activity. For example, a conflict is present if a workforce member’s obligations to Broward Health are not met due to the time spent on the outside activity. The conflict exists even though the activity may not provide remuneration to the workforce member.

**Workforce Member**: Any employee, independent contractor, agent, trainee, or other person who performs work for or on behalf of Broward Health. This includes full-time, part-time, and pool employees; associates; directors; officers; managers; supervisors; members of the Board and members of standing committees; medical staff employed by or otherwise affiliated with Broward Health; medical students and all other affiliated students or others receiving training at any Broward Health facility; and others who provide goods or services to Broward Health.

**Immediate Family Member**: The term “immediate family member” is defined broadly to mean a husband or wife; birth or adoptive parent, child or sibling; stepparent, stepchild, stepbrother, or stepsister; father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law; grandparent or grandchild; and spouse of a grandparent or grandchild.

**Personal Interests**: Relevant activities that may not have a direct financial component, but may present an actual or apparent Conflict of Interest. Such interests may involve the workforce member or his or her immediate Family Members.

**Significant Financial Interests**: Monetary arrangements with individuals, businesses or other entities with which Broward Health has a transaction or arrangement, or is considering or negotiating a transaction or arrangement. A Significant Financial Interest is not necessarily a Conflict of Interest. Examples of Significant Financial Interests include:

A. **Debt Interests**: Holding of debt or debt securities by an individual or Immediate Family Member in any company or entity engaged in any business or attempting to do business with Broward Health, including Research.

B. **Equity Interests**: Ownership interest that exceeds 5% by an individual or Immediate Family Member of stock, stock options or other proprietary interests in any company or entity that furnishes goods or services to Broward Health, or leases or sells real estate or equipment to Broward Health, or is engaged in any business or is attempting to do business with Broward Health, including Research. Significant Financial Interests do not include investments in mutual funds or retirement plans, such as 401(k) or 403(b) plans, where there is no individual control over fund selections.

C. **Publicly Traded Companies**: Cumulative equity interest valued at 5% or more of the business entity as determined by reference to publicly listed prices.

D. **Non-Public Companies**: Any direct or indirect ownership interest that exceeds $5,000 in any
company or entity whose value cannot be determined by reference to publicly listed prices (for example, privately-held and start-up companies).

III. Policy

1. Consistent with Broward Health’s Code of Conduct, it is expected that no Workforce Member may enter into any employment, transaction, or other arrangement that may cause or be perceived to cause a conflict of interest.

   a. Because a "conflict of interest" depends on the situation in which the workforce member is placed, rather than on the character or actions of the workforce member, a conflict of interest is not necessarily "wrong" or prohibited. Such conflicts confront workforce members at various times because of a personal, business, or professional loyalty that may be in conflict. Some conflicts, however, present a potential for a breach of one's duty to a particular employer, person, or entity that they must either be permitted with conditions, including review and oversight by other institutional representatives, or prohibited. Generally, if a conflict situation is permitted, specific management guidelines and expectations are established prior to permitting the activity or financial interest. These management plans allow for periodic review and oversight to minimize the effects of conflicts. Most conflict situations that are of concern and allowable under the law can be handled through disclosure and the setting of an appropriate management plan of the disclosure.

2. The primary purpose of the disclosures required on the Conflict of Interest and Financial Disclosures form is to identify those activities and interests that pose potential conflicts of interest. The workforce member makes the initial disclosure of an interest, and should consult with his or her supervisor to determine whether a potential conflict of interest exists. In those situations where a potential conflict of interest exists and the activity or interest is allowable under applicable law, the activity or interest may be allowed after disclosure, review and development of a management plan by the applicable administrator, management, with consultation by the Corporate Compliance Department. The oversight of the management plan is the responsibility of the applicable administrator and/or manager in consultation with the Corporate Compliance Department.

3. Broward Health requires the following outside activities and financial interests to be reported prior to engaging in the activity:

   a. Ownership Relationships with Competitors: A direct or indirect (e.g. through an immediate family member) financial interest of greater than 5% (including ownership of stock, stock options, equity, debt, other securities, other forms of ownership interests, salary, or other remuneration for services as an employee consultant, officer, or board member) in any business or health care enterprise that produces services or products which compete with those of Broward Health.

   b. Work Relationships with Competitors: A direct or indirect engagement (e.g. through an immediate family member) where salary or other remuneration is received as an employee, consultant, officer, contractor, or board member in any business or health care enterprise that produces services or products which competes with those of Broward Health.

   c. Relationships with Organizations Doing Business with Broward Health: A situation in which a workforce member serves as an officer, director, employee, committee, member, advisor, agent, representative, or consultant, or in any other professional activity capacity for any company, firm, or business that, to the best of their knowledge, does or seeks to do business with Broward Health, or in which Broward Health holds an investment interest.
d. Employment of Relatives and Partner Relationships in the Workplace: Workforce members shall disclose any situation in which their relationship with an immediate family member results in a potential, perceived, or actual conflict of interest. A conflict of interest may be the result of a direct reporting relationship (e.g. a supervisory relationship) or an indirect reporting relationship (e.g. if one workforce member holds a position which may influence the status or compensation of an immediate family member).

4. Any workforce member engaged in an outside activity or hold a financial interest that must be reported is required to complete Broward Health’s Conflict of Interest questionnaire and Financial Disclosure form prior to the commencement of the outside activity or acquiring the financial interest and annually thereafter. If a material change in the original disclosure occurs during the year, a new or updated form must be submitted. Forms will be submitted to Human Resources and the workforce member’s management.

a. Workforce members should be aware of the following activities that may present a possible conflict of interest:

i. Outside activities which indicate time commitments that would interfere with a workforce member’s duties.

ii. Outside activities which use the equipment, personnel, or other resources of Broward Health.

iii. Outside activities (consulting, employment, management, or other contractual relationships) with a person or entity, or financial interests in an entity that does business with Broward Health, particularly when that workforce member may influence a Broward Health decision regarding that business.

iv. Outside activities or financial interests in a competitor which competes with Broward Health, particularly when these are in the same field as that of the workforce member or when the workforce member has access to proprietary information to the entity.

v. Outside activities or interests which otherwise interfere with the workforce member’s duties to the institution. These duties include the workforce member’s duties to patients and the duty to protect Broward Health and fellow workforce members.

5. Workforce members are required to maintain appropriate relationships with third parties, including patients and their families, health care practitioners, donors, suppliers, subcontractors, and competitors so no third party has an opportunity or appears to have an opportunity to inappropriately influence Broward Health decisions or activities.

6. Certain activities outside of Broward Health may be considered to be within the scope of that workforce member’s duties to Broward Health. For example, to serve on certain professional organizations or community organizations may be considered within the responsibilities of that workforce member and, if so, would not be an “outside activity” required to be disclosed. However, these activities must be approved as part of the workforce member’s responsibilities and any use of Broward Health time or resources with regard to these duties must receive appropriate approval. In addition, even if the activity is considered within the scope of the workforce member’s duties, that workforce member should always remain aware of conflict of interest considerations that may arise when performing work for organizations separate from Broward Health.

7. Workforce members are responsible for disclosing their own possible conflicts of interest. The necessity of disclosing certain outside activities should not obscure that the great majority of outside activities and financial interests of workforce members are compatible with Broward Health’s mission,
and that the requirements of an outside activities and conflict of interest policy are not meant to
discourage the many valuable outside activities of workforce members.

8. Key workforce members identified by the Corporate Compliance Department are required to indicate
annually and upon engagement whether, they have financial interests or are involved in outside
activities that must be reported. Those required to complete annual disclosures or upon engagement
will be notified of the requirement to complete the Conflict of Interest and Financial Disclosure forms.
Forms will be submitted electronically.

9. A workforce member’s failure to report outside activities and financial interests under Broward Health
policies and procedures, Code of Ethics for State of Florida Employees, or other applicable policies
or regulations are grounds for disciplinary action, up to and including termination.

**Code of Ethics for State of Florida Employees:**
Broward Health employees are subject to the Florida Code of Ethics for Public Officers and
Employees found in Chapter 112 of the Florida Statutes. The Code applies to full-time and part-time
Broward Health employees, and in some circumstances, may apply to non-employed Broward Health
workforce members who meet the definition of a public officer or reporting employee. In some
instances, these non-employed workforce members may be subject to the code depending on the
circumstances and their role at Broward Health.

The Florida Code of Ethics contains several provisions that govern Broward Health employees. In
formulating the Code of Ethics, the Florida Legislature stated that it “is essential for the proper
conduct and operation of government that public officials be independent and impartial and that
public office not be used for private gain other than the remuneration provided by law. However, the
Legislature recognized that public officials and state employees should not be “denied the
opportunity, available to all other citizens, to acquire and retain private economic interests except
when conflicts with the responsibility of such officials to the public cannot be avoided.” The Code of
Ethics is designed to “protect against any conflict of interest and establish standards for the conduct
of elected officials and government employees in situations where conflicts may exist.”

**IV. Procedures**

A. Process for Disclosures

   a. **Annual**: All Key Workforce Members identified by the CEO, Senior Vice President, Chief
      Compliance Officer, in conjunction with General Counsel, will be required to complete and
      submit an online Conflict of Interest and Financial Disclosure forms annually.

   b. **Incidental Disclosure**:

      i. Any changes in Significant Financial Interests or relevant Personal Interests that occur
         after the annual Disclosure are to be disclosed at the time of or subsequent to the event,
         but may be made at any time during the calendar year, so long as the changes are
         disclosed at least annually.

      ii. Examples of reportable changes include, but are not limited to, a new consulting
          arrangement, the purchase or inheritance of stock in a pharmaceutical, biotechnology, or
          medical device company, and the cessation of payments from an outside entity.

   c. **Contractor Disclosure**: All third parties or contractors doing work with or on behalf of Broward
      Health will be required to complete and submit a Conflict of Interest and Financial Disclosure
      forms form upon engagement. Any changes in Significant Financial Interests or relevant
Personal Interests submitted will require the Disclosure form to be updated in accordance with this policy.

d. Medical Staff Disclosure: All Medical Staff members will be required to complete and submit a Conflict of Interest and Financial Disclosure forms upon initial credentialing and reappointment. Any changes in Significant Financial Interests or relevant Personal Interests submitted will require the Disclosure form to be updated in accordance with this policy.

e. Third Party Disclosure: If an individual observes a Workforce Member’s activity or actions that appear to be a Conflict of Interest, the individual is encouraged first to direct that employee to this policy and other applicable policies, and then use the chain of command to express concern.

   i. The Workforce Member may contact the Corporate Compliance Department directly;
   
   ii. The Workforce Member may contact the Corporate Compliance Hotline;
   
   iii. The identity of the person raising an issue through the Corporate Compliance Department or the Corporate Compliance Hotline may remain confidential to the extent possible, and individuals reporting in good faith are protected from retaliation in accordance with Broward Health’s Non-Retaliation policy; and

   iv. Disclosures will be reviewed by the Corporate Compliance Department.

B. How to Disclose

   All Disclosures are made by completing the online Conflict of Interest and Financial Disclosure Form or via the Vendor Registration System. Instructions for logging in are provided to each Workforce Member who has been designated to disclose. Additional instructions are provided for the completion of the electronic form.

C. Review and Evaluation of Disclosure

   Once a Workforce Member has responded to the Disclosure questionnaire, it will be reviewed and evaluated by the Workforce Member’s supervisor, in consultation with the Corporate Compliance Department. If actual or apparent Conflicts of Interest are identified in the Disclosure, the Workforce Member will be informed of the status of the review process, including the need for additional information, the need for a documented Management Plan, or the need for further review by the Committee on Conflicts of Interest.

D. Guidelines for Allowance of Outside Activities and Financial Interests:

   Broward Health recognizes that there are conflict situations which cannot be mitigated, conflict situations which may be permitted with a management plan and oversight, and outside activities that are generally allowed. The guidelines below are designed to assist Broward Health workforce members in evaluating conflict of interest situations.

   a. Prohibited outside activities and financial interests

       Generally, most outside activities are allowed if they do not interfere with the workforce member’s performance, obligations, decision-making, or do not rise to the level of a perception of a conflict of interest. However, determining whether or not a conflict of interest exists is dependent on reviewing the facts of the particular conflict disclosed in comparison with the duties, obligations, and decision-making capabilities of the workforce member making the disclosure.

       Any outside activity or financial interest which is prohibited by state law cannot be allowed. For
example, prohibited under Florida law are those outside employment or contractual relationships which would create a “continuing or frequently recurring conflict” between the workforce member’s private interest and the performance of his or her duties at Broward Health or “that would impede the full and faithful discharge of his or her public duties”.

b. Outside activities and financial interests may be permitted only after review, approval of the applicable supervisor, administrator/CEO, and in consultation with the Corporate Compliance Department and General Counsel with appropriate conditions if necessary.

E. Guidelines for Review of Reported Outside Activities and Financial Interests

a. In evaluating whether or not a conflict of interest exists, the following factors must be evaluated:

1. Name of the employing or contracting entity or individual, name of entity in which the financial interest is held, and nature of its business.

2. Nature of activity or financial interest (description of equity interest or intellectual property), including time spent if an activity is involved (estimated hours per week including travel time). The source of compensation must be noted.

3. Location and anticipated dates of the activity.

4. Use of Broward Health time, facilities, or services in connection with the activity.

5. Number of other outside activities and financial interests previously filed for the year.

6. Whether the activity or financial interest was reported in the previous contractual year.

7. Any other information that may also be requested in order to assure a complete review of the outside activity and/or financial interest.

A workforce member must provide sufficient information to those with the review and oversight responsibility to enable them to make an informed decision concerning the allowance of the outside activity or financial interest.

Generally, the workforce member’s supervisor, applicable administrator/CEO, in consultation with the Corporate Compliance Department, review the information provided to them from workforce member disclosures annually and on a case-by-case basis to determine whether any disclosures constitute a potential conflict of interest. If any such reviewer believes that a disclosure indicates a problematic conflict of interest, the reviewer, with assistance of the Corporate Compliance Department will attempt to resolve the matter with the workforce member at the site level or within the scope of the applicable agreement contract language.

F. Committee on Conflicts of Interest

If the supervisor or site administrator/CEO, after consultation with the Corporate Compliance Department, is unable to come to a satisfactory resolution on the management plan for a disclosed conflict of interest or financial disclosure, the disclosure(s) will be brought to the Corporate Committee on Conflicts of Interests for review, approval, and finalization of a management plan (if appropriate). The Committee on Conflicts of Interest will include the SVP/Chief Compliance Officer (CCO), Chief Executive Officer (CEO), and Chief Administrative Officer (CAO).
The Conflicts Committee shall have the authority to approve the relationship or activity as is, to
approve the activity with conditions or monitoring, or to disapprove the relationship. The Committee
on Conflicts of Interest may consider both actual and potential conflicts of interest, including the
appearance of conflict, in reaching a decision. More stringent standards may be applied to workforce
members with significant management or supervisory responsibilities.

After determination, the Committee on Conflicts of Interest will send the resolution to the workforce
member. In addition, in its judgment, the Committee on Conflicts of Interest shall report to the Board
of Commissioners through the Executive Compliance Workgroup on matters referred to it, any
resulting management plans, monitoring of management plans, as well as any resolution.

V. Related Policies and Compliance Documents
- Broward Health Code of Conduct
- Gifts, Gratuities, and Business Courtesies, Policy No. GA-004-012

VI. References
N/A

Attachments: No Attachments
Proposed
2019 Broward Health Bylaws
Amended and Restated Bylaws of the North Broward Hospital District

Article I

Incorporation and Supersedence

The North Broward Hospital District (the “District”) was established in 1951 by authority granted by the Florida Legislature under Ch. 27438, Laws of Florida, which was recodified in Ch. 2006-347, Laws of Florida, and subsequently amended in Ch. 2007-299, Laws of Florida (collectively, the “Charter”). No provision in these Amended and Restated Bylaws (these “Bylaws”) shall be construed as conflicting with or exceeding the Charter, applicable provisions of the Florida Constitution, and applicable Florida laws, rules and regulations, as the same may be amended from time to time (collectively, “Florida Law”), nor shall any provision in these Bylaws be construed as conflicting with or exceeding applicable federal laws, rules and regulations. In the event of a conflict between these Bylaws and Florida Law, Florida Law shall govern and control as if fully set forth herein. These Bylaws, adopted effective as of July 31, 2019, supersede and replace (a) any Bylaws and amendments thereto previously adopted by the Board of Commissioners of the North Broward Hospital District (the “Board”) and (b) any resolutions adopted by the Board that conflict with these Bylaws.

Article II

Governing Board

1. Role and Purpose

   The Board shall be responsible for the oversight of the Charter, the District, and all of the District’s controlled entities (each, a “Subsidiary”) for the purpose of preserving public health for the public good in accordance with the Charter.

2. Board’s Responsibilities

   The Board shall perform its duties in a manner that is consistent with these Bylaws, Florida Law, applicable federal laws, rules and regulations and accreditation standards, and any additional duties adopted from time to time by the Board pursuant to resolutions.

3. Delegation of Authority

   The Board may delegate authority to the President and Chief Executive Officer (the “CEO”), Direct Board Reports (as defined below), the District’s departments and Board committees, and other individuals and entities; provided, however, that such delegation shall not be prohibited under Florida Law.
4. Education of Commissioners and Committee Members

All new Commissioners and Board committee members shall participate in an orientation program and be given information which shall include, but not be limited to, Florida’s open meeting laws, Florida’s public records laws, Florida’s ethics laws pertaining to public officers, Florida’s Patient Self-Referral Act of 1992, 42 U.S.C. § 1320a-7b(b) (aka, the Anti-Kickback Statute), 42 U.S.C. § 1395nn (aka, the Stark Law), the code of conduct and compliance and ethics programs, as established by the District and amended from time to time, and the Board’s responsibility for ensuring quality of care. All Commissioners and any Board committee members shall participate in annual compliance training and the Board’s program of continuing education, as required by the District’s code of conduct and ethics policies, adopted pursuant to the Charter and these Bylaws, as amended from time to time.

5. Prohibited Financial Arrangements

No Commissioner, Board committee member, administrator, officer, employee, or representative of the District or any of its Subsidiaries, shall, directly or indirectly, offer, pay, solicit, be paid or receive any commission, bonus, kickback, rebate, gratuity or any other thing of value or engage in any split-fee arrangement in any form whatsoever for the referral of any patient to any of the District’s facilities or for the purpose of generating any business for the District.

6. Conflicts of Interest

Commissioners have a fiduciary duty to the District and shall act in good faith, with due regard to the interests of the District, and shall comply with their fiduciary duties to the District under Florida Law. Commissioners shall be subject to the provisions of Florida Law pertaining to the avoidance of conflicts of interest when holding public office, including, but not limited to, Florida’s ethics laws pertaining to public officers, as amended from time to time, and the conflict of interest policy and code of conduct and ethics adopted by the Board and in effect from time to time.

7. Code of Conduct and Ethics

The Board shall adopt a code of conduct and ethics in accordance with the requirements outlined in the Charter.

8. Non-Discrimination

The Board shall respect and provide equal opportunity to all, regardless of race, color, national origin, gender identity or gender expression, pregnancy, sexual orientation, religion, age, disability, military status, genetic information, or any other characteristic protected under applicable federal law or Florida Law. All Commissioners shall be subject to and abide by the District’s code of conduct and all of the District’s anti-discrimination and harassment policies, and take appropriate measures to prevent unlawful harassment and/or discrimination.
9. **Board Officers**

The officers of the Board shall be Commissioners and all such officers shall be elected by the Board and serve at the pleasure of the Board. The Board’s officers shall be the Chair, Vice-Chair, Secretary-Treasurer, and such other offices as the Board may establish from time to time by resolution. All officers of the Board shall be elected by a majority of the Board at the Annual Meeting (as defined below). Officers shall serve for a one (1) year term or the remainder of the then-current term. Officer vacancies may be filled for the remainder of the then-current term by the Board at any regular meeting or special meeting of the Board. The powers and duties of officers of the Board shall include, but are not limited to, the following:

(a) **Chair**

The Chair of the Board (the “Chair”) shall preside over all meetings of the Board and may exercise all powers granted to that position and have the duties imposed on that position by the Charter, these Bylaws and by motion or resolution passed by the Board.

(b) **Vice-Chair**

The Vice-Chair of the Board shall act as Chair in the absence of the Chair and, when so acting, shall have all the power and authority of the Chair.

(c) **Secretary-Treasurer**

The Secretary-Treasurer of the Board (the “Secretary-Treasurer”) or, where permitted under Florida Law, his or her designee, shall be the custodian of the District’s official seal and all records and reports of Board and Board committee proceedings. The Secretary-Treasurer or, where permitted under Florida Law, his or her designee, shall be responsible for overseeing the issuance of notices and agendas for all regular and special Board and Board committee meetings and for ensuring that minutes are taken at all such meetings as required by Florida Law and these Bylaws.

**Article III**

**Board and Committee Meetings**

Commissioners are encouraged to participate in all meetings of the Board and Board committees on which they are members unless their participation is otherwise not possible.

1. **Quorum**

(a) **Board Meetings**

A quorum of the Board shall be established in accordance with Florida Law, and a vote of at least the majority of the Commissioners present either in person or via
teleconference or videoconference shall be necessary for the transaction of any business at any regular or special Board meeting.

(b) Board Committee Meetings

A quorum to hold and conduct a Board committee meeting shall consist of a majority of the total number of Board committee members; provided, however, that a quorum for a Board committee meeting shall be no fewer than two (2) committee members.

(c) Participation Through Communications Technology

Any Commissioner and member of a Board committee who is not a Commissioner may attend, participate and vote in any regular or special meeting provided for herein by use of telephone conference or video conference; provided, that, a quorum is established. All communications by the participating Commissioners and Board committee members via media technology must be fully audible to the public at the noticed meeting place where the quorum is physically present. Nothing herein shall be construed as permitting a Commissioner or a member of a Board committee who is not a Commissioner to vote by proxy.

2. Procedural Rules of Order

All Board and Board committee meetings shall be conducted in accordance with “Robert’s Rules of Order,” as modified by the Board from time to time, unless otherwise in conflict with Florida Law or specific provisions of these Bylaws.

3. Abstention from Voting

No Commissioner or Board committee member may abstain from voting unless such abstention is permitted or required under Florida Law. In the event there is, or appears to be, a conflict of interest requiring abstention, the Board or Board committee member with such a conflict shall comply with the disclosure requirements, if any, under Florida Law and the conflict of interest policy and code of conduct and ethics adopted by the Board and in effect from time to time.

4. Meeting Agendas

An agenda shall be prepared for each Board and Board committee meeting and, in all such cases, provide a period during which the public may be heard, unless otherwise exempt from such requirements under Florida Law.

(a) Website Posting of Agendas

Agendas for Board and Board committee meetings shall be posted and maintained on the District’s website in accordance with Florida Law.
(b) Process for Adding Agenda Items

The Board shall adopt a uniform administrative agenda process for bringing items to the Board or any of its committees.

5. Minutes and Records of Meetings

The CEO, or his or her designee, shall take minutes of all Board and Board committee meetings. The minutes of any Board and Board committee meeting shall be promptly recorded and made available to Commissioners. The minutes of meetings of the Board and its committees shall indicate which Commissioners and Board committee members are present and which are absent at such meetings and, at a minimum, shall include a record of all votes and actions taken and any resolutions adopted. Upon the request of the Chair or the Board, Board committees shall provide reports or any other information to the Board.

