A Regular Board meeting of the Board of Commissioners of the North Broward Hospital District will be held on Wednesday, September 25, 2019, at 3:00 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.
MINUTES OF THE SPECIAL MEETING
FIRST PUBLIC TAX HEARING
BOARD OF COMMISSIONERS
NORTH BROWARD HOSPITAL DISTRICT
September 11, 2019 – 5:30 p.m.

The Special Meeting of the Board of Commissioners of the North Broward Hospital District, First Public Tax Hearing for the North Broward Hospital District – Fiscal Year 2019-2020, was called to order by Chair Ray T. Berry on Wednesday, September 11, 2019 at 5:30 p.m., at Broward Health Corporate, Spectrum, 1700 Northwest 49 Street, Suite 150, Fort. Lauderdale, Florida 33309.

The Pledge of Allegiance was led by Commissioner Stacy L. Angier.

Roll Call showed attendance for the First Tax Hearing:

Commissioner Ray T. Berry, Chair
Commissioner Nancy W. Gregoire, Vice Chair
Commissioner Stacy L. Angier, Secretary/Treasurer
Commissioner Christopher Ure, Board Member
Commissioner Marie C. Waugh, Board Member (joined at 5:34 p.m., via WebEx)

Not present: Commissioner Andrew M. Klein, Board Member

A registration sheet listing all attendees is attached to the official minutes of this meeting on file in the Board of Commissioners’ office.

The Notice of this meeting is attached to the official minutes of this meeting as Exhibit I. The official Agenda for this Special meeting as presented by Chair Ray T. Berry for the consideration of the Board is incorporated into the “Notice of Special Board Meeting”.

Chairman Berry declared that a quorum was present and confirmed that this meeting had been duly advertised via the Proposed Property Tax Notice TRIM, completed between August 12, 2019 and August 24, 2019.

Mr. Gino Santorio, CEO, deferred speaking on the item to Mr. Alex Fernandez, CFO. Mr. Fernandez read the recommendation as seen below.

**Item 1 – We are recommending the Board’s consideration to approve the proposed millage rate for fiscal year 2019-2020. The millage rate for 2018/2019 was 1.0855 mills; the rolled back rate for 2019/2020 is 1.0324 mills; the proposed millage rate for 2019/2020 is 1.0324, we recommend reducing the millage rate to 1.0324 mills, which is the same as the rolled back rate.**

Mr. Fernandez stated that additional information could be provided, if the Board so required.
Chair Berry announced that he wanted to give the public an opportunity to address the Board with any questions or comments related to the proposed millage rate.

There were none.

Chairman Berry reiterated that the North Broward Hospital District wanted to adopt a tentative millage rate and that the rolled-back rate for 2019/2020 was 1.0324 mills. He further stated that the proposed millage rate to adopt was 1.0324 mills.

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

**The Board of Commissioners set the 2019/2020 millage rate for the North Broward Hospital District at 1.0324 mills, in accordance with the provisions of Chapter 200 of the Florida Statutes.**

Motion confirmed by roll call vote:

<table>
<thead>
<tr>
<th>Commissioner</th>
<th>Vote</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ray T. Berry</td>
<td>Yes</td>
</tr>
<tr>
<td>Nancy W. Gregoire</td>
<td>Yes</td>
</tr>
<tr>
<td>Stacy L. Angier</td>
<td>Yes</td>
</tr>
<tr>
<td>Christopher T. Ure</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Motion *carried* unanimously.

**Item 2 – Recommending the Board’s consideration to approve the proposed budget for the North Broward Hospital District for fiscal year 2020.**

Mr. Fernandez stated that additional information could be provided, if the Board so required.

At that time, Chairman Berry gave the public the opportunity to ask questions or make comments pertaining to the proposed fiscal year 2020 budget for North Broward Hospital District.

There were none.

* Commissioner Marie C. Waugh joined the meeting via WebEx phone conference.

**MOTION** It was *moved* by Commissioner Gregoire, *seconded* by Commissioner Ure, that:

**The Board of Commissioners approve the proposed budget for the North Broward Hospital District, including all of its operations for fiscal year 2020, beginning July 1, 2019 and ending June 30, 2020, in accordance with the provisions of Chapter 200 of the Florida Statutes.**
Motion confirmed by Roll Call Vote:

- Commissioner Ray T. Berry  Yes
- Commissioner Nancy W. Gregoire Yes
- Commissioner Stacy L. Angier Yes
- Commissioner Christopher T. Ure Yes
- Commissioner Marie C. Waugh Yes

Motion *carried* unanimously.

**MOTION** It was *moved* by Commissioner Ure, *seconded* by Commissioner Angier, that:

*The Board of Commissioners of the North Broward Hospital District move to close this public hearing pertaining to the proposed millage rate and tentative budget.*

Motion confirmed by Roll Call Vote:

- Commissioner Ray T. Berry  Yes
- Commissioner Nancy W. Gregoire Yes
- Commissioner Stacy L. Angier Yes
- Commissioner Christopher T. Ure Yes
- Commissioner Marie C. Waugh Yes

Chairman Berry asked if anyone from the public had any comments or questions pertaining to the tentative budget or proposed millage rate.

There were none.

Chairman Berry announced that the Final Tax Hearing was scheduled for Wednesday, September 25, 2019 at 5:30 p.m., at Broward Health’s Corporate Offices at Spectrum, located at 1700 Northwest 49 Street, Suite 150, Fort. Lauderdale, Florida 33309.

There being no further business, the meeting adjourned at 5:36 p.m.

Respectfully submitted,
Commissioner Stacy L. Angier, Secretary/Treasurer
REGULAR BOARD MEETING
4:00 p.m., August 28, 2019

The Regular Board Meeting of the Board of Commissioners of the North Broward Hospital District was held at 4:00 p.m. on August 28, 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 Berry at 4:06 p.m.

3. BOARD MEMBERS

Commissioners
Present: Commissioner Ray T. Berry, Chair
Commissioner Nancy W. Gregoire, Vice Chair
Commissioner Stacy L. Angier, Secretary/Treasurer
Commissioner Christopher T. Ure
Commissioner Marie C. Waugh (via WebEx)

Not Present: Commissioner Andrew M. Klein

Senior Leadership
Additionally Present: Gino Santorio, President/CEO, Alan Goldsmith/CAO, Alex Fernandez/CFO, Linda Epstein/General Counsel, Brett Bauman/Associate General Counsel

4. THE PLEDGE OF ALLEGIANCE Odin and Osiris Perez

5. PUBLIC COMMENTS

Mr. Vicente Thrower inquired about both the *Pastor’s Faith-Based Annual Meet and Greet* event and Broward Health’s *Care for the Homeless Annual Thanksgiving Feast* event. Mr. Santorio reported that a new committee had been created, led by Director of Strategic
Operations and Community Affairs, Vince Johnson. He also reported Mr. Johnson would be reaching out to members of the community to discuss upcoming events.

6. **BROWARD HEALTH BYLAWS**

Ms. Epstein spoke to legal matters in support of the Adoption of Proposed Bylaws and Codified Resolutions vote that took place at the Regular Board Meeting on July 31, 2019. Discussion ensued between commissioners, who were also in support of said vote.

7. **BOARD OFFICER ELECTIONS**

Chairman Berry recommended the election of officers’ vote be retaken.

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

**NOMINATE COMMISSIONER RAY BERRY AS CHAIRMAN OF THE NORTH BROWARD HOSPITAL DISTRICT’S BOARD OF COMMISSIONERS.**

Motion carried unanimously.

**MOTION** It was moved by Commissioner Angier, seconded by Commissioner Ure, to:

**NOMINATE COMMISSIONER NANCY GREGOIRE AS VICE CHAIR OF THE NORTH BROWARD HOSPITAL DISTRICT’S BOARD OF COMMISSIONERS.**

Motion carried unanimously.

**MOTION** It was moved by Commissioner Gregoire, seconded by Commissioner Ure, to:

**NOMINATE COMMISSIONER STACY ANGIER AS SECRETARY / TREASURER OF THE NORTH BROWARD HOSPITAL DISTRICT’S BOARD OF COMMISSIONERS.**

Motion carried unanimously.

8. **COMMITTEE ASSIGNMENTS**

**MOTION** It was moved by Commissioner Ure, seconded by Commissioner Angier, that:

**COMMITTEE ASSIGNMENTS REMAIN THE SAME AND THAT THE COMMITTEE CHAIRS BE SELECTED BY RESPECTIVE COMMITTEE MEMBERS AT THE PROCEEDING COMMITTEE MEETING.**

Motion carried unanimously.
9. **APPROVAL OF MINUTES**

9.1. Approve July 31, 2019 Regular Board Meeting minutes

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

**APPROVE THE JULY 31, 2019 REGULAR BOARD MEETING MINUTES.**

Motion *carried* unanimously.

10. **MEDICAL STAFF CREDENTIALING** – Dr. Andrew Ta

10.1.) Broward Health North 10.3.) Broward Health Coral Springs
10.2.) Broward Health Imperial Point 10.4.) Broward Health Medical Center

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

**ADOPT PROPOSED MEDICAL STAFF CREDENTIALING ITEMS (#10.1.) THROUGH (#10.4.).**

Motion *carried* unanimously.

11. **CHIEF MEDICAL STAFF UPDATES** (11.1.-11.4.)

Medical staff updates were given by Dr. Lehr for Broward Health North, Dr. Jensen for Broward Health Imperial Point, Dr. Penate for Broward Health Coral Springs and Dr. Morrison for Broward Health Medical Center. Said reports highlighted each of the facilities’ objectives, events and awards received over the past month.

* Coral Springs CEO, Jared Smith, introduced the Boccard family in honor of Ms. Lisa Boccard who recently passed of Cancer. A video was shared, followed by a standing ovation in her memory.

* Commissioner Waugh announced that she would take a leave of absence for approximately one hour.

12. **DISTINGUISHED PHYSICIAN AWARD**

Dr. Jensen recognized Dr. Richmond Estacio and awarded him with the Distinguished Physician Award.

13. **PRESENTATIONS**

13.1 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.

15.1 Recommendation to appoint Heather Havericak to SVP, Chief Executive Officer for Broward Health Medical Center

Mr. Goldsmith and Mr. Santorio recognized Ms. Heather Havericak for her achievements during her time as Acting CEO and announced her appointment as the Permanent Chief Executive Officer for Broward Health Medical Center.

Ms. Havericak spoke to her background and thanked staff, board members and leadership for their continued support.

No action necessary on item 15.1.

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

THE CONSENT AGENDA ITEMS (14.1) THROUGH (14.11) BE HEARD BEFORE ITEM 13.2. BOARD EDUCATIONAL COMPLIANCE ARRANGEMENTS TRAINING.

Motion carried unanimously.

14. CONSENT AGENDA

14.2. BHMC and BHCS, Infant Security Tagging System, Sole Source
14.3. Systemwide, Lease for Hematology Lab Equipment, STAGO
14.4. BHMC, Legacy Waiver, Roche Diagnostics
14.5. Strategic Analysis, Real Estate Strategies Inc.
14.6. BHC, Approve Agreement for Hospice and Palliative Care Services, Dr. Codada
14.7. BHMC and Salah Foundation, Pediatric & Adult Ophthalmology On Call Concurrent Services
14.8. Children's Diagnostic & Treatment Center, Extend Employment Contract, Dr. Rojas
14.9. BHIP and BHN, Establishment of Intensivist Services, GPA Specialty Care, LLC and NuView Telehealth, LLC.

14.10. GA-004-285 Deficit Reduction

14.11. GA-004-345 Monitoring and Auditing

**MOTION** It was *moved* by Commissioner Ure, *seconded* by Commissioner Angier, that:

**ITEMS (14.1) THROUGH (14.11) ON THE CONSENT AGENDA BE APPROVED.**

Motion *carried* unanimously.

* Meeting went into recess at 5:48 pm and reconvened at 6:12 pm.

* Commissioner Waugh rejoined the meeting via WebEx at 6:20 pm.

13.2 Board Educational Compliance Arrangements Training

Mr. Brian Kozik, Chief Compliance Officer, presented the board with a Compliance Arrangements Training.

15. **DISCUSSION AGENDA**

15.2. Resolution to approve CFO to open an account with JP Morgan as directed by the Board of Commissioners of the North Broward Hospital District

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

**RESOLUTION FY20-01 (ATTACHED HERETO AND INCORPORATED HEREIN BY REFERENCE) BE APPROVED.**

Motion *carried* unanimously.

15.3. Discussion of Board Representation at Public Events, Process, Payment and Approval

Chairman Berry asked that item 15.3. be postponed and requested Secretary/Treasurer Angier take the lead on the item once staff had a chance to explore options and bring back recommendations. Discussion would be brought back to a future Governance Committee meeting.

No action taken.
15.4. Appointment of the Board of Directors of Broward Health ACO, Services, Inc.

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

APPROVE PROPOSED APPOINTMENTS OF THE BOARD OF DIRECTORS OF BROARD HEALTH’S ACO SERVICES, INC.

Motion carried unanimously.

* Commissioner Waugh joined the meeting in person at 6:45 p.m.

16. **COMMENTS BY COMMISSIONERS**

Closing comments were given by the Board.

17. **NEXT REGULAR BOARD MEETING**

Next regularly scheduled Board of Commissioner's meeting will be held on September 25, 2019 at 3:00 p.m. at the Broward Health Corporate Office, Spectrum site, Suite 150, 1700 Northwest 49th Street, Ft. Lauderdale, Florida, 33309.

18. **ADJOURNMENT** 6:50 pm

**MOTION** It was moved by Commissioner Ure, seconded by Commissioner Angier, that:

THE REGULAR BOARD MEETING BE ADJOURNED.

Motion carried unanimously.

Respectfully submitted,
Commissioner Stacy L. Angier, Secretary/Treasurer
RESOLUTION FY20-02

RESOLUTION AUTHORIZING INVESTMENT IN J.P. MORGAN FUNDS

WHEREAS, the Board of Commissioners (the “Board”) of the North Broward Hospital District (the “District”) has determined that it is in the best interest of the District submit an application to, open and invest in one or more investment funds (the “J.P. Morgan Funds”) managed by subsidiaries of JPMorgan Chase & Co. (“JPMorgan”).

NOW, THEREFORE, BE IT RESOLVED, by the Board that:

1. The Senior Vice President and Chief Financial Officer of the District (the “CFO”) is hereby authorized and empowered to, in the name of, and on behalf of, the District, submit an Institutional Account Application (the “Application”) for one or more J.P. Morgan Funds and invest in one or more J.P. Morgan Funds as he deems proper for, in the name of, and on behalf of, the District, and to make arrangements for the administration of such J.P. Morgan Funds.

2. The CFO is hereby authorized and empowered to, in the name of, and on behalf of, the District, give instructions to purchase, exchange, redeem and transfer shares of the J.P. Morgan Funds (the “Shares”) in the name of the District and the CFO is authorized to give other instructions regarding the Shares, including, without limitation, instructions to change (a) the bank account previously designated to receive the proceeds of redemptions of Shares, (b) the list of officers authorized to give instructions regarding the Shares and (c) other information in the Application completed and signed on behalf of the District to establish an account or accounts for the District in connection with the J.P. Morgan Funds.

3. The CFO and the Secretary/Treasurer of the Board are each authorized and empowered, in the name of, and on behalf of, the District, to execute and deliver any incumbency certificate requested or required by JPMorgan or its subsidiaries, including J.P. Morgan Institutional Investments Inc. (“JPMII”), in connection with the Application.

4. The CFO is authorized to prepare, execute, deliver and file, as appropriate, any and all documents, in such form as the CFO shall approve, the execution, delivery or filing by the CFO to be conclusive evidence of such approval, and to take all such further action as the CFO considers necessary or desirable, to carry out the purposes and intent of the foregoing resolutions.

5. The foregoing resolution and the authority hereby conferred shall remain in full force and effect until written notice of revocation or modification shall be received by JPMorgan or JPMII; that the CFO and the Secretary/Treasurer of the Board are hereby authorized
and directed to certify to JPMorgan or JPMII the foregoing resolution, the names of the officers and their respective designees, any changes from time to time in said officers or designees and specimens of their respective signatures; and that JPMorgan may conclusively assume that the persons at any time so certified to it continue as such until receipt by JPMorgan or JPMII of written notice to the contrary.

6. This Resolution hereby supersedes, amends, replaces, and repeals any previous conflicting resolution, policy, or policies.
SPECIAL BOARD MEETING
10:00 a.m., July 24, 2019

The Special Board meeting of the Board of Commissioners of the North Broward Hospital District was held at 10:00 a.m. on July 24th, 2019 at the Broward Health Corporate Spectrum location, 1700 Northwest 49 Street, Suite 150, Fort Lauderdale, Florida, 33309.

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 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 Andrew M. Klein at 10:16 a.m.

3. BOARD MEMBERS

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

Not Present: Commissioner Marie C. Waugh

Senior Leadership
Additionally Present: Gino Santorio/President/Chief Executive Officer, Alan Goldsmith/Chief Administrative Officer, Alex Fernandez/Chief Financial Officer, Linda Epstein/Corporate General Counsel, Jerry Del Amo/ Sr. Associate, General Counsel, Brett Bauman/Associate, General Counsel, Nigel Crooks/Chief Internal Auditor

4. PUBLIC COMMENTS None
5. **TOPIC OF DISCUSSION**

6. **MILLAGE RATE AND TAX HEARING**

6.1. 2019 Rolled Back Millage Rate

Mr. Fernandez, Chief Financial Officer, informed the board that three actionable items needed to occur to comply with provisions provided by the property appraiser.

**MOTION** It was *moved* by Commissioner Angier, *seconded* by Commissioner Ure, that:

**THE BOARD OF COMMISSIONERS OF THE NORTH BROWARD HOSPITAL DISTRICT SHOULD BY APPROPRIATE MOTION DETERMINE THE ROLL-BACK MILLAGE RATE FOR 2019 IS 1.0324.**

Motion *carried* unanimously.

6.2. Adoption of Proposed 2019 Millage Rate

**MOTION** It was *moved* by Commissioner Gregoire, *seconded* by Commissioner Ure, that:

**UPON STATUTORY REQUIREMENTS AND PROCESS CRITERIA, THE NORTH BROWARD HOSPITAL DISTRICT SETS THE PROPOSED MILLAGE RATE FOR 2019 AT 1.0324.**

Motion *carried* unanimously

6.3. Setting of Date, Time and Place of First and Second Tax Hearings

Mr. Fernandez listed requirements within the times and dates established for the first and final tax hearings.

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

**UPON STATUTORY REQUIREMENTS AND REQUISITE TIMELINES, THE NORTH BROWARD HOSPITAL DISTRICT ADVISES THAT THE FOLLOWING DATES, TIMES AND PLACES BE USED TO HOLD THE 2019 TRIM PUBLIC HEARINGS:**

**A) FIRST HEARING- WEDNESDAY, SEPTEMBER 11, 2019 AT 5:30 P.M. AT BROWARD HEALTH CORPORATE SPECTRUM LOCATION: 1700 NORTHWEST 49 STREET, FORT LAUDERDALE, FLORIDA, 33309,**
AND

B) SECOND AND FINAL HEARING- FRIDAY, SEPTEMBER 27, 2019 AT 5:30 P.M. AT BROWARD HEALTH CORPORATE SPECTRUM LOCATION: 1700 NORTHWEST 49 STREET, FORT LAUDERDALE, FLORIDA, 33309.

Motion carried unanimously.

Discussion ensued on maximizing public participation within additional locations at Broward Health.

7. ADJOURNMENT 10:33 a.m.

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

ADJOURN THE SPECIAL BOARD OF COMMISSIONER MEETING.

Motion carried unanimously.

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

DATE: September 25, 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:

Gino Santorio, President/CEO
Date: September 25, 2019

Alice Taylor, Chief Executive Officer, Broward Health North
Date: September 13, 2019

Andrew Ta, Chief Medical Officer, Broward Health
Date: September 25, 2019
MEMORANDUM

TO: Board of Commissioners

FROM: Alice Taylor, Chief Executive Officer
       Broward Health North

DATE: September 25, 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: 09/05/2019  MEDICAL COUNCIL: 09/10/2019

1. Approved MEC Business:
   • OPPE reports for November 2018 to June 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>Carrie D. Culpepper, APRN</td>
<td>Surgery</td>
<td>Nurse Practitioner</td>
<td>BHN</td>
</tr>
<tr>
<td>Michelle Davis, ARNP</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>BHN</td>
</tr>
<tr>
<td>Timothy Dickhut, M.D.</td>
<td>Surgery</td>
<td>Critical Care, Trauma and General Surgery</td>
<td>BHMC</td>
</tr>
<tr>
<td>Tricia Kalvar, M.D.</td>
<td>Medicine</td>
<td>Hematology/Oncology</td>
<td>BHMC</td>
</tr>
<tr>
<td>Shannon B. Keating, D.O.</td>
<td>Medicine</td>
<td>Hematology/Oncology</td>
<td>BHMC</td>
</tr>
<tr>
<td>David Krause, M.D. (locums)</td>
<td>Surgery</td>
<td>Otolaryngology</td>
<td>BHN</td>
</tr>
<tr>
<td>Erika L. Leo, ARNP</td>
<td>Surgery</td>
<td>Nurse Practitioner</td>
<td>BHN</td>
</tr>
<tr>
<td>Adam Magin, M.D.</td>
<td>Medicine</td>
<td>Pulm. &amp; Critical Care</td>
<td>BHCS</td>
</tr>
<tr>
<td>Kojo Marfo, M.D.</td>
<td>Surgery</td>
<td>Orthopedic Surgery</td>
<td>BHN</td>
</tr>
<tr>
<td>Francisco J. Molina, M.D.</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>BHIP</td>
</tr>
<tr>
<td>Marissa F. Myers, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>BHIP</td>
</tr>
<tr>
<td>Samir Peshiman, M.D.</td>
<td>Medicine</td>
<td>Critical Care Medicine</td>
<td>BHCS</td>
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<tr>
<td>Carlos Ricart, M.D.</td>
<td>Pathology</td>
<td>Pathology</td>
<td>BHIP</td>
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<tr>
<td>Isa Vazquez, APRN</td>
<td>Medicine</td>
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<td>BHN</td>
</tr>
<tr>
<td>Elka Wiley-Mills, M.D.</td>
<td>Medicine</td>
<td>Neurology</td>
<td>BHN</td>
</tr>
</tbody>
</table>

3. APPROVED THE FOLLOWING PRACTITIONER RESIGNATION(S):

<table>
<thead>
<tr>
<th>Practitioner</th>
<th>Specialty</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Michelle Binns, APRN</td>
<td>Nurse Practitioner</td>
<td>AHP to Voluntary Resignation</td>
</tr>
<tr>
<td>Dennis Bowsher, MD</td>
<td>Cardiology</td>
<td>Active to Voluntary Resignation</td>
</tr>
<tr>
<td>Margaret Medley, APRN</td>
<td>Nurse Practitioner</td>
<td>AHP to Voluntary Resignation</td>
</tr>
<tr>
<td>Blanca Palencia-Kerr, Ph.D</td>
<td>Psychology</td>
<td>Active to Voluntary Resignation</td>
</tr>
<tr>
<td>John M. Sortino, M.D.</td>
<td>Internal Medicine</td>
<td>Affiliate to Voluntary Resignation</td>
</tr>
<tr>
<td>Kenneth Tourgeman, M.D.</td>
<td>Nephrology</td>
<td>Active to 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>Christopher Diamoy, APRN</td>
<td>Surgery</td>
<td>Adding Eric Johnson, D.O.</td>
</tr>
</tbody>
</table>
### ADDITIONAL/WITHDRAWAL PRIVILEGES

<table>
<thead>
<tr>
<th>Practitioner/Specialty</th>
<th>Department</th>
<th>Withdrawal/additional privilege</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hasan Riaz, M.D./Nephrology</td>
<td>Medicine</td>
<td>Adding Critical Care</td>
</tr>
</tbody>
</table>

**Chief of Staff**

Date: September 13, 2019

**Chief Executive Officer**

Date: September 13, 2019

**President/CEO**

Date: September 25, 2019
**Broward Health – Credentialing Abstract – Medical Staff Applicant**

<table>
<thead>
<tr>
<th><strong>Name:</strong></th>
<th><strong>Cesar W Carralero DO</strong></th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td>Fax: 877-249-3180</td>
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<td></td>
<td>Email: Kim.Durcan@ envisionhealth.com</td>
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<td><strong>Medical/Professional School:</strong></td>
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Memorial Regional Hospital  
Hollywood, FL  
From: 10/27/2004  
To: 05/24/2006  
Specialty: Emergency Medicine

Memorial Hospital Miramar  
Miramar, FL  
From: 02/23/2005  
To: 05/24/2006  
Specialty: Emergency Medicine

Broward Health Medical Center & Salah Foundation Children's Hospital  
Ft Lauderdale, FL  
From: 02/22/2006  
To: 11/17/2010  
Specialty: Emergency Medicine

Broward Health Coral Springs & Salah Foundation Children's Hospital  
Coral Springs, FL  
From: 05/23/2007  
To: 03/31/2010  
Specialty: Emergency Medicine

Broward Health Imperial Point  
Ft Lauderdale, FL  
From: 09/25/2007  
To: Present  
Specialty: Emergency Medicine

Bethesda Memorial Hospital (EM)  
Boynton Beach, FL  
From: 05/12/2009  
To: 01/08/2014  
Specialty: Emergency Medicine

Mount Sinai Medical Center  
Miami Beach, FL  
From: 01/01/2011  
To: 01/31/2012  
Specialty: Emergency Medicine

Broward Health Medical Center  
Ft Lauderdale, FL  
From: 10/31/2018  
To: Present  
Specialty: Emergency Medicine

Board Certification:
Board: American Osteopathic Board of Emergency Medicine  
Specialty: Emergency Medicine  
Certification Date: 11/30/2006  
Certification Expiration: 12/31/2026
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Carrie D Culpepper, APRN

Date of Birth: 05/10/1988

Citizenship: US

Primary Facility: Broward Health North

Other Broward Health Facilities: None

Specialty: Nurse Practitioner

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Physician Sponsorship: Charles V Toman, MD

Practice Name: Toman Orthopedics and Sports Medicine, PA
Website: http://drtoman.com/about/

Primary Address Information:
7301A West Palmetto Park Road
Suite 100B
Boca Raton, FL 33433
Phone: 561-221-6895
Fax: 561-221-6896
Email: Kaitlyn.Davis@tomanortho.com

Professional School: University of Alabama at Birmingham
birmingham, AL
From: 05/01/2016
To: 08/11/2018
Degree: MSN
Major: Nursing

Hospital Affiliations/Work History:
Boca Raton Regional Hospital
Boca Raton, FL
From: 03/21/2016
To: 05/31/2019
Title: Registered Nurse

Toman Orthopedics and Sports Medicine, PA
Boca Raton, FL
From: 05/06/2019
To: Present
Title: APRN

Board Certification:
Board: American Nurses Credentialing Center
Specialty: Adult Gerontology Acute Care Nurse Practitioner
Certification Date: 11/27/2018
Certification Expiration: 11/27/2023

Carrie D Culpepper, APRN, RNFA
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Michelle Davis, APRN

Date of Birth: 01/12/1977

Citizenship: US

Primary Facility: Broward Health North

Other Broward Health Facilities:
- Broward Health Coral Springs

Specialty: Nurse Practitioner

Dept. at Primary Facility: Medicine

Secondary Facility Depts.:
- Medicine

Physician Sponsorship: Alka Singh, MD

Practice Name: Alka A. Singh MD PLLC

Primary Address Information:
- 5901 Colonial Drive
- Suite 102
- Margate, FL 33063
- Phone: 954-973-5777
- Fax: 954-876-1806
- Email: ifernandez@rejuvimed.net

Professional School:
- South University
- Savannah, GA
  - From: 11/30/2015
  - To: 01/17/2018
  - Degree: MSN
  - Major: Nurse Practitioner

Hospital Affiliations/Work History:
- Northwest Medical Center (HCA)
  - Margate, FL
    - From: 08/06/2013
    - To: Present
    - Title: Critical Care Registered Nurse

- West Broward Nephrology, PA
  - Coral Springs, FL
    - From: 05/01/2018
    - To: 06/21/2019
    - Title: Nurse Practitioner

Board Certification:
- Board: American Academy of Nurse Practitioners
- Specialty: Adult-Gerontology Primary Care Nurse Practitioner (A-GNP)
- Certification Date: 01/31/2018
- Certification Expiration: 01/30/2023
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Timothy Dickhutt, MD

Date of Birth: 01/08/1986

Citizenship: US

Primary Facility: Broward Health North

Other Broward Health Facilities:
- Broward Health Imperial Point
- Broward Health Medical Center

Specialty:
- Trauma
- Surgical Critical Care
- General Surgery

Dept. at Primary Facility: Surgery

Secondary Facility Depts.:
- Surgery

Practice Name: Trauma and Critical Care Associates

Primary Address Information:
- 6405 N Federal Hwy
- Suite 404
- Fort Lauderdale, FL 33308
- Phone: 954-491-0900
- Fax: 954-491-0540
- Email: zoe.tranakas@gmail.com

ECFMG: N/A

Medical/Professional School:
- Creighton University
- Omaha, NE
- From: 08/01/2008
- To: 05/12/2012
- Degree: Medical Doctor

Internship: N/A

Residency:
- Jackson Memorial Hospital- Miami University
- Miami, FL
- From: 06/24/2012
- To: 06/30/2017
- Specialty: General Surgery

Fellowship:
- University of Nevada, Las Vegas
- Las Vegas, NV
- From: 08/01/2017
- To: 07/31/2019
- Specialty: Surgical Critical Care/ Acute Care Surgery

Hospital Affiliations/ Work History: N/A
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Timothy Dickhut, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Tricia Kalwar MD

Date of Birth: 04/01/1977

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: Broward Health North

Specialty: Hematology/ Oncology

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: Medicine

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

Primary Address Information:
1625 SE 3rd Avenue
Suite 525
Fort Lauderdale, FL 33316
Phone: 954-355-4975
Fax: 954-355-5898
Email: bstraika@browardhealth.org

ECFMG:
Number: 0-666-727-3
Date Issued: 05/26/2006

Medical/Professional School:
St. Matthews University School of Medicine
West Bay, Cayman Islands
From: 09/02/2002
To: 03/12/2006
Degree: MD

Residency:
Rutgers New Jersey Medical School
Newark, NJ
From: 07/01/2006
To: 06/30/2010
Specialty: Internal Medicine

Fellowship:
North Shore Long Island Jewish Health System/Hofstra North Shore-LIJ School of Medicine Program
Lake Success, NY
From: 07/01/2010
To: 06/30/2013
Specialty: Hematology/Oncology

Hospital Affiliations/
Work History:
New London Cancer Center
Waterford, CT
From: 07/22/2013
To: 07/21/2015
Specialty: Hematology/Oncology

Broward Health Medical Center
Fort Lauderdale, FL
From: 08/26/2015
To: Present
Specialty: Hematology/Oncology

Tricia Kalwar, MD
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Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Shannon B Keating, DO

Date of Birth: 01/18/1983

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: Broward Health North

Specialty: Hematology/ Oncology

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: Medicine

Practice Name: Broward Health Physician Group

Primary Address Information:
1625 SE Third Avenue
Suite 300
Fort Lauderdale, FL 33316-2521
Phone: 954-355-5001
Fax: 954-355-4881

ECFMG: N/A

Medical/Professional School:
Nova Southeastern College of Osteopathic Medicine
Fort Lauderdale, FL
From: 08/06/2007
To: 05/27/2011
Degree: Doctor of Osteopathic Medicine

Internship: N/A

Residency:
Henry Ford Macomb Hospital
Clinton Township, MI
From: 06/22/2011
To: 06/30/2014
Specialty: Internal Medicine

Gap:
Relocated from Michigan to Florida
From: 07/01/2014
To: 08/31/2014

Hospital Affiliations/
Work History:
Naples Community Hospital
Naples, FL
From: 09/11/2014
To: 06/30/2016
Specialty: Hospitalist Medicine

Fellowship:
Larkin Community Hospital
South Miami, FL
From: 07/01/2015
To: 06/30/2018
Specialty: Hematology & Oncology

Gap
Taking Hematology/ Oncology Boards and completing credentialing process
From: 07/01/2018
To: Present

Shannon B Keating, DO
Broward Health – Credentialing Abstract – Medical Staff Applicant

Hospital Affiliations/
Work History:
Broward Health Medical Center & Salah Foundation Children Hospital
South Miami, FL
From: 12/12/2018
To: Present
Specialty: Hematology/ Oncology

Board Certification:
Board: American Osteopathic Board of Internal Medicine
Specialty: Internal Medicine
Certification Date: 09/10/2014
Certification Expiration: 12/31/2024

Board: American Osteopathic Board of Internal Medicine
Specialty: Hematology
Certification Date: 08/30/2018
Certification Expiration: 12/31/2028

Board: American Osteopathic Board of Internal Medicine
Specialty: Oncology
Certification Date: 08/30/2018
Certification Expiration: 12/31/2028
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: David E Krause MD

Date of Birth: 08/14/1953
Citizenship: US
Primary Facility: Broward Health North
Other Broward Health Facilities: None

Specialty(ies): Otolaryngology
Dept. at Primary Facility: Surgery
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: ncampos@msrlocums.com

ECFMG: N/A

Medical/Professional School: University of Illinois at Chicago - College of Medicine
Chicago, IL
From: 09/22/1975
To: 06/01/1979
Degree: MD

Internship: University of Illinois Metropolitan Group Hospitals
Chicago, IL
From: 07/01/1979
To: 06/30/1980
Specialty: General Surgery

Residency: University of Illinois Medical Center
Chicago, IL
From: 07/01/1980
To: 06/30/1983
Specialty: Otolaryngology

Fellowship: N/A

Hospital Affiliations/Work History:
Riverside Medical Center
Kankakee, IL
From: 06/01/1983
To: Present
Specialty: Otolaryngology

Amita Health-Presence St. Mary’s Hospital
Kankakee, IL
From: 08/01/1983
To: Present
Specialty: Otolaryngology

David E Krause, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

| Hospital Affiliations/ Work History (continued) | Riverside Ambulatory Surgery Center Bourbonnais, IL |
| From: | To: | Specialty: |
| 08/01/2005 | Present | Otolaryngology |

| Board Certification: | Board: American Board of Otolaryngology |
| Specialty: | Otolaryngology |
| Certification Date: | 10/25/1983 |
| MOC Reverification: | N/A |
| Certification Expiration: | Lifetime |

David E Krause, MD
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Erika L Leo, ARNP

Date of Birth: 05/22/1974

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:

- Broward Health North

Specialty: Nurse Practitioner

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: Surgery

Physician Sponsorship:
- Behnam Jacob Myers, DO
- Steven D Lasser, MD

Practice Name: Spine Solutions
Website: www.spinesolutionsfl.com

Primary Address Information:
- 3850 Sheridan Street
- Hollywood, FL 33021
- Phone: 954-983-3888
- Fax: 954-983-3999
- Email: cfo@spinesolutionsfl.com

Professional School:
- University of Miami - School of Nursing and Allied Health Studies
- Coral Gables, FL
- From: 08/17/2015
- To: 08/05/2016
- Degree: MS
- Major: Family Nurse Practitioner

Gap:
- Employment seeking
- From: 08/06/2016
- To: 01/22/2016

Hospital Affiliations/Work History:
- Spine Solutions
  - Hollywood, FL
  - From: 01/23/2017
  - To: Present
  - Title: Nurse Practitioner

- Broward Health Medical Center & Salah Foundation Children Hospital
  - Fort Lauderdale, FL
  - From: 04/19/2017
  - To: Present
  - Title: Nurse Practitioner

Board Certification:
- Board: American Academy of Nurse Practitioners
- Specialty: Adult Nurse Practitioner
- Certification Date: 09/27/2016
- Certification Expiration: 09/26/2021
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Adam F Magin MD

Date of Birth: 05/16/1969

Citizenship: US

Primary Facility: Broward Health Coral Springs

Other Broward Health Facilities: Broward Health Imperial Point
Broward Health North

Specialty(ies): Internal Medicine
Pulmonary Disease
Critical Care Medicine

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: Medicine

Practice Name: NuView Health LLC
Website: www.nuviewhealth.com

Primary Address Information: 1825 NW Corporate Boulevard
Suite 105
Boca Raton, FL 33431
Phone: 561-299-3667
Fax: 561-299-3870
Email: trousseau@nuviewhealth.com

ECFMG: Number: 0-525-513-27
Date Issued: 06/06/1996

Medical/Professional School: Sackler School of Medicine – Tel Aviv University
Tel-Aviv, Israel
From: 08/01/1991
To: 05/31/2006
Degree: MD

Internship: N/A

Residency: Winthrop University Hospital
Mineola, NY
From: 07/01/1996
To: 06/30/1999
Specialty: Internal Medicine

Fellowship: Winthrop University Hospital
Mineola, NY
From: 06/01/2003
To: 06/30/2006
Specialty: Pulmonary/Critical Care/Sleep Medicine

Hospital Affiliations/Work History: Memorial Regional Hospital
Hollywood, FL
From: 07/26/2006
To: Present
Specialty: Critical Care Medicine
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Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Kojo Marfo MD

Date of Birth: 03/24/1986

Citizenship: US

Primary Facility: Broward Health North

Other Broward Health Facilities: None

Specialty(ies): Orthopedic Surgery

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Practice Name: Toman Orthopedics and Sports Medicine, PA
Website: http://drtoman.com/about/

Primary Address Information: 7301A West Palmetto Park Road
Suite 100B
Boca Raton, FL 33433
Phone: 561-221-6895
Fax: 561-221-6896
Email: Kaitlyn.Davis@tomanortho.com

ECFMG: N/A

Medical/Professional School: Howard University College Of Medicine
Washington, DC
From: 07/01/2009
To: 06/13/2013
Degree: MD

Internship/Residency: Howard University College Of Medicine
Washington, DC
From: 06/14/2013
To: 06/30/2018
Specialty:

Fellowship: Joint Implant Surgeons, Orthopedics
New Albany, OH
From: 08/01/2018
To: 07/31/2019
Specialty: Joint Implant Surgery

Hospital Affiliations/ Work History: N/A

Board Certification: Board: American Board of Orthopedic Surgery
Specialty: Orthopedic Surgery
Eligibility Date: 06/30/2019
MOC Reverification: N/A
Eligibility Expiration: 06/30/2026

Kojo Marfo, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name:  
Francisco J Molina MD

Date of Birth:  
02/08/1979

Citizenship:  
US

Primary Facility:  
Broward Health Imperial Point

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

Specialty(ies):  
Internal Medicine

Dept. at Primary Facility:  
Medicine

Secondary Facility Depts.:  
Medicine

Practice Name:  
Molina Inpatient Services
Website:  www.molinahealthcare.com

Primary Address Information:  
151 North Nob Hill Road
Suite 306
Plantation, FL 33324
Phone:  786-456-6008
Fax:  305-470-7459
Email:  drmolinamd@gmail.com

ECFMG:  
Number: 0-658-600-4
Date Issued: 10/10/2005

Medical/Professional School:  
Universidad Iberoamericana
Santo Domingo, Dominican Republic
From: 11/18/2001
To: 11/18/2003
Degree: MD

Foreign Training/Research:  
Hospital General de la Salud
Santo Domingo, Dominican Republic
From: 11/19/2003
To: 06/30/2005
Specialty:  Gastroenterology Research Studies

Gap:  
Volunteer in Miami Cardiovascular Center University of Miami
From: 07/01/2005
To: 05/31/2006

Internship:  
Capital Health System-Fuld Campus
Trenton, NJ
From: 06/24/2006
To: 06/30/2008
Specialty: Internal Medicine

Residency:  
University of Miami
Miami, FL
From: 07/01/2008
To: 06/30/2009
Specialty: Internal Medicine

Fellowship:  
N/A

Francisco J Molina, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

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| Palms West Hospital               | Loxahatchee, FL   |
| From:                             | 08/07/2010        |
| To:                               | 06/16/2011        |
| Specialty:                        | Internal Medicine |

| Aventura Hospital and Medical Center | Aventura, FL |
| From:                               | 01/29/2011      |
| To:                                 | Present         |
| Specialty:                          | Internal Medicine |

| Kindred Hospital-Ft Lauderdale     | Fort Lauderdale, FL |
| From:                              | 03/22/2013        |
| To:                                | Present           |
| Specialty:                         | Internal Medicine |

| Broward Health Imperial Point      | Ft Lauderdale, FL |
| From:                              | 08/31/2016        |
| To:                                | Present           |
| Specialty:                         | Internal Medicine |

| Westside Regional Medical Center  | Plantation, FL   |
| From:                             | 12/17/2017       |
| To:                               | Present          |
| Specialty:                        | Internal Medicine |

| Plantation General Hospital       | Plantation, FL   |
| From:                             | 01/23/2018       |
| To:                               | Present          |
| Specialty:                        | Internal Medicine |

| Board Certification:             |
| Board:                           | American Board of Internal Medicine |
| Specialty:                       | Internal Medicine |
| Certification Date:              | 08/20/2009       |
| Certification Expiration:        | 12/31/2019       |

Francisco J Molina, MD
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Marissa F Myers, CRNA

Date of Birth: 05/13/1980
Citizenship: US
Primary Facility: Broward Health North

Other Broward Health Facilities:
None

Specialty: Nurse Anesthetist
Dept. at Primary Facility: Surgery

Secondary Facility Depts.:
None

Physician Sponsorship: Naveen S Gandreti, MD

Practice Name: Anesco, LLC
Website: www.drivinghp.com

Primary Address Information:
3601 West Commercial Boulevard
Suite 4/5
Fort Lauderdale, FL 33309
Phone: 954-485-5666
Fax: 954-484-1651
Email: bmelendez@anesco.net

Professional School:
University of Miami - School of Nursing and Allied Health Studies
Coral Gables, FL
From: 08/27/2008
To: 12/14/2010
Degree: MSN
Major: Anesthesia

Gap:
Preparing for NBCRNA board exam and completing credentialing process
From: 12/15/2010
To: 02/26/2011

Hospital Affiliations/Work History:
Biscayne Anesthesia Group **Unable to Verify - Closed**
Miami, FL
From: 02/27/2011
To: 12/20/2012
Title: Certified Registered Nurse Anesthetist

Palmetto General Hospital
Hialeah, FL
From: 01/24/2013
To: 10/01/2014
Specialty: Certified Registered Nurse Anesthetist

Gap:
Relocating to new city and employment seeking
From: 10/02/2014
To: 02/26/2015

Resolute Anesthesia Group
Boca Raton, FL
From: 02/27/2015
To: Present
Title: Certified Registered Nurse Anesthetist
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Broward Health – Credentialing Abstract – Medical Staff Applicant

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<td>Suite 105</td>
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<tr>
<td></td>
<td>Phone: 561-299-3667</td>
</tr>
<tr>
<td></td>
<td>Fax: 561-299-3670</td>
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### Broward Health – Credentialing Abstract – Medical Staff Applicant

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Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Carlos Ricart MD

Date of Birth: 12/13/1958

Citizenship: US

Primary Facility: Broward Health Imperial Point

Other Broward Health Facilities:
- Broward Health Coral Springs
- Broward Health Medical Center
- Broward Health North

Specialty(ies): Pathology

Dept. at Primary Facility: Pathology

Secondary Facility Depts.:
- Surgery
- Pathology

Practice Name: FirstPath Laboratory Services, LLC
Website: www.firstpathlab.com

Primary Address Information:
3141 West McNab Road
Fort Lauderdale, FL 33069
Phone: 954-977-6977
Fax: 954-977-6922
Email: sfemandez@firstpathlab.com

ECFMG:
Number: 0-355-225-4
Date Issued: 05/31/1985

Medical/Professional School:
Universidad Nacional Pedro Henriquez Urena
Santo Domingo, Dominican Republic
From: 07/01/1978
To: 12/01/1982
Degree: MD

Foreign Hospital Affiliations/Work History:
Social Services Work
Centro Sanitario, Dominican Republic
From: 12/02/1982
To: 09/30/1984
Degree: MD

Gap: Completed a Pathology Externship at Danbury Hospital
Danbury, CT
From: 09/01/1984
To: 06/30/1985

Residency:
Danbury Hospital - Yale Affiliate
Danbury, CT
From: 07/01/1985
To: 06/30/1989
Specialty: Anatomical and Clinical Pathology

Fellowship:
Danbury Hospital - Yale Affiliate
Danbury, CT
From: 07/01/1989
To: 06/30/1990
Specialty: Anatomical and Clinical Pathology

Carlos Ricart, MD
Fellowship:
Thomas Jefferson University Hospital
Philadelphia, PA
From: 07/01/1990
To: 06/30/1991
Specialty: Blood Bank

Rutgers University New Brunswick, NJ
From: 07/01/1991
To: 06/30/1992
Specialty: Hematopathology

Hospital Affiliations/
Work History:
West Jersey Hospital system (Virtua)
Voorhees, NJ
From: 08/01/1992
To: 09/01/1996
Title: Pathologist

Impath Laboratory (unable to verify – records no longer available)
New York, NY
From: 10/28/1996
To: 02/18/1999
Title: Hematopathologist

Robert Wood Johnson - University Hospital/Hamilton
Hamilton, NJ
From: 06/29/1999
To: 11/01/2008
Specialty: Anatomic/Clinical Pathology

Pathmed Associates, LLC (unable to verify – facility closed)
Atlantis, FL
From: 03/01/2008
To: 08/25/2010
Specialty: Anatomic/Clinical Pathology

JFK Medical Center (HCA)
Atlantis, FL
From: 04/24/2008
To: 01/21/2014
Specialty: Anatomic/Clinical Pathology

Palms West Hospital
Loxahatchee, FL
From: 10/14/2009
To: 11/30/2013
Specialty: Anatomic/Clinical Pathology

Palms West Surgery Center
Loxahatchee, FL
From: 10/14/2009
To: 11/30/2013
Specialty: Anatomic/Clinical Pathology

West Palm Hospital HCA
West Palm Beach, FL
From: 01/26/2011
To: 12/31/2013
Specialty: Anatomic/Clinical Pathology

Carlos Ricart, MD
| Hospital Affiliations/ Work History: (cont'd) | Boca Raton Regional Hospital  
Boca Raton, FL  
From: 11/21/2013  
To: 06/27/2014  
Specialty: Pathology  
| Vitro Molecular Laboratory  
Miami, FL  
From: 01/01/2015  
To: 06/28/2019  
Title: Senior hematopathologist  
| Bayside Ambulatory Center  
Miami, FL  
From: 06/14/2016  
To: Present  
Specialty: Anatomic/Clinical Pathology  
| Venture Ambulatory Surgery Center  
North Miami Beach, FL  
From: 06/30/2016  
To: Present  
Specialty: Anatomic/Clinical Pathology  
| North Miami Beach Surgical Center  
North Miami, FL  
From: 07/20/2016  
To: Present  
Specialty: Anatomic/Clinical Pathology  
| Surgical Park Center  
Aventura, FL  
From: 07/22/2016  
To: Present  
Specialty: Anatomic/Clinical Pathology  
| Surgery Center of Aventura  
Aventura, FL  
From: 07/26/2016  
To: Present  
Specialty: Anatomic/Clinical Pathology  
| Miami Lakes Surgery Center  
Miami, FL  
From: 07/27/2016  
To: Present  
Specialty: Anatomic/Clinical Pathology  
| Atlantis Outpatient Center  
Lake Worth, FL  
From: 07/15/2019  
To: Present  
Specialty: Anatomic/Clinical Pathology  

Carlos Ricart, MD
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Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: **Isa Vazquez APRN**

Date of Birth: 11/14/1981

Citizenship: US

Primary Facility: Broward Health North

Other Broward Health Facilities: None

Specialty: Nurse Practitioner

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Physician Sponsorship:
Practice Name: Fort Lauderdale Pain Medicine
Website: www.solutionsforpain.com

Primary Address Information:
1930 NE 47th Street
Suite 300
Fort Lauderdale, FL 33308
Phone: 954-493-5048
Fax: 954-493-6424
Email: mbaracco@ftlpain.com

Professional School:
Chamberlain College
Downers Grove, IL
From: 05/26/2014
To: 06/23/2018
Degree: Master Degree in Nursing
Major: Family Nurse Practitioner

Hospital Affiliations/Work History:
Fort Lauderdale Pain Medicine
Fort Lauderdale, FL
From: 07/01/2018
To: Present
Specialty: Nurse Practitioner

Holy Cross Hospital
Fort Lauderdale, FL
From: 11/19/2018
To: Present
Specialty: Nurse Practitioner

Board Certification:
Board: American Academy of Nurse Practitioners
Specialty: Family Nurse Practitioner (FNP)
Certification Date: 07/20/2018
Certification Expiration: 07/19/2023
Elka Wiley-Mills MD

Date of Birth: 12/20/1975
Citizenship: US, unless visa expiration noted:
Primary Facility: Broward Health North
Other Broward Health Facilities: Broward Health Coral Springs
Specialty(ies): Neurology
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: Medicine
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: ncampo@asrlocums.com

ECFMG: N.A
Medical/Professional School: University of Miami
Coral Gables, FL
From: 08/01/1997
To: 05/10/2003
Degree: Doctor of Medicine

Gap: Studied and Prepared for the USMLE Step 2 examination.
From: 08/01/1997
To: 05/10/2003

Internship: New York Medical College (unable to verify – program closed)
Valhalla, NY
From: 01/01/2004
To: 12/31/2004
Specialty: Internal Medicine

Residency: Jackson Memorial Hospital- Miami University
Miami, FL
From: 07/01/2005
To: 06/30/2008
Specialty: Neurology

Fellowship: Jackson Memorial Hospital- Miami University
Miami, FL
From: 07/01/2008
To: 06/30/2009
Specialty: Vascular Neurology
### Hospital Affiliations/Work History:

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# BROWARD HEALTH NORTH

## MEDICAL STAFF REAPPOINTMENTS

**CREDENTIALS: 9/05/2019  MEDICAL COUNCIL: 9/10/2019**

<table>
<thead>
<tr>
<th>Physician</th>
<th>Department</th>
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<th>Status</th>
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</thead>
<tbody>
<tr>
<td>Michael Arch, MD</td>
<td>Radiology</td>
<td>Radiology</td>
<td>Active-Non-Primary</td>
</tr>
<tr>
<td>Drew Bawcombe, MD</td>
<td>Surgery</td>
<td>Ophthalmology</td>
<td>Active-Primary</td>
</tr>
<tr>
<td>Kevin Boehm, DO</td>
<td>ER</td>
<td>Emergency Medicine</td>
<td>Active-Non-Primary</td>
</tr>
<tr>
<td>Jerry Brooks, MD</td>
<td>ER</td>
<td>Emergency Medicine</td>
<td>Active-Primary</td>
</tr>
<tr>
<td>Michael Gordon, MD</td>
<td>Radiology</td>
<td>Radiology</td>
<td>Active-Non-Primary</td>
</tr>
<tr>
<td>William Jensen, DO</td>
<td>Medicine</td>
<td>Family Medicine</td>
<td>Active-Non-Primary</td>
</tr>
<tr>
<td>Hamed Komaiha, MD</td>
<td>Medicine</td>
<td>Infectious Disease</td>
<td>Active-Primary</td>
</tr>
<tr>
<td>Matthew Moore, MD</td>
<td>Surgery</td>
<td>Neurosurgery</td>
<td>Active-Primary</td>
</tr>
<tr>
<td>Sujai Nath, MD</td>
<td>Medicine</td>
<td>Telemedicine</td>
<td>Affiliate-Primary</td>
</tr>
<tr>
<td>Julia Retureta, MD</td>
<td>ER</td>
<td>Pediatric Emergency Medicine</td>
<td>Courtesy-Non-Primary</td>
</tr>
<tr>
<td>Omid Seylabi, MD</td>
<td>Surgery</td>
<td>Gynecology</td>
<td>Active-Primary</td>
</tr>
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**RECOMMENDED WITH NO CHANGE IN STATUS**

Reappointment Cycle: 9/27/2019 to 8/31/2021

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Anup Gangavalli, MD</td>
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<td>Ortho Spine</td>
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<tr>
<td>Mrinal Garg, MD</td>
<td>Medicine</td>
<td>Gastroenterology</td>
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<td>Robert Norton, MD</td>
<td>Surgery</td>
<td>Ortho Spine</td>
<td>Active-Primary</td>
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<tr>
<td>Catherine Polera, DO</td>
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<td>Emerg Med</td>
<td>Provisional-2-Non-Primary</td>
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<tr>
<td>Fred Reineke, MD</td>
<td>Pathology</td>
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<td>Consulting-Non-Primary</td>
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<tr>
<td>Amin Rmeileh, DO</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Provisional-Primary</td>
</tr>
<tr>
<td>James Ross, MD</td>
<td>Surgery</td>
<td>Orthopaedics</td>
<td>Provisional-Non-Primary</td>
</tr>
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<td>Philip Saville, MD</td>
<td>Surgery</td>
<td>Ortho Spine</td>
<td>Provisional-Primary</td>
</tr>
<tr>
<td>Arthur Sperling, DMD</td>
<td>Surgery</td>
<td>Oral Max</td>
<td>Active-Primary</td>
</tr>
<tr>
<td>Theodore Zaravinos, MD</td>
<td>Medicine</td>
<td>Palliative Care</td>
<td>Provisional-Primary</td>
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</table>
# Allied Health Reappointments

**Credentials:** 9/05/2019  |  **Medical Council:** 9/10/2019

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Sponsor(s)</th>
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</thead>
<tbody>
<tr>
<td>Joy Bouza, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>Dr. Rodolfo Guevara</td>
</tr>
<tr>
<td>Amy Iannello, PA</td>
<td>ER</td>
<td>Physician Assistant</td>
<td>Dr. Evan Boyar, et al.</td>
</tr>
<tr>
<td>Lisa Iannuzzi, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Dr. Naveen Gandreti, et al.</td>
</tr>
<tr>
<td>Robert Lopez, PA</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Drs. Bruce Janke, John Malloy, Steven Naide, Francis Moll, Manish Gupta, Mufaddal Ghadiali, Alexandra Andes, Neil Strauss, CB Singh and Adam Lipman</td>
</tr>
<tr>
<td>Maxo Nzaire, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Dr. Naveen Gandreti, et al.</td>
</tr>
<tr>
<td>Tracey Tordella, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>Dr. Ridwan Lin</td>
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## Not Recommended

<table>
<thead>
<tr>
<th>Name</th>
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# BROWARD HEALTH NORTH

## COMMUNITY HEALTH SERVICES

### MEDICAL STAFF REAPPOINTMENTS

**CREDENTIALS:** 9/05/2019  **MEDICAL COUNCIL:** 9/10/2019

<table>
<thead>
<tr>
<th>Practitioner</th>
<th>Department</th>
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<th>Status</th>
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<tbody>
<tr>
<td>Nadine Louissaint, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>Associate-Non-Primary</td>
</tr>
<tr>
<td>Kristen Smith, MD</td>
<td>Medicine</td>
<td>Family Medicine</td>
<td>Associate-Non-Primary</td>
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<table>
<thead>
<tr>
<th>Physician</th>
<th>Department</th>
<th>Specialty</th>
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<th>Recommended Status</th>
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<tbody>
<tr>
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<th>Physician</th>
<th>Department</th>
<th>Specialty</th>
<th>Reason</th>
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</thead>
<tbody>
<tr>
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SUMMARY OF REQUEST

DATE: September 25, 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 Santorio 09/19/2019 14:12 Eastern Daylight

DATE: 8/16/2019

Jonathan Watkins, CEO

DATE: 9/19/2019 12:11 Eastern Daylight

Andrew Ta, CMO
MEMORANDUM

TO:        Board of Commissioners
FROM:      Jonathan Watkins, CEO
DATE:      September 25, 2019
SUBJECT:   Medical Staff Board Items

The Medical Council at Broward Health Imperial Point, at its monthly meeting on September 12, 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.
## BROWARD HEALTH IMPERIAL POINT
### MEDICAL STAFF CHANGES AND ADDITIONS