6. Notice of Meetings

All Board and Board committee meetings shall be noticed in accordance with Florida Law and these Bylaws.

7. Regular Board Meetings

There shall be regular meetings of the Board held at least monthly at times and dates agreed by the Board; provided, however, that nothing herein shall require the Board to otherwise reschedule or make up cancelled or missed regular Board meetings. At all such regular meetings, the Board shall consider all matters properly brought before it. Unless otherwise exempt under Florida Law, all regular Board meetings shall be open to the public.

8. Special Board Meetings

Special meetings of the Board may be called by the Chair, by any three (3) Commissioners, or by the CEO. Written notice shall be given to each Commissioner stating the purpose and time and place of the meeting; provided, however, that attendance of a Commissioner at a meeting constitutes a waiver of such notice of the meeting and of any and all objections to the place, time, or manner of calling or convening the meeting, unless the Commissioner states, at the beginning of or promptly upon arrival at the meeting, any objection to the transaction of any business on the grounds that the meeting is not called or convened in accordance with these Bylaws. Unless otherwise exempt under Florida Law, all such special Board meetings shall be open to the public.

9. Emergency Board Meetings

Notwithstanding anything in these Bylaws to the contrary, in the event of a bona fide emergency, any Commissioner or the CEO may call an emergency Board meeting to deal with the emergency, which may be held following reasonable public notice as practicable under the circumstances. In such a situation, the first order of business at the convened
emergency Board meeting shall be a finding by a majority vote of the Board that a bona fide emergency exists to justify calling the emergency Board meeting. Any action taken at an emergency Board meeting must be subsequently ratified by the Board at the next regularly scheduled meeting of the Board. No business other than that stated in the notice or required to deal with the emergency may be transacted at such emergency Board meeting. No business otherwise prohibited from being conducted under Florida Law shall take place or be discussed at an emergency Board meeting. Unless otherwise exempt under Florida Law, all such meetings shall be open to the public.

10. Annual Meeting

The annual organizational meeting of the Board shall be held during the first regular Board meeting of the District’s fiscal year (the “Annual Meeting”).

11. Budget and Tax Hearings

The Board shall hold tentative and final budget and tax hearings each year and each such hearing shall be noticed to the public and conducted in accordance with Florida Law.

12. Committees and Committee Meetings

All committees of the Board shall abide by all the meeting rules applicable to the Board as enumerated in these Bylaws. Unless otherwise exempt under Florida Law, all Board committee meetings shall be open to the public. Notwithstanding the foregoing, nothing herein shall be interpreted to require any committee to open a meeting to the public when such meeting is not otherwise required to be open to the public under Florida Law.

(a) General Authority to Establish Committees

The Board may establish, dissolve, or suspend any Board committee at any time by resolution to further the Board’s purposes and Charter oversight duties; provided, however, that such establishment, dissolution, or suspension of such committees is not otherwise restricted or prohibited under applicable federal laws, rules or regulations, Florida Law, these Bylaws, or other requirements set forth by any applicable accrediting agency and that the Board always maintains the essential number and type of committees consistent with the size and scope of the District’s activities.

(b) Duties, Authority, Composition and Jurisdiction of Committees

All committees of the Board shall be under the direction and control of the Board. It is the intent of these Bylaws that all Board committees carry out the general purposes of the Board and exercise authority in such a manner as to assist the Board in the proper performance of its Charter oversight duties in accordance with these Bylaws and the Charter, as amended from time to time. The resolution establishing the Board committee shall, at a minimum, include the duties, authority, composition, and jurisdiction of the Board committee, and any amendments thereto and, to the extent applicable, the Board
committee’s sunset date or other conditions resulting in its expiration.

(c) Establishment of Committees

Any committee established by resolution of the Board shall report decisions and recommendations to the Board for final approval unless otherwise delegated decision-making authority by the Board; provided, that such delegation is permitted under Florida Law. Committees may be codified in the “Committees and Committee Meetings” section of the Codified Resolutions of the Board of Commissioners of the North Broward Hospital District (the “Codified Resolutions”) as herein established, shall delineate the policies and activities of such committees, and may specify the frequency of Board committee meetings.

(d) Attendance and Participation by Commissioners

All Commissioners may attend any Board committee meeting and may participate in the discussions and deliberations of such committee, but shall not be entitled to vote on matters or be used to establish a quorum unless the Commissioner is a member of such committee.

(e) Committee Appointments

All committee members serve at the pleasure of the Board and, unless otherwise provided for in these Bylaws, Florida Law, applicable federal laws, rules and regulations, or applicable accreditation standards, the members of all committees of the Board shall be appointed or reappointed by the Board at the next Board meeting following the Annual Meeting and shall serve for a one (1) year term or the remainder of the then-current term. Vacancies may be filled for the remainder of the then-current term by the Board at any regular or special Board meeting.

(f) Committee Member Eligibility

In no event shall any employee of the District or any of its Subsidiaries or affiliates be appointed to serve on any Board committee.

(g) CEO and General Counsel

The CEO, or his or her designee, shall be required to attend all Board committee meetings to further the purposes, goals and objectives of such committees, provide support and/or relevant information to such committee, and to assist in matters falling within the jurisdiction of such committee. The General Counsel, or his or her designee, shall be required to attend all Board committee meetings to provide legal support and advise the committees regarding proper procedure and compliance with applicable law.
(h) Nondelegation

In no event shall any Board committee have the power to delegate its authority unless the Board gives its prior approval of such delegation and it is permitted under Florida Law.

(i) Immunities

The acts or omissions of Commissioners and other individuals serving on committees of the Board shall be within the scope of their official duties for and on behalf of the District. Commissioners serving on committees of the Board shall be entitled to all the privileges and immunities conferred by Florida Law.

Article IV

Administration

1. Direct Board Reports

The Board may find it necessary to create or modify a position and designate that such position report directly to the Board (each, a “Direct Board Report”). The Board, by resolution, may establish or revoke a position’s classification as a Direct Board Report except where the classification of a Direct Board Report has been expressly established in these Bylaws. Any Direct Board Report may be removed or suspended at any time, with or without cause, by the affirmative vote of the majority of the Board unless prohibited under Florida Law, applicable federal laws, rules or regulations, or any applicable accreditation standards; provided, however, that any such removal or suspension shall be without prejudice to the contract rights, if any, of the person so removed. Appointment as a Direct Board Report shall not of itself create contract rights. Any Direct Board Report may resign at any time by delivering notice to the District. Resignation by a Direct Board Report is effective when the notice is delivered unless the notice provides a later effective date or such Direct Board Report’s contract provides otherwise.

The following policies apply to all Direct Board Reports:

(a) All Direct Board Reports shall work collaboratively together and in the best interest of the District and all Direct Board Reports (other than the CEO) shall coordinate with and alert the CEO or his or her designee regarding leave time;

(b) In order to ensure independence in their positions and communications, Direct Board Reports may not be terminated, suspended, or otherwise removed from their position absent a majority vote of the Board; and

(c) In the case of the death, permanent and total disability, resignation or retirement of a Direct Board Report (other than the CEO), the CEO may appoint an interim Direct Board Report to replace such person until such time as the Board replaces such Direct Board Report. Any interim Direct Board Report shall perform all of the duties of such Direct Board Report, and when so acting shall have all the powers of and be subject to all the
restrictions upon such Direct Board Report, including the power to sign all instruments and to take all actions that such Direct Board Report is authorized to perform by the Board or these Bylaws.

2. **President and Chief Executive Officer**

Consistent with Florida Law and applicable federal laws, rules and regulations and accreditation standards, the Board shall select and employ a CEO to be accountable to and to manage the operations of the District and its Subsidiaries. The CEO shall be a Direct Board Report. The CEO, subject to the Board, shall have general executive charge, management, and control of the properties and operations of the District in the ordinary course of its business, with all such powers with respect to such properties and operations as may be reasonably incident to such responsibilities. As necessary, the Board by resolution shall establish and/or modify the duties and authorities of the CEO to ensure the proper management of the District, its resources and obligations. It shall be the duty of the CEO to carry out all duties and policies established by the Board and those imposed under Florida Law. The CEO’s specific duties shall include, but not be limited to, recommending to the Board a management organizational chart establishing the District’s organizational structure, which defines the lines of authority of the District’s and its Subsidiaries’ personnel for approval by the Board as part of an annual operating budget recommendation. Nothing herein shall prohibit the CEO from modifying or changing such management organizational chart and presenting the same to the Board for informational purposes at any other regular or special Board meeting; provided, however, that the Board must approve such changes to the organizational chart if such changes adversely effect the budget previously approved by the Board.

3. **Executive Vice President and General Counsel**

The Board shall maintain an Office of the General Counsel and establish and amend from time to time its duties, responsibilities, and authority. The Office of the General Counsel shall be managed by an Executive Vice President and General Counsel (the “General Counsel”) who shall be a Direct Board Report and shall be the chief legal officer of the District. The General Counsel and all such attorneys employed in the Office of the General Counsel shall be members of the Florida Bar.

4. **Chief Internal Auditor**

The Board shall maintain an independent Internal Audit Department to audit and review the District’s facilities and operations. The Internal Audit Department shall be managed by an independent Chief Internal Auditor who shall be a Direct Board Report and shall be the Board’s direct representative in the audit and review of the District’s facilities and operations.

5. **Chief Compliance and Privacy Officer**

The Board shall maintain a Corporate Compliance and Ethics Department to manage the District’s compliance and ethics program. The Corporate Compliance and Ethics Department
shall be managed by a Chief Compliance and Privacy Officer who shall be a Direct Board Report.

Article V
Medical Staff

1. Authority of the Board

The Board shall require members of the medical staffs of the District (collectively, the “Medical Staff”) to abide by and to perform those professional duties and responsibilities prescribed by these Bylaws, the Medical Staff Bylaws (as defined below), and all rules, regulations, and policies promulgated thereunder, and to enforce all of the foregoing requirements by the revocation and suspension of Medical Staff membership and clinical privileges as set forth in the Medical Staff Bylaws.

2. Medical Staff Bylaws

The Medical Staff shall be established and organized under a uniform set of bylaws entitled the Bylaws of the Medical Staff of Broward Health, as amended from time to time (the “Medical Staff Bylaws”). The Medical Staff shall be, at all times, self-governing and accountable to the Board. In the event that Florida Law, any applicable federal law, rule, or regulation or applicable accreditation standards conflict with the provisions of the Medical Staff Bylaws, such Florida Law, applicable federal law, rule, or regulation or applicable accreditation standard shall control.

(a) Standards and Composition of the Medical Staff Bylaws

The Medical Staff Bylaws shall include guidelines, standards, and rules that describe the Medical Staff’s processes for self-governance, appointment, credentialing, privileging, oversight, and the Medical Staff’s peer review policies and due process rights guarantees. The Medical Staff Bylaws and all rules, regulations, and policies adopted pursuant thereto shall be submitted to and approved by the Board before being implemented by the Medical Staff.

(b) Appointment to the Medical Staff

The Medical Staff Bylaws shall establish procedures to examine the credentials of all eligible candidates for Medical Staff membership in accordance with federal laws and regulations, Florida Law, and applicable accreditation standards. The Medical Staffs shall be responsible for making recommendations to the Board concerning initial staff appointments, reappointments, the assignment or curtailment of privileges, and the evaluation of clinical competence of each member of the Medical Staff. All appointments and reappointments to the Medical Staff shall only be effective if ratified by the Board. Membership to the Medical Staff and/or clinical privileges shall not be denied in an arbitrary, unreasonable or capricious manner, or on the basis of race, color, religion, sex, pregnancy, national origin, age, disability, sexual orientation, or marital status. All
members of the Medical Staff shall conduct themselves in a manner that ensures that the welfare and health of the District’s patients and the best interest of the public at all times be served.

(c) Compliance with Laws and Standards

The Medical Staff Bylaws shall be consistent with applicable federal laws and regulations, the Centers for Medicare & Medicaid Services’ Conditions of Participation, Florida Law, and any and applicable accreditation standards (collectively, the “Standards”). The Medical Staff Bylaws shall be reviewed periodically to ensure that the Medical Staff Bylaws are consistent with the Standards. The Office of the General Counsel shall assist the Board and the Medical Staff, and the Board and Medical Staff may request the assistance of any other department of the District when reviewing the Medical Staff Bylaws to ensure compliance with the Standards. Notwithstanding the foregoing, in the event of any conflict between the Medical Staff Bylaws and any applicable Standards, the Standards shall govern the Medical Staff as if the same were specifically set forth in the Medical Staff Bylaws.

(d) Amendments to the Medical Staff Bylaws

The Medical Staff Bylaws shall prescribe a procedure for amending the Medical Staff Bylaws and establishing and amending any rules, regulations and policies. Any changes to the Medical Staff Bylaws and any rules, regulations, and policies promulgated thereunder shall be submitted to, and approved by, the Board before being implemented by the Medical Staff.

Article VI

Codified Resolutions of the Board of the North Broward Hospital District

Any resolutions adopted pursuant to these Bylaws shall be codified and organized by the CEO, or his or her designee, in the Codified Resolutions as established by the Board. All resolutions codified in the Codified Resolutions shall be organized in a logical structure established by the Board through resolution. The Codified Resolutions shall be promptly posted online with public access. All such Codified Resolutions shall be promptly updated as needed to reflect any changes to such resolutions. Nothing herein shall be construed as prohibiting a resolution to take immediate effect or effect at a date certain if such resolution is not yet codified in the Codified Resolutions.

Article VII

Miscellaneous

(a) Amendments

These Bylaws may be amended from time to time by the Board upon an affirmative vote of a two-thirds (2/3) of the total number of Commissioners established under the Charter
at any regular or special Board meeting; provided, however, that any proposed amendments shall be presented in writing and delivered to each Commissioner at or prior to the regular meeting of the Board the month preceding the regular or special meeting at which the amendment is adopted (an “Amendment Notice”). Notwithstanding the foregoing, the attendance of a Commissioner at a meeting constitutes a waiver of such Amendment Notice and of any and all objections to the place, time, or manner of calling or convening the meeting, unless the Commissioner states, at the beginning of or promptly upon arrival at the meeting, any objection to the consideration of amendments to these Bylaws on the grounds that the meeting is not called or convened in accordance with these Bylaws. Notwithstanding the foregoing, nothing herein shall be construed as a prohibition on the Board to modify, amend, or make changes to a proposed amendment to the Bylaws and immediately adopt such an amendment with the modifications or changes; provided, that the Amendment Notice procedure is properly followed and no additional amendments outside the subject matter of the Amendment Notice are proposed. Any Commissioner and any Direct Board Report may recommend to the Board amendments to these Bylaws.

(b) Invalid Provisions

If any one or more of the provisions of these Bylaws, or the applicability of any provision to a specific situation, shall be held invalid or unenforceable, the provision shall be modified to the minimum extent necessary to make it or its application valid and enforceable, and the validity and enforceability of all other provisions of these Bylaws and all other applications of any provision shall not be affected thereby.

(c) Indemnification

To the extent permitted or required under Florida Law, the District shall indemnify, defend, and hold harmless any current or former Commissioner, committee member, officer, or employee of the District for any act or omission arising out of and in the course of the performance and scope of such individual’s duties and responsibilities to the District. In such an event, any District insurance or self-insurance shall be the first and primary protection and the indemnification provided under this section shall be contingent on the indemnified person complying with the terms and conditions of any insurance policy providing coverage for any such act or omission. Consistent with these Bylaws, the Board may establish further requirements and procedures for such indemnification by resolution and any such resolution established hereunder shall be codified in the Codified Resolutions.
Companion Resolutions
To The Proposed
2019 Broward Health Bylaws
Codified Resolutions
of the
Board of Commissioners of
the North Broward Hospital District
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Chapter 1: Introduction and Guidelines

WHEREAS, Fla. Admin. Code R. 59A-3.272 requires the Board to review its Bylaws, rules and regulations at least every two (2) years;

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”);

WHEREAS, the Board intends that Board governance at all times remain consistent with any applicable federal laws and regulations, Florida Law, and accreditation standards;

WHEREAS, the Board, from time to time, proposes and ratifies resolutions that establish Board action, Board policies, and direct that certain tasks or activities be undertaken to assist the Board in its Charter oversight duties; and

WHEREAS, the Board intends that certain procedures be followed during the adoption of such resolutions.

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. The Bylaws and all accompanying resolutions passed and ratified thereto shall be reviewed by the Board at least every two (2) years.

2. The General Counsel’s Office of the District shall be responsible for ensuring that all provisions within the Bylaws and its resolutions are consistent with Florida Law, any applicable federal laws, rules and regulations, and accreditation standards (collectively, the “Laws and Regulations”). The General Counsel’s Office of the District, to the extent applicable, shall submit any proposed changes to the Bylaws or its accompanying resolutions at least every two (2) years or, if necessary, more often to ensure that the District is in compliance with all Laws and Regulations and is adequately performing its functions in the best interests of the public and pursuant to the purposes for which it was established.

3. Pursuant to the Bylaws, the Board hereby establishes the Codified Resolutions. Any Codified Resolutions adopted by the Board shall supplement, and not supersede, the Bylaws. To the extent that a resolution conflicts with the Bylaws, the Bylaws shall control. All such resolutions passed shall comply with all Laws and Regulations. To the extent that a resolution, or part thereof, conflicts with any Laws and Regulations, the Laws and Regulations shall control and such resolution, or the remainder of the resolution, shall be interpreted, to the extent allowable under Laws and Regulations, consistent with the intent of the Board when passing such resolution.

4. All resolutions adopted by the Board with respect to administrative matters, as reasonably determined by the Codified Resolutions Custodian (as defined below), shall be codified
within these Codified Resolutions. Codification will follow a logical numbering system that, to the extent possible, is consistent with the articles, sections, and subsections of the Bylaws for reference. Any capitalized terms not otherwise apparent within its context or not otherwise defined within the respective resolution shall have the meaning associated to it within the Bylaws.

5. The CEO or his or her designee (the “Codified Resolutions Custodian”) shall be responsible for the maintenance and codification of resolutions within the Codified Resolutions.

6. When codifying resolutions, the Board hereby authorizes and grants the Codified Resolutions Custodian the authority to correct any scrivener’s errors, including, but not limited to, misspellings, punctuation, and/or grammatical errors; provided, however, that such corrections shall not frustrate, undermine, alter, modify, or change the intent and purpose of such resolution, as reasonably determined by the General Counsel.

7. The Codified Resolutions Custodian shall include the date that any resolution included as a Codified Resolution was adopted by the Board, and the dates of any amendments thereto, and shall ensure that before a resolution is codified, it complies with the requirements of this resolution and, to the extent required, shall reorganize such resolution to conform to the required structure and organization set forth herein.

8. Resolutions shall promptly be codified and posted online with online access. Nothing herein shall be construed as prohibiting a resolution to take immediate effect or effect at a date certain if such resolution is not yet codified in the Codified Resolutions.

9. The Board, when passing a resolution, shall include the following form requirements within such resolution:

(a) A preamble briefly establishing the purpose(s) and intent of the resolution and containing a resolving paragraph;

(b) The scope of the resolution;

(c) Numbered paragraphs;

(d) To the extent applicable, the effective and sunset dates of the resolution. In the event that no effective date or sunset date is provided, such resolution shall be deemed effective immediately and shall remain in effect until the Board repeals or modifies the resolution, as the case may be;

(e) The effective date of the resolution if the Board intends the resolution to take effect at a date certain. In the event no effective date is provided in a resolution, the resolution will be deemed to take effect immediately upon Board ratification; and
(f) Language establishing that the resolution supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.

10. To the extent that any of the above form resolution requirements are not met following the adoption of a resolution, such nonconformance shall not prevent or inhibit the authority of such resolution, and such resolution shall operate with full force and effect as if passed consistent with the form resolution requirements. Notwithstanding the foregoing, in the event that a resolution fails to comply with the form resolution requirements, the CEO, or his or her designee, shall notify the Board at its next regular or special meeting after the CEO, or his or her designee, becomes aware of such non-conformance, as to the deficiencies of such resolution to ensure that the deficiencies may be promptly rectified before the resolution is codified. When notifying the Board as to deficiencies in a resolution’s form, the CEO, or his or her designee, shall place the item on the regular or special Board meeting’s agenda consistent with the uniform administrative agenda process adopted by the Board.

11. Nothing herein shall be construed as permitting any individual, without Board approval, to add or modify any language to conform to the form resolution requirements provided herein.

12. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Chapter 2: Governing Board

Section 2.1: RESERVED
Section 2.2: Board’s Responsibilities
Section 2.3: Delegation of Authority
Section 2.4: Education of Commissioners and Committee Members
Section 2.5: RESERVED
Section 2.6: RESERVED
Section 2.7: Code of Conduct and Ethics
Section 2.8: RESERVED
Section 2.2: Board’s Responsibilities

WHEREAS, the Board oversees the affairs of, and determines policies for, the District and its Subsidiaries;

WHEREAS, such affairs and policies are subject to significant State and federal laws, rules and regulations;

WHEREAS, it is important that Commissioners understand their respective responsibilities; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. In addition to any other duties imposed on the Board by Florida Law, the Bylaws, applicable federal laws, rules and regulations and applicable accreditation standards, the Board’s powers and duties shall include, but not be limited to:

   (a) Overseeing the affairs of the District pertaining to the safety of patients and quality of care, treatment, and services provided by the District and its Subsidiaries and fostering a culture of safety and quality in the District and its Subsidiaries.

   (b) Providing the resources required to maintain safety of patients, high-quality care, treatment, and services.

   (c) Ensuring that performance improvement activities reflect the complexity of the District’s hospitals’ and other health care facilities’ organization and services, involve all departments and services, and include services provided under contract.

   (d) Working together with the senior management of the District and the Chiefs of Staff of the Medical Staff to annually evaluate the District’s hospitals’ and other health care facilities’ performance in achieving its mission, vision, and goals.

   (e) Providing the Medical Staff with the opportunity to participate in governance and the opportunity to be represented at governing body meetings in accordance with the Medical Staff Bylaws (through in-person attendance and electronic communications technology) by the Chiefs of Staff, as selected by the Medical Staff, at each of the District’s hospitals.

   (f) Consulting directly with the Chiefs of Staff or their designees periodically throughout the fiscal year, including discussing matters related to the quality of medical care provided to patients of the District.
2. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 2.3: Delegation of Authority

WHEREAS, the Board is responsible for oversight of the Charter;

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”);

WHEREAS, Florida Law permits the delegation of authority unless otherwise prohibited thereunder; and

WHEREAS, the Board from time to time desires to delegate certain powers and authority to Board committees, District departments, Direct Board Reports, and other individuals or entities.

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. The Board may delegate by separate resolution certain powers and authority to Direct Board Reports, District departments or committees, or other individuals or entities; provided, that such delegation falls within operational management insofar as it involves the day to day management of the District and is permitted under Florida Law.

2. All authority previously delegated by the Board to the CEO, any Direct Board Reports, Board and other committees, District departments, or other individuals or entities shall not be superseded hereby and shall survive the adoption of this resolution; provided, that such delegation is permitted under Florida Law.

3. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 2.4: Education of Commissioners and Committee Members

WHEREAS, the Board oversees the affairs of, and determines policies for, the District and its Subsidiaries;

WHEREAS, such affairs and policies are subject to significant State and federal laws, rules and regulations;

WHEREAS, it is important that Commissioners and members of committees of the Board who are not Commissioners understand their powers and duties; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. All Commissioners and members of committees of the Board who are not Commissioners shall participate in an orientation program. Such orientation program shall educate the Commissioners and members of committees of the Board who are not Commissioners regarding State and federal laws pertaining to open meetings, public records, ethics, fraud and abuse, prohibitions on physician arrangements, and the District’s purpose and interest in providing high-quality health care, maintaining compliance, and the Board’s role in its oversight of such activities. At a minimum, such orientation program shall include training on Section 286.011, Florida Statutes (aka, the Sunshine Law), Chapter 119, Florida Statutes (aka, Florida’s Public Records Act), Part III of chapter 112, Florida Statutes (aka, the Code of Ethics for Public Officers and Employees), 42 U.S.C. § 1320a-7b(b) (aka, the Anti-Kickback Statute), 42 U.S.C. § 1395nn (aka, the Stark Law), Section 456.053, Florida Statutes (aka, Florida’s Patient Self-Referral Act of 1992), Broward Health’s Corporate Compliance Program, Broward Health’s Code of Conduct, Broward Health’s Quality Assurance Program, and the Board’s responsibility for ensuring quality care. All Commissioners and members of committees of the Board who are not Commissioners shall participate in annual compliance training and the Board’s program of continuing education, as required by the Code of Conduct and Ethics, adopted under the Charter, as amended from time to time.

2. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 2.7: Code of Conduct and Ethics

WHEREAS, the District’s Charter requires the Board to establish and adopt a code of conduct and ethics that governs the Board (the “Code of Conduct and Ethics”);

WHEREAS, the Charter requires the Board to provide certain provisions in the Code of Conduct and Ethics;

WHEREAS, the Board, consistent with the obligations and requirements imposed under the Charter, desire to establish the Code of Conduct and Ethics; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. The Board hereby establishes the Code of Conduct and Ethics.

2. For purposes of this Code of Conduct and Ethics, the following terms shall have meanings associated to them:
   a. “Conflict of Interest” means a situation in which regard for a private interest tends to lead to disregard of a public duty or interest.
   b. “Proper Disclosure” means a written notification by a Commissioner or Board committee member to the Compliance and Ethics Department when a Commissioner or Board committee member encounters a Conflict of Interest.

3. In the event of a Conflict of Interest, a Commissioner or Board committee member shall provide Proper Disclosure as soon as reasonably possible.

4. Pursuant to the Charter, it is considered a Conflict of Interest if any outside entity with a vendor or contractual relationship with the District, or any outside entity seeking a vendor or contractual relationship with the District, contacts a Commissioner or Board committee member with the intent to influence the decision of the Board. Accordingly, to the extent a Conflict of Interest arises in this circumstance, the affected Commissioner or Board committee member shall provide Proper Disclosure as soon as reasonably possible.

5. All Commissioners are subject to and shall abide by the requirements, standards, and prohibitions of Florida’s Code of Ethics for Public Officers and Employees, Part III of chapter 112, Florida Statutes and any other applicable Florida Law.
6. All Commissioners shall be subject to and abide by all policies passed by the Board pertaining to the acceptance of gifts including, but not limited to, Policy GA-004-012: Gifts, Gratuities, and Business Courtesies and Broward Health’s Code of Conduct.

7. The Board, through its Charter oversight and the Board’s Compliance Committee, shall be responsible for the appropriate implementation of the District’s Compliance and Ethics program as applicable to all financial and operational risks of the District.

8. Each Commissioner and Board committee member shall receive a copy of, acknowledge receipt of, and agree to comply with, the Code of Conduct and Ethics.

9. Each Commissioner and committee member shall participate in annual compliance training and continuing education which shall include, but not be limited to, the Board’s Charter oversight responsibilities, the Board’s responsibilities under this Code of Conduct and Ethics, the Board’s responsibilities under chapter 286, Florida Statutes (aka, the Sunshine Law), chapter 119, Florida Statutes (aka, Florida’s Public Records Act), Part III of chapter 112, Florida Statutes (aka, the Code of Ethics for Public Officers and Employees), 42 U.S.C. § 1320a-7b(b) (aka, the Anti-Kickback Statute), 42 U.S.C. § 1395nn (aka, the Stark Law), and the Board’s and District’s obligations under its Corporate Integrity Agreement with the Office of Inspector General, United States Department of Health and Human Services.

10. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Chapter 3: Board and Committee Meetings

Section 3.1: RESERVED
Section 3.2: RESERVED
Section 3.3: RESERVED
Section 3.4: Meeting Agendas
Section 3.5: Minutes and Records of Meetings
Section 3.6: RESERVED
Section 3.7: RESERVED
Section 3.8: RESERVED
Section 3.9: Emergency Board Meetings
Section 3.10: RESERVED
Section 3.11: RESERVED
Section 3.12: Committees and Committee Meetings
Section 3.4: Meeting Agendas

WHEREAS, the Board oversees the affairs of, and determines policies for, the conduct of Board and Board committee meetings; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

A. Reserved

B. Process for Adding Agenda Items

1) The administrative preparation of all Board and Board committee agendas are hereby delegated to the CEO, or his or her designee.

2) The CEO shall propose a uniform administrative agenda process, which shall include an agenda calendar and delineate the process for submission of agenda items, preparation and publication of agendas and back-up material, and distribution of such agendas and back-up material to Commissioners and members of Board committees who are not Commissioners. The uniform administrative agenda process, and any amendments thereto, shall be approved by the Board at a regular or special Board meeting.

3) The Chair and the chair of a committee of the Board may designate the order and organization of their meeting agendas, but no agenda items properly submitted for consideration may be excluded by the Chair or the chair of a Board committee absent approval by the Board or such committee, as the case may be.

4) Any Direct Board Report may place items on the agenda of any regular or special Board meeting or Board committee meeting, any Commissioner may place items on the agenda of any regular or special Board meeting, and any Commissioner or member of a committee who is not a Commissioner may place items on the agenda of any Board committee meeting of a Board committee on which he or she serve; provided, that such placement of items on the agenda is in accordance with the uniform administrative agenda process adopted by the Board.

C. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 3.5: Minutes and Records of Meetings

WHEREAS, the Board recognizes that there may be times that members of the public cannot physically attend meetings;

WHEREAS, to the extent practicable, the Board desires that the public is made aware of the deliberations and actions of the Board and the committees of the Board;

WHEREAS, the Board is committed to public transparency in all of its actions;

WHEREAS, the Board desires to use common and available technological means to provide public access to its regular, special, and Board committee meetings for those individuals who cannot otherwise be physically present at such meetings; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. In keeping adequate records of regular, special, and Board committee meetings, where available and where possible, such record shall include both audio/video recordings. Such recordings shall be kept on the District’s website for at least one (1) year. All recordings shall be kept and archived consistent with Florida’s public records laws, chapter 119, Florida Statutes and GS1-SL and GS4 of the General Records Schedules of the Division of Library and Information Services, Florida Department of State.

2. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 3.9: Emergency Board Meetings

WHEREAS, the Board recognizes that there may be times where the Board may need to convene in a swift and immediate manner to deal with emergencies;

WHEREAS, the Board recognizes that the traditional notice requirements of section 286.011, Florida Statutes (the “Sunshine Law”) and chapter 189, Florida Statutes (the “Uniform Special District Accountability Act”) may make it impracticable to deal with such emergencies;

WHEREAS, the Sunshine Law, Uniform Special District Accountability Act, and other Florida Laws contemplate that situations may arise whereby boards may have to convene on an emergency basis;

WHEREAS, various provisions of Florida Law, including, but not limited to, Sections 286.0114(3)(a) and 189.015(1), Florida Statutes, provide that such emergencies exist when there occurs a situation that affects the health, welfare, or safety of the public and compliance with the usual notice and public participation requirements of the Sunshine Law and Uniform Special District Accountability Act would be impracticable and cause an unreasonable delay in the ability of the Board to act in a swift and immediate manner to deal with such an emergency (a “Bona Fide Emergency”);

WHEREAS, Florida Law, the Sunshine Law, and the Uniform Special District Accountability Act do not provide much guidance regarding the procedure for the Board to follow in cases where the Board must immediately convene to deal with an emergency;

WHEREAS, the Board intends for this Resolution to provide a procedure for the Board to follow in dealing with situations involving emergencies whereby the Board must act in a swift and immediate manner; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. Notwithstanding anything in the Codified Resolutions to the contrary, in the event of a Bona Fide Emergency, any Commissioner or the CEO may call a Board meeting to deal with the Bona Fide Emergency, which may be held following reasonable public notice as practicable under the particular circumstances to deal with the emergency.

2. In such a situation, the Board’s first order of business at the emergency meeting shall be a finding by a majority vote that a Bona Fide Emergency exists. Such a finding must conclude that a situation exists whereby an immediate act or decision must be taken to deal with a matter which affects the health, welfare, or safety of the public and that proper notice was provided as is appropriate under the circumstances. If the Board fails to make a finding that
such an event constitutes a Bona Fide Emergency, the Board must adjourn the meeting and comply with the public notice requirements generally applicable under Florida Law to regular and special Board meetings.

3. No business other than that stated in the notice or required to deal with the emergency may be transacted at such emergency meeting.

4. Consistent with Section 189.015(1), Florida Statutes, or any successor statute thereof, all as amended from time to time, the annual budget shall not be approved at an emergency meeting.

5. Any action taken at an emergency meeting must be subsequently ratified by the Board at the next meeting of the Board that is publicly noticed in accordance with the public notice requirements generally applicable to regular and special Board meetings.

6. Unless otherwise exempt under Chapter 395, Florida Statutes, or other provision of Florida Law, all emergency meetings shall be open to the public and governed by the provisions of Section 286.011, Florida Statutes, or any successor statute thereof, all as may be amended from time to time.

7. To the extent that allowing public participation would inhibit the swift and immediate action of the Board to deal with a Bona Fide Emergency, the Board may limit or entirely prohibit such public participation in the matter in accordance with Section 286.0114(3)(a), Florida Statutes, or any successor statute thereof, all as may be amended from time to time.

8. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 3.12: Committees and Committee Meetings

WHEREAS, the Board, in exercising its Charter oversight duties, desires to create committees to better assist the Board with performing such duties;

WHEREAS, such committees of the Board shall be created by resolution and establish such committee’s composition, jurisdiction, duties, and responsibilities;

WHEREAS, the District, as a special taxing district of the State of Florida, is subject to section 286.011, et seq., Florida Statutes (the “Sunshine Law”);

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. Unless otherwise provided by Chapter 395, Florida Statutes, or other provision of law, all Board committee meetings shall be open to the public and governed by the provisions of the Sunshine Law, or any successor statute thereof, all as may be amended from time to time. Notwithstanding the foregoing, nothing herein shall be construed or interpreted as requiring an advisory committee established solely for, and delegated only with, information-gathering or fact-finding authority to hold meetings open to the public or be subject to the provisions of the Sunshine Law; provided, however, that such advisory committees shall be required to hold open meetings and be subject to the notice and minute-taking requirements of the Sunshine Law if such committee consists of two (2) or more Commissioners.

A. RESERVED

B. RESERVED

C. Establishment of Committees

The Board, consistent with Section 12(c) of Article III of the Bylaws, establishes the following permanent standing committees of the Board.

1. Audit Committee.

   (a) Composition. The Audit Committee shall consist of three (3) Commissioners and two (2) expert consultants who shall be [appointed by the Board] in accordance with the Bylaws. Expert consultants serving on the Audit Committee shall be subject to Bylaws and, consistent with the Bylaws, shall participate in the
Board’s orientation program. The Chief Internal Auditor, or his or her designee, shall be required to attend all Audit Committee meetings to further the purposes, goals, and objectives of the Audit Committee, provide support and relevant information to the Audit Committee, and assist in matters falling within the jurisdiction of the Audit Committee. The Board’s Secretary-Treasurer shall not serve on the Audit Committee.

(b) Duties. The Audit Committee’s function, independence, and duties shall be as outlined in the Audit Committee Charter, adopted on August 27, 2006, and as amended from time to time.

(c) Meetings. The Audit Committee shall meet at least quarterly or as otherwise required by applicable law, or as necessary to perform its duties as set forth herein.

2. Building Committee

(a) Composition. The Building Committee shall consist of three (3) Commissioners who shall be [appointed by the Board].

(b) Duties. The Building Committee shall consider all matters concerning the District’s and its Subsidiaries’ buildings, facilities and land and to attend to all matters relating to new construction, renovation, acquisition, and leasing of real property in and for the District and its Subsidiaries, as well as to perform other duties that may be requested by the Board from time to time.

(c) Meetings. The Building Committee shall as necessary to perform its duties as set forth herein.

3. Compliance Committee

(a) Composition. The Compliance Committee shall consist of all members of the Board. The Chief Compliance and Privacy Officer, or his or her designee, shall be required to attend all Compliance Committee meetings to further the purposes, goals, and objectives of the Compliance Committee, provide support and relevant information to the Compliance Committee, and assist in matters falling within the jurisdiction of the Compliance Committee.

(b) Duties. The Compliance Committee shall be responsible for the review and oversight of the District’s Compliance and Ethics Program, including, but not limited to, matters related to compliance with federal and state health care program requirements; the obligations of the District’s Corporate Integrity Agreement between the District and the Office of Inspector General (the “OIG”) of the United States Department of Health and Human Services (the “CIA”);
matters brought to and the performance of the Executive Compliance Workgroup that serves as the Compliance Committee under the CIA; the performance of the Chief Compliance and Privacy Officer; and any other duties that may be requested by the Board from time to time.

(c) The Compliance Committee shall submit to the Board and the OIG a description of the documents and other materials it reviewed along with any additional steps taken (including, but not limited to, the engagement of an independent advisor or other third-party resources) in the Compliance Committee’s oversight of the District’s Compliance and Ethics Program or in support of making the Board’s resolution, as detailed in the CIA, summarizing the Compliance Committee’s review and oversight of the District’s compliance with federal health care program requirements and the District’s obligations under the CIA.

(d) Meetings. The Compliance Committee shall meet at least quarterly or more as necessary to perform its duties as set forth herein.


(a) Composition. The Finance Committee shall consist of all Commissioners.

(b) Duties. The Finance Committee shall review short, intermediate, and long range financial plans of the District and shall attend to all financial interests of the District as prescribed by the Charter. The Finance Committee shall also perform other duties that may be requested by the Board from time to time.

(c) Meetings. The Finance Committee shall meet at least quarterly or as otherwise required by applicable law, or as necessary to perform its duties as set forth herein.

5. Governance Committee.

(a) Composition. The Governance Committee shall consist of three (3) Commissioners who shall be [appointed by the Board] in accordance with the Bylaws.

(b) Duties. The duties of the Governance Committee shall include, but not be limited to, reviewing and making recommendations to the Board about the District's governance structure and participating in the development of training and orientation materials for new Commissioners. The Governance Committee shall conduct periodic reviews of the District’s Bylaws and governance-related policies to ensure that they are consistent with the District's Charter, as amended from time to time, and that the Board is performing its duties as outlined in the
Charter efficiently. The Governance Committee shall also perform any other duties that may be requested by the Board from time to time.

(c) Meeting. The Governance Committee shall meet as needed at the request of the Board, the Chair or the chair of the Governance Committee.

6. Human Resources Committee.

(a) Composition. The Human Resources Committee shall consist of three (3) Commissioners who shall be [appointed by the Board] in accordance with the Bylaws. The CEO shall, to the extent necessary, require the attendance of the Chief Human Resources Officer to further the purposes, goals and objectives of the Human Resources Committee, provide support and/or relevant information to the Human Resources Committee, and to assist in matters falling within the jurisdiction of the Human Resources Committee.

(b) Duties. The duties of the Human Resources Committee shall include, but not be limited to, conducting annual reviews and/or performance evaluations of the Direct Reports, establishing performance standards, reviewing executive leadership structure and positions, and reviewing employee benefits and incentive plans. The Human Resources Committee shall also perform other duties that may be requested by the Board from time to time.

(c) Meetings. The Human Resources Committee shall meet as necessary to perform its duties as set forth herein.

7. Joint Conference Committee.

(a) Composition. The Joint Conference Committee shall be a joint committee of the Board, administration and the Medical Staff. The voting members shall be comprised of the following persons: the Chief of Staff, the Vice Chief of Staff, and the Secretary/Treasurer of each of the District’s hospitals; three (3) Commissioners; the Chief Executive Officer of each of the District’s hospitals; and the CEO. The Chief Medical Officer shall be a non-voting ex officio member of the Joint Conference Committee. The chairpersonship shall alternate annually between a Commissioner and a member of the Medical Staff elected by the Medical Staff members of the Joint Conference Committee. In the event that a member of the Chief of Staff, Vice Chief of Staff, or Secretary/Treasurer of one of the District’s hospitals is unavailable to serve, the Medical Staff of the hospital may appoint a designee to serve as a voting member of this Committee and such designee shall be a current member of the applicable Medical Executive Council, as defined by the Medical Staff Bylaws.
(b) **Duties.** The Joint Conference Committee shall conduct itself as a forum for discussion, collaboration, and conflict resolution relating to matters of the District and hospital policy and practice, especially those matters pertaining to the delivery of efficient, effective, and quality patient care and shall be a medico-administrative liaison among the Medical Staffs, the Board, and the administration.

(c) **Meetings and Reporting.** The Joint Conference Committee shall meet at least twice a year or as necessary at the request of either the chair of the Joint Conference Committee, the Chair, the CEO, any three (3) members of the Joint Conference Committee, or when a decision of the Board is contrary to a recommendation of any Medical Executive Council or the Unified Medical Staff Committee. The Joint Conference Committee and the Unified Medical Staff Committee (as defined in the Medical Staff Bylaws) may promulgate rules to place items on the agenda of any regular or special Board meeting; provided, that such placement of items on the agenda is in accordance with the uniform administrative agenda process adopted by the Board. The recommendations of the Joint Conference Committee shall at all times be subject to final approval by the Board. It is the intent of this resolution that the Joint Conference Committee shall at all times endeavor to carry out the general purposes of the Board and shall exercise its authority in such a manner as to assist the Board in its proper performance of its duties, as is consistent with the Bylaws and the Medical Staff Bylaws.

8. **Legal Affairs and Governmental Relations Committee.**

(a) **Composition.** The Legal Affairs and Governmental Relations Committee shall consist of all Commissioners.

(b) **Duties.** The duties of the Legal Affairs and Governmental Relations Committee shall include, but not be limited to, reviewing the legal affairs of the District; reviewing the District’s State and Federal legislative efforts; reviewing contracts for physician services, major employment contracts, and other major contractual commitments to be presented to the Board in accordance with the Board policies and General Administrative Policies and Procedures, as approved and as may be amended from time to time; and performing other duties that may be requested by the Board from time to time.

(c) **Meetings.** The Legal Affairs and Governmental Relations Committee shall meet as necessary to perform its duties as set forth herein.
9. **Pension and Investment Committee.**

(a) *Composition.* The Pension and Investment Committee shall consist of three (3) Commissioners who shall be [appointed by the Board] consistent with the Bylaws.

(b) *Duties.* The duties of the Pension and Investment Committee shall include, but not be limited to, monitoring of investment management services for the general operating funds, bond funds, self-insurance funds, employee pension plans and other employee retirement plans, including, without limitation, those under Sections 403(B) and 457(B) of the Internal Revenue Code of 1986, as amended. The Pension and Investment Committee shall also perform other duties that may be requested by the Board from time to time.

(c) *Meetings.* The Pension and Investment Committee shall meet as necessary to perform its duties as set forth herein.

10. **Quality Assessment and Oversight Committee (the "QAOC").**

(a) *Composition.* The QAOC shall consist of three (3) Commissioners who shall be [appointed by the Board] in accordance with the Bylaws. To further the purposes, goals, and objectives, provide support and/or relevant information, and assist in matters falling within the jurisdiction of the QAOC, the following individuals or their designees shall be required to attend all QAOC meetings: the CEO; two (2) senior corporate members assigned by CEO; two (2) members of Corporate Quality and Risk Management; the Chief Medical Officer or a physician designated by the Chief Medical Officer; one (1) Regional Chief Nursing Officer; the Corporate Safety Officer; the Senior Vice President, Ambulatory Services; the Administrator of Gold Coast Home Health and Hospice; Administrative Vice President, Clinical Services Ambulatory Division; the General Counsel; the Chief Internal Auditor; and the four (4) Regional Chief Executive Officers, Chief Medical Officers, and Quality Services Managers.

(b) *Duties.* The duties of the QAOC shall include, but not be limited to, evaluating the needs and expectations of the individuals served by the District to determine how the District might improve its overall efforts; identify new programs and processes to better assist those individuals served by the District; identify high-volume, high-risk, problem-prone or high-cost processes; recommend methods of improvement; make recommendations regarding patient safety; and evaluate the impact of patient outcomes. The QAOC should engage and receive input and data from outside regulatory and accrediting agencies, as appropriate, to assist in the performance of its duties. The QAOC shall also perform any other duties that may be requested by the Board from time to time or as provided by
Florida Law and applicable federal law, rules and regulations and accreditation standards.

(c) Meetings. The QAOC shall meet as necessary to perform its duties as set forth herein.


(a) Composition. The Risk Management Committee shall consist of three (3) non-voting Commissioners who shall be [appointed by the Board] in accordance with the Bylaws. To further the purposes, goals, and objectives, provide support and/or relevant information, and to assist in matters falling within the jurisdiction of the Risk Management Committee, the District's Senior Vice-President of Quality and Case Management, or his or her designee, and the Corporate Director of Claims and Insurance, or his or her designee, shall be required to attend all Risk Management Committee meetings.

(b) Duties. The duties of the Risk Management Committee shall include matters that relate solely to the evaluation of claims for which the District is, or may be, liable under Section 768.28, Florida Statutes, and which are filed with the District’s Risk Management program or relate solely to offers of compromise of claims filed with the Risk Management program. The Senior Vice-President of Quality and Case Management, or his or her designee, shall be responsible for maintaining a list of all matters discussed at the Risk Management Committee and noting each matter that has resulted in the termination of all litigation and settlement of all claims arising out of the same incident. Discussion at the Risk Management Committee shall be limited only to that necessary to the evaluation of claims for which the District is liable under Section 768.28, Florida Statutes, and which are filed with the District’s Risk Management program or relate solely to offers of compromise of claims filed with the Risk Management program. The Risk Management Committee shall also perform any other duties as may be provided under Florida Law. No member of the Risk Management Committee shall be entitled to vote on the Risk Management Committee, and no action may be taken at a Risk Management Committee meeting. The Risk Management Committee is designed solely for the District’s Risk Management Department to provide information to the Board regarding threatened or pending tort litigation against the District. This, however, shall not preclude the Board from voting on any of these matters at a meeting of the Board.

(c) Meetings. The Risk Management Committee shall meet as needed to perform its duties as set forth herein. From time to time, the Risk Management Committee, to better develop an understanding of the offers of compromise of claims filed with the Risk Management program and to foster more substantive discussion,
may request the attendance of Risk Management personnel and outside legal counsel who are necessary for the discussions pertaining to the claims that are to be brought to the Risk Management Committee meeting. All meetings of the Risk Management Committee shall be limited to matters that are exempt from the provisions of Section 286.011, Florida Statutes, and section 24(a), Art. I of the Florida Constitution. The minutes of the meetings and proceedings of Risk Management Committee shall be recorded and maintained by the Risk Management Department and are exempt from the provisions of section 119.07(1), Florida Statutes, and Section 24(a), Art. I of the Florida Constitution until termination of all litigation and settlement of all claims arising out of the same incident.

D. RESERVED

E. Committee Appointments

The officers of Board committees shall be the chair and vice-chair, and such other offices as such committee may establish from time to time (the “Committee Officers”). The committees shall appoint their respective Committee Officers at the first committee meeting convened following the appointment or reappointment of the committee members. Committee Officer vacancies may be filled for the remainder of the then-current term by the committee at any meeting of such committee. All Committee Officers serve at the pleasure of their respective committees. The chair of each committee shall preside over all meetings of such committee and may exercise all powers and duties granted to and imposed on that position by the Board or such committee. In the absence of a committee chair, the vice-chair of such committee shall act in the role of chair and shall have all the powers and authority granted or imposed on the committee chair.

2. This Resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Chapter 4: Administration

Section 4.1: RESERVED
Section 4.2: RESERVED
Section 4.3: RESERVED
Section 4.4: Chief Internal Auditor
Section 4.5: Chief Compliance and Privacy Officer
Section 4.4: Chief Internal Auditor

WHEREAS, the District’s Charter permits the Board “to appoint and employ . . . agents and employees as said Board may deem advisable;

WHEREAS, the Board has established the Chief Internal Auditor as a Direct Board Report;

WHEREAS, the Board desires to establish additional responsibilities and duties attributable to the Chief Internal Auditor; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. In addition to any duties, responsibilities or obligations imposed upon the Chief Internal Auditor in the Bylaws, the Chief Internal Auditor shall be responsible for the following duties and responsibilities: (a) overseeing the Internal Audit Department; (b) having full and unrestricted access to all of the District’s personnel, property, and records for the purposes of audits, unless otherwise prohibited under Florida Law or applicable federal laws, rules, or regulations; and (c) performing such other duties and responsibilities requested by the Board or Audit Committee that pertain to and further the Board’s objectives in the proper audit and review of the District, its facilities, and its operations.

2. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 4.5: Chief Compliance and Privacy Officer

WHEREAS, the District’s Charter permits the Board “to appoint and employ . . . agents and employees as said [B]oard may deem advisable;

WHEREAS, the Board has established the Chief Compliance and Privacy Officer as a Direct Board Report;

WHEREAS, the Board desires to formalize the current duties of the Chief Compliance and Privacy Officer; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. In addition to any duties, responsibilities or obligations imposed upon the Chief Compliance and Privacy Officer in the Bylaws, the Chief Compliance and Privacy Officer shall be responsible for the following duties and responsibilities: (a) making periodic reports (at least quarterly) to the Board and as otherwise necessary in the Chief Compliance and Privacy Officer’s discretion or as requested by the Board or the CEO; and (b) developing and implementing policies, procedures, and practices designed to ensure compliance with the requirements set forth in the District’s Corporate Integrity Agreement between the District and the Office of Inspector General (the “OIG”) of the United States Department of Health and Human Services (the “CIA”) and with federal health care program requirements.

2. The Chief Compliance and Privacy Officer may, when performing such duties and responsibilities, coordinate with the General Counsel’s Office but may not be subordinate to the General Counsel. The Chief Compliance and Privacy Officer may not possess any responsibilities that involve acting in any capacity as legal counsel or supervising legal counsel functions for the District. In carrying out his or her functions and responsibilities, the Chief Compliance and Privacy Officer shall have full and unrestricted access to the District’s personnel, property, and records, unless otherwise prohibited under federal laws or regulations, the CIA, or Florida Law.

3. No noncompliance job responsibilities shall be imposed upon the Chief Compliance and Privacy Officer if such job responsibilities would affect the Chief Compliance and Privacy Officer’s ability to perform the duties necessary to meet the obligations of the CIA nor shall the Chief Compliance and Privacy Officer be subordinate to the Chief Financial Officer of the District.

4. Any such changes to the Chief Compliance and Privacy Officer’s identity or any changes to the Chief Compliance and Privacy Officer’s job responsibilities or description that
would affect the Chief Compliance and Privacy Officer’s ability to perform the duties necessary to meet the obligations in the CIA shall be communicated and reported to the OIG within five (5) days after such a change.

5. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Chapter 5: Medical Staff

Section 5.1: RESERVED
Section 5.2: Medical Staff Bylaws
Section 5.2: Medical Staff Bylaws

WHEREAS, the District has an established self-governing Medical Staff that is at all times accountable to the Board;

WHEREAS, various federal laws and regulations, Florida Law, and accreditation standards govern the content and structure of a medical staff of a hospital;

WHEREAS, the Bylaws of the Board of North Broward Hospital District are being amended;

WHEREAS, the Board intends to preserve the Medical Staff Bylaws and all rules, regulations, and policies enacted pursuant thereto upon ratification of the revised Bylaws until such time that the Board and the Medical Staff choose to amend the same; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

In addition to those requirements provided in the Medical Staff Bylaws, Florida Law, federal laws, rules and regulations, and accreditation requirements, the following rules, standards, and guidelines shall govern the Medical Staff and, as applicable, shall be included in the Medical Staff Bylaws:

A. Standards and Composition of the Medical Staff Bylaws

1) The Medical Staff Bylaws shall include, at a minimum, the following:

(a) A determination, in accordance with Florida Law, of which categories of practitioners are eligible candidates for appointment to the Medical Staff;

(b) A statement of the duties and privileges of each category of Medical Staff (e.g., active, courtesy, etc.);

(c) A description of the organization of the Medical Staff;

(d) A process for existing members of the Medical Staff to make recommendations to the Board for consideration of new appointments and reappointments to the Medical Staff;

(e) A requirement that a medical history and physical examination be completed and documented for each patient no more than thirty (30) days before or twenty-four (24) hours after admission or registration, but prior to surgery or a procedure requiring anesthesia services, and such medical history and physical examination shall be completed and documented by a member of the Medical Staff who is a qualified...
licensed individual in accordance with Florida Law and the District’s Policies and Procedures;

(f) A requirement that an updated examination of the patient, including any changes in the patient's condition, be completed and documented within twenty-four (24) hours after admission or registration, but prior to surgery or a procedure requiring anesthesia services, when the medical history and physical examination are completed within thirty (30) days before admission or registration and such updated examination of the patient, including any changes in the patient's condition, shall be completed and documented by a member of the Medical Staff who is a qualified licensed individual in accordance with Florida Law and the District’s Policies and Procedures;

(g) Criteria for determining the privileges to be granted to individual practitioners and a procedure for applying the criteria to individuals requesting privileges;

(h) The requirement that a delineation of privileges be provided for each member of the Medical Staff and such delineation of privileges shall not be an overly broad specialty designation (e.g., “general surgery” or “general medicine”) unless such terms are specifically defined elsewhere;

(i) Procedures, within a time-limited period, for approving, approving in part, or denying an applicant’s request for privileges.

(j) A provision requiring any changes to the Medical Staff Bylaws and any rules and regulations promulgated thereunder be approved by the Board before being implemented by the Medical Staff;

(k) Procedures to ensure that the Medical Staff is accountable to the Board for the quality of care provided to patients;

(l) Procedures to ensure the criteria for selection include character, competence, training, experience, and judgment and not be based solely on certification, fellowship, or membership in a specialty body or society;

(m) Procedures that require all members of the Medical Staff to conduct themselves in a manner that ensures that the health and welfare of the District’s patients and the best interest of the District are served;

(n) A procedure for the Board to consult directly with the Chief of Staff of each of the District’s hospitals periodically throughout the District’s fiscal year, including, but not be limited to, discussions of matters related to the quality of medical care provided to patients of each of the District’s hospitals;

(o) A requirement that the Medical Staff provides to any member of the Medical Staff or applicant for Medical Staff membership and clinical privileges who have had their privileges suspended, denied, revoked or curtailed, whether in whole or in part, the
reason or reasons in writing within thirty (30) days of any such individual’s written request.

(p) A requirement that denial of Medical Staff membership or clinical privileges to any applicant be submitted, in writing, to the applicant’s respective licensing board or boards in accordance with applicable Florida Law and federal laws, rules and regulations.

(q) Procedures and guidelines, consistent with federal laws and regulations and Florida Law, pertaining to any refusal, revocation, or suspension of Medical Staff membership or any privileges attendant to such membership ensuring due process rights, unless otherwise waived, of such individuals facing such corrective or adverse action. The procedures for such a hearing shall, at a minimum: (i) ensure an orderly, fair, and impartial proceeding in which all facts relevant to the objections to the person's membership and privileges may be heard; (ii) ensure that such individual receives reasonable notice of the time and place of such hearing; (iii) include the requirement that all accusations constituting the cause of action are made on the records together with the findings and conclusions of the examining body; (iv) include the requirement that testimony at such hearing shall be recorded and transcribed; (v) an appeal procedure and a time-limited period for rendering a final decision after the appeal; and (vi) that the transcription, all notices, documents, exhibits, demonstrative evidence submitted, findings and recommendations of the examining authority, and all findings and decisions of the Board relevant to those proceedings, are preserved by the District as a record of the proceedings;

(r) A provision for revocation and suspension of Medical Staff membership and clinical privileges, subject to due process rights, including a fair hearing, for disruptive acts by members of the Medical Staff not related to clinical performance or direct patient care;

(s) Standards and procedures for reasonable access by licensed chiropractors to the reports of diagnostic x-rays and laboratory tests of the District’s licensed medical facilities, subject to the same standards and procedures as other licensed physicians;

(t) Procedures to ensure that patients are only admitted to the District’s hospitals on the recommendation of a licensed practitioner permitted to admit patients to hospitals under Florida Law and who has admitting privileges at such hospital; and

(u) Procedures to establish periodic reviews (e.g., Focused Professional Practice Evaluations and Ongoing Professional Practice Evaluations) of all members of the Medical Staff.

B. Appointment to the Medical Staff

1) All criteria for selection of qualified licensed individuals eligible for Medical Staff membership shall be based on individual character and background, health, demonstrated
current competence, training, experience, judgment, adherence to applicable professional ethics, reputation, ability to work with others, and ability of the District’s hospitals to provide adequate facilities and supportive services and shall not be based exclusively on certification, fellowship, or membership in a specialty body or society.

2) No individual shall be entitled to Medical staff membership at any of the District’s hospitals or facilities merely by virtue of the fact that he or she is duly licensed to practice in Florida and/or holds other certifications, is a member of a professional organization, has completed a fellowship or other post-graduate program, or that he or she, in the past or present, has been granted such privileges at another hospital or facility.

3) No otherwise qualified individual shall be denied Medical Staff membership or clinical privileges solely because such individual is licensed as a physician, dentist, podiatrist, psychologist, advanced practice registered nurse, or physician assistant; provided, that such practice coincides with the District’s needs.

4) The Medical Staff shall ensure that, as a condition of application to the Medical Staff and as a continuing condition of Medical Staff membership and clinical privileges, applicants and current members provide evidence of financial responsibility by one of the methods set forth under Florida Law, in a form and manner acceptable to the Medical Staff. The Medical Staff shall fully advise the Board of any member not in compliance with the financial responsibility requirements set forth under Florida Law.

5) Except in cases of emergency, no action on appointment, reappointment, or dismissal of a member of the Medical Staff shall be taken without prior referral to the Medical Staff for their recommendation.

C. RESERVED

D. Amendments to the Medical Staff Bylaws

The Medical Staff shall collaborate with the Board in the drafting of amendments to the Medical Staff Bylaws and any applicable rules and regulations or policies established to it, setting forth its organizations, standards, and governing principles. Any such amendments shall be approved by the Board prior to becoming effective.

E. The Medical Staff Bylaws, as originally established on May 30, 2013, and as subsequently amended from time to time, as well as all Medical Staff rules, regulations, and policies promulgated thereto shall survive the ratification of the Board’s amended Bylaws.

F. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Chapter 6: Miscellaneous

Section 6.1: A Resolution to Establish a Procurement Code
Section 6.2: A Resolution Establishing a Uniform Policy for Conducting Investigations
Section 6.3: A Resolution Pertaining to Legal Engagement Agreements
Section 6.4: Internal Risk Management Program
Section 6.1: A Resolution to Establish a Procurement Code

WHEREAS, the Board is responsible for Charter oversight;

WHEREAS, Florida Law permits the delegation of authority not otherwise prohibited thereunder;

WHEREAS, the Board desires to delegate the power to enter into and bind the District to certain contracts, arrangements, and expenditures that pertain to the day-to-day management of the District; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. The Board hereby makes a finding that certain contracts, arrangements, and expenditures of the District fall within operational management insofar as it involves the day-to-day management of the District’s hospitals and facilities.

2. The Board hereby directs the CEO to identify such contracts, arrangements, or expenditures that pertain to the day-to-day management of the District’s hospitals and facilities (“Operational Matters”).

3. The Board hereby directs the CEO to recommend a procurement code, consistent with Florida Law, containing such Operational Matters and which establishes certain necessary individuals or designees of the District who should have the authority to enter into and bind the District with respect to such Operational Matters.

4. The procurement code recommended by the CEO shall create procedures that foster fair and open competition; reduce the appearance of improprieties and opportunities of favoritism; and that establish public confidence in the process by which commodities and contractual services are procured.

5. Such procurement code, and any policies pertaining to it, as amended from time to time, shall be submitted to the Board for approval and shall not be effective or implemented until approved by the Board.

6. Nothing herein shall be construed as invalidating the procurement code in effect as of the date hereof or any Board policies enacted pursuant thereto or referenced therein until such procurement code and enacted and referenced policies are explicitly superseded by another procurement code and/or policies adopted by the Board.
7. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 6.2: A Resolution Establishing a Uniform Policy for Conducting Investigations

WHEREAS, the District voluntarily entered into a Corporate Integrity Agreement (the “CIA”) with the United States Department of Health and Human Services and integral to the terms of the CIA is the strengthening of the District’s Compliance Program;

WHEREAS, the Corporate Compliance and Ethics Department has been reorganized to be independent and has the responsibility to thoroughly investigate all reported and discovered alleged wrongdoing, ethical, and professional breaches;

WHEREAS, it is critical that the Board’s confidence in the effectiveness of the compliance program be maintained;

WHEREAS, the Corporate Compliance and Ethics Department must be allowed to demonstrate an ability to perform or coordinate internally the performance of its investigative responsibilities thus enabling the Board, the District’s senior management, and other appropriate administration officials to take corrective action; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. All internal investigations concerning compliance with the CIA and the ethics and business policies of the District shall be conducted by the Corporate Compliance and Ethics Department on its initiative or as a result of a referral or anonymous tip.

2. Any external investigations initiated and paid for by the District, regardless of how authorized, shall be identified, summarized and presented to the Board.

3. The Corporate Compliance and Ethics Department is directed to establish procedures consistent with the CIA and this resolution, to log, track, investigate, and report on all investigations to the CEO, General Counsel, and the Chair on a monthly basis. These procedures, upon the recommendation by the Chief Compliance and Privacy Officer and the CEO, shall be presented to the Board for approval.

4. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 6.3: A Resolution Pertaining to Legal Engagement Letters

WHEREAS, the Charter empowers the Board to contract and to be contracted with;

WHEREAS, the Board has delegated its contracting powers to the CEO; provided, that the aggregate contract amount is below a designated amount, the contracting process is consistent with the District’s procurement policies, the contract has been fully processed through the District’s vendor registration and contracting systems, and the contract is approved as to legal form by the General Counsel’s Office;

WHEREAS, the Board reserves the right to approve (a) all contracts that have an aggregate amount above the CEO’s designated amount per fiscal year, or (b) where the Board otherwise chooses to assert its jurisdiction;

WHEREAS, the Board chooses to assert its jurisdiction over legal engagement letters; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of North Broward Hospital District, that:

1. All legal engagement letters whereby the District is charged hourly rates or any increment thereof shall be executed by the CEO.

2. All legal engagement letters shall include the scope of services to be provided and a fiscal year maximum contract authorization amount.

3. All legal engagement letters shall contain a provision requiring all invoices be timely, invoiced within sixty (60) days from when the charges are incurred and services rendered, and that any such services and costs invoiced after sixty (60) days shall not be charged and will not be paid.

4. The CEO, in his or her sole discretion, is permitted to identify all current legal engagement letters inconsistent with this Resolution and terminate, amend, or reauthorize such legal engagement letters. This Resolution shall not invalidate any current legal engagement letters inconsistent with this Resolution if the CEO determines such legal engagement letter is still needed to protect the interests of the District.

5. The General Counsel, as appropriate, may from time to time recommend legal engagement letters to the CEO and/or the Board.

6. This resolution hereby supersedes, replaces, and repeals the resolution entitled “A Resolution to Clarify Retainer Agreements as Contracts,” which was adopted by the Board on November 28, 2018.
7. This resolution hereby supersedes, amends, replaces, and repeals any other conflicting resolution or policy previously adopted by the Board.
Section 6.4: Internal Risk Management Program

WHEREAS, the District has an internal risk management program that (a) performs the investigation and analysis of the frequency and causes of general categories and specific types of adverse incidents to the District’s patients; (b) develops appropriate measures to minimize the risk of adverse incidents to the District’s patients; (c) analyzes patient grievances that relate to patient care and the quality of medical services; (d) informs the District’s patients and other individuals authorized under Florida Law and federal laws, rules and regulations that the patient was the subject of an adverse incident; and (e) develops and implements an incident reporting system consistent with Florida Law (the “Risk Management Program”);

WHEREAS, Section 395.0197, Florida Statutes, mandates that the Board is responsible for the Risk Management Program;

WHEREAS, the Board desires to establish the guidelines of the Risk Management Program to ensure the proper oversight consistent with Florida Law; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of North Broward Hospital District, that:

1. Every hospital of the District shall have a risk manager who is responsible for the implementation and oversight of their respective District hospital.

2. Each of the District’s hospital’s risk managers shall demonstrate competence, through education and experience, in all of the following areas:

   (a) Applicable standards of health care risk management;
   (b) Applicable federal, state, and local health and safety laws and rules;
   (c) General risk management administration;
   (d) Patient care;
   (e) Medical care;
   (f) Personal and social care;
   (g) Accident prevention;
   (h) Departmental organization and management;
   (i) Community interrelationships; and
(j) Medical terminology.

3. The District shall also have a corporate risk manager who supervises each hospital’s risk managers.

4. The corporate risk manager shall have direct access to the Board. Each hospital risk manager shall have access to the Board through the corporate risk manager.

5. The CEO, or his or her designee, with the advice and consent of the Board, shall hire the corporate risk manager.

6. The corporate risk manager may not be terminated, suspended, or otherwise removed from his or her position absent Board approval following consultation with the CEO or his or her designee.

7. The corporate risk manager shall administratively report to the CEO.

8. In the event of a corporate risk manager vacancy, the CEO or his or her designee, following Board approval, shall determine the process to be used to recruit and employ a replacement to a position with direct Board access on a permanent, acting, or interim basis.

9. This resolution hereby supersedes, amends, replaces, and repeals any conflicting resolution or policy previously adopted by the Board.
Proposed
2019 Broward Health Bylaws
Amended and Restated Bylaws
of the
North Broward Hospital District

Article I
Incorporation and Supersedence

The North Broward Hospital District (the “District”) was established in 1951 by authority granted by the Florida Legislature under Ch. 27438, Laws of Florida, which was recodified in Ch. 2006-347, Laws of Florida, and subsequently amended in Ch. 2007-299, Laws of Florida (collectively, the “Charter”). No provision in these Amended and Restated Bylaws (these “Bylaws”) shall be construed as conflicting with or exceeding the Charter, applicable provisions of the Florida Constitution, and applicable Florida laws, rules and regulations, as the same may be amended from time to time (collectively, “Florida Law”), nor shall any provision in these Bylaws be construed as conflicting with or exceeding applicable federal laws, rules and regulations. In the event of a conflict between these Bylaws and Florida Law, Florida Law shall govern and control as if fully set forth herein. These Bylaws, adopted effective as of July 31, 2019, supersede and replace (a) any Bylaws and amendments thereto previously adopted by the Board of Commissioners of the North Broward Hospital District (the “Board”) and (b) any resolutions adopted by the Board that conflict with these Bylaws.

Article II
Governing Board

1. Role and Purpose

The Board shall be responsible for the oversight of the Charter, the District, and all of the District’s controlled entities (each, a “Subsidiary”) for the purpose of preserving public health for the public good in accordance with the Charter. All of the District’s current and future hospitals and other health care facilities shall serve the population health care needs of individuals within the District’s boundaries.

2. Board’s Responsibilities

The Board shall perform its duties in a manner that is consistent with these Bylaws, Florida Law, applicable federal laws, rules and regulations and accreditation standards, and any additional duties adopted from time to time by the Board pursuant to resolutions.

3. Delegation of Authority

The Board may delegate authority to the President and Chief Executive Officer (the “CEO”), Direct Board Reports (as defined below), the District’s departments and Board committees, and other individuals and entities; provided, however, that such delegation shall not be prohibited under Florida Law.
4. Education of Commissioners and Committee Members

All new Commissioners and Board committee members shall participate in an orientation program and be given information which shall include, but not be limited to, Florida’s open meeting laws, Florida’s public records laws, Florida’s ethics laws pertaining to public officers, Florida’s Patient Self-Referral Act of 1992, 42 U.S.C. § 1320a-7b(b) (aka, the Anti-Kickback Statute), 42 U.S.C. § 1395nn (aka, the Stark Law), the code of conduct and compliance and ethics programs, as established by the District and amended from time to time, and the Board’s responsibility for ensuring quality of care. All Commissioners and any Board committee members shall participate in annual compliance training and the Board’s program of continuing education, as required by the District’s code of conduct and ethics policies, adopted pursuant to the Charter and these Bylaws, as amended from time to time.

5. Prohibited Financial Arrangements

No Commissioner, Board committee member, administrator, officer, employee, or representative of the District or any of its Subsidiaries, shall, directly or indirectly, offer, pay, solicit, be paid or receive any commission, bonus, kickback, rebate, gratuity or any other thing of value or engage in any split-fee arrangement in any form whatsoever for the referral of any patient to any of the District’s facilities or for the purpose of generating any business for the District.

6. Conflicts of Interest

Commissioners have a fiduciary duty to the District and shall act in good faith, with due regard to the interests of the District, and shall comply with their fiduciary duties to the District under Florida Law. Commissioners shall be subject to the provisions of Florida Law pertaining to the avoidance of conflicts of interest when holding public office, including, but not limited to, Florida’s ethics laws pertaining to public officers, as amended from time to time, and the conflict of interest policy and code of conduct and ethics adopted by the Board and in effect from time to time.

7. Code of Conduct and Ethics

The Board shall adopt a code of conduct and ethics: Each Commissioner and Board committee member shall receive a copy of, and agree to comply with, the District’s adopted code of conduct and ethics, rules and procedures. The District’s code of conduct and ethics shall include, but shall not be limited to, provisions addressing in accordance with the requirements outlined in the Charter.

(a) the definition of a conflict of interest and procedures to properly disclose any such conflict;
(b) the appropriate procedures for disclosure if any individual or entity that has or is seeking a vendor or similar contractual relationship with the District, contacts a Commissioner and any other member of a Board committee who is not a Commissioner (either directly
or through their representatives) with the apparent or, under the circumstances, reasonably apparent intention of influencing a decision of the Board or committee of the Board with respect to such relationship or prospective relationship;

(e) The policies pertaining to acceptance of gifts or any other thing of value by Commissioners and other members of Board committees who are not Commissioners;

(d) The responsibility of the Board for the implementation of the District’s ethics and compliance program; and

(e) Annual educational requirements for Commissioners and members of committees of the Board who are not Commissioners.