<table>
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<tr>
<th></th>
<th>Broward Health Medical Center</th>
<th>Broward Health Imperial Point</th>
<th>Broward Health North</th>
<th>Broward Health Coral Springs</th>
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The following Medical Staff Committees:
CREDENTIALS COMMITTEE: 9/10/2019
MEDICAL COUNCIL: 9/12/2019

Approved the following New Members – Medical Staff:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
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</thead>
<tbody>
<tr>
<td>Coney Bae, MD</td>
<td>Surgery</td>
<td>Bariatric / General Surgery</td>
<td>BHIP</td>
</tr>
<tr>
<td>Andrea Henley-Seymour, MD</td>
<td>Surgery</td>
<td>Pain Management</td>
<td>BHCS</td>
</tr>
<tr>
<td>Frank Hull, MD</td>
<td>Medicine</td>
<td>Pulmonary/ Critical Care</td>
<td>BHMC</td>
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<tr>
<td>Ian Kowalski, DO</td>
<td>Medicine</td>
<td>Palliative Care / Internal Medicine</td>
<td>BHMC</td>
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<tr>
<td>Carlos Ricart, MD</td>
<td>Surgery</td>
<td>Pathology</td>
<td>BHIP</td>
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<tr>
<td>Rebecca Wiesenfeld, MD</td>
<td>Medicine</td>
<td>Emergency Medicine</td>
<td>BHMC</td>
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<tr>
<td>Michael Williams, DO</td>
<td>Medicine</td>
<td>Infectious Disease</td>
<td>BHN</td>
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Approved the following New Members – Allied Health:

<table>
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<tr>
<th>Name</th>
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<th>Privileges</th>
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<th>Primary</th>
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</thead>
<tbody>
<tr>
<td>Alaide Milanes, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Manuel Longo, MD</td>
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Accepted the following Change of Status

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<th>Requested Status</th>
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<tbody>
<tr>
<td>Nathan Mayl, MD</td>
<td>Surgery</td>
<td>Plastic/ Hand Surgery</td>
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Accepted the following Request for Additional Privileges

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<tbody>
<tr>
<td>Mamen Zachariah, MD</td>
<td>Medicine</td>
<td>Cardiovascular Disease</td>
<td>Interventional Cardiology</td>
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<tr>
<td>Zachariah Zachariah, MD</td>
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Accepted the following Change of Primary Facility

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<tbody>
<tr>
<td>David Malkevich, MD</td>
<td>Medicine</td>
<td>Emergency Medicine</td>
<td>BHCS</td>
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Approved the following Medical Staff Reappointments and Status Changes:

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

Reappointment Cycle: 9/25/2019 to 8/31/2021

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<tr>
<th>Physician</th>
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<tbody>
<tr>
<td>Michael Arch, MD</td>
<td>Medicine</td>
<td>Radiology</td>
<td>Active</td>
</tr>
<tr>
<td>Coralee Camargo, MD</td>
<td>Medicine</td>
<td>Family Medicine</td>
<td>Courtesy</td>
</tr>
<tr>
<td>Cesar Carralero, DO</td>
<td>Medicine</td>
<td>Emergency Medicine</td>
<td>Active</td>
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<tr>
<td>Jaime Carrillo, MD</td>
<td>Medicine</td>
<td>Hospital Medicine</td>
<td>Active</td>
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<tr>
<td>Maciej Ferenc, DO</td>
<td>Medicine</td>
<td>Emergency Medicine</td>
<td>Active</td>
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<tr>
<td>Michael Gordon, MD</td>
<td>Medicine</td>
<td>Interventional Radiology/Radiology</td>
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<tr>
<td>William Jensen, DO</td>
<td>Medicine</td>
<td>Family Medicine</td>
<td>Active</td>
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<td>Hamed Komaiba, MD</td>
<td>Medicine</td>
<td>Infectious Disease</td>
<td>Active</td>
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<td>David Malkevich, MD</td>
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<td>Emergency Medicine</td>
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<td>Sandeep Mendiratta, MD</td>
<td>Psychiatry</td>
<td>Psychiatry</td>
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<tr>
<td>Matthew Moore, MD</td>
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<td>Neurosurgery</td>
<td>Active</td>
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<tr>
<td>David Perloff, MD</td>
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<td>Cardiology</td>
<td>Courtesy</td>
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<tr>
<td>Reynald Pouliot, MD</td>
<td>Surgery</td>
<td>Obstetrics/Gynecology</td>
<td>Courtesy</td>
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<tr>
<td>Jean Jacques Rajter, MD</td>
<td>Medicine</td>
<td>Pulmonary/Critical Care</td>
<td>Courtesy</td>
</tr>
<tr>
<td>Fred Reineke, MD</td>
<td>Surgery</td>
<td>Pathology</td>
<td>Active</td>
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<tr>
<td>Omid Seylabi, MD</td>
<td>Surgery</td>
<td>Obstetrics/Gynecology</td>
<td>Active</td>
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<tr>
<td>Brett Staller, MD</td>
<td>Medicine</td>
<td>Radiology</td>
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**RECOMMENDED WITH CHANGE IN STATUS – 2 YEARS**

Reappointment Cycle: 9/25/2019 to 8/31/2021

<table>
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<tr>
<th>Physician</th>
<th>Department</th>
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<tbody>
<tr>
<td>Kevin Boehm, DO</td>
<td>Medicine</td>
<td>Emergency Medicine</td>
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<tr>
<td>Radu Jacob, MD</td>
<td>Medicine</td>
<td>Nephrology</td>
<td>Courtesy</td>
<td>Consulting</td>
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<tr>
<td>Karen Kennedy, DO</td>
<td>Medicine</td>
<td>Palliative Care/Family Medicine</td>
<td>Courtesy</td>
<td>Consulting</td>
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<tr>
<td>Nathan Mayl, MD</td>
<td>Surgery</td>
<td>Plastic/Hand Surgery</td>
<td>Consulting</td>
<td>Affiliate</td>
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<tr>
<td>Courtney McPherson, MD</td>
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<td>Hospital Medicine</td>
<td>Active</td>
<td>Courtesy</td>
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<tr>
<td>Linda Nguyen, MD</td>
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<td>Emergency Medicine</td>
<td>Provisional</td>
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<tr>
<td>Andrew Nolan, MD</td>
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<td>Ophthalmology</td>
<td>Courtesy</td>
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<td>Hina Siddiqui, MD</td>
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<td>Hospital Medicine</td>
<td>Courtesy</td>
<td>Active</td>
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<tr>
<td>Kirin Syed, MD</td>
<td>Surgery</td>
<td>Urology</td>
<td>Provisional II</td>
<td>Courtesy</td>
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**RECOMMENDED WITH CHANGE IN STATUS – 1 YEAR**

Reappointment Cycle: 9/25/2019 to 8/31/2020

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<tbody>
<tr>
<td>Robert Baylis, MD</td>
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<td>Mrinal Garg, MD</td>
<td>Surgery</td>
<td>Gastroenterology</td>
<td>Provisional</td>
<td>Provisional II</td>
</tr>
<tr>
<td>Anthony Panariello, MD</td>
<td>Medicine</td>
<td>Pulmonary Medicine</td>
<td>Provisional</td>
<td>Provisional II</td>
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<tr>
<td>Martin Valdivia-Arenas, MD</td>
<td>Surgery</td>
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Approved the following AHP Reappointments and Status Changes:

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

Reappointment Cycle: 9/25/2019 to 8/31/2021

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Tatyana Gelman, PA-C</td>
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<td>Physician Assistant</td>
<td>Cesar Carralero, DO</td>
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<tr>
<td>Robert Lopez, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Mufaddal Ghadiali, MD; Adam Lipman, MD; Ron Arison, MD; Neil Strauss, DPM;</td>
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<td>Alexandra Andes, MD</td>
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<tr>
<td>Andres Montenegro, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Christopher Brown, MD</td>
</tr>
<tr>
<td>Maxo Nazaire, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Manuel Longo, MD</td>
</tr>
<tr>
<td>Melissa Raspanti, PA-C</td>
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<td>Physician Assistant</td>
<td>Howard Lewkowitz, MD</td>
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<tr>
<td>Samantha Rood, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Ron Arison, MD; Francisco Bermudez, MD; Alexandra Parr, MD</td>
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Accepted the following Resignations – Medical Staff:

<table>
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<th>Name</th>
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<tbody>
<tr>
<td>Mohammad Alian, MD</td>
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<td>Family Medicine</td>
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<td>Failure to pay BHIP Annual Medical Staff Dues</td>
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<tr>
<td>Francisco Belette, MD</td>
<td>Medicine</td>
<td>Hematology</td>
<td>Active</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
</tr>
<tr>
<td>Richard Briestein, DPM</td>
<td>Surgery</td>
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<td>Consulting</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
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<tr>
<td>Mirylsa Colon-Martinez, MD</td>
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<td>Orthopedic Surgery</td>
<td>LOA-2nd</td>
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<tr>
<td>Paula-Ann Francis, MD</td>
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<td>Psychiatry</td>
<td>Courtesy</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
</tr>
<tr>
<td>Vipin Gupta, MD</td>
<td>Medicine</td>
<td>Gastroenterology</td>
<td>Courtesy</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
</tr>
<tr>
<td>Hoke Han, MD</td>
<td>Medicine</td>
<td>Radiation Oncology</td>
<td>Provisional II</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
</tr>
<tr>
<td>Emmanuel Isaac, DO</td>
<td>Medicine</td>
<td>Family Medicine</td>
<td>Provisional II</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
</tr>
<tr>
<td>Basher Lutfi, MD</td>
<td>Medicine</td>
<td>Neurology</td>
<td>Provisional II</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
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<tr>
<td>Ruth Soto Malave, MD</td>
<td>Medicine</td>
<td>Infectious Disease</td>
<td>Active</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
</tr>
<tr>
<td>Rama Vaitla, MD</td>
<td>Medicine</td>
<td>Dermatology</td>
<td>LOA</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
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<tr>
<td>Erol Yoldas, MD</td>
<td>Surgery</td>
<td>Orthopedic Surgery</td>
<td>Affiliate</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
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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>
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<tbody>
<tr>
<td>Natalie Hoover, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>AHP</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
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<tr>
<td>Rebecca Levine, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>AHP</td>
<td>Practice Change</td>
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<tr>
<td>Milton Menco, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>AHP</td>
<td>No longer has sponsor at BHIP – Did not pay dues</td>
</tr>
<tr>
<td>Amanda O’Loughlin, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>AHP</td>
<td>Failure to pay BHIP Annual Medical Staff Dues</td>
</tr>
<tr>
<td>Kathy Zimmer, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>AHP</td>
<td>Practice Change</td>
</tr>
</tbody>
</table>

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

None

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                                      Date: 9/16/2019
Jonathan Watkins, CEO                                                    Date: 9/16/2019
Gino Santorio, President/CEO                                              Date ________
Colaluca, Teresa B

From: Duval, Marie P
Sent: Monday, September 16, 2019 3:54 PM
To: Lukas, Lorie M; Desinor, Carol
Cc: Colaluca, Teresa B
Subject: Broward Health Patient Activity / Case Log Request - James Garner, MD

Importance: High

Good afternoon:

Dr. James Garner is due for reappointment. His name is not reflected at all in Crimson. Please provide patient activity for Dr. James Garner for the timeframe encompassing August 2017 to present for the following facility:

- Broward Health Imperial Point

Thank you.

Have a blessed day. ☺

Marie P. Duval
Credentials Specialist, Credentials & Qualifications
1800 NW 49th Street, Suite 110
Fort Lauderdale, FL 33309
t- 954.473.7305 | f- 954.767.5494
mduval@browardhealth.org

Broward Health
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.
Broward-Health.org
**Broward Health – Credentialing Abstract – Medical Staff Applicant**

**Name:** Coney Bae, MD

**Date of Birth:** 05/26/1984

**Citizenship:** Permanent Resident expiration: 06/04/2028

**Primary Facility:** Broward Health Imperial Point

**Other Broward Health Facilities:** Broward Health Medical Center

**Specialty(ies):** Bariatric Surgery  
General Surgery

**Dept. at Primary Facility:** Surgery

**Secondary Facility Depts.:** Surgery

**Practice Name:** Broward Healthy Physician Group

**Primary Address Information:** 6405 N Federal Highway  
Suite #401  
Fort Lauderdale, FL  
Phone:  
Fax:

**ECFMG:** N/A

**Medical/Professional School:** Columbia College of Physicians and Surgeons  
New York, NY  
From: 08/20/2006  
To: 05/22/2013  
Degree: MD

**Internship:** N/A

**Residency:** North Shore LIJ Health System  
New Hyde Park, NY  
From: 07/01/2013  
To: 06/30/2018  
Specialty: General Surgery

**Fellowship:** Cleveland Clinic Florida  
Weston, FL  
From: 08/01/2018  
To: 07/05/2019  
Specialty: Bariatric and Minimally Invasive Surgery

**Hospital Affiliations/Work History:** None

**Board Certification:**  
Board: American Board of Surgery  
Specialty: Surgery  
Certification Date: 10/01/2018  
MOC Reverification: N/A  
Certification Expiration: 12/31/2019
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Andrea Henley-Seymour, MD

Date of Birth: 11/26/1975

Citizenship: US

Primary Facility: Broward Health Coral Springs

Other Broward Health Facilities:
- Broward Health Imperial Point
- Broward Health Medical Center

Specialty(ies): Pain Management

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: Surgery

Practice Name: Spine and Wellness Center of America

Primary Address Information:
- 21097 NE 27 Court
- Suite 350
- Aventura, FL 33180
- Phone: 305-974-5533
- Fax: 954-367-2846
- Email: Jmartinez@spinewellnessamerica.com

ECFMG: N/A

Medical/Professional School: Temple University School of Medicine
- Philadelphia, PA
- From: 09/02/1997
- To: 05/17/2001
- Degree: MD

Internship:
- Frankford Hospital
- Philadelphia, PA
- From: 06/15/2001
- To: 06/14/2002
- Specialty: Transitional

Residency:
- Temple University Hospital
- Philadelphia, PA
- From: 07/01/2002
- To: 06/30/2005
- Specialty: Anesthesiology

Fellowship:
- Emory University School of Medicine
- Atlanta, GA
- From: 07/18/2005
- To: 07/17/2006
- Specialty: Pain Medicine

Hospital Affiliations/
Work History:
- Emory University Hospital
- Atlanta, GA
- From: 07/27/2006
- To: 11/30/2006
- Specialty: Anesthesiology

Andrea Henley-Seymour, MD
Hospital Affiliations/Work History (continued):

Emory University Hospital
GA
From: 07/24/2006
To: 10/01/2006
Title: Assistant Professor

Emory University Hospital Midtown
Atlanta, GA
From: 08/31/2006
To: 12/28/2006
Specialty: Anesthesiology

Gap:
Maternity Leave
From: 10/01/2006
To: 07/31/2007

Orthopedic Injury Management
St. Petersburg, FL
From: 08/20/2007
To: 01/24/2008
Title: Physician

Pain Relief Centers
St. Petersburg, FL
From: 01/21/2008
To: 04/30/2013
Title: Physician

Gap:
Time off due to opening independent practice
From: 05/01/2013
To: 06/30/2013

Seymour Spine & Rehabilitation, LLC.
Sunrise, FL
From: 07/01/2013
To: Present
Title: Physician

Florida Medical Center
Ft. Lauderdale, FL
From: 11/05/2013
To: Present
Specialty: Pain Management

Spine and Wellness Centers of America
Aventura, FL
From: 02/25/2019
To: Present
Title: Physician

Board Certification:
Board: American Board of Anesthesiology
Specialty: Anesthesiology
Certification Date: 10/05/2007
Certification Expiration: 12/31/2027

Board: American Board of Anesthesiology
Specialty: Pain Medicine
Certification Date: 09/13/2008
Certification Expiration: 12/31/2028
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Frank P Hull MD

Date of Birth: 10/04/1966

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:
- Broward Health Imperial Point
- Broward Health Weston

Specialty(ies):
- Pulmonary Medicine
- Critical Care Medicine

Dept. at Primary Facility: Medicine

Secondary Facility Depts.:
- Medicine

Practice Name: Broward Pulmonary and Sleep Specialists
Website: http://browardsleepdisorders.com/

Primary Address Information:
1625 SE 3rd Avenue
Suite 600
Fort Lauderdale, FL 33316
Phone: 954-522-7226
Fax: 954-522-1840
Email: pulmonary1625@gmail.com

ECFMG:
Number: 0-504-038-1
Date Issued: 09/30/1993

Medical/Professional School: University of Pretoria College of Medicine
Pretoria, South Africa
From: 02/01/1985
To: 11/30/1990
Degree: MD

Foreign Internship:
- Edendale Hospital – King Edward Hospital
- Pretoria, South Africa
From: 01/01/1991
To: 01/31/1992
Specially: Family Medicine

Foreign Residency:
- George Elliot Hospital
- Nuneaton, England
From: 02/01/1992
To: 06/30/1994
Specially: Emergency Medicine

Residency:
- Albert Einstein College of Medicine
- Bronx, New York
From: 07/01/1994
To: 06/30/1997
Specially: Emergency Medicine

Fellowship:
- New York University School of Medicine
- New York, New York
From: 07/01/1997
To: 11/21/2001
Specially: Pulmonary Critical Care/Sleep Medicine

Frank P Hull, MD
**Hospital Affiliations/ Work History:**

New York University School of Medicine  
New York, New York  
From: 01/01/2002  
To: 06/24/2003  
Title: Assistant Professor

Broward Health Medical Center & Chris Evert Children's Hospital  
Fort Lauderdale, FL  
From: 06/25/2003  
To: Present  
Specialty: Pulmonary Medicine

Kindred Hospital-Ft Lauderdale  
Fort Lauderdale, FL  
From: 06/26/2003  
To: Present  
Specialty: Pulmonary Disease

Memorial Hospital Pembroke  
Pembroke Pines, FL  
From: 10/22/2014  
To: Present  
Specialty: Pulmonary Disease

**Board Certification:**

| Board: | American Board of Internal Medicine  
| Specialty: | Pulmonary Disease  
| Certification Date: | 01/01/1999  
| Certification Expiration: | 12/31/2019 |

| Board: | American Board of Internal Medicine  
| Specialty: | Critical Care Medicine  
| Certification Date: | 11/08/2000  
| Certification Expiration: | 12/31/2020 |

| Board: | American Board of Internal Medicine  
| Specialty: | Sleep Medicine  
| Certification Date: | 11/10/2011  
| Certification Expiration: | 12/31/2021 |
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: 954-636-1364
Fax: 954-762-7080
Email: christine@pallmed.com

ECFMG:  

N/A

Medical/Professional School:  

Nova Southeastern College of Osteopathic Medicine
Fort Lauderdale, FL
From: 07/01/2011
To: 05/15/2016
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
Board Certification:  

- **Board:** American Board of Internal Medicine  
- **Specialty:** Internal Medicine  
- **Certification Date:** 08/17/2018  
- **MOC Reverification Date:** 04/01/2020  
- **Certification Expiration:** N/A  

- **Board:** American Board of Internal Medicine  
- **Specialty:** Hospice and Palliative Medicine  
- **Eligibility Date:** 06/30/2019  
- **Eligibility Expiration:** 06/30/2026
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Carlos Ricart MD

Date of Birth: 12/13/1958

Citizenship: US

Primary Facility: Broward Health Imperial Point

Other Broward Health Facilities:
- Broward Health Coral Springs
- Broward Health Medical Center
- Broward Health North

Specialty(ies): Pathology

Dept. at Primary Facility: Pathology

Secondary Facility Depts.:
- Surgery
- Pathology

Practice Name: FirstPath Laboratory Services, LLC
Website: www.firstpathlab.com

Primary Address Information:
3141 West McNab Road
Fort Lauderdale, FL 33069
Phone: 954-977-6977
Fax: 954-977-6922
Email: sfernandez@firstpathlab.com

ECFMG:
Number: 0-355-225-4
Date Issued: 05/31/1985

Medical/Professional School:
Universidad Nacional Pedro Henriquez Urena
Santo Domingo, Dominican Republic
From: 07/01/1978
To: 12/01/1982
Degree: MD

Foreign Hospital Affiliations/Work History:
Social Services Work
Centro Sanitario, Dominican Republic
From: 12/02/1982
To: 08/31/1984
Degree: MD

Gap:
Completed a Pathology Externship at Danbury Hospital
Danbury, CT
From: 09/01/1984
To: 06/30/1985

Residency:
Danbury Hospital - Yale Affiliate
Danbury, CT
From: 07/01/1985
To: 06/30/1989
Specialty: Anatomical and Clinical Pathology

Fellowship:
Danbury Hospital - Yale Affiliate
Danbury, CT
From: 07/01/1989
To: 06/30/1990
Specialty: Anatomical and Clinical Pathology

Carlos Ricart, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Fellowship:

Thomas Jefferson University Hospital
Philadelphia, PA
From: 07/01/1990
To: 06/30/1991
Specialty: Blood Bank

Rutgers University/New Brunswick, NJ
From: 07/01/1991
To: 06/30/1992
Specialty: Hematopathology

Hospital Affiliations/Work History:

West Jersey Hospital system (Virtua)
Voorhees, NJ
From: 08/01/1992
To: 09/01/1996
Title: Pathologist

Impath Laboratory (unable to verify – records no longer available)
New York, NY
From: 10/28/1996
To: 02/18/1999
Title: Hematopathologist

Robert Wood Johnson - University Hospital/Hamilton
Hamilton, NJ
From: 06/29/1999
To: 11/01/2008
Specialty: Anatomic/Clinical Pathology

Pathmed Associates, LLC (unable to verify – facility closed)
Atlantis, FL
From: 03/01/2008
To: 08/25/2010
Specialty: Anatomic/Clinical Pathology

JFK Medical Center (HCA)
Atlantis, FL
From: 04/24/2008
To: 01/21/2014
Specialty: Anatomic/Clinical Pathology

Palms West Hospital
Loxahatchee, FL
From: 10/14/2009
To: 11/30/2013
Specialty: Anatomic/Clinical Pathology

Palms West Surgery Center
Loxahatchee, FL
From: 10/14/2009
To: 11/30/2013
Specialty: Anatomic/Clinical Pathology

West Palm Hospital HCA
West Palm Beach, FL
From: 01/28/2011
To: 12/31/2013
Specialty: Anatomic/Clinical Pathology

Carlos Ricart, MD
<table>
<thead>
<tr>
<th>Hospital Affiliations/Work History: (cont'd)</th>
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<tr>
<td>Boca Raton Regional Hospital</td>
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<tr>
<td>Boca raton, FL</td>
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<tr>
<td>From: 11/21/2013</td>
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<td>To: 06/27/2014</td>
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<td>Vitro Molecular Laboratory</td>
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<td>Miami, FL</td>
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<tr>
<td>From: 01/01/2015</td>
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<td>To: 06/28/2019</td>
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<tr>
<td>Title: Senior hematopathologist</td>
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<td>Bayside Ambulatory Center</td>
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<td>Miami, FL</td>
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<td>From: 06/14/2016</td>
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<td>Specialty: Anatomic/Clinical Pathology</td>
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<td>Venture Ambulatory Surgery Center</td>
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<td>North Miami Beach, FL</td>
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<td>North Miami Beach Surgical Center</td>
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<td>North Miami, FL</td>
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<td>Specialty: Anatomic/Clinical Pathology</td>
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<td>Surgical Park Center</td>
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<td>Surgery Center of Aventura</td>
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<td>Aventura, FL</td>
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<td>To: Present</td>
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<tr>
<td>Miami Lakes Surgery Center</td>
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<td>Miami, FL</td>
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<td>To: Present</td>
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<tr>
<td>Atlantis Outpatient Center</td>
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<td>Lake Worth, FL</td>
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<td>From: 07/15/2019</td>
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<tr>
<td>To: Present</td>
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Carlos Ricart, MD
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<tr>
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<td>Anatomic and Clinical Pathology</td>
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<td>Certification Date:</td>
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<td>MOC Reverification:</td>
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<td>Certification Date:</td>
<td>05/31/1993</td>
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<td>MOC Reverification:</td>
<td>N/A</td>
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<tr>
<td>Certification Expiration:</td>
<td>Lifetime</td>
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</table>
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Rebecca E Wiesenfeld MD

Date of Birth: 03/12/1987
Citizenship: US
Primary Facility: Broward Health Medical Center
Other Broward Health Facilities: Broward Health Coral Springs
                                  Broward Health Imperial Point
Specialty(ies): Emergency Medicine
Dept. at Primary Facility: Emergency Medicine
Secondary Facility Depts.: Medicine
Practice Name: Envision Physician Services
Website: www.envisionhealth.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@envisionhealth.com
ECFMG: N/A
Medical/Professional School: Florida International University
                              Miami, FL
                              From: 08/01/2011
                              To: 05/31/2015
                              Degree: MD
Internship: N/A
Residency: Christiana Care Health Services
           Newark, DE
           From: 07/01/2015
           To: 06/30/2018
           Specialty: Emergency Medicine
Fellowship: N/A
Hospital Affiliations/Work History: EMPro’s
                              Ormond Beach, FL
                              From: 07/01/2018
                              To: Present
                              Specialty: Emergency Medicine
Board Certification:
                              Board: American Board of Emergency Medicine
                              Specialty: Emergency Medicine
                              Certification Date: 06/04/2019
                              MOC Expiration: N/A
                              Certification Expiration: 12/31/2029

Rebecca E Wiesenfeld, 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
From: 08/02/2010
To: 05/18/2014
Degree: DO

Internship/Residency: Mount Sinai Medical Center
From: 07/01/2014
To: 06/30/2017
Specialty: Internal Medicine

Fellowship: Mount Sinai Beth Israel
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

Name: Alaide B Milanes, CRNA

Date of Birth: 12/04/1967

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities:

Broward Health Imperial Point

Specialty: Nurse Anesthetist

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Physician Sponsorship: Longo, Manuel, MD

Practice Name: Anesco, LLC
Website: www.drivinghp.com

Primary Address Information:

3601 West Commercial Boulevard
Suite 4/5
Fort Lauderdale, FL 33309
Phone: 954-485-5666
Fax: 954-484-1651
Email: brossi@drivinghp.com

Professional School:

Hospital De La Concepcion
San German, PR

From: 01/07/2013
To: 12/13/2014
Degree: CRNA
Major: Anesthesia

Gap:
Preparing for CRNA board and privileging process
From: 01/07/2013
To: 12/13/2014

Hospital Affiliations/Work History:

Doctors Hospital
Coral Gables, FL
From: 03/30/2015
To: 12/31/2015
Specialty: CRNA

Broward Health Medical Center
Fort Lauderdale, FL
From: 09/30/2015
To: 03/29/2017
Specialty: CRNA

Broward Health Imperial Point
Fort Lauderdale, FL
From: 04/27/2016
To: 03/29/2017
Specialty: CRNA

South Miami Hospital
South Miami, FL
From: 10/22/2016
To: Present
Specialty: CRNA
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Hospital Affiliations/Work History (continued):

MAHSC at South Miami Hospital
Miami, FL
From: 02/22/2017
To: Present
Specialty: CRNA

West Kendall Baptist Hospital
Kendall, FL
From: 11/17/2019
To: 06/11/2019
Specialty: CRNA

Corpus Christi Medical Center (Vituvian Locum)
Corpus Christi, TX
From: 09/07/2018
To: Present
Specialty: CRNA

Board Certification:

Board: National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA)
Specialty: Certified Registered Nurse Anesthetist (CRNA)
Certification Date: 02/17/2015
Certification Expiration: 07/31/2017
SUMMARY OF REQUEST

DATE: September 25, 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 09/19/2019 14:11 Eastern Daylight

Andrew Ta 09/19/2019 12:12 Eastern Daylight

Chief Medical Officer

Jared Smith 9/16/19

CEO
MEMORANDUM

TO: Board of Commissioners

FROM: Jared Smith, CEO

DATE: September 25, 2019

SUBJECT: Medical Staff Board Items

The Medical Executive Committee at Broward Health Coral Springs, at its monthly meeting on September 10, 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

The following Medical Staff Committees:

CREDENTIALS COMMITTEE: September 5, 2019
MEDICAL EXECUTIVE COMMITTEE: September 10, 2019

Approved MEC New Business:
1. OPPE Report: September 2018 – April 2019
2. OPPE Report: October 2018 – May 2019
3. FPPE Report for Initial Appointments from March 2019 – September 2019

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>Ahmed, Qadeer, MD</td>
<td>Pediatrics</td>
<td>Pediatric Emergency Medicine; Sedation</td>
<td>BHMC</td>
</tr>
<tr>
<td>Boyar, Evan, MD</td>
<td>Medicine</td>
<td>Emergency Medicine; Sedation</td>
<td>BHN</td>
</tr>
<tr>
<td>De La Pena, Maria, MD</td>
<td>Surgery</td>
<td>Pain Management</td>
<td>BHIP</td>
</tr>
<tr>
<td>Gonzalez, Christian, MD</td>
<td>Surgery</td>
<td>Pain Management</td>
<td>BHIP</td>
</tr>
<tr>
<td>Lipman, Adam, MD</td>
<td>Surgery</td>
<td>Orthopaedic Surgery; Orthopaedic Sports Surgery</td>
<td>BHN</td>
</tr>
<tr>
<td>Raguindin, Leah, MD</td>
<td>Pediatrics</td>
<td>Pediatric Emergency Medicine; Sedation</td>
<td>BHMC</td>
</tr>
<tr>
<td>Servetas, Jimmy, DO</td>
<td>Medicine</td>
<td>Emergency Medicine; Sedation</td>
<td>BHCS</td>
</tr>
<tr>
<td>Silva, Carlos, MD</td>
<td>Medicine</td>
<td>Critical Care Medicine; Sedation</td>
<td>BHCS</td>
</tr>
<tr>
<td>Stern, Orli, MD</td>
<td>Medicine</td>
<td>Family Medicine</td>
<td>BHCS</td>
</tr>
<tr>
<td>Taub, Jessica, DPM</td>
<td>Surgery</td>
<td>Podiatry</td>
<td>BHCS</td>
</tr>
<tr>
<td>Wiesenfeld, Rebecca, MD</td>
<td>Medicine</td>
<td>Emergency Medicine; Sedation</td>
<td>BHMC</td>
</tr>
<tr>
<td>Wiley-Mills, Elka, MD</td>
<td>Medicine</td>
<td>Neurology</td>
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<tr>
<td>Zaravinos, John, MD</td>
<td>Medicine</td>
<td>Palliative Care</td>
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Approved the following New Members - Allied Health:

<table>
<thead>
<tr>
<th>Name</th>
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<th>Sponsor</th>
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<tbody>
<tr>
<td>Bunnell, Ashley, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Gladys Cardenas, DO</td>
<td>BHCS</td>
</tr>
<tr>
<td>Lopez, Aida, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner (Hem/Onc)</td>
<td>David Kahn, MD</td>
<td>BHN</td>
</tr>
<tr>
<td>Mount Borroco, Gabrielle, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner (Critical Care)</td>
<td>Isabel Novela, MD</td>
<td>BHCS</td>
</tr>
<tr>
<td>Scott, Shannon, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Gladys Cardenas, DO</td>
<td>BHCS</td>
</tr>
<tr>
<td>Wang, Christina, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant (Hem/Onc)</td>
<td>Sumit Sawhney, MD; Alfred Kalman, MD; Rohan Faria, MD</td>
<td>BHCS</td>
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Accepted the following Addition of Privileges:

<table>
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<tr>
<th>Name</th>
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<th>Requested Privilege(s)</th>
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<tbody>
<tr>
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Accepted the following Status Changes:

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<th>Name</th>
<th>Department</th>
<th>Specialty</th>
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<th>Status Requested</th>
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<tbody>
<tr>
<td>1. Dragovic, Dusan, MD</td>
<td>Medicine</td>
<td>Nephrology</td>
<td>Primary at BHN</td>
<td>Primary at BHCS</td>
</tr>
<tr>
<td>2. Rodriguez Pimentel, Ariel, MD</td>
<td>Surgery</td>
<td>General Surgery</td>
<td>LOA</td>
<td>LOA II</td>
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Approved the following Medical Staff Reappointments and Status Changes:

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

Reappointment Cycle: 09/25/2019 – 09/24/2021

<table>
<thead>
<tr>
<th>Physician</th>
<th>Department</th>
<th>Specialty</th>
<th>Recommended Status</th>
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<tbody>
<tr>
<td>1. Alfonso, Yazmin, MD</td>
<td>Surgery</td>
<td>Anesthesiology</td>
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<tr>
<td>2. Arch, Michael, MD</td>
<td>Medicine</td>
<td>Radiology</td>
<td>Active</td>
</tr>
<tr>
<td>3. Correa, Jennith, DO</td>
<td>Medicine</td>
<td>Emergency Medicine; Sedation</td>
<td>Active</td>
</tr>
<tr>
<td>4. Gordon, Michael, MD</td>
<td>Medicine</td>
<td>Interventional Radiology; Sedation</td>
<td>Active</td>
</tr>
<tr>
<td>5. Jaffe, Debra, MD</td>
<td>Surgery</td>
<td>Pediatric Otolaryngology</td>
<td>Active</td>
</tr>
<tr>
<td>6. Joseph-McBean, Kathleen, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Active</td>
</tr>
<tr>
<td>7. Komaiha, Hamed, MD</td>
<td>Medicine</td>
<td>Infectious Disease</td>
<td>Active</td>
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<tr>
<td>8. Liu, Steven Chung-Pei, DO</td>
<td>Medicine</td>
<td>Emergency Medicine; Sedation</td>
<td>Active</td>
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<tr>
<td>9. MacGill, Alan, DPM</td>
<td>Surgery</td>
<td>Podiatry (Foot and Ankle Surgery)</td>
<td>Active</td>
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<tr>
<td>10. Machado, Jacqueline, MD</td>
<td>Pediatrics</td>
<td>Pediatric Critical Care</td>
<td>Courtesy</td>
</tr>
<tr>
<td>11. Magaletti, Francine, MD</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Courtesy</td>
</tr>
<tr>
<td>12. Mann, Ajaib, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Courtesy</td>
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<tr>
<td>13. Markley, Michele, MD</td>
<td>Surgery</td>
<td>Pediatric Surgery</td>
<td>Active</td>
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<tr>
<td>14. McPherson, Courtney, MD</td>
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<td>Internal Medicine</td>
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<td>15. Reineke, Fred, MD</td>
<td>Surgery</td>
<td>Pathology</td>
<td>Active</td>
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<tr>
<td>16. Rosen, Pamela, MD</td>
<td>Surgery</td>
<td>Plastic Surgery</td>
<td>Consulting</td>
</tr>
<tr>
<td>17. Rubin, Justin, DO</td>
<td>Medicine</td>
<td>Dermatology</td>
<td>Consulting</td>
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<tr>
<td>18. Schneider, Ricky, MD</td>
<td>Medicine</td>
<td>Cardiovascular Disease</td>
<td>Active</td>
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<tr>
<td>19. Siddiqui, Hina, DO</td>
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<tr>
<td>20. Staller, Brett, MD</td>
<td>Medicine</td>
<td>Radiology; Sedation</td>
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</table>

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

Reappointment Cycle: 09/25/2019 – 09/24/2021

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</thead>
<tbody>
<tr>
<td>1. Boehm, Kevin, DO</td>
<td>Medicine</td>
<td>Emergency Medicine; Sedation</td>
<td>Provisional II</td>
<td>Active</td>
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<tr>
<td>2. Fernandez-Bravo, Albert, MD</td>
<td>Medicine</td>
<td>Gastroenterology</td>
<td>Courtesy</td>
<td>Consulting</td>
</tr>
<tr>
<td>3. Foramiglio, Marco, MD</td>
<td>Surgery</td>
<td>Anesthesiology</td>
<td>Provisional II</td>
<td>Active</td>
</tr>
<tr>
<td>4. Harrison, David, MD</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Courtesy</td>
<td>Active</td>
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<tr>
<td>5. Kennedy, Karen, DO</td>
<td>Medicine</td>
<td>Family Medicine; Palliative Care</td>
<td>Courtesy</td>
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<tr>
<td>6. Malkевич, David, MD</td>
<td>Medicine</td>
<td>Emergency Medicine; Sedation</td>
<td>Active</td>
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<tr>
<td>7. Moore, Matthew, MD</td>
<td>Surgery</td>
<td>Neurosurgery</td>
<td>Active</td>
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<tr>
<td>8. Norris, Shawn, DPM</td>
<td>Surgery</td>
<td>Podiatry</td>
<td>Provisional II</td>
<td>Consulting</td>
</tr>
<tr>
<td>9. Seth, Neelam, MD</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Courtesy</td>
<td>Affiliate</td>
</tr>
<tr>
<td>10. Seylabil, Omid, MD</td>
<td>OBGYN</td>
<td>Obstetrics / Gynecology</td>
<td>LOA</td>
<td>Active</td>
</tr>
<tr>
<td>11. Sinclair, Elysee, MD</td>
<td>Medicine</td>
<td>Allergy / Immunology</td>
<td>Courtesy</td>
<td>Consulting</td>
</tr>
<tr>
<td>12. Tanner, Donald, DPM</td>
<td>Surgery</td>
<td>Podiatry</td>
<td>Courtesy</td>
<td>Consulting</td>
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RECOMMENDED WITH CHANGE IN STATUS – 1 YEAR
Reappointment Cycle: 09/25/2019 – 09/24/2020

<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>
<td>Capote, Jerry, MD</td>
<td>Medicine</td>
<td>Pulmonary Medicine</td>
<td>Provisional</td>
<td>Provisional II</td>
</tr>
<tr>
<td>Novara, Vincenzo, MD</td>
<td>Medicine</td>
<td>Pulmonary Critical Care</td>
<td>Provisional</td>
<td>Provisional II</td>
</tr>
<tr>
<td>Panariello, Anthony, MD</td>
<td>Medicine</td>
<td>Pulmonary Medicine</td>
<td>Provisional</td>
<td>Provisional II</td>
</tr>
<tr>
<td>Retureta, Julia, MD</td>
<td>Pediatrics</td>
<td>Pediatrics, Pediatric Emergency</td>
<td>Provisional</td>
<td>Provisional II</td>
</tr>
<tr>
<td>Valdivia Arenas, Martin, MD</td>
<td>Medicine</td>
<td>Pulmonary Critical Care</td>
<td>Provisional</td>
<td>Provisional II</td>
</tr>
</tbody>
</table>

Approved the following AHP Reappointments and Status Changes:

AHP RECOMMENDED WITH NO CHANGE IN STATUS – 2 YEARS
Reappointment Cycle: 09/25/2019 – 09/24/2021

<table>
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<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Sponsor(s)</th>
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<tbody>
<tr>
<td>Abraham, Jamellah, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant (Pulmonary Disease)</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panariello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
</tr>
<tr>
<td>Bermudez Rodriguez, Osvaldo, APRN</td>
<td>OBGYN</td>
<td>Nurse Practitioner (OBGYN)</td>
<td>Jose Rivas, MD</td>
</tr>
<tr>
<td>Fetting, Danielle, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant (Pulmonary Disease)</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panariello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
</tr>
<tr>
<td>Hackett, Kaitlin, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner (Pulmonary Disease)</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panariello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
</tr>
<tr>
<td>Iannello, Amy, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant (Emergency Medicine)</td>
<td>Gary Lai, DO; Nirit Swerdloff, MD</td>
</tr>
<tr>
<td>Lopez, Robert, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant (Ortho)</td>
<td>Adam Lipman, MD</td>
</tr>
<tr>
<td>Lyon, Devin, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant (Pulmonary Disease)</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panariello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
</tr>
<tr>
<td>Manresa, Kathryn, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant (Emergency Medicine)</td>
<td>Gary Lai, DO</td>
</tr>
<tr>
<td>Mingo, Cheryl, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Gladys Cardenas, DO</td>
</tr>
<tr>
<td>Montenegro, Andres, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant (Ortho)</td>
<td>Roy Cardoso, MD</td>
</tr>
<tr>
<td>Nazaire, Maxo, CRNA</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>Gladys Cardenas, DO</td>
</tr>
<tr>
<td>O’Neill, Michaela, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant (Pulmonary Disease)</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panariello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
</tr>
<tr>
<td>Reyes, Irish, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant (Pulmonary Disease)</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panariello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
</tr>
<tr>
<td>Ryan, Cynthia, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner (Cardio)</td>
<td>Aslam Khan, MD</td>
</tr>
<tr>
<td>Suri, Marilyn, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant (Pulmonary Disease)</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panariello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
</tr>
<tr>
<td>Zeiger-Rands, Marin, CNM</td>
<td>OBGYN</td>
<td>Nurse Midwife</td>
<td>Nisseth Urribarri, MD</td>
</tr>
<tr>
<td>Zoghi, Saloumeh, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant (Pulmonary Disease)</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panariello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
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</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>
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<tbody>
<tr>
<td>1. Dala, Raymund, MD</td>
<td>Surgery</td>
<td>Pathology</td>
<td>Active</td>
<td>Voluntary Resignation (practice change)</td>
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<tr>
<td>2. Dharmappa, Kabinamane, MD</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Courtesy</td>
<td>Voluntary Resignation (practice change)</td>
</tr>
<tr>
<td>3. Han, Hoke, MD</td>
<td>Medicine</td>
<td>Radiation Oncology</td>
<td>Provisional II</td>
<td>Voluntary Resignation (practice change)</td>
</tr>
<tr>
<td>4. LeVitre, Jason, DPM</td>
<td>Surgery</td>
<td>Podiatry</td>
<td>Provisional II</td>
<td>Voluntary Resignation (not enough cases)</td>
</tr>
<tr>
<td>5. Robinson, Keith, MD</td>
<td>Medicine</td>
<td>Pulmonary Medicine</td>
<td>Active</td>
<td>Failure to Reapply</td>
</tr>
<tr>
<td>6. Rodriguez, Natalia, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Active</td>
<td>Voluntary Resignation (practice change)</td>
</tr>
<tr>
<td>7. Rivas-Orozco, Vicky, MD</td>
<td>Medicine</td>
<td>Family Medicine</td>
<td>Courtesy</td>
<td>Voluntary Resignation (practice change)</td>
</tr>
<tr>
<td>8. Sudarsky, Laura, MD</td>
<td>Surgery</td>
<td>Plastic Surgery</td>
<td>Courtesy</td>
<td>Voluntary Resignation (contract change)</td>
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Accepted the following Resignations – Allied Health Professional:

<table>
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<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Sponsor(s)</th>
<th>Reason</th>
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<tbody>
<tr>
<td>1. Barfield, Latisha, CNM</td>
<td>OBGYN</td>
<td>Nurse Midwife</td>
<td>Jose Terrazas, MD; Bruce Zafran, MD; Terry-Ann Dawes-James, MD; Hala Bunni, MD; Charlene Elyton, MD; Tim Puckett, MD; Sandra Edmee, MD</td>
<td>Voluntary Resignation (practice employment)</td>
</tr>
<tr>
<td>2. Crawford, Charley, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>Sonia Kailrao, MD</td>
<td>Voluntary Resignation (relocation)</td>
</tr>
<tr>
<td>3. Flores, Monica, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panarriello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
<td>Voluntary Resignation (no longer with practice)</td>
</tr>
<tr>
<td>4. LaPorta, Katherine, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panarriello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
<td>Voluntary Resignation (no longer with practice)</td>
</tr>
<tr>
<td>5. McLaughlin, Rebecca, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panarriello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
<td>Voluntary Resignation (no longer with practice)</td>
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<tr>
<td>6. Michaels, Amy, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>Vincenzo Novara, MD; Martin Valdivia Arenas, MD; Anthony Panarriello, MD; Jerry Capote, MD; Marcus Santana, MD</td>
<td>Voluntary Resignation (no longer with practice)</td>
</tr>
<tr>
<td>7. Monden, Aleia, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>None</td>
<td>Voluntary Resignation (no sponsor and no current affiliation)</td>
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<tr>
<td>8. Perez Torres, Maricel, APRN</td>
<td>OBGYN</td>
<td>Nurse Midwife</td>
<td>Jose Terrazas, MD; Bruce Zafran, MD; Terry-Ann Dawes-James, MD; Hala Bunni, MD; Charlene Elyton, MD; Tim Puckett, MD; Sandra Edmee, MD</td>
<td>Voluntary Resignation (no longer with practice)</td>
</tr>
<tr>
<td>9. Zimmer, Kathy, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>Richard Berkowitz, MD; Bruce Janke, MD; Erol Yoldas, MD</td>
<td>Voluntary Resignation (contract change)</td>
</tr>
<tr>
<td>Name</td>
<td>Department</td>
<td>Specialty</td>
<td>Add/Delete Sponsor</td>
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<table>
<thead>
<tr>
<th>Chief of Staff:</th>
<th>Date:</th>
<th>9/16/2019</th>
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<th>BHCS/CEO:</th>
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<th>President, CEO:</th>
<th>Date:</th>
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<tr>
<td>Gino Santorio 09/19/2019 14:11 Eastern Daylig</td>
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</tbody>
</table>
Name: **Qadeer Ahmed, MD**

Date of Birth: 02/24/1970

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.: Pediatrics

Practice Name: TIVA Healthcare

Primary Address Information:

**7700 West Sunrise Blvd**
**Plantation, FL 33322**
Phone: 954-939-7009
Fax: 954-616-3696
Email: Jiliean.McEwan@tivahealthcare.com

ECFMG:

Number: 0-491-231-7
Date Issued: 10/18/1996

Medical/Professional School:

**Dow Medical College**
Karachi, Pakistan,
From: 08/01/1988
To: 06/30/1994
Degree: M.B.B.S

Foreign Internship:

**Civil Hospital**
Karachi, Pakistan,
From: 07/01/1994
To: 06/30/1995
Specialty: Transitional

Foreign Residency:

**Aga Khan University**
Karachi, Pakistan,
From: 06/01/1996
To: 10/31/2002
Specialty: Pediatrics

Foreign Affiliation:

**Aga Khan University Hospital**
Karachi, Pakistan,
From: 11/01/2002
To: 05/31/2005
Title: Peds Supervisor, Dept of Emergency Medicine

Aga Khan University
Karachi, Pakistan,
From: 06/01/2005
To: 10/31/2005
Title: Instructor, Dept of Pediatrics

Qadeer Ahmed, MD
## Fellowship:

<table>
<thead>
<tr>
<th>University at Buffalo</th>
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<tr>
<td>From: 11/01/2005</td>
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<td>Specialty:</td>
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## Residency:

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<tr>
<td>From: 08/01/2008</td>
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## Hospital Affiliations /
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## Fellowship:

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## Hospital Affiliations /
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<td>From: 11/07/2018</td>
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<tr>
<td>Title: Medical Director</td>
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## Board Certification:

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## Qadeer Ahmed, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Evan L Boyar MD

Date of Birth: 12/17/1973

Citizenship: US

Primary Facility: Broward Health North

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

Specialty(ies): Emergency Medicine

Dept. at Primary Facility: Emergency Medicine

Secondary Facility Depts.:
- Medicine
- Emergency Medicine

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

Primary Address Information:
Broward Health North - Emergency Department
201 E. Sample Road
Deerfield Beach, FL 33064
Phone: 954-786-6800
Fax: 954-786-6719
Email: Kim.Durcan@EnvisionHealth.com

ECFMG:
Number: 0-613-455-5
Date issued: 06/07/2002

Medical/Professional School: University College of Dublin
Dublin, Ireland
From: 07/01/1998
To: 06/01/2002
Degree: MD

Internship: N/A

Residency:
- Henry Ford Hospital
  - Detroit, MI
  - From: 07/01/2002
  - To: 06/01/2005

Fellowship: N/A

Hospital Affiliations/Work History:
- Henry Ford Hospital
  - Detroit, MI
  - From: 07/19/2005
  - To: 07/01/2008
  - Specialty: Emergency Medicine

- Henry Ford Macomb Hospital
  - Warren, MI
  - From: 09/07/2005
  - To: 12/31/2007
  - Specialty: Emergency Medicine

Evan L Boyar, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Lakeland Regional Medical Center
Lakeland, FL
From: 04/24/2006
To: 01/25/2012
Specialty: Emergency Medicine

Broward Health North
Deerfield Beach, FL
From: 04/28/2010
To: Present
Specialty: Emergency Medicine

Board Certification:
Board: American Board of Emergency Medicine
Specialty: Emergency Medicine
Certification Date: 06/14/2006
Certification Expiration: 12/31/2026

Evan L Boyar, MD
Name: Maria De La Pena, MD

Date of Birth: 08/07/1981

Citizenship: US

Primary Facility: Broward Health Imperial Point

Secondary Facility Depts.: None

Practice Name: Spine and Wellness Center of America

Primary Address Information:
21087 NE 27 Court
Suite 350
Aventura, FL 33180
Phone: 305-974-5533
Fax: 954-367-2846
Email: crosado@aswjc.com

ECFMG:
Number: 06956504
Date Issued: 02/02/2007

Medical/Professional School:
Universidad Del Norte Medical School
Barranquilla, Colombia
From: 01/01/1998
To: 12/19/2003
Degree: MD

Gap:
Clinica de Fracturas
Barranquilla, Colombia
From: 01/01/2004
To: 05/31/2005
Title: ER Physician/ Surgical Assist

Worked as general physician in Colombia
From: 06/01/2005
To: 06/30/2006

Research Associate:
University of Miami Jackson Memorial Hospital
Miami, FL
From: 07/01/2005
To: 06/30/2008
Specialty: Clinical Clerkship Multiple Specialties

Internship:
University of Miami Jackson Memorial Hospital
Miami, FL
From: 06/24/2008
To: 06/23/2009
Specialty: General Surgery
Residency: University of Miami School of Medicine
Miami, FL
From: 07/01/2009
To: 06/30/2012
Specialty: Anesthesiology

Fellowship: Beth Israel Deaconess Medical Center
Boston, MA
From: 07/01/2012
To: 06/30/2013
Specialty: Pain Medicine

Hospital Affiliations/
Work History:
Lee Memorial Hospital
Fort Myers, FL
From: 08/22/2013
To: 05/15/2015
Specialty: Anesthesiology

Plantation General Hospital (HCA)
Plantation, FL
From: 06/15/2016
To: Present
Specialty: Anesthesiology / Pain Medicine

Aventura Hospital
Aventura, FL
From: 06/16/2016
To: Present
Specialty: Anesthesiology / Pain Medicine

Jackson Memorial Hospital
Miami, FL
From: 06/29/2015
To: 10/18/2017
Specialty: Anesthesiology

Westside Regional Medical Center (HCA)
Plantation, FL
From: 09/01/2016
To: Present
Specialty: Anesthesiology / Pain Medicine

Broward Health Imperial Point
Fort Lauderdale, FL
From: 04/19/2017
To: Present
Specialty: Pain Medicine

Broward Health Medical Center
Fort Lauderdale, FL
From: 05/28/2017
To: Present
Specialty: Pain Medicine

North Miami Beach Surgical Center
Miami, FL
From: 10/16/2017
To: 10/17/2018
Specialty: Anesthesiology / Pain Medicine
## Hospital Affiliations / Work History (continued):

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<th>Institution</th>
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<td>Aventura, FL</td>
<td>10/17/2017</td>
<td>10/08/2018</td>
<td>Anesthesiology / Pain Medicine</td>
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<td>JFK Medical Center</td>
<td>Atlantis, FL</td>
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## Board Certification:

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<td>09/30/2014</td>
<td>12/31/2024</td>
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Maria De La Pena, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Christian Gonzalez, MD

Date of Birth: 08/20/1976

Citizenship: US

Primary Facility: Broward Health Imperial Point

Other Broward Health Facilities:
- Broward Health Medical Center
- Broward Health Coral Springs
- Broward Health North

Specialty: Pain Management

Dept. at Primary Facility: Surgery

Secondary Facility Depts.:
- Surgery

Practice Name: Spine and Wellness Center of America

Primary Address Information:
21097 NE 27 Court
Suite 350
Aventura, FL 33180
Phone: 305-907-7414
Fax: 954-367-2846
Email: crosado@asjwc.com

ECFMG: N/A

Medical/Professional School:
- Ponce School of Medicine
  Puerto Rico,
  From: 07/10/1998
  To: 05/30/2002
  Degree: MD

Internship: N/A

Residency:
- Baylor College of Medicine
  Houston, TX
  From: 07/01/2002
  To: 06/30/2006
  Specialty: Anesthesiology

Fellowship:
- Massachusetts General Hospital
  Boston, MA
  From: 07/01/2006
  To: 09/30/2007
  Specialty: Pain Medicine

Hospital Affiliations/Work History:
- University of Massachusetts Medical School
  Boston, MA
  From: 07/01/2007
  To: 10/30/2010
  Title: Physician/Professor Department of Anesthesiology

- UM/Miller School of Medicine
  Miami, FL
  From: 11/22/2010
  To: 04/02/2011
  Title: Professor Department of Anesthesiology

Christian Gonzalez, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Anne Bates Leach Eye Hospital
Miami, FL
From: 11/05/2010
To: 04/01/2011
Specialty: Pain Medicine/Anesthesiology

University of Miami Sylvester Cancer Hospital
Miami, FL
From: 11/05/2010
To: 04/01/2011
Specialty: Pain Medicine/Anesthesiology

University of Miami Medical Group
Coral Gables, FL
From: 11/05/2010
To: 04/01/2011
Specialty: Pain Medicine/Anesthesiology

University of Miami Hospital
Miami, FL
From: 11/24/2010
To: 04/01/2011
Specialty: Pain Medicine/Anesthesiology

UM Miller School of Medicine
From: 10/01/2010
To: 07/12/2011
Specialty: Professor Department of Anesthesiology

Aventura Hospital
Aventura, FL
From: 07/12/2011
To: Present
Specialty: Pain Medicine/Anesthesiology

Plantation General Hospital – Mercy Hospital (HCA)
Plantation, FL
From: 10/17/2012
To: Present
Specialty: Pain Medicine/Anesthesiology

Surgical Park Center
Miami, FL
From: 04/24/2013
To: 04/09/2014
Specialty: Pain Medicine/Anesthesiology

Miami Lakes Surgery Center
Miami, FL
From: 06/05/2013
To: 04/29/2014
Specialty: Pain Medicine/Anesthesiology

Doctors Hospital
Coral Gables, FL
From: 12/04/2014
To: Present
Specialty: Pain Medicine

Christian Gonzalez, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Kendall Regional Medical Center (HCA)
Miami, FL
From: 02/03/2016
To: Present
Specialty: Pain Medicine/ Anesthesiology

Surgery Center of Aventura
Aventura, FL
From: 04/15/2013
To: Present
Specialty: Pain Medicine/ Anesthesiology

Mount Sinai Medical Center
Miami Beach, FL
From: 06/16/2016
To: Present
Specialty: Pain Medicine

Palm West Hospital
Loxahatchee, FL
From: 09/15/2016
To: Present
Specialty: Pain Medicine/ Anesthesiology

Westside Regional Medical Center
Plantation, FL
From: 10/05/2016
To: Present
Specialty: Pain Medicine/ Anesthesiology

Broward Health Imperial Point
Fort Lauderdale, FL
From: 10/26/2016
To: Present
Specialty: Pain Medicine

North Miami Beach Surgical Center
North Miami Beach, FL
From: 01/18/2017
To: 01/17/2018
Specialty: Pain Medicine/ Anesthesiology

JFK Medical Center
Atlantis, FL
From: 01/24/2017
To: Present
Specialty: Pain Medicine/ Anesthesiology

Palms West Surgery Center
Loxahatchee, FL
From: 04/10/2017
To: 04/09/2018
Specialty: Pain Medicine/ Anesthesiology

North County Suricenter
Palm Beach County, FL
From: 04/24/2017
To: 04/23/2018
Specialty: Pain Medicine/ Anesthesiology
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<td>Broward Health Medical Center &amp; Salah Foundation Children's Hospital</td>
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**Board Certification:**