8. Officers Non-Discrimination

The Board shall respect and provide equal opportunity to all, regardless of race, color, national origin, gender identity or gender expression, pregnancy, sexual orientation, religion, age, disability, military status, genetic information, or any other characteristic protected under applicable federal law or Florida Law. All Commissioners shall be subject to and abide by the District’s code of conduct and all of the District’s anti-discrimination and harassment policies, and take appropriate measures to prevent unlawful harassment and/or discrimination.

9. Board Officers

The officers of the Board shall be Commissioners and all such officers shall be elected by the Board and serve at the pleasure of the Board. The Board’s officers shall be the Chair, Vice-Chair, Secretary-Treasurer, and such other offices as the Board may establish from time to time by resolution. All officers of the Board shall be elected by a majority of the Board at the Annual Meeting (as defined below). Officers shall serve for a one (1) year term or the remainder of the then-current term. Officer vacancies may be filled for the remainder of the then-current term by the Board at any regular meeting or special meeting of the Board. The powers and duties of officers of the Board shall include, but are not limited to, the following:

(a) Chair

The Chair of the Board (the “Chair”) shall preside over all meetings of the Board and may exercise all powers granted to that position and have the duties imposed on that position by the Charter, these Bylaws and by motion or resolution passed by the Board.

(b) Vice-Chair

The Vice-Chair of the Board shall act as Chair in the absence of the Chair and, when so acting, shall have all the power and authority of the Chair.

(c) Secretary-Treasurer

The Secretary-Treasurer of the Board (the “Secretary-Treasurer”) or, where permitted under Florida Law, his or her designee, shall be the custodian of the District’s official seal and all records and reports of Board and Board committee proceedings. The
Secretary-Treasurer or, where permitted under Florida Law, his or her designee, shall be responsible for overseeing the issuance of notices and agendas for all regular and special Board and Board committee meetings and for ensuring that minutes are taken at all such meetings as required by Florida Law and these Bylaws.

Article III

Board and Committee Meetings

Commissioners are encouraged to participate in all meetings of the Board and Board committees on which they are members unless their participation is otherwise not possible.

1. Quorum

(a) Board Meetings

A quorum of the Board shall be established in accordance with Florida Law, and a vote of at least the majority of the Commissioners present either in person or electronically via teleconference or videoconference shall be necessary for the transaction of any business at any regular or special Board meeting.

(b) Board Committee Meetings

A quorum to hold and conduct a Board committee meeting shall consist of a majority of the total number of Board committee members; provided, however, that a quorum for a Board committee meeting shall be no less than two (2) committee members.

(c) Participation Through Communications Technology

Any Commissioner and member of a Board committee who is not a Commissioner may attend, participate and vote in any regular or special meeting provided for herein by use of telephone conference or video conference; provided, that, a quorum is established. All communications by the absent member or participating Commissioners and Board committee members via media technology must be fully audible or visible, as applicable, to the public at the advertised meeting place where the quorum is physically present. Nothing herein shall be construed as permitting a Commissioner or a member of a Board committee who is not a Commissioner to vote by proxy.

2. Procedural Rules of Order

All Board and Board committee meetings shall be conducted in accordance with “Robert’s Rules of Order,” as modified by the Board from time to time, unless otherwise in conflict with Florida Law or specific provisions of these Bylaws.

3. Abstention from Voting

No Commissioner or Board committee member may abstain from voting unless such
4. Meeting Agendas

An agenda shall be prepared for each Board and Board committee meeting and, in all such cases, provide a period during which the public may be heard, unless otherwise exempt from such requirements under Florida Law.

(a) Website Posting of Agendas

Agendas for Board and Board committee meetings shall be posted and maintained on the District’s website in accordance with Florida Law.

(b) Process for Adding Agenda Items

The Board shall adopt a uniform administrative agenda process for bringing items to the Board or any of its committees.

5. Minutes and Records of Meetings

The CEO, or his or her designee, shall take minutes of all Board and Board committee meetings. The minutes of any Board and Board committee meeting shall be promptly recorded and made available to Commissioners. The minutes of meetings of the Board and its committees shall indicate which Commissioners and Board committee members are present and which Commissioners and Board committee members are absent at such meetings and, at a minimum, shall include a record of all votes and actions taken and any resolutions adopted. Upon the request of the Chair or the Board, Board committees shall provide reports or any other information to the Board.

6. Notice of Meetings

All Board and Board committee meetings shall be noticed in accordance with Florida Law and these Bylaws.

7. Regular Board Meetings

There shall be regular meetings of the Board held at least monthly at times and dates agreed by the Board; provided, however, that nothing herein shall require the Board to otherwise reschedule or make up cancelled or missed regular Board meetings. At all such regular meetings, the Board shall consider all matters properly brought before it. Unless otherwise exempt under Florida Law, all regular Board meetings shall be open to the public.
8. Special Board Meetings

Special meetings of the Board may be called by the Chair, by any three (3) Commissioners, or by the CEO. Written notice shall be given to each Commissioner stating the purpose and time and place of the meeting; provided, however, that attendance of a Commissioner at a meeting constitutes a waiver of such notice of the meeting and of any and all objections to the place, time, or manner of calling or convening the meeting, unless the Commissioner states, at the beginning of or promptly upon arrival at the meeting, any objection to the transaction of any business on the grounds that the meeting is not called or convened in accordance with these Bylaws. Unless otherwise exempt under Florida Law, all such special Board meetings shall be open to the public.

9. Emergency Board Meetings

Notwithstanding anything in these Bylaws to the contrary, in the event of a bona fide emergency, any Commissioner or the CEO may call an emergency Board meeting that may be held following, to the extent practicable, reasonable public notice is given to deal with the emergency, which may be held following reasonable public notice as practicable under the circumstances. In such a situation, the first order of business at the convened emergency Board meeting shall be a finding by a majority vote of the Board that a bona fide emergency exists to justify calling the emergency Board meeting. Any action taken at an emergency Board meeting must be subsequently ratified by the Board at the next regularly scheduled meeting of the Board. No business other than that stated in the notice or required to deal with the emergency may be transacted at such emergency Board meeting. No business otherwise prohibited from being conducted under Florida Law shall take place or be discussed at an emergency Board meeting. Unless otherwise exempt under Florida Law, all such meetings shall be open to the public.

10. Annual Meeting

The annual organizational meeting of the Board shall be held during the first regular Board meeting of the District’s fiscal year (the “Annual Meeting”).

11. Budget and Tax Hearings

The Board shall hold a tentative and final budget and tax hearing each year and each such hearing shall be noticed to the public and conducted in accordance with Florida Law.

12. Committees and Committee Meetings

All committees of the Board shall abide by all the meeting rules applicable to the Board as enumerated in these Bylaws. Unless otherwise exempt under Florida Law, all Board committee meetings shall be open to the public. Notwithstanding the foregoing, nothing herein shall be interpreted to require any committee to open a meeting to the public when such meeting is not otherwise required to be open to the public under Florida Law.
(a) General Authority to Establish Committees

The Board may establish, dissolve, or suspend any Board committee at any time by resolution to further the Board’s purposes and Charter oversight duties; provided, however, that such establishment, dissolution, or suspension of such committees is not otherwise restricted or prohibited under applicable federal laws, rules or regulations, Florida Law, these Bylaws, or other requirements set forth by any applicable accrediting agency and that the Board always maintains the essential number and type of committees consistent with the size and scope of the District’s activities.

(b) Duties, Authority, Composition and Jurisdiction of Committees

All committees of the Board shall be under the direction and control of the Board. It is the intent of these Bylaws that all Board committees carry out the general purposes of the Board and exercise authority in such a manner as to assist the Board in the proper performance of its Charter oversight duties in accordance with these Bylaws and the Charter, as amended from time to time. The resolution establishing the Board committee shall, at a minimum, include the duties, authority, composition, and jurisdiction of the Board committee, and any amendments thereto and, to the extent applicable, the Board committee’s sunset date or other conditions resulting in its expiration.

(c) Establishment of Committees

Any committee established by resolution of the Board shall report decisions and recommendations to the Board for final approval unless otherwise delegated decision-making authority by the Board; provided, that such delegation is permitted under Florida Law. Committees may be codified in the Establishment of Committees and Committee Meetings section of the Codified Resolutions of the Board of Commissioners of the North Broward Hospital District (the “Codified Resolutions”) as herein established, shall delineate the policies and activities of such committees, and may specify the frequency of Board committee meetings.

(d) Attendance and Participation by Commissioners

All Commissioners may attend any Board committee meeting and may participate in the discussions and deliberations of such committee, but shall not be entitled to vote on matters or be used to establish a quorum unless the Commissioner is a member of such committee.

(e) Committee Appointments [BBA1]

All committee members serve at the pleasure of the Board and, unless otherwise provided for in these Bylaws, Florida Law, applicable federal laws, rules and regulations, or applicable accreditation standards, the officers and members of all committees of the Board shall be
appointed or reappointed by the Board ——— Option (1)

——— [nominated by the Chair and appointed by the Board]

——— Option (2) ———

[appointed by the Board]

and shall serve at the pleasure of the Board. Such initial appointments and reappointments shall be made at the next regular Board meeting of the Board after following the Annual Meeting. All such members of Board committees serve at the pleasure of the Board and may and shall serve for a one (1) year term or the remainder of the then-current term. Vacancies may be filled for the remainder of the then-current term by the Board at any regular or special Board meeting.

(f) Committee Member Selection

Board committee members may consist of any combination of Commissioners and/or lay or expert outside members, but In no event shall any employee of the District or any of its Subsidiaries or affiliates be appointed to serve on any Board committee.

(g) CEO and General Counsel

The CEO, or his or her designee, shall be required to attend all Board committee meetings to further the purposes, goals and objectives of such committees, provide support and/or relevant information to such committee, and to assist in matters falling within the jurisdiction of such committee. The General Counsel, or his or her designee, shall be required to attend all Board committee meetings to provide legal support and advise the committees regarding proper procedure and compliance with applicable law.

(h) Nondelegation

In no event shall any Board committee have the power to delegate its authority unless the Board gives its prior approval of such delegation and it is permitted under Florida Law.

(i) Immunities

The acts or omissions of Commissioners and other individuals serving on committees of the Board shall be within the scope of their official duties for and on behalf of the District. Commissioners serving on committees of the Board shall be entitled to all the privileges and immunities conferred by Florida Law.
Article IV
Administration

1. **Direct Board Reports**

The Board may find it necessary to create or modify a position and designate that such position report directly to the Board (each, a “Direct Board Report”). The Board, by resolution, may establish or revoke a position’s classification as a Direct Board Report except where the classification of a Direct Board Report has been expressly established in these Bylaws. Any Direct Board Report may be removed or suspended at any time, with or without cause, by the affirmative vote of the majority of the Board unless prohibited under Florida Law, applicable federal laws, rules or regulations, or any applicable accreditation standards; provided, however, that any such removal or suspension shall be without prejudice to the contract rights, if any, of the person so removed. Appointment as a Direct Board Report shall not of itself create contract rights. Any Direct Board Report may resign at any time by delivering notice to the District. Resignation by a Direct Board Report is effective when the notice is delivered unless the notice provides a later effective date or such Direct Board Report’s contract provides otherwise.

The following policies apply to all Direct Board Reports:

(a) All Direct Board Reports shall work collaboratively together and in the best interest of the District and all Direct Board Reports (other than the CEO) shall coordinate with and alert the CEO or his or her designee regarding leave time; provided, however, that the CEO shall not take any adverse employment action against a Direct Board Report without the express authorization of the Board;

(b) Any Direct Board Report may place items on the agenda of any regular or special Board meeting; provided, that such placement of items on the agenda is in accordance with the uniform administrative agenda process adopted by the Board;

(c) In order to ensure independence in their positions and communications, Direct Board Reports may not be terminated, suspended, or otherwise removed from their position absent a majority vote of the Board; and

(d) Nothing herein shall prevent the Board from delegating the recruitment and selection process for Direct Board Reports in whole or part.

(c) In the case of the death, permanent and total disability, resignation or retirement of a Direct Board Report (other than the CEO), the CEO may appoint an interim Direct Board Report to replace such person until such time as the Board replaces such Direct Board Report. Any interim Direct Board Report shall perform all of the duties of such Direct Board Report, and when so acting shall have all the powers of and be subject to all the restrictions upon such Direct Board Report, including the power to sign all instruments and to take all actions that such Direct Board Report is authorized to perform by the Board or these Bylaws.

2. President and Chief Executive Officer
Consistent with Florida Law and applicable federal laws, rules and regulations and accreditation standards, the Board shall select and employ a CEO to be accountable to and to manage the operations of the District and its Subsidiaries. The CEO shall be a Direct Board Report. The CEO, subject to the Board, shall have general executive charge, management, and control of the properties and operations of the District in the ordinary course of its business, with all such powers with respect to such properties and operations as may be reasonably incident to such responsibilities. As necessary, the Board by resolution shall establish and/or modify the duties and authorities of the CEO to ensure the proper management of the District, its resources and obligations. It shall be the duty of the CEO to carry out all duties and policies established by the Board and those imposed under Florida Law. The CEO’s specific duties shall include, but not be limited to, recommending to the Board a management organizational chart establishing the District’s organizational structure, which defines the lines of authority of the District’s and its Subsidiaries’ personnel for approval by the Board as part of an annual operating budget recommendation. Nothing herein shall prohibit the CEO from modifying or changing such management organizational chart and presenting the same to the Board for informational purposes at any other regular or special Board meeting; provided, however, that the Board must approve such changes to the organizational chart if such changes adversely effect the budget previously approved by the Board.

3. Executive Vice President and General Counsel

The Board shall establish and maintain an Office of the General Counsel and establish and amend from time to time its duties, responsibilities, and authority. The Office of the General Counsel shall be managed by an Executive Vice President and General Counsel (the “General Counsel”) who shall be a Direct Board Report and shall be the chief legal officer of the District. The General Counsel and all such attorneys employed within the Office of the General Counsel shall be members of the Florida Bar.

4. Chief Internal Auditor

The Board shall maintain an independent Internal Audit Department to audit and review the District’s facilities and operations. The Internal Audit Department shall be managed by an independent Chief Internal Auditor who shall be a Direct Board Report and shall be the Board’s direct representative in the audit and review of the District’s facilities and operations.

5. Chief Compliance and Privacy Officer

The Board shall maintain a Corporate Compliance and Ethics Department to manage the District’s compliance and ethics program. The Corporate Compliance and Ethics Department shall be managed by a Chief Compliance and Privacy Officer who shall be a Direct Board Report.
Article V
Medical Staff

1. Authority of the Board

The Board shall require members of the medical staffs of the District (collectively, the “Medical Staff”) to abide by and to perform those professional duties and responsibilities prescribed by these Bylaws, the Medical Staff Bylaws (as defined below), and all rules, regulations, and policies promulgated thereunder, and to enforce all of the foregoing requirements by the revocation and suspension of Medical Staff membership and clinical privileges as set forth in the Medical Staff Bylaws.

2. Medical Staff Bylaws

The Medical Staff shall be established and organized under a uniform set of bylaws entitled the Bylaws of the Medical Staff of Broward Health, as amended from time to time (the “Medical Staff Bylaws”). The Medical Staff shall be, at all times, self-governing and accountable to the Board. In the event that Florida Law, any applicable federal law, rule, or regulation or applicable accreditation standards conflict with the provisions of the Medical Staff Bylaws, such Florida Law, applicable federal law, rule, or regulation or applicable accreditation standard shall control.

(a) Standards and Composition of the Medical Staff Bylaws

The Medical Staff Bylaws shall include guidelines, standards, and rules that describe the Medical Staff’s processes for self-governance, appointment, credentialing, privileging, oversight, and the Medical Staff’s peer review policies and due process rights guarantees. The Medical Staff Bylaws and all rules, regulations, and policies adopted pursuant thereto shall be submitted to and approved by the Board before being implemented by the Medical Staff.

(b) Appointment to the Medical Staff

The Medical Staff Bylaws shall establish procedures to examine the credentials of all eligible candidates for Medical Staff membership in accordance with federal laws and regulations, Florida Law, and applicable accreditation standards. The Medical Staffs shall be responsible for making recommendations to the Board concerning initial staff appointments, reappointments, the assignment or curtailment of privileges, and the evaluation of clinical competence of each member of the Medical Staff. All appointments and reappointments to the Medical Staff shall only be effective if ratified by the Board. Membership to the Medical Staff and/or clinical privileges shall not be denied in an arbitrary, unreasonable or capricious manner, or on the basis of race, color, religion, sex, pregnancy, national origin, age, disability, sexual orientation, or marital status. All members of the Medical Staff shall conduct themselves in a manner that ensures that the welfare and health of the District’s patients and the best interest of the public at all times be served.
(c) Compliance with Laws and Standards

The Medical Staff Bylaws shall be consistent with applicable federal laws and regulations, the Centers for Medicare & Medicaid Services’ Conditions of Participation, Florida Law, and any and applicable accreditation standards (collectively, the “Standards”). The Medical Staff Bylaws shall be reviewed periodically to ensure that the Medical Staff Bylaws are consistent with the Standards. The Office of the General Counsel shall assist the Board and the Medical Staff, and the Board and Medical Staff may request the assistance of any other department of the District when reviewing the Medical Staff Bylaws to ensure compliance with the Standards. Notwithstanding the foregoing, in the event of any conflict between the Medical Staff Bylaws and any applicable Standards, the Standards shall govern the Medical Staff as if the same were specifically set forth in the Medical Staff Bylaws.

(d) Amendments to the Medical Staff Bylaws

The Medical Staff Bylaws shall prescribe a procedure for amending the Medical Staff Bylaws and establishing and amending any rules, regulations and policies. Any changes to the Medical Staff Bylaws and any rules, regulations, and policies promulgated thereunder shall be submitted to, and approved by, the Board before being implemented by the Medical Staff.

Article VI

Codified Resolutions of the Board of the North Broward Hospital District

Any resolutions adopted pursuant to these Bylaws shall be codified and organized by the CEO, or his or her designee, in the Codified Resolutions as established by the Board. All resolutions codified in the Codified Resolutions shall be organized in a logical structure established by the Board through resolution. The Codified Resolutions shall be promptly posted online with public access. All such Codified Resolutions shall be promptly updated as needed to reflect any changes to such resolutions. Nothing herein shall be construed as prohibiting a resolution to take immediate effect or effect at a date certain if such resolution is not yet codified in the Codified Resolutions.

Article VII

Miscellaneous

(a) Amendments

These Bylaws may be amended from time to time by the Board upon an affirmative vote of a two-thirds (2/3) of the total number of Commissioners established under the Charter at any regular or special Board meeting; provided, however, that any proposed amendments shall be presented in writing and delivered to each Commissioner at or prior to the regular meeting of the Board the month preceding the regular or special meeting at
which the amendment is adopted (an "Amendment Notice"). Notwithstanding the
foregoing, the attendance of a Commissioner at a meeting constitutes a waiver of such
Amendment Notice and of any and all objections to the place, time, or manner of calling
or convening the meeting, unless the Commissioner states, at the beginning of or
promptly upon arrival at the meeting, any objection to the consideration of amendments
to these Bylaws on the grounds that the meeting is not called or convened in accordance
with these Bylaws. Notwithstanding the foregoing, nothing herein shall be construed as a
prohibition on the Board to modify, amend, or make changes to a proposed amendment to
the Bylaws and immediately adopt such an amendment with the modifications or
changes; provided, that the Amendment Notice procedure is properly followed and no
additional amendments outside the subject matter of the Amendment Notice are
proposed. Any Commissioner and any Direct Board Report may recommend to the Board
amendments to these Bylaws.

(b) Invalid Provisions

If any one or more of the provisions of these Bylaws, or the applicability of any provision
to a specific situation, shall be held invalid or unenforceable, the provision shall be
modified to the minimum extent necessary to make it or its application valid and
enforceable, and the validity and enforceability of all other provisions of these Bylaws
and all other applications of any provision shall not be affected thereby.

(c) Indemnification

Whenever any civil (including administrative) or criminal action or threat of action has
been asserted against a current or former Commissioner or Direct Board Report for any
act or omission arising out of and in the course of the performance of his or her District
duties and responsibilities, the District shall defray all costs of defending such action or
threat of action, including reasonable attorneys’ fees and expenses, together with costs of
appeal, and shall save harmless and protect such person from any financial loss resulting
from the performance of his or her duties and responsibilities unless (i) indemnification is
prohibited by Florida Law, or (b) the Board determines by a vote of at least two thirds
(2/3) of its members then serving that said individual acted in bad faith or with willful
misconduct. Claims based on such actions or omissions may be settled prior to, during, or
after the filing of suit or commencement of other formal process thereon. The Board may
arrange for and pay the premium for appropriate insurance to cover all such losses and
expenses. District duties and responsibilities shall include service to other entities,
including service on affiliate boards or committees, where such service is assigned,
required or requested by the District or is due to District responsibilities or roles. Nothing
in this Section shall waive or derogate from the application or protection of insurance, or
of sovereign immunity under Florida Law. Any available insurance and immunity shall
provide primary protection. However, indemnification under this Section shall be
provided to an affected current or former Commissioner or Direct Board Report who
qualifies for indemnification under this Section when he or she is not promptly or
adequately protected by insurance or immunity on the following condition. The
indemnified person shall first agree in writing to use best reasonable efforts to provide, to
the extent possible, for the District to obtain the benefit of the indemnified person’s right to insurance coverage or other protection, whether by assignment, cooperation, subrogation or other means.

To the extent permitted or required under Florida Law, the District shall indemnify, defend, and hold harmless any current or former Commissioner, committee member, officer, or employee of the District for any act or omission arising out of and in the course of the performance and scope of such individual’s duties and responsibilities to the District. In such an event, any District insurance or self-insurance shall be the first and primary protection and the indemnification provided under this section shall be contingent on the indemnified person complying with the terms and conditions of any insurance policy providing coverage for any such act or omission. Consistent with these Bylaws, the Board may establish further requirements and procedures for such indemnification by resolution and any such resolution established hereunder shall be codified in the Codified Resolutions.
Companion Resolutions
To The Proposed
2019 Broward Health Bylaws
Codified Resolutions
of the
Board of Commissioners of
the North Broward Hospital District
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Chapter 1: Introduction and Guidelines

WHEREAS, Fla. Admin. Code R. 59A-3.272 requires the Board to review its Bylaws, rules and regulations at least every two (2) years;

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”);

WHEREAS, the Board intends that Board governance at all times remain consistent with any applicable federal laws and regulations, Florida Law, and accreditation standards;

WHEREAS, the Board, from time to time, proposes and ratifies resolutions that establish Board action, Board policies, and direct that certain tasks or activities be undertaken to assist the Board in its Charter oversight duties; and

WHEREAS, the Board intends that certain procedures be followed during the adoption of such resolutions.

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. The Bylaws and all accompanying resolutions passed and ratified thereto shall be reviewed by the Board at least every two (2) years.

2. The General Counsel’s Office of the District shall be responsible for ensuring that all provisions within the Bylaws and its resolutions are consistent with Florida Law, any applicable federal laws, rules and regulations, and accreditation standards (collectively, the “Laws and Regulations”). The General Counsel’s Office of the District, to the extent applicable, shall submit any proposed changes to the Bylaws or its accompanying resolutions at least every two (2) years or, if necessary, more often to ensure that the District is in compliance with all Laws and Regulations and is adequately performing its functions in the best interests of the public and pursuant to the purposes for which it was established.