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</table>
Adam J Lipman, MD

**Name:**

**Date of Birth:** 11/03/1983

**Citizenship:** US

**Primary Facility:** Broward Health North

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

**Specialty(ies):**
- Orthopaedic Surgery
- Orthopaedic Sports Medicine

**Dept. at Primary Facility:** Surgery

**Secondary Facility Depts.:**
- Surgery

**Practice Name:**

**Primary Address Information:**
- 4800 North Federal Highway
  
  Third Floor
  
  Fort Lauderdale, FL 33308
  
  Phone: 954-491-7758
  
  Fax: 954-958-9227
  
  Email: drcno954@aol.com

**Medical/Professional School:**

- Jefferson Medical College
  
  Philadelphia, PA
  
  From: 08/17/2005
  
  To: 05/29/2009
  
  Degree: MD

**Residency:**

- NYU and Hospital for Joint Diseases
  
  New York, NY
  
  From: 07/01/2009
  
  To: 09/30/2014
  
  Specialty: Orthopaedic Surgery

**Fellowship:**

- Aria Health / 3B Orthopedic Institute
  
  Philadelphia, PA
  
  From: 10/01/2014
  
  To: 09/30/2015
  
  Specialty: Orthopaedic Sports Medicine

**Hospital Affiliations/Work History:**

- Broward Health Imperial Point
  
  Fort Lauderdale, FL
  
  From: 11/10/2015
  
  To: Present
  
  Specialty: Orthopaedic Surgery

- Holy Cross Hospital
  
  Fort Lauderdale, FL
  
  From: 11/16/2015
  
  To: Present
  
  Specialty: Orthopaedic Surgery
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Adam J Lipman, MD
Leah F Raguindin, MD

Date of Birth: 08/21/1964
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.: Pediatrics
Practice Name: TIVA Healthcare
Primary Address Information: 7700 West Sunrise Blvd
Plantation, FL 33322
Phone: 954-939-7009
Fax: 954-616-3696
Email: Jlleean.McEwan@tivahealthcare.com
ECFMG: Number: 0-418-199-8
Date Issued: 10/06/1989
Medical/Professional School: St. Georges University School of Medicine Grenada
Grenada,
From: 08/01/1985
To: 06/30/1989
Degree: MD
Internship: N/A
Residency: New Jersey Medical School
Newark, NJ
From: 07/01/1989
To: 06/30/1992
Specialty: Pediatrics
Hospital Affiliations/Work History: Children's Hospital of New Jersey **Unable to Verify – Records Unavailable**
Newark, NJ
From: 07/01/1992
To: 06/30/1993
Specialty: Pediatrics
Fellowship: New Jersey Medical School
Newark, NJ
From: 07/01/1993
To: 06/30/1995
Specialty: Peds Emergency Medicine
Hospital Affiliations/Work History: UMDNJ Medical Center **Unable to Verify – No Record of Employment**
Newark, NJ
From: 07/01/1995
To: 06/30/1997
Specialty: Assistant Clinical Professor

Leah F Raguindin, MD
<table>
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<td>Hackensack Meridian Health</td>
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<td>Hackensack, NJ</td>
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<td>From:</td>
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<td>To:</td>
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<tr>
<td>Specialty:</td>
<td>Pediatrics/Emergency</td>
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| Board Certification:              | American Board of Pediatrics               |
|                                    | Pediatric Emergency Medicine               |
| Certification Date:               | 11/12/1996                                 |
| MOC Reverification Date:          | 02/15/2020                                 |
| Certification Expiration:         | N/A                                        |

Leah F. Raguindin, MD
Name: Jimmy Servetas DO

Date of Birth: 07/28/1981

Citizenship: US

Primary Facility: Broward Health Coral Springs

Other Broward Health Facilities: None

Specialty(ies): Emergency Medicine

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: None

Practice Name: Envision Physician Services
Website: https://www.evhc.net/

Primary Address Information: Emergency Department
3000 Coral Hills Drive
Coral Springs, FL 33065
Phone: 954-344-3100
Fax: 954-344-3389
Email: Kim.Durcan@envisionhealth.com

ECFMG: N/A

Medical/Professional School: Lake Erie College of Osteopathic Medicine
Erie, PA
From: 07/01/2003
To: 06/30/2007
Degree: DO

Internship/Residency: St. John's Westshore Hospital
Westlake, OH
From: 07/01/2007
To: 06/30/2011
Specialty: MD

Fellowship: N/A

Gap: Transitioning from Ohio to Florida, while also applying for hospital privileges.
From: 07/01/2011
To: 10/03/2011

Hospital Affiliations/Work History:

Northshore Medical Center
Miami, FL
From: 10/04/2011
To: 07/29/2014
Specialty: Emergency Medicine

Aventura Hospital and Medical Center (HCA)
Aventura, FL
From: 07/05/2013
To: 05/16/2019
Specialty: Emergency Medicine

Jimmy Servetas, DO
Broward Health – Credentialing Abstract – Medical Staff Applicant

Tampa Community Hospital (HCA)
Tampa, FL
From: 06/18/2014
To: 04/30/2018
Specialty: Emergency Medicine

Westside Regional Medical Center (HCA)
Plantation, FL
From: 10/05/2017
To: Present
Specialty: Emergency Medicine

University Hospital and Medical Center (HCA)
Tamarac, FL
From: 05/23/2019
To: Present
Specialty: Emergency Medicine

Board Certification:
Board: American Osteopathic Board of Emergency Medicine
Specialty: Emergency Medicine
Certification Date: 05/07/2015
MOC Reverification: N/A
Certification Expiration: 12/31/2025

Jimmy Servetas, DO
**Broward Health – Credentialing Abstract – Medical Staff Applicant**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Carlos H Silva MD</th>
</tr>
</thead>
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<tr>
<td>Date of Birth:</td>
<td>07/06/1978</td>
</tr>
<tr>
<td>Citizenship:</td>
<td>US</td>
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<td>Primary Facility:</td>
<td>Broward Health Coral Springs</td>
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<tr>
<td>Specialty(ies):</td>
<td>Critical Care Medicine, Internal Medicine</td>
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<tr>
<td>Dept. at Primary Facility:</td>
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<td>Secondary Facility Depts.:</td>
<td>None</td>
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<tr>
<td>Practice Name:</td>
<td>NuView Telehealth LLC</td>
</tr>
<tr>
<td>Primary Address Information:</td>
<td>1825 NW Corporate Boulevard, Suite 105, Boca Raton, FL 33431</td>
</tr>
<tr>
<td></td>
<td>Phone: 561-299-3667</td>
</tr>
<tr>
<td></td>
<td>Fax: 561-299-3670</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:trouseau@nuviewhealth.com">trouseau@nuviewhealth.com</a></td>
</tr>
<tr>
<td>ECFMG:</td>
<td>Number: 07682024 Date Issued: 10/14/2010</td>
</tr>
<tr>
<td>Medical/Professional School:</td>
<td>Universidad Iberoamericana, Santo Domingo,</td>
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<tr>
<td></td>
<td>From: 09/01/2005 To: 09/04/2009 Degree: MD</td>
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<tr>
<td>Gap:</td>
<td>Studied and Prepared for USMLE From: 09/05/2009 To: 01/30/2011</td>
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<td>Residency:</td>
<td>University of Miami Miller School of Medicine Miami, FL From: 01/31/2011 To: 01/12/2014 Specialty: Internal Medicine</td>
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<tr>
<td>Military Service:</td>
<td>United States Army Orlando, FL From: 01/15/2014 To: Present Specialty: Medical Review Officer</td>
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<tr>
<td>Fellowship:</td>
<td>Orlando Regional Medical Center Orlando, FL From: 07/01/2014 To: 06/30/2016 Specialty: Critical Care Medicine</td>
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Carlos H Silva, MD
Hospital Affiliations/Work History:

Capital Regional Medical Center (HCA)
Tallahassee, FL
From: 09/27/2016
To: Present
Specialty: Critical Care / Internal Medicine

North Florida Medical Center (HCA)
Gainesville, FL
From: 10/24/2016
To: Present
Specialty: Critical Care / Internal Medicine

Aventura Hospital
Aventura, FL
From: 11/03/2016
To: Present
Specialty: Critical Care / Internal Medicine

Northwest Medical Center (HCA)
Margate, FL
From: 12/13/2016
To: Present
Specialty: Critical Care / Internal Medicine

Oak Hill Hospital (HCA)
Spring Hill, FL
From: 04/20/2017
To: Present
Specialty: Critical Care / Internal Medicine

JFK Medical Center (HCA)
Atlantis, FL
From: 06/27/2017
To: Present
Specialty: Critical Care / Internal Medicine

Palms West Hospital
Loxahatchee, FL
From: 04/20/2017
To: Present
Specialty: Critical Care / Internal Medicine

Wellington Regional Medical Center
Wellington, FL
From: 03/01/2018
To: Present
Specialty: Critical Care / Internal Medicine

Jupiter Regional Medical Center
Jupiter, FL
From: 04/04/2019
To: Present
Specialty: Critical Care / Internal Medicine

Lawnwood Regional Medical Center (HCA)
Ft Pierce, FL
From: 04/11/2019
To: Present
Specialty: Critical Care / Internal Medicine

Carlos H Silva, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

NuView Health LLC
Boca Raton, FL
From: 04/28/2019
To: Present
Title: Internist

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<td>06/30/2023</td>
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Carlos H Silva, MD
**Broward Health – Credentialing Abstract – Medical Staff Applicant**

<table>
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<tr>
<th><strong>Name:</strong></th>
<th>Orli Stern MD</th>
</tr>
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<tbody>
<tr>
<td><strong>Date of Birth:</strong></td>
<td>12/12/1986</td>
</tr>
<tr>
<td><strong>Citizenship:</strong></td>
<td>US:</td>
</tr>
<tr>
<td><strong>Primary Facility:</strong></td>
<td>Broward Health Coral Springs</td>
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<td><strong>Other Broward Health Facilities:</strong></td>
<td>None</td>
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<td><strong>Specialty(ies):</strong></td>
<td>Family Medicine</td>
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<tr>
<td><strong>Dept. at Primary Facility:</strong></td>
<td>Medicine</td>
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<tr>
<td><strong>Secondary Facility Depts.:</strong></td>
<td>None</td>
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<tr>
<td><strong>Practice Name:</strong></td>
<td>Schumacher Clinical Partners</td>
</tr>
<tr>
<td><strong>Website:</strong></td>
<td><a href="https://www.scp-health.com/">https://www.scp-health.com/</a></td>
</tr>
</tbody>
</table>
| **Primary Address Information:** | 3000 Coral Hills Drive  
Coral Springs, FL 33065  
Phone: 954-344-3296  
Fax: 954-796-3922  
Email: karen.windhorst@schumacherclinical.com |
| **ECFMG:** | Number: 0-698-092-2  
Date Issued: 05/20/2016 |
| **Medical/Professional School:** | Ross University School of Medicine  
Miramar, FL  
From: 01/09/2012  
To: 04/01/2016  
Degree: MD |
| **Gap:** | After graduating from Medical School, relocated to West Virginia and awaited the start of Family Medicine Residency.  
From: 04/02/2016  
To: 06/30/2016 |
| **Residency:** | Wheeling Hospital  
Wheeling, WV  
From: 07/01/2016  
To: 06/30/2019  
Specialty: Family Medicine |
| **Fellowship:** | N/A |
| **Hospital Affiliations/Work History:** | N/A |
| **Board Certification:** | Board: American Board of Family Medicine  
Specialty: Family Medicine  
Certification Date: 07/01/2019  
MCC Reverification: 02/15/2020  
Certification Expiration: N/A |

Orli Stern, MD
Name: **Jessica E Taub DPM**

Date of Birth: 06/25/1989

Citizenship: US

Primary Facility: Broward Health Coral Springs

Other Broward Health Facilities: None

Specialty(ies): Podiatry

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Practice Name: Certified Foot and Ankle Specialists

Website: [http://certifiedfoot.com/](http://certifiedfoot.com/)

Primary Address Information: 1601 Clint Moore Road
Suite 180
Boca Raton, FL 33487
Phone: 561-995-0229
Fax: 561-989-0775
Email: jessicataub@icloud.com

ECFMG: N/A

Medical/Professional School: Kent State University College of Podiatric Medicine

Independence, OH

From: 08/01/2012
To: 05/20/2016
Degree: Doctor of Podiatric Medicine

Internship: N/A

Residency: St Vincent's Medical Center

Jacksonville, FL

From: 07/01/2016
To: 06/30/2018
Specialty: Podiatry

Atlanta VA Medical Center

Decatur, GA

From: 07/01/2018
To: 06/30/2019
Specialty: Podiatry

Fellowship: N/A

Hospital Affiliations/Work History: N/A

Board Certification: Board: American Board of Podiatric Medicine

Specialty: Podiatric Medicine

Eligibility Date: 06/30/2019

Eligibility Expiration: 06/30/2026

Jessica E Taub, DPM
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Rebecca E Wiesenfeld MD

Date of Birth: 03/12/1987
Citizenship: US
Primary Facility: Broward Health Medical Center
Other Broward Health Facilities: Broward Health Coral Springs, Broward Health Imperial Point
Specialty(ies): Emergency Medicine
Dept. at Primary Facility: Emergency Medicine
Secondary Facility Depts.: Medicine
Practice Name: Envision Physician Services
Website: www.envisionhealth.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@envisionhealth.com

ECFMG: N/A
Medical/Professional School:
Florida International University
Miami, FL
From: 08/01/2011
To: 05/31/2015
Degree: MD

Internship: N/A
Residency:
Christiana Care Health Services
Newark, DE
From: 07/01/2015
To: 06/30/2018
Specialty: Emergency Medicine

Fellowship: N/A
Hospital Affiliations/ Work History:
EMPro’s
Ormond Beach, FL
From: 07/01/2018
To: Present
Specialty: Emergency Medicine

Board Certification:
Board: American Board of Emergency Medicine
Specialty: Emergency Medicine
Certification Date: 06/04/2019
MOC Expiration: N/A
Certification Expiration: 12/31/2029
Name: Elka Wiley-Mills MD
Date of Birth: 12/20/1975
Citizenship: US, unless visa expiration noted:
Primary Facility: Broward Health North
Other Broward Health Facilities: Broward Health Coral Springs
Specialty(ies): Neurology
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: Medicine
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: ncamco@asrlocums.com
ECFMG: N.A
Medical/Professional School: University of Miami
Coral Gables, FL
From: 08/01/1997
To: 05/10/2003
Degree: Doctor of Medicine
Gap: Studied and Prepared for the USMLE Step 2 examination.
From: 08/01/1997
To: 05/10/2003
Internship: New York Medical College (unable to verify – program closed)
Valhalla, NY
From: 01/01/2004
To: 12/31/2004
Specialty: Internal Medicine
Residency: Jackson Memorial Hospital- Miami University
Miami, FL
From: 07/01/2005
To: 06/30/2008
Specialty: Neurology
Fellowship: Jackson Memorial Hospital- Miami University
Miami, FL
From: 07/01/2008
To: 06/30/2009
Specialty: Vascular Neurology
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<tr>
<td>Baptist Hospital of Miami</td>
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<tr>
<td>Miami, FL</td>
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<tr>
<td>From: 09/22/2009</td>
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<tr>
<td>To: 03/21/2012</td>
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<tr>
<td>Kendall Regional Medical Center (HCA)</td>
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<tr>
<td>Miami, FL</td>
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<tr>
<td>From: 02/25/2011</td>
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<td>Neurology Associates of Kendall (unable to verify – practice closed)</td>
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<td>Title: Neurologist</td>
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<td>Homestead Hospital</td>
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<td>West Florida Hospital (HCA)</td>
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<td>Lawnwood Regional Medical Center (HCA)</td>
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<td>Fort Pierce, FL</td>
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<td>Orange Park Medical Center (HCA)</td>
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<td>To: 11/30/2020</td>
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<td>Coliseum Northside Hospital (HCA)</td>
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Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: 

John Zaravinos, MD

Date of Birth: 05/20/1980

Citizenship: US

Primary Facility: Broward Health North

Other Broward Health Facilities:
  - Broward Health Coral Springs
  - Broward Health Medical Center

Specialty(ies)
  - Hospice & Palliative Care Medicine
  - Internal Medicine

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: None

Practice Name: Vitas Healthcare
  Website: www.vitas.com

Primary Address Information:
  5420 NW 33rd Avenue
  Suite 100
  Fort Lauderdale, FL 33309
  Phone: 954-486-4085
  Fax: 954-777-5328
  Email: Chervise.Malcolm@vitas.com

ECFMG:
  Number: 0-782-376-8
  Date Issued: 05/27/2011

Medical/Professional School:
  Saint George’s School of Medicine
  St Georges, Grenada
  From: 08/15/2007
  To: 05/13/2011
  Degree: MD

Gap:
  Volunteer Southeast Florida Hematology / Oncology group
  From: 01/01/2011
  To: 12/31/2012

Residency:
  SUNY Downstate Medical Center
  Brooklyn, NY
  From: 07/01/2012
  To: 06/30/2015
  Specialty: Internal Medicine

Fellowship:
  New York Presbyterian Hospital/Cornell University
  New York, NY
  From: 07/01/2015
  To: 06/30/2016
  Specialty: Hospice and Palliative Medicine

Gap:
  Studying to take Boards/ Getting Florida Medical License and DEA
  From: 07/01/2016
  To: 10/17/2016

Hospital Affiliations/Work History:
  Vitas Healthcare
  Fort Lauderdale, FL
  From: 10/17/2016
  To: Present
  Title: Associate Medical Director
Broward Health – Credentialing Abstract – Medical Staff Applicant

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<td><strong>Board:</strong></td>
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John Zaravinos, MD
<table>
<thead>
<tr>
<th><strong>Name:</strong></th>
<th><strong>Ashley N Bunnell, CRNA</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date of Birth:</strong></td>
<td>03/18/1987</td>
</tr>
<tr>
<td><strong>Citizenship:</strong></td>
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<tr>
<td><strong>Primary Facility:</strong></td>
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<td><strong>Specialty:</strong></td>
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<tr>
<td><strong>Physician Sponsorship:</strong></td>
<td>Gladys Cardenas, DO</td>
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<tr>
<td><strong>Practice Name:</strong></td>
<td>Anesco, LLC</td>
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<tr>
<td><strong>Website:</strong></td>
<td><a href="http://www.drivinghp.com">www.drivinghp.com</a></td>
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<tr>
<td><strong>Primary Address Information:</strong></td>
<td>3601 West Commercial Boulevard Suite 4/5 Fort Lauderdale, FL 33309 Phone: 954-485-5666 Fax: 954-484-1551 Email: <a href="mailto:bmelendez@anesco.net">bmelendez@anesco.net</a></td>
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<td><strong>Professional School:</strong></td>
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<td><strong>To:</strong></td>
<td>05/10/2019</td>
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<td><strong>Degree:</strong></td>
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<td><strong>Major:</strong></td>
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<td><strong>Gap:</strong></td>
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<td><strong>Specialty:</strong></td>
<td>Certified Registered Nurse Anesthetist (CRNA)</td>
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Ashley N Bunnell, CRNA
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name:  Aida J Lopez, ARNP
Date of Birth:  08/29/1957
Citizenship:  US
Primary Facility:  Broward Health North
Other Broward Health Facilities:  Broward Health Coral Springs, Broward Health Imperial Point
Specialty:  Nurse Practitioner
Dept. at Primary Facility:  Medicine
Secondary Facility Depts.:  None
Physician Sponsorship:  David Kahn, MD
Practice Name:  South Florida Cancer Care
Website:  www.southfloridacancercare.com

Primary Address Information:
2964 N State Road 7
Suite 330
Margate, FL 33063
Phone:  954-984-9998
Fax:  954-984-9988
Email:  Brad@southfloridacancercare.com

Professional School:  Florida Atlantic University
Boca Raton, FL
From:  08/01/2001
To:  08/08/2003
Degree:  MSN
Major:  Nursing

Hospital Affiliations/
Work History:
Boca Raton Regional Hospital
Boca Raton, FL
From:  10/15/2001
To:  01/09/2006
Title:  Registered Nurse

Professional School:  Case Western Reserve University – Francis Payne Bolton School of Nursing
Cleveland, OH
From:  01/17/2006
To:  05/09/2008
Degree:  DNP
Major:  Nursing

Hospital Affiliations/
Work History:
Comprehensive Gynecologic Oncology
Delray Beach, FL
From:  03/01/2006
To:  10/15/2007
Title:  Nurse

Boca Raton Regional Hospital
Boca Raton, FL
From:  08/22/2006
To:  02/01/2009
Specialty:  Nurse Practitioner
### Hospital Affiliations/
#### Work History (continued):

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<th>From</th>
<th>To</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Center for Hematology-Oncology</td>
<td>Boca Raton, FL</td>
<td>10/09/2007</td>
<td>06/10/2009</td>
<td>Nurse Practitioner</td>
</tr>
<tr>
<td>Delray Medical Center</td>
<td>Delray Beach, FL</td>
<td>03/27/2008</td>
<td>05/27/2010</td>
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</tr>
<tr>
<td>Palm Beach Institute of Hematology &amp; Oncology LLC</td>
<td>Boynton Beach, FL</td>
<td>01/01/2010</td>
<td>11/30/2011</td>
<td>Nurse Practitioner</td>
</tr>
<tr>
<td>Bethesda Memorial Hospital</td>
<td>Boynton Beach, FL</td>
<td>11/09/2010</td>
<td>01/25/2012</td>
<td>Nurse Practitioner</td>
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<tr>
<td>Gift of Life Bone Marrow Foundation</td>
<td>Boca Raton, FL</td>
<td>04/16/2012</td>
<td>12/09/2014</td>
<td>Marrow Donor Program Manager-Donor Services</td>
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<tr>
<td>Anesthesia Pain Care Consultants</td>
<td>Tamarac, FL</td>
<td>12/14/2015</td>
<td>02/23/2016</td>
<td>Nurse Practitioner</td>
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<tr>
<td>South Florida Cancer Care-21st Century Oncology</td>
<td>Margate, FL</td>
<td>05/02/2016</td>
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<table>
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<tr>
<th>Gap:</th>
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<tbody>
<tr>
<td>Seeking Employment</td>
<td>01/26/2012</td>
</tr>
<tr>
<td>To:</td>
<td>04/15/2012</td>
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<tr>
<td>Sabbatical to care for daughter</td>
<td>12/10/2014</td>
</tr>
<tr>
<td>To:</td>
<td>12/13/2015</td>
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<tr>
<td>Seeking Employment</td>
<td>03/01/2016</td>
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<td>To:</td>
<td>05/01/2016</td>
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### Board Certification:

<table>
<thead>
<tr>
<th>Board:</th>
<th>American Academy of Nurse Practitioners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialty:</td>
<td>Family Nurse Practitioner</td>
</tr>
<tr>
<td>Certification Date:</td>
<td>04/01/2004</td>
</tr>
<tr>
<td>Certification Expiration</td>
<td>03/31/2024</td>
</tr>
</tbody>
</table>

Aida J Lopez, ARNP
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Gabrielle Mount Borrero, APRN
Date of Birth: 03/13/1985
Citizenship: US
Primary Facility: Broward Health Coral Springs
Other Broward Health Facilities: None
Specialty: Nurse Anesthetist
Dept. at Primary Facility: Surgery
Secondary Facility Depts.: None
Physician Sponsorship: Isabel Novela, MD
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: 561-299-3670
Email: trousseau@nuviewhealth.com
Professional School: University of Miami - School of Nursing and Allied Health Studies
Coral Gables, FL
From: 01/01/2016
To: 08/11/2017
Degree: MSN
Major: Adult-Gerontology Acute Care Nurse Practitioner
Hospital Affiliations/ Work History: Broward Health North
Deerfield Beach, FL
From: 02/08/2010
To: 04/01/2015
Title: RN
Jackson Memorial Hospital
Miami, FL
From: 12/04/2017
To: 04/16/2018
Title: Acute Care Nurse Practitioner
Wellington Regional Medical Center
Wellington, FL
From: 05/22/2018
To: 06/03/2019
Specialty: Nurse Practitioner
Board Certification: Board: American Nurses Credentialing Center
Specialty: Adult Gerontology Acute Care Nurse Practitioner
Certification Date: 09/28/2017
Certification Expiration: 09/27/2022
Name: Shannon M Scott, CRNA

Date of Birth: 09/14/1984

Citizenship: US

Primary Facility: Broward Health Coral Springs

Other Broward Health Facilities: None

Specialty: Nurse Anesthetist

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Physician Sponsorship: Gladys Cardenas, DO

Practice Name: Aceso, LLC
Website: www.drivinghp.com

Primary Address Information:
3601 West Commercial Boulevard
Suite 4/5
Fort Lauderdale, FL 33309
Phone: 954-485-5666
Fax: 954-484-1651
Email: bmelendez@anesco.net

Military: US Army
From: 09/10/2001
To: 09/24/2004

Professional School:
Barry University
Miami Shores, FL
From: 01/08/2007
To: 05/11/2019
Degree: MS
Major: Anesthesiology

Hospital Affiliations/Work History: N/A

Gap:
Employment seeking and completing Broward Health credentialing process
From: 05/12/2019
To: Present

Board Certification:
Board: National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA)
Specialty: Certified Registered Nurse Anesthetist (CRNA)
Certification Date: 06/06/2019
Certification Expiration: 06/30/2023
Christina Wang PA-C

Date of Birth: 01/19/1991
Citizenship: US
Primary Facility: Broward Health Coral Springs
Other Broward Health Facilities: None
Specialty: Physician Assistant
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: None

Physician Sponsorship:
Practice Name: Oncology & Hematology Associates of West Broward
Website: N/A

Primary Address Information:
7431 North University Drive
Suite 110
Tamarac, FL 33321
Phone: 954-726-0035
Fax: 877-881-5042
Email: marlys.murillo@ohawb.com

Professional School:
Nova Southeastern University Physician Asst Program
Fort Lauderdale, FL
From: 05/30/2015
To: 08/01/2017
Degree: Master of Medical Science
Major: Physician Assistant

Hospital Affiliations/Work History:
Americare Medical Center
Sunrise, FL
From: 10/01/2017
To: 05/31/2019
Title: Physician Assistant

Oncology & Hematology Associates of West Broward
Tamarac, FL
From: 06/03/2019
To: Present
Title: Physician Assistant

Board Certification:
Board: National Commission on Certification of Physician Assistants
Specialty: Physician Assistant - Certified (PA-C)
Certification Date: 09/27/2017
Certification Expiration: 12/31/2027
SUMMARY OF REQUEST

DATE: September 25, 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: Heather Haverick, Chief Executive Officer

Andrew Ta, MD, LVP, Chief Medical Officer

Gino Santorio, Broward Health, Chief Executive Officer
MEMORANDUM

TO: Board of Commissioners

FROM: Heather Havericak, Chief Executive Officer

DATE: September 25, 2019

SUBJECT: Medical Staff Board Items

The Medical Executive Committee at Broward Health Medical Center, at its monthly meeting on September 10, 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:

CREDENTIALS COMMITTEE: September 5, 2019  MEDICAL EXECUTIVE COMMITTEE: September 10, 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>Qadeer Ahmed, MD</td>
<td>Emergency Medicine</td>
<td>Emergency Medicine</td>
<td>Provisional</td>
</tr>
<tr>
<td>Julian Berlin, DDS</td>
<td>Surgery</td>
<td>Pediatric Dentistry</td>
<td>Provisional</td>
</tr>
<tr>
<td>Evan Boyar, DO</td>
<td>Emergency Medicine</td>
<td>Emergency Medicine</td>
<td>Provisional</td>
</tr>
<tr>
<td>Georges Edouard, MD</td>
<td>ObGyn</td>
<td>ObGyn</td>
<td>Provisional</td>
</tr>
<tr>
<td>Andrea Henley-Seymour, MD</td>
<td>Surgery</td>
<td>Pain Management</td>
<td>Provisional</td>
</tr>
<tr>
<td>Dunia Hernandez, MD</td>
<td>Medicine</td>
<td>Nephrology</td>
<td>Provisional</td>
</tr>
<tr>
<td>Magdaline Kopacz, MD</td>
<td>Emergency Medicine</td>
<td>Emergency Medicine</td>
<td>Provisional</td>
</tr>
<tr>
<td>Indira Kumar, MD</td>
<td>Pediatrics</td>
<td>Pediatrics Neurology</td>
<td>Provisional</td>
</tr>
<tr>
<td>Rachel Latibeaudiere, DO</td>
<td>Medicine</td>
<td>Pulmonary Critical Care</td>
<td>Provisional</td>
</tr>
<tr>
<td>Kevin McCarthy, MD</td>
<td>Surgery</td>
<td>Orthopaedic Surgery</td>
<td>Provisional</td>
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<tr>
<td>Iad Najj, MD</td>
<td>Medicine</td>
<td>Critical Care</td>
<td>Provisional</td>
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<tr>
<td>Thesalee Randon, MD</td>
<td>Emergency Medicine</td>
<td>Pediatric Fast Track only</td>
<td>Provisional</td>
</tr>
<tr>
<td>Bharat Ranganath, MD</td>
<td>Surgery</td>
<td>Plastic &amp; Hand Surgery</td>
<td>Provisional</td>
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<tr>
<td>Carlos Ricart, MD</td>
<td>Pathology</td>
<td>Anatomical/Clinical Pathology</td>
<td>Provisional</td>
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<tr>
<td>Edward Walker, MD</td>
<td>Medicine</td>
<td>Internal Medicine</td>
<td>Provisional</td>
</tr>
<tr>
<td>Rebecca Wiesenfeld, MD</td>
<td>Emergency Medicine</td>
<td>Emergency 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>Privileges</th>
<th>Physician Sponsor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stephanie Fajardo, APRN</td>
<td>Medicine</td>
<td>G. Valenzuela, MD</td>
<td></td>
</tr>
<tr>
<td>Octavio Gaytan, CRNA</td>
<td>Anesthesia</td>
<td>E. Czinn, MD</td>
<td></td>
</tr>
<tr>
<td>Vannessa Hernandez, APRN</td>
<td>Family Medicine</td>
<td>H. DiCarlo, MD</td>
<td></td>
</tr>
<tr>
<td>Erika Maggi, PA-C</td>
<td>Surgery</td>
<td>C. Eierle, MD</td>
<td></td>
</tr>
<tr>
<td>Victoria Verrengia, PA-C</td>
<td>Surgery</td>
<td>A. Sahai, MD</td>
<td></td>
</tr>
</tbody>
</table>

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

Provider

None

APPROVED THE FOLLOWING NEW ALLIED HEALTH PROFESSIONALS (CHS):

Provider

Marivil Castro-Santiago, APRN

Department: Family Medicine

Physician Sponsor: A. McLean, DO (CHS only)

APPROVED THE FOLLOWING NEW MEMBER(S) URGENT CARE CENTERS:

Provider

None

APPROVED THE FOLLOWING NEW ALLIED HEALTH PROFESSIONAL(S) URGENT CARE CENTERS:

Provider

None

REQUEST FOR DELETION PRIVILEGES/SETTING:

Provider

None
REQUEST FOR ADDITIONAL PRIVILEGES/SETTING:

Provider | Department | Specialty | Privileges Requested
---|---|---|---
None

REQUEST FOR ADDITIONAL SPONSOR:

Provider | Department | Sponsor
---|---|---
Seigfried Cualing, APRN | Medicine | J. Lenchus, DO

REQUEST FOR CHANGE IN STATUS:

Provider | Department | Specialty | Current Status | New Status
---|---|---|---|---
None

REQUEST FOR CHANGE IN PRIMARY FACILITY:

Provider | Department | New Primary Facility:
---|---|---
None

REQUEST FOR LEAVE OF ABSENCE:

Provider | Department | Specialty
---|---|---
None

APPROVED THE FOLLOWING MEDICAL STAFF RESIGNATIONS:

Doctor | Department | Reason
---|---|---
Traci-Lyn Eisenberg, DO | Family Medicine | Voluntary – Practice Change
Noemi Rivera, MD | Emergency Medicine | Contract Change- (CHS Weston)
Mark Rubin, MD | Family Medicine | Voluntary Resignation

APPROVED THE FOLLOWING RESIGNATIONS AHP:

Provider | Department |
---|---|
Kimberly Fleming, APRN | Medicine |
Rebecca Levine, PA-C | Surgery |
Amy Michaels, PA-C | Medicine |
Angelica Walsh, PA-C | Medicine |

APPROVED THE FOLLOWING REAPPOINTMENTS: See attached List.

Chief of Staff: [Signature] Date: 9/16/19

BHMC CEO: [Signature] Date: 9/16/19

President, CEO: [Signature] Date: 

Gino Santorio 09/19/2019 14:12 Eastern Daylight
September 25, 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 September 10, 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, CEO

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

### Recommended with No Change in Status
Reappointment Cycle: 9/25/2019 – 8/31/2021

<table>
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<tr>
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<tbody>
<tr>
<td>Michael Arch, MD</td>
<td>Radiology</td>
<td>Radiology</td>
<td>Active</td>
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<tr>
<td>George Beveridge Jr., MD</td>
<td>Pediatrics</td>
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<td>Courtesy</td>
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<tr>
<td>Sandra Black-Boxill, MD</td>
<td>ObGyn</td>
<td>ObGyn</td>
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<tr>
<td>Kevin Boehm, DO</td>
<td>Em. Medicine</td>
<td>Em. Medicine</td>
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<tr>
<td>Maciej Perenc, DO</td>
<td>Em. Medicine</td>
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<tr>
<td>Michael Gordon, MD</td>
<td>Interventional Radiology</td>
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<tr>
<td>Charles Halfpenny Jr., MD</td>
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<tr>
<td>Steven Kaltman, DMD, MD</td>
<td>Oral/Maxillofacial</td>
<td>Surgery</td>
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<td>Jacqueline Machado, MD</td>
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<td>Michele Markley, MD</td>
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<td>Shawn McClure, DMD, MD</td>
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<td>Sandeep Mendiratta, MD</td>
<td>Psychiatry</td>
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<td>Matthew Moore, MD</td>
<td>Neurosurgery</td>
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<td>Courtesy</td>
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<td>Linda Nguyen, MD</td>
<td>Em. Medicine</td>
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<tr>
<td>David Perloff, MD</td>
<td>Cardiology</td>
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<td>Reynald Pouliot, MD</td>
<td>ObGyn</td>
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<td>Jean-Jacques Rajter, MD</td>
<td>Pulmonary/ Sleep Medicine</td>
<td>Medicine</td>
<td>Active</td>
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<tr>
<td>Fred Reineke, MD</td>
<td>Pathology</td>
<td>Pathology</td>
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<tr>
<td>Julia Retureta, MD</td>
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<tr>
<td>James Robert Ross Jr., MD</td>
<td>Orthopaedic Surgery</td>
<td>Surgery</td>
<td>Courtesy</td>
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<tr>
<td>Glenn Singer, MD</td>
<td>Pulmonary/ Internal Medicine</td>
<td>Medicine</td>
<td>Active</td>
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<tr>
<td>Brett Staller, MD</td>
<td>Radiology</td>
<td>Radiology</td>
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### Recommended with Change in Status
Reappointment Cycle: 9/25/2019 – 8/31/2021

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<tbody>
<tr>
<td>Josiane Faublas, MD</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Courtesy</td>
<td>Active</td>
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<tr>
<td>Catherine Polera, DO</td>
<td>Em. Medicine</td>
<td>Em. Medicine</td>
<td>Associate-Provisional II</td>
<td>Courtesy</td>
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### Recommended with Change in Status
Reappointment Cycle: 9/25/2019 – 8/31/2020

<table>
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<th>Specialty</th>
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</thead>
<tbody>
<tr>
<td>Jerry Capote, MD</td>
<td>Pulmonary/ Critical Care Medicine</td>
<td>Medicine</td>
<td>Provisional I</td>
<td>Provisional II</td>
</tr>
<tr>
<td>Caesar Carralero, DO</td>
<td>Em. Medicine</td>
<td>Em. Medicine</td>
<td>Provisional I</td>
<td>Provisional II</td>
</tr>
<tr>
<td>Rogerio Faillance, MD</td>
<td>Pediatrics</td>
<td>Pediatrics</td>
<td>Provisional I</td>
<td>Provisional II</td>
</tr>
<tr>
<td>Anup Gangavalli, MD</td>
<td>Orthopaedic Surgery</td>
<td>Surgery</td>
<td>Provisional I</td>
<td>Provisional II</td>
</tr>
<tr>
<td>Vincenzo Novara, MD</td>
<td>Pulmonary Medicine</td>
<td>Medicine</td>
<td>Provisional I</td>
<td>Provisio...</td>
</tr>
<tr>
<td>Anthony Panariello, MD</td>
<td>Pulmonary Medicine</td>
<td>Medicine</td>
<td>Provisional I</td>
<td>Provisional I</td>
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<tr>
<td>Name</td>
<td>Department</td>
<td>Specialty</td>
<td>Sponsor(s)</td>
<td></td>
</tr>
<tr>
<td>-----------------------------</td>
<td>------------</td>
<td>--------------------</td>
<td>----------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Jamellah Abraham, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>V. Novara, MD; M. Arenas, MD; A. Panariello, MD; J. Capote, MD; M. Santana, MD</td>
<td></td>
</tr>
<tr>
<td>Michelle Binns, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>R. McKenzie, MD; W. McKenzie, MD</td>
<td></td>
</tr>
<tr>
<td>Nicole Doran, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>B. Menendez, MD</td>
<td></td>
</tr>
<tr>
<td>Danielle Fetting, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>V. Novara, MD; M. Arenas, MD; A. Panariello, MD; J. Capote, MD; M. Santana, MD</td>
<td></td>
</tr>
<tr>
<td>Kaitlin Hackett, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>V. Novara, MD; M. Arenas, MD; A. Panariello, MD; J. Capote, MD; M. Santana, MD</td>
<td></td>
</tr>
<tr>
<td>Amy Iannello, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>E. Boyar, MD; N. Swerdloff, MD; G. Lai, DO</td>
<td></td>
</tr>
<tr>
<td>Liza Iannuzzi, CRNA-APRN</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>E. Czinn, MD; N. Gandreti, MD</td>
<td></td>
</tr>
<tr>
<td>Nadine Louissaint, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>A. Calvo, MD</td>
<td></td>
</tr>
<tr>
<td>Devin Lyon, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>V. Novara, MD; M. Arenas, MD; A. Panariello, MD; J. Capote, MD; M. Santana, MD</td>
<td></td>
</tr>
<tr>
<td>Kathryn Manresa, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>G. Lai, DO; B. Menendez, MD</td>
<td></td>
</tr>
<tr>
<td>Cheryl Mingo, CRNA-APRN</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>E. Czinn, MD; G. Cardenas, DO</td>
<td></td>
</tr>
<tr>
<td>Andres Montenegro, PA-C</td>
<td>Surgery</td>
<td>Physician Assistant</td>
<td>W. Windram, MD</td>
<td></td>
</tr>
<tr>
<td>Maxo Nazaire, CRNA-APRN</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>N. Gandreti, DO; E. Czinn, MD; G. Cardenas, DO; M. Longo, MD</td>
<td></td>
</tr>
<tr>
<td>Michaela O’Neill, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>V. Novara, MD; M. Arenas, MD; A. Panariello, MD; J. Capote, MD; M. Santana, MD</td>
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<tr>
<td>Jill Prather, CRNA-APRN</td>
<td>Surgery</td>
<td>Nurse Anesthetist</td>
<td>N. Gandreti, DO; E. Czinn, MD; G. Cardenas, DO</td>
<td></td>
</tr>
<tr>
<td>Irish Reyes, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>V. Novara, MD; M. Arenas, MD; A. Panariello, MD; J. Capote, MD; M. Santana, MD</td>
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<tr>
<td>Cynthia Ryan, APRN</td>
<td>Medicine</td>
<td>Nurse Practitioner</td>
<td>A. Khan, MD</td>
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<tr>
<td>Marilyn Suri, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>V. Novara, MD; M. Arenas, MD; A. Panariello, MD; J. Capote, MD; M. Santana, MD</td>
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<tr>
<td>Saloumeh Zoghi, PA-C</td>
<td>Medicine</td>
<td>Physician Assistant</td>
<td>V. Novara, MD; M. Arenas, MD; A. Panariello, MD; J. Capote, MD; M. Santana, MD</td>
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</table>
### Community Health Services Medical Staff Reappointments

**Recommended with NO Change in Status**

Reappointment Cycle: 9/25/2019 – 8/31/2021

<table>
<thead>
<tr>
<th>Physician</th>
<th>Specialty</th>
<th>Current Status</th>
<th>Recommended Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jerry Brooks, MD</td>
<td>Em. Medicine</td>
<td>Associate</td>
<td>Associate</td>
</tr>
<tr>
<td>Arlene Haywood, MD</td>
<td>Pediatrics</td>
<td>Courtesy</td>
<td>Associate</td>
</tr>
<tr>
<td>Kristen Smith, MD</td>
<td>Family Medicine</td>
<td>Associate</td>
<td>Associate</td>
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</table>

### Community Health Services AHP Reappointments

**Recommended with NO Change in Status**

Reappointment Cycle: 9/25/2019 – 8/31/2021

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
<th>Sponsor(s)</th>
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<tbody>
<tr>
<td>None</td>
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### Urgent Care Centers Medical Staff Reappointments

**Recommended with NO Change in Status**

Reappointment Cycle: 9/25/2019 – 8/31/2021

<table>
<thead>
<tr>
<th>Physician</th>
<th>Department</th>
<th>Specialty</th>
<th>Recommended Status</th>
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</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
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</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: Qadeer Ahmed, MD

Date of Birth: 02/24/1970

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.s.: Pediatrics

Practice Name: TIVA Healthcare

Primary Address Information: 7700 West Sunrise Blvd
Plantation, FL 33322
Phone: 954-939-7009
Fax: 954-616-3696
Email: Jillean.McEwan@tivahealthcare.com

ECFMG: Number: 0-491-231-7
Date Issued: 10/18/1996

Medical/Professional School: Dow Medical College
Karachi, Pakistan,
From: 09/01/1988
To: 05/30/1994
Degree: M.B.B.S

Foreign Internship: Civil Hospital
Karachi, Pakistan,
From: 07/01/1994
To: 05/30/1995
Specialty: Transitional

Foreign Residency: Aga Khan University
Karachi, Pakistan,
From: 06/01/1996
To: 10/31/2002
Specialty: Pediatrics

Foreign Affiliation: Aga Khan University Hospital
Karachi, Pakistan,
From: 11/01/2002
To: 05/31/2005
Title: Peds Supervisor, Dept of Emergency Medicine

Aga Khan University
Karachi, Pakistan,
From: 06/01/2005
To: 10/31/2005
Title: Instructor, Dept of Pediatrics

Qadeer Ahmed, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Fellowship: University at Buffalo
bufalo, NY
From: 11/01/2005
To: 07/31/2008
Specialty: Neonatal-Perinatal Medicine

Residency: University of Buffalo School of Medicine
Buffalo, NY
From: 08/01/2008
To: 07/31/2010
Specialty: Pediatrics

Gap: Completing employment process for University at Buffalo
From: 08/01/2010
To: 09/30/2010

Hospital Affiliations/Work History (continued):
Kaleida Health / Women and Children's Hospital
Buffalo, NY
From: 10/06/2010
To: 02/29/2016
Specialty: Emergency Medicine

Fellowship: University of Buffalo School of Medicine
Buffalo, NY
From: 07/01/2014
To: 06/30/2016
Specialty: Pediatric Emergency Medicine

Gap: Completing credentialing process at Nemours Children's Hospital
From: 07/01/2016
To: 09/20/2016

Hospital Affiliations/Work History:
Nemours Children's Hospital
Orlando, FL
From: 09/21/2016
To: 10/15/2018
Specialty: Pediatric Emergency

AMITA Health Saint Alexius Medical Center
From: 11/07/2018
To: Present
Specialty: Pediatric Dentistry

Team Health Inc.
Knoxville, TN
From: 10/15/2018
To: Present
Title: Medical Director

Board Certification:
Board: American Board of Pediatrics
Specialty: Pediatrics
Certification Date: 10/18/2010
MOC Reverification Date: 02/15/2020
Certification Expiration: N/A

Board: American Board of Pediatrics
Specialty: Pediatric Emergency Medicine
Certification Date: 04/30/2017
MOC Reverification Date: 02/15/2020
Certification Expiration: N/A

Qadeer Ahmed, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Julian Berlin, DDS

Date of Birth: 07/17/1983

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: None

Specialty: Pediatric Dentistry

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Practice Name: Cosmic Smiles Pediatric Dentistry

Primary Address Information: 3027 E Commercial Blvd
Fort Lauderdale, FL 33308
Phone: 954-246-4777
Fax: 954-246-4577
Email: info@ccsmicsmiles.com

ECFMG: N/A

Medical/Professional School: New York University College of Dentistry
New York, NY
From: 09/01/2006
To: 05/11/2010
Degree: DDS

Internship: None

Residency: Maimonides Medical Center
Brooklyn, NY
From: 07/01/2010
To: 06/30/2011
Specialty: General Dentistry

Mount Sinai Medical Center
New York, NY
From: 07/01/2011
To: 06/30/2013
Specialty: Pediatric Dentistry

Fellowship: None

Hospital Affiliations/Work History: Laser Dentistry for Children
Flushing, NY
From: 07/01/2012
To: 07/01/2018
Title: Pediatric Dentist

Pediatric Dentistry on Park
New York, NY
From: 07/01/2014
To: Present
Title: Pediatric Dentist
Broward Health – Credentialing Abstract – Medical Staff Applicant

Hospital Affiliations/Work History (continued):

North Country Pediatric Dentistry
Plattsburgh, NY
From: 09/01/2015
To: 05/30/2019
Title: Pediatric Dentist

Kids Care Dental and Orthodontics
Plantation, FL
From: 09/01/2016
To: 08/31/2018
Title: Pediatric Dentist

Board Certification:

Board: American Board of Pediatric Dentistry
Specialty: Pediatric Dentistry
Eligibility Date: 06/30/2013
Eligibility Expiration: 06/30/2020
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Evan L Boyar MD

Date of Birth: 12/17/1973

Citizenship: US

Primary Facility: Broward Health North

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

Specialty(ies): Emergency Medicine

Dept. at Primary Facility: Emergency Medicine

Secondary Facility Depts.:
- Medicine
- Emergency Medicine

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

Primary Address Information:
- Broward Health North - Emergency Department
  201 E. Sample Road
  Deerfield Beach, FL 33064
  Phone: 954-766-6800
  Fax: 954-766-6719
  Email: Kim.Durcan@EnvisionHealth.com

ECFMG:
- Number: 0-613-455-5
- Date Issued: 06/07/2002

Medical/Professional School:
- University College of Dublin
  Dublin, Ireland
  From: 07/01/1998
  To: 06/01/2002
  Degree: MD

Internship: N/A

Residency:
- Henry Ford Hospital
  Detroit, MI
  From: 07/01/2002
  To: 06/01/2005
  Specialty: Emergency Medicine

Fellowship: N/A

Hospital Affiliations/Work History:
- Henry Ford Hospital
  Detroit, MI
  From: 07/19/2005
  To: 07/01/2006
  Specialty: Emergency Medicine

- Henry Ford Macomb Hospital
  Warren, MI
  From: 09/07/2005
  To: 12/31/2007
  Specialty: Emergency Medicine

Evan L Boyar, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Lakeland Regional Medical Center
Lakeland, FL
From: 04/24/2006
To: 01/25/2012
Specialty: Emergency Medicine

Broward Health North
Deerfield Beach, FL
From: 04/28/2010
To: Present
Specialty: Emergency Medicine

Board Certification:
Board: American Board of Emergency Medicine
Specialty: Emergency Medicine
Certification Date: 08/14/2005
Certification Expiration: 12/31/2020

Evan L Boyar, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Georges Edouard, MD

Date of Birth: 09/17/1948
Citizenship: US
Primary Facility: Broward Health Medical Center
Other Broward Health Facilities: None
Specialty: Obstetrics/ Gynecology
Dept. at Primary Facility: OBGYN
Secondary Facility Depts.: None
Practice Name: Georges Edouard

Primary Address Information: 4330 W Broward Boulevard
Suite C
Plantation, FL 33317
Phone: 954-587-0351
Fax: 954-990-6464
Email:

ECFMG: Number: 258-351-6
Date Issued: 09/12/1980

Medical/Professional School: University of Haiti
Port-Au-Prince,
From: 01/01/1989
To: 06/30/1976
Degree:

Internship: N/A

Foreign Residency: Hospital Immaculee Conception of Cayes
Cayes, Haiti,
From: 07/01/1976
To: 06/30/1977
Specialty: OBGYN

Gap: Relocated from Haiti to US to start residency program
From: 07/01/1977
To: 06/30/1979

Residency: Cabrini Medical Center "Pending PSV – Not AMA Verified"
New York, NY
From: 07/01/1979
To: 06/30/1980
Specialty: Surgery

St. Johns Episcopal Hospital "Pending PSV - AMA Verified"
Far Rockaway, NY
From: 07/01/1980
To: 06/30/1981
Specialty: Surgery
Broward Health – Credentialing Abstract – Medical Staff Applicant

Residency (continued):
Interfaith Medical Center
Brooklyn, NY
From: 07/01/1981
To: 06/30/1982
Specialty: OB/GYN

SUNY - Downstate Medical Center **Pending PSV - AMA Verified**
Brooklyn, NY
From: 07/01/1982
To: 06/30/1985
Specialty: OB/GYN

Fellowship:
N/A

Hospital Affiliations/ Work History:
Woodhull Medical and Mental Health Center **Unable to verify - records unavailable**
Brooklyn, NY
From: 07/01/1985
To: 06/30/1987
Specialty: OB/GYN

St. Lukes Roosevelt Hospital Center **Unable to verify - records unavailable**
New York, NY
From: 07/01/1987
To: 06/30/1988
Specialty: OB/GYN

North Shore University Hospital
Manhasset, NY
From: 07/01/1988
To: 04/06/1989
Specialty: OB/GYN

Broward Health Medical Center
Fort Lauderdale, FL
From: 05/24/1989
To: 05/28/2019
Specialty: OB/GYN

Georges Edouard, MD PA
Plantation, FL
From: 03/26/1990
To: Present
Title: OB/GYN

Broward Health Coral Springs
Coral Springs, FL
From: 05/27/1992
To: 01/25/1995
Specialty: OB/GYN

Plantation General Hospital (HCA)
Plantation, FL
From: 09/03/1992
To: 05/31/2018
Specialty: OB/GYN

Westside Regional Medical Center (HCA)
Plantation, FL
From: 09/04/1992
To: 12/12/2001
Specialty: OB/GYN

Georges Edouard, MD
<table>
<thead>
<tr>
<th>Board Certification:</th>
<th>Board: American Board of Obstetrics and Gynecology</th>
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<tr>
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<td>Certification Date:</td>
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<td>MOC Reverification Date:</td>
<td>12/31/2019</td>
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<tr>
<td>Certification Expiration:</td>
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</table>

Georges Edouard, MD
Broward Health -- Credentialing Abstract -- Medical Staff Applicant

Name: Andrea Henley-Seymour, MD

Date of Birth: 11/26/1975
Citizenship: US
Primary Facility: Broward Health Coral Springs
Other Broward Health Facilities: Broward Health Imperial Point
                                      Broward Health Medical Center
Specialty(ies): Pain Management
Dept. at Primary Facility: Surgery
Secondary Facility Depts.: Surgery
Practice Name: Spine and Wellness Center of America
Primary Address Information: 21097 NE 27 Court
                              Suite 350
                              Aventura, FL 33180
                              Phone: 305-974-5533
                              Fax: 954-367-2846
                              Email: Jmartinez@spinewellnessamerica.com
ECFMG: N/A

Medical/Professional School: Temple University School of Medicine
                            Philadelphia, PA
                            From: 09/02/1997
                            To: 05/17/2001
                            Degree: MD

Internship: Frankford Hospital
            Philadelphia, PA
            From: 06/15/2001
            To: 06/14/2002
            Specialty: Transitional

Residency: Temple University Hospital
           Philadelphia, PA
           From: 07/01/2002
           To: 06/30/2005
           Specialty: Anesthesiology

Fellowship: Emory University School of Medicine
           Atlanta, GA
           From: 07/18/2005
           To: 07/17/2006
           Specialty: Pain Medicine

Hospital Affiliations/Work History: Emory University Hospital
                                  Atlanta, GA
                                  From: 07/27/2006
                                  To: 11/30/2006
                                  Specialty: Anesthesiology

Andrea Henley-Seymour, MD
Hospital Affiliations/Work History (continued):

Emory University Hospital
GA
From: 07/24/2006
To: 10/01/2006
Title: Assistant Professor

Emory University Hospital Midtown
Atlanta, GA
From: 09/31/2006
To: 12/28/2006
Specialty: Anesthesiology

Gap:

Maternity Leave
From: 10/01/2006
To: 07/31/2007

Orthopedic Injury Management
St. Petersburg, FL
From: 08/20/2007
To: 01/24/2008
Title: Physician

Pain Relief Centers
St. Petersburg, FL
From: 01/21/2008
To: 04/30/2013
Title: Physician

Gap:

Time off due to opening independent practice
From: 05/01/2013
To: 06/30/2013

Seymour Spine & Rehabilitation, LLC.
Sunrise, FL
From: 07/01/2013
To: Present
Title: Physician

Florida Medical Center
Ft. Lauderdale, FL
From: 11/05/2013
To: Present
Specialty: Pain Management

Spine and Wellness Centers of America
Aventura, FL
From: 02/25/2019
To: Present
Title: Physician

Board Certification:

Board: American Board of Anesthesiology
Specialty: Anesthesiology
Certification Date: 10/05/2007
Certification Expiration: 12/31/2027

Board: American Board of Anesthesiology
Specialty: Pain Medicine
Certification Date: 09/13/2008
Certification Expiration: 12/31/2028

Andrea Henley-Seymour, MD
**Broward Health – Credentialing Abstract – Medical Staff Applicant**

<table>
<thead>
<tr>
<th>Name:</th>
<th><strong>Dunia Hernandez, MD</strong></th>
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<tr>
<td>Date of Birth:</td>
<td>05/20/1985</td>
</tr>
<tr>
<td>Citizenship:</td>
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<td>Primary Facility:</td>
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<td>Other Broward Health Facilities:</td>
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<td>Specialty:</td>
<td>Nephrology</td>
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<td>Dept. at Primary Facility:</td>
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<tr>
<td>Practice Name:</td>
<td>PinnacleHealthcare Systems</td>
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</tbody>
</table>
| Primary Address Information: | 3700 Washington Street  
Suite 500A  
Hollywood, FL 33021  
Phone: 954-999-4700  
Fax: 954-999-4754 |
| ECFMG: | Number: 0768-448-3  
Date Issued: 10/18/2010 |
| Medical/Professional School: | Medical University of the Americas  
Charleston & Nevis,  
From: 01/01/2007  
To: 09/03/2010  
Degree: MD |
| Internship: | N/A |
| Gap: | Residency Interviews  
From: 08/01/2010  
To: 01/31/2011 |
| Hospital Affiliations/Work History: | Sumerset Academy Charter School  
Pembroke Pines, FL  
From: 02/01/2011  
To: 06/30/2011  
Specialty: Internal Medicine |
| Residency: | Cleveland Clinic Florida  
Weston, FL  
From: 07/01/2011  
To: 06/30/2014  
Specialty: Internal Medicine |
| Fellowship: | Cleveland Clinic Florida  
Weston, FL  
From: 07/01/2014  
To: 06/30/2016  
Specialty: Nephrology |

Dunia Diaz, MD
Broward Health — Credentialing Abstract — Medical Staff Applicant

Hospital Affiliations/Work History:

Healthsouth Sunrise Rehabilitation Hospital
Sunrise, FL
From: 06/30/2016
To: 05/29/2018
Specialty: Nephrology

Northwest Medical Center (HCA)
Margate, FL
From: 08/17/2016
To: 08/16/2018
Specialty: Nephrology

University Hospital & Medical Center
Tamarac, FL
From: 08/18/2016
To: 01/25/2018
Specialty: Nephrology

North Shore Medical Center FMC Campus
Fort Lauderdale, FL
From: 08/25/2016
To: 02/13/2018
Specialty: Nephrology

Broward Health Coral Springs & Salah Foundation Children's Hospital
Coral Springs, FL
From: 09/28/2016
To: 05/30/2018
Specialty: Nephrology

Broward Health North
Deerfield Beach, FL
From: 06/28/2017
To: 05/30/2018
Specialty: Nephrology

Cleveland Clinic Florida
Weston, FL
From: 03/12/2018
To: Present
Specialty: Internal Medicine

Board Certification:

Board: American Board of Internal Medicine
Specialty: Internal Medicine
Certification Date: 09/18/2014
MOC Reverification Date: 04/01/2020
Certification Expiration: N/A

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

Dunia Diaz, MD
<table>
<thead>
<tr>
<th><strong>Name:</strong></th>
<th><strong>Magdaline S Kopacz, MD</strong></th>
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<tbody>
<tr>
<td><strong>Date of Birth:</strong></td>
<td>06/20/1976</td>
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<td><strong>Primary Facility:</strong></td>
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<td><strong>Other Broward Health Facilities:</strong></td>
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<tr>
<td><strong>Specialty:</strong></td>
<td>Pediatric Emergency Medicine</td>
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<td><strong>Dept. at Primary Facility:</strong></td>
<td>Emergency Medicine</td>
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<td><strong>Secondary Facility Depts.:</strong></td>
<td>Pediatrics</td>
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<tr>
<td><strong>Practice Name:</strong></td>
<td>TIVA Healthcare</td>
</tr>
<tr>
<td><strong>Primary Address Information:</strong></td>
<td>7700 West Sunrise Blvd, Plantation, FL 33322</td>
</tr>
<tr>
<td></td>
<td>Phone: 954-939-7009</td>
</tr>
<tr>
<td></td>
<td>Fax: 954-616-3906</td>
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<tr>
<td></td>
<td>Email: <a href="mailto:Jillean.McEwan@tivahealthcare.com">Jillean.McEwan@tivahealthcare.com</a></td>
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<tr>
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<tr>
<td><strong>Medical/Professional School:</strong></td>
<td>Jagiellonian University Medical College</td>
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<tr>
<td></td>
<td>Krokow, From: 09/01/1995</td>
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<td></td>
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<td><strong>Gap:</strong></td>
<td>Family vacation</td>
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<td>From: 07/01/1999</td>
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<td><strong>Foreign Training:</strong></td>
<td>Schneider Children's Medical Center of Israel</td>
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<td>Patach-Tiqva, Israel</td>
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<td>Specialty: Pediatric Externship</td>
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<td><strong>Gap:</strong></td>
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<td><strong>Research/Externship:</strong></td>
<td>Beth Israel Deaconess Medical Center</td>
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<td>Boston, MA</td>
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<td>From: 11/01/2002</td>
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<td>To: 05/31/2003</td>
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<td></td>
<td>Specialty: Gastroenterology Research</td>
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<td>Children's Hospital Boston</td>
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<td>From: 11/01/2002</td>
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# Broward Health – Credentialing Abstract – Medical Staff Applicant

<table>
<thead>
<tr>
<th>Internship:</th>
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</table>
| Residency:  | University of Medicine and Dentistry of New Jersey  
             | Newark, NJ  
             | From: 07/01/2003  
             | To: 09/30/2006  
             | Specialty: Pediatrics |
| Fellowship: | N/A |
| Gap:        | Studying for Pediatric board and vacationing  
             | From: 07/01/2006  
             | To: 02/28/2008 |
| Hospital Affiliations/Work History: | Hackensack University Medical Center  
                                         | Hackensack, NJ  
                                         | From: 03/18/2008  
                                         | To: Present  
                                         | Specialty: Pediatric Emergency |
| Board Certification: | Board: American Board of Pediatrics  
                               | Specialty: Pediatrics  
                               | Certification Date: 10/27/2008  
                               | MOC Reverification Date: 02/15/2020  
                               | Certification Expiration: N/A |

Magdaline S Kopacz, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Indira Kumar MD

Date of Birth: 04/21/1974

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: https://www.allstarrecruiting.com/

Primary Address Information: 800 Fairway Drive
Suite 300
Deerfield Beach, FL 33441
Phone: 800-928-0229
Fax: 888-503-0752
Email: hvelasquez@aerlocums.com

ECFMG: Number: 0-621-062-9
Date Issued: 04/19/2007

Medical/Professional School: Medical University of the Americas
St. Kitts & Nevis
From: 09/04/2001
To: 09/16/2005
Degree: MD

Gap: Worked as a Research Assistant and Student Observership at
Cooper University Medical Center in Camden, NJ.
From: 09/01/2005
To: 06/17/2007

Internship: Children's Regional Medical Center (formerly Cooper University)
camden, NJ
From: 09/18/2007
To: 06/30/2008
Specialty: Pediatrics

Residency: East Carolina University
Greenville, NC
From: 07/24/2008
To: 09/22/2009
Specialty: Pediatrics

Augusta University
Augusta, GA
From: 10/05/2009
To: 09/17/2010
Specialty: Pediatrics
Broward Health – Credentialing Abstract – Medical Staff Applicant

Fellowship:
St. Christopher's Hospital for Children
Philadelphia, PA
From: 10/25/2010
To: 06/30/2013
Specialty: Child Neurology

Hospital Affiliations/Work History:
Lehigh Valley-Schuylkill Medical Center
Pottsville, PA
From: 07/15/2013
To: 07/05/2015
Specialty: Neurology

Penn State Health Medical Group - St Joseph Medical Center
Reading, PA
From: 07/06/2015
To: 05/30/2016
Title: Neurologist

Abington Memorial Hospital
Abington, PA
From: 10/03/2016
To: 09/30/2017
Specialty: Neurology

Abington Neurological Associates
Abington, PA
From: 10/03/2016
To: 09/30/2017
Title: Neurologist

Easton Hospital
Easton, PA
From: 04/28/2018
To: Present
Specialty: Neurology

Steward Medical Group-Easton Neurology
Easton, PA
From: 04/30/2018
To: Present
Title: Neurologist

Board Certification:
Board: American Board of Psychiatry and Neurology
Specialty: Neurology with Special Qualifications in Child Neurology
Eligibility Date: 06/30/2019
MOC Reverification: N/A
Eligibility Expiration: 06/30/2020

Indira Kumar, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Rachel Latibeaudiere, DO

Date of Birth: 04/16/1985

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: None

Specialty: Pulmonary Critical Care

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: 954-587-8586
                        Email: suvanesh@aol.com

ECFMG: N/A

Medical/Professional School: Nova Southeastern University
                           Ft. Lauderdale, FL
                           From: 07/01/2008
                           To: 05/26/2012
                           Degree:

Internship: Jackson Memorial Hospital
            Miami, FL
            From: 06/24/2012
            To: 06/23/2013
            Specialty: Internal Medicine

Residency: Jackson Memorial Hospital
           Miami, FL
           From: 07/01/2013
           To: 06/30/2015
           Specialty: Internal Medicine

Fellowship: Jackson Memorial Hospital
           Miami, FL
           From: 07/01/2015
           To: 06/30/2018
           Specialty: Pulmonology and Critical Care

Hospital Affiliations/Work History: Wellington Regional Medical Center
                                     Wellington, FL
                                     From: 07/27/2018
                                     To: Present
                                     Specialty: Critical Care Medicine

Rachel Latibeaudiere, DO
<table>
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| Board: American Board of Internal Medicine |
| Specialty: Critical Care Medicine          |
| Eligibility Date: 06/30/2016                |
| Eligibility Expiration: 06/30/2025          |

Rachel Latibeaudiere, DO
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Kevin J McCarthy MD

Date of Birth: 06/07/1988

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: None

Specialty(ies): Orthopedic Surgery

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Practice Name: Broward Institute of Orthopedic Specialties
Website: http://www.biosorthopaedics.com/

Primary Address Information:
4440 Sheridan Street
Hollywood, FL 33021
Phone: 954-964-2049
Fax: 954-964-2049
Email: kevmccarthy88@gmail.com

ECFMG: N/A

Medical/Professional School:
University of Florida College of Medicine
Gainesville, FL
From: 07/01/2010
To: 06/30/2014
Degree: MD

Internship/Residency:
University Of South Florida College Of Medicine
Tampa, FL
From: 07/01/2014
To: 06/30/2019
Specialty: Orthopedic Surgery

Fellowship: N/A

Hospital Affiliations/Work History:
Broward Institute of Orthopedic Specialties
Hollywood, FL
From: 08/01/2019
To: Present
Specialty: Orthopedic Surgery

Board Certification:
Board: American Board of Orthopedic Surgery
Specialty: Orthopedic Surgery
Eligibility Date: 06/30/2019
Eligibility Expiration: 06/30/2027
**Broward Health – Credentialing Abstract – Medical Staff Applicant**

**Name:**  
Iiad Naji, MD

**Date of Birth:**  
04/18/1972

**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: 954-587-8688  
Email: suvanesh@aol.com

**ECFMG:**  
Number: 0-585-393-2  
Date Issued: 01/05/1999

**Medical/Professional School:**  
Aleppo University  
Aleppo,  
From: 10/01/1999  
To: 08/31/1995  
Degree: MD

**Internship:**  
N/A

**Foreign Residency:**  
Damascus University Hospital  
Damascus, Syria,  
From: 09/01/1995  
To: 12/31/1999  
Specialty: Internal Medicine

**Gap:**  
Relocated to the US and time off awaiting start of residency program  
From: 01/01/2000  
To: 06/30/2000

**Residency:**  
Beaumont Hospital, Royal Oak  
Royal Oak, MI  
From: 07/01/2000  
To: 06/30/2003  
Specialty: Internal Medicine

**Hospital Affiliations/Work History:**  
Azhar Esho, MD  
**Unable to verify - records no longer available**  
Detroit, MI  
From: 07/01/2003  
To: 07/31/2008  
Title: Primary Care Physician
| Fellowship: | University of Kentucky  
|            | Lexington, KY  
| From:      | 07/01/2008  
| To:        | 06/30/2010  
| Specialty: | Infectious Diseases  
| Hospital Affiliations/  
| Work History: | Montefiore Medical Center  
|             | Bronx, NY  
| From:      | 08/01/2010  
| To:        | 08/31/2011  
| Specialty: | Critical Care Medicine  
|             | Lee Health Systems  
|             | Ft. Myers, FL  
| From:      | 08/20/2011  
| To:        | 09/03/2012  
| Title:     | Physician  
|             | HCA/ICC Healthcare  
|             | Ft. Lauderdale, FL  
| From:      | 09/01/2012  
| To:        | Present  
| Title:     | Intensivist  
|             | Aventura Hospital and Medical Center  
|             | Adventura, FL  
| From:      | 01/24/2013  
| To:        | 10/11/2018  
| Specialty: | Internal Medicine/Critical Care Medicine  
|             | West Palm Hospital HCA  
|             | West Palm Beach, FL  
| From:      | 02/26/2014  
| To:        | 03/31/2016  
| Specialty: | Internal Medicine/Critical Care Medicine  
|             | Palms West Hospital  
|             | Loxahatchee, FL  
| From:      | 03/21/2014  
| To:        | Present  
| Specialty: | Internal Medicine/Critical Care Medicine  
|             | Westside Regional Medical Center (HCA)  
|             | Plantation, FL  
| From:      | 08/07/2014  
| To:        | 05/31/2019  
| Specialty: | Internal Medicine/Critical Care Medicine  
|             | Plantation General Hospital (HCA)  
|             | Plantation, FL  
| From:      | 12/17/2014  
| To:        | 10/19/2016  
| Specialty: | Internal Medicine/Critical Care Medicine  
|             | JFK Medical Center (HCA)  
|             | Atlantis, FL  
| From:      | 03/01/2016  
| To:        | Present  
| Specialty: | Internal Medicine/Critical Care Medicine  

Ijad Najj, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Hospital Affiliations/Work History (continued):

Brandon Regional Medical Center (HCA)
Brandon, FL
From: 03/07/2016
To: 02/05/2018
Specialty: Internal Medicine/Critical Care Medicine

Northwest Medical Center (HCA)
Margate, FL
From: 03/29/2018
To: Present
Specialty: Internal Medicine/Critical Care Medicine

Board Certification:

Board: American Board of Internal Medicine
Specialty: Internal Medicine
Certification Date: 08/19/2003
MOC Reverification Date: N/A
Certification Expiration: 12/31/2023

Board: American Board of Internal Medicine
Specialty: Infectious Disease
Certification Date: 10/06/2010
MOC Reverification Date: N/A
Certification Expiration: 12/31/2020

Board: American Board of Internal Medicine
Specialty: Critical Care Medicine
Certification Date: 11/09/2011
MOC Reverification Date: N/A
Certification Expiration: 12/31/2021
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: **Thesalee N Randon MD**

Date of Birth: 08/28/1974

Citizenship: US

Primary Facility: Broward Health North

Other Broward Health Facilities:
- Broward Health Coral Springs
- Broward Health Medical Center

Specialty(ies):
- Pediatric Emergency
- Pediatric ED Fast Track (BHMC Only)

Dept. at Primary Facility: Emergency Medicine

Secondary Facility Depts.:
- Emergency Medicine
- Medicine

Practice Name: Envision Physician Services
Website: [www.envisionphysicianservices.com](http://www.envisionphysicianservices.com)

Primary Address Information:
- Broward Health North - Emergency Department
- 201 E. Sample Road
- Deerfield Beach, FL 33064
- Phone: 954-786-6800
- Fax: 954-786-6719
- Email: Kimberly.Durcan@envision.com

ECFMG:
- Number: 0-630-948-8
- Date Issued: 02/25/2003

Medical/Professional School: University of West Indies-Jamaica
- Jamaica,
- From: 07/01/1995
- To: 06/30/2000
- Degree: MD

Gap:
- Worked as a House Officer
- Nassau, Bahamas
- From: 07/01/2000
- To: 06/23/2003

Foreign Internship:
- Princess Margaret Hospital
- Nassau, Bahamas
- From: 06/24/2003
- To: 06/23/2004
- Specialty: Traditional Rotating Internship

Internship/Residency:
- University Of Miami School Of Medicine
- Coral Gables, FL
- From: 07/01/2003
- To: 06/30/2006
- Specialty: Pediatrics

Fellowship: N/A

Thesalee N Randon, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

**Hospital Affiliations/Work History:**

Children's National Medical Center
Washington, DC
From: 08/01/2006
To: 05/31/2010
Specialty: Pediatric Emergency

**Gap:**
Relocation to a rural community for my husband's J1-waiver job
From: 09/01/2010
To: 05/31/2012

Colquitt Regional Medical Center
Moultrie, GA
From: 06/01/2012
To: 11/30/2013
Specialty: Pediatrics

**Gap:**
Relocation from Georgia to Florida. Applied for Hospital Credentialing.
From: 12/01/2013
To: 03/17/2014

St. Mary's Medical Center
West Palm Beach, FL
From: 03/18/2014
To: 03/31/2015
Specialty: Pediatric Emergency Medicine

West Florida Hospital (HCA)
Pensacola, FL
From: 12/15/2015
To: 11/08/2016
Specialty: Pediatric Emergency Medicine

**Gap:**
Spending time with family, and taking care of ill mother
From: 11/09/2016
To: Present

**Board Certification:**
Board: American Board of Pediatrics
Specialty: Pediatrics
Certification Date: 10/24/2006
MOC Reverification: 02/15/2020
Certification Expiration: N/A

Thesalee N Randon, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Bharat Ranganath MD

Date of Birth: 10/17/1987
Citizenship: US
Primary Facility: Broward Health Medical Center
Other Broward Health Facilities: None
Specialty(ies) Plastic Surgery
Dept. at Primary Facility: Surgery
Secondary Facility Depts.: None
Practice Name: Vanguard Plastic Surgery, PLLC
Website: http://vapsfl.com/

Primary Address Information:
2320 NE 9th Street
Suite 300
Fort Lauderdale, FL 33301
Phone: 954-563-4500
Fax: 954-530-0399
Email: ajdreszer@vapsfl.com

ECFMG: N/A
Medical/Professional School: Drexel University College of Medicine
Philadelphia, PA
From: 08/01/2008
To: 05/15/2012
Degree: MD

Residency: Lehigh Valley Health Network
Allentown, PA
From: 06/24/2012
To: 06/23/2015
Specialty: General Surgery

Residency: Lehigh Valley Health Network
Allentown, PA
From: 06/24/2015
To: 06/23/2018
Specialty: Plastic Surgery

Fellowship: Memorial Sloan-Kettering Cancer Center
New York, NY
From: 07/01/2018
To: 06/30/2019
Specialty: Microsurgery Fellowship

Hospital Affiliations/Work History: N/A

Board Certification:
Board: American Board of Plastic Surgery
Specialty: Plastic Surgery
Eligibility Date: 06/30/2019
MOC Reverification Date: N/A
Eligibility Expiration Date: 05/30/2026

Bharat Ranganath, MD
Name: Carlos Ricart MD
Date of Birth: 12/13/1958
Citizenship: US
Primary Facility: Broward Health Imperial Point
Other Broward Health Facilities:
- Broward Health Coral Springs
- Broward Health Medical Center
- Broward Health North
Specialty(ies): Pathology
Dept. at Primary Facility: Pathology
Secondary Facility Depts.:
- Surgery
- Pathology
Practice Name: FirstPath Laboratory Services, LLC
Website: www.firstpathlab.com
Primary Address Information:
3141 West McNab Road
Fort Lauderdale, FL 33069
Phone: 954-977-6977
Fax: 954-977-6922
Email: sfemandez@firstpathlab.com
ECFMG:
Number: 0-355-225-4
Date Issued: 05/31/1985
Medical/Professional School: Universidad Nacional Pedro Henriquez Urena
Santo Domingo, Dominican Republic
From: 07/01/1978
To: 12/01/1982
Degree: MD
Foreign Hospital Affiliations/Work History:
Social Services Work
Centro Sanitario, Dominican Republic
From: 12/02/1982
To: 08/31/1984
Degree: MD
Gap:
Completed a Pathology Externship at Danbury Hospital
Danbury, CT
From: 09/01/1984
To: 06/30/1985
Residency:
Danbury Hospital - Yale Affiliate
Danbury, CT
From: 07/01/1985
To: 05/30/1989
Specialty: Anatomical and Clinical Pathology
Fellowship:
Danbury Hospital - Yale Affiliate
Danbury, CT
From: 07/01/1989
To: 06/30/1990
Specialty: Anatomical and Clinical Pathology

Carlos Ricart, MD
**Broward Health – Credentialing Abstract – Medical Staff Applicant**

**Fellowship:**

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<th>Hospital</th>
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<th>To</th>
<th>Specialty</th>
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<tr>
<td>Thomas Jefferson University Hospital</td>
<td>07/01/1990</td>
<td>06/30/1991</td>
<td>Blood Bank</td>
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<tr>
<td>Philadelphia, PA</td>
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<tr>
<td>Rutgers University, New Brunswick, NJ</td>
<td>07/01/1991</td>
<td>06/30/1992</td>
<td>Hematopathology</td>
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**Hospital Affiliations/Work History:**

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<tr>
<td>West Jersey Hospital system (Virtue) Voorhees, NJ</td>
<td>08/01/1992</td>
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<td>Pathologist</td>
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<td>Impath Laboratory (unable to verify – records no longer available) New York, NY</td>
<td>10/28/1995</td>
<td>02/18/1999</td>
<td>Hematopathologist</td>
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<tr>
<td>Robert Wood Johnson - University Hospital/Hamilton Hamilton, NJ</td>
<td>06/29/1999</td>
<td>11/01/2008</td>
<td>AnatOMIC/Clinical Pathology</td>
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<td>Pathmed Associates, LLC (unable to verify – facility closed) Atlantis, FL</td>
<td>03/01/2008</td>
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<td>JFK Medical Center (HCA) Atlantis, FL</td>
<td>04/24/2008</td>
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<td>AnatOMIC/Clinical Pathology</td>
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<td>Palms West Surgery Center Loxahatchee, FL</td>
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<td>West Palm Hospital HCA West Palm Beach, FL</td>
<td>01/26/2011</td>
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Carlos Ricart, MD
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<td>Vitro Molecular Laboratory</td>
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<td>From:</td>
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<td>To:</td>
<td>09/28/2019</td>
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<tr>
<td>Title:</td>
<td>Senior hematopathologist</td>
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<td>Bayside Ambulatory Center</td>
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<tr>
<td>North Miami Beach Surgical Center</td>
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<td>From:</td>
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<tr>
<td>Surgical Park Center</td>
<td>Aventura, FL</td>
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<tr>
<td>Surgery Center of Aventura</td>
<td>Aventura, FL</td>
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<td>From:</td>
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<td>Miami Lakes Surgery Center</td>
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<tr>
<td>Atlantis Outpatient Center</td>
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### Broward Health – Credentialing Abstract – Medical Staff Applicant

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| Board:               | American Board of Pathology                       |
| Specialty:           | Hematology                                        |
| Certification Date:  | 05/31/1993                                        |
| MOC Reverification:  | N/A                                               |
| Certification Expiration: | Lifetime                      |
Broward Health – Credentialing Abstract – Medical Staff Applicant

Name: Edward S Walker MD

Date of Birth: 06/05/1952
Citizenship: US
Primary Facility: Broward Health Imperial Point
Other Broward Health Facilities: Broward Health Medical Center
Specialty(ies): Internal Medicine
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: Medicine
Practice Name: Edward S. Walker, MD, PA
Website: N/A

Primary Address Information:
2001 NE 48 Court
Suite 1
Fort Lauderdale, FL 33308
Phone: 954-772-9922
Fax: 954-772-9997
Email: dr.eswalker@gmail.com

ECFMG: N/A
Medical/Professional School: University of South Florida
Tampa, FL
From: 09/30/1977
To: 06/30/1979
Degree: MD

Internship:
SUNY Downstate Medical Center/Kings County Hospital
Brooklyn, NY
From: 07/01/1979
To: 06/30/1980
Specialty: General Surgery

Residency:
SUNY Downstate Medical Center/Kings County Hospital
Brooklyn, NY
From: 07/01/1980
To: 06/30/1982
Specialty: Internal Medicine

Hospital Affiliations/Work History:
Las Olas Hospital (Kindred Hospital)
Fort Lauderdale, FL
From: 07/01/1982
To: 06/30/1984
Specialty: Internal Medicine

North Beach Hospital
Fort Lauderdale, FL
From: 07/01/1983
To: 06/30/1984
Specialty: Internal Medicine

Edward S Walker, MD
Broward Health – Credentialing Abstract – Medical Staff Applicant

**Residency:**
St. Vincent’s Hospital and Medical Center  
Brooklyn, NY  
From: 07/01/1984  
To: 06/30/1987  
Specialty: Internal Medicine

**Fellowship:**
N/A

**Hospital Affiliations/Work History:**
Broward Health Medical Center  
Fort Lauderdale, FL  
From: 09/23/1987  
To: 12/17/2014  
Specialty: Internal Medicine

Holy Cross Hospital  
Fort Lauderdale, FL  
From: 10/12/1987  
To: Present  
Specialty: Internal Medicine/Geriatric Medicine

Broward Health Imperial Point  
Fort Lauderdale, FL  
From: 10/28/1987  
To: Present  
Specialty: Internal Medicine

Kindred Hospital  
Fort Lauderdale, FL  
From: 06/30/2000  
To: 06/29/2013  
Specialty: Internal Medicine

**Board Certification:**
Board: American Board of Internal Medicine  
Specialty: Internal Medicine  
Certification Date: 09/16/1987  
MOC Reverification: N/A  
Certification Expiration: Lifetime

Board: American Board of Internal Medicine  
Specialty: Geriatric Medicine  
Certification Date: 04/10/1992  
MOC Reverification: N/A  
Certification Expiration: 12/31/2022

Board: American Board of Internal Medicine  
Specialty: Hospice and Palliative Medicine  
Certification Date: 11/16/2010  
MOC Reverification: N/A  
Certification Expiration: 12/31/2020

Edward S Walker, MD
# Broward Health – Credentialed Abstract – Medical Staff Applicant

**Name:**  
Rebecca E Wiesenfeld MD

**Date of Birth:**  
03/12/1987

**Citizenship:**  
US

**Primary Facility:**  
Broward Health Medical Center

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

** Specialty(ies):**  
Emergency Medicine

**Dept. at Primary Facility:**  
Emergency Medicine

**Secondary Facility Depts.:**  
Medicine

**Practice Name:**  
Envision Physician Services  
Website: [www.envisionhealth.com](http://www.envisionhealth.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@envisionhealth.com

**ECFMG:**  
N/A

**Medical/Professional School:**  
Florida International University  
Miami, FL  
From: 08/01/2011  
To: 05/31/2015  
Degree: MD

**Internship:**  
N/A

**Residency:**  
Christiana Care Health Services  
Newark, DE  
From: 07/01/2015  
To: 05/30/2018  
Specialty: Emergency Medicine

**Fellowship:**  
N/A

**Hospital Affiliations/Work History:**  
EMPro’s  
Ormond Beach, FL  
From: 07/01/2018  
To: Present  
Specialty: Emergency Medicine

**Board Certification:**  
Board: American Board of Emergency Medicine  
Specialty: Emergency Medicine  
Certification Date: 06/04/2019  
MOC Expiration: N/A  
Certification Expiration: 12/31/2029
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Stephanie Fajardo, APRN

Date of Birth: 07/25/1990

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: None

Specialty: Nurse Practitioner

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: None

Physician Sponsorship: Guillermo J Valenzuela, MD

Practice Name: Guillermo Valenzuela, MD PA

Primary Address Information:
140 SW 84th Avenue
Suite B
Plantation, FL 33324
Phone: 954-476-2338
Fax: 954-476-5695
Email: atejas@irishrheumatology.com

Professional School:
Nova Southeasern University
Ft. Lauderdale, FL
From: 03/07/2016
To: 08/17/2018
Degree: MSN
Major: Family Nurse Practitioner

Hospital Affiliations/ Work History:
Baptist Hospital of Miami
Miami, FL
From: 02/22/2016
To: 05/03/2019
Title: RN

Integral Rheumatology & Immunology Specialists
Plantation, FL
From: 05/06/2019
To: Present
Title: APRN

Board Certification:
Board: American Nurses Credentialing Center
Specialty: Family Nurse Practitioner
Certification Date: 10/08/2018
Certification Expiration: 10/07/2023

Stephanie Fajardo, APRN
Broward Health — Credentialing Abstract — Allied Health Professional Applicant

Name: Octavio O Gaytan, CRNA

Date of Birth: 11/12/1973

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: None

Specialty: Nurse Anesthetist

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Physician Sponsorship: Edward A Czinn, MD

Practice Name: Anesco, LLC
Website: www.drivinghp.com

Primary Address Information:
3501 West Commercial Boulevard
Suite 4/5
Fort Lauderdale, FL 33309
Phone: 954-485-6066
Fax: 954-484-1651
Email: bmelendez@anesco.net

Professional School: Barry University
Miami Shores, FL
From: 01/09/2017
To: 05/11/2019
Degree: MS
Major: Anesthesiology

Hospital Affiliations/Work History: None

Gap:
Employment seeking and completing Broward Health's credentialing process
From: 05/12/2019
To: Present

Board Certification:
Board: National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA)
Specialty: Certified Registered Nurse Anesthetist (CRNA)
Certification Date: 05/10/2019
Certification Expiration: 05/30/2023
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Vanessa M Hernandez, APRN

Date of Birth: 08/13/1992
Citizenship: US
Primary Facility: Broward Health Medical Center
Other Broward Health Facilities: None
Specialty: Nurse Practitioner
Dept. at Primary Facility: Medicine
Secondary Facility Depts.: None
Physician Sponsorship: Hector L DiCarlo, MD
Practice Name: Hector DiCarlo, MD, PA
Primary Address Information:
500 SE 17th street
Suite 110
Fort Lauderdale, FL 33316
Phone: 954-533-1173
Fax: 954-533-0723
Email: nancyd@dicarlo.md

Professional School: University of Miami
Coral Gables, FL
From: 01/08/2018
To: 08/10/2018
Degree: Master of Nursing
Major: Family Nurse Practitioner

Hospital Affiliations/ Work History:
Memorial Regional Hospital
Hollywood, FL
From: 03/12/2015
To: Present
Title: Registered Nurse
Nicklaus Children’s Hospital
From: 04/25/2016
To: 01/09/2019
Title: Registered Nurse
Hector DiCarlo, MD, PA
Fort Lauderdale, FL
From: 03/11/2019
To: Present
Title: Nurse Practitioner

Board Certification:
Board: American Nurses Credentialing Center
Specialty: Family Nurse Practitioner
Certification Date: 10/21/2018
Certification Expiration: 10/11/2023
Erika Maggi, PA-C

Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Erika Maggi PA-C

Date of Birth: 04/18/1990

Citizenship: US

Primary Facility: Broward Health Medical Center

Other Broward Health Facilities: None

Specialty: Physician Assistant

Dept. at Primary Facility: Surgery

Secondary Facility Depts.: None

Physician Sponsorship: Carl Eierle, MD

Practice Name: Orthopedic Center of South Florida
Website: www.orf.org

Primary Address
Information: 800 South Pine Island Road
Suite 300
Plantation, FL 33324
Phone: 954-473-6344
Fax: 954-476-9077
Email: jesilvnm@ccsfdocs.com

Professional School: South College
Knoxville, TN
From: 09/01/2014
To: 12/13/2016
Degree: Master of Health Science
Major: Physician Assistant

Gap:
Moved back to Florida with family, studied for the boards, while applying for Florida licensure and seeking employment.
From: 12/14/2016
To: 04/09/2017

Hospital Affiliations/Work History:
Orthopedic Center of South Florida
Plantation, FL
From: 04/10/2017
To: Present
Title: Physician Assistant

Memorial Hospital West
Pembroke Pines, FL
From: 07/26/2017
To: Present
Specialty: Physician Assistant

Westside Regional Medical Center (HCA)
Plantation, FL
From: 09/17/2017
To: Present
Specialty: Physician Assistant
**Broward Health – Credentialing Abstract – Allied Health Professional Applicant**

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Erika Maggi, PA-C
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Victoria J Verrengia PA-C

Date of Birth: 08/19/1989

Citizenship: US

Primary Facility: Broward Health North

Other Broward Health Facilities:

Broward Health Medical Center

Specialty: Physician Assistant

Dept. at Primary Facility: Surgery

Secondary Facility Depts.:

Surgery

Physician Sponsorship: Ashish Sahai, MD

Practice Name: Neurospine Institute, LLC
Website: www.spineorthocenter.com

Primary Address Information:

280 SW Natura Avenue
Deerfield Beach, FL 33441
Phone: 561-549-9090
Fax: 954-530-0902
Email: Admin@spineoc.com

Professional School:

Bay Path University
East Longmeadow, MA
From: 08/02/2014
To: 05/18/2016
Major: Physician Assistant

Gap:

Prepped for Board Test, and applied for hospital credentialing.

From: 05/17/2016
To: 09/05/2016
Major: Physician Assistant

Hospital Affiliations/Work History:

Bethesda Hospital East
Boynton Beach, FL
From: 09/05/2016
To: Present
Specialty: Physician Assistant

Delray Outpatient Surgery and Laser Center
Delray Beach, FL
From: 09/01/2016
To: Present
Specialty: Physician Assistant

Delray Medical Center
Delray Beach, FL
From: 11/23/2016
To: Present
Specialty: Physician Assistant

Board Certification:

Board: National Commission on Certification of Physician Assistants
Specialty: Physician Assistant - Certified (PA-C)
Certification Date: 06/16/2016
Certification Expiration: 12/31/2020

Victoria J Verrengia, PA-C
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Name: Marivil Castro-Santiago, ARNP

Date of Birth: 08/14/1968

Citizenship: US

Primary Facility: Broward Health Medical Center (CHS Only)

Other Broward Health Facilities: None

Specialty: Nurse Practitioner

Dept. at Primary Facility: Medicine

Secondary Facility Depts.: None

Physician Sponsorship: Archie McLean Jr., DO

Practice Name: Specialty Care Center
Website: Bhowardhealth.org

Primary Address Information:
1111 West Broward Boulevard
Fort Lauderdale, FL 33312
Phone: 954-463-7313
Fax: 954-462-6890

Professional School:
South University
Tampa, FL
From: 01/14/2012
To: 03/28/2014
Degree: MSN

Hospital Affiliations/Work History:
Osceola Regional Medical Center
Kissimmee, FL
From: 04/29/2013
To: 04/01/2015
Title: Registered Nurse

OBT Medical Clinic
Orlando, FL
From: 09/01/2014
To: 12/05/2014
Title: Nurse Practitioner

Miami Blue Health Sport Medicine Clinic
Hialeah, FL
From: 10/01/2014
To: 02/01/2015
Title: Nurse Practitioner

Your Home Advantage
Deerfield Beach, FL
From: 11/30/2014
To: 12/30/2014
Title: Nurse Practitioner

SunCoast Premier Medical
Clermont, FL
From: 02/02/2015
To: 02/21/2015
Title: Nurse Practitioner

Marivil Castro, ARNP
Broward Health – Credentialing Abstract – Allied Health Professional Applicant

Pompano Beach Internal Medicine
Pompano Beach, FL
From: 02/27/2015
To: 03/23/2016
Title: Nurse Practitioner

Veterans Evaluation Services
Miami, FL
From: 04/01/2016
To: 11/01/2016
Title: Nurse Practitioner

Broward Health
Fort Lauderdale, FL
From: 11/28/2016
To: Present
Title: Nurse Practitioner

Broward Health Medical Center
Fort Lauderdale, FL
From: 12/20/2017
To: 11/28/2018
Title: Nurse Practitioner

Board Certification:
Board: American Academy of Nurse Practitioners
Specialty: Family Nurse Practitioner
Certification Date: 06/25/2014
Certification Expiration: 06/24/2024

Marivi Castro, ARNP
DATE: September 25, 2019

FACILITY
Broward Health (Health Information Management)
- Broward Health Coral Springs
- Broward Health Imperial Point
- Broward Health Medical Center
- Broward Health North
- Broward Health Weston

PRODUCT LINE: Coding and Reimbursement Software

REQUEST: Renewal of the 3M Health Information Systems Coding and Reimbursement software suite.

PURPOSE: To provide coding and reimbursement software to support the billing function. 3M which includes regulatory guidelines, coding education and reporting capabilities.

STRATEGIC INITIATIVE(S) SUPPORTED The 3M Coding and Reimbursement software suite will support Broward Health’s initiative to demonstrate positive financial and operational outcomes by assisting the coder to assign the appropriate ICD-10-CM, ICD-10-PCS and CPT codes that will result in clean claims and assure proper reimbursement.

CAPITAL REQUIRED: $0

FISCAL IMPACT:
FY20: $865,334.05
FY21: $891,294.07
FY22: $918,032.89
FY23: $945,573.88
FY24: $973,941.10

BUDGET STATUS: Budgeted Fiscal Year 2020 and yearly thereafter.

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
MEMORANDUM

TO: Board of Commissioners

FROM: Gino Santorio, President/CEO

DATE: September 25, 2019

SUBJECT: Renewal of the 3M Health Information Systems Coding and Reimbursement Software suite.

BACKGROUND

The 3M system has been in use at Broward Health since 2004. All coding and abstracting is performed and contained within the 3M system. The coding includes ICD-10-CM, ICD-10-PCS and CPT to support the billing function. The coding data is used for clinical and business decision making. Health Information Management produces many reports for the hospital stakeholders using the 3M software.

The existing system is a legacy database system and continues to meet the needs of the enterprise. After reviewing the industry alternatives, the HIM Managers request approval to renew the existing 3M coding system contract.

ACTION / PROJECT DESCRIPTION

The Health Information Management Departments request the renewal of the existing coding and reimbursement software with 3M. This includes the following 3M software products:

- Coding & Reimbursement
- Coding reference
- Data Collection & Reporting
- Outpatient revenue tracking and analysis
- Audit Expert software

Used by over 5,000 hospitals worldwide, the 3M coding and reimbursement system incorporates expert technology to help coders evaluate and apply coding and grouping rules to various types of patient accounts. This suite of software products helps ensure accurate, precise coding for decision support and appropriate reimbursement. The 3M system uses concurrent compliance auditing tools for both inpatient and outpatient records. As part of the contract, 3M also provides coding research assistance via a toll free number or the internet.
FINANCIAL / BUDGETARY IMPACT

Operating expenses are expected to be $865,334.05 for year one (2% increase over FY 2019); $891,294.07 for year two, $918,032.89 for year three, $945,573.88 for year four and $973,941.10 for year five.

JUSTIFICATION

3M is the clear leader for medical record coding software with over 85% of the market. 3M provides the latest reference materials in an ever-changing regulatory environment.

The existing system is a legacy database system and continues to meet the needs of the enterprise.

STAFF RECOMMENDATIONS

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to renew the contract with 3M Health Information Systems for five years.
SUMMARY OF REQUEST

DATE: September 25, 2019

FACILITY: System-Wide

PROGRAM/PRODUCT LINE: Radiology and Information Technology

REQUEST: Request of Board of Commissioners of the North Broward Hospital District to renew the enterprise-wide Radiology Picture Archiving system, Intellispace, from Philips Healthcare for a term of seven (7) years along with the implementation services required for the Advanced Mammography functionality, Radiologist Workspace functionality, and Hanging Protocols optimization.

PURPOSE: To continue to fulfill the requirements for an enterprise-wide digital imaging environment for all Broward Health Radiology Departments in an expedited time frame and at reduced costs and terms favorable to Broward Health. An RFI was released in February 2019 solely to validate the renewal proposal was cost competitive for equal features and functions. Operating and Capital costs comparisons were performed. The Capital costs to move away from Philips ranged from $4.6 Million (Fuji) to $5.6 Million (Agfa). In addition, the operating costs would increase from current $2.50 to $4.22 fee per study

CAPITAL REQUIRED: $409,119

FISCAL IMPACT: FY20 - FY27 - $1,308,622.45
This is based on historical volumes 630,398 studies per year.
5 year Agreement is $2.52 per study
7 year Agreement is $2.17 per study
Over 7 years Broward would save ~$1.2m

BUDGET STATUS: This is currently 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

Gino Santorio, President/CEO BH
MEMORANDUM

TO: Board of Commissioners
FROM: Gino Santorio, President/CEO BH
DATE: September 25, 2019
SUBJECT: Request of Board of Commissioners of the North Broward Hospital District to renew the enterprise-wide Radiology Picture Archiving system, Intellispace, from Philips Healthcare for a term of seven (7) years along with the implementation services required for the Advanced Mammography functionality, Radiologist Workspace functionality and Hanging Protocols optimization.

BACKGROUND

The current Philips agreement will expire December 31, 2019

ACTION/PROJECT DESCRIPTION

Approval to renew the enterprise-wide Radiology Picture Archiving system, Intellispace, from the Vendor Philips Healthcare for a term of seven (7) years along with the implementation services required for the Advanced Mammography functionality, Radiologist Workspace functionality and Hanging Protocols optimization.

FINANCIAL/BUDGETARY IMPACT

FY20 -FY27 - $1,308,622.45
Historical volume of 630,398 studies per year
Current Agreement is $2.50 per study
5-year Agreement is $2.52 per study
7-year Agreement is $2.17 per study
If we opt for a 7-year Agreement, Broward would save ~$1.2m.

JUSTIFICATION

An RFI was released in February 2019 solely to validate the renewal proposal was cost competitive for equal features and functions. Operating and Capital costs comparisons were performed. The Capital costs to move away from Philips ranged from $4.6 Million (Fuji) to $5.6 Million (Agfa). In addition, the operating costs would increase from current $2.50 to $4.22 fee per study.

STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to renew the enterprise-wide Radiology Picture Archiving system, Intellispace, from Vendor Philips Healthcare for $1,308,622.45 over a contract term of seven years.
(7) years along with the implementation services required for the Advanced Mammography functionality, Radiologist Workspace functionality and Hanging Protocols optimization.
SUMMARY OF REQUEST

DATE: September 25, 2019

FACILITY: Broward Health Physician Group

PROGRAM/PRODUCT LINE: Pediatric Hematology Oncology Service Line

REQUEST: Approval to enter into a new two-year employment agreement up to the 91st percentile with Dr. Hector Rodriguez-Cortes for clinical and Medical Director Pediatric Hematology Oncology services.

PURPOSE: To continue to provide clinical and Medical Director Pediatric Hematology Oncology services to the community.

CAPITAL REQUIRED: None

FISCAL IMPACT: An independent third-party appraiser has determined: (1) the arrangement to be commercially reasonable, and (2) the total maximum compensation is within Fair Market Value (FMV).

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, President/CEO BH

DATE: 08–22-19
MEMORANDUM

TO: Board of Commissioners
FROM: Gino Santorio, President/CEO BH
DATE: September 25, 2019

SUBJECT: Approval to enter into a new two-year employment agreement with Dr. Hector Rodriguez-Cortes up to the 91st percentile to provide clinical and Medical Directorship Pediatric Hematology Oncology services within the community.

BACKGROUND

The Physician Group of North Broward Hospital District d/b/a Broward Health ("Broward Health"), is seeking to enter into a new employment agreement with Dr. Hector Rodriguez-Cortes. Dr. Hector Rodriguez-Cortez has a current agreement that is expiring. Dr. Hector Rodriguez-Cortes received his Doctor of medicine, having received a medical degree from the University of Puerto Rico School of Medicine in San Juan, Puerto Rico in 1991. Physician has completed a residency in Pediatrics at the Pediatric University Hospital, University of Puerto Rico School of Medicine, San Juan, Puerto Rico, in June, 1992, a residency in General Pediatrics at Pediatric University Hospital, University of Puerto Rico School of Medicine, San Juan, Puerto Rico in June, 1994, a post-doctoral clinical and research fellowship in Pediatric Hematology Oncology at the University of Texas Southwestern Medical Center and Children's Medical of Dallas, Dallas Texas in June, 1997 is board certified in Pediatric Hematology Oncology, and has obtained and currently maintains an unrestricted license to practice medicine in the State of Florida. Dr. Rodriguez-Cortes joined Broward Health in 2005 and has been instrumental in the development of Broward Health Medical Center's Pediatric Hematology Oncology Program. The program has implemented live-saving cancer treatment protocols for Broward Health's Pediatric Hematology Oncology population. A community needs assessment has shown an insufficient number of pediatric hematology oncologists to meet the current and future needs of Broward Health's service area. Dr. Rodriguez-Cortes will be extending the Pediatric Hematology Oncology program to the western part of Broward County where he will be providing better access to care.

ACTION/PROJECT DESCRIPTION

Broward Health is requesting that the Board of Commissioners authorize the President/CEO to enter into a new contractual agreement with Dr. Hector Rodriguez-Cortes for a 2-year term. A fair market value assessment for the proposed payment to Dr. Rodriguez-Cortes was conducted by an independent third party with FMV up to the 91st percentile and deemed to be within the FMV for similar services being provided across the country and the arrangement was determined to be commercially reasonable. Dr. Rodriguez-Cortes will be at the Salah Children's Foundation at BHMC.
Administrative Services will include being Medical Director for the Pediatric Hematology Oncology Department and Salah Foundation Children's Hospital at BHMC. He will also be responsible for serving as the principal investigator for the Pediatric Cancer Children's Oncology Group. This is budgeted for FY20.

**FINANCIAL/BUDGETARY IMPACT**

The proposed salary is budgeted for FY 20.

**JUSTIFICATION**

Broward Health has documented and objectively determined that there is a legitimate business purpose to provide Pediatric Hematology Oncology services at Broward Health Medical Center (BHMC).

Recommendations from the Community Needs Assessment suggest that a critical priority is providing better access to care by enhancing access to specialists throughout the service area.

**STAFF RECOMMENDATION**

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to enter into a new two-year employment agreement with a medical directorship up to the 91st percentile with Dr. Hector Rodriguez-Cortes for the provision of Pediatric Hematology Oncology services at Broward Health Medical Center.
SUMMARY OF REQUEST

DATE: September 25, 2019

FACILITY: Broward Health Physician Group

PROGRAM/PRODUCT LINE: Pediatric Hematology Oncology Service Line

REQUEST: Approval to enter into a new two-year employment agreement up to the 78th percentile with Dr. Alejandro Cambara for Pediatric Hematology Oncology services.

PURPOSE: To provide Pediatric Hematology Oncology clinical care services to the community.

CAPITAL REQUIRED: None

FISCAL IMPACT: An independent third-party appraiser has determined: (1) the arrangement to be commercially reasonable, and (2) the total maximum compensation is within Fair Market Value (FMV).

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, President/CEO BH

DATE: 8/22/19
MEMORANDUM

TO: Board of Commissioners
FROM: Gino Santorio, President/CEO BH
DATE: September 25, 2019
SUBJECT: Approval to enter into a new two-year employment agreement up to the 78th percentile with Dr. Alejandro Cambara for Pediatric Hematology Oncology services

BACKGROUND

The Physician Group of North Broward Hospital District d/b/a Broward Health ("Broward Health"), is seeking to enter into a new employment agreement with Dr. Alejandro Cambara. Dr. Alejandro Cambara has a current agreement that is expiring. Dr. Alejandro Cambara received his Doctor of Medicine from University of Havana in Havana, Cuba, in 1995. He completed a residency in Pediatrics at the UPR Pediatric Hospital, in San Juan, Puerto Rico, in 2007, a fellowship in Pediatric Hematology-Oncology at the UPR Pediatric Hospital in San Juan, Puerto Rico in 2010, is board certified in Pediatric Hematology Oncology, and has obtained and currently maintains an unrestricted license to practice medicine in the State of Florida. As a safety-net system Broward Health is obligated to provide services to meet the community needs. Broward Health has documented and objectively determined that there is a legitimate business purpose for the services of a qualified physician to provide Pediatric Hematology Oncology services within the Broward Health service area. Dr. Cambara joined Broward Health in 2011 and has been instrumental in the development of Broward Health Medical Center's Pediatric Hematology Oncology Program. The program has implemented live-saving cancer treatment protocols for Broward Health's Pediatric Hematology Oncology population. A community needs assessment has shown an insufficient number of pediatric hematology oncologists to meet the current and future needs of Broward Health's service area. Dr. Cambara will be extending the Pediatric Hematology Oncology program to the western part of Broward County located in the Coral Springs region.

ACTION/PROJECT DESCRIPTION

Broward Health is requesting that the Board of Commissioners authorize the President/CEO to enter into a new contractual employment agreement with Dr. Alejandro Cambara for a two-year term. An independent third-party appraisal report determined that the proposed arrangement is commercially reasonable and the compensation is within fair market value. Specifically, the proposed salary is a one-year guaranteed base salary transitioning to the productivity model in year two set at the 51st percentile, twenty percent (20%) at risk for satisfaction of quality and compliance metrics, and an overall maximum compensation up to the 78th percentile.
FINANCIAL/BUDGETARY IMPACT

The proposed salary is budgeted for FY 20.

JUSTIFICATION

Broward Health has documented and objectively determined that there is a legitimate business purpose to provide Pediatric Hematology Oncology services at Broward Health Medical Center (BHMC).

Recommendations from the Community Needs Assessment suggest that a critical priority is providing better access to care by enhancing access to specialists throughout the service area.

STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to enter into a new two-year employment agreement up to the 78th percentile with Dr. Alejandro Cambara for the provision of Pediatric Hematology Oncology services at Broward Health Medical Center.
DATE: September 25, 2019

FACILITY: Broward Health Physician Group

PROGRAM/PRODUCT LINE: Interventional Cardiology Service Line

REQUEST: Approval to enter into a new two-year employment agreement up to the 77th percentile with Dr. Violeta A. McCormack for clinical and Medical Director Interventional Cardiology services.

PURPOSE: To provide clinical and Medical Director Interventional Cardiology clinical care services to the community.

CAPITAL REQUIRED: None

FISCAL IMPACT: An independent third-party appraiser has determined: (1) the arrangement to be commercially reasonable, and (2) the total maximum compensation is within Fair Market Value (FMV).

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, President/CEO BH

DATE: 08-22-19
MEMORANDUM

TO: Board of Commissioners
FROM: Gino Santorio, President/CEO BH
DATE: September 25, 2019
SUBJECT: Approval to enter into a new two-year employment agreement with Dr. Violeta A. McCormack up to the 77th percentile to provide clinical and Medical Directorship Interventional Cardiology services within the community.

BACKGROUND

The Physician Group of North Broward Hospital District d/b/a Broward Health ("Broward Health"), is seeking to enter into a new employment agreement with Dr. Violeta McCormack. Dr. McCormack has a current contract that is expiring. Dr. McCormack has completed an internship in Internal Medicine at Southern Nevada Memorial Hospital, University Medical Center, Las Vegas, Nevada in June, 1984, a residency in Internal Medicine at Southern Nevada Memorial Hospital, University Medical Center, Las Vegas, Nevada in December, 1985, a fellowship in Cardiology at University Medical Center, Las Vegas, Nevada in June, 1988, a third year fellowship in Cardiology at University of Miami, Jackson Memorial Medical Center, Miami, Florida in June, 1989, is board certified in Internal Medicine and Cardiovascular Disease, provides medical services to patients in the medical specialty of Interventional Cardiology, and has obtained and currently maintains an unrestricted license to practice medicine in the State of Florida.

As a safety-net system Broward Health is obligated to provide services to meet the community needs. Broward Health has documented and objectively determined that there is a legitimate business purpose for the services of a qualified physician to provide clinical and Medical Directorship Interventional Cardiology services within the Broward Health service area. Dr. McCormack joined Broward Health in 2005 and has been instrumental in the development of Broward Health Medical Center's Cardiac Catheterization Laboratories and Interventional Cardiology Program. A community needs assessment has shown an insufficient number of Interventional Cardiologists to meet the current and future needs of Broward Health’s service area. Dr. McCormack will continue to serve the growing needs of our community.
ACTION/PROJECT DESCRIPTION

Broward Health is requesting that the Board of Commissioners authorize the President/CEO to enter into a new contractual agreement with Dr. Violeta McCormack for a two-year term. A fair market value assessment for the proposed payment to Dr. Violeta McCormack was conducted by an independent third-party and deemed to be within the FMV for similar services being provided across the country and the arrangement was determined to be commercially reasonable. Specifically the proposed base salary is set at the 41st percentile, clinical maximum compensation is set at the 65th percentile which includes 20% at risk for satisfaction of quality and compliance metrics, and overall maximum compensation up to the 77th percentile which includes compensation for her medical directorship.

FINANCIAL/BUDGETARY IMPACT

The proposed salary is budgeted for FY 20.

JUSTIFICATION

Broward Health has documented and objectively determined that there is a legitimate business purpose to provide Interventional Cardiology services and a medical directorship at Broward Health Medical Center (BHMC).

Recommendations from the Community Needs Assessment suggest that a critical priority is providing better access to care by enhancing access to specialists throughout the service area.

STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to enter into a new two-year employment agreement with a medical directorship up to the 77th percentile with Dr. Violeta McCormack for the provision of Interventional Cardiology services at Broward Health Medical Center.
GA-004-002 Compliance Office and General Counsel Protocol

I. Purpose

The Department of Health and Human Services (HHS) Office of Inspector General (OIG) Compliance Program Guidance calls for the organization’s Compliance Officers to be independent in carrying out the responsibilities of the Corporate Compliance Department. These responsibilities include conducting investigations, internal reviews, and audits. However, the OIG also recognizes the important role that the office of General Counsel serves in resolving potential violations of law and regulations. Furthermore, under the current Corporate Integrity Agreement (CIA) with the HHS OIG, prompt and efficient investigations of potential violations of law or regulation is critical.

The purpose of this policy is to provide written guidance regarding the relationship of the Corporate Compliance Department with the office of General Counsel regarding investigations and resolutions of potential wrongdoing. This policy applies to any and all matters that may involve both the Corporate Compliance Department and General Counsel.

II. Key Terms

Confidentiality: Refers to those who contact a hotline and request that information provided through the Compliance or Workforce Diversity, Inclusion and Advocacy hotline be kept confidential. Such information must be kept confidential and be divulged only to those who have a need to know, such as those performing an investigation into the concerns disclosed by the caller. Investigators should work to protect the source of their information, including a caller’s name and contact information if these details are provided by the caller.

General Counsel: Either the General Counsel and/or his/her designee and/or an outside attorney at the direction and approval of the office of General Counsel acting on behalf of Broward Health.

Hotline: A confidential communication channel for use by all workforce members, patients, and patient families to report suspected or potential violations of law, regulations, standards, Code of Conduct, policies, or other wrongdoing, via a phone line answered by live operators or web-based reporting.
Investigation: The formal development of a factual record including but not limited to interviews, document review, research, expert opinions, if applicable; outside counsel guidance and opinions, if necessary, to determine if wrongdoings occurred.

SVP/Chief Compliance Officer (CCO): The individual responsible for overseeing, implementing, and monitoring the compliance requirements of the Broward Health Compliance and Ethics Program. In addition, this individual also holds the title of Chief Privacy Officer.

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; volunteers; 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.

III. Policy

1. The Corporate Compliance Department and the Office of General Counsel shall maintain consistent open communications and establish reciprocal reporting obligations to ensure that the appropriate department is notified of issues that are of primary concern to the other.

2. The CCO, or designee, shall be responsible for conducting independent investigations, including having the authority to design and coordinate internal investigations (e.g., responding to reports of problems or suspected violations). The Corporate Compliance Department will coordinate any necessary corrective action and have oversight over the implementation of any such corrective action.

3. The CCO is empowered to review all documents and records without limitation, including all contracts and obligations, seeking the advice of General Counsel, as appropriate.

4. In situations where there are identified legal issues, including indications that workforce members or others associated with Broward Health may have participated in misconduct or committed wrongdoings, the CCO shall consult with the Office of the General Counsel to seek guidance regarding such issues.

5. If at any point during an inquiry or investigation, the CCO identifies potential legal issues or determines that there is evidence to support an allegation of violation of law or regulation; the Office of the General Counsel shall be immediately notified and consult with the CCO on what further investigative steps would be appropriate, as well as determining whether the investigation should be conducted by or at the direction of the Office of the General Counsel.

IV. Procedures

1. Investigations conducted by the Corporate Compliance Department will be conducted under the direction of the CCO, including responding to complaints received by the Corporate Compliance Department, Compliance Hotline, referred to the CCO by management, or developed during the ongoing auditing and monitoring process.

2. Matters reported through the Compliance Hotline or other communication sources, managed by the Corporate Compliance Department, that suggest substantial violations of compliance policies,
regulations, or statutes should be documented and investigated promptly to determine their veracity.

3. The CCO has the independent authority to interview Board Members, workforce members, and others associated with Broward Health. The CCO can review all relevant documents and information, including, but not limited to patient records, billing records, and records concerning arrangements with other parties.

4. Upon report or notice of suspected non-compliance with any law or regulation, the CCO will promptly conduct an initial inquiry to determine whether there is sufficient information to warrant further investigation. If such evidence is found, the CCO will consult with the office of General Counsel to determine whether a full investigation is warranted.

5. If an investigation evidences an alleged likely probable violation of law, the Corporate Compliance Department and the Office of the General Counsel shall notify Broward Health Executive Leadership, provide a description of the impact of the alleged violation to the organization and advise whether disclosure to the appropriate government authority is warranted pursuant to Broward Health policies and procedures. The Office of the General Counsel, in conjunction with the CCO will be responsible for notifying senior management of the results of any investigation under their direction.

6. All documents created, obtained or produced during the investigation that are at the direction of the Office of the General Counsel must include the statement: “Confidential Communication/Attorney Client Privilege/Attorney Work Product/At the Direction of Legal Counsel.”