3. Pursuant to the Bylaws, the Board hereby establishes the Codified Resolutions. Any Codified Resolutions adopted by the Board shall supplement, and not supersede, the Bylaws. To the extent that a resolution conflicts with the Bylaws, the Bylaws shall control. All such resolutions passed shall comply with all Laws and Regulations. To the extent that a resolution, or part thereof, conflicts with any Laws and Regulations, the Laws and Regulations shall control and such resolution, or the remainder of the resolution, shall be interpreted, to the extent allowable under Laws and Regulations, consistent with the intent of the Board when passing such resolution.

4. All resolutions adopted by the Board with respect to administrative matters, as reasonably determined by the Codified Resolutions Custodian (as defined below),
shall be codified within these Codified Resolutions. Codification will follow a logical numbering system that, to the extent possible, is consistent with the articles, sections, and subsections of the Bylaws for reference. Any capitalized terms not otherwise apparent within its context or not otherwise defined within the respective resolution shall have the meaning associated to it within the Bylaws.

5. The CEO or his or her designee (the “Codified Resolutions Custodian”) shall be responsible for the maintenance and codification of resolutions within the Codified Resolutions.

6. When codifying resolutions, the Board hereby authorizes and grants the Codified Resolutions Custodian the authority to correct any scrivener’s errors, including, but not limited to, misspellings, punctuation, and/or grammatical errors; provided, however, that such corrections shall not frustrate, undermine, alter, modify, or change the intent and purpose of such resolution, as reasonably determined by the General Counsel.

7. The Codified Resolutions Custodian shall include the date that any resolution included as a Codified Resolution was adopted by the Board, and the dates of any amendments thereto, and shall ensure that before a resolution is codified, it complies with the requirements of this resolution and, to the extent required, shall reorganize such resolution to conform to the required structure and organization set forth herein.

8. Resolutions shall promptly be codified and posted online with online access. Nothing herein shall be construed as prohibiting a resolution to take immediate effect or effect at a date certain if such resolution is not yet codified in the Codified Resolutions.

9. The Board, when passing a resolution, shall include the following form requirements within such resolution:

   (a) A preamble briefly establishing the purpose(s) and intent of the resolution and containing a resolving paragraph;

   (b) The scope of the resolution;

   (c) Numbered paragraphs;

   (d) To the extent applicable, the effective and sunset dates of the resolution. In the event that no effective date or sunset date is provided, such resolution shall be deemed effective immediately and shall remain in effect until the Board repeals or modifies the resolution, as the case may be;

   (e) The effective date of the resolution if the Board intends the resolution to take effect at a date certain. In the event no effective date is provided in a resolution, the resolution will be deemed to take effect immediately upon Board ratification; and
(f) Language establishing that the resolution supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.

10. To the extent that any of the above form resolution requirements are not met following the adoption of a resolution, such nonconformance shall not prevent or inhibit the authority of such resolution, and such resolution shall operate with full force and effect as if passed consistent with the form resolution requirements. Notwithstanding the foregoing, in the event that a resolution fails to comply with the form resolution requirements, the CEO, or his or her designee, shall notify the Board at its next regular or special meeting after the CEO, or his or her designee, becomes aware of such non-conformance, as to the deficiencies of such resolution to ensure that the deficiencies may be promptly rectified before the resolution is codified. When notifying the Board as to deficiencies in a resolution’s form, the CEO, or his or her designee, shall place the item on the regular or special Board meeting’s agenda consistent with the uniform administrative agenda process adopted by the Board.

11. Nothing herein shall be construed as permitting any individual, without Board approval, to add or modify any language to conform to the form resolution requirements provided herein.

12. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Chapter 2: Governing Board

Section 2.1: RESERVED
Section 2.2: Board’s Responsibilities
Section 2.3: Delegation of Authority
Section 2.4: Education of Commissioners and Committee Members
Section 2.5: RESERVED
Section 2.6: RESERVED
Section 2.7: RESERVED Code of Conduct and Ethics
Section 2.8: RESERVED
Section 2.2: Board’s Responsibilities

WHEREAS, the Board oversees the affairs of, and determines policies for, the District and its Subsidiaries;

WHEREAS, such affairs and policies are subject to significant State and federal laws, rules and regulations;

WHEREAS, it is important that Commissioners understand their respective responsibilities; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. In addition to any other duties imposed on the Board by Florida Law, the Bylaws, applicable federal laws, rules and regulations and applicable accreditation standards, the Board’s powers and duties shall include, but not be limited to:

   (a) Overseeing the affairs of the District pertaining to the safety of patients and quality of care, treatment, and services provided by the District and its Subsidiaries and fostering a culture of safety and quality in the District and its Subsidiaries.

   (b) Providing the resources required to maintain safety of patients, high-quality care, treatment, and services.

   (c) Ensuring that performance improvement activities reflect the complexity of the District’s hospitals’ and other health care facilities’ organization and services, involve all departments and services, and include services provided under contract.

   (d) Working together with the senior management of the District and the Chiefs of Staff of the Medical Staff to annually evaluate the District’s hospitals’ and other health care facilities’ performance in achieving its mission, vision, and goals.

   (e) Providing the Medical Staff with the opportunity to participate in governance and the opportunity to be represented at governing body meetings in accordance with the Medical Staff Bylaws (through in-person attendance and electronic communications technology) by the Chiefs of Staff, as selected by the Medical Staff, at each of the District’s hospitals.

   (f) Consulting directly with the Chiefs of Staff or their designees periodically throughout the fiscal year, including discussing matters related to the quality of medical care provided to patients of the District.
2. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 2.3: Delegation of Authority

WHEREAS, the Board is responsible for oversight of the Charter;

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”);

WHEREAS, Florida Law permits the delegation of authority unless otherwise prohibited thereunder; and

WHEREAS, the Board from time to time desires to delegate certain powers and authority to Board committees, District departments, Direct Board Reports, and other individuals or entities.

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. The Board may delegate by separate resolution certain powers and authority to Direct Board Reports, District departments or committees, or other individuals or entities; provided, that such delegation falls within operational management insofar as it involves the day to day management of the District and is permitted under Florida Law.

2. All authority previously delegated by the Board to the CEO, any Direct Board Reports, Board and other committees, District departments, or other individuals or entities shall not be superseded hereby and shall survive the adoption of this resolution; provided, that such delegation is permitted under Florida Law.

3. The Board makes a finding that such previous lawful delegation of authority was and continues to be necessary to the day to day management of the District’s hospitals and facilities.

4. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 2.4: Education of Commissioners and Committee Members

WHEREAS, the Board oversees the affairs of, and determines policies for, the District and its Subsidiaries;

WHEREAS, such affairs and policies are subject to significant State and federal laws, rules and regulations;

WHEREAS, it is important that Commissioners and members of committees of the Board who are not Commissioners understand their powers and duties; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. All Commissioners and members of committees of the Board who are not Commissioners shall participate in an orientation program. Such orientation program shall educate the Commissioners and members of committees of the Board who are not Commissioners regarding State and federal laws pertaining to open meetings, public records, ethics, fraud and abuse, prohibitions on physician arrangements, and the District’s purpose and interest in providing high-quality health care, maintaining compliance, and the Board’s role in its oversight of such activities. At a minimum, such orientation program shall include training on Section 286.011, Florida Statutes (aka, the Sunshine Law), Chapter 119, Florida Statutes (aka, Florida’s Public Records Act), Part III of chapter 112, Florida Statutes (aka, the Code of Ethics for Public Officers and Employees), 42 U.S.C. § 1320a-7b(b) (aka, the Anti-Kickback Statute), 42 U.S.C. § 1395nn (aka, the Stark Law), Section 456.053, Florida Statutes (aka, Florida’s Patient Self-Referral Act of 1992), Broward Health’s Corporate Compliance Program, Broward Health’s Code of Conduct, Broward Health’s Quality Assurance Program, and the Board’s responsibility for ensuring quality care. All Commissioners and members of committees of the Board who are not Commissioners shall participate in annual compliance training and the Board’s program of continuing education, as required by the Code of Conduct and Ethics, adopted under the Charter, as amended from time to time.

2. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 2.7: Code of Conduct and Ethics

WHEREAS, the District’s Charter requires the Board to establish and adopt a code of conduct and ethics that governs the Board (the “Code of Conduct and Ethics”);

WHEREAS, the Charter requires the Board to provide certain provisions in the Code of Conduct and Ethics;

WHEREAS, the Board, consistent with the obligations and requirements imposed under the Charter, desire to establish the Code of Conduct and Ethics; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. The Board hereby establishes the Code of Conduct and Ethics.

2. For purposes of this Code of Conduct and Ethics, the following terms shall have meanings associated to them:
   a. “Conflict of Interest” means a situation in which regard for a private interest tends to lead to disregard of a public duty or interest.
   b. “Proper Disclosure” means a written notification by a Commissioner or Board committee member to the Compliance and Ethics Department when a Commissioner or Board committee member encounters a Conflict of Interest.

3. In the event of a Conflict of Interest, a Commissioner or Board committee member shall provide Proper Disclosure as soon as reasonably possible.

4. Pursuant to the Charter, it is considered a Conflict of Interest if any outside entity with a vendor or contractual relationship with the District, or any outside entity seeking a vendor or contractual relationship with the District, contacts a Commissioner or Board committee member with the intent to influence the decision of the Board. Accordingly, to the extent a Conflict of Interest arises in this circumstance, the affected Commissioner or Board committee member shall provide Proper Disclosure as soon as reasonably possible.

5. All Commissioners are subject to and shall abide by the requirements, standards, and prohibitions of Florida’s Code of Ethics for Public Officers and Employees, Part III of chapter 112, Florida Statutes and any other applicable Florida Law.
6. All Commissioners shall be subject to and abide by all policies passed by the Board pertaining to the acceptance of gifts including, but not limited to, Policy GA-004-012: Gifts, Gratuities, and Business Courtesies and Broward Health’s Code of Conduct.

7. The Board, through its Charter oversight and the Board’s Compliance Committee, shall be responsible for the appropriate implementation of the District’s Compliance and Ethics program as applicable to all financial and operational risks of the District.

8. Each Commissioner and Board committee member shall receive a copy of, acknowledge receipt of, and agree to comply with, the Code of Conduct and Ethics.

9. Each Commissioner and committee member shall participate in annual compliance training and continuing education which shall include, but not be limited to, the Board’s Charter oversight responsibilities, the Board’s responsibilities under this Code of Conduct and Ethics, the Board’s responsibilities under chapter 286, Florida Statutes (aka, the Sunshine Law), chapter 119, Florida Statutes (aka, Florida’s Public Records Act), Part III of chapter 112, Florida Statutes (aka, the Code of Ethics for Public Officers and Employees), 42 U.S.C. § 1320a-7b(b) (aka, the Anti-Kickback Statute), 42 U.S.C. § 1395nn (aka, the Stark Law), and the Board’s and District’s obligations under its Corporate Integrity Agreement with the Office of Inspector General, United States Department of Health and Human Services.

10. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Chapter 3: Board and Committee Meetings

Section 3.1: RESERVED
Section 3.2: RESERVED
Section 3.3: RESERVED
Section 3.4: Meeting Agendas
Section 3.5: Minutes and Records of Meetings
Section 3.6: RESERVED
Section 3.7: RESERVED
Section 3.8: RESERVED
Section 3.9: RESERVED

Section 3.10: RESERVED
Section 3.11: RESERVED
Section 3.12: Committees and Committee Meetings
Section 3.4: Meeting Agendas

WHEREAS, the Board oversees the affairs of, and determines policies for, the conduct of Board and Board committee meetings; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

A.  Reserved

B.  Process for Adding Agenda Items

   1) The administrative preparation of all Board and Board committee agendas are hereby delegated to the CEO, or his or her designee.

   2) The CEO shall propose a uniform administrative agenda process, which shall include an agenda calendar and delineate the process for submission of agenda items, preparation and publication of agendas and back-up material, and distribution of such agendas and back-up material to Commissioners and members of Board committees who are not Commissioners. The uniform administrative agenda process, and any amendments thereto, shall be approved by the Board at a regular or special Board meeting.

   3) The Chair and the chair of a committee of the Board may designate the order and organization of their meeting agendas, but no agenda items properly submitted for consideration may be excluded by the Chair or the chair of a Board committee absent approval by the Board or such committee, as the case may be.

   4) Any Direct Board Report may place items on the agenda of any regular or special Board meeting or Board committee meeting, any Commissioner may place items on the agenda of any regular or special Board meeting, and any Commissioner or member of a committee who is not a Commissioner may place items on the agenda of any Board committee meeting of a Board committee on which he or she serve; provided, that such placement of items on the agenda is in accordance with the uniform administrative agenda process adopted by the Board.

C.  This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 3.5: Minutes and Records of Meetings

WHEREAS, the Board recognizes that there may be times that members of the public cannot physically attend meetings;

WHEREAS, to the extent practicable, the Board desires that the public is made aware of the deliberations and actions of the Board and the committees of the Board;

WHEREAS, the Board is committed to public transparency in all of its actions;

WHEREAS, the Board desires to use common and available technological means to provide public access to its regular, special, and Board committee meetings for those individuals who cannot otherwise be physically present at such meetings; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. In keeping adequate records of regular, special, and Board committee meetings, where available and where possible, such record shall include both audio/video recordings. Such recordings shall be kept on the District’s website for at least one (1) year. All recordings shall be kept and archived consistent with Florida’s public records laws, chapter 119, Florida Statutes and GS1-SL and GS4 of the General Records Schedules of the Division of Library and Information Services, Florida Department of State.

2. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 3.9: Emergency Board Meetings

WHEREAS, the Board recognizes that there may be times where the Board may need to convene in a swift and immediate manner to deal with emergencies;

WHEREAS, the Board recognizes that the traditional notice requirements of section 286.011, Florida Statutes (the “Sunshine Law”) and chapter 189, Florida Statutes (the “Uniform Special District Accountability Act”) may make it impracticable to deal with such emergencies;

WHEREAS, the Sunshine Law, Uniform Special District Accountability Act, and other Florida Laws contemplate that situations may arise whereby boards may have to convene on an emergency basis;

WHEREAS, various provisions of Florida Law, including, but not limited to, Sections 286.0114(3)(a) and 189.015(1), Florida Statutes, provide that such emergencies exist when there occurs a situation that affects the health, welfare, or safety of the public and compliance with the usual notice and public participation requirements of the Sunshine Law and Uniform Special District Accountability Act would be impracticable and cause an unreasonable delay in the ability of the Board to act in a swift and immediate manner to deal with such an emergency (a “Bona Fide Emergency”);

WHEREAS, Florida Law, the Sunshine Law, and the Uniform Special District Accountability Act do not provide much guidance regarding the procedure for the Board to follow in cases where the Board must immediately convene to deal with an emergency;

WHEREAS, the Board intends for this Resolution to provide a procedure for the Board to follow in dealing with situations involving emergencies whereby the Board must act in a swift and immediate manner; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. Notwithstanding anything in the Codified Resolutions to the contrary, in the event of a Bona Fide Emergency, any Commissioner or the CEO may call a Board meeting to deal with the Bona Fide Emergency, which may be held following reasonable public notice as practicable under the particular circumstances to deal with the emergency.

2. In such a situation, the Board’s first order of business at the emergency meeting shall be a finding by a majority vote that a Bona Fide Emergency exists. Such a finding must conclude that a situation exists whereby an immediate act or decision must be taken to deal with a matter which affects the health, welfare, or safety of the public and that proper notice was provided as is appropriate under the circumstances. If the Board fails to make a finding that
such an event constitutes a Bona Fide Emergency, the Board must adjourn the meeting and comply with the public notice requirements generally applicable under Florida Law to regular and special Board meetings.

3. No business other than that stated in the notice or required to deal with the emergency may be transacted at such emergency meeting.

4. Consistent with Section 189.015(1), Florida Statutes, or any successor statute thereof, all as amended from time to time, the annual budget shall not be approved at an emergency meeting.

5. Any action taken at an emergency meeting must be subsequently ratified by the Board at the next meeting of the Board that is publicly noticed in accordance with the public notice requirements generally applicable to regular and special Board meetings.

6. Unless otherwise exempt under Chapter 395, Florida Statutes, or other provision of Florida Law, all emergency meetings shall be open to the public and governed by the provisions of Section 286.011, Florida Statutes, or any successor statute thereof, all as may be amended from time to time.

7. To the extent that allowing public participation would inhibit the swift and immediate action of the Board to deal with a Bona Fide Emergency, the Board may limit or entirely prohibit such public participation in the matter in accordance with Section 286.0114(3)(a), Florida Statutes, or any successor statute thereof, all as may be amended from time to time.

8. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 3.12: Committees and Committee Meetings

WHEREAS, the Board, in exercising its Charter oversight duties, desires to create committees to better assist the Board with performing such duties;

WHEREAS, such committees of the Board shall be created by resolution and establish such committee’s composition, jurisdiction, duties, and responsibilities;

WHEREAS, the District, as a special taxing district of the State of Florida, is subject to section 286.011, et seq., Florida Statutes (the “Sunshine Law”);

WHEREAS, the Board intends that all requirements of the Sunshine Law be adhered to; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. Unless otherwise provided by Chapter 395, Florida Statutes, or other provision of law, all Board committee meetings shall be open to the public and governed by the provisions of the Sunshine Law, or any successor statute thereof, all as may be amended from time to time. Notwithstanding the foregoing, nothing herein shall be construed or interpreted as requiring an advisory committee established solely for, and delegated only with, information-gathering or fact-finding authority to hold meetings open to the public or be subject to the provisions of the Sunshine Law; provided, however, that such advisory committees shall be required to hold open meetings and be subject to the notice and minute-taking requirements of the Sunshine Law if such committee consists of two (2) or more Commissioners.

A. RESERVED

B. RESERVED

C. Establishment of Committees

The Board, consistent with Section 12(c) of Article III of the Bylaws, establishes the following permanent standing committees of the Board.

1. Audit Committee.

(a) Composition. The Audit Committee shall consist of three (3) Commissioners and two (2) expert consultants who shall be nominated by the Chair and appointed by the Board in accordance with the Bylaws. Expert consultants serving on the Audit Committee shall be subject to Bylaws and, consistent with the Bylaws,
shall participate in the Board’s orientation program. The Chief Internal Auditor, or his or her designee, shall be required to attend all Audit Committee meetings to further the purposes, goals, and objectives of the Audit Committee, provide support and relevant information to the Audit Committee, and assist in matters falling within the jurisdiction of the Audit Committee. The Board’s Secretary-Treasurer shall not serve on the Audit Committee.

(b) **Duties.** The Audit Committee’s function, independence, and duties shall be as outlined in the Audit Committee Charter, adopted on August 27, 2006, and as amended from time to time.

(c) **Meetings.** The Audit Committee shall meet at least quarterly or as otherwise required by applicable law, or as necessary to perform its duties as set forth herein.

2. **Building Committee**

(a) **Composition.** The Building Committee shall consist of three (3) Commissioners who shall be appointed by the Chair.

(b) **Duties.** The Building Committee shall consider all matters concerning the District’s and its Subsidiaries’ buildings, facilities and land and to attend to all matters relating to new construction, renovation, acquisition, and leasing of real property in and for the District and its Subsidiaries, as well as to perform other duties that may be requested by the Board from time to time.

(c) **Meetings.** The Building Committee shall as necessary to perform its duties as set forth herein.

3. **Compliance Committee**

(a) **Composition.** The Compliance Committee shall consist of all members of the Board. The Chief Compliance and Privacy Officer, or his or her designee, shall be required to attend all Compliance Committee meetings to further the purposes, goals, and objectives of the Compliance Committee, provide support and relevant information to the Compliance Committee, and assist in matters falling within the jurisdiction of the Compliance Committee.

(b) **Duties.** The Compliance Committee shall be responsible for the review and oversight of the District’s Compliance and Ethics Program, including, but not limited to, matters related to compliance with federal and state health care program requirements; the obligations of the District’s Corporate Integrity Agreement between the District and the Office of Inspector General (the “OIG”) of the United States Department of Health and Human Services (the “CIA”);
matters brought to and the performance of the Executive Compliance Workgroup that serves as the Compliance Committee under the CIA; the performance of the Chief Compliance and Privacy Officer; and any other duties that may be requested by the Board from time to time.

(c) The Compliance Committee shall submit to the Board and the OIG a description of the documents and other materials it reviewed along with any additional steps taken (including, but not limited to, the engagement of an independent advisor or other third-party resources) in the Compliance Committee’s oversight of the District’s Compliance and Ethics Program or in support of making the Board’s resolution, as detailed in the CIA, summarizing the Compliance Committee’s review and oversight of the District’s compliance with federal health care program requirements and the District’s obligations under the CIA.

(d) Meetings. The Compliance Committee shall meet at least quarterly or more as necessary to perform its duties as set forth herein.

3.4 Finance Committee.

(a) Composition. The Finance Committee shall consist of all Commissioners.

(b) Duties. The Finance Committee shall review short, intermediate, and long range financial plans of the District and shall attend to all financial interests of the District as prescribed by the Charter. The Finance Committee shall also perform other duties that may be requested by the Board from time to time.

(c) Meetings. The Finance Committee shall meet at least quarterly or as otherwise required by applicable law, or as necessary to perform its duties as set forth herein.

5. Governance Committee.

(a) Composition. The Governance Committee shall consist of three (3) Commissioners who shall be appointed by the Board in accordance with the Bylaws.

(b) Duties. The duties of the Governance Committee shall include, but not be limited to, reviewing and making recommendations to the Board about the District’s governance structure and participating in the development of training and orientation materials for new Commissioners. The Governance Committee shall conduct periodic reviews of the District’s Bylaws and governance-related policies to ensure that they are consistent with the District's Charter, as amended from time to time, and that the Board is performing its duties as outlined in the
Charter efficiently. The Governance Committee shall also perform any other duties that may be requested by the Board from time to time.

(c) **Meeting.** The Governance Committee shall meet as needed at the request of the Board, the Chair or the chair of the Governance Committee.

### 4.6 Human Resources Committee

(a) **Composition.** The Human Resources Committee shall consist of three (3) Commissioners who shall be appointed by the Board in accordance with the Bylaws. The CEO shall, to the extent necessary, require the attendance of the Chief Human Resources Officer to further the purposes, goals and objectives of the Human Resources Committee, provide support and/or relevant information to the Human Resources Committee, and to assist in matters falling within the jurisdiction of the Human Resources Committee.

(b) **Duties.** The duties of the Human Resources Committee shall include, but not be limited to, conducting annual reviews and/or performance evaluations of the Direct Reports, establishing performance standards, reviewing executive leadership structure and positions, and reviewing employee benefits and incentive plans. The Human Resources Committee shall also perform other duties that may be requested by the Board from time to time.

(c) **Meetings.** The Human Resources Committee shall meet as necessary to perform its duties as set forth herein.