7. The Office of the General Counsel should be consulted on all matters related to potential liability resulting from inappropriate claims submission to assist in determining the extent of liability, as well as to assist in planning the appropriate course of action to correct deficiencies and resolve any liability issues.

8. The Office of the General Counsel, in conjunction with the CCO will be responsible for notifying senior management of the results of any investigation under their direction.

9. During any investigation, the Office of the General Counsel and the Corporate Compliance Department shall ensure that all evidence is preserved consistent with the Records Retention Policy.

V. Related Policy and Compliance Documents
   ◦ Actions and Events Reportable to the OIG under the Corporate Integrity Agreement, Policy No. GA-004-006
   ◦ Compliance Investigations, Policy No. GA-004--008

VI. References


    Department of Health and Human Services Office of Inspector General. Publication of the OIG

Broward Health Corporate Integrity Agreement with the DHHS Office of Inspector General, dated August 20, 2015.

Attachments: No Attachments
SUMMARY OF REQUEST

DATE: September 25, 2019

FACILITY: Community Health Services

PROGRAM/PRODUCT LINE: Healthcare for the Homeless (HCH)

REQUEST: To seek approval to retain the existing board composition which utilizes special population input via the Healthcare for the Homeless Consumer Advisory Board (CAB) and not pursue establishing a co-applicant board for the Healthcare for the Homeless program.

PURPOSE: Provide better oversight of HCH by appointing a member of the Broward Health Board of Commissioners (Board) to represent the Board at HCH Consumer Advisory Board (CAB) meetings and invite CAB members to attend the Board of Commission meetings.

CAPITAL REQUIRED: Not Applicable

FISCAL IMPACT: Not Applicable

BUDGET STATUS: Not Applicable

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: September 25, 2019
SUBJECT: To seek approval to retain the existing board composition which utilizes special population input via the Healthcare for the Homeless Consumer Advisory Board (CAB) and not pursue establishing a co-applicant board for the Healthcare for the Homeless program.

BACKGROUND

The HCH program provides primary and urgent medical care, diagnostic exams/ screenings, behavioral health counseling, vision care, prophylaxis, and emergency oral health services. The HCH program is federally funded by the Health Resources and Services Administration (HRSA). HRSA conducted an Operational Site Visit (OSV) at Broward Health Healthcare for the Homeless on May 14-16, 2019. The Health Care for the Homeless Program is required to make corrections to ensure compliance with HRSA grant requirements and to remain eligible to continue receiving funding from the HRSA HCH grant number H80CS00019.

ACTION/PROJECT DESCRIPTION

Approve the current structure of the HCH Consumer Advisory Board (CAB) and not pursue a co-applicant board. Instead appoint a member of the Commissioners to represent the Board at HCH CAB meetings and invite CAB members to attend the Board of Commissioners meetings.

FINANCIAL/BUDGETARY IMPACT

Not Applicable

JUSTIFICATION

One of HRSA’s findings from the Operational Site Visit (OSV) at Broward Health Healthcare for the Homeless held on May 14-16, 2019 stated that the health center was unable to provide at least one example of how special population input impacted board decision-making. In order to have better oversight without establishing a co-applicant board for the Healthcare for the Homeless program, the decision was made by Broward Health to appoint a member of the Board of Commission to attend CAB meetings and to invite CAB members to attend the Board of
Commission meetings. The health center will retain board minutes or other documentation that demonstrates how special population patient input is utilized in making governing board decisions in key areas, including but not limited to: selecting health center services; setting hours of operation of health center sites; defining budget priorities; evaluating the organization’s progress in meeting goals, including patient satisfaction; and assessing the effectiveness of the sliding fee discount program.

**STAFF RECOMMENDATION**

*Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District retain the existing board composition and not pursue establishing a co-applicant board for the Healthcare for the Homeless program.*
SUMMARY OF REQUEST

DATE: September 25, 2019

FACILITY: Community Health Services

PROGRAM/PRODUCT LINE: Healthcare for the Homeless (HCH)

REQUEST: To seek approval to expand oral health services to include dentures for Healthcare for the Homeless dental patients.

PURPOSE: Oral health plays an important role in achieving good health outcomes. Providing dentures can help people: improve chewing ability, provide support for the lips and cheeks; correct the collapsed appearance that results from the loss of teeth, enable patients to speak better, and boost confidence in the ability to interact socially.

CAPITAL REQUIRED: None.

FISCAL IMPACT: FY 2020: $40,000 funded by HRSA

BUDGET STATUS: The proposed services are budgeted for FY20

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, President/CEO BH

DATE: ________________
MEMORANDUM

TO: Board of Commissioners

FROM: Gino Santorio, President/CEO BH

DATE: September 25, 2019

SUBJECT: To seek approval to expand oral health services to include dentures for Healthcare for the Homeless dental patients.

BACKGROUND

The HCH program provides primary and urgent medical care, diagnostic exams/screenings, behavioral health counseling, vision care, prophylaxis, and emergency oral health services. The HCH program is federally funded by the Health Resources and Services Administration (HRSA). HRSA conducted an Operational Site Visit (OSV) at Broward Health Healthcare for the Homeless on May 14-16, 2019. The Health Care for the Homeless Program is required to make corrections to ensure compliance with HRSA grant requirements and to remain eligible to continue receiving funding from the HRSA HCH grant number H80CS00019.

ACTION/PROJECT DESCRIPTION

Approve adding of denture prosthetics, via a formal written contract/agreement with an outside provider, for the Homeless patients and satisfy the HRSA requirement.

FINANCIAL/BUDGETARY IMPACT

The proposed services are budgeted for FY20: $40,000 funded by HRSA.

JUSTIFICATION

One of HRSA’s Auditor Comment from the Operational Site Visit (OSV) at Broward Health Healthcare for the Homeless held on May 14-16, 2019 stated that Dental Services recorded on Form 5A was not consistent with what the health center offered. To satisfy the audit a request was made on the Board Exhibit dated June 26, 2019 that Column II Additional Dental Services be removed because the health center did not have a contract to provide Additional Dental Services. Negotiations are now underway to obtain a contract with an organization in Broward County to provide dentures, an additional Dental Service, to Healthcare for the Homeless patients. Oral health plays an important role in achieving good health outcomes. Providing dentures can help people: improve chewing ability, provide support for the lips and cheeks; correct the collapsed appearance that results from the loss of teeth, enable patients...
to speak better, and boost confidence in the ability to interact socially. The denture provider will provide full and partial dentures, to Broward Health Healthcare for the Homeless patients that are referred to them.

**STAFF RECOMMENDATION**

*Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District approve the expansion of Oral Health services to include dentures for Healthcare for the Homeless dental patients.*
SUMMARY OF REQUEST

DATE: September 25, 2019

FACILITY: Community Health Services, Bernard P. Alicki

PROGRAM/PRODUCT LINE: Healthcare for the Homeless

REQUEST: Approve the opening of Family Planning Services at Cora Branyon (CEB) to serve the community need and satisfy HRSA requirements.

PURPOSE: To provide the unmet need for family planning services/contraception services in the safety net health centers of CHS in the North Broward District.

CAPITAL REQUIRED: None

FISCAL IMPACT: None because CHS will use existing Providers for this service.

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: September 25, 2019
SUBJECT: Approve the opening of Family Planning Services at Cora Branyon (CEB) to serve the community need and satisfy HRSA requirements.

BACKGROUND

An unintended pregnancy is a pregnancy that is reported to be either unwanted (that is, the pregnancy occurred when no children, or no more children, were desired) or mistimed (that is, the pregnancy occurred earlier than desired). Unintended pregnancy is a core concept used to understand the unmet need for contraception and family planning. Unintended pregnancy mainly results from not using contraception, or inconsistent or incorrect use of effective contraceptive methods. If a pregnancy is not planned before conception, a woman may not be in optimal health for childbearing. It is important for all women of reproductive age to adopt healthy behaviors such as visiting with healthcare provider and discuss family planning.

According to a study published in 2011 (statistics reflect the United States)

- In 2006 unintended pregnancy began to rise at 49%
- Women 19 years and younger 4 out of 5 pregnancies were unintended.
- The proportion of pregnancies that were unintended was highest in teenagers younger than 15 at 98%
- Large increases in unintended pregnancy rates were found among women with lower education, low income, and black women.

ACTION/PROJECT DESCRIPTION

Approve the opening of Family Planning Services at Cora Branyon (CEB) to serve the community need and satisfy the HRSA requirements.

FINANCIAL/BUDGETARY IMPACT

The proposed services are budgeted for FY20. CHS intends to use existing CHS providers for this service.
Family planning efforts that can help reduce unintended pregnancy include increasing access to contraception, particularly to the more effective and longer acting reversible forms of contraception among those who are sexually active but wish to delay or avoid pregnancy.

Unintended pregnancy Florida statistics:

- In 2010, 59% of all pregnancies (207,000) in Florida were unintended.
- The adolescent pregnancy rate in Florida was 46 per 1,000 women aged 15–19 in 2013.
- In 2010, 49% of unintended pregnancies in Florida resulted in births and 38% in abortions; the remainder resulted in miscarriages.
- In 2010, 71,400 or 70.6% of unplanned births in Florida were publicly funded, compared with 68% nationally.
- In Florida in 2010, the federal and state governments spent $1.3 billion on unintended pregnancies; of this, the federal government paid $892.8 million and $427.1 million was paid by the state.
- The total public costs for unintended pregnancies in 2010 was $371 per woman aged 15–44 in Florida, compared with $201 per woman nationally.

Need for Family Planning services in the state of Florida:

- In 2014, 1,216,520 Florida women aged 13–44 were in need of publicly funded family planning services.
- Publicly supported family planning centers in Florida served 206,130 female contraceptive clients in 2014. They met 17% of Florida women’s need for contraceptive services and supplies.
- In 2010, public expenditures for family planning client services in Florida totaled $103.1 million; this includes $66 million through Medicaid and $11.5 million through Title X. In 2010, Florida contributed $25.6 million.
- Publicly funded family planning centers in Florida helped avert 49,900 unintended pregnancies in 2014, which would have resulted in 24,300 unplanned births and 18,000 abortions.
- By averting unintended pregnancies and other negative reproductive health outcomes, publicly funded family planning services provided by safety-net health centers in Florida helped save the federal and state governments $260.3 million in 2010.
STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District approve the opening of Family Planning Services at Cora Branyon (CEB) to serve the community need and satisfy HRSA requirements.
SUMMARY OF REQUEST

DATE: September 25, 2019

FACILITY: System Wide

PROGRAM/PRODUCT LINE: Cerner Electronic Health Record (EHR)

REQUEST: Requesting approval for $1,291,255 for Professional Services based on BH Strategic IT Goals for the Cerner Enterprise EHR.

PURPOSE: This is a 2 year agreement for a “bucket” of Professional Service hours for the following projects: 1. Promoting Interoperability (aka Meaning Use – mandated to be completed end of 2019), 2. Nursing Assessments/Optimization of Clinical Workflows, 3. SurgiNet Optimization, 4. MDI iBus Lab Migration for 75 Instrument Interfaces, 5. Clinical Charge Capture, 6. Quality Updates and Configurations, 7. Managed Care Services for RDDS (Reference Data Domain Synch), 8. Others as needed. This agreement is a pay-as-you-go Professional Services and will not exceed the yearly amount nor the total amount over the two-year Term.

CAPITAL REQUIRED: This is an Operating Spend that will only be billed as incurred – not to exceed $1,291,255 over 2 years.

FISCAL IMPACT: FY20 – ~$885,854.00
                FY21 – ~$405,401.00

BUDGET STATUS: This request has been 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, President/CEO BH

DATE: 08/26/2019 17:45 Eastern Daylight Time
MEMORANDUM

TO: Board of Commissioners
FROM: Gino Santorio, President/CEO BH
DATE: September 25, 2019
SUBJECT: Requesting approval for $1,291,255 for Professional Services based on BH Strategic IT Goals for the Cerner Enterprise EHR.

BACKGROUND

This Agreement is for pay-as-you-go Professional Services that are required for projects that are regulatory requirements from the federal government as well as for the alignment of business strategy.

ACTION/PROJECT DESCRIPTION

Approval for $1,291,255 over a two-year Term for Professional Services based on BH Strategic IT Goals for the Cerner Enterprise EHR

FINANCIAL/BUDGETARY IMPACT

FY20 – ~$885,854.00
FY21 – ~$405,401.00

JUSTIFICATION

The professional service hours that are needed are for system configuration to ensure Broward Health can successful attest to Promoting Interoperability (PI), aka Meaningful Use, which is a regulatory requirement. If Broward Health cannot successfully attest to these metrics/measure there would be roughly $3.1m reduction in Medicaid reimbursement. The additional services are required for ~7 additional strategic projects and optimization that relate to Clinician satisfaction, Patient safety as well as optimized/streamlined processes.

STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to execute a $1,291,255 two-year Agreement for Professional Services with Cerner.
SUMMARY OF REQUEST

DATE: September 25, 2019

FACILITY: Community Health Services, Bernard P. Alicki Health Center

PROGRAM/PRODUCT LINE: Healthcare for the Homeless

REQUEST: Approve policy - CHS-003-014 Healthcare for the Homeless Billing and Collections Policy.

PURPOSE: To demonstrate compliance with Healthcare for the Homeless Program requirements for billing and collections of fees under the Health Center Program authorized by section 330 of the Public Health Service (PHS) Act

CAPITAL REQUIRED: None

FISCAL IMPACT: FY20

BUDGET STATUS: No

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 09/25/2019 14:37 Eastern Daylight

Gino Santorio, President/CEO BH

DATE: ____________________
MEMORANDUM

TO: Board of Commissioners
FROM: Gino Santorio, President/CEO BH
DATE: September 25, 2019
SUBJECT: Approve Policy - CHS-003-014 Healthcare for the Homeless Billing and Collections Policy to satisfy HRSA requirements.

BACKGROUND

The HCH Program provides primary and urgent medical care, diagnostic exams/screenings, behavioral health counseling, vision care, prophylaxis, and emergency oral health services. The HCH Program is federally funded by the Health Resources and Services Administration (HRSA). HRSA conducted an Operational site Visit (OSV) at Broward Health Healthcare for the Homeless on May 14-16, 2019. Broward Health is required to make corrections to ensure compliance with HRSA grant requirements and to remain eligible to continue receiving funding from the HRSA HCH grant number H80CS00019. Per section 330(k) (3) (H) of the Public Health Service (PHS) Act (42 U.S.C. 254b), the governing board is responsible for the oversight of the health center operations. All policies and/or requests for change in scope of project must be approved by the health center's governing board with approval documented in the board minutes.

ACTION/PROJECT DESCRIPTION

Approve Policy # CHS-003-014 Healthcare for the Homeless Billing and Collections Policy.

FINANCIAL/BUDGETARY IMPACT

None

JUSTIFICATION

The Health Care for the Homeless Program is required to provide documentation of the corrective actions taken and/or updated operating procedures that ensure compliance with HRSA grant requirements for billing and collections of fees and to remain eligible for funding under grant number H80CS00019. The health center must demonstrate compliance with Health Center Program requirements. These requirements form the foundation of the Health Center Program and support the core mission of the HCH Program. Further non-compliance could jeopardize grant funding of the HCH program.
STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to approve Policy – CHS-003-014 Healthcare for the Homeless Billing and Collections.

ATTACHMENT

CHS-003-014 Billing and Collection Policy
Purpose:

To ensure compliant billing and collection of fees for services performed within the Healthcare for the Homeless scope of services.

Policy:

Broward Health Healthcare for the Homeless (HCH) prepares a schedule of fees for the provision of its services consistent with locally prevailing rates or charges and designed to cover its reasonable costs of operation. HCH assures that any fees or payments for care or services to eligible patients will be reduced or waived in order to assure that no patient will be denied such services due to an individual's inability to pay for such services. HCH has an established system for eligibility determination and for billing and collections of fees. HCH makes every reasonable effort to enter into contractual or other arrangements to collect reimbursement of its costs with the appropriate agency(s) of the State of Florida which administers or supervises the administration of the Florida Medicaid plan approved under title XIX of the Social Security Act (SSA) [42 U.S.C. 1396, et seq.] for the payment of all or a part of the center's costs in providing health services to persons who are eligible for such assistance. HCH makes every reasonable effort to collect appropriate reimbursement for its costs on the basis of the full amount of fees and payments for health center services without application of any discount when providing health services to persons who are entitled to Medicare coverage under title XVIII of the SSA [42 U.S.C. 1395 et seq.] and Medicaid coverage under a State plan approved under title XIX of the SSA [42 U.S.C. 1396 et seq.]. HCH makes every reasonable effort to secure payment for services from patients, in accordance with health center fee schedules and the corresponding schedule of discounts.

Procedure:

a. Billing

Patients qualifying for services that are within the HRSA-approved scope of the HCH project must meet the definition of homelessness per section 330(h) of the Public Health Service Act. The population served includes individuals: who lack housing (without regard to whether the individual is a member of a family); whose primary residence during the night is a supervised public or private facility that provides temporary living accommodations; who reside in transitional housing; and/or who reside in permanent supportive housing or other housing programs that are targeted to homeless populations. Formerly homeless individuals may continue to receive services for up to 12 months after becoming a resident in permanent
housing. Financial assistance to eligible patients will be in compliance with the guidelines established in CHS-003-012 Healthcare for the Homeless Financial Assistance Program/Discounted Sliding Fee Policy. At the time of each visit, Medicaid Web Portal inquiry and/or insurance verification must be performed on all patients prior to being treated. The results of this inquiry will determine where the services are billed. A copy of the inquiry is retained in the patient's medical record. Those without insurance and meeting the criteria for Financial Assistance within the Healthcare for the Homeless scope of services are billed under the eligible plan codes as defined in the policy CHS-003-012 Healthcare for the Homeless Financial Assistance Program/Discounted Sliding Fee Policy. All claims will be billed electronically and using compliant billing techniques as required by laws and regulations pertinent to first and third party health care provider reimbursement. Patients will be notified of all out-of-pocket charges/fees for which they will be billed prior to receiving care, equipment, and/or services that are not included in the Healthcare for the Homeless scope. Information regarding billing procedures will be monitored and routinely reviewed. Steps will be taken to implement the changes to coincide with the effective dates which are necessary to continue to bill clean claims, ensuring compliance to the law and maximizing allowable reimbursement. Claims will be billed via the current regulatory formats. The site will maintain billing records that show claims are submitted in a timely and accurate manner to the third party payer sources with which it participates (Medicaid, Medicare) in order to collect reimbursement for its costs in providing health services.

b. Collections

HCH will maintain billing records that reflect that patients are charged in accordance with its fee schedule and the sliding fee discount schedule per CHS-003-012 Healthcare for the Homeless Financial Assistance Program/Discounted Sliding Fee Policy. HCH will make reasonable efforts to collect such amounts owed from patients. HCH will not limit or deny services based on a patient's refusal or inability to pay. Fees may be waived as set forth in CHS-003-013 Healthcare for the Homeless Provisions for Waiving Fee(s) and Nominal Charges for Specific Patient Circumstances.

Administration and Interpretation:

The administration and interpretation of this policy is the responsibility of the Vice President, Finance Operations.

Related Policies:

- CHS-003-012 Healthcare for the Homeless Financial Assistance Program/Discounted Sliding Fee Policy
- CHS-003-013 Healthcare for the Homeless Provisions for Waiving Fee(s) and Nominal Charges for Specific Patient Circumstances.

Attachments:

Approval Signatures

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SUMMARY OF REQUEST

DATE: September 25, 2019

FACILITY: Community Health Services, Bernard P. Alicki Health Center

PROGRAM/PRODUCT LINE: Healthcare for the Homeless

REQUEST: Approve adding the primary health care sites listed on the contract between Broward Health Healthcare for the Homeless and Memorial Healthcare System to the scope of services on form 5B for HRSA grant number H80CS00019.

PURPOSE: To demonstrate compliance with Healthcare for the Homeless Program requirements for Contracts and Sub-awards under HRSA grant number H80CS00019.

CAPITAL REQUIRED: None

FISCAL IMPACT: FY20

BUDGET STATUS: No

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 09/25/2019 14:38 Eastern Daylight

DATE: ____________________

Gino Santorio, President/CEO BH
MEMORANDUM

TO: Board of Commissioners

FROM: Gino Santorio, President/CEO BH

DATE: September 25, 2019

SUBJECT: Approve adding the primary health care sites listed on the contract between Broward Health Healthcare for the Homeless (HCH) and Memorial Healthcare System (MHS) to the scope of services on form 5B for HRSA grant number H80CS00019 to satisfy HRSA requirements.

BACKGROUND

The HCH Program provides primary and urgent medical care, diagnostic exams/screenings, behavioral health counseling, vision care, prophylaxis, and emergency oral health services. The HCH Program is federally funded by the Health Resources and Services Administration (HRSA). One of the findings of the HRSA Operational Site Visit (OSV) at Broward Health Healthcare for the Homeless, May 14-16, 2019, is that there is no documented Broward Health Board of Commissioners’ prior approval to sub-award the HCH grant to MHS. MHS became a sub-recipient under the above mentioned grant through an agreement executed between Broward Health and MHS on November 1, 2004 and renewed on February 1, 2019. Under this sub-recipient arrangement, MHS provides primary healthcare services to individuals and families who are experiencing homelessness and who reside in the southern regions of the county at South Broward Community Health Services locations at: 4105 Pembroke Road, Hollywood, FL 33021, 1750 East Hallandale Beach Blvd, Hallandale Beach, Florida 33009, 140-A South Federal Highway, Dania Beach Florida 33004 and at Gulfstream Race Track located at 901 South Federal Highway, Hallandale Beach, Florida 33009-7124 (during the racing season operation period April through September). HRSA requires that a Change In Scope (CIS) be submitted to make corrections to ensure compliance with HRSA grant requirements and to remain eligible to continue receiving funding from the HRSA HCH grant number H80CS00019. Per section 330(k)(3)(H) of the Public Health Service (PHS) Act (42 U.S.C. 254b, the governing board is responsible for the oversight of the health center operations, all policies and/or requests for change in scope of project must be approved by the health center's governing board with approval documented in the board minutes.
ACTION/PROJECT DESCRIPTION

Approve adding primary health care sites at Memorial Healthcare System to the scope of services on form 5B for HRSA grant number H80CS00019.

FINANCIAL/BUDGETARY IMPACT

None

JUSTIFICATION

The Health Care for the Homeless Program is required provide documentation of the corrective actions taken and/or updated operating procedures that ensure compliance with HRSA grant requirements for making changes to the scope of services under grant number H80CS00019. The health center must demonstrate compliance with Health Center Program requirements. These requirements form the foundation of the Health Center Program and support the core mission of the HCH Program. Further non-compliance could jeopardize grant funding of the HCH program.

STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioners of the North Broward Hospital District authorize the President/CEO to add the primary health care sites listed on the contract with Memorial Healthcare System to the scope of services on form 5B for HRSA grant number H80CS00019.
AGREEMENT

by and between

NORTH BROWARD HOSPITAL DISTRICT

and

SOUTH BROWARD HOSPITAL DISTRICT

THIS SERVICE AGREEMENT ("Agreement") by and between the NORTH BROWARD HOSPITAL DISTRICT D/B/A BROWARD HEALTH, a Florida special taxing district (hereinafter referred to as "Broward Health"), and SOUTH BROWARD HOSPITAL DISTRICT D/B/A MEMORIAL HEALTHCARE SYSTEM, a Florida special taxing district (hereinafter referred to as "MHS" or "Sub-recipient") takes effect on February 1, 2019 or upon the last signature of the parties, whichever is later (the "Effective Date").

WITNESSETH:

WHEREAS, Broward Health entered into an Agreement with the United States Department of Health and Human Services' Health Resources and Services Administration ("HRSA"), whereby Broward Health will receive federal funding for providing certain medical services as described herein ("Funding Agreement"); and

WHEREAS, Broward Health intends to subcontract with MHS to insure the availability of care to homeless patients eligible for medical services in the South Broward Hospital District taxing district.

NOW THEREFORE, in exchange for and in consideration of the mutual terms, conditions, promises, covenants, agreements and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties agree as follows:

ARTICLE I

SCOPE OF SERVICES

1.1 MHS shall provide medical services to those homeless persons and families who are eligible for those services (collectively "Clients") as described in Exhibit A, attached hereto and incorporated herein by reference, at the South Broward Community Health Services located at 4105 Pembroke Road Hollywood, Florida 33021, the South Broward Community Health Services – Hallandale located at 1750 East Hallandale Beach Blvd Hallandale Beach, Florida 33009, and the South Broward Community Health Services – Dania Beach located at 140-A South Federal Highway Dania Beach, Florida 33004. In addition MHS shall provide said services to Clients at the Gulfstream Race Track located at 901 South Federal Highway, Hallandale Beach, Florida 33009-7124 during its racing season operation period from April through September.
1.2 Clients must meet the HRSA federal definition of homelessness as defined in The United States Code Title 42, Chapter 119, Subchapter I, and must be registered by MHS as a Client under this Agreement in order to be eligible for the medical services described herein.

ARTICLE II
COMPENSATION AND METHOD OF PAYMENT

2.1 During the term of this Agreement the total dollar amount per year to be paid by Broward Health to MHS for providing the designated services described herein shall be Nine Ninety Thousand Seven Hundred Forty Nine Dollars ($99,749.00).

2.2 Payments will be provided in twenty-four (24) equal monthly installments.

2.3 The parties agree that Broward Health will not be responsible for any additional costs associated with equipment, supplies, diagnostic/lab tests, specialty care consultations, pharmaceuticals, or any other services incurred by MHS pursuant to this contract.

ARTICLE III
TERM AND TERMINATION OF THIS AGREEMENT

3.1 This Agreement shall be effective as of the Effective Date and shall continue through January 31, 2021, unless otherwise terminated as set forth herein. This Agreement may be renewed annually upon the parties’ written agreement and based upon the availability of additional grant funding.

3.2 This Agreement shall terminate automatically upon the termination of the Funding Agreement between HRSA and Broward Health.

3.3 Either party may terminate this Agreement without cause upon providing the other party with no less than thirty (30) days prior written notice as set forth herein.

3.4 This Agreement may be terminated by either party for cause. For purposes of this Agreement “cause” shall mean any act or omission of either party which is grossly or materially contrary to the other’s business interest, reputation, or good will, or for any material breach of this Agreement, and failure to cure such breach within thirty (30) days written notice of such breach.

ARTICLE IV
AUDITS, RECORDS AND REPORTS

4.1 MHS agrees:

a. To establish and maintain books, records, and documents (including electronic storage media) in accordance with generally accepted accounting procedures and practices which sufficiently and properly reflect all revenues and expenditures of funds provided by Broward Health under this Agreement.
b. To retain all Client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this Agreement in accordance with the record retention requirements set forth in section 4.5 of this Agreement, or if an audit has been initiated and audit findings have not been resolved at the end of the six (6) years, the records shall be retained until resolution of the audit findings or any litigations which may be based on the terms of this Agreement.

c. Upon completion or termination of this Agreement and at the request of Broward Health, to cooperate with Broward Health to facilitate the duplication and transfer of the records or documents described above during the required retention period as specified above.

d. To assure that said records are, at all reasonable times, subject to inspection, review, copying, or audit by Federal, Broward Health, or other personnel duly authorized by Broward Health, subject to applicable confidentiality laws and regulations.

e. At all reasonable times and for as long as records are maintained, to allow full access and the right to examine any of MHS’s contracts, records and documents related to the performance of this Agreement, regardless of the form in which kept, by any person duly authorized by Broward Health and/or Federal auditors, pursuant to 45 CFR, Part 92.36(1).

f. To provide a financial and compliance audit to Broward Health as specified below and to ensure that all related party transactions are disclosed to the auditor.

g. To include the foregoing audit and record keeping requirements in all approved subcontracts and/or assignments.

h. To maintain the accuracy/currency of its information in the System for Award Management (“SAM”) website at https://www.sam.gov, unless exempt from this requirement under 2 CFR 25.110.

i. To review and update its information in SAM at least annually after the initial registration, and more frequently if required by changes in its information.

4.2 Federal Audit Requirements.

The requirements set forth herein are applicable if MHS is a State or local government or a non-profit organization as defined in 45 C.F.R. 75 Uniform Administrative Requirements, Cost Principles, and Audit requirements for HHS Awards.

a. In the event that MHS expends Seven Hundred Fifty Thousand Dollars ($750,000.00) or more in Federal awards during its fiscal year, MHS must have a single or program-specific audit conducted in accordance with the provisions of 45 C.F.R. 75 Subpart F Audit and/or 200 C.F.R. 75 Subpart F Audit as applicable. Exhibit B of this Agreement, attached hereto and incorporated herein by reference, indicates Federal resources awarded through HRSA. In determining the Federal awards expended in its fiscal year, MHS shall consider all
sources of Federal awards, including Federal resources received from HRSA. The
determination of amounts of Federal awards expended should be in accordance with the
guidelines established by the Uniform Guidance, as revised. An audit of MHS conducted
by the Auditor General in accordance with the provisions of Subpart F Audit Requirements,
as revised, will meet the requirements of this part.

b. In connection with the audit requirements addressed in Section 4, paragraph 4.2(A), MHS
shall fulfill the requirements relative to auditee responsibilities as a Sub-recipient in
Subpart F Audit Requirements, as revised.

c. If MHS expends less than Seven Hundred Fifty Thousand Dollars ($750,000.00) in Federal
awards in its fiscal year, an audit conducted in accordance to the provisions of Subpart F
Audit Requirements, as revised, is not required. In the event that MHS expends less than
Seven Hundred Fifty Thousand Dollars ($750,000.00) in Federal awards in its fiscal year
and elects to have an audit conducted in accordance with the provisions of Subpart F Audit
Requirements, as revised, the cost of the audit must be paid from non-Federal resources.

d. An audit conducted in accordance with this part shall cover the entire organization from
the organization’s fiscal year. Compliance findings related to agreements with HRSA shall
be based on the agreement’s requirements, including any rules, regulations, or statutes
referred to in the agreement. The financial statements shall disclose whether or not the
matching requirement was met for each applicable agreement. All questioned costs and
liabilities due to HRSA shall be fully disclosed in the audit report with reference to the
HRSA agreement involved. If not otherwise disclosed as required by Section 75.510(b)(2)
and/or 200.510(b)(2) of the Uniform Grant Guidance, as revised, the schedule of
expenditures of Federal awards shall identify expenditures by agreement number of each
agreement with HRSA in effect during the audit period. Financial reporting packages
required under this part must be submitted within the earlier of thirty (30) days after receipt
of the audit report or nine (9) months after the end of the Sub-recipient’s fiscal year end.

Exhibit B to this Agreement indicates federal resources awarded to the Sub-recipient pursuant to this
Agreement.

4.3 Required Disclosures

Consistent with 45 CFR 75.113, MHS must disclose, in a timely manner, in writing to
Broward Health and the Office of Inspector General, Department of Health and Human
Services, (“HHS OIG”), all information related to violations of federal criminal law
involving fraud, bribery, or gratuity violations potentially affecting this federal award.
Disclosures must be sent in writing to the awarding agency and to the HHS OIG at the
following addresses:

North Broward Hospital District
General Counsel’s Office
1800 NW 49th Street
Fort Lauderdale, FL 33309
AND

Department of Health and Human Services
Health Resources and Services Administration
Office of Federal Assistance Management
Division of Grants Management Operations
5600 Fishers Lane, Mailstop 10SWH-03
Rockville, MD 20879

AND

U.S. Department of Health and Human Services
Office of Inspector General
Attn: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW, Cohen Building
Room 5527
Washington, DC 20201
Fax: (202)205-0604 (Include: "Mandatory Grant Disclosures" in subject line) or Email: MandatoryGranteeDisclosures@oig.hhs.gov

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 & 376 and 31 U.S.C. 3321).

4.4 Submission of Reports.

Copies of reporting packages for audits conducted in accordance with Subpart F Audit Requirements, as revised, and required in Section 4.2 of this Agreement shall be submitted, when required by Section 75.512(b) or 200.512(b) of the Uniform Grant Guidance, as revised, by or on behalf of MHS directly to each of the following:

Federal Audit Clearinghouse
Bureau of the Census
1201 E. 10th Street
Jeffersonville, Indiana 47131

4.5 Record Retention.

MHS shall retain sufficient records demonstrating its compliance with the terms of this Agreement for a period of six (6) years from the date the audit report is issued, and shall allow HRSA or its designee, the CFO or Auditor General access to such reports upon request. MHS shall ensure that audit working papers are made available to HRSA or its designee, CFO, or Auditor General upon request for a period of six (6) years from the date the audit report is issued, unless extended in writing by HRSA.
ARTICLE V
NOTICES

5.1 All notices required to be given under this Agreement shall be in writing and shall be deemed delivered when mailed, by registered or certified mail, return receipt requested, to the following parties at the addresses set forth below:

To MHS:

Aurelio M. Fernandez, III, President/CEO
South Broward Hospital District
3111 Stirling Rd
Fort Lauderdale, Florida 33312

With copy to:

General Counsel, SBHD
3111 Stirling Rd
Fort Lauderdale, Florida 33312

To Broward Health:

Contracts Administration
Broward Health
1800 NW 49th Street
Fort Lauderdale, Florida 33309

With copy to:

General Counsel
Broward Health
1800 NW 49th Street
Fort Lauderdale, Florida 33309

5.2 Tiana Blount, Associate Vice President, Ambulatory Operations/Community Health Services, Weston & Urgent Care Centers shall be deemed Broward Health's official contact person and Contract Manager for purposes of this Agreement:

Tiana Blount
Associate Vice President, Ambulatory Operations/Community Health Services Weston & Urgent Care Centers
Broward Health
1800 NW 49th Street
Fort Lauderdale, Florida 33309
(Phone) (954) 217-3512 (Facsimile) (954) 767-5565
5.3 Melida Akiti, Vice President for Memorial Healthcare System, South Broward Community Health Services shall be deemed the Memorial Healthcare System's official contact person for purposes of this Agreement:

Melida Akiti, Vice President  
Memorial Healthcare System  
South Broward Community Health Services  
1750 E. Hallandale Beach Blvd  
Hallandale Beach, Florida 33009  
(Phone) 954-276-9781  
(Facsimile) 954-276-9722

5.4 Prestin Prasad - Corporate Finance, Memorial Healthcare System, shall be deemed the Memorial Healthcare System's official payee to whom payment shall be made:

Prestin Prasad Corporate Finance  
South Broward Hospital District  
d/b/a Memorial Healthcare System  
3111 Stirling Rd  
Fort Lauderdale, FL 33312

ARTICLE VI
AGREEMENT FOR ACCESS TO BOOKS, DOCUMENTS AND RECORDS

The parties agree to provide each other with access to its books, documents, and records to verify services rendered and for quality assurance review purposes and for any reason for the longer of a period of six (6) years after the termination of the Agreement or until the resolution of any audit initiated within the six (6) year period.

ARTICLE VII
AMERICANS WITH DISABILITIES ACT

The parties, in performing services under this Agreement, shall comply with all applicable titles of the Americans with Disabilities Act regarding non-discrimination on the basis of disability.

ARTICLE VIII
EQUAL OPPORTUNITY FOR EMPLOYMENT SERVICES

The parties shall not discriminate against any employee or applicant for employment for work under this Agreement because of race, color, religion, sex, age, national origin, or disability and will take affirmative steps to ensure that applicants are employed and employees are treated during employment without regard to race, color, religion, sex, age, national origin, or disability. This provision shall include, but not be limited to the following: employment upgrading; demotion or transfer; recruitment advertising; layoff or termination; rates of pay or other forms of compensation and selection for training including apprenticeships. In some instances a failure to provide language assistance services may have the effect of discriminating against persons on the basis of their national origin. Please see https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-
proficiency/index.html to learn more about the Title VI requirement for grant and cooperative agreement recipients to take reasonable steps to provide meaningful access to their programs.

ARTICLE IX
CONSOLIDATED APPROPRIATIONS ACT

The Consolidated Appropriations Act, 2016, Division H, § 202, (P.L.114-113) enacted December 18, 2015, limits the salary amount that may be awarded and charged to HRSA grants and cooperative agreements to the Federal Executive Pay Scale Level II rate set at $187,000, effective January, 2017. This amount reflects an individual’s base salary exclusive of fringe benefits. An individual’s institutional base salary is the annual compensation that the organization pays an individual and excludes any income an individual may be permitted to earn outside the applicant organization duties. HRSA funds may not be used to pay a salary in excess of this rate. This salary limitation applies to Sub-recipients under a HRSA grant or cooperative agreement. The salary limitation does not apply to payments made to consultants under this award although, as with all costs, those payments must meet the test of reasonableness and be consistent with recipient’s and Sub-recipient’s institutional policy. None of the awarded funds may be used to pay an individual’s salary at a rate in excess of the salary limitation. Note: an individual’s base salary, per se, is NOT constrained by the legislative provision for a limitation of salary. The rate limitation simply limits the amount that may be awarded and charged to HRSA grants and cooperative agreements.

ARTICLE X
GENERAL PROVISIONS

10.1 Assignment. The Agreement may not be assigned by Contractor except with the prior written consent of Broward Health in its sole discretion. Any assignment by Contractor without Broward Health’s prior written consent shall be null and void and without force and effect. For purposes of this provision, an assignment shall include, without limitation, (a) an assignment to a direct or indirect subsidiary or affiliate of Contractor, (b) the transfer directly or indirectly of all or a portion of the assets, shares, stock, partnership interests or other ownership interests of Contractor in a single transaction or series of transactions, or (c) a change in control or management of Contractor. Broward Health may assign the Agreement and its rights hereunder to any successor or entity owning or operating Broward Health, to a wholly owned subsidiary of Broward Health, or to any entity in which Broward Health has an ownership interest, or to an entity which acquires substantially all of its assets.

10.2 Successors and Assigns. This Agreement shall be binding upon successors, legal representatives or permitted assigns of the parties hereto.

10.3 Insurance. MHS, through a combination of its self-insurance program and excess insurance policies will maintain appropriate levels consisting of at least $1 million dollars per occurrence with an aggregate of $2 million dollars of professional liability and malpractice insurance as well as $1 million dollars per occurrence with an aggregate of $2 million dollars
of general liability insurance at all times, and shall provide evidence of such coverage upon request.

10.4 **Waiver of Breach.** The waiver by either party of a breach or violation of any provision of this Agreement shall not operate as, or be construed to be, a waiver of any subsequent breach of the same or of any other provision.

10.5 **Gender and Number.** Whenever the context hereof requires, the gender of all words shall include the masculine, feminine and neuter, and the number of all words shall include the singular and plural.

10.6 **Governing Law.** This Agreement has been executed and delivered in, and shall be interpreted, construed and enforced pursuant to and in accordance with the laws of the State of Florida. This Agreement shall be governed in all respects, whether as to validity, construction, capacity, performance or otherwise by the laws of the State of Florida. Venue of any such action shall be in Broward County, Florida.

10.7 **Severability.** In the event any provision of this Agreement shall be held invalid by a court with jurisdiction over the parties to this Agreement, such provision shall be severed from the Agreement and the remaining portions of the Agreement shall be in full force and effect.

10.8 **Attorney's Fees.** In the event either party resorts to legal action to enforce the terms and provisions of this Agreement, the prevailing party shall be entitled to recover the costs of such action, including reasonable attorney's fees and the costs of any appeal.

10.9 **Confidentiality.** The parties recognize their respective legal obligations to maintain the confidentiality of medical records and will cooperate in all efforts to protect that confidentiality in accordance with federal and state laws.

10.10 **Sovereign Immunity.** Notwithstanding any contrary provision hereof, the parties hereto acknowledge that both parties are special taxing districts of the State of Florida, and enjoy the limitations on liability provided in Section 768.28, Florida Statutes, and nothing in this Agreement is intended to waive or modify the immunities and limitations on liability provided by law.

10.11 **Third Party Beneficiaries.** This Agreement is for the benefit of the parties hereto, and is not entered into for the benefit of any other person or entity.

10.12 **Independent Contractor.** The relationship between MHS and Broward Health is that of Independent Contractor. Nothing in this Agreement is intended nor shall be construed as conferring upon either party any other status.

10.13 **Compliance Education.** Each party agrees that if it provides patient care items or services or performs billing or coding functions on behalf of Broward Health under this Agreement, the party shall complete at least one (1) hour of training regarding the Anti-Kickback Statute and the Stark Law. By executing this Agreement, each party certifies that it shall not violate
the Anti-Kickback Statute or the Stark Law, as applicable with respect to their performance of this Agreement. Broward Health shall provide each party to this Agreement with a copy of its Code of Conduct and Stark Law and Anti-Kickback Statute Policies and Procedures.

10.14 **Entire Agreement.** This Agreement constitutes the entire Agreement between the parties pertaining to the subject matter hereof and supersedes all prior and contemporaneous agreements, discussions, negotiations and understandings. No supplement, modification, waiver or amendment of this Agreement shall be binding unless executed in writing by both parties.

10.15 **Contractor Warranties.** MHS hereby represents and warrants to Broward Health that:

a. Neither MHS nor any of its principals, owners, directors, officers, employees or agents are now or have ever been convicted of a health care related criminal offense and currently are not under investigation by any public or private, state or federal, regulatory body.

b. Neither MHS nor any of its principals, owners, directors, officers, employees or agents are undergoing any type of audit by a public or private auditing entity, and/or state or federal regulatory body or auditing entity related to regulatory compliance issues.

c. Neither MHS nor any of its principals, owners, directors, officers, employees or agents are currently or have ever been excluded, debarred, suspended, or sanctioned from any federally funded health care program including, but not limited to, Medicare or Medicaid or by any government licensing agency, and have never been convicted of an offense related to health care, or listed by a federal agency as debarred, excluded or otherwise ineligible for federal health care program participation.

d. MHS agrees to notify Broward Health within a reasonable time, but not later than ten (10) calendar days, after it becomes actually aware of any threatened, proposed, or actual exclusion of MHS or any of its principals or employees from any federally funded health care program, including, but not limited, to Medicare and Medicaid.

e. MHS acknowledges and understands that the failure to comply with the foregoing constitutes a material breach of this Agreement.

MHS agrees to notify Broward Health within a reasonable time, but not later than ten (10) calendar days, if any of the foregoing conditions occur. Furthermore, MHS acknowledges and understands that Broward Health reserves the right to terminate this Agreement immediately upon notification by MHS, or discovery by Broward Health that any of the foregoing conditions occurred.

10.16 **Compliance with Standards.** MHS shall perform services under the Agreement in accordance with any and all regulations and accreditation standards applicable to public hospitals like Broward Health and MHS, including, without limitation, those requirements imposed by The Joint Commission. MHS shall provide consultation, if requested, in the
development of protocols, utilization review, peer review, and risk management as required by the Joint Commission and other regulatory bodies.

10.17 **Public Records Law.** Broward Health and MHS (each a “Party” and collectively the “Parties”) as special taxing districts of the State of Florida are both subject to Ch. 119, Fla. Stat., commonly known as Florida’s Public Records Law. To the extent that either Party is providing services and is acting on behalf of the other Party as defined in § 119.0701, Fla. Stat., and in order for both Parties to comply with Florida’s Public Records Law, both Parties shall:

a. Keep and maintain the public records required to perform the services under this Agreement.

b. Upon request from Broward Health’s custodian of public records regarding public records that are in MHS’s possession and pertain to services that MHS has provided under this Agreement, MHS shall provide Broward Health with a copy of any requested public records; allow the requested public records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119, Florida Statutes, or as otherwise provided by law; or promptly fulfill the request and provide confirmation that such request was fulfilled by MHS.

c. Upon request from MHS’s custodian of public records regarding public records that are in Broward Health’s possession and pertain to services that Broward Health has provided under this Agreement, Broward Health shall provide MHS with a copy of any requested public records; allow the requested public records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119, Florida Statutes, or as otherwise provided by law; or promptly fulfill the request and provide confirmation that such request was fulfilled by Broward Health.

d. Both Parties shall ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the Agreement’s term and following completion of the Agreement if these public records are not transferred to the other Party.

e. Upon completion of the Agreement, both Parties shall transfer, at no cost to the other Party, all public records in possession of the other Party pertaining to this Agreement or keep and maintain public records required by either of the Parties to perform the services required under the Agreement.

f. If either Party transfers all public records to the other Party upon completion of the Agreement, the transferring Party shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements.

g. Upon completion or termination of the Agreement, all public records shall be kept and maintained consistently with all applicable requirements for retaining public records.

h. All records stored electronically must be provided to the other Party, upon request from other Party’s custodian of public records, in a format that is compatible with the requesting Party’s information technology systems.
Notwithstanding the foregoing, to the extent that any public records that were created under this Agreement were from services that would not fall within the provisions of § 119.0701, those records shall not be considered the public records of the other Party. Each Party shall be solely responsible for reviewing public records within their possession for exempt or confidential and exempt information and from preventing such records from being disclosed except as authorized by law. Neither Party shall be deemed to be in breach of the Agreement for withholding records when such release is not permitted by law or for disclosing records when required by law.

IF EITHER PARTY HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, OR THE OTHER PARTY’S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, THE CUSTODIAN OF PUBLIC RECORDS FOR BROWARD HEALTH CAN BE CONTACTED AT (954) 473-7303, PublicRecordsRequest@browardhealth.org, or North Broward Hospital District d/b/a Broward Health, 1800 NW 49th Street, Fort Lauderdale, FL 33309 AND THE CUSTODIAN OF PUBLIC RECORDS FOR MEMORIAL HEALTHCARE CAN BE CONTACTED AT (954) 265-5933, mhslegal@mhs.net, and Memorial Healthcare System, ATTN: General Counsel, 3111 Stirling Road, Ft. Lauderdale, FL, 33312.

10.18 Headings. Headings herein are for the convenience of reference only and shall not be considered on any interpretation of this Agreement.

10.19 Counterparts. This Agreement may be executed in two (2) or more counterparts, each of which together shall be deemed an original, but all of which together shall constitute one and the same instrument. In the event that any signature is delivered by facsimile transmission or by e-mail delivery of a .PDF format data file, such signature shall create a valid and binding obligation of the party executing (or on whose behalf such signature is executed) with the same force and effect as if such facsimile or .PDF signature page were an original thereof.
10.20 General Information. General information regarding this grant, the award amount, the Sub-
recipient, and the purpose of the grant award can be found in Exhibit C, attached hereto and
incorporated herein by reference.

IN WITNESS WHEREOF, the parties have made and duly executed this Agreement, or have
caused this Agreement to be duly executed, as of the day and year first set forth above.

NORTH BROWARD HOSPITAL
DISTRICT D/B/A BROWARD HEALTH

By: Alan Goldsmith, EVP
Chief Administrative Officer
Date: 2/1/19

APPROVED as to Legal Form:

By: General Counsel’s Office, Broward Health
Date: 2/1/19

SOUTH BROWARD HOSPITAL
DISTRICT D/B/A MEMORIAL
HEALTHCARE SYSTEM

By: Aurelio M. Fernandez, III, President/CEO
Date: 2/1/19
EXHIBIT A

1. Memorial Healthcare System (MHS) will provide medical services for the homeless population of South Broward Community Health Services (SBCHS) and Gulfstream Race Track. The scope of services provided under this agreement are limited to those individuals who meet both the federal definition of homelessness as defined in The United States Code Title 42, Chapter 19, Subchapter 1, as well as MHS’s criteria for membership in South Broward Community Health Services, and the services are limited to those provided at South Broward Community Health Services Clinics and Gulfstream.

2. MHS will utilize qualified, licensed medical personnel to provide these services, including but not limited to Physicians, Nurse Practitioners, Medical Assistants, Patient Representatives and Office Managers.

3. MHS will provide the following services:
   - medical history and physical examinations
   - development of treatment plans
   - treatment of common injuries and illnesses
   - ordering of appropriate diagnostic and laboratory tests
   - referrals for specialty and subspecialty care
   - eligibility/certification for services provided under the Health Care for the Homeless (HCH) Grant.
   - on-site medical screening evaluations at SBCHS.

4. MHS will provide in-kind services to include the following:
   - appropriate medical/diagnostic equipment
   - disposable medical supplies
   - prescription medications
   - specialty and subspecialty care
   - laboratory and diagnostic tests
   - transportation to/from diagnostic and subspecialty services as necessary.

5. MHS will maintain medical records in accordance with HCH requirements and provide information to the facilities served and to Broward Health within the legal limits of confidentiality.

6. MHS will submit monthly invoices for payment to Broward Health which lists the following information: Medicaid record number, Encounter key, Admit date, and the Plan Code.

7. MHS will also submit with each monthly invoice, a report which provides a summary of the following:
   (a) The number of unduplicated adult and children by gender (adults are defined as twenty (20) years or older.)
(b) The number of medical encounters by adult/child and by gender (medical encounters are defined as a face-to-face encounter with a physician, nurse practitioner or physician assistance.)

8. MHS will submit annually statistical/demographic reports to the Broward Health, which will comply with Bureau of Primary Health Care UDS Guidelines, for the duration of this agreement.

9. MHS will meet with the Broward Health and the facilities served at a frequency to be mutually agreeable by all parties to review and address service related issues. MHS will also provide representation at monthly Homeless Advisory Board meetings facilitated by the Broward Health.
EXHIBIT B

1. FEDERAL RESOURCES AWARDED TO THE SUB-RECIPIENT TO THIS AGREEMENT
   CONSIST OF THE FOLLOWING:

   Federal Program Year 1

   HRSA of the US Department of Health and Human Services  CFDA#: 93.224  Title: Health Center Cluster
   $ 99,749.00

   Federal Program Year 2

   HRSA of the US Department of Health and Human Services  CFDA#: 93.224 Title: Health Center Cluster
   $ 99,749.00

   TOTAL FEDERAL AWARDS

   COMPLIANCE REQUIREMENTS APPLICABLE TO THE FEDERAL RESOURCES AWARDED
   PURSUANT TO THIS AGREEMENT ARE AS FOLLOWS:

2. STATE RESOURCES AWARDED TO THE RECIPIENT PURSUANT TO THIS AGREEMENT
   CONSIST OF THE FOLLOWING:

   Matching resources for federal program(s) __________ CFDA# ________ Title _______ $ ________

   State financial assistance subject to Sec. 215.97, F.S.: CSFA# ___ # ___ Title: _______ $ ________________

   TOTAL STATE FINANCIAL ASSISTANCE AWARDED PURSUANT TO SECTION 215.91, F.S. $ ________

   COMPLIANCE REQUIREMENTS APPLICABLE TO STATE RESOURCES AWARDED PURSUANT
   TO THIS AGREEMENT ARE AS FOLLOWS:
EXHIBIT C

Subaward Required Information

1. Federal Award Identification

   i. Sub-recipient name (Which must match registered name in DUNS):
      South Broward Hospital District d/b/a Memorial Healthcare System

   ii. Sub-recipient’s DUNS number:
       148577166

   iii. Federal Award Identification Number (FAIN):
        H80CS00019

   iv. Federal Award Date:
       December 26, 2017

   v. Subaward Period of Performance Start and End Dates:
      Year 1: February 1, 2019 through January 31, 2020
      Year 2: February 1, 2020 through January 31, 2021

   vi. Amount of Federal Funds Obligated by this action:
       $2,617,030.00

   vii. Total Amount of Federal Funds Obligated to the Sub-recipient each Grant Year:
        Year 1: $99,749.00
        Year 2: $99,749.00

   ix. Total Amount of Federal Award:
       $2,617,030.00

   x. Federal Award project description, as required to be responsive to the Federal Funding
      Accountability and Transparency Act (FFATA):
      Not Applicable

   xi. Name of Federal Awarding Agency, Pass-through entity and contact information for awarding
      official:
      Federal Awarding Agency: Health Resources and Services Administration
      Pass-through entity: North Broward Hospital District
      Awarding Official: Eric Brown P. 301-945-9844; email Ebrown@hrsa.gov

   xii. CFDA Number and Name; the dollar amount made available under each Federal award and the CFDA
        number at the time of disbursement:
CFDA 93.224 and 93.527 Grants to provide preventative health services to populations that would ordinarily not have access

xiii. Indirect cost rate for the Federal award (including if the de minimis rate is charged per $200.414 Indirect (F&A) costs) 0%
ADDENDUM TO AGREEMENT

THIS ADDENDUM TO AGREEMENT ("Addendum") amends that certain contract (hereinafter referred to as "Agreement") by and between NORTH BROWARD HOSPITAL DISTRICT D/B/A BROWARD HEALTH (hereinafter referred to as "Company") and SOUTH BROWARD HOSPITAL DISTRICT D/B/A MEMORIAL HEALTHCARE SYSTEM (hereinafter referred to as "Memorial") entered into contemporaneously herewith and effective thereon, as follows:

1) Effective as of the effective date of the Agreement, the following sections shall be added to the Agreement:

Limitation of Liability. Notwithstanding any provision of this Addendum or the Agreement to which it is applicable, other than the compensation to be paid to Company under said Agreement, Memorial shall not be liable or responsible to Company beyond the monetary limits specified in Ch. 768.28, Fla. Stat., regardless of whether said liability be based in tort, indemnity or otherwise; and in no event shall Memorial be liable to Company for punitive or exemplary damages or for lost profits or consequential damages.

Non-Discrimination. During performance of the Agreement, Company and any subcontractor and/or joint venturer shall not discriminate on the basis of race, color, gender, national origin, sexual orientation or any other category specifically protected by all applicable laws, in the solicitation for or purchase of goods and/or services, or the subcontracting of work in the performance of the Agreement.

Excluded Provider. Company hereby represents and warrants that Company and any of its employees and subcontractors that provide goods and/or services under the Agreement are not and at no time have been excluded from participation in any federally funded health care program or any other federally funded program or federal contract, including Medicare and Medicaid and that neither it nor any affiliate is currently on the convicted vendor list or discriminatory vendor list maintained pursuant to section 287.133 or 287.134 of the Florida Statutes. Company hereby agrees to, within a reasonable time but not later than ten (10) calendar days, notify Memorial of any threatened, proposed, or actual exclusion of said individuals from any federally funded health care program or any other federally funded program or federal contract, including Medicare and Medicaid or listing on the convicted vendor list or discriminatory vendor list maintained pursuant to section 287.133 or 287.134 of the Florida Statutes. Memorial has the right to immediately terminate the Agreement upon notice that Company is debarred or excluded from participating in federal health care programs or listed on the convicted vendor list or discriminatory vendor list maintained pursuant to section 287.133 or 287.134 of the Florida Statutes. Memorial shall have the right to terminate the Agreement, upon thirty (30) days' prior written notice, if at any time Company or any permitted Company assignee fails to meet Memorial's vendor vetting and credentialing requirements.

shall not be held criminally or civilly liable under any federal or state trade secret law for the disclosure of a trade secret that: (a) is made (i) in confidence to a federal, state, or local government official, either directly or indirectly, or to an attorney; and (ii) solely for the purpose of reporting or investigating a suspected violation of law; or (b) is made to Employee's attorney in relation to a lawsuit for retaliation against Employee for reporting a suspected violation of law; or (c) is made in a complaint or other document filed in a lawsuit or other proceeding, if such filing is made under seal.

Standard Medicare Disclosure. To the extent validly required pursuant to Section 1395x(v)(1)(I) of Title 42 of the United States Code and Regulations duly promulgated thereunder, (a) until the expiration of four years after the furnishing of services pursuant to the Agreement, Company shall, upon written request, make available to the United States Secretary of Health and Human Services (the "Secretary") or to the United States Comptroller General (the "Comptroller"), or any of their duly authorized representatives, a copy of the Agreement and such books, documents and records as are necessary to certify the nature and extent of the costs of the services provided by Company under the Agreement, and (b) in the event Company carries out any of its duties under the Agreement through a subcontract, with a value or cost of Ten Thousand Dollars ($10,000.00) or more over a twelve-month period, with a related organization, such subcontract shall contain a clause to the effect that until the expiration of four years after the furnishing of such services pursuant to such subcontract, the related organization shall, upon written request, make available to the Secretary or the Comptroller, or any of their duly authorized representatives, a copy of such subcontract and such books, documents and records of such organization as are necessary to verify the nature and extent of such costs.

Lobbying of Memorial. This section deals with lobbying Memorial only, and does not apply to or include lobbying of any State or Federal Agency, Legislature, or other governmental authority. Company warrants that either: (A) it has not retained any "Lobbyist," which for the purposes of this section is a contractor, company or person, other than its own bona fide employees, to solicit or secure the Agreement and that it has not paid or agreed to pay any Lobbyist, other than its bona fide employees, any fee, commission, gift, or other consideration to solicit or secure the Agreement OR (B) any Lobbyist retained by Company who is not an employee of Company has registered with Memorial's Office of General Counsel in accord with Memorial's Lobbying Policy. If Company is found to have breached this warranty, Memorial may terminate the Agreement, or, at its discretion, deduct from amounts payable under the Agreement the full amount of such fee, commission, gift, or other consideration.

HIPAA Compliance. Company warrants and represents that one of the following applies to the Agreement:

A. Company is a Covered Entity as defined under the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191) and the regulations promulgated thereunder by the United States Department of Health and Human Services (collectively, "HIPAA"), and the purpose of Agreement is so that Company may provide treatment to Memorial's patients; OR
B. Company will not require access to Memorial's Protected Health Information (as defined under HIPAA) in order to perform its duties under the Agreement; OR
C. Company will enter into a Business Associate Agreement with Memorial to cover the terms and conditions under which Company will have access to Memorial's Protected Health Information; OR
D. Company will provide documentation acceptable to Memorial's Legal Department that Company may have access to Protected Health Information under circumstances where A, B, or C above do not apply.

Assignment. Memorial may assign the Agreement, with the prior written consent of Broward Health in its sole discretion, to any entity that assumes management or control of a substantial portion of Memorial's assets or operations that are the subject matter of the Agreement, or to any Affiliate of Memorial or of any of its Affiliates. For purposes of the Agreement, "Affiliate" means with respect to Memorial and its Affiliates, any other Person that directly or indirectly, through one or more intermediaries, controls, is controlled by, or is under common control or management with, exists to fulfill and support a common mission with, or is otherwise affiliated with Memorial or its Affiliates, where "control" or "controlled" or "controlling" means and shall be deemed to exist if the other Person possesses, directly or indirectly, the power to direct, cause the direction of, or otherwise materially impact the purposes, management, or policies of that Person, either through contract, or by owning a controlling interest of the voting rights or of the equity capital of that Person or of other ownership interests, or by being the sole member of an entity with reserved powers, or otherwise possesses or is able to exert a controlling influence over that Person. "Person" means any individual, sole proprietorship, general partnership, limited partnership, limited liability company, joint venture, trust, unincorporated association, corporation, or entity. Affiliates of Memorial include, without limitation, Memorial Foundation, Inc.; Joe DiMaggio Children's Hospital Foundation, Inc.; Florida Community Health Network Corp.; Memorial Health Network, Inc.; South Florida Community Care Network, LLC; and their respective Affiliates.

2) In the event of conflict between the terms of this Addendum and the Agreement, the terms of the Agreement shall prevail.

3) Except as specifically amended or modified herein, the parties do hereby ratify and confirm in all other respects the terms and provisions of the Agreement.

IN WITNESS WHEREOF, the parties have hereunto set their hands and seals effective as of the effective date of the Agreement.
SOUTH BROWARD HOSPITAL DISTRICT
D/B/A MEMORIAL HEALTHCARE SYSTEM

By: Aurelio M. Fernandez, III, President/CEO
Date: 2/11/19

NORTH BROWARD HOSPITAL DISTRICT D/B/A BROWARD HEALTH

By: Alan Goldsmith, EVP
    Chief Administrative Officer
Date: 2/11/19

APPROVED AS LEGAL FORM

Date: 2/7/19
Resolution FY20-04

A DISTRICT RESOLUTION
APPOINTING THE BOARD OF DIRECTORS OF
BROWARD HEALTH ACO SERVICES, INC. AND ADOPTING THE AMENDED AND
RESTATED ARTICLES OF INCORPORATION AND BYLAWS

WHEREAS, the North Broward Hospital District (the “District”) authorized the creation
of Broward Health ACO Services, Inc. (the “ACO”) for the purpose of providing healthcare
services to patients who include, but are not limited to, Medicare beneficiaries under contracts with
third-party payors who include, but are not limited to, the Centers for Medicare & Medicaid
Services (CMS), and to conduct any and all lawful affairs and business incident thereto;

WHEREAS, the District is the sole member (hereinafter, the “Member”) of the ACO;

WHEREAS, Section 3(a) of the Bylaws of the ACO provide for a Board of Directors of
the ACO that shall be appointed annually by the Member; and

WHEREAS, the Member intends to amend and modify the ACO’s Articles of
Incorporation; and

WHEREAS, the current Bylaws of the ACO requires amendments to be made by the
Member and the Member intends to make amendments to the ACO’s Bylaws.

NOW, THEREFORE, BE IT RESOLVED, by the Board of Commissioners of the North
Broward Hospital District, that:

1) The Member hereby adopts the Broward Health ACO Services, Inc. Amended and Restated
   Articles of Incorporation attached hereto and incorporated herein as Exhibit A as discussed,
   revised, and recommended by the ACO Board at the September 11, 2019 ACO Board Meeting.

2) The Member hereby adopts the Broward Health ACO Services, Inc. Amended and Restated
   Bylaws attached hereto and incorporated herein as Exhibit B as discussed, revised, and
   recommended by the ACO Board at the September 11, 2019 ACO Board Meeting.

3) Effective immediately upon the filing of the Amended and Restated Articles of Incorporation
   with the Florida Department of State, the Member hereby removes each of the six (6)
   Commissioners from the ACO Board (consisting of Andrew Klein, Christopher T. Ure, Ray
   Berry, Nancy Gregoire, Stacy Angier, and Marie C. Waugh) and appoints Dr. Avinash Persad,
   Dr. Husman Khan, Dr. Mohammed Allarahka, Dr. Joshua Lenchus, Dr. Keith Foster, and
   Modesto Gato to fill such directorships and serve as successors to the removed Directors so
   the ACO Board shall be consist of the following nine (9) Directors:

   Gino Santorio, President/CEO of BH
   Aldo Calvo, MD Physician Member
Dr. Avinash Persad        Physician Member
Dr. Husman Khan          Physician Member
Dr. Robert Raggi         Physician Member
Dr. Joshua Lenchus       Physician Member
Dr. Keith Foster         Physician Member
Jon Albee                Medicare Beneficiary
Modesto Gato             Member

4) This resolution hereby supersedes, amends, replaces and repeals any conflicting resolution or conflicting policy previously adopted by the Board.
Exhibit A

to

North Broward Hospital District

Resolutions Approving Amendment of Articles of Incorporation

AMENDED AND RESTATED
ARTICLES OF INCORPORATION
OF
BROWARD HEALTH ACO SERVICES, INC.

In compliance with the Florida Not-For-Profit Corporation Act, Chapter 617, Florida Statutes (the “Act”), the undersigned hereby submits these Amended and Restated Articles of Incorporation (the “Articles”) for the purpose of amending and restating the Articles of Incorporation of BROWARD HEALTH ACO SERVICES, INC., a Florida not-for-profit corporation (the “Corporation”), and certifies as follows:

The original Articles of Incorporation of the Corporation were filed with the Florida Department of State on July 5, 2013 (the “Original Articles”) and assigned Document Number N13000006184. These Articles shall supersede and replace the Original Articles in their entirety.

ARTICLE I-NAME

The name of the Corporation shall be: BROWARD HEALTH ACO SERVICES, INC. (the “Corporation”).

ARTICLE II-PURPOSES

This Corporation is a not-for-profit corporation formed under Chapter 617 of the Florida Statutes, organized and to be operated, and the business and objects to be carried on by it, exclusively for charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, and not for pecuniary profit. More specifically, the Corporation is organized and shall be operated exclusively to carry out the following purposes:

(a) To provide health care services through independent contractors and others (known as participating providers and suppliers) to patients who include, but are not limited to, Medicare beneficiaries pursuant to agreements with third party payors who include, but are not limited to, the Center for Medicare and Medicaid Services. In no event, however, will any of the relationships with participating providers and suppliers referred to above be a partnership or joint venture in violation of Article VII, Section 10 of the Florida Constitution;

(b) To form one or more wholly owned limited liability companies for the purpose of managing and operating programs with different payors as separate divisions; and

(c) To conduct any and all lawful affairs and business incident to the purpose for which this Corporation is organized.
In no event shall this Corporation engage in any activity which would be contrary to the activities: (1) permitted to be engaged in by any organization the activities of which are exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1986; or (2) of a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code of 1986, as hereafter amended, and the applicable rules and regulations thereunder.

The Corporation shall not engage, nor shall any of its funds, property, or income be used, in carrying on propaganda or otherwise attempting to influence legislation, nor shall the Corporation participate in or intervene in (including the publishing or distributing of statements) any political campaign on behalf of any candidate for public office, nor shall the Corporation engage in subversive activities.

No compensation shall be paid to any member, officer, director, trustee, creator or organizer of the Corporation or substantial contributor to it except as a reasonable allowance for services actually rendered to or for the Corporation or goods or property actually sold or leased to the Corporation.

ARTICLE III-MEMBERS

This Corporation’s sole Member shall be the North Broward Hospital District, a special taxing district of the State of Florida (the “Member”).

ARTICLE IV-NON STOCK CORPORATION

This Corporation shall have no capital stock.

ARTICLE V-OFFICERS AND DIRECTORS

The affairs of the Corporation shall be managed by a Board of Directors. The Directors shall be appointed by the Member. The number of Directors shall be fixed from time to time by the Member. A Director may be removed by the Member with or without cause.

The Board of Directors shall consist of not less than five nor more than nine members. The number of Directors shall be fixed from time-to-time as set forth in the By-Laws of the Corporation. At such time as the Corporation may proceed to apply to operate a Medicare Accountable Care Organization, one such Director shall be a Medicare beneficiary who is served by the Corporation and another such Director shall be a physician who, at all times during his or her directorship, has in force an agreement with the Corporation to participate in the Corporation’s programs. All Directors shall comply with the Corporation’s Conflict of Interest Policy.

The officers of the Corporation shall consist of a President, Vice President, Secretary/Treasurer. Each officer shall serve for a term of one (1) year, beginning the 1st day of the month immediately following his election by a majority of the Board of Directors at the annual meeting of the Board of Directors. Officers may be re-elected to serve subsequent terms.
ARTICLE VI-INDEMNIFICATION OF DIRECTORS AND OFFICERS

This Corporation shall indemnify any Director or Officer who by virtue of his or her being a Director or Officer of this Corporation, is made a party to any action or proceeding, except when such Director or Officer is adjudicated guilty of malfeasance in the discharge of his or her duties to this Corporation. Indemnification shall be for all reasonable expenses, including any and all attorneys and paralegal fees and costs, incurred as a result of such action or proceeding.

ARTICLE VII-BY-LAWS

The By-Laws of the Corporation may be altered or rescinded solely by vote of the Member at the annual meeting of the Member or at a duly called meeting of the Member.

ARTICLE VIII-AMENDMENTS TO THE ARTICLES OF INCORPORATION

These Articles of Incorporation may be amended in the manner provided by law.

ARTICLE IX-EARNINGS

No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to its members, directors, officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article II hereof.

ARTICLE X-DISSOLUTION

Upon the liquidation or dissolution of the Corporation, its assets, if any, remaining after payment (or provision for payment) of all liabilities of the Corporation, shall be distributed to, and only to, the Member, or if such organization has ceased to exist, to any one or more organizations qualified as exempt under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, which provides health care services to the residents of Northern Broward County, Florida.

ARTICLE XI-REGISTERED OFFICE AND AGENT

The street address of the registered office of the Corporation shall be: 1800 N.W. 49th Street, Fort Lauderdale, Florida 33309.

The name of the registered agent of this Corporation shall be Linda Epstein at that address.

ARTICLE XII-CORPORATION’S PRINCIPAL OFFICE AND/OR MAILING ADDRESS

The principal office and/or mailing address of this Corporation shall be: 1800 N.W. 49th Street, Fort Lauderdale, Florida 33309.
ARTICLE XIII-RESERVED POWERS

The following actions must be approved by a majority of the Board of Directors of the Corporation and submitted to the Member for approval:

(a) A merger or other combination of the Corporation with any entity;

(b) The sale, or entering into an agreement to sell, mortgage, or grant a security interest in or otherwise dispose of assets of the Corporation in the amount of $250,000 or more;

(c) Adoption of a plan of liquidation and dissolution;

(d) Incurrence of any indebtedness in the amount of $250,000 or more;

(e) Issuance of membership interests in the Corporation;

(f) Entering into any contract or agreement requiring payments in the amount of $250,000 or more; and

(g) Payment of compensation to the Directors of the Corporation.

CERTIFICATE OF ACCEPTANCE AS REGISTERED AGENT

Having been named as the Registered Agent in the Amended and Restated Articles of Incorporation of BROWARD HEALTH ACO SERVICES, INC., I hereby accept and agree to act in this capacity.

By: ____________________________
   Linda Epstein, Esquire

Dated: September __, 2019
CERTIFICATE RE: MEMBER APPROVAL OF AMENDED AND RESTATED ARTICLES OF INCORPORATION OF BROWARD HEALTH ACO SERVICES, INC.

The foregoing Amended and Restated Articles of Incorporation of BROWARD HEALTH ACO SERVICES, INC. were adopted by the sole Member, NORTH BROWARD HOSPITAL DISTRICT, on September __, 2019 and the number of votes cast for the amendment was sufficient for approval.

BROWARD HEALTH ACO SERVICES, INC.

By: Gino Santorio  
Its: President

Dated: September __, 2019
Exhibit B

to

North Broward Hospital District
Resolutions Approving Amendment of Bylaws

AMENDED AND RESTATE BYLAWS

OF

BROWARD HEALTH ACO SERVICES, INC.
(a Florida not-for-profit Corporation)

Effective September __, 2019

ARTICLE I

Offices

Section 1. Registered Office. The initial registered office of Broward Health ACO Services, Inc., a Florida not-for-profit corporation (the "Corporation"), shall be located in Ft. Lauderdale, Florida.

Section 2. Other Offices. The Corporation may also have offices at such other places, either within or without the State of Florida, as the Board of Directors of the Corporation (the "Board of Directors") may from time to time determine.

ARTICLE II

Membership

Section 1. Membership. The Corporation's sole Member shall be the North Broward Hospital District, a special taxing district of the State of Florida (the "Member").

ARTICLE III

Board of Directors

Section 1. Powers. All corporate powers shall be exercised by or under the authority of, and the business and affairs of the Corporation shall be managed under the direction of, the Board of Directors. Directors must be natural persons who are at least 18 years of age but need not be residents of Florida. Provided, however, the following actions must be approved by a majority of the Board of Directors and submitted to the Member for approval:

(a) A merger or other combination of the Corporation with any entity;

(b) The sale, or entering into an agreement to sell, mortgage, or grant a security interest in or otherwise dispose of assets of the Corporation in the amount of $250,000 or more;
(c) Adoption of a plan of liquidation and dissolution;

(d) Incurrence of any indebtedness in the amount of $250,000 or more;

(e) Entering into any contract or agreement requiring payments in the amount of $250,000 or more;

(f) Issuance of membership interests in the Corporation.; and

(g) Payment of compensation to the Directors of the Corporation.

Section 2. Compensation. Subject to Member approval as provided in Section 1.(g), above, the Board of Directors may approve paying Directors reasonable compensation consistent with the fair market value of the Directors’ services on the Board. The Directors may be paid their actual expenses, if any, of attendance at meetings of the Board of Directors upon approval by the Board of Directors without Member approval.

Section 3. Number, Appointment & Resignation.

(a) The Board of Directors shall consist of not less than five (5) but not more than nine (9) Directors. The number of Directors of the Corporation shall be fixed from time to time, within any limits set forth in the Articles of Incorporation, by resolution of the Member. Any decrease in the number of Directors shall not shorten the term of an incumbent Director. Directors shall be appointed annually by the Member. Each Director appointed shall hold office until his or her successor is duly appointed and qualified or until his or her resignation or removal. In the absence of an express determination by the Member, the number of Directors, until changed by the Member, shall be the number of Directors appointed by the Member during the preceding annual period.

(b) A Director may resign at any time by delivering written notice to the Corporation. The resignation shall be effective upon receipt, unless the notice specifies a later effective date. If the resignation is effective at a later date and the Corporation accepts the future effective date, the Member may fill the pending vacancy, pursuant to Article III, Section 4 below, effective at the effective time of the resignation.

Section 4. Vacancies. Any vacancy occurring in the Board of Directors, including a vacancy created by an increase in the number of Directors, may be filled by appointment by the Member. A Director appointed to fill a vacancy shall hold office for the unexpired term of his or her predecessor in office. Any Director position to be filled by reason of an increase in the number of Directors may be filled by appointment by the Member, but only for a term of office continuing until the next appointment of Directors.

Section 5. Removal of Directors. A Director may be removed by the Member with or without cause.
Section 6. Quorum and Voting. A majority of the number of Directors fixed by or in accordance with these Bylaws shall constitute a quorum for the transaction of business at any meeting of Directors. If a quorum is present when a vote is taken, the affirmative vote of a majority of the Directors present shall be the act of the Board of Directors.

Section 7. Deemed Assent. A Director who is present at a meeting of the Board of Directors or a committee of the Board of Directors when corporate action is taken is deemed to have assented to the action taken unless (i) the Director objects at the beginning of the meeting (or promptly upon his arrival) to the holding of the meeting or transacting specified business at the meeting, or (ii) the Director votes against or abstains from the action taken.

Section 8. Meetings.

(a) Regular and special meetings of the Board of Directors shall be held at the principal place of business of the Corporation or at any other place, within or without the State of Florida, designated by the President. Meetings of the Board of Directors may be called by any member of the Board of Directors or by the President. A majority of the Directors present, regardless whether a quorum exists, may adjourn any meeting of the Board of Directors to another time and place. Notice of an adjourned meeting shall be given to the Directors who were not present at the time of the adjournment and, unless the time and place of the adjourned meeting are announced at the time of the adjournment, to the Directors who were present.

(b) Members of the Board of Directors may participate in a meeting of the Board by means of a telephone conference or similar communications equipment through which all persons participating may simultaneously hear each other during the meeting, provided a physical quorum is established.

Section 9. Notice of Meetings. Regular meetings of the Board of Directors must be preceded by written notice in accordance with Federal and State laws and regulations. Special meetings of the Board of Directors must be preceded by written notice in accordance with Federal and State laws and regulations. The notice need not describe either the business to be transacted at or the purpose of the special meeting, unless otherwise required by these bylaws or by law.

Section 10. Waiver of Notice. Notice of a meeting of the Board of Directors need not be given to a Director who signs a waiver of notice either before or after the meeting. Attendance of a Director at a meeting shall constitute a waiver of notice of that meeting and a waiver of any and all objections to the place of the meeting, the time of the meeting and the manner in which it has been called or convened, except when a Director states, at the beginning of the meeting or promptly upon arrival at the meeting, any objection to the transaction of business because the meeting is not lawfully called or convened. The waiver of notice need not describe either the business to be transacted at or the purpose of the meeting.
ARTICLE IV
Committees

The Corporation shall have such committees of the Board as the Board may determine from time to time.

ARTICLE V
Officers

Section 1. Officers. The Corporation shall have a President, a Vice President, a Secretary and a Treasurer. The President/CEO of the North Broward Hospital District shall serve as the President of the Corporation. The Sr. Vice President/Chief Financial Officer of the North Broward Hospital District shall serve as the Vice President of the Corporation. The Vice President of Financial Operations of the North Broward Hospital District shall serve as the Secretary and Treasurer of the Corporation. Such other officers and assistant officers and agents as may be deemed necessary or desirable may be appointed by the Board of Directors from time to time. Any two or more offices may be held by the same person.

Section 2. Duties. The officers of the Corporation shall have the following duties:

The President shall be the chief executive officer of the Corporation and shall preside at all meetings of the Board of Directors. He or she shall perform all duties as the Board of Directors shall from time to time reasonably designate and shall be subject to the direction of the Board of Directors.

Each Vice President, if any, shall have such powers and perform such duties as the Board of Director shall from time to time designate. In the absence or disability of the President, a Vice President specifically designated by the vote of the Board of Directors shall have the powers and shall exercise the duties of the President.

The Secretary shall perform such duties as are prescribed by the Board of Directors.

The Treasurer shall perform such duties as are prescribed by the Board of Directors or the Chairman of the Board.

Each Assistant Secretary and Assistant Treasurer, if any, shall be appointed by the Board of Directors and shall have such powers and shall perform such duties as are prescribed by the Board of Directors.

Section 3. Resignation of Officer. An officer may resign at any time by delivering written notice to the Corporation. The resignation shall be effective upon receipt, unless the notice specifies a later effective date. If the resignation is effective at a later date and the Corporation accepts the future effective date, the Board of Directors may fill the pending vacancy before the effective date provided the Board of Directors provides that the successor officer does not take office until the future effective date.
Section 4. Removal of Officer. The Board of Directors may remove any officer at any time with or without cause. Any officer or assistant officer, if appointed by another officer, may be removed by the appointing officer.

ARTICLE VI
Corporate Records

Section 1. Corporate Records.

(A) The Corporation shall keep as permanent records minutes of all meetings of its Board of Directors and committees having any authority of the Board of Directors, a record of all actions taken by the Board of Directors without a meeting, and a record of all actions taken by a committee of the Board of Directors in place of the Board of Directors on behalf of the Corporation.

(B) The Corporation shall maintain, at its registered office in this state, a copy of the Articles of Incorporation and its By-Laws, as amended, and accurate accounting records.

ARTICLE VII
Indemnification

Section 1. Right to Indemnification. Each person (including the heirs, executors, administrators, or estate of such person) (1) who is or was a director or officer of the Corporation, (2) who is or was an agent or employee of the Corporation and as to whom the Corporation has agreed to grant such indemnity hereunder, or (3) who is or was serving at the request of the Corporation as its representative in the position of a director, officer, agent, or employee of another corporation, partnership, joint venture, trust or other enterprise and as to whom the Corporation has agreed to grant such indemnity hereunder, shall be indemnified by the Corporation to the fullest extent permitted or authorized by current or future legislation or by current or future judicial or administrative rule or regulation (but, in the case of any future legislation or decision, only to the extent that it permits the Corporation to provide broader indemnification rights than permitted prior to the legislation or decision), against all fines, liabilities, settlements, losses, damages, costs and expenses, including attorneys’ fees, asserted against him or her or incurred by him or her in his or her capacity as such director, officer, trustee, partner, agent, employee or representative, or arising out of his or her status as such director, officer, trustee, partner, agent, employee or representative. The foregoing right of indemnification shall not be exclusive of other rights to which those seeking indemnification may be entitled. The Corporation may maintain insurance, at its expense, to protect itself and any such person against any such fine, liability, cost or expense, including attorneys’ fees, regardless of whether the Corporation would have the legal power to directly indemnify him or her against such liability.

Section 2. Advances. Costs, charges and expenses (including attorneys' fees) incurred by a person referred to in Section 1 of this Article in defending a civil or criminal suit, action or proceeding may be paid (and, in the case of Directors of the Corporation, shall be paid) by the Corporation in advance of the final disposition thereof upon receipt of an undertaking to repay all amounts advanced if it is ultimately determined that the person is not entitled to be indemnified by the Corporation as authorized by this Article and upon satisfaction of other conditions established
from time to time by the Board of Directors or required by current or future legislation (but, with respect to future legislation, only to the extent that it provides conditions less burdensome than those previously provided).

**Section 3. Savings Clause.** If this Article or any portion of it is invalidated on any ground by a court of competent jurisdiction, the Corporation nevertheless indemnifies each Director of the Corporation to the fullest extent permitted by all portions of this Article that has not been invalidated and to the fullest extent permitted by law.

**ARTICLE VIII**  
**Miscellaneous**

**Section 1. Corporate Seal.** The corporate seal of the Corporation shall be circular in form and shall include the name of the Corporation, the year incorporated, and the words "Florida," "Corporate Seal" and "not-for-profit" embossed thereon.

**Section 2. Fiscal Year.** The fiscal year of the Corporation shall end on June 30 of each calendar year, unless otherwise fixed by resolution of the Board of Directors.

**Section 3. Checks.** All checks, drafts or other orders for the payment of money, notes or other evidences of indebtedness issues in the name of the Corporation shall be signed by the President, the Treasurer or such other officer(s) or agent(s) of the Corporation as shall be determined from time to time by resolution of the Board of Directors.

**ARTICLE IX**  
**Amendment**

These Bylaws may be altered, amended or repealed, and new Bylaws adopted, by the Member.
BROWARD HEALTH ACO SERVICES, INC.
RESOLUTIONS
APPROVING AMENDMENT
OF
ARTICLES OF INCORPORATION

WHEREAS, Florida law requires Broward Health ACO Services, Inc. (the “ACO”) to recommend changes to its Articles of Incorporation to North Broward Hospital District as the sole member (“Member”) of the ACO for the Member’s approval;

RESOLVED, the Board of Directors approve the changes to the Bylaws of the ACO as detailed in the tracked change version of the Articles of Incorporation of the ACO attached hereto and incorporated herein as Exhibit A to Broward Health ACO Services, Inc. Resolutions Approving Amendment of Articles of Incorporation (“Proposed Amendments”). In sum, the following Proposed Amendments to the Articles of Incorporation of the ACO, without limitation, are as follows:

1. Amending Article II to allow the ACO to form one or more wholly owned limited liability companies for the purpose of managing and operating programs with different payors as separate divisions.

2. Amending Article V to provide that the number of Directors shall be fixed from time to time by the Member and to provide that a Director may be removed by the Member with or without cause.

3. Amending Article V to delete the current requirements that one Director shall be a Medicare beneficiary who is served by the ACO, another Director shall be a physician who, at all times, has a participation agreement in effect with the ACO and all other Directors must be a Commissioner of North Broward Hospital District, and provide, in lieu thereof, that at such time as the ACO may proceed to apply to operate a Medicare Accountable Care Organization, one such Director shall be a Medicare beneficiary who is served by the ACO and another Director shall be a physician who, at all times during his or her directorship, has in force an agreement with the ACO to participate in the ACO’s programs.

4. Amending Article V remove the requirement that neither a Director nor a member of his or her immediate family shall have a conflict of interest and provide, in lieu thereof, that all Directors shall comply with the ACO’s Conflict of Interest Policy.

5. Amending Articles VI and VII to delete the names and addresses of the initial Officers and Directors.
6. Amending Article XI to change the street address of the registered office of the ACO to: 1800 N.W. 49th Street, Fort Lauderdale, Florida 33309 and the name of the registered agent of the ACO is Linda Epstein.

7. Amending Article XIII to provide the following actions must be approved by a majority of the Board of Directors of the ACO and submitted to the Member for approval:

a. A merger or other combination of the ACO with any entity;
b. The sale, or entering into an agreement to sell, mortgage, or grant a security interest in or otherwise dispose of assets of the ACO in the amount of $250,000 or more;
c. Adoption of a plan of liquidation and dissolution;
d. Incurrence of any indebtedness in the amount of $250,000 or more;
e. Issuance of membership interests in the ACO;
f. Entering into any contract or agreement requiring payments in the amount of $250,000 or more; and
g. Payment of compensation to the Directors of the ACO.

8. Such other clean up and administrative edits highlighted in the tracked change version of the Amended and Restated Articles of Incorporation containing the Proposed Amendments attached hereto as Exhibit A.

RESOLVED, the Board of Directors hereby submit the Amended and Restated Articles of Incorporation containing the Proposed Amendments substantially in the form attached hereto as Exhibit B to the Member and recommend the Member vote to approve such Amended and Restated Articles of Incorporation to supersede and replace the prior Articles of Incorporation of the ACO and authorize the ACO to file the same with the Florida Division of Corporations.

FURTHER RESOLVED, that the officers of the ACO be, and they hereby are, and each of them hereby is, authorized, empowered and directed, in the name of, for and on behalf of the ACO, to do and perform all such other acts and to take all such other steps as any one or more of them may in their discretion deem necessary, appropriate, advisable or convenient and proper to carry out the intent of the foregoing resolutions.
Exhibit A

to

Broward Health ACO Services, Inc.

Resolutions Approving Amendment of Articles of Incorporation

AMENDED AND RESTATED
ARTICLES OF INCORPORATION
OF
BROWARD HEALTH ACO SERVICES, INC.

The undersigned hereby forms a corporation not for profit under Chapter 617 of the Florida Statutes, and, for these purposes, does hereby adopt the following Articles of Incorporation.

In compliance with the Florida Not-For-Profit Corporation Act, Chapter 617, Florida Statutes (the “Act”), the undersigned hereby submits these Amended and Restated Articles of Incorporation (the “Articles”) for the purpose of amending and restating the Articles of Incorporation of BROWARD HEALTH ACO SERVICES, INC., a Florida not-for-profit corporation (the “Corporation”), and certifies as follows:

The original Articles of Incorporation of the Corporation were filed with the Florida Department of State on July 5, 2013 (the “Original Articles”) and assigned Document Number N13000006184. These Articles shall supersede and replace the Original Articles in their entirety.

ARTICLE I-NAME

The name of the Corporation shall be: BROWARD HEALTH ACO SERVICES, INC. (the “Corporation”).

ARTICLE II-PURPOSES

This Corporation is a not-for-profit corporation formed under Chapter 617 of the Florida Statutes, organized and to be operated, and the business and objects to be carried on by it, exclusively for charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), and not for pecuniary profit. More specifically, the Corporation is organized and shall be operated exclusively to carry out the following purposes:

(a) To provide health care services through independent contractors and others (known as participating providers and suppliers) to patients who include, but are not limited to, Medicare beneficiaries under contracts (known as Participation pursuant to agreements) with third party payors who include, but are not limited to, the Center for Medicare and Medicaid Services. In no event, however, will any of the relationships with participating providers and suppliers referred to above be a partnership or joint venture in violation of Article VII, Section 10 of the Florida Constitution; and

(b) To form one or more wholly owned limited liability companies for the purpose of managing and operating programs with different payors as separate divisions; and
(c) To conduct any and all lawful affairs and business incident to the purpose for which this Corporation is organized.

In no event shall this Corporation engage in any activity which would be contrary to the activities: (1) permitted to be engaged in by any organization the activities of which are exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1986; or (2) of a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code of 1986, as hereafter amended, and the applicable rules and regulations thereunder.

The Corporation shall not engage, nor shall any of its funds, property, or income be used, in carrying on propaganda or otherwise attempting to influence legislation, nor shall the Corporation participate in or intervene in (including the publishing or distributing of statements) any political campaign on behalf of any candidate for public office, nor shall the Corporation engage in subversive activities.

No compensation shall be paid to any member, officer, director, trustee, creator or organizer of the Corporation or substantial contributor to it except as a reasonable allowance for services actually rendered to or for the Corporation or goods or property actually sold or leased to the Corporation.

ARTICLE III-MEMBERS

This Corporation's sole Member shall be the North Broward Hospital District, a special taxing district of the State of Florida (the "Member").

ARTICLE IV-NON STOCK CORPORATION

This Corporation shall have no capital stock.

ARTICLE V-OFFICERS AND DIRECTORS

The affairs of the Corporation shall be managed by a Board of Directors. The Directors shall be appointed by the Member. The number of Directors shall be fixed from time to time by the Member. A Director may be removed by the Member with or without cause.

The initial Board of Directors shall consist of four members as set forth in Article VII below.

For each succeeding period, the Board of Directors shall consist of not less than five nor more than nine members. The number of Directors shall be fixed from time-to-time as set forth in the By-Laws of the Corporation. At such time as the Corporation may proceed to apply to operate a Medicare Accountable Care Organization, one such Director shall be a Medicare beneficiary who is served by the Corporation. Neither that Director nor any member of his or her immediate family shall have a conflict of interest (i.e., meet the criteria for any other Director position on the Board of Directors), and another such Director shall be a physician who, at all times during his or her directorship, has in force a Participation agreement with the Corporation. All other directors shall, at all times during each of their directorships, be a member of the Board of
Commissioners of the North Broward Hospital District. To participate in the Corporation’s programs. All Directors shall comply with the Corporation’s Conflict of Interest Policy.

The officers of the Corporation shall consist of a President, Vice President, Secretary/Treasurer. Each officer shall serve for a term of one (1) year, beginning the 1st day of the month immediately following his election by a majority of the Board of Directors at the annual meeting of the Board of Directors. Officers may be re-elected to serve subsequent terms.

ARTICLE VI - NAMES OF OFFICERS

The names of the initial officers are as follows:

<table>
<thead>
<tr>
<th>Name</th>
<th>Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frank Nask</td>
<td>President</td>
</tr>
<tr>
<td>Robert Martin</td>
<td>Vice President</td>
</tr>
<tr>
<td>Deborah Breen</td>
<td>Secretary/Treasurer</td>
</tr>
</tbody>
</table>

ARTICLE VII - INITIAL BOARD OF DIRECTORS

The number of Directors shall initially be four. The names and addresses of the persons who shall serve as the initial members of the Board of Directors are as follows:

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joel K. Gustafson, Esq</td>
<td>e/o North Broward Hospital-District</td>
</tr>
<tr>
<td></td>
<td>303 S.E. 17th Street</td>
</tr>
<tr>
<td></td>
<td>Ft. Lauderdale, FL 33316</td>
</tr>
<tr>
<td>Miguel Fernandez</td>
<td>e/o North Broward Hospital-District</td>
</tr>
<tr>
<td></td>
<td>303 S.E. 17th Street</td>
</tr>
<tr>
<td></td>
<td>Ft. Lauderdale, FL 33316</td>
</tr>
<tr>
<td>David Di Pietro, Esq.</td>
<td>e/o North Broward Hospital-District</td>
</tr>
<tr>
<td></td>
<td>303 S.E. 17th Street</td>
</tr>
<tr>
<td></td>
<td>Ft. Lauderdale, FL 33316</td>
</tr>
<tr>
<td>Debbie L. Kohl</td>
<td>e/o North Broward Hospital-District</td>
</tr>
<tr>
<td></td>
<td>303 S.E. 17th Street</td>
</tr>
<tr>
<td></td>
<td>Ft. Lauderdale, FL 33316</td>
</tr>
</tbody>
</table>

ARTICLE VIII - INDEMNIFICATION

The Corporation shall indemnify any Director or Officer who by virtue of his or her being a Director or Officer of this Corporation, is made a party to any action or proceeding, except when such Director or Officer is adjudicated guilty of malfeasance in the discharge of his or her duties to this Corporation. Indemnification shall be for all reasonable expenses, including any and all attorneys and paralegal fees and costs, incurred as a result of such action or proceeding.

ARTICLE IX - BY-LAWS

The By-Laws of the Corporation shall be initially approved by a majority vote of the Board of Directors, and thereafter may be altered or rescinded solely by vote of the sole Member at the
annual meeting of the sole Member or at a duly called meeting of the sole Member in accordance with the By-Laws.

ARTICLE X-AMENDMENTS VIII-AMENDMENTS TO THE ARTICLES OF INCORPORATION

These Articles of Incorporation may be amended in the manner provided by law.

ARTICLE XI-EARNINGS IX-EARNINGS

No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to its members, directors, officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article II hereof.

ARTICLE XII-DISSOLUTION X-DISSOLUTION

Upon the liquidation or dissolution of the Corporation, its assets, if any, remaining after payment (or provision for payment) of all liabilities of the Corporation, shall be distributed to, and only to, North Broward Hospital District, a special taxing district of the State of Florida, the Member, or if such organization has ceased to exist, to any one or more organizations qualified as exempt under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, which provides health care services to the residents of Northern Broward County, Florida.

ARTICLE XIII-INITIAL REGISTERED XI-REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation shall be: 2099 East Commercial Boulevard, Suite 200 1800 N.W. 49th Street, Fort Lauderdale, Florida 33308 33309.

The name of the initial registered agent of this Corporation shall be Kerry L. Ezrol, Esquire Linda Epstein at that address.

ARTICLE XIV-CORPORATION'S XII-CORPORATION'S PRINCIPAL OFFICE AND/OR MAILING ADDRESS

The principal office and/or mailing address of this Corporation shall be: 203 S.E. 171800 N.W. 49th Street, Fort Lauderdale, Florida 33316 33309.

ARTICLE XV-INCORPORATOR XIII-RESERVED POWERS

The following actions must be approved by a majority of the Board of Directors of the Corporation and submitted to the Member for approval:

The following is the name and street address of the incorporator signing these Articles:
IN WITNESS WHEREOF, I have set my hand and seal this 27th day of June 2013,

(a) A merger or other combination of the Corporation with any entity;

(b) The sale, or entering into an agreement to sell, mortgage, or grant a security interest
in or otherwise dispose of assets of the Corporation in the amount of $250,000 or
more;

(c) Adoption of a plan of liquidation and dissolution;

(d) Incurrence of any indebtedness in the amount of $250,000 or more;

(e) Issuance of membership interests in the Corporation;

(f) Entering into any contract or agreement requiring payments in the amount of
$250,000 or more; and

(g) Payment of compensation to the Directors of the Corporation.

CERTIFICATE OF ACCEPTANCE AS REGISTERED AGENT

Having been named as the Registered Agent in the Amended and Restated Articles of
Incorporation of BROWARD HEALTH ACO SERVICES, INC., I hereby accept and agree to act
in this capacity.

By: __________________________
   Linda Epstein, Esquire

Dated: June 27, 2013, September __, 2019
CERTIFICATE RE: MEMBER APPROVAL OF AMENDED AND RESTATED ARTICLES OF INCORPORATION OF BROWARD HEALTH ACO SERVICES, INC.

The foregoing Amended and Restated Articles of Incorporation of BROWARD HEALTH ACO SERVICES, INC. were adopted by the sole Member, NORTH BROWARD HOSPITAL DISTRICT, on September __, 2019 and the number of votes cast for the amendment was sufficient for approval.

By: Gino Santorio
Its: President

Dated: September __, 2019
Exhibit B
to
Broward Health ACO Services, Inc.
Resolutions Approving Amendment of Articles of Incorporation

AMENDED AND RESTATED
ARTICLES OF INCORPORATION
OF
BROWARD HEALTH ACO SERVICES, INC.

In compliance with the Florida Not-For-Profit Corporation Act, Chapter 617, Florida Statutes (the “Act”), the undersigned hereby submits these Amended and Restated Articles of Incorporation (the “Articles”) for the purpose of amending and restating the Articles of Incorporation of BROWARD HEALTH ACO SERVICES, INC., a Florida not-for-profit corporation (the “Corporation”), and certifies as follows:

The original Articles of Incorporation of the Corporation were filed with the Florida Department of State on July 5, 2013 (the “Original Articles”) and assigned Document Number N13000006184. These Articles shall supersede and replace the Original Articles in their entirety.

ARTICLE I-NAME

The name of the Corporation shall be: BROWARD HEALTH ACO SERVICES, INC. (the “Corporation”).

ARTICLE II-PURPOSES

This Corporation is a not-for-profit corporation formed under Chapter 617 of the Florida Statutes, organized and to be operated, and the business and objects to be carried on by it, exclusively for charitable purposes within the meaning of Section 501(e)(3) of the Internal Revenue Code of 1986, as amended, and not for pecuniary profit. More specifically, the Corporation is organized and shall be operated exclusively to carry out the following purposes:

(a) To provide health care services through independent contractors and others (known as participating providers and suppliers) to patients who include, but are not limited to, Medicare beneficiaries pursuant to agreements with third party payors who include, but are not limited to, the Center for Medicare and Medicaid Services. In no event, however, will any of the relationships with participating providers and suppliers referred to above be a partnership or joint venture in violation of Article VII, Section 10 of the Florida Constitution;

(b) To form one or more wholly owned limited liability companies for the purpose of managing and operating programs with different payors as separate divisions; and

(c) To conduct any and all lawful affairs and business incident to the purpose for which this Corporation is organized.
In no event shall this Corporation engage in any activity which would be contrary to the activities: (1) permitted to be engaged in by any organization the activities of which are exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1986; or (2) of a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code of 1986, as hereafter amended, and the applicable rules and regulations thereunder.

The Corporation shall not engage, nor shall any of its funds, property, or income be used, in carrying on propaganda or otherwise attempting to influence legislation, nor shall the Corporation participate in or intervene in (including the publishing or distributing of statements) any political campaign on behalf of any candidate for public office, nor shall the Corporation engage in subversive activities.

No compensation shall be paid to any member, officer, director, trustee, creator or organizer of the Corporation or substantial contributor to it except as a reasonable allowance for services actually rendered to or for the Corporation or goods or property actually sold or leased to the Corporation.

ARTICLE III-MEMBERS

This Corporation’s sole Member shall be the North Broward Hospital District, a special taxing district of the State of Florida (the “Member”).

ARTICLE IV-NON STOCK CORPORATION

This Corporation shall have no capital stock.

ARTICLE V-OFFICERS AND DIRECTORS

The affairs of the Corporation shall be managed by a Board of Directors. The Directors shall be appointed by the Member. The number of Directors shall be fixed from time to time by the Member. A Director may be removed by the Member with or without cause.

The Board of Directors shall consist of not less than five nor more than nine members. The number of Directors shall be fixed from time-to-time as set forth in the By-Laws of the Corporation. At such time as the Corporation may proceed to apply to operate a Medicare Accountable Care Organization, one such Director shall be a Medicare beneficiary who is served by the Corporation and another such Director shall be a physician who, at all times during his or her directorship, has in force an agreement with the Corporation to participate in the Corporation’s programs. All Directors shall comply with the Corporation’s Conflict of Interest Policy.

The officers of the Corporation shall consist of a President, Vice President, Secretary/Treasurer. Each officer shall serve for a term of one (1) year, beginning the 1st day of the month immediately following his election by a majority of the Board of Directors at the annual meeting of the Board of Directors. Officers may be re-elected to serve subsequent terms.
ARTICLE VI-INDEMNIFICATION OF DIRECTORS AND OFFICERS

This Corporation shall indemnify any Director or Officer who by virtue of his or her being a Director or Officer of this Corporation, is made a party to any action or proceeding, except when such Director or Officer is adjudicated guilty of malfeasance in the discharge of his or her duties to this Corporation. Indemnification shall be for all reasonable expenses, including any and all attorneys and paralegal fees and costs, incurred as a result of such action or proceeding.

ARTICLE VII-BY-LAWS

The By-Laws of the Corporation may be altered or rescinded solely by vote of the Member at the annual meeting of the Member or at a duly called meeting of the Member.

ARTICLE VIII-AMENDMENTS TO THE ARTICLES OF INCORPORATION

These Articles of Incorporation may be amended in the manner provided by law.

ARTICLE IX-EARNINGS

No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to its members, directors, officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article II hereof.

ARTICLE X-DISSOLUTION

Upon the liquidation or dissolution of the Corporation, its assets, if any, remaining after payment (or provision for payment) of all liabilities of the Corporation, shall be distributed to, and only to, the Member, or if such organization has ceased to exist, to any one or more organizations qualified as exempt under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, which provides health care services to the residents of Northern Broward County, Florida.

ARTICLE XI-REGISTERED OFFICE AND AGENT

The street address of the registered office of the Corporation shall be: 1800 N.W. 49th Street, Fort Lauderdale, Florida 33309.

The name of the registered agent of this Corporation shall be Linda Epstein at that address.

ARTICLE XII-CORPORATION’S PRINCIPAL OFFICE AND/OR MAILING ADDRESS

The principal office and/or mailing address of this Corporation shall be: 1800 N.W. 49th Street, Fort Lauderdale, Florida 33309.

ARTICLE XIII-RESERVED POWERS
The following actions must be approved by a majority of the Board of Directors of the Corporation and submitted to the Member for approval:

(a) A merger or other combination of the Corporation with any entity;
(b) The sale, or entering into an agreement to sell, mortgage, or grant a security interest in or otherwise dispose of assets of the Corporation in the amount of $250,000 or more;
(c) Adoption of a plan of liquidation and dissolution;
(d) Incurrence of any indebtedness in the amount of $250,000 or more;
(e) Issuance of membership interests in the Corporation;
(f) Entering into any contract or agreement requiring payments in the amount of $250,000 or more; and
(g) Payment of compensation to the Directors of the Corporation.

CERTIFICATE OF ACCEPTANCE AS REGISTERED AGENT

Having been named as the Registered Agent in the Amended and Restated Articles of Incorporation of BROWARD HEALTH ACO SERVICES, INC., I hereby accept and agree to act in this capacity.

By: __________________________

Linda Epstein, Esquire

Dated: September __, 2019
CERTIFICATE RE: MEMBER APPROVAL OF AMENDED AND RESTATED ARTICLES OF INCORPORATION OF BROWARD HEALTH ACO SERVICES, INC.

The foregoing Amended and Restated Articles of Incorporation of BROWARD HEALTH ACO SERVICES, INC. were adopted by the sole Member, NORTH BROWARD HOSPITAL DISTRICT, on September __, 2019 and the number of votes cast for the amendment was sufficient for approval.

BROWARD HEALTH ACO SERVICES, INC.

By: Gino Santorio
It's: President

Dated: September __, 2019
BROWARD HEALTH ACO SERVICES, INC.
RESOLUTIONS
APPROVING AMENDMENT
OF
BYLAWS

WHEREAS, Broward Health ACO Services, Inc. (the "ACO") desires to modify its Bylaws and North Broward Hospital District as the sole member ("Member") is required to approve such amendment;

RESOLVED, the Board of Directors approve the changes to the Bylaws of the ACO as detailed in the tracked change version of the Bylaws of the ACO attached hereto and incorporated herein as Exhibit A to Broward Health ACO Services, Inc. Resolutions Approving Amendment of Bylaws ("Proposed Amendments"). In sum, the following Proposed Amendments to the Bylaws of the ACO, without limitation, are as follows:

1. Amending Article III, Section 1, to provide the following actions must be approved by a majority of the Board of Directors of the ACO and submitted to the Member for approval:

   a. A merger or other combination of the ACO with any entity;
   b. The sale, or entering into an agreement to sell, mortgage, or grant a security interest in or otherwise dispose of assets of the ACO in the amount of $250,000 or more;
   c. Adoption of a plan of liquidation and dissolution;
   d. Incurrence of any indebtedness in the amount of $250,000 or more;
   e. Entering into any contract or agreement requiring payments in the amount of $250,000 or more;
   f. Issuance of membership interests in the ACO; and
   g. Payment of compensation to the Directors of the ACO.

2. Amending Article III, Section 2 to provide that, subject to Member approval, the Board of Directors may approve paying Directors reasonable compensation consistent with the fair market value of the Directors’ services on the Board. The Directors may be paid their actual expenses, if any, of attendance at meetings of the Board of Directors upon approval by the Board of Directors without Member approval.

3. Amending Article III, Section 5 to provide that the number of Directors shall be fixed from time to time by the Member and to provide that a Director may be removed by the Member with or without cause.

4. Amending Article III, Section 8(b) to provide that members of the Board of Directors may participate in a meeting of the Board by means of a telephone conference or similar communications equipment provided a physical quorum is established.
5. Amending Article III, Section 9 to provide that regular and special meetings of the Board of Directors must be preceded by written notice in accordance with Federal and State laws and regulations.

6. Amending Article III, to delete Section 11 providing for Director action without a meeting.

7. Amending Article IV to delete the current provision appointing committees of the Board and to provide, in lieu thereof, that the ACO shall had such committees of the Board as the Board may determine from time to time.

8. Amending Article IX to provide that the Member may amend or repeal and adopt new Bylaws of the ACO.

9. Such other clean up and administrative edits highlighted included in the tracked change version of the Bylaws containing the Proposed Amendments attached hereto as Exhibit A.

RESOLVED, the Board of Directors hereby submit the Amended and Restated Bylaws containing the Proposed Amendments substantially in the form attached hereto as Exhibit B to the Member and recommend the Member vote to approve such Amended and Restated Bylaws to supersede and replace the prior Bylaws.

FURTHER RESOLVED, that the officers of the ACO be, and they hereby are, and each of them hereby is, authorized, empowered and directed, in the name of, for and on behalf of the ACO, to do and perform all such other acts and to take all such other steps as any one or more of them may in their discretion deem necessary, appropriate, advisable or convenient and proper to carry out the intent of the foregoing resolutions.
Exhibit A

to
Broward Health ACO Services, Inc.
Resolutions Approving Amendment of Bylaws

AMENDED AND RESTATED BYLAWS

OF

BROWARD HEALTH ACO SERVICES, INC.
(a Florida not-for-profit Corporation)

Effective September , 2019

ARTICLE I

Offices

Section 1. Registered Office. The initial registered office of Broward Health ACO Services, Inc., a Florida not-for-profit corporation (the "Corporation"), shall be located in Ft. Lauderdale, Florida.

Section 2. Other Offices. The Corporation may also have offices at such other places, either within or without the State of Florida, as the Board of Directors of the Corporation (the "Board of Directors") may from time to time determine.

ARTICLE II

Membership

Section 1. Membership. The Corporation's sole Member shall be the North Broward Hospital District, a special taxing district of the State of Florida (the "Member").

ARTICLE III

Board of Directors

Section 1. Powers. All corporate powers shall be exercised by or under the authority of, and the business and affairs of the Corporation shall be managed under the direction of, the Board of Directors. Directors must be natural persons who are at least 18 years of age but need not be residents of Florida. Provided, however, the following actions must be approved by a majority of the Board of Directors and submitted to the Member for approval:

(a) A merger or other combination of the Corporation with any entity;

(b) The sale, or entering into an agreement to sell, mortgage, or grant a security interest in or otherwise dispose of assets of the Corporation in the amount of $250,000 or more;
(c) Adoption of a plan of liquidation and dissolution;

(d) Incurrence of any indebtedness in the amount of $250,000 or more;

(e) Entering into any contract or agreement requiring payments in the amount of $250,000 or more;

(f) Issuance of membership interests in the Corporation.; and

(g) Payment of compensation to the Directors of the Corporation.

Section 2. Compensation. The Directors shall serve in such capacity without compensation Subject to Member approval as provided in Section 1 (g), above, the Board of Directors may approve paying Directors reasonable compensation consistent with the fair market value of the Directors' services on the Board. The Directors may be paid their actual expenses, if any, of attendance at meetings of the Board of Directors upon approval by the Board of Directors without Member approval.

Section 3. Number, Appointment & Resignation.

(a) The initial Board of Directors shall consist of four members as set forth in the Articles of Incorporation. For each succeeding period, this Corporation shall have not less than five (5) but not more than nine (9) Directors. The number of Directors of the Corporation shall be fixed from time to time, within any limits set forth in the Articles of Incorporation, by resolution of the Board of Directors. Any decrease in the number of Directors shall not shorten the term of an incumbent Director. Directors shall be
(a) appointed annually by the Member. Each Director appointed shall hold office until his or her successor is duly appointed and qualified or until his or her resignation or removal. In the absence of an express determination by the Board Member, the number of Directors, until changed by the Board Member, shall be the number of Directors appointed by the Member during the preceding annual period.

(b) A Director may resign at any time by delivering written notice to the Corporation. The resignation shall be effective upon receipt, unless the notice specifies a later effective date. If the resignation is effective at a later date and the Corporation accepts the future effective date, the Member may fill the pending vacancy, pursuant to Article III, Section 4 below, effective at the effective time of the resignation.

Section 4. Vacancies. Any vacancy occurring in the Board of Directors, including a vacancy created by an increase in the number of Directors, may be filled by appointment by the Member. A Director appointed to fill a vacancy shall hold office for the unexpired term of his or her predecessor in office. Any Director position to be filled by reason of an increase in the number of Directors may be filled by appointment by the Member, but only for a term of office continuing until the next appointment of Directors.

Section 5. Removal of Directors. The Board of Directors by majority vote may remove one or more Directors with or without cause. A Director may be removed by the Board of Directors at a meeting, provided the notice of the meeting states that the purpose, or one of the purposes, of the meeting is the removal of the Director with or without cause.

Section 6. Quorum and Voting. A majority of the number of Directors fixed by or in accordance with these Bylaws shall constitute a quorum for the transaction of business at any meeting of Directors. If a quorum is present when a vote is taken, the affirmative vote of a majority of the Directors present shall be the act of the Board of Directors.

Section 7. Deemed Assent. A Director who is present at a meeting of the Board of Directors or a committee of the Board of Directors when corporate action is taken is deemed to have assented to the action taken unless (i) the Director objects at the beginning of the meeting (or promptly upon his arrival) to the holding of the meeting or transacting specified business at the meeting, or (ii) the Director votes against or abstains from the action taken.

Section 8. Meetings.

(a) Regular and special meetings of the Board of Directors shall be held at the principal place of business of the Corporation or at any other place, within or without the State of Florida, designated by the President. Meetings of the Board of Directors may be called by any member of the Board of Directors or by the President. A majority of the Directors present, regardless whether a quorum exists, may adjourn any meeting of the Board of Directors to another time and place. Notice of an adjourned meeting shall be given to the Directors who were not present at the time of the adjournment and, unless the time and place of the adjourned meeting are announced at the time of the adjournment, to the Directors who were present.
Members of the Board of Directors may participate in a meeting of the Board by means of a telephone conference or similar communications equipment through which all persons participating may simultaneously hear each other during the meeting; participation by these means constitutes presence in person at the meeting, provided a physical quorum is established.

Section 9. Notice of Meetings. Regular meetings of the Board of Directors must be preceded by at least fifteen (15) days written notice of the date, time and place of the meeting in accordance with Federal and State laws and regulations. Special meetings of the Board of Directors must be preceded by at least ten (10) days written notice of the date, time and place of the meeting in accordance with Federal and State laws and regulations. The notice need not describe either the business to be transacted at or the purpose of the special meeting, unless otherwise required by these bylaws or by law.

Section 10. Waiver of Notice. Notice of a meeting of the Board of Directors need not be given to a Director who signs a waiver of notice either before or after the meeting. Attendance of a Director at a meeting shall constitute a waiver of notice of that meeting and a waiver of any and all objections to the place of the meeting, the time of the meeting and the manner in which it has been called or convened, except when a Director states, at the beginning of the meeting or promptly upon arrival at the meeting, any objection to the transaction of business because the meeting is not lawfully called or convened. The waiver of notice need not describe either the business to be transacted at or the purpose of the meeting.

Section 11. Director Action Without a Meeting. Any action required or permitted to be taken at a meeting of the Board of Directors may be taken without a meeting if the action is taken by the written consent of all members of the Board of Directors. The action must be evidenced by one or more written consents describing the action to be taken and signed by each Director, which consent(s) shall be filed in the minutes of the proceedings of the Board. The action taken shall be deemed effective when the last Director signs the consent, unless the consent specifies otherwise.

ARTICLE IV
Committees

The Corporation shall have such committees of the Board as the Board may determine from time to time.

To assist the Board in the proper management and control of the affairs of the Corporation, Article IV titled "Committees" of the Bylaws of the North Broward Hospital District is incorporated herein by this reference. The Corporation shall have such other Committees of the Board as the Board may determine from time to time. Except as otherwise provided in the Bylaws of the North Broward Hospital District, the Board may from time to time establish, eliminate and modify the power or authority of any of the Board's Committees; change the size of a Committee; and add, remove or replace the chairperson or member of any Committee.
ARTICLE V
Officers

Section 1. Officers. The Corporation shall have a President, a Vice President, a Secretary and a Treasurer. The President/CEO of the North Broward Hospital District shall serve as the President of the Corporation. The Sr. Vice President/Chief Financial Officer of the North Broward Hospital District shall serve as the Vice President of the Corporation. The Vice President of Financial Operations of the North Broward Hospital District shall serve as the Secretary and Treasurer of the Corporation. Such other officers and assistant officers and agents as may be deemed necessary or desirable may be appointed by the Board of Directors from time to time. Any two or more offices may be held by the same person.