### 5.7 Joint Conference Committee

(a) **Composition.** The Joint Conference Committee shall be a joint committee of the Board, administration and the Medical Staff. The voting members shall be comprised of the following persons: the Chief of Staff, the Vice Chief of Staff, and the Secretary/Treasurer of each of the District’s hospitals; three (3) Commissioners; the Chief Executive Officer of each of the District’s hospitals; and the CEO. The Chief Medical Officer shall be a non-voting ex officio member of the Joint Conference Committee. The chairpersonship shall alternate annually between a Commissioner and a member of the Medical Staff elected by the Medical Staff members of the Joint Conference Committee. In the event that a member of the Chief of Staff, Vice Chief of Staff, or Secretary/Treasurer of one of the District’s hospitals is unavailable to serve, the Medical Staff of the hospital may appoint a designee to serve as a voting member of this Committee and such designee shall be a current member of the applicable Medical Executive Council, as defined by the Medical Staff Bylaws.
(b) Duties. The Joint Conference Committee shall conduct itself as a forum for discussion, collaboration, and conflict resolution relating to matters of the District and hospital policy and practice, especially those matters pertaining to the delivery of efficient, effective, and quality patient care and shall be a medico-administrative liaison among the Medical Staffs, the Board, and the administration.

(c) Meetings and Reporting. The Joint Conference Committee shall meet at least twice a year or as necessary at the request of either the chair of the Joint Conference Committee, the Chair, the CEO, any three (3) members of the Joint Conference Committee, or when a decision of the Board is contrary to a recommendation of any Medical Executive Council or the Unified Medical Staff Committee. The Joint Conference Committee and the Unified Medical Staff Committee (as defined in the Medical Staff Bylaws) may promulgate rules to place items on the agenda of any regular or special Board meeting; provided, that such placement of items on the agenda is in accordance with the uniform administrative agenda process adopted by the Board. The recommendations of the Joint Conference Committee shall at all times be subject to final approval by the Board. It is the intent of this resolution that the Joint Conference Committee shall at all times endeavor to carry out the general purposes of the Board and shall exercise its authority in such a manner as to assist the Board in its proper performance of its duties, as is consistent with the Bylaws and the Medical Staff Bylaws.

6. Governance Committee.

(d) Composition. The Governance Committee shall consist of three (3) Commissioners who shall be nominated by the Chair and appointed by the Board in accordance with the Bylaws.

(e) Duties. The duties of the Governance Committee shall include, but not be limited to, reviewing and making recommendations to the Board about the District's governance structure and participating in the development of training and orientation materials for new Commissioners. The Governance Committee shall conduct periodic reviews of the District's Bylaws and governance-related policies to ensure that they are consistent with the District's Charter, as amended from time to time, and that the Board is performing its duties as outlined in the Charter efficiently. The Governance Committee shall also perform any other duties that may be requested by the Board from time to time.

(f) Meeting. The Governance Committee shall meet as needed at the request of the Board, the Chair or the chair of the Governance Committee.

7. Human Resources Committee.

(d) Composition. The Human Resources Committee shall consist of three (3) Commissioners who shall be nominated by the Chair and appointed by the Board in accordance with the Bylaws. The CEO shall, to the extent necessary,
require the attendance of the Chief Human Resources Officer to further the purposes, goals and objectives of the Human Resources Committee, provide support and/or relevant information to the Human Resources Committee, and to assist in matters falling within the jurisdiction of the Human Resources Committee.

(e) **Duties.** The duties of the Human Resources Committee shall include, but not be limited to, conducting annual reviews and/or performance evaluations of the Direct Reports, establishing performance standards, reviewing executive leadership structure and positions, and reviewing employee benefits and incentive plans. The Human Resources Committee shall also perform other duties that may be requested by the Board from time to time.

(f) **Meetings.** The Human Resources Committee shall meet as necessary to perform its duties as set forth herein.

8.9 **Legal Affairs and Governmental Relations Committee.**

(a) **Composition.** The Legal Affairs and Governmental Relations Committee shall consist of all Commissioners.

(b) **Duties.** The duties of the Legal Affairs and Governmental Relations Committee shall include, but not be limited to, reviewing the legal affairs of the District; reviewing the District’s State and Federal legislative efforts; reviewing contracts for physician services, major employment contracts, and other major contractual commitments to be presented to the Board in accordance with the Board policies and General Administrative Policies and Procedures, as approved and as may be amended from time to time; and performing other duties that may be requested by the Board from time to time.

(c) **Meetings.** The Legal Affairs and Governmental Relations Committee shall meet as necessary to perform its duties as set forth herein.

9.10 **Pension and Investment Committee.**

(a) **Composition.** The Pension and Investment Committee shall consist of three (3) Commissioners who shall be appointed by the Chair consistent with the Bylaws.

(b) **Duties.** The duties of the Pension and Investment Committee shall include, but not be limited to, monitoring of investment management services for the general operating funds, bond funds, self-insurance funds, employee pension plans and other employee retirement plans, including, without limitation, those under Sections 403(B) and 457(B) of the Internal Revenue Code of 1986, as amended. The Pension and Investment Committee shall also perform other duties that may be requested by the Board from time to time.
(c) Meetings. The Pension and Investment Committee shall meet as necessary to perform its duties as set forth herein.

4.10.11. Quality Assessment and Oversight Committee (the "QAOC").

(a) Composition. The QAOC shall consist of three (3) Commissioners who shall be nominated by the Chair and[appointed by the Board] in accordance with the Bylaws. To further the purposes, goals, and objectives, provide support and/or relevant information, and assist in matters falling within the jurisdiction of the QAOC, the following individuals or their designees shall be required to attend all QAOC meetings: the CEO; two (2) senior corporate members assigned by CEO; two (2) members of Corporate Quality and Risk Management; the Chief Medical Officer or a physician designated by the Chief Medical Officer; one (1) Regional Chief Nursing Officer; the Corporate Safety Officer; the Senior Vice President, Ambulatory Services; the Administrator of Gold Coast Home Health and Hospice; Administrative Vice President, Clinical Services Ambulatory Division; the General Counsel; the Chief Internal Auditor; and the four (4) Regional Chief Executive Officers, Chief Medical Officers, and Quality Services Managers.

(b) Duties. The duties of the QAOC shall include, but not be limited to, evaluating the needs and expectations of the individuals served by the District to determine how the District might improve its overall efforts; identify new programs and processes to better assist those individuals served by the District; identify high-volume, high-risk, problem-prone or high-cost processes; recommend methods of improvement; make recommendations regarding patient safety; and evaluate the impact of patient outcomes. The QAOC should engage and receive input and data from outside regulatory and accrediting agencies, as appropriate, to assist in the performance of its duties. The QAOC shall also perform any other duties that may be requested by the Board from time to time or as provided by Florida Law and applicable federal law, rules and regulations and accreditation standards.

(c) Meetings. The QAOC shall meet as necessary to perform its duties as set forth herein.


(a) Composition. The Risk Management Committee shall consist of three (3) non-voting Commissioners who shall be nominated by the Chair and[appointed by the Board] in accordance with the Bylaws. To further the purposes, goals, and objectives, provide support and/or relevant information, and to assist in matters falling within the jurisdiction of the Risk Management Committee, the District's Senior Vice-President of Quality and Case Management, or his or her designee,
and the Corporate Director of Claims and Insurance, or his or her designee, shall be required to attend all Risk Management Committee meetings.

(b) **Duties.** The duties of the Risk Management Committee shall include matters that relate solely to the evaluation of claims for which the District is, or may be, liable under Section 768.28, Florida Statutes, and which are filed with the District’s Risk Management program or relate solely to offers of compromise of claims filed with the Risk Management program. The Senior Vice-President of Quality and Case Management, or his or her designee, shall be responsible for maintaining a list of all matters discussed at the Risk Management Committee and noting each matter that has resulted in the termination of all litigation and settlement of all claims arising out of the same incident. Discussion at the Risk Management Committee shall be limited only to that necessary to the evaluation of claims for which the District is liable under Section 768.28, Florida Statutes, and which are filed with the District’s Risk Management program or relate solely to offers of compromise of claims filed with the Risk Management program. The Risk Management Committee shall also perform any other duties as may be provided under Florida Law. No member of the Risk Management Committee shall be entitled to vote on the Risk Management Committee, and no action may be taken at a Risk Management Committee meeting. The Risk Management Committee is designed solely for the District’s Risk Management Department to provide information to the Board regarding threatened or pending tort litigation against the District. This, however, shall not preclude the Board from voting on any of these matters at a meeting of the Board.

(c) **Meetings.** The Risk Management Committee shall meet as needed to perform its duties as set forth herein. From time to time, the Risk Management Committee, to better develop an understanding of the offers of compromise of claims filed with the Risk Management program and to foster more substantive discussion, may request the attendance of Risk Management personnel and outside legal counsel who are necessary for the discussions pertaining to the claims that are to be brought to the Risk Management Committee meeting. All meetings of the Risk Management Committee shall be limited to matters that are exempt from the provisions of Section 286.011, Florida Statutes, and section 24(a), Art. I of the Florida Constitution. The minutes of the meetings and proceedings of Risk Management Committee shall be recorded and maintained by the Risk Management Department and are exempt from the provisions of section 119.07(1), Florida Statutes, and Section 24(a), Art. I of the Florida Constitution until termination of all litigation and settlement of all claims arising out of the same incident.

**D. RESERVED**
E. Committee Appointments

The officers of Board committees shall be the chair and vice-chair, and such other offices as such committee may establish from time to time (the “Committee Officers”). The committees shall appoint their respective Committee Officers at the first committee meeting convened following the appointment or reappointment of the committee members. Committee Officer vacancies may be filled for the remainder of the then-current term by the committee at any meeting of such committee. All Committee Officers serve at the pleasure of their respective committees. The chair of each committee shall preside over all meetings of such committee and may exercise all powers and duties granted to and imposed on that position by the Board or such committee. In the absence of a committee chair, the vice-chair of such committee shall act in the role of chair and shall have all the powers and authority granted or imposed on the committee chair.

2. This Resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Chapter 4: Administration

Section 4.1: Direct Board Reports
Section 4.2: RESERVED
Section 4.3: RESERVED
Section 4.4: Chief Internal Auditor
Section 4.5: Chief Compliance and Privacy Officer
Section 4.14: Direct Board Reports

Chief Internal Auditor

WHEREAS, the District’s Charter permits the Board “to appoint and employ . . . agents and employees as said Board may deem advisable;

WHEREAS, the Board has established the Chief Internal Auditor as a Direct Board Report;

WHEREAS, the Board desires to establish additional Direct Board Reports outside of those created within the Bylaws to assist the Board in its Charter oversight duties, responsibilities and duties attributable to the Chief Internal Auditor; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

A. RESERVED

1. In addition to any duties, responsibilities or obligations imposed upon the Chief Internal Auditor in the Bylaws, the Chief Internal Auditor shall be responsible for the following duties and responsibilities: (a) overseeing the Internal Audit Department; (b) having full and unrestricted access to all of the District’s personnel, property, and records for the purposes of audits, unless otherwise prohibited under Florida Law or applicable federal laws, rules, or regulations; and (c) performing such other duties and responsibilities requested by the Board or Audit Committee that pertain to and further the Board’s objectives in the proper audit and review of the District, its facilities, and its operations.

B. RESERVED

1-2. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.

C. RESERVED

D. RESERVED

E. RESERVED

F. Internal Audit Department

An independent Internal Audit Department is hereby established to audit and review the District’s facilities and operations. The Internal Audit Department shall be managed by an independent Chief Internal Auditor who shall be a Direct Board Report and shall be the Board’s direct representative in the audit and review of the District’s facilities and operations. In performing such duties, the Chief Internal Auditor shall oversee an Internal Audit Department and have full and unrestricted access to all of the District’s personnel, property, and records unless otherwise prohibited under Florida Law or applicable federal laws, rules, or regulations. The Internal Audit Department shall perform such other duties and responsibilities requested by the Board pertaining to the audit and review of the District and shall perform any additional duties and responsibilities requested by committees created by the Board and delegated with the
authority of furthering the Board’s objectives in the proper audit and review of the District’s facilities and operations.

G. Corporate Compliance and Ethics Department

A Corporate Compliance and Ethics Department is hereby established to manage Broward Health’s compliance and ethics program. The Corporate Compliance and Ethics Department shall be managed by a Chief Compliance and Privacy Officer who shall be a Direct Board Report. The Chief Compliance and Privacy Officer shall make periodic reports to the Board as necessary in the Chief Compliance and Privacy Officer’s discretion or that may be requested by the Board or the CEO. In performing such duties and responsibilities, the Chief Compliance and Privacy Officer shall coordinate with the General Counsel’s Office and shall have full and unrestricted access to the District’s personnel, property, and records, unless otherwise prohibited under federal laws or regulations or Florida Law. It shall be the duty of the Corporate Compliance and Ethics Department to carry out all policies and duties established by the Board.
Section 4.5: Chief Compliance and Privacy Officer

WHEREAS, the District’s Charter permits the Board “to appoint and employ . . . agents and employees as said Board may deem advisable;

WHEREAS, the Board has established the Chief Compliance and Privacy Officer as a Direct Board Report;

WHEREAS, the Board desires to formalize the current duties of the Chief Compliance and Privacy Officer; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. In addition to any duties, responsibilities or obligations imposed upon the Chief Compliance and Privacy Officer in the Bylaws, the Chief Compliance and Privacy Officer shall be responsible for the following duties and responsibilities: (a) making periodic reports (at least quarterly) to the Board and as otherwise necessary in the Chief Compliance and Privacy Officer’s discretion or as requested by the Board or the CEO; and (b) developing and implementing policies, procedures, and practices designed to ensure compliance with the requirements set forth in the District’s Corporate Integrity Agreement between the District and the Office of Inspector General (the “OIG”) of the United States Department of Health and Human Services (the “CIA”) and with federal health care program requirements.

2. The Chief Compliance and Privacy Officer may, when performing such duties and responsibilities, coordinate with the General Counsel’s Office but may not be subordinate to the General Counsel. The Chief Compliance and Privacy Officer may not possess any responsibilities that involve acting in any capacity as legal counsel or supervising legal counsel functions for the District. In carrying out his or her functions and responsibilities, the Chief Compliance and Privacy Officer shall have full and unrestricted access to the District’s personnel, property, and records, unless otherwise prohibited under federal laws or regulations, the CIA, or Florida Law.

3. No noncompliance job responsibilities shall be imposed upon the Chief Compliance and Privacy Officer if such job responsibilities would affect the Chief Compliance and Privacy Officer’s ability to perform the duties necessary to meet the obligations of the CIA nor shall the Chief Compliance and Privacy Officer be subordinate to the Chief Financial Officer of the District.

4. Any such changes to the Chief Compliance and Privacy Officer’s identity or any changes to the Chief Compliance and Privacy Officer’s job responsibilities or description that
would affect the Chief Compliance and Privacy Officer’s ability to perform the duties necessary to meet the obligations in the CIA shall be communicated and reported to the OIG within five (5) days after such a change.

4.5. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Chapter 5: Medical Staff

Section 5.1: RESERVED
Section 5.2: Medical Staff Bylaws
Section 5.2: Medical Staff Bylaws

WHEREAS, the District has an established self-governing Medical Staff that is at all times accountable to the Board;

WHEREAS, various federal laws and regulations, Florida Law, and accreditation standards govern the content and structure of a medical staff of a hospital;

WHEREAS, the Bylaws of the Board of North Broward Hospital District are being amended;

WHEREAS, the Board intends to preserve the Medical Staff Bylaws and all rules, regulations, and policies enacted pursuant thereto upon ratification of the revised Bylaws until such time that the Board and the Medical Staff choose to amend the same; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

In addition to those requirements provided in the Medical Staff Bylaws, Florida Law, federal laws, rules and regulations, and accreditation requirements, the following rules, standards, and guidelines shall govern the Medical Staff and, as applicable, shall be included in the Medical Staff Bylaws:

A. Standards and Composition of the Medical Staff Bylaws

1) The Medical Staff Bylaws shall include, at a minimum, the following:

   (a) A determination, in accordance with Florida Law, of which categories of practitioners are eligible candidates for appointment to the Medical Staff;

   (b) A statement of the duties and privileges of each category of Medical Staff (e.g., active, courtesy, etc.);

   (c) A description of the organization of the Medical Staff;

   (d) A process for existing members of the Medical Staff to make recommendations to the Board for consideration of new appointments and reappointments to the Medical Staff;

   (e) A requirement that a medical history and physical examination be completed and documented for each patient no more than thirty (30) days before or twenty-four (24) hours after admission or registration, but prior to surgery or a procedure requiring anesthesia services, and such medical history and physical examination shall be completed and documented by a member of the Medical Staff who is a qualified...
licensed individual in accordance with Florida Law and the District’s Policies and Procedures;

(f) A requirement that an updated examination of the patient, including any changes in the patient’s condition, be completed and documented within twenty-four (24) hours after admission or registration, but prior to surgery or a procedure requiring anesthesia services, when the medical history and physical examination are completed within thirty (30) days before admission or registration and such updated examination of the patient, including any changes in the patient’s condition, shall be completed and documented by a member of the Medical Staff who is a qualified licensed individual in accordance with Florida Law and the District’s Policies and Procedures;

(g) Criteria for determining the privileges to be granted to individual practitioners and a procedure for applying the criteria to individuals requesting privileges;

(h) The requirement that a delineation of privileges be provided for each member of the Medical Staff and such delineation of privileges shall not be an overly broad specialty designation (e.g., “general surgery” or “general medicine”) unless such terms are specifically defined elsewhere;

(i) Procedures, within a time-limited period, for approving, approving in part, or denying an applicant’s request for privileges.

(j) A provision requiring any changes to the Medical Staff Bylaws and any rules and regulations promulgated thereunder be approved by the Board before being implemented by the Medical Staff;

(k) Procedures to ensure that the Medical Staff is accountable to the Board for the quality of care provided to patients;

(l) Procedures to ensure the criteria for selection include character, competence, training, experience, and judgment and not be based solely on certification, fellowship, or membership in a specialty body or society;

(m) Procedures that require all members of the Medical Staff to conduct themselves in a manner that ensures that the health and welfare of the District’s patients and the best interest of the District are served;

(n) A procedure for the Board to consult directly with the Chief of Staff of each of the District’s hospitals periodically throughout the District’s fiscal year, including, but not be limited to, discussions of matters related to the quality of medical care provided to patients of each of the District’s hospitals;

(o) A requirement that the Medical Staff provides to any members of the Medical Staff or applicant for Medical Staff membership and clinical privileges who have had their privileges suspended, denied, revoked or curtailed, whether in whole or in part, the
reason or reasons in writing within thirty (30) days of any such individual’s written request.

(p) A requirement that denial of Medical Staff membership or clinical privileges to any applicant be submitted, in writing, to the applicant’s respective licensing board or boards in accordance with applicable Florida Law and federal laws, rules and regulations.

(q) Procedures and guidelines, consistent with federal laws and regulations and Florida Law, pertaining to any refusal, revocation, or suspension of Medical Staff membership or any privileges attendant to such membership ensuring due process rights, unless otherwise waived, of such individuals facing such corrective or adverse action. The procedures for such a hearing shall, at a minimum: (i) ensure an orderly, fair, and impartial proceeding in which all facts relevant to the objections to the person's membership and privileges may be heard; (ii) ensure that such individual receives reasonable notice of the time and place of such hearing; (iii) include the requirement that all accusations constituting the cause of action are made on the records together with the findings and conclusions of the examining body; (iv) include the requirement that testimony at such hearing shall be recorded and transcribed; (v) an appeal procedure and a time-limited period for rendering a final decision after the appeal; and (vi) that the transcription, all notices, documents, exhibits, demonstrative evidence submitted, findings and recommendations of the examining authority, and all findings and decisions of the Board relevant to those proceedings, are preserved by the District as a record of the proceedings;

(r) A provision for revocation and suspension of Medical Staff membership and clinical privileges, subject to due process rights, including a fair hearing, for disruptive acts by members of the Medical Staff not related to clinical performance or direct patient care;

(s) Standards and procedures for reasonable access by licensed chiropractors to the reports of diagnostic x-rays and laboratory tests of the District’s licensed medical facilities, subject to the same standards and procedures as other licensed physicians;

(t) Procedures to ensure that patients are only admitted to the District’s hospitals on the recommendation of a licensed practitioner permitted to admit patients to hospitals under Florida Law and who has admitting privileges at such hospital; and

(u) Procedures to establish periodic reviews (e.g., Focused Professional Practice Evaluations and Ongoing Professional Practice Evaluations) of all members of the Medical Staff.

B. Appointment to the Medical Staff

1) All criteria for selection of qualified licensed individuals eligible for Medical Staff membership shall be based on individual character and background, health, demonstrated
current competence, training, experience, judgment, adherence to applicable professional ethics, reputation, ability to work with others, and ability of the District’s hospitals to provide adequate facilities and supportive services and shall not be based exclusively on certification, fellowship, or membership in a specialty body or society.

2) No individual shall be entitled to Medical staff membership at any of the District’s hospitals or facilities merely by virtue of the fact that he or she is duly licensed to practice in Florida and/or holds other certifications, is a member of a professional organization, has completed a fellowship or other post-graduate program, or that he or she, in the past or present, has been granted such privileges at another hospital or facility.

3) No otherwise qualified individual shall be denied Medical Staff membership or clinical privileges solely because such individual is licensed as a physician, dentist, podiatrist, psychologist, advanced practice registered nurse, or physician assistant; provided, that such practice coincides with the District’s needs.

4) The Medical Staff shall ensure that, as a condition of application to the Medical Staff and as a continuing condition of Medical Staff membership and clinical privileges, applicants and current members provide evidence of financial responsibility by one of the methods set forth under Florida Law, in a form and manner acceptable to the Medical Staff. The Medical Staff shall fully advise the Board of any member not in compliance with the financial responsibility requirements set forth under Florida Law.

5) Except in cases of emergency, no action on appointment, reappointment, or dismissal of a member of the Medical Staff shall be taken without prior referral to the Medical Staff for their recommendation.

C. RESERVED

D. Amendments to the Medical Staff Bylaws

The Medical Staff shall collaborate with the Board in the drafting of amendments to the Medical Staff Bylaws and any applicable rules and regulations or policies established to it, setting forth its organizations, standards, and governing principles. Any such amendments shall be approved by the Board prior to becoming effective.

E. The Medical Staff Bylaws, as originally established on May 30, 2013, and as subsequently amended from time to time, as well as all Medical Staff rules, regulations, and policies promulgated thereto shall survive the ratification of the Board’s amended Bylaws.

F. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Chapter 6: Miscellaneous

Section 6.1: A Resolution to Establish a Procurement Code
Section 6.2: A Resolution Establishing a Uniform Policy for Conducting Investigations
Section 6.3: A Resolution Pertaining to Legal Engagement Agreements
Section 6.4: Internal Risk Management Program
Section 6.1: A Resolution to Establish a Procurement Code

WHEREAS, the Board is responsible for Charter oversight;

WHEREAS, Florida Law permits the delegation of authority not otherwise prohibited thereunder;

WHEREAS, the Board desires to delegate the power to enter into and bind the District to certain contracts, arrangements, and expenditures that pertain to the day-to-day management of the District; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. The Board hereby makes a finding that certain contracts, arrangements, and expenditures of the District fall within operational management insofar as it involves the day-to-day management of the District’s hospitals and facilities.

2. The Board hereby directs the CEO to identify such contracts, arrangements, or expenditures that pertain to the day-to-day management of the District’s hospitals and facilities (“Operational Matters”).

3. The Board hereby directs the CEO to recommend a procurement code, consistent with Florida Law, containing such Operational Matters and which establishes certain necessary individuals or designees of the District who should have the authority to enter into and bind the District with respect to such Operational Matters.

4. The procurement code recommended by the CEO shall create procedures that foster fair and open competition; reduce the appearance of improprieties and opportunities of favoritism; and that establish public confidence in the process by which commodities and contractual services are procured.