Section 2. Duties. The officers of the Corporation shall have the following duties:

The President shall be the chief executive officer of the Corporation and shall preside at all meetings of the Board of Directors. He or she shall perform all duties as the Board of Directors shall from time to time reasonably designate and shall be subject to the direction of the Board of Directors.

Each Vice President, if any, shall have such powers and perform such duties as the Board of Director shall from time to time designate. In the absence or disability of the President, a Vice President specifically designated by the vote of the Board of Directors shall have the powers and shall exercise the duties of the President.

The Secretary shall perform such duties as are prescribed by the Board of Directors.

The Treasurer shall perform such duties as are prescribed by the Board of Directors or the Chairman of the Board.

Each Assistant Secretary and Assistant Treasurer, if any, shall be appointed by the Board of Directors and shall have such powers and shall perform such duties as are prescribed by the Board of Directors.

Section 3. Resignation of Officer. An officer may resign at any time by delivering written notice to the Corporation. The resignation shall be effective upon receipt, unless the notice specifies a later effective date. If the resignation is effective at a later date and the Corporation accepts the future effective date, the Board of Directors may fill the pending vacancy before the effective date provided the Board of Directors provides that the successor officer does not take office until the future effective date.

Section 4. Removal of Officer. The Board of Directors may remove any officer at any time with or without cause. Any officer or assistant officer, if appointed by another officer, may be removed by the appointing officer.

ARTICLE VI
Corporate Records
Section 1. Corporate Records.

(A) The Corporation shall keep as permanent records minutes of all meetings of its Board of Directors and committees having any authority of the Board of Directors, a record of all actions taken by the Board of Directors without a meeting, and a record of all actions taken by a committee of the Board of Directors in place of the Board of Directors on behalf of the Corporation.

(B) The Corporation shall maintain, at its registered office in this state, a copy of the Articles of Incorporation and its By-Laws, as amended, and accurate accounting records.

ARTICLE VII
Indemnification

Section 1. Right to Indemnification. Each person (including the heirs, executors, administrators, or estate of such person) (1) who is or was a director or officer of the Corporation, (2) who is or was an agent or employee of the Corporation and as to whom the Corporation has agreed to grant such indemnity hereunder, or (3) who is or was serving at the request of the Corporation as its representative in the position of a director, officer, agent, or employee of another corporation, partnership, joint venture, trust or other enterprise and as to whom the Corporation has agreed to grant such indemnity hereunder, shall be indemnified by the Corporation to the fullest extent permitted or authorized by current or future legislation or by current or future judicial or administrative rule or regulation (but, in the case of any future legislation or decision, only to the extent that it permits the Corporation to provide broader indemnification rights than permitted prior to the legislation or decision), against all fines, liabilities, settlements, losses, damages, costs and expenses, including attorneys' fees, asserted against him or her or incurred by him or her in his or her capacity as such director, officer, trustee, partner, agent, employee or representative, or arising out of his or her status as such director, officer, trustee, partner, agent, employee or representative. The foregoing right of indemnification shall not be exclusive of other rights to which those seeking indemnification may be entitled. The Corporation may maintain insurance, at its expense, to protect itself and any such person against any such fine, liability, cost or expense, including attorneys' fees, regardless of whether the Corporation would have the legal power to directly indemnify him or her against such liability.

Section 2. Advances. Costs, charges and expenses (including attorneys' fees) incurred by a person referred to in Section 1 of this Article in defending a civil or criminal suit, action or proceeding may be paid (and, in the case of Directors of the Corporation, shall be paid) by the Corporation in advance of the final disposition thereof upon receipt of an undertaking to repay all amounts advanced if it is ultimately determined that the person is not entitled to be indemnified by the Corporation as authorized by this Article and upon satisfaction of other conditions established from time to time by the Board of Directors or required by current or future legislation (but, with respect to future legislation, only to the extent that it provides conditions less burdensome than those previously provided).

Section 3. Savings Clause. If this Article or any portion of it is invalidated on any ground by a court of competent jurisdiction, the Corporation nevertheless indemnifies each Director of the Corporation to the fullest extent permitted by all portions of this Article that has not been invalidated and to the fullest extent permitted by law.
ARTICLE VIII
Miscellaneous

Section 1. Corporate Seal. The corporate seal of the Corporation shall be circular in form and shall include the name of the Corporation, the year incorporated, and the words "Florida," "Corporate Seal" and "not-for-profit" embossed thereon.

Section 2. Fiscal Year. The fiscal year of the Corporation shall end on June 30 of each calendar year, unless otherwise fixed by resolution of the Board of Directors.

Section 3. Checks. All checks, drafts or other orders for the payment of money, notes or other evidences of indebtedness issued in the name of the Corporation shall be signed by the President, the Treasurer or such other officer(s) or agent(s) of the Corporation as shall be determined from time to time by resolution of the Board of Directors.

ARTICLE IX
Amendment

These Bylaws may be altered, amended or repealed, and new Bylaws adopted, by the Board of Directors. Member.
Exhibit B

to
Broward Health ACO Services, Inc.
Resolutions Approving Amendment of Bylaws

AMENDED AND RESTATED BYLAWS

OF

BROWARD HEALTH ACO SERVICES, INC.
(a Florida not-for-profit Corporation)

Effective September __, 2019

ARTICLE I

Offices

Section 1. Registered Office. The initial registered office of Broward Health ACO Services, Inc., a Florida not-for-profit corporation (the "Corporation"), shall be located in Ft. Lauderdale, Florida.

Section 2. Other Offices. The Corporation may also have offices at such other places, either within or without the State of Florida, as the Board of Directors of the Corporation (the "Board of Directors") may from time to time determine.

ARTICLE II

Membership

Section 1. Membership. The Corporation's sole Member shall be the North Broward Hospital District, a special taxing district of the State of Florida (the "Member").

ARTICLE III

Board of Directors

Section 1. Powers. All corporate powers shall be exercised by or under the authority of, and the business and affairs of the Corporation shall be managed under the direction of, the Board of Directors. Directors must be natural persons who are at least 18 years of age but need not be residents of Florida. Provided, however, the following actions must be approved by a majority of the Board of Directors and submitted to the Member for approval:

(a) A merger or other combination of the Corporation with any entity;

(b) The sale, or entering into an agreement to sell, mortgage, or grant a security interest in or otherwise dispose of assets of the Corporation in the amount of $250,000 or more;
(c) Adoption of a plan of liquidation and dissolution;

(d) Incurrence of any indebtedness in the amount of $250,000 or more;

(e) Entering into any contract or agreement requiring payments in the amount of $250,000 or more;

(f) Issuance of membership interests in the Corporation.; and

(g) Payment of compensation to the Directors of the Corporation.

Section 2. **Compensation.** Subject to Member approval as provided in Section 1.(g), above, the Board of Directors may approve paying Directors reasonable compensation consistent with the fair market value of the Directors’ services on the Board. The Directors may be paid their actual expenses, if any, of attendance at meetings of the Board of Directors upon approval by the Board of Directors without Member approval.

Section 3. **Number, Appointment & Resignation.**

(a) The Board of Directors shall consist of not less than five (5) but not more than nine (9) Directors. The number of Directors of the Corporation shall be fixed from time to time, within any limits set forth in the Articles of Incorporation, by resolution of the Member. Any decrease in the number of Directors shall not shorten the term of an incumbent Director. Directors shall be appointed annually by the Member. Each Director appointed shall hold office until his or her successor is duly appointed and qualified or until his or her resignation or removal. In the absence of an express determination by the Member, the number of Directors, until changed by the Member, shall be the number of Directors appointed by the Member during the preceding annual period.

(b) A Director may resign at any time by delivering written notice to the Corporation. The resignation shall be effective upon receipt, unless the notice specifies a later effective date. If the resignation is effective at a later date and the Corporation accepts the future effective date, the Member may fill the pending vacancy, pursuant to Article III, Section 4 below, effective at the effective time of the resignation.

Section 4. **Vacancies.** Any vacancy occurring in the Board of Directors, including a vacancy created by an increase in the number of Directors, may be filled by appointment by the Member. A Director appointed to fill a vacancy shall hold office for the unexpired term of his or her predecessor in office. Any Director position to be filled by reason of an increase in the number of Directors may be filled by appointment by the Member, but only for a term of office continuing until the next appointment of Directors.

Section 5. **Removal of Directors.** A Director may be removed by the Member with or without cause.
Section 6. Quorum and Voting. A majority of the number of Directors fixed by or in accordance with these Bylaws shall constitute a quorum for the transaction of business at any meeting of Directors. If a quorum is present when a vote is taken, the affirmative vote of a majority of the Directors present shall be the act of the Board of Directors.

Section 7. Deemed Assent. A Director who is present at a meeting of the Board of Directors or a committee of the Board of Directors when corporate action is taken is deemed to have assented to the action taken unless (i) the Director objects at the beginning of the meeting (or promptly upon his arrival) to the holding of the meeting or transacting specified business at the meeting, or (ii) the Director votes against or abstains from the action taken.

Section 8. Meetings.

(a) Regular and special meetings of the Board of Directors shall be held at the principal place of business of the Corporation or at any other place, within or without the State of Florida, designated by the President. Meetings of the Board of Directors may be called by any member of the Board of Directors or by the President. A majority of the Directors present, regardless whether a quorum exists, may adjourn any meeting of the Board of Directors to another time and place. Notice of an adjourned meeting shall be given to the Directors who were not present at the time of the adjournment and, unless the time and place of the adjourned meeting are announced at the time of the adjournment, to the Directors who were present.

(b) Members of the Board of Directors may participate in a meeting of the Board by means of a telephone conference or similar communications equipment through which all persons participating may simultaneously hear each other during the meeting, provided a physical quorum is established.

Section 9. Notice of Meetings. Regular meetings of the Board of Directors must be preceded by written notice in accordance with Federal and State laws and regulations. Special meetings of the Board of Directors must be preceded by written notice in accordance with Federal and State laws and regulations. The notice need not describe either the business to be transacted at or the purpose of the special meeting, unless otherwise required by these bylaws or by law.

Section 10. Waiver of Notice. Notice of a meeting of the Board of Directors need not be given to a Director who signs a waiver of notice either before or after the meeting, Attendance of a Director at a meeting shall constitute a waiver of notice of that meeting and a waiver of any and all objections to the place of the meeting, the time of the meeting and the manner in which it has been called or convened, except when a Director states, at the beginning of the meeting or promptly upon arrival at the meeting, any objection to the transaction of business because the meeting is not lawfully called or convened. The waiver of notice need not describe either the business to be transacted at or the purpose of the meeting.
ARTICLE IV

Committees

The Corporation shall have such committees of the Board as the Board may determine from time to time.

ARTICLE V

Officers

Section 1. Officers. The Corporation shall have a President, a Vice President, a Secretary and a Treasurer. The President/CEO of the North Broward Hospital District shall serve as the President of the Corporation. The Sr. Vice President/Chief Financial Officer of the North Broward Hospital District shall serve as the Vice President of the Corporation. The Vice President of Financial Operations of the North Broward Hospital District shall serve as the Secretary and Treasurer of the Corporation. Such other officers and assistant officers and agents as may be deemed necessary or desirable may be appointed by the Board of Directors from time to time. Any two or more offices may be held by the same person.

Section 2. Duties. The officers of the Corporation shall have the following duties:

The President shall be the chief executive officer of the Corporation and shall preside at all meetings of the Board of Directors. He or she shall perform all duties as the Board of Directors shall from time to time reasonably designate and shall be subject to the direction of the Board of Directors.

Each Vice President, if any, shall have such powers and perform such duties as the Board of Director shall from time to time designate. In the absence or disability of the President, a Vice President specifically designated by the vote of the Board of Directors shall have the powers and shall exercise the duties of the President.

The Secretary shall perform such duties as are prescribed by the Board of Directors.

The Treasurer shall perform such duties as are prescribed by the Board of Directors or the Chairman of the Board.

Each Assistant Secretary and Assistant Treasurer, if any, shall be appointed by the Board of Directors and shall have such powers and shall perform such duties as are prescribed by the Board of Directors.

Section 3. Resignation of Officer. An officer may resign at any time by delivering written notice to the Corporation. The resignation shall be effective upon receipt, unless the notice specifies a later effective date. If the resignation is effective at a later date and the Corporation accepts the future effective date, the Board of Directors may fill the pending vacancy before the effective date provided the Board of Directors provides that the successor officer does not take office until the future effective date.
Section 4. **Removal of Officer.** The Board of Directors may remove any officer at any time with or without cause. Any officer or assistant officer, if appointed by another officer, may be removed by the appointing officer.

**ARTICLE VI**

**Corporate Records**

Section 1. **Corporate Records.**

(A) The Corporation shall keep as permanent records minutes of all meetings of its Board of Directors and committees having any authority of the Board of Directors, a record of all actions taken by the Board of Directors without a meeting, and a record of all actions taken by a committee of the Board of Directors in place of the Board of Directors on behalf of the Corporation.

(B) The Corporation shall maintain, at its registered office in this state, a copy of the Articles of Incorporation and its By-Laws, as amended, and accurate accounting records.

**ARTICLE VII**

**Indemnification**

Section 1. **Right to Indemnification.** Each person (including the heirs, executors, administrators, or estate of such person) (1) who is or was a director or officer of the Corporation, (2) who is or was an agent or employee of the Corporation and as to whom the Corporation has agreed to grant such indemnity hereunder, or (3) who is or was serving at the request of the Corporation as its representative in the position of a director, officer, agent, or employee of another corporation, partnership, joint venture, trust or other enterprise and as to whom the Corporation has agreed to grant such indemnity hereunder, shall be indemnified by the Corporation to the fullest extent permitted or authorized by current or future legislation or by current or future judicial or administrative rule or regulation (but, in the case of any future legislation or decision, only to the extent that it permits the Corporation to provide broader indemnification rights than permitted prior to the legislation or decision), against all fines, liabilities, settlements, losses, damages, costs and expenses, including attorneys' fees, asserted against him or her or incurred by him or her in his or her capacity as such director, officer, trustee, partner, agent, employee or representative, or arising out of his or her status as such director, officer, trustee, partner, agent, employee or representative. The foregoing right of indemnification shall not be exclusive of other rights to which those seeking indemnification may be entitled. The Corporation may maintain insurance, at its expense, to protect itself and any such person against any such fine, liability, cost or expense, including attorneys' fees, regardless of whether the Corporation would have the legal power to directly indemnify him or her against such liability.

Section 2. **Advances.** Costs, charges and expenses (including attorneys' fees) incurred by a person referred to in Section 1 of this Article in defending a civil or criminal suit, action or proceeding may be paid (and, in the case of Directors of the Corporation, shall be paid) by the Corporation in advance of the final disposition thereof upon receipt of an undertaking to repay all amounts advanced if it is ultimately determined that the person is not entitled to be indemnified by the Corporation as authorized by this Article and upon satisfaction of other conditions established.
from time to time by the Board of Directors or required by current or future legislation (but, with respect to future legislation, only to the extent that it provides conditions less burdensome than those previously provided).

**Section 3. Savings Clause.** If this Article or any portion of it is invalidated on any ground by a court of competent jurisdiction, the Corporation nevertheless indemnifies each Director of the Corporation to the fullest extent permitted by all portions of this Article that has not been invalidated and to the fullest extent permitted by law.

**ARTICLE VIII**
**Miscellaneous**

**Section 1. Corporate Seal.** The corporate seal of the Corporation shall be circular in form and shall include the name of the Corporation, the year incorporated, and the words "Florida," "Corporate Seal" and "not-for-profit" embossed thereon.

**Section 2. Fiscal Year.** The fiscal year of the Corporation shall end on June 30 of each calendar year, unless otherwise fixed by resolution of the Board of Directors.

**Section 3. Checks.** All checks, drafts or other orders for the payment of money, notes or other evidences of indebtedness issued in the name of the Corporation shall be signed by the President, the Treasurer or such other officer(s) or agent(s) of the Corporation as shall be determined from time to time by resolution of the Board of Directors.

**ARTICLE IX**
**Amendment**

These Bylaws may be altered, amended or repealed, and new Bylaws adopted, by the Member.
RESOLUTION FY20-06

RESOLUTION CREATING A NEW PROCUREMENT CODE AND ESTABLISHING EMERGENCY WAIVERS

WHEREAS, North Broward Hospital District (the “District”) is a special taxing district of the State of Florida, and is authorized and empowered to maintain hospitals and supportive facilities for the care and treatment of the people of said district;

WHEREAS, Section 24 of the Charter of the District (the “Charter”) authorizes the District’s Board of Commissioners (“Board”) to establish procedures governing the purchase of supplies, equipment, materials, and construction services;

WHEREAS, since the adoption of the current Procurement Code, laws and best practices regarding procurements has changed;

WHEREAS, Section 24 of the Charter authorizes the District’s Board to waive prescribed competitive procurement policies or other requirements of when emergency or unusual conditions exist for the acquisition of supplies, equipment, and services;

WHEREAS, the Board finds that, when emergency or unusual conditions exist, the waiver of prescribed competitive procurement policies set forth in the District’s Procurement Code is necessary when procuring supplies, equipment, or services; and

WHEREAS, capitalized words not defined herein shall have the meanings associated to them in the Procurement Code attached hereto as Exhibit A.

NOW, THEREFORE, BE IT RESOLVED, by the Board that:

1. The Board hereby establishes the Procurement Code and Procurement Policies attached hereto as Exhibit A and incorporated herein by reference.

2. Such Procurement Code and Procurement Policies shall specifically supersede the previous Procurement Code and any conflicting policies, all in effect as of the date of the ratification of this Resolution.

3. The Board makes a finding that “emergency or unusual conditions” as referenced within Section 24(4) of the Charter shall mean those situations that exist whereby following the procedures of the Procurement Code or Procurement Policies may be detrimental to the interests of the District because it may result in an actual or perceived threat to: (a) Broward Health’s compliance with regulatory requirements; (b) the life, health, safety, or welfare of patients, employees, or the public; or (c) the operations of Broward Health facilities.

4. In cases of emergency or unusual conditions, competitive procedures, as prescribed by the Charter, Procurement Code, Procurement Policies, or other requirements of Broward Health, may be altered or waived by Broward Health in any manner that is reasonable to handle the emergency or unusual conditions.
5. If any portion of this Resolution is determined by any court of competent jurisdiction to be invalid, the invalid portion shall be stricken, and such striking shall not affect the validity of the remainder of this Resolution. If any Court determines that this Resolution, or any portion hereof, cannot be legally applied to any individual(s), group(s), entity(ies), property(ies), or circumstance(s), such determination shall not affect the applicability hereof to any other individual, group, entity, property, or circumstance.

6. The CEO or his designee (each such person, an “Authorized Officer”) are hereby authorized and empowered to 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 Procurement Code and the Procurement Policies 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.

7. This Resolution shall become effective upon adoption.

8. This Resolution hereby supersedes, amends, replaces, and repeals any previous conflicting resolution, policy, or policies.
Broward Health
2019 Proposed Procurement Code Recommendation
Executive Summary
August 21, 2019

Necessity for Revision

1. The Procurement Code and related Policies are outdated – last revision 11/2009
2. The Procurement Code and related Policies are unclear and not consistent with procurement best practices for public organizations.
3. The Procurement code and related Policies contain onerous procedures without any benefit to the District.
4. The Procurement Code and related Policies do not reflect current practices and enhancements intended to increase diverse vendor spend.

General Overview of Changes to Procurement Code & related Policies

The general proposed changes to the Procurement Code and related Policies are as follows:

1. The structure of the Code has been simplified. Many sections were put into policies to complement the Code and to allow the Board the ability to modify the policies as Florida Law and best practices change. Additionally, certain sections that are operational in nature have been moved to Supply Chain/Procurement SOP which do not require Board approval.

   - **Procurement Code** (require Board approval)
   - **Procurement Policy Table** and incorporated policies (require Board approval)
   - Supply Chain/Procurement **Standard Operating Procedures** (SOP)’s (do not require Board approval)

2. The current code lacks clarity and does not delineate between Policies that require Board approval and those that do not. Under the proposed Code and Procurement Policy Table all referenced Procurement policies require Board approval.

<table>
<thead>
<tr>
<th>LOCATION</th>
<th>SUBJECT</th>
</tr>
</thead>
<tbody>
<tr>
<td>GA Policies and Procedures Manual</td>
<td>Review, Approval, and Administration of Contracts</td>
</tr>
<tr>
<td>GA Policies and Procedures Manual</td>
<td>Supplier Diversity</td>
</tr>
<tr>
<td>GA Policies and Procedures Manual</td>
<td>Selection of Construction Contractors and Professional Design Services Providers as Related to Construction</td>
</tr>
<tr>
<td>GA Policies and Procedures Manual</td>
<td>Selection and Approval of Professional Consulting Services</td>
</tr>
<tr>
<td>GA Policies and Procedures Manual</td>
<td>Threshold Categories of the Procurement Code</td>
</tr>
</tbody>
</table>

a. The policy which references the selection and approval of professional consulting services has been modified to provide clear guidance of the respective procurement process.
b. The policy which references Supplier Diversity has been modified to reflect all current enhancements to the Supplier Diversity Program (see table # 2 – Supplier Diversity Program enhancements).

c. The policy which references the Selection of Construction Contracttos and Professional design services providers as related to construction has been modified to be consistent with current Florida statute.

3. Modifications have been made to reflect current structure and clearly define departmental roles and responsibilities in the Procurement and Contracting processes.

   a. The current code references both CRMM and CA as part of the Procurement division without a clear segregation of roles and responsibilities.

      • CRMM is now being defined as Supply Chain Services reporting to the SVP/CFO. Supply Chain Services is responsible for the following divisions: Procurement & Sourcing/Bids/Value Analysis/Vendor Relations/Supplier Diversity & Supply Chain Operations.
      • CA is defined as Contracts Administration and reports to the SVP/CAO responsible for the contracting process.

   b. This provides greater transparency and adds “checks and balances” to ensure both departments are adhering to the Procurement Code.

4. The Code of Ethics and Professional conduct (section 1.5) was updated to be consistent with the Broward Health code of conduct and to incorporate any future changes.

5. We provided more clarity in the spending threshold and are requesting a higher spending threshold for President/CEO and CFO

<table>
<thead>
<tr>
<th>Spending Thresholds</th>
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</thead>
<tbody>
<tr>
<td>Board sets spending thresholds and permits President/CEO and CFO to execute contracts and requisitions to purchase services, goods and supplies.</td>
</tr>
<tr>
<td>CURRENT</td>
</tr>
<tr>
<td>$250K Within a single fiscal year for indefinite number of years</td>
</tr>
</tbody>
</table>

6. We are recommending changes to the current thresholds for the acquisition of goods and services (see table below). We are recommending to raise the formal bid threshold from $50,000 to $100,000 to be aligned with other public health systems and best practices and because the
## Acquisition Procedures and Thresholds for Goods and Services

<table>
<thead>
<tr>
<th>CURRENT</th>
<th>PROPOSED</th>
</tr>
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<tbody>
<tr>
<td><strong>$0 to $2,500</strong></td>
<td><strong>$0 to $5,000</strong></td>
</tr>
<tr>
<td>One (1) Quote</td>
<td>One (1) Quote</td>
</tr>
<tr>
<td><strong>$2,500 to $50,000</strong></td>
<td><strong>$50,000 and Above</strong></td>
</tr>
<tr>
<td>Two (2) Competitive Quotes or Informal Bid</td>
<td>Project Custodian / Responsible Executive completes PSC Form &amp; Proforma (if applicable) and validates funding</td>
</tr>
<tr>
<td>Initiate Procurement or Contracting Process</td>
<td>PSC to Approve Procurement Method and Bid Waivers up to the following amounts: Sole Source &amp; Standardization &lt;$50k and Legacy &lt;$250k</td>
</tr>
<tr>
<td>Formal Bid RFP / RFQ</td>
<td>Unbudgeted Expenditures exceeding $250K w/ a single fiscal year for indefinite number of years require Board Approval</td>
</tr>
<tr>
<td><strong>$50,000 and Above</strong></td>
<td><strong>Over $100,000</strong></td>
</tr>
<tr>
<td>Three (3) Competitive Quotes or Informal Bid</td>
<td>Project Custodian / Responsible Executive completes PSC form &amp; Proforma (if applicable) and validates funding</td>
</tr>
<tr>
<td>Initiate Procurement or Contracting Process</td>
<td>PSC to Approve Procurement Method and all Bid Waivers up to $250k</td>
</tr>
<tr>
<td>Formal Bid RFP / RFQ</td>
<td>Unbudgeted Expenditures exceeding $400K w/ a single fiscal year not to exceed five (5) years require Board Approval</td>
</tr>
</tbody>
</table>

Benefits from a public announcement and formal bid/competition typically will not outweigh the costs. This will also allow the staff to spend additional time on substantial bid opportunities and other supplier diversity efforts.
7. Certain provisions which were necessary were added to the Code. This includes Sections referencing the Sunshine Law and Florida’s Public Records Law.

8. Proposed Supplier Diversity Enhancements in the new policy to better described the strategies designed by Broward Health which are intended to increase procurement opportunities with Certified Diverse Vendors.

The OSD in collaboration with the Procurement Divisions and/or the Project/Contract custodian/Manger, when feasible, will develop, design and otherwise structure potential Broward Health’s procurement requests utilizing one or more of the following Supplier Diversity Enhancements in order to encourage and maximize Certified Diverse Vendor participation.

   i. Reduction of Large Contracts;
   ii. Payment and Performance Bond Waiver;
   iii. Prohibit Double Bonding Requirement;
   iv. Prompt Payment Mandate;
   v. Quote Price Tolerance (QPT) Initiative;
   vi. Request for Proposal (RFP) Scoring Criteria;
   vii. Subcontracting Initiative;
   viii. Targeted Marketing; and
   ix. Any other options as recommended by the PSC.

9. The Legal Department, will in the near future, also establish an SOP in conjunction with the President/CEO to reflect the needs of the District.

10. All changes have been made in collaboration with the Legal Department and the input of outside counsel. Provisions were updated to reflect the current state of the law.
Broward Health
Current Procurement Code
PURPOSE: This Procurement Code provides guidance for the North Broward Hospital District's procurement of supplies, equipment, and services.

DEFINITIONS

Definitions and acronyms used throughout the Procurement Code are listed in Table 1.0.1

BACKGROUND

The effective and efficient operation of the North Broward Hospital District (NBHD) requires the existence of certain universally applied guidelines applicable to all employees and for all facilities of the organization. This Procurement Code provides direction and guidance for the internal operations of the NBHD as it relates to the procurement of supplies, equipment, and services. Certain procurement items do not fall within the general guidelines of the Procurement Code: Contracts for professional and consulting services, physician services, legal services, lobbyist services, marketing services, finance-related services, accounting services, audit services, and design, construction and real estate initiatives.

References:

- General Administrative Policy 001-020
- Chapter 2006-347, L.O.F.
- 42 CFR. 482.12

Related Policies:

- General Administrative Policy 001-140
- General Administrative Policy 001-086

Authors: Dianne Whitlock, Deborah Breen, Brian Bravo, LaRae Floyd, Jeanne Eckes

Reviewed by: Dianne Whitlock, Deborah Breen, Legal Counsel, and Lisa Rawlins

Date: 11/2009
PROCUREMENT CODE

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PART 1: GENERAL

1.0 DEFINITIONS AND ACRONYMS

The use of unique terminology and acronyms is customary with in any large organization as a means of communication at all levels. For that reason, as well as repetition throughout this document, the following definitions listing and acronym legend is being supplied:

<table>
<thead>
<tr>
<th>TERM</th>
<th>DEFINITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bid Exemption</td>
<td>Not executing a formal bid due to the availability and benefit of a GPO contract. Section 24 of the Code of the North Broward Hospital District (NBHD) permits a bidding exemption when using GPO vendors.</td>
</tr>
<tr>
<td>Bid Waiver</td>
<td>Not executing a formal bid due to Sole Source availability or NBHD Standardization.</td>
</tr>
<tr>
<td>Biomedical Equipment</td>
<td>All clinical, electrical equipment used to treat patients.</td>
</tr>
<tr>
<td>Broward Health</td>
<td>The fictitious name established in 2007 to promote and effectively target the services of the North Broward Hospital District in the healthcare marketplace. The naming of Broward Health does not modify or amend any covenants, contracts, or other obligations of the North Broward Hospital District.</td>
</tr>
<tr>
<td>Budgeted</td>
<td>Expenditures which are approved by the Board at a regular or a special meeting called for that purpose following the Budget Workshop and/or revised through the Final Tax Hearing.</td>
</tr>
<tr>
<td>Bypass Order</td>
<td>An order that goes directly to the user department and does not stop in Material Operations or Regional Material Services.</td>
</tr>
<tr>
<td>Charter of the NBHD</td>
<td>Sometimes referred to as the “By Laws,” is the enabling legislation, Chapter 2006-347, L.O.F. The Municipal Code Corporation published the By Laws by the order of the Board.</td>
</tr>
<tr>
<td>Cold Calls</td>
<td>The act of vendors or business representatives entering business units without making an appointment or obtaining proper authorization to make the visit.</td>
</tr>
<tr>
<td>-----------------</td>
<td>----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Consultant Contract</td>
<td>Agreement with a consulting firm or individual for services. Consultants include accounting, law, actuarial, appraisal, business consulting and other related firms that provide consulting services.</td>
</tr>
<tr>
<td>Contract</td>
<td>An agreement to purchase or sell goods or services to or from the District.</td>
</tr>
<tr>
<td>Contract Amount</td>
<td>The amount reasonably expected to be purchased from or sold to the contractor to complete the entire project.</td>
</tr>
<tr>
<td>Contract Development Participant</td>
<td>A person or group which has responsibility for the processing of the contract.</td>
</tr>
<tr>
<td>Contract Custodian/Contract Manager</td>
<td>The person designated in the contract as the individual who is responsible for understanding the terms of the agreement and for insuring/monitoring the compliance of the contract.</td>
</tr>
<tr>
<td>Diverse Vendor</td>
<td>NBHD Certified Minority, Woman or Small Business Enterprise (M/W/SBE)</td>
</tr>
<tr>
<td>District or NBHD</td>
<td>A statutorily defined special tax district known as the North Broward Hospital District.</td>
</tr>
<tr>
<td>District Legal Counsel or NBHD Legal Counsel</td>
<td>The legal counsel appointed by the Board of Commissioners for the North Broward Hospital District.</td>
</tr>
<tr>
<td>Group Purchasing Organization (GPO)</td>
<td>An organization or business that negotiates contracts on behalf of multiple hospitals or hospital systems. Contracts aggregate volumes of these hospitals in attempt to increase discounts and create value-added services.</td>
</tr>
<tr>
<td>Legacy System</td>
<td>Systems including, but not limited to, computer software, computer hardware, and biomedical equipment that are fully integrated into the daily operations of one or more departments or are considered strategic in nature or are unique to the producer, manufacturer, distributor, and/or provider.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Material Operations</td>
<td>A department and cost center in the Corporate Resource &amp; Materials Management (CRMM) department that handles receipts and distribution for the corporate office buildings, non-stock deliveries for satellite facilities, and JIT orders and deliveries for satellite facilities. In addition, Material Operations handles surplus management, inter-office mail, NBHD courier services, and outbound mail/postage.</td>
</tr>
<tr>
<td>Non-Professional Services</td>
<td>Services that do not require professional license/expertise (further defined in General Administrative Policy 001-140).</td>
</tr>
<tr>
<td>Professional Services</td>
<td>Services that require professional license/expertise (further defined in General Administrative Policy 001-140).</td>
</tr>
<tr>
<td>Procurement</td>
<td>The purchasing of goods or services, especially for a company, government, or other organization.</td>
</tr>
<tr>
<td>Qualified Contractor</td>
<td>An entity or person who has evidenced current qualifications to do business in the State of Florida, appropriate licensure and who maintains liability insurance in an amount determined by the District's Director of Risk Management to be adequate.</td>
</tr>
<tr>
<td>Region</td>
<td>Within the northern 2/3 of Broward County, certain similarly-located, geographical areas, facilities and properties owned, operated and/or leased by the NBHD, which are segregated into 4 separate &quot;regions&quot; - BGMC region, NBMC region, IPMC region and CSMC region.</td>
</tr>
<tr>
<td>Section 24 of the Charter of the North Broward Hospital District</td>
<td>The section of the enabling legislation of the NBHD that describes the competitive procurement requirements, Chapter 2006-347, L.O.F...</td>
</tr>
<tr>
<td>Senior Management</td>
<td>The District's President/CEO and Senior Vice Presidents encompass this group.</td>
</tr>
<tr>
<td>Sole Source</td>
<td>The only known vendor or the only reasonable vendor capable of providing a service or commodity.</td>
</tr>
</tbody>
</table>
Standardization

The use (standardization) of same products or services providing consistency throughout the NBHD reducing inventory of product maximizing cost savings negotiating fewer products or qualified services at a higher volume resulting in greater cost efficiencies, including but not limited to price, training, maintenance of equipment, etc.

### Acronyms

<table>
<thead>
<tr>
<th>TERM</th>
<th>NAME/TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>AP</td>
<td>Accounts Payable</td>
</tr>
<tr>
<td>Board</td>
<td>Board of Commissioners</td>
</tr>
<tr>
<td>CA</td>
<td>Contract Administration</td>
</tr>
<tr>
<td>CER</td>
<td>Capital Equipment Request</td>
</tr>
<tr>
<td>CEO</td>
<td>Chief Executive Officer</td>
</tr>
<tr>
<td>CFO</td>
<td>Chief Financial Officer</td>
</tr>
<tr>
<td>CNO</td>
<td>Chief Nursing Officer</td>
</tr>
<tr>
<td>COO</td>
<td>Chief Operating Officer</td>
</tr>
<tr>
<td>CRMM</td>
<td>Corporate Resource &amp; Materials Management</td>
</tr>
<tr>
<td>DCR</td>
<td>Design Construction, and Real Estate</td>
</tr>
<tr>
<td>GA</td>
<td>General Administrative</td>
</tr>
<tr>
<td>GL</td>
<td>General Ledger</td>
</tr>
<tr>
<td>GPO</td>
<td>Group Purchasing Organization</td>
</tr>
<tr>
<td>HIPAA</td>
<td>Health Insurance Portability and Accountability Act</td>
</tr>
<tr>
<td>IT</td>
<td>Information Technology</td>
</tr>
<tr>
<td>JIT</td>
<td>Just In Time</td>
</tr>
<tr>
<td>MMIS</td>
<td>Material Management Information System</td>
</tr>
<tr>
<td>MS</td>
<td>Material Services</td>
</tr>
<tr>
<td>M/W/SBE</td>
<td>Minority/Women/Small Business Enterprise</td>
</tr>
<tr>
<td>NBHD</td>
<td>North Broward Hospital District</td>
</tr>
<tr>
<td>OEM</td>
<td>Original Equipment Manufacturer</td>
</tr>
<tr>
<td>OIG</td>
<td>Office of Inspector General</td>
</tr>
<tr>
<td>OSD</td>
<td>Office of Supplier Diversity</td>
</tr>
<tr>
<td>PO</td>
<td>Purchase Order</td>
</tr>
<tr>
<td>PSC</td>
<td>Procurement Steering Committee</td>
</tr>
</tbody>
</table>
1.1 **REPLACED POLICIES**

The following listing outlines NBHD policies and procedures replaced by this Code and/or deleted in their entirety.

<table>
<thead>
<tr>
<th>LOCATION</th>
<th>ITEM</th>
<th>SECTION</th>
<th>PRESENT STATUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>MS Policies and Procedures Manual</td>
<td>All Policies and Procedures</td>
<td>001 through 008</td>
<td>Replaced with the Procurement Code</td>
</tr>
<tr>
<td>MS Policies and Procedures Manual</td>
<td>Organizational Chart</td>
<td>001-005</td>
<td>Deleted in Entirety</td>
</tr>
<tr>
<td>MS Policies and Procedures Manual</td>
<td>Acquisition and Maintenance of Duplicating Equipment and Supplies</td>
<td>005-010</td>
<td>Deleted in Entirety</td>
</tr>
<tr>
<td>MS Policies and Procedures Manual</td>
<td>Value Analysis Team</td>
<td>003-015</td>
<td>Replaced with the Procurement Code</td>
</tr>
<tr>
<td>GA Policies and Procedures Manual</td>
<td>Forms Approval and Committee</td>
<td>GA-008-005</td>
<td>Replaced with the Procurement Code</td>
</tr>
<tr>
<td>GA Policies and Procedures Manual</td>
<td>Procurement Cards</td>
<td>GA-001-100</td>
<td>Replaced with the Procurement Code</td>
</tr>
<tr>
<td>GA Policies and Procedures Manual</td>
<td>Acquisition Endorsement of Biomedical Equipment</td>
<td>GA-002-005</td>
<td>Replaced with the Procurement Code</td>
</tr>
</tbody>
</table>
1.2 **Introduction and Purpose**

The effective and efficient operation of the NBHD requires the existence of certain universally applied guidelines applicable to all employees and for all facilities of the organization. This Procurement Code provides direction and guidance for the internal operations of the NBHD as it relates to the procurement of goods and services, based on Florida Statutes, policies and directives of the Board, and pronouncements of the President/CEO and the executive staff of the NBHD. This Code shall:

1.2.1 provide for the consistent application of managerial decisions related to procurement on all organizational levels throughout the NBHD facilities;
1.2.2 define limits in which managers may freely operate to fulfill their own accountabilities;
1.2.3 provide written policies and guidelines;
1.2.4 describe the philosophies of the NBHD, CRMM, and CA departments which are available for use by internal departments and for review by external regulating, accrediting and monitoring agencies.

1.3 **STATEMENT OF PURPOSE**

The NBHD is a political subdivision of the State of Florida and its procurement of supplies, equipment, and services is governed by the Charter of the NBHD, Florida Statutes, and Acts of Florida, and the Florida Administrative Code. This Procurement Code details the guidelines to process all procurement related activities as follows:

1.3.1 provide the steps needed to ensure the effective and efficient operation of all NBHD facilities;
1.3.2 support the direction and requirements as stated in the Charter of the NBHD, including competitive procurement amounts defined in Section 24 (I) (a);
1.3.3 support NBHD Board resolutions as derived from, and empowered by, the Charter of the NBHD;
1.3.4 provide and ensure consistent application by all NBHD staff of all procurement related activities;
1.3.5 encompass the limits and accountabilities of the procurement areas (CRMM and CA); and
1.3.6 encompass the limits and accountabilities of NBHD staff related to procurement.

Commented [HJF3]: This was combined with the Background section above and expanded upon. (See Section 1.)

Commented [HJF4]: This was superfluous and removed.
1.4 **PROCUREMENT DIVISIONS/AUTHORIZED AGENTS**

For the purpose of procurement related transactions, excluding those authorized and executed by the Board, President/CEO or SVP/CFO, only two (2) divisions, as defined by their authority, may authorize NBHD funds as payment to vendors.

1.4.1 **Procurement Divisions:**

1.4.1.1 CA: Makes commitments for the leases, rentals, maintenance, professional and non-professional services.

1.4.1.2 CRMM: Makes commitments for the purchase of supplies, equipment, and minor services and coordinates and facilitates supply related agreements for pharmaceutical and nutritional products.

**EXCEPTION:** REGIONAL PHARMACY DEPARTMENTS AND NUTRITIONAL SERVICES DEPARTMENTS ARE PERMITTED TO PROCEURE PRODUCTS SPECIFIC TO THEIR RESPECTIVE AREAS AS LONG AS THOSE SUPPLIES ARE PURCHASED THROUGH NBHD GROUP PURCHASING ORGANIZATION (GPO) CONTRACTS REQUIRING PROPRIETARY ORDER ENTRY SYSTEMS AS APPROVED AND MONITORED BY CRMM AND/OR CA.

1.4.2 **Authorized Agents:**

All procurement transactions and commitments to vendors must be performed by authorized agents of the NBHD as empowered to do so by the Charter of the NBHD. Authorized agents include:

1.4.2.1 Directors and management staff of each division

1.4.2.2 Purchasing Agents

1.4.2.3 Buyers

1.4.2.4 Contract Coordinators

1.4.2.5 Contract Specialists

1.4.2.6 NO OTHER NBHD STAFF OR PERSONNEL SHALL MAKE WRITTEN OR VERBAL COMMITMENTS TO VENDORS WITHOUT THE APPROVAL OF AUTHORIZED AGENTS WITHIN THE PROCUREMENT DIVISIONS DESCRIBED IN THIS CODE.
1.5 CODE OF ETHICS AND PROFESSIONAL CONDUCT

The NBHD Procurement Divisions (see 1.4) establish and maintain complex relationships with other NBHD departments and vendors. These relationships make ethical decision making extremely important in preserving the reputation of the NBHD and the integrity of the Procurement Divisions. The purpose of the Code of Ethics and Professional Conduct section is to define the environment in which all purchasing decisions shall be made. All conduct will be in compliance with the NBHD's "Code of Conduct".

1.5.1 This Code defines the Procurement Divisions Code of Ethics and Professional Conduct to assist in determining ethically appropriate professional conduct and to recognize conduct that does not meet this standard. Ethics demand that all NBHD Procurement Divisions' personnel, who make or influence decisions for healthcare institutions, act with complete fidelity to the institution and respect the valid rights of others.

1.5.2 The Procurement Divisions shall conduct all interactions within the following parameters (as outlined in the Code of Ethics and Professional Conduct for the Association for Healthcare Resource and Materials Management of the American Hospital Association):

1.5.2.1 Personal Ethics

1.5.2.1.1 Strive to conduct all business with honesty.

1.5.2.1.2 Know, follow, and enforce the healthcare organization's corporate compliance policy on all matters. Never enter into any transactions that would result in personal benefit or a conflict of interest.

1.5.2.1.3 Conduct oneself in such a manner as to merit the trust, confidence, and respect of the healthcare marketplace.

1.5.2.1.4 Strive to reduce costs and obtain the maximum value for each dollar of expenditure. Develop and implement supply chain tools that will benefit the healthcare marketplace. Remain committed to emphasize high quality, effective, safe patient care.

1.5.2.1.5 Treat with discretion and respect all information obtained in confidence.

1.5.2.2 Professional Conduct

1.5.2.2.1 Cooperate with all associations and individuals engaged in activities designed to enhance the development, stature, and understanding of procurement. Treat everyone with dignity and respect.

1.5.2.2.2 Promote an environment that facilitates sharing knowledge, ideas, and experiences to improve the procurement divisions' profession. Actively...
participate in seminars, professional association activities, projects, and continuing education.

1.5.2.2.3 Enhance the profession through recognition programs for individual achievement and professional commitments. Encourage all employees to work towards professional development.

1.5.2.2.4 Never enter into any transactions that would result in personal benefit or a conflict of interest.

1.5.2.2.5 Conduct business with potential and current suppliers in an atmosphere of good faith, fairness, integrity, and loyalty to the institution and the profession, devoid of intentional misrepresentation.

1.5.3 **Receiving or Soliciting Gifts**

Soliciting or accepting anything of value by an employee can lead to the perception or the reality that the employee’s official action or judgment could be influenced. Procurement Divisions and other NBHD staff shall handle solicitation of gifts within the guidelines of the "Code of Conduct" and applicable Corporate Compliance policies and procedures. Additionally, refer to the General Administrative Policy 001-050 "Personal Gifts from Suppliers, Contractors and Patients", General Administrative 001-105 "Vendor Solicitation", as well as the General Administrative Policy 001-015, "Conflict of Interest" for more detail. Failure to comply may result in corrective action up to or including termination.

1.6 **PROCUREMENT ITEMS NOT COVERED BY THIS CODE**

Certain procurement items do not fall within the general guidelines of this Code: Contracts for professional and consulting services (see General Administrative Policy 001-140), physician services, legal services, lobbyist services, marketing services, finance-related services, accounting services, audit services, and design, construction and real estate initiatives (see General Administrative Policy 001-086).

**PART2: VENDOR MANAGEMENT PROCEDURES**

2.1 **VENDOR ACCESS**

All vendors wishing to conduct business with the NBHD must be registered in accordance with Section 2.3.

2.1.1 The NBHD maintains a policy that requires all vendors to have scheduled appointments,
2.1.2 NBHD employees have the responsibility and authority to determine the level and type of appropriate activity with vendors in accordance with the Charter of the NBHD. Vendors that are unable or unwilling to conduct business with the District in accordance with all applicable policies shall have registration privileges revoked and will be limited to restricted access.

2.1.3 Requirement to wear badge

2.1.3.1 All vendors wishing to conduct business with the NBHD shall register with the NBHD in accordance with Section 2.3.

2.1.3.2 All service technicians will have access to NBHD facilities as is appropriate for the work being performed. Service technicians are not allowed to conduct business other than that of the service calls requested or in areas outside of those involved with the service requests. Service technicians shall wear their company's identification badge and/or NBHD issued vendor badge in a prominent manner at all times when conducting business with the NBHD and carry the proper purchase order/contract to identify the work being performed.

2.1.4 Department directors/cost center managers' responsibilities

2.1.4.1 Each department director, cost center manager, or designated personnel are responsible for ensuring that all visiting vendors are properly registered (see 2.3.1) and are wearing the appropriate vendor identification badge.

2.1.4.2 If the vendor is not registered, the department director, cost center manager, or designated personnel should explain the registration policy to the vendor and direct them to CA for registration.

2.1.4.3 If the vendor is registered but not wearing the appropriate identification badge, it is the responsibility of the department director, cost center manager, or designated personnel to inform the vendor of the policy to wear the appropriate badge when in NBHD facilities.

2.1.4.4 If the vendor does not have a scheduled appointment, it is the department director's, cost center managers, or designated personnel's responsibility to reject the vendor's visit.
2.1.4.5 Should the vendor's behavior become inappropriate, the department director, cost center manager, or designated personnel must notify security personnel as necessary to escort the vendor from the premises. The department director, cost center manager, or designated personnel must also immediately contact the Director of CRMM or Manager of CA.

2.1.5 Vendors should contact CA if they have any questions about the vendor registration or vendor access policies.

2.1.6 Introduction of new products

All registered vendors who wish to introduce new products should contact CRMM regarding the Product Evaluation process (see 3.15).

2.2 VENDOR PERFORMANCE

Vendor performance issues, including those listed in Sections 2.7.1 and 2.7.2 of this Code may be resolved at the hospital or departmental level. If satisfactory resolution is not met, the affected department head or executive shall escalate the issue and contact the Director of CRMM or the Manager of CA for further analysis. CRMM or CA will inform OSD of any performance issues with diverse vendors. If satisfactory resolution is not met at this level, the issue is presented to the PSC (see 2.7).

2.3 VENDOR REGISTRATION AND ORIENTATION

The NBHD utilizes a competitive process to acquire supplies, equipment, materials, and services. A computerized list of vendors (Vendor Registration system) is maintained to facilitate vendor management and the competitive process.

Vendors must complete the Vendor Registration application to participate in business transactions and to be included in the NBHD's Formal Bid process. A vendor is defined as any person or firm that is not an employee doing business with or providing a service or product to the NBHD. The NBHD, through its AP Department, may delay the processing of payments for vendors who are not registered.

Vendors will be listed in the AP, Vendor Registration, and Supplier Diversity systems. It is the vendor's responsibility to keep their information current.

Refer to Part 2.1 "Vendor Access" for details regarding making appropriate contact with departmental representatives.

Commented [HJF9]: This was removed because it is covered in all Broward Health contracts.

Commented [HJF10]: This was updated to reflect current practices and moved to a policy referenced in the Procurement Policy Table.
2.3.1 New Registration

2.3.1.1 Vendors shall complete all sections of the Vendor Registration application. Vendors requiring assistance in completing any of the forms may contact Vendor Relations at (954)355-5133 or www.browardhealth.org.

2.3.1.2 NBHD personnel are encouraged to refer any vendor with whom they wish to do business to the NBHD's website or CA, so that registration can be completed in a timely manner.

2.3.1.3 The OSD shall also refer all diverse vendors to the NBHD's website or CA to initiate the vendor registration process. Supplier Diversity certification statements should be submitted to the OSD. Diverse Vendor certification is granted in accordance with General Administrative Policy 001-045, "Supplier Diversity Program."

2.3.2 Benefits of the Vendor Registration Process

2.3.2.1 Vendor participation in the vendor registration process allows the vendor to conduct business with the NBI-ID.

2.3.2.1.1 Registered vendors may be contacted for verbal or written quotations for purchases up to and including $50,000 based on the vendor's product code.

2.3.2.1.2 Registered vendors will receive notification of formal bids (RFQs and RFPs) whenever appropriate. Note: This is in addition to the public notice process, but does not guarantee that the vendor will be contacted. It is the responsibility of the vendor to contact the CRMM department if notifications for products or services are not received.

2.3.2.1.3 Registered vendors will be allowed to schedule appointments with department directors, cost center managers, or designated personnel to conduct ongoing business.

2.3.2.1.4 Registered vendors will be allowed to participate in the product standardization process.

2.3.2.2 AP will be able to process the registered vendor's accurate invoices in an expedited manner. Significant delays in payments may be expected for vendors that are not registered.
2.3.3 Revocation of Vendors’ Registration Privileges

2.3.3.1 Vendors are required to be knowledgeable about and compliant with all pertinent NBHD codes, policies, and guidelines. Should a vendor willfully not be compliant with the NBHD’s codes, policies, and guidelines, the vendor will lose their registration privileges (see Section 2.7).

2.3.3.2 Department directors, cost center managers, or designated personnel must refer all noncompliant vendors to the Manager of CA or Director of CRMM. It is the decision of the Manager of CA and/or the Director of CRMM, in conjunction with the PSC, to revoke the vendor registration privileges (see Section 2.7).

2.3.4 Orientation Process

The NBHD requires that all firms wishing to conduct business with the NBHD to register their businesses by completing a NBHD Vendor Registration application available at www.browardhealth.org.

The NBHD will conduct quarterly Vendor Orientation sessions providing procurement information and current NBHD contact phone numbers and addresses for the AP, CRMM, and OSD departments. The dates for these orientation sessions are listed on www.browardhealth.org. The orientation sessions provide attendees with detailed information on how to better conduct business with the NBHD.

2.4 VENDOR OBLIGATIONS

2.4.1 Vendors are expected to fulfill the following basic responsibilities related to the purchasing function:

2.4.2 Conduct negotiations ethically, without attempts to influence through offering valuable personal gifts or entertainment.

2.4.3 Make available all pertinent technical, engineering, systems, procedures, services, and ideas that might improve the NBHD’s present or future use of vendors’ products and services.

2.4.4 Advise CRMM or other designated NBHD representatives of any new products, as soon as such information is available. Unauthorized and non-contracted products will not be paid for by the NBHD.

2.4.5 Inform the NBHD of changes in economic or other conditions that might affect purchasing or operating decisions.

2.4.6 Enter into a Business Associates Agreement, when applicable, to be compliant with the 1-DPAA.

Commented [HJF11]: This was removed because it is covered in all Broward Health contracts and RFPs.
2.5 **VENDOR SELECTION**

The NBHD encourages the participation of community development and good procurement practices through the quotation process (see Sections 3.2.1, 3.2.2) for the procurement of supplies, equipment and services. Refer to Section 3.2 for more information on the quotation process. Vendors are eligible for the quotation process only after successfully registering (see Section 2.3).

2.5.1 CRMM or CA will access Vendor Registration system.

2.5.2 CRMM or CA will search for the product code applicable to the request. The system provides searching functionality and reports to determine the product code and/or vendor.

2.5.3 CRMM or CA will enter quote information in the Vendor Registration system.

2.6 **SUPPLIER DIVERSITY IN PROCUREMENT**

2.6.1 NBHD is committed to the participation of diverse vendors in the procurement of supplies, equipment, services, and contracts for general business purposes. The Procurement Divisions will adhere to the OSD procedures documented in the General Administrative Policy 001-045.

2.6.2 All authorized agents in each procurement division (see Section 1.4) shall review General Administrative Policy 001-045 and Section 1.5 of this Code.

2.7 **AUTHORITY TO DEBAR OR SUSPEND VENDORS**

Vendors may exhibit behavior that is detrimental to the NBHD. This behavior includes, but is not limited to, failure to fulfill the contract terms and conditions, negative interaction with NBHD staff and associates, or providing inferior products or distribution. After reasonable notice to the person or company involved, and reasonable opportunity for that person or company to be heard, the PSC, with approval of the NBHD’s legal counsel and the SVP/CFO, shall have authority to debar or suspend a person or company for cause from consideration for award of future business opportunities. During the period of debarment or suspension, the person or company and its affiliates, or other companies with any of the officers or principals the same as the debarred or suspended company, may not bid on any NBHD contracts, regardless of the dollar amount, nor be approved as a subcontractor on any NBHD contract.

2.7.1 Suspension

The PSC may suspend the person or company for a period up to one year. The PSC shall also have the authority to suspend a person or company from consideration for award of contracts if there is probable cause for debarment. A decision to suspend may be appealed or presented for administrative review.
2.7.1.1 Cause for Suspension

The causes for suspension include the following:

- 2.7.1.1.1 Excessive backorders or related fill rate issues;
- 2.7.1.1.2 Providing, as a manufacturer or distributor, inferior products;
- 2.7.1.1.3 Providing, in craftsmanship and timeliness, inferior service;
- 2.7.1.1.4 Failure to register, update or respond to Notice from CA or CRMM departments regarding information on the business entity maintained in NBHD data files or Vendor Registration system;
- 2.7.1.1.5 Providing false information on all related vendor registration documents or files;
- 2.7.1.1.6 Inappropriate or offensive interaction with NBHD staff;
- 2.7.1.1.7 Any other reason or action deemed detrimental to the mission of the NBHD at the sole discretion of the PSC.

2.7.2 Debarment

Debarment shall be for a period commensurate with the seriousness of the cause(s), and shall continue for the entire time set by the PSC. If the offense is willful or egregious, an indefinite term of debarment may be imposed. If suspension precedes a debarment, the suspension period shall be considered in determining the debarment period. A decision to debar may be appealed or presented for administrative review.

2.1.2.1 Cause for Debarment

The causes for debarment include the following:

- 2.7.2.1.1 Conviction for commission of a criminal offense as an incident in obtaining or attempting to obtain a public or private contract or subcontract, or in the performance of such contract or subcontract;
- 2.7.2.1.2 Conviction under state or federal statutes of embezzlement, theft, forgery, bribery, falsification or destruction of records, receiving stolen property, or any other offense indicating a lack of business integrity or business honesty which currently, seriously, and directly affects responsibility as a contractor;
- 2.7.2.1.3 Conviction under state or federal antitrust statutes arising out of the submission of bids or proposals;
- 2.7.2.1.4 Violation of contract provisions, as set forth below, of a character which is regarded by the PSC to be so serious as to justify debarment action.
2.7.2.1.4.1 deliberate failure without good cause to perform in accordance with the specifications or within the time limit provided in the contract;

2.7.2.1.4.2 a recent record of failure to perform or of unsatisfactory performance in accordance with the terms of one or more contracts; provided that failure to perform or unsatisfactory performance caused by acts beyond the control of the contractor shall not be considered to be a basis for debarment;

2.7.2.1.5 denial of an offer by failure to provide bonds, insurance or other required certificates within a reasonable time period;

2.7.2.1.6 refusal to accept a purchase order, agreement, or contract, or to perform thereon, provided such order was issued timely and in conformance with the offer received;

2.7.2.1.7 presence of principals or corporate officers in the business of concern, who were principals within another business at the time when the other business was suspended or debarred within the last three years under the provisions of this section;

2.1.2.1. A violation of the ethical standards set forth in state law;

2.7.2.1.9 any other cause the Manager of CA and/or Director of CRMM in his/her sole discretion, determines to be so serious and compelling as to affect responsibility as a contractor, including debarment by another governmental entity for any cause listed in this Code;

2.1.2.1.10 any other reason or action deemed detrimental to the mission of the NBHD at the discretion of the PSC.

2.7.3 Decision

The PSC Chair, or his or her designee, shall issue a written decision to debar or suspend. The decision shall:

2.7.3.1 state the reason for the action taken; and

2.7.3.2 inform the debarred or suspended person or company of the right to administrative review or appeal.