5. Such procurement code, and any policies pertaining to it, as amended from time to time, shall be submitted to the Board for approval and shall not be effective or implemented until approved by the Board.

6. Nothing herein shall be construed as invalidating the procurement code in effect as of June 26, 2019 the date hereof or any Board policies enacted pursuant thereto or referenced therein until such procurement code and enacted and referenced policies are explicitly superseded by another procurement code and/or policies adopted by the Board.[GR6]
7. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 6.2: A Resolution Establishing a Uniform Policy for Conducting Investigations

WHEREAS, the District voluntarily entered into a Corporate Integrity Agreement (the “CIA”) with the United States Department of Health and Human Services and integral to the terms of the CIA is the strengthening of the District’s Compliance Program;

WHEREAS, the Corporate Compliance and Ethics Department has been reorganized to be independent and has the responsibility to thoroughly investigate all reported and discovered alleged wrongdoing, ethical, and professional breaches;

WHEREAS, it is critical that the Board’s confidence in the effectiveness of the compliance program be maintained;

WHEREAS, the Corporate Compliance and Ethics Department must be allowed to demonstrate an ability to perform or coordinate internally the performance of its investigative responsibilities thus enabling the Board, the District’s senior management, and other appropriate administration officials to take corrective action; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North Broward Hospital District, that:

1. All internal investigations concerning compliance with the CIA and the ethics and business policies of the District shall be conducted by the Corporate Compliance and Ethics Department on its initiative or as a result of a referral or anonymous tip.

2. Any external investigations initiated and paid for by the District, regardless of how authorized, shall be identified, summarized and presented to the Board.

3. The Corporate Compliance and Ethics Department is directed to establish procedures consistent with the CIA and this resolution, to log, track, investigate, and report on all investigations to the CEO, General Counsel, and the Chair on a monthly basis. These procedures, upon the recommendation by the Chief Compliance and Privacy Officer and the CEO, shall be presented to the Board for approval.

4. This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or policy previously adopted by the Board.
Section 6.3: A Resolution Pertaining to Legal Engagement Letters

WHEREAS, the Charter empowers the Board to contract and to be contracted with;

WHEREAS, the Board has delegated its contracting powers to the CEO; provided, that the aggregate contract amount is below a designated amount, the contracting process is consistent with the District’s procurement policies, the contract has been fully processed through the District’s vendor registration and contracting systems, and the contract is approved as to legal form by the General Counsel’s Office;

WHEREAS, the Board reserves the right to approve (a) all contracts that have an aggregate amount above the CEO’s designated amount per fiscal year, or (b) where the Board otherwise chooses to assert its jurisdiction;

WHEREAS, the Board chooses to assert its jurisdiction over legal retainer agreements; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of North Broward Hospital District, that:

1. All legal retainer agreements whereby the District is charged hourly rates or any increment thereof shall be executed by the CEO.

2. All legal retainer agreements shall include the scope of services to be provided and a fiscal year maximum contract authorization amount.

3. All legal retainer agreements shall contain a provision requiring all invoices be timely, invoiced within sixty (60) days from when the charges are incurred and services rendered, and that any such services and costs invoiced after sixty (60) days shall not be charged and will not be paid.

4. The CEO is directed to, in his or her sole discretion, is permitted to identify all current legal retainer agreements not executed by the Board’s Secretary Treasurer and the CEO. The CEO is hereby permitted to terminate, amend, and reauthorize such legal retainer agreements if the contract is otherwise inconsistent or reauthorize such legal engagement letters. This Resolution shall not invalidate any current legal engagement letters inconsistent with this Resolution if the CEO determines such legal engagement letter is still needed to protect the interests of the District.

5. The General Counsel, as appropriate, may from time to time recommend legal retainer agreements to the CEO and/or the Board.
6. This resolution hereby supersedes, replaces, and repeals the resolution entitled “A Resolution to Clarify Retainer Agreements as Contracts,” which was adopted by the Board on [November 28, 2018.

7. This resolution hereby supersedes, amends, replaces, and repeals any other conflicting resolution or policy previously adopted by the Board.
Section 6.4: Internal Risk Management Program

WHEREAS, the District has an internal risk management program that (a) performs the investigation and analysis of the frequency and causes of general categories and specific types of adverse incidents to the District’s patients; (b) develops appropriate measures to minimize the risk of adverse incidents to the District’s patients; (c) analyzes patient grievances that relate to patient care and the quality of medical services; (d) informs the District’s patients and other individuals authorized under Florida Law and federal laws, rules and regulations that the patient was the subject of an adverse incident; and (e) develops and implements an incident reporting system consistent with Florida Law (the “Risk Management Program”);

WHEREAS, Section 395.0197, Florida Statutes, mandates that the Board is responsible for the Risk Management Program;

WHEREAS, the Board desires to establish the guidelines of the Risk Management Program to ensure the proper oversight consistent with Florida Law; and

WHEREAS, unless context otherwise requires, capitalized terms used but not defined herein have the meanings ascribed to such terms in the Amended and Restated Bylaws of the North Broward Hospital District, as amended from time to time (the “Bylaws”).

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of North Broward Hospital District, that:

1. Every hospital of the District shall have a risk manager who is responsible for the implementation and oversight of their respective District hospital.

2. Each of the District’s hospital’s risk managers shall demonstrate competence, through education and experience, in all of the following areas:

   (a) Applicable standards of health care risk management;

   (b) Applicable federal, state, and local health and safety laws and rules;

   (c) General risk management administration;

   (d) Patient care;

   (e) Medical care;

   (f) Personal and social care;

   (g) Accident prevention;

   (h) Departmental organization and management;

   (i) Community interrelationships; and
(j) Medical terminology.

3. The District shall also have a corporate risk manager who supervises each hospital’s risk managers.

4. The corporate risk manager shall have direct access to the Board. Each hospital risk manager shall have access to the Board through the corporate risk manager.

5. The CEO, or his or her designee, with the advice and consent of the Board, shall hire the corporate risk manager.

6. The corporate risk manager may not be terminated, suspended, or otherwise removed from his or her position absent Board approval following consultation with the CEO or his or her designee.

7. The corporate risk manager shall administratively report to the CEO.

8. In the event of a corporate risk manager vacancy, the CEO or his or her designee, following Board approval, shall determine the process to be used to recruit and employ a replacement to a position with direct Board access on a permanent, acting, or interim basis.

9. This resolution hereby supersedes, amends, replaces, and repeals any conflicting resolution or policy previously adopted by the Board.
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Resolutions of the Board of Commissioners
Adopting the Amended and Restated Bylaws and the Codified Resolutions

WHEREAS, pursuant to Rule 59A-3.272 of the Florida Administrative Code, the Board of Commissioners (the “Board”) of the North Broward Hospital District (the “District”) is required to review its Bylaws, rules and regulations at least every two (2) years;

WHEREAS, the Bylaws of the District, which were adopted on November 17, 2011 (the “2011 Bylaws”), provides that the 2011 Bylaws may be amended from time to time by the Board upon an affirmative vote of a two-thirds majority of the members of the Board in any regular or special meeting of the Board; and

WHEREAS, the President and Chief Executive Officer (the “CEO”) of the District, the General Counsel of the District (the “General Counsel”), and the Governance Committee of the Board (the “Governance Committee”) have proposed that the Board adopts the Amended and Restated Bylaws (the “Bylaws”), which amends and restates the 2011 Bylaws in its entirety, and the Codified Resolutions of the Board of Commissioners of the North Broward Hospital District (the “Codified Resolutions”) in the form presented to the Board.

WHEREAS, the Board has determined that it is in the best interest of the District to recommend that the Board approves the Bylaws and the Codified Resolutions recommended by the CEO, the General Counsel, and the Governance Committee with such changes thereto approved by the Board; and

NOW, THEREFORE, BE IT RESOLVED, by the Board, that:

1. The Board hereby adopts the Bylaws and the Codified Resolutions, with the following additions, deletions, and other modifications: [LIST CHANGES, IF ANY].

2. The CEO or his designee and the General Counsel or her designee (each such person, an “Authorized Officer”) are hereby authorized and empowered to remove any comments and brackets in the Bylaws and the Codified Resolutions and correct any scrivener’s errors and make any other immaterial changes, including, without limitation, correcting misspellings, punctuation and grammatical errors, and making numbering and formatting changes to the Bylaws and the Codified Resolutions as they or any one of them shall deem necessary, desirable, advisable, or appropriate to carry out the full intent and purposes of this resolution.

3. The Authorized Officers be, and each of them hereby is, authorized and empowered to take all such further action and to execute, deliver and file all such further certificates, instruments and documents, in the name and on behalf of the District, and if requested or required, under its corporate seal duly attested by the Secretary-Treasurer of the District; to pay or cause to be paid all expenses; to take all such other actions as they or any one of them shall deem necessary, desirable, advisable or appropriate to carry out the full intent and purposes of this resolution.
BALANCED SCORECARD
WHAT IS A BALANCED SCORECARD

Structured approach to report on set financial and non-financial metrics on a regular basis. Defined by the Strategy Management Group as a strategic planning mechanism by which organizations:

- Communicate goals and initiatives to be accomplished
- Create alignment of the day to day expectations and organizational strategy
- Prioritize, measure and monitor progress of the organization towards strategic targets
ALIGN MISSION, VISION & STRATEGY BY ALIGNING ACTIONS WITH STRATEGIC OBJECTIVES
MISSION

The mission of Broward Health is to provide quality health care to the people we serve and support the needs of all physicians and employees.

VISION

The vision of Broward Health is to provide world-class healthcare to all we serve.
OUR PILLARS

BROWARD HEALTH PILLARS

- Quality
- Service
- People
- Growth
- Finance
OUR PILLARS

Their Purpose: To create a foundation that allows us to define consistency and measurable goals across the system that are relatable at all levels of the organization.

The Result: The Integration of all aspects of our work encourages purpose, worthwhile work and allows us to execute strategy in support of our Mission and Vision.
DETERMINING THE INDICATORS

Gallagher’s 2018 commonly observed categories of performance measures

- Clinical Quality Metrics: 90%
- Employee Satisfaction: 36%
- Community Benefit: 27%
- Patient Satisfaction: 85%
- Patient Safety: 35%
- Revenue Growth: 24%
- Operating Margin/Income: 66%
- Mission Accomplishment: 28%
- Gross/Total Margin: 18%
OTHER CONSIDERATIONS

- Availability of historical data
- Can the indicator be measured over time
- KPI: Typically a defined threshold that the organization has defined as acceptable
- Organizational Objective: Typically a target where incremental improvement is expected over time
- The degree of control the management team has in effectuating change
HARDWIRING EXCELLENCE

• To achieve sustainable improvement it is recommended that metrics be considered for a three year period

• Metrics at the target level should be achievable at least 70% of the time when no baseline target is allowed for

• The number of metrics could range from 12-36 however it is recommended that you maintain no more than three for each Pillar
Review of Balanced Scorecard FY19
# SCORECARD FY19

<table>
<thead>
<tr>
<th>Region BH</th>
<th></th>
<th></th>
<th>Points Earned</th>
<th>Possible Points</th>
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<tr>
<td></td>
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<table>
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<tr>
<th>Pillar</th>
<th>KPI</th>
<th>Description</th>
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<th>Possible Points</th>
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<tr>
<td>Quality</td>
<td>HAC - Hospital Acquired Conditions</td>
<td>Foreign Object Retained After Surgery</td>
<td>May</td>
<td>3.125</td>
<td>3.125</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Air Embolism</td>
<td>May</td>
<td>3.125</td>
<td>3.125</td>
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<tr>
<td></td>
<td></td>
<td>Blood Incompatibility</td>
<td>May</td>
<td>3.125</td>
<td>3.125</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Falls and Trauma</td>
<td>May</td>
<td>3.125</td>
<td>3.125</td>
</tr>
<tr>
<td></td>
<td>Value Based Purchasing Performance Measures (SIR Value)</td>
<td>MRSA</td>
<td>May</td>
<td>0.000</td>
<td>3.125</td>
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<tr>
<td></td>
<td></td>
<td>CDIFF</td>
<td>May</td>
<td>3.125</td>
<td>3.125</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CLABSI</td>
<td>May</td>
<td>0.000</td>
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<tr>
<td></td>
<td></td>
<td>CAUTI</td>
<td>May</td>
<td>0.000</td>
<td>3.125</td>
</tr>
<tr>
<td>Service</td>
<td>HCAHPS (Top % Box)</td>
<td>Global Rating Hospital</td>
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<tr>
<td></td>
<td></td>
<td>Communication w/Nurses</td>
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<tr>
<td></td>
<td></td>
<td>Response of Hosp Staff</td>
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<tr>
<td></td>
<td></td>
<td>Pull Time</td>
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<td>3.000</td>
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<tr>
<td></td>
<td></td>
<td>Transport Response Time</td>
<td>Jun</td>
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<td>3.000</td>
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<tr>
<td></td>
<td></td>
<td>EVS Turn Around Time</td>
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<td>3.000</td>
<td>3.000</td>
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<tr>
<td>People</td>
<td>Productivity</td>
<td>Productive Hours Worked per Adjusted Patient D.</td>
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<td>5.000</td>
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<tr>
<td></td>
<td>Turnover</td>
<td>Turnover</td>
<td>Jun</td>
<td>10.000</td>
<td>10.000</td>
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<tr>
<td>Growth</td>
<td>Net New Providers</td>
<td>Net New Providers</td>
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<td>5.000</td>
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<tr>
<td>Finance</td>
<td>Net Gain / (Loss) from Operations</td>
<td>Net Gain / (Loss) from Operations</td>
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SCORECARD FY19 CONTINUED

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<tr>
<th>TOTAL SYSTEM</th>
<th>REGIONAL SCORECARD</th>
<th>AMBULATORY DIVISION</th>
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<td>Finance:</td>
<td>WT</td>
<td>WT</td>
</tr>
<tr>
<td>• Net Gain / Loss from Operations (Total System)</td>
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<td>15</td>
</tr>
<tr>
<td>• Net Gain / Loss from Operations (Region Specific)</td>
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<td>15</td>
</tr>
<tr>
<td>• Net Gain / Loss from Operations (OP Services)</td>
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<td>15</td>
</tr>
<tr>
<td>Quality:</td>
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<td></td>
</tr>
<tr>
<td>• HACs (Total System)</td>
<td>12.5</td>
<td>12.5</td>
</tr>
<tr>
<td>• VBP (Total System)</td>
<td>12.5</td>
<td>12.5</td>
</tr>
<tr>
<td>• Service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• HCAMPS - Top % Box (Total System)</td>
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<td>12.5</td>
</tr>
<tr>
<td>• Patient Flow (Total System)</td>
<td>12.5</td>
<td>12.5</td>
</tr>
<tr>
<td>People</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Productivity: Worked hours / ADP (Total System)</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>• Turnover (Total System)</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Growth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Net New Providers</td>
<td>5</td>
<td>5</td>
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<tr>
<td>TOTAL</td>
<td>100</td>
<td>TOTAL</td>
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</table>

TOTAL SYSTEM

| Finance:     | WT | 30 |
| • Net Gain / Loss from Operations (Total System) | 30 |
| • Net Gain / Loss from Operations (Region Specific) | 15 |
| • Net Gain / Loss from Operations (OP Services) | 15 |
| Quality:     |     |    |
| • HACs (Total System) | 12.5 |
| • VBP (Total System) | 12.5 |
| • Service    |     |    |
| • HCAMPS - Top % Box (Total System) | 12.5 |
| • Patient Flow (Total System) | 12.5 |
| People       |     |    |
| • Productivity: Worked hours / ADP (Total System) | 5 |
| • Turnover (Total System) | 10 |
| Growth       |     |    |
| • Net New Providers | 5 |
| TOTAL | 100 |
Review of Proposed Indicators for FY20
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<thead>
<tr>
<th>Pillar</th>
<th>KPI</th>
<th>Metric</th>
<th>FY2018 Actual</th>
<th>FY2019 Actual</th>
<th>FY2019 Target</th>
<th>Proposed FY20 Target</th>
<th>Proposed FY21 Target</th>
<th>World Class Healthcare</th>
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<tr>
<td>Quality</td>
<td>HACs</td>
<td>Foreign Objects Retained After Surgery</td>
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<td>0.0000</td>
<td>0.0300</td>
<td>0.0300</td>
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<td>Quality</td>
<td>HACs</td>
<td>Air Embolism</td>
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<td>0.0000</td>
<td>0.0000</td>
<td>0.0000</td>
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<tr>
<td>Quality</td>
<td>HACs</td>
<td>Blood Incompatibility</td>
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<td>0.0000</td>
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<tr>
<td>Quality</td>
<td>HACs</td>
<td>Falls and Trauma</td>
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<td>VBP</td>
<td>CLABSI</td>
<td>0.8427</td>
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<tr>
<td>Quality</td>
<td>VBP</td>
<td>CAUTI</td>
<td>0.7838</td>
<td>1.3650</td>
<td>0.8280</td>
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<tr>
<td>Service</td>
<td>HCAHPS (Top % Box)</td>
<td>Global Rating Hospital</td>
<td>72.10%</td>
<td>74.30%</td>
<td>73.95%</td>
<td>76.16%</td>
<td>78.16%</td>
<td>84% (68%)*</td>
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<tr>
<td>Service</td>
<td>HCAHPS (Top % Box)</td>
<td>Communication w/Nurses</td>
<td>79.10%</td>
<td>80.30%</td>
<td>80.44%</td>
<td>82.85%</td>
<td>85.33%</td>
<td>88% (78%)*</td>
</tr>
<tr>
<td>Service</td>
<td>HCAHPS (Top % Box)</td>
<td>Response of Hospital Staff</td>
<td>63.70%</td>
<td>63.90%</td>
<td>65.44%</td>
<td>67.40%</td>
<td>69.40%</td>
<td>84% (64%)*</td>
</tr>
<tr>
<td>Service</td>
<td>HCAHPS (Top % Box)</td>
<td>Willingness to Recommend</td>
<td>72.80%</td>
<td>74.00%</td>
<td>74.64%</td>
<td>76.87%</td>
<td>79.18%</td>
<td>84% (69%)*</td>
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<tr>
<td>Service</td>
<td>Patient Flow</td>
<td>Request to Occupy for ED &lt;120 minutes</td>
<td>NA</td>
<td>157.00</td>
<td>NA</td>
<td>120.00</td>
<td>60.00</td>
<td></td>
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<tr>
<td>Service</td>
<td>Patient Flow</td>
<td>Pull Time</td>
<td>NA</td>
<td>33.00</td>
<td>45.00</td>
<td>35.00</td>
<td>30.00</td>
<td></td>
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<tr>
<td>Service</td>
<td>Patient Flow</td>
<td>Transport Response Time &lt; 20 minutes</td>
<td>NA</td>
<td>16.45</td>
<td>20.00</td>
<td>20.00</td>
<td>20.00</td>
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<tr>
<td>Service</td>
<td>Patient Flow</td>
<td>EVS Turn Time</td>
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<td>53.45</td>
<td>60.00</td>
<td>53.00</td>
<td>45.00</td>
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<tr>
<td>People</td>
<td>Productivity</td>
<td>Productive Hours Per APDs</td>
<td>24.40</td>
<td>24.90</td>
<td>25.40</td>
<td>Approved Budget</td>
<td>Budget</td>
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<tr>
<td>People</td>
<td>Turnover</td>
<td>Turnover</td>
<td>16.65%</td>
<td>17.80%</td>
<td>15.70%</td>
<td>17.50%</td>
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<td>Growth</td>
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<td>Net New Providers</td>
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<td>13</td>
<td>Approved Budget</td>
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<td>Finance</td>
<td>Net Gain/(Loss) from Ops</td>
<td>Net Gain/(Loss) from Operations</td>
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<td>Pending</td>
<td>127,070,864</td>
<td>Approved Budget</td>
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SUMMARY

• Balanced Scorecards are currently being used approximately 50% of the time across all industries.

• Our targets are designed to foster a High Reliability Organization that encourages innovation and improvements across the system in support of our Mission, Vision and Strategic Objectives.

• 80% of Healthcare Organizations tie the scorecard to At Risk Compensation. In doing so, Broward Health is creating opportunities for Leadership to achieve between the 25th - 50th percentile in the market for total cash.

Broward Health is unique because:

• *We have an integrated process with cascading goals for the system*

• *We allow managers to participate at every level of the organization in the Tier 1 and Tier 2 categories*

• *All targets must be met as defined by the scorecard, we do not allow for baseline incentive points*
<table>
<thead>
<tr>
<th>PROPOSED DATE</th>
<th>PROPOSED TIME</th>
<th>TYPE OF BOARD MEETING</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/11/2019</td>
<td>5:30 pm</td>
<td>1st Tax Hearing</td>
<td>Broward Health Corporate / Spectrum, Suite 150</td>
</tr>
<tr>
<td>09/27/2019</td>
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<td>Regular Board Meeting</td>
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<tr>
<td>09/27/2019</td>
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<td>2nd &amp; Final Tax Hearing</td>
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<td>10/16/2019</td>
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<tr>
<td>11/20/2019</td>
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<tr>
<td>12/18/2019</td>
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<tr>
<td>01/29/2020</td>
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</tr>
<tr>
<td>02/26/2020</td>
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<tr>
<td>03/25/2020</td>
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<td>04/29/2020</td>
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<td>05/27/2020</td>
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<tr>
<td>06/24/2020</td>
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<td>Commencing @10:00 am</td>
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<tr>
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<td>07/22/2020</td>
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<td>BH Corp Spectrum Suite 150</td>
</tr>
<tr>
<td>08/19/2020</td>
<td>Commencing @10:00 am</td>
<td>☐ ACO ☐ Audit ☐ Building ☐ Compliance &amp; Ethics ☐ Finance ☐ Governance ☐ Human Resource ☐ Joint Commission ☐ Legal &amp; Gov ☐ Pension &amp; Investment ☐ QAOC ☐ Risk</td>
<td>BH Corp Spectrum Suite 150</td>
</tr>
</tbody>
</table>
## Committee meeting requirements:

<table>
<thead>
<tr>
<th>Monthly or as needed</th>
<th>Every 2 Months or as needed</th>
<th>Quarterly or as needed</th>
<th>2x a Year or as needed</th>
<th>As Needed by Chair request</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building Commissioner Klein</td>
<td>BHIP Community Relations Council Commissioner Berry</td>
<td>Audit Commissioner Ure</td>
<td>Joint Conference Dr. Jensen</td>
<td>Executive Commissioner Klein</td>
</tr>
<tr>
<td>Finance Commissioner Berry</td>
<td>BHCS Community Relations Council Commissioner Gregoire</td>
<td>Compliance &amp; Ethics Commissioner Gregoire</td>
<td></td>
<td>Governance Commissioner Berry</td>
</tr>
<tr>
<td>CDTC Commissioner Angier</td>
<td>BHN Community Relations Council Commissioner Waugh</td>
<td>Legal Affairs &amp; Gov. Relations Commissioner Klein</td>
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<tr>
<td>BMHC Community Relation Councils Commissioner Ure</td>
<td></td>
<td></td>
<td>Pension &amp; Investment Commissioner Ure</td>
<td></td>
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<tr>
<td>Community Relations Council/Sr. Services Commissioner Angier</td>
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<td>Human Resource Commissioner Berry</td>
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<tr>
<td>Community Relations Council/Primary Care Commissioner Angier</td>
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<td></td>
<td>QAOC Commissioner Gregoire</td>
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<td></td>
<td></td>
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<td>Risk Commissioner Gregoire</td>
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</tbody>
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