2.7.4 Notice of Decision

A copy of the decision for the debarment or suspension shall be mailed or otherwise furnished to the debarred or suspended person.
2.7.5 Right of Appeal
Any person having a substantial interest (owner, officer, or representative of the company) in the matter, who is dissatisfied with the determination of the PSC to debar, suspend, or refusal to reinstate, must, within ten (10) calendar days of such notification, appeal in writing said determination to the PSC Chair.

2.7.6 Appeal of Debarment or Suspension Hearing Date
After the receipt of the notice of appeal of debarment or suspension, the NBIID shall schedule a hearing before the PSC, at which time the person or company shall be given the opportunity to demonstrate why the decision of the PSC should be overturned. No legal counsel will be allowed to participate.

2.7.7 Reinstatement Application
After the term of debarment has been completed, a debarred person or company may only be reinstated upon submission of an application to the PSC. Each application for reinstatement shall include the following information and be submitted in memorandum format:

2.7.7.1 the name, address and telephone number of the party making the request or the party's representative;

2.7.7.2 a statement of the financial responsibility of the company;

2.7.7.3 a statement of facts indicating how the circumstances which led to the debarment have been cured;

2.7.7.4 a list of jobs completed during the two years prior to the reinstatement application; and

2.7.7.5 a list of all departments of the NBIID for which the person has performed work.

2.7.8 Procedures
After consideration of the reinstatement application, the PSC in consult with NBHID's legal counsel and the SVP/CFO shall make a determination whether or not reinstatement is warranted. The PSC's decision shall be mailed or otherwise furnished to the person or company. The PSC's decision on reinstatement is final.
PART 3: ACQUISITION PROCEDURES

3.1 PROCUREMENT CYCLE FOR CAPITAL

All requests for capital equipment must be coordinated amongst NBHD Accounting/Finance, Regional Administration, and the applicable Procurement Divisions. These areas handle the core components of the procurement cycle; budgeting, approvals, and execution of the purchase order or contract.

3.1.1 In preparation for submitting capital requests, departments are required to contact CA or CRMM to obtain price quotations and estimates.

3.1.2 Upon completion and approval of each fiscal year capital budget, lists of all items are sent to the Manager of CA and Director of CRMM. NBHD-wide information assists the Procurement Divisions in participating with and aggregating volume discounts.

3.1.3 CA and/or CRMM may assess the fiscal year capital budgets and identify opportunities for group buy incentives.

3.1.4 CA and/or CRMM will review quotes or proposals from all competitors for a given market. Analysis will include using third party vendors and data to validate the competitiveness and/or uniqueness of the request.

3.1.5 CA and/or CRMM will provide guidance and instructions to have requests exceeding $50,000 that must be reviewed by the PSC and SOC.

3.1.6 Upon completion of CA and/or CRMM review and the request to purchase is ready to move forward; the requesting departments will obtain required signatures and prepare any applicable exhibits for executive or board approval.

3.1.7 CA and/or CRMM will execute a purchase order or contract using the requirements contained in Section 24 of the Charter of the NBHD and in this Code.

3.1.8 The acquisition of products or services requiring significant IT resources, e.g., greater than 80 man-hours, for installation, integration, or development, must go to the Technology Advisory Council (TAC) for approval prior to submission to the PSC. The purpose of the TAC is to ensure that resource-intensive IT projects are in alignment with the NBHD’s business and strategic plans, and that these projects are implemented efficiently and logically for the operational success of the NBHD.

3.2 ACQUISITION OF SUPPLIES, EQUIPMENT, MATERIALS, AND SERVICES

All requests for purchases and/or contracts excluding pharmaceutical and nutritional supplies are processed through CRMM and CA. THE PROCUREMENT DIVISIONS ARE THE ONLY STAFF AUTHORIZED TO SOLICIT OFFICIAL QUOTATIONS.
All awards are based on the determination that the price is fair and reasonable, and that the solicitation for quotations is inclusive of diverse vendors. It is emphasized that the procurement division shall take extra care to determine that the price paid for the item is fair and reasonable based on market comparisons and/or experience.

Further, the Board has directed that commitments to purchase supplies, materials, and nonprofessional services (e.g., maintenance), do not require board approval as long as Section 24 (Competitive bids to be sought; procedure; authority to negotiate contracts; group purchasing) of the Charter of the NBHD and appropriate procurement practices, as outlined in this Code, are followed. As outlined in Section 24 (2) of the Charter of the NBHD, the Board is authorized and empowered to agree with the successful bidder for changes and modifications to the successful bid, THE TOTAL VALUE OF CHANGES AND MODIFICATIONS NOT TO EXCEED 20 PERCENT OF THE AGREED PRICE, without voiding the existing contract and without any further bidding procedures.

All transactions are subject to be reviewed and audited periodically by the Director of CRMM or CA to ensure adherence to this Code governing acquisitions. ANY REQUEST FOR PROCUREMENT UP TO AND INCLUDING $50,000 MAY BE MADE, PROVIDED THAT PROCUREMENT REQUIREMENTS ARE NOT ARTIFICIALLY DIVIDED SO AS TO CONSTITUTE A SMALL PURCHASE UNDER this SECTION. DEPARTMENTS SHALL NOT BREAK UP REQUESTS WITH THE INTENT TO AVOID REQUIRED APPROVALS.

3.2.1 Purchase or commitments up to and including $2,500
A minimum of one (1) quotation is required (see Section 2.5). The quotation may be written or verbal and will be recorded on the purchase requisition. All pertinent information regarding the quotation is recorded per Section 2.5.

3.2.2 Purchases or commitments exceeding $2,500 and up to and including $50,000
A minimum of two (2) quotations is required (see Section 2.5). The first quotation may be from the suggested vendor; the second quotation is obtained from the list of registered vendors. The quotations may be written or verbal and will be recorded on the purchase requisition. All pertinent information regarding the quotations is recorded per Section 2.5.

3.2.3 Purchases or commitments exceeding $50,000
The Formal Bid process must be used. Refer to Section 3.3.
3.2.4 **Unusual conditions and emergency purchases or commitments**

Section 24 of the Charter of the NBHD states that when emergency or unusual conditions exist for the acquisition of supplies, equipment, and material, the President/CEO or designee shall provide resolution to identify the emergency or unusual conditions for approval by the Board of Commissioners to waive prescribed bidding procedures (see Part 7). The purchase requisition for such acquisitions shall refer to the resolution and shall be signed by the President/CEO or designee. ITEMS EXCEEDING THE PRESIDENT/CEO’s APPROVAL LIMITS WILL BE BROUGHT TO THE FOLLOWING MONTH’S BOARD MEETING AS AN INFORMATIONAL UPDATE.

3.3 **FORMAL BID PROCESS**

All purchases and contracts exceeding amounts determined by the Board, currently set at $50,000, are subject to publicly advertised Formal Bid Process. Additionally, any of the procurement divisions may at any time it chooses prepare and release an RFI to gather information to assist in determining acquisition methodology in the best interest of the NBHD. Since an RFI does not commit the NBHD to any business endeavor, it does not necessarily need to be publicly advertised.

Section 24 of the Charter of the NBHD outlines the competitive process requirements as set forth by the State of Florida. It should be noted that Florida Statutes and Acts of Florida may also apply. The Formal Bid process is used unless the transaction is approved as unique and available from a limited or sole source provider, is deemed the official standardized product or technology for two (2) or more regions, or optimum value is realized by procuring through a GPO contract. An RFI may be used at any time to validate the best acquisition solution for the NBHD.

All purchase and contract requests exceeding $50,000 must be examined and analyzed to ensure the most effective procurement method is utilized and the best clinical and value benefits are realized.

**Procurement Steering Committee (PSC)** Please refer to Section 3.4 of this Code. The PSC performs pre-purchase analysis for requests meeting or exceeding $50,000. Analysis includes and focuses on, but is not limited to, the requested procurement method: Formal Bid (Request for Quotation, Request for Proposal), Bid Waivers or Bid Exemptions. Also the PSC will perform analysis on requests for maximum diverse vendor participation. Diverse Vendor Enhancements will be assigned by the OSD and approved by the PSC.
Unless otherwise instructed, the following NBHD personnel or representatives are the only representatives authorized to communicate with the vendors during the Formal Bid Process: President/CEO, SVP/CFO, VP Financial Operations, Director of CRMM, Manager of CA, CRMM Bid Coordinator, Project Custodian/Technical Advisor, and Manager of OSD.

All advertisements and announcements during the Formal Bid Process are made public by utilizing local news media, www.browardhealth.org, and a "Sunshine Board" located in the lobby of the Information Systems Center of 1608 Southeast 3rd Avenue, Fort Lauderdale, Florida.

3.3.1 **Request for Quotation (RFQ)**

RFQ is used when the NBHD provides detailed explicit specifications of its expressed needs. Provided that each respondent meets the prescriptive qualifications and specifications detailed in the bidding document, "best price" is the primary factor for vendor selection. The CRMM Bid Coordinator facilitates NBHD staff to follow the bid procedures as follows:

3.3.1.1 secure funds via budget process or otherwise obtain administrative financial approval;

3.3.1.2 contact CRMM or CA to begin planning process;

3.3.1.3 appoint RFQ "project custodian/technical advisor" and bid scoring committee;

3.3.1.4 mandate/instruct committee members to not share any bidding information with prospective bidders throughout the bidding process. In addition to the CRMM Bid Coordinator, the project custodian/technical advisor" is the only committee member designated to share information with prospective bidders.

3.3.1.5 complete PSC documents for agenda;

3.3.1.6 attend PSC to present request (mandatory);

3.3.1.7 develop RFQ specifications inclusive of Diverse Vendor Enhancements;

3.3.1.7.1 Seek additional approval of specifications as and when directed by senior management;

3.3.1.8 advertise and release RFQ;

3.3.1.9 conduct pre-bid conference(s) as deemed necessary;

3.3.1.10 receive RFQ responses;

3.3.1.11 open RFQ responses at public opening;

3.3.1.12 obtain Diverse Vendor Enhancement scoring components from the Office of Supplier Diversity (OSD);

3.3.1.13 attend site visits as deemed necessary;

3.3.1.14 tabulate RFQ responses;

Commented [HJF20]: This was moved to an SOP and cross-referenced in Section X.D. of the Code.

All legal requirements per our Charter were added to Section X.D. of the Code. References to other policies that contain updated legal procurement requirements have been added. (See Supplier Diversity and Construction Policies in the Procurement Policy Table.)
3.3.1.15 submit results and recommendation of RFQ Committee and CRMM Bid Coordinator to Director of CRMM;
3.3.1.16 communicate findings and obtains approval of the final recommendation by appropriate CFO;
3.3.1.17 obtain President/CEO or Board approval of recommendation as required;
3.3.1.18 Send “Intent to Award” letters to appropriate parties (These letters do not legally bind the NBHD, but serve as an invitation to negotiate with the NBHD. Letters must instruct bidders of this notification process.);
3.3.1.19 negotiate contract terms and conditions; and
3.3.1.20 Execute contract and/or purchase order.

3.3.2 Request for Proposal (RFP)

RFP releases request to potential suppliers to present proposals of how the suppliers would satisfy a specific need expressed by the NBHD. It is used to select either single or multiple suppliers. It is not necessarily prescriptive in nature; the RFP invites a proposal to provide a solution, not a formal quotation, and is the starting place for later negotiations. Suppliers responding to an RFP are ranked and finalists selected based on business offering and qualitative factors. The CRMM Bid Coordinator facilitates NBHD staff to follow the RFP procedures as follows:

3.3.2.1 secure funds via budget process or otherwise obtain administrative financial approval;
3.3.2.2 contact CRMM or CA to begin planning process;
3.3.2.3 appoint RFP “project custodian” and RFP scoring committee;
3.3.2.4 Mandate/instruct committee members to not share any RFP information with prospective bidders throughout the bidding process. In addition to the CRMM Bid Coordinator, the project custodian/technical advisor” is the only committee member designated to share information with prospective bidders.
3.3.2.5 complete PSC documents for agenda;
3.3.2.6 attend PSC to present request (mandatory);
3.3.2.7 develop RFP specifications inclusive of Diverse Vendor Enhancements;
3.3.2.7.1 Seek additional approval of specifications as and when directed by senior management;
3.3.2.8 advertise and release RFP documents;
3.3.2.9 conduct pre-bid conference(s) as deemed necessary;
3.3.2.10 receive RFP responses;
3.3.2.11 opens RFP responses at public opening;
3.3.2.12 obtain Diverse Vendor Enhancement scoring components from the Office of Supplier Diversity (OSD);

Commented [HJF21]: This was moved to an SOP and cross-referenced in Section X.D. of the Code.

All legal requirements per our Charter were added to Section X.D. of the Code. References to other policies that contain updated legal procurement requirements have been added. (See Supplier Diversity and Construction Policies in the Procurement Policy Table.)
3.3.2.13 attend site visits as deemed necessary;
3.3.2.14 score RFP using standardized RFP scoring process;
3.3.2.15 negotiates final financial term;
3.3.2.16 submit results and recommendation of RFP scoring committee and Bid Coordinator to Director of CRMM;
3.3.2.17 communicates findings and obtains approval of the final recommendation of Director of CRMM by the appropriate CFO;
3.3.2.18 obtains President/CEO or Board approval of recommendation as required;
3.3.2.19 send intent to award (These letters do not legally bind the NBHD, but serve as an invitation to negotiate with the NBHD. Letters must instruct RFP submitters of this notification process.);
3.3.2.20 negotiate contract terms and conditions; and
3.3.2.21 execute contract and/or purchase order.

3.3.3 Request for Information (RFI)
RFI releases request specific information required from a group of suppliers or the general public. The RFI is more loosely structured than the other NBHD formal processes and does not commit the NBHD to a purchase commitment. The RFI usually requests suppliers to provide qualifications, products or services regarding NBHD interest in the general areas of the information requested. The information gathered may be used to assist in developing a RFQ or RFP release or to simply validate the availability or interest level of suppliers responding to the specific NBHD RFI request.

3.3.4 Resolution and Remedy of Vendor Challenges or Disputes
The District’s goal is to ensure the prompt response to and resolution of vendor challenges regarding the Formal Bid Process. The Director of CRMM shall be the point of contact for all official challenges to a RFP or RFQ release and/or award. Upon receipt of a formal challenge, the Director of CRMM shall notify appropriate parties as identified in procedures below.

3.3.4.1 All vendor protests or challenges must be communicated as outlined in the formal bid documents. Vendors must send written correspondence with documentation supporting their challenge, to the Director of CRMM within five (5) business days after the issue arises or the contract is awarded.
3.3.4.2 The Director of CRMM shall notify the winner or highest ranked vendor that a protest or challenge has been filed.
3.3.4.3 The Director of CRMM, within ten (10) business days after receipt of the vendor’s written protest or challenge, shall render a written decision.
3.3.4.4 Vendors may dispute the Director of CRMM’s decision by giving written notice of appeal to the SVP/CFO within five (5) business days of the receipt of said notice.

Commented [HJF22]: This was moved to an SOP and cross-referenced in Section X.D. of the Code.

Commented [HJF23]: This was updated to reflect current best practices and moved to Section XVIII of the Code.
decision. Notification to the SVP/CFO must contain copies of the original protest or challenge of dispute and the Director of CRMM's response.

3.3.4.5 The SVP/CFO will render a written decision within five (5) business days after receipt of the notice of appeal. This decision shall be the final order on the protest or challenge.

3.3.4.6 In the event the Director of CRMM or the SVP/CEO support the protest or challenge, and overturn the decision or action made through the Formal Bid process, the impacted vendor(s) shall be notified of the decision and be advised of their right to appeal.

3.3.4.7 This process is repeated for all appeals. All involved vendors are notified of the final decision.

3.4 PROCUREMENT STEERING COMMITTEE (PSC)

The PSC is committed to making efficient and effective business decisions pertaining to the procurement of products and services. The committee meets on a monthly basis to review, make recommendations, and/or make decisions relevant to the procurement of products and services. This includes a review of Formal Bid analysis, Legacy Systems, Bid Waivers, Bid Exceptions, vendor performance issues (see Section 2.2), diverse vendor opportunities. The committee may require the Board's approval for the procurement of products and services, not otherwise subject to Board review, if such procurement is considered strategic in nature and/or it is in the best interest of the NBHD to do so. In addition, the committee is empowered to deem non-clinical products as official NBHD standards. Procurement related to construction initiatives will be presented and reviewed as informational items (see General Administrative Policy 001-086).

3.4.1 Committee Membership (11)

| Chairperson:       | Director, CRMM |
| Ex Officio:        | Director, Internal Audit |
| Membership:        | Bid Coordinator, CRMM |
|                    | Manager, CA |
|                    | Manager, OSD |
|                    | Director, Clinical/Biomedical Engineering |
|                    | Director, OCR |
|                    | Manager, CRMM |
|                    | Director, IS |
|                    | SVP/CFO |
|                    | VP, Financial Operations |

Commented [HJF24]: This was combined with the PSC reference above, updated, clarified and moved to Section VII.B. Of the Code.
Non-Membership Regular Invitees:
Materiel Managers
Regional CEOs
Regional CFOs
Regional COOs
These individuals receive meeting invitations, meeting agendas, and minutes of the PSC.

3.4.2 Committee Meetings

3.4.2.1 Meetings are scheduled on a monthly basis unless otherwise advised or due to extenuating circumstances.

3.4.2.2 Decisions and recommendations are made only when one-half or more of the membership is present. If a member is unable to attend, a designee may be sent and will retain “voting” privileges.

3.4.2.3 Pre-meeting documents (i.e., agendas, exhibits, and prior month’s minutes) are distributed via e-mail at least 5 business days before the scheduled meeting.

3.4.2.4 The post-meeting draft minutes are prepared and distributed to the committee members via e-mail within 5 business days of the regular monthly meeting. These minutes are reflective of decisions and actions affected and approved by the PSC members at both the regular monthly meeting and a “post-PSC” finalization meeting conducted to determine closure and/or Diverse Vendor Enhancements to any open/pending/to-be-determined portions of the regular monthly meeting.

3.4.2.5 Member response and/or approval of the minutes are to be returned to the Director of CRMM within 3 business days of the request for approval e-mail distribution.

3.4.2.6 A master set of all agendas, minutes, exhibits, and supporting documentation are retained in CRMM as provided by law as amended from time to time.

3.4.3 Committee Membership Roles and Responsibilities

3.4.3.1 Formal Bid - The committee reviews and approves all requests to develop specifications for any RFP and RFQ request exceeding $50,000.

3.4.3.2 Legacy System - The committee reviews and approves all requests for the support, maintenance, and expansion of systems that are considered NBHD Legacy Systems including, but not limited to, computer software, computer hardware, and biomedical equipment. The Board’s approval of the budget (at a regular or a special meeting called for that purpose following the Budget Workshop and/or revised through the Final Tax Hearing) for the implementation of these Legacy Systems includes a commitment to the continued support, maintenance, and expansion of these systems. The Board’s approval thereby empowers the PSC to waive/exempt the Formal Bid requirement for the continued support, maintenance, and expansion of Legacy Systems, particularly when the PSC determines that such a requirement

Commented [HJF25]: This whole section has been moved to Section XIII. Bid Waivers providing clarity and changing it to conform with the requirements of our Charter.
would subject the NBHD to undue financial or operational risk. Unbudgeted Legacy System expenditures exceeding $250,000 within a single fiscal year require the Board's approval. Unbudgeted Legacy System expenditures up to and including $250,000 within a single fiscal year require the President/CEO's approval. The criteria used to identify Legacy System status are as follows:

3.4.3.2.1 Systems fully integrated into the daily operations of one or more departments of the NBHD.

3.4.3.3.2 Systems strategic in nature.

3.4.3.3.3 Systems unique to the producer, manufacturer, distributor, and/or provider.

3.4.3.2.2 **Bid Waivers for "Sole Source"** - The committee will review and approve all requests for Bid Waiver by virtue of a Sole Source status. All items presented to the committee as Sole Source must be validated and approved before further action is taken. All Sole Source Bid Waivers exceeding $50,000 require the Board's approval. All purchases and contracts exceeding $50,000 are evaluated using the criteria below for meeting Sole Source status. Additionally, all purchases and contracts up to an including $50,000 will be evaluated by each procurement division for Sole Source status based on the same criteria. The criteria used to identify Sole Source status are as follows:

- Equipment or services which are deemed unique and have a single producer, manufacturer, distributor, and/or provider.
- Software and hardware upgrades and maintenance agreements for such software and hardware as provided by the OEM.
- Equipment needed to add to or expand an existing system, and maintenance agreements for such equipment as provided by the OEM.
- Equipment, supplies, or services needed where using an alternative product jeopardizes warranty or maintenance agreements or creates any user, patient, and/or financial risks. This includes consideration to lead times and geographical availability to avoid these risks.

3.4.3.3 **Bid Waivers for "Standardization"** - The committee will review and approve all requests for Bid Waiver by virtue of a Standardization status. All items presented to the committee as Standardization must be validated and approved before further action is taken. Standardization Bid Waivers exceeding $50,000 require the Board's approval. However, Board approval for Standardization Bid Waivers is NOT required if the initial selection of the equipment or service (through the Formal Bid process), was approved by the Board as "Standardization" within the last five (5) years, and the equipment or service is budgeted (approved by the Board at a regular or a special meeting called for that purpose following the Budget Workshop and/or revised through the Final Tax Hearing). All purchases and contracts exceeding $50,000 are evaluated using the criteria below for meeting Standardization status. Additionally, all purchases and contracts up to an including $50,000 will be evaluated by each procurement division for Standardization status.
based on the same criteria. The criteria used to identify Standardization status are as follows:

3.4.3.3.1 Equipment or services which are deemed appropriate to standardize at two or more facilities due to technology or to promote cost savings and cost efficiencies including consistency of negotiated price, service, training, maintenance for equipment.

3.4.3.3.2 Reduction of inventory requirements (one items is stocked in place of two or more).

3.4.3.3.3 Reduction in purchase prices because the volume of purchases for two or more previous items will be added together to provide additional leverage in negotiating price concessions.

3.4.3.3.4 Savings in training time because when the same products are used throughout the NBHD, staff who transfer or are rotated to different facilities or even areas within a hospital will not have been trained to appropriately use different products.

3.4.3.3.5 Reduction of maintenance cost: When identical equipment is used throughout an institution maintenance contracts can be written with a single company to cover all equipment. In some cases, "Standardization" can even make it cost-effective to train an in-house biomedical engineer to maintain equipment, significantly reducing the cost of maintenance.

3.4.3.3.6 Stabilization of purchase price: By standardizing one type of equipment, purchasing can negotiate long-term contracts for the purchase of multiple units over a period of years. Such a purchase can provide significant savings in the cost of a few units that might be purchased in a single year.

3.4.3.3.7 Consistency in supply prices and inventories: With multiple units in use throughout the NBHD, supplies required to operate the equipment and equipment repair parts will be consistent. This reduces the inventories necessary to support the equipment and provides higher volume purchases that can be used to negotiate lower purchase prices.

3.4.3.4 Bid Exemptions - As defined, Bid Exemptions are granted only when there is the availability of a GPO contract. GPO contracts provide cost and value benefits to the NBHD. The committee will review and approve all requests for not executing a Formal Bid due to the availability of a GPO contract. The Board's approval of the budget (at a regular or a special meeting called for that purpose following the Budget Workshop and/or revised through the Final Tax Hearing) thereby empowers the PSC to approve budgeted Bid Exemptions. Unbudgeted Bid Exemptions exceeding $250,000 within a single fiscal year require the Board's approval. Unbudgeted Bid Exemptions up to and including $250,000 within a single fiscal year require the...
President/CEO’s approval. GPO Bid Exemptions may be used when any of the following conditions exist:

3.4.3.4.1 Availability from national and/or regional group contracting agencies;
3.4.3.4.2 Availability from State of Florida contracts and/or other state-eligible governmental contracts;
3.4.3.4.3 Availability from consultative or management sources hired by the NBHD to serve as the negotiating agent on behalf of the NBHD.

3.4.3.5 **Vendor Performance Issues** - The committee reviews and recommends actions related to vendor performance issues as outlined in Section 2.2. Issues are presented to the committee by the Manager of CA or Director of CRMM.

3.4.3.6 **Diverse Vendor Opportunities** - The committee reviews and approves Diverse Vendor Enhancements made by the OSD, in collaboration with the Director of CR-MM pertaining to diverse vendor opportunities and involvement for any formal acquisition and contract implementation/renewals.

### 3.5 **REQUISITIONING AUTHORITY**

The Board of Commissioners sets spending thresholds beyond which it requires its authorization/approval (present threshold set at $250,000 within a single fiscal year) prior to the commitment of funds. The President/CEO sets authorization levels for requests when they do not exceed that $250,000 threshold.

3.5.1 Requisitions shall be prepared for the acquisition of all supplies, equipment, materials, nonprofessional services, capital equipment, and leases; and charged to the appropriate GL account number.

3.5.2 The Request for Check form is utilized to order payment for all items that are not processed through the CR-MM or CA departments, and is thus not evidenced by a corresponding PO. It is evidenced by a standalone contract, e.g., subscription, or letter of agreement or it represents an emergency or special purchase (e.g., dues, legal document fees, tuition reimbursement, utility fees) documented by an attached invoice. Due to the failure to have a third party review of the transaction (i.e., CRMM and CA departments) use of the Request for Check forms should be as limited. Please refer to the Accounting Policy and Procedure manual for the appropriate uses of the Request for Check form.

3.5.3 The appropriate levels of authorization for the organization for purchase requisitions, Requests for Checks, and contract execution are detailed as follows:

3.5.3.1

Commented [HJF26]: Cross-referenced in Section XVI of the Code. As long as it is below the spending threshold, as referenced in the Procurement Policy Table, the President/CEO sets authorization levels by policy.

The monetary thresholds were moved to a policy in the Procurement Policy Table to allow the Board greater ability to modify as the industry changes and to provide more consistency as to the thresholds.
<table>
<thead>
<tr>
<th>PURCHASE REQUISITION</th>
<th>DEPT. HEAD/ COST CTR. MGR.</th>
<th>REGIONAL CNO, COO, CFO, Asst Controller</th>
<th>REGIONAL CEO, NBHDVP</th>
<th>SVP/CFO</th>
<th>President/CEO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine operating</td>
<td>To $5,000</td>
<td>To $20,000</td>
<td>To $50,000</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
<tr>
<td>supplies, minor</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>equipment, materials, materials, nonprofessional services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital</td>
<td>To $10,000</td>
<td>To $20,000</td>
<td>To $50,000</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
<tr>
<td>departmental</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional/</td>
<td>-</td>
<td>-</td>
<td>To $50,000</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
<tr>
<td>Consultant Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Disbursements/</td>
<td>-</td>
<td>To $20,000</td>
<td>To $50,000</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
<tr>
<td>Donated Funds</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Purchases of capital items require a properly completed Capital Equipment Request (CER) or Capital Project Request (CPR). Please refer to Accounting Services Policy AP 001-510-021. Payments on capital items may not be made via a request for check. (Exception being Certificate of Need (CON) application fees, subject to purchase requisition levels of authorization).

**Professional/consultant services must be processed through CA in accordance with General Administrative Policy 001-140. Such services shall be evidenced by a contract or letter of agreement reviewed by legal counsel.

***route through Financial services after proper level of authorization is obtained.
3.5.3.3
All contracts and price agreements must be between the contracting entity and the NBHD, not individual business units or regions. All contracts/price agreements must be authorized and signed in accordance with General Administrative Policy 001-020.

<table>
<thead>
<tr>
<th>CONTRACT EXECUTION FOR</th>
<th>DIRECTOR OF CRMM</th>
<th>SVP/ CFO</th>
<th>PRESIDENT/CEO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Services, Non-Professional services</td>
<td>-</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
<tr>
<td>Contracts That Do Not Contain Monetary Provisions</td>
<td>-</td>
<td>All Contracts</td>
<td>All Contracts</td>
</tr>
<tr>
<td>Grant Contracts</td>
<td>-</td>
<td>All Contracts</td>
<td>All Contracts</td>
</tr>
<tr>
<td>Capital Equipment (Including Capital Leases)</td>
<td>-</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
<tr>
<td>Operating Leases</td>
<td>--</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
<tr>
<td>Supplies, Equipment, Materials</td>
<td>To $50,000</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
</tbody>
</table>

3.6 PURCHASE ORDER AUTHORIZATION

A system of authorization and approval levels covering the purchase of supplies, equipment, materiel, and services for the NBHD is an important element to internal control of all acquisitions. Section 3.5 (Requisitioning Authority) defines the approval process for requisitions prior to their submission to CRMM or CA. All individuals authorized to generate a purchase order shall abide by the limits set below. If an individual whose approval level is required in accordance with the defined levels is not available, a signature must be obtained from the next highest level of authorization.

3.6.1 The table below provides required authorization levels based on the dollar amount of an order. All designated personnel must obtain all required approvals prior to final commitment.

<table>
<thead>
<tr>
<th>PURCHASE ORDER FOR</th>
<th>MANAGER of CRMM, BUYERS/AGENTS of CRMM, SPECIALISTS of CA</th>
<th>DIRECTOR of CRMM, MANAGER of CA</th>
<th>PRESIDENT/CEO, SVP/CFO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional, Non-professional services</td>
<td>To $50,000</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
<tr>
<td>Capital equipment</td>
<td>To $50,000</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
<tr>
<td>Equipment Leases</td>
<td>To $50,000</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
<tr>
<td>Supplies, Equipment, Materials</td>
<td>To $50,000</td>
<td>To $250,000</td>
<td>$250,000+</td>
</tr>
</tbody>
</table>

Commented [HUF27]: This was moved to a Procurement SOP.
3.6.2 If a PO modification is needed to correct or supplement an open order, or if additional expenditures are required, the request for that change order must be approved by the next highest authorization level (table 3.6.1).

3.6.3 Purchase orders created in the MMIS are signed electronically using the "release “function. The release function is executed by the Director of CRMM or Administration approved designee (table 3.6.1). Purchase Orders requiring approval higher than the Director of CRMM must have the signature of the highest required approver.

3.6.4 Purchase orders created in the Contract Management system are signed electronically using the "approved" function. The approved function is executed by the Manager of CA or approved designee (table 3.6.1). Purchase Orders requiring approval higher than the Manager of CA must have the signature of the highest required approver.

3.7 **EMERGENCY/UNAUTHORIZED COMMITMENTS**

The NBHD medical centers and non-acute care facilities provide patient care 24 hours per day, 365 days per year. CRMM and CA provide procurement support Mondays through Fridays (normal business hours). Emergency orders for products or services occasionally occur after normal business hours and require special handling. Procedures are required to facilitate these emergency requests.

Any Emergency order must be authorized in accordance with Section 3.5.3 and be communicated to CA or CRMM the next business day with all appropriated authorized documentation.

3.8 **PROCUREMENT CARDS**

Procurement Cards are used for assigned and authorized NBHD employees to make purchases needed for hospital and business operations where the general acquisition process is not efficient or cost effective.

3.8.1 NBHD staff that is given approval to use procurement cards shall complete and submit the Procurement Card Authorization form to the office of the Director of CRMM.

3.8.2 Procurement cards to be used exclusively for business expenses incurred on behalf of the NBHD and solely by the authorized individual to whom the card is issued to. The cardholder retains full responsibility for the use and safekeeping of the procurement card.

3.8.3 Procurement card limits are $50 per transaction; $250 per month. Increased limits are granted only upon written request of the President/CEO or SVP/CFO.

3.8.4 Cardholders must reconcile and forward each month's receipts to the applicable cost center manager or department head for approval. Upon this approval, receipts must be forwarded to the AP department for payment processing. AP will notify the Director of CRMM of any
irregularities or perceived breaches of this Code. The Director of CRMM will resolve all issues, if needed, with the appropriate levels of management.

3.8.5 Cardholders found to have breached any part of Section 3.8 of this Code will receive disciplinary action up to and including termination.

3.9 **ACQUISITION ENDORSEMENT OF BIOMEDICAL EQUIPMENT**

The purchase of any biomedical equipment must be made so that its selection, installation, and operation are efficient and effective. Selection of all biomedical equipment is made on a basis of need and practicality. Each choice must be compatible with existing and/or planned biomedical technologies. This can only be accomplished through a centralized review, coordination, and endorsement process.

3.9.1 The purchase of biomedical equipment will be guided by an acquisition endorsement plan. The Director of Clinical/Biomedical Engineering has primary responsibility to administer the plan. As such:

3.9.1.1 The proposed acquisition of biomedical equipment will be evaluated by the Director of Clinical/Biomedical Engineering for purchases which meet the criteria described above. In the event they cannot resolve any difference of opinion, the issue will be forwarded to the next level of management for resolution.

3.9.2 The Director of Clinical/Biomedical Engineering has the responsibility to:

3.9.2.1 Administer the NBHD's acquisition endorsement plan for biomedical equipment;

3.9.2.2 Provide advice/consultation to department/business unit directors/managers regarding acquisition of biomedical equipment;

3.9.2.3 Consult in the implementation of any application which requires the approval of the Board of Commissioners, involves the preparation of a request for proposal, or involves multi-departments, business units, or medical centers; and

3.9.2.4 Report the status of biomedical equipment to the safety committees on a quarterly basis; and

3.9.2.5 Interact with the Manager of CA or Director of CRMM as requested or required to fulfill the procurement cycle.

The Director of Clinical/Biomedical Engineering will endorse in writing the first page of the capital equipment/project request forms and accompanying purchase requisitions for acquisition of any biomedical equipment.

3.10 **ACQUISITION OF PHARMACEUTICALS**

The pharmacy managers at each region and their designees have the responsibility for directly
ordering pharmaceuticals utilizing GPO contracts and approved wholesaler purchases including:

3.10.1 Pharmaceutical items for sale to patients;
3.10.2 Pharmaceutical items to be used by other departments in administering examinations and treatments to patients; and
3.10.3 Pharmaceutical packaging materials.

All acquisitions are conducted in compliance with Pharmacy Policy PH-55-02. All other purchases of supplies, materials and services shall be processed through the NBHD CRMM Department. The regional pharmacy managers shall perform these procurements in accordance with internal policies and procedures that conform to those of this Code.

3.11 FORMS APPROVAL AND COMMITTEE- "RESERVED FOR FUTURE INPUT"

3.12 SAMPLES, NO-CHARGE, LOANER MATERIALS

The NBHD obtains all supplies, equipment, and materials through the issuance of a purchase order. These items are received through the Regional Materiel Services Receiving Departments. Occasionally, departments require no-charge samples, demonstration products, and/or loaned materials directly from the vendor. Departments must complete and forward a requisition to CRMM. A purchase order will be issued stating the conditions of the transaction. CRMM will consult with NBHD District and Regional Materials Managers and GPO Contracting to evaluate the appropriateness of the request. All regulatory and commerce rules as written in the Uniform Commercial Code must apply.

3.13 PRODUCT COMPLAINTS

The NBHD encounters instances where products, both medical and non-medical, do not meet the specifications or expectations of the end-user. This section defines the steps used to alert the CRMM department of defective, malfunctioning, or suspected-to-be-defective or suspected-to-be-malfunctioning products.

3.13.1 A department representative or cost center manager contacts the regional materiel manager.
3.13.2 The department representative or cost center manager works with the regional materiel manager to complete a product complaint form.
3.13.3 The materiel manager forwards the complaint form to CRMM
3.13.4 The department representative or cost center manager attends the appropriate product review committee to discuss and analyze the suspect product.
3.13.5 CRMM contacts distributors and/or manufacturers in the event that a product is declared inferior, or otherwise defective.

3.14 PRODUCT RECALLS

Commented [HUF32]: This was moved to a Procurement SOP.
Commented [HUF33]: This was moved to a Procurement SOP.
Commented [HUF34]: This was moved to a Procurement SOP.
To provide an environment free from hazards for our patients, staff and visitors, NBHD will coordinate the removal, field correction or modification of products, equipment, food and pharmaceuticals that are known or are suspected of being defective.

3.14.1 Appropriate personnel will be informed of a product recall by CRMM. If personnel are informed of a product recall by a source other than CRMM, they will immediately inform CRMM and forward a copy of the written notice, if one is available.

3.14.2 CRMM receives notification of a product recall in various ways, which include, but are not limited to the following:

- FDA Enforcement Reports
- National Recall Alert Bulletins
- Direct from the manufacturer/distributors
- From hospital and/or NBHD departments
- Emergency Care Research Institute (ECRI)
- Other reputable sources

Any hospital staff member who receives information from the manufacturer concerning a product recall, field correction or modification must upon receipt, forward all information to CRMM for processing.

3.14.3 Recall Classes:

- FDA Class #1: A situation in which there is reasonable probability that the use of or exposure to a volatile product will cause serious adverse health consequences or death.

- FDA Class #2: A situation in which the use of or exposure to a volatile product may cause temporary or medical reversible health consequences or where the probability of serious adverse health consequence is remote.

- FDA Class #3: A situation in which the use of or exposure to a volatile product is not likely to cause adverse health consequences.

3.14.3.5 A copy of the Product Recall Log will be forwarded on a bi-annual basis to the Safety Officer for each region and the Director of CRMM for review. This will provide a summary of current recall status.

3.14.4 Safety Alerts/Notices/Advisories

These are received from the same sources and distributed via electronic mail to all departments. These fall into one of the following areas:

- Information regarding a possible hazard under certain circumstances.
- Requiring minor mechanical adjustments or additions.
- Require procedural changes in how a product is used.

Safety alerts/notices/advisories do not involve a mandatory return of items. They may at times offer an exchange if the customer would be more comfortable in doing so.
3.14.5 Agency Inquiries
Any on-site visits or telephone/written inquiries by regulatory agencies; e.g., FDA, OSHA, etc., should be immediately referred to the regional safety officers.

3.14.6 The Director of CRMM, or designee, will immediately notify the appropriate department head(s) regarding the product recalls. CRMM will be responsible for assessing the urgency of the recall and will use the most practical means of disseminating recall information to the appropriate staff. This includes, but is not limited to telephone, electronic mail, fax machine, courier, etc.

3.14.6.1 CRMM will notify the Safety Officer(s) immediately upon receipt of a Class #1 recall involving supplies and equipment within NBHD facilities.

3.14.6.2 CRMM will provide a listing of the persons/departments notified of product recalls to all NBHD Materials Managers at the appropriate facilities via electronic mail.

3.14.6.3 Action on all FDA recalls will be initiated immediately upon receipt of notification by CRMM.

3.14.7 CRMM will maintain a file on each recall received and distributed, regardless of class, notification procedure, responsible department of applicability to the hospitals. Notices received, but not distributed, are handled as follows:

3.14.7.1 Information on the notice is entered on the "Product Recall Log" with disposition noted in comments.

3.14.7.2 A copy of the notice with appropriate comments as to disposition is then filed with the current active recall files.

3.14.7.3 Each file will consist of a unique identification number for that recall, date issued, persons/departments notified, FDA class of recall, and available information pertinent to the product under investigation (i.e., manufacturer, product description, lot number(s), and reason for recall).

3.14.8 The department will outline action to be taken and will respond to CRMM within five working days via electronic mail noting action taken below:

3.14.8.1 does not affect this department; no action required.

No affected product in house; no action required.

Action is complete, recall being returned to appropriate NBHD Materials Manager(s). The departments notified of a recall are responsible for following appropriate action and ensuring completion. NBHD Materials Managers shall be responsible for supplying a written response for each recall to the Director of CRMM within 3 weeks of notification of the recall identifying the department that located recalled items and how many were returned to the manufacturer of distributor.

3.14.9 Most product recalls require returning the product to the manufacturer as per the instructions enclosed in the recall notice. Product is either replaced or a credit is given to the account. In the event a vendor requires a purchase order for replacement product, CRMM will assign a purchase order.
3.15 **PRODUCT EVALUATION ANALYSIS COMMITTEE**

The Value Analysis Committee (VAC) is committed to making efficient and effective decisions pertaining to the products and equipment used at each and all NBJ-ID facilities. These decisions are based on cost and quality and assure that the best overall value is obtained. All value decisions are in response, but not limited to Group Purchasing Organization (GPO) contract offerings, product standardization requests, product complaints, or patient employee safety issues. The VAC will also consider maximum diverse vendor participation in the evaluation and selection of vendors. The VAC is empowered to analyze product choice and utilization and will do so in cooperation with CRMM. Final product selection (for specialized or multidisciplinary clinical products) requires the VAC’s approval. All value decisions are in response, but not limited, to GPO contract offerings, product standardization requests, complaints regarding products or equipment, patient/employee safety issues, placement of loaner/temporary equipment or products, and in response to requests from Senior Staff and/or the Board of Commissioners. See the Policies and Procedures Manual for the details of the VAC’s purpose, procedures, membership, meetings, conflict of interest and review process.

3.15.1 **Committee Membership**

| Chairperson: | Manager, CRMM |
| Ex Officio:  | Director, CRMM |
|             | Manager, OSD |
| Membership: | Membership will include those NBJ-ID professionals accountable for successful outcomes utilizing materials, equipment and supplies throughout the NBJ-ID; members will be appointed by the Manager of CRMM based on approvals and recommendations from NBI-ID executive management determining size of the committee including specific clinical and operational representation. |

3.15.2 **Value Analysis Committee (VAC) Meeting**

3.15.2.1 Meetings are scheduled monthly unless inappropriate due to unusual circumstances. The VAC will meet a minimum of ten (10) times per calendar year.

3.15.2.2 Minutes of all meetings will prepared and distributed in a timely fashion.
3.15.2.3 A master set of all minutes, agendas, exhibits and supporting documents will be kept in CR.MM as provided by law as amended from time to time.

3.15.3 VAC Membership Responsibilities

3.15.3.1 Ensure that the District is in compliance with all GPO committed agreements and other contractual agreements the District feels are in the best interest to pursue.

3.15.3.2 Assist with the identification of products which should be reviewed by the VAC.

3.15.3.3 Participate in the VAC product review process.

3.15.3.4 Serve as a liaison to staff and other committees, represent the facility’s interest, coordinate in service arrangements for new products and disseminate VAC proceedings and decisions.

3.15.3.5 Attend all VAC meetings or send a designee.

3.15.3.6 Prepare reports relating to the implementation of GPO contracts, other contracts, or standardization initiatives.

3.15.3.7 Identify District-wide needs and standardize products and equipment throughout all the District’s regions regarding new business.

3.15.3.8 Review and vote on all standardization requests.

3.15.4 Value Analysis Committee Review Process

3.15.4.1 Plans implementations for newly contacted GPO items.

3.15.4.2 Consider the merits of new or replacement products/equipment not covered by GPO contracts.

3.15.4.3 Develop plans for those items that warrant clinical or technical evaluations. The VAC may assign these to existing subcommittees or establish special task forces.

3.15.4.4 Determine a recommendation or rejection for the products or equipment being considered.

3.15.4.5 Product samples for demonstration and evaluation will be obtained at vendor's expense, whenever possible. All samples will be received in CR.MM or CR.MM will direct the delivery to the appropriate NBHD Materials Department.

3.15.4.6 Product samples and corresponding product profiles will be brought to the VAC meeting. A determination will be made on whether or not to evaluate a proposed item. Factors relating to quality assurance, risk management, safety, infection control, training, value analysis, cost benefit analysis, price comparisons and
clinical evaluations will be used as appropriate, in making determinations. No product will trialed or evaluated until it has received by the VAC.

3.15.4.7 Acceptance of recommended action will be by consensus of the VAC. Where a major discrepancy occurs, and cannot be resolved, a vote will be taken.

3.15.4.8 Whenever possible, all items accepted for the products list must have an acceptable substitute product also approved by the VAC.

3.15.4.9 All items which have been review and rejected will not be considered by the VAC for at least one year unless there is a favorable price change, or major clinical need for the product.

3.15.4.10 Final recommendations will be presented to the entire VAC by the coordinating individual and/or CR.MM Manager at the conclusion of the evaluation. The presentation will include a brief oral summary of the findings and recommendation.

3.15.4.11 Approved items which represent replacements to products currently in use, will not be put into circulation until existing stock is exhausted.

3.15.4.12 Content of VAC minutes will include the approved actions and evaluation findings of any item(s) presented to the VAC; total dollar savings as a result of the product; whether a product is a replacement or not; the acceptable substitute product; and where or not orientation or in-service will be required on these products.

3.15.5 Products requiring approval for use prior to introduction to the VAC shall be initially authorized by the primary using Department Director. The VAC will review and approved each request and provide temporary authorization for use until appropriate review and recommendation can be made by the VAC.

PART 4: CONTRACTING PROCEDURES

4.1 CONTRACT ADMINISTRATION

The NBHD enters into a wide variety of contractual agreements. The following section provides guidance on the administration of contracts governed by this Code (see Section 1.4), as well as procedures required to ensure compliance with NBHD contracting guidelines. This section does not modify the process for vendor selection or the approval requirements previously identified in this Code.

4.1.1 CA is responsible for processing all professional and non-professional service-based contracts unrelated to construction

4.1.2 CRMM is responsible for processing all purchase-based and supply-based contracts.
4.2  **CONTRACTS FOR GOODS AND SERVICES**

Notwithstanding normal business acumen and diligence applied to the contract procurement process, emphasis is placed on, but not limited to the following terms, conditions, and considerations as applied to contracts for goods and services:

4.2.1  Contract must meet the requirements of and comply with the Charter of the NBHD, as amended from time to time.
4.2.2  Contract must include appropriate language and provisions related to the HIPAA.
4.2.3  Contractors not on the OIG list of excluded persons.
4.2.4  Contractor is not debarred by the NBHD.
4.2.5  Contract complies with all regulatory requirements.

4.3  **LEGAL COUNSEL REVIEW**

CA and CRMM review all contracts before approval or execution by the President/CEO or SVP/CFO. Contract authorization levels are listed in Section 3.5 of this Code. All contracts are subject to review by NBHD Legal Counsel. General Administrative Policy 001-020 provides guidance for the authority for approval, execution, and legal review of contracts. NBHD Legal Counsel will collaborate with CA and CRMM and make final determinations as to the extent and degree of contract development to be accomplished by CA, CRMM, or NBHD Legal Counsel.

4.4  **CONTRACT DEVELOPMENT**

4.4.1  For all contracts, CA or CRMM prepares a draft contract using a format approved by NBHD Legal Counsel.
4.4.2  Based on the amount, complexity, or unusual circumstances, CA or CRMM determines which contracts shall be referred to NBHD Legal Counsel for review.
4.4.3  When engaged, NBHD Legal Counsel will consult with CA or CRMM, the contract requester, and/or the vendor to finalize the development of the contract.
4.4.4  For contracts that are not referred to NBHD legal counsel, CA or CRMM will work with the contract requestor and vendor to finalize the form contract and will perform all due diligence needed for execution.

4.5  **CONTRACT MAINTENANCE/ MANAGEMENT**

Commented [HUF37]: A future SOP and potential policy should follow from the Legal department in conjunction with the President/CEO.
4.5.1 **Contract Maintenance**

4.5.1.1 CA and CRMM are responsible for safe keeping of contracts applicable to their respective areas of responsibility.

4.5.1.2 CA and CRMM will perform the necessary administrative follow-through of executed contracts, including but not limited to insurance verification.

4.5.1.3 CA will provide copies of contracts to AP as reference for payment purposes.

4.5.2 **Contract Management**

4.5.2.1 Primary contract management related to performance is the responsibility of the designated contract custodian(s). This/these subject matter experts monitor the performance terms and conditions of a given contract.

4.5.2.2 Any performance failures of either party are to be reported to the Manager of CA or Director of CRMM. Unresolved issues are escalated to the PSC at the discretion of the Manager of CA or Director CRMM. See Section 2.2 of this Code for more information related to vendor performance.

4.5.2.3 The contract custodian, and/or the Manager of CA and Director of CRMM shall report unresolved compliance related issues to NBHD Corporate Compliance.

4.5.2.4 Some service-based contracts may not have a specifically designated contract custodian. In these cases, the relationship is managed either by the applicable NBHD region, department requesting the contract, or by CA.
PART 5: RECEIVING AND DISTRIBUTION PROCEDURES

5.1 RECEIVING AND DISTRIBUTION

The NBHD Materials Departments are responsible to ensure accountability for the receipt, distribution and return of supplies used in the daily operations of the NBHD medical centers, clinics and offices.

5.1.1 The NBHD Materials Departments will receive all equipment and supplies addressed to the NBHD. Dietary and Pharmacy products are the exceptions and will be disbursed in accordance with Dietary and Pharmacy Department policies and procedures.

5.1.2 All equipment and supplies must be delivered to the NBHD Materials receiving areas at each facility, including medical centers and applicable satellite locations. Unless otherwise instructed by CRMM, all locations will be responsible for coordinating the receiving activity.

5.1.3 Incoming Shipments

5.1.3.1 Assigned receiving personnel will count the number of packages, pallets, skids or totes and compare to the count listed on the shipping or receiving document;

5.1.3.2 Physical counts and shipping/receiving documents must agree before the receiving personnel signs for receipt. All deviations, shortages or damage must be noted on the shipping/receiving document and initialed by the carrier before merchandise is accepted; and

5.1.3.3 If merchandise or its packaging is damaged, personnel should not accept. The carrier must note refusal of order on the shipping/receiving document.

5.1.4 Shipments Accepted

Once accepted, shipments of equipment or supplies are the responsibility of the facility. A representative from the ordering department must sign the receiving ticket, keeping one copy for their records and return the signed copy to the receiving personnel.

5.1.5 Packages That Do Not Have a Purchase Order

A delivery manifest must be prepared by Material Operations or Regional Material Services for packages received that do not have a purchase order, such as Federal Express letters, deliveries for physicians, patients or gift shops. A representative of the department, patient, or physician will sign the copies of the delivery manifest. After all deliveries have been made, the signed copies will be filed in Material Operations or Regional Material Services.

Commented [HJF38]: This was moved to a Procurement SOP.
5.1.6 **Concealed Packages**
Any shipment with concealed damage that was not noted on the shipping/receiving document at the time of receipt must be reported to the CRMM department immediately. CRMM will contact representatives from the carrier/vendor to inspect the item(s) to initiate a merchandise damage claim.

5.1.7 **Misdirected Deliveries**
Packages received at one location that belong to another will be staged for outside courier transport or shipped via internal delivery utilizing the delivery manifest.

5.1.8 **Asset Tags**
Capital asset tags will be affixed in accordance with Section 6.4.

5.1.9 **Electrical Inspection**
All electrical equipment must have an electrical safety inspection from Facilities Management or Clinical/Biomedical Engineering before use by the ordering department. NBHD Materials departments will deliver all clinical items to Clinical/Biomedical Engineering for inspection. All other items will be delivered to the end user for request of inspection from Facilities Management.

5.1.10 **Emergency Orders**
When CRMM places an order that will be delivered during evening or weekend hours, CRMM will contact the Materials Departments with the purchase order number and contact person for the user department. The user department will forward a copy of the shipping/receiving document to Materials after receipt of the merchandise has been verified.

5.1.11 **Bypass Orders**
A bypass is an order that goes directly to the user department and does not stop in Materials (i.e., service repairs, repair parts, surgical implants). In these instances, the end user must notify Materials if a purchase order was issued for these items.

5.1.12 **Pharmacy**
All pharmacy departments generate their own purchase orders for pharmaceutical supplies and receive them as well. The pharmaceutical supplies are not passed through the Regional Material Services.

5.1.13 **Nutritional Services**
All nutritional services departments generate their own purchase orders for nutritional supplies and receive them as well. The nutritional supplies are not passed through the Regional Material Services.

5.1.14 **Product Returns**
All product returns are coordinated by Material Operations and/or NBI-ID Materials. CR-MM is responsible to make all return arrangements and provide applicable instructions. These instructions vary from vendor to vendor. One copy of the vendor
return ticket and one copy of the requisition are forwarded to AP.

5.1.14 One copy of the vendor return ticket and one copy of the requisition are forwarded to vendor with the merchandise;

5.1.14.2 One copy of the vendor return ticket and one copy of the requisition are filed in the Materials receiving location.

5.1.15 JIT Vendor Returns
All product returns are coordinated by NBI-ID Materials Departments; Materials is responsible to make all return arrangements and provide applicable instructions. These instructions vary from vendor to vendor. One copy of the vendor return ticket and one copy of the requisition are forwarded to Accounts Payable:

5.1.15.1 One copy of the vendor return ticket and one copy of the requisition are forwarded to vendor with the merchandise;

5.1.15.2 One copy of the vendor return ticket and one copy of the requisition are filed in the appropriate Materials receiving location.

PART 6: INVENTORY MANAGEMENT PROCEDURES

6.1 PERPETUAL FISCAL YEAR-END INVENTORY
Managed by NBHD Materials Managers.

6.2 PHYSICAL INVENTORY
Managed by Accounting Services.

6.3 DISPOSITION OF SURPLUS PROPERTY
Material Operations will establish and maintain timely, efficient and accountable procedures for the identification, collection, transfer, storage and disposal of property which is surplus to the needs of the NBHD business units. These procedures will be in conformance with Chapter 274 of the Florida Statutes (Tangible Personal Property Owned by Local Governments) and the Charter of the NBHD. The NBHD is empowered by the Board to act on its behalf in the disposition of surplus property with a net book value of up to $250,000. Surplus property that meets or exceeds $250,000 requires approval from the Board. The net book value of the surplus property will be used to determine what method of disposal is followed.

Surplus property will be handled and disposed of as follows:
Transferred to another business unit or department of the NBHD;
transferred to other governmental agencies within the boundaries of the NBHD taxing authority; auctioned to governmental agencies, employees, interested parties and the general public; donated to not-for-profit entities; used as a trade towards purchase; or scrapped.
6.3.1 Determination/Identification/Recording of Surplus Property

Department/business unit directors/managers are responsible for determining when property assigned to or located within their areas has become surplus and to initiate procedures for identification, collection, transfer, storage and disposition of surplus property. The department/business unit, Accounting and Material Operations will collectively complete the appropriate paperwork and forms needed to accurately record the value and disposition of the property.

6.3.2 Transfer of Surplus Property

On a quarterly basis the Manager of Material operations will prepare and make available a list of previously collected surplus property for review by applicable department/business unit directors/managers and Accounting. Department/business unit directors/managers may request items on the surplus property after a visual inspection of the surplus property is made by the department/business unit director/manager or designee prior to the item being transferred to the department. If appropriate, the Director of Clinical/Biomedical Engineering may be requested to assist with the inspections.

If a department/business unit director/manager wishes to obtain an item on the surplus property list, the Manager of Material Operations will arrange for transportation of the item from the surplus facility to the department/business unit receiving the item.

6.3.3 Disposal of Surplus Property under $100 Book Value

Items of surplus property which were not transferred to other NBHD departments/business units can be transferred to governmental agencies with operations located within the boundaries of the NBHD's taxing authority. If surplus property is not disposed of two governmental agencies, it will be made available to NBHD employees and the general public by means of the bidding process or donated to not-for-profit entities or scrapped as deemed appropriate by the VP of Finance.

6.3.3.1 Transfer to governmental agencies

The Manager of Material Operations will prepare a list of surplus property to be made available to governmental agencies. All items are sole "as is" and are subject to the following conditions:

6.3.3.1.1 with all faults and/or defects; and
6.3.3.1.2 with no warranties of any kind whatsoever, express or implied, including warranties of merchantability or fitness for particular purpose; and
6.3.3.1.3 with acknowledgment to release the NBHD from any and all liability arising from the use of the property which was received; and
6.3.3.1.4 the cost of transfer shall be borne by the receiving agency.

6.3.3.2 All agencies receiving surplus property will sign a release form.

6.3.3.3 Items of surplus property, which were not transferred to other NBHD departments/business units, or transferred to governmental agencies, will be subject...
to public auction.

6.3.4 Disposal of Surplus Property over $100 Net Book Value

Governmental agencies located within the boundaries of the NBHD's taxing authority, employees of the NBHD and other interested parties as well as the general public will be invited to bid on the remaining surplus property with a net book value in excess of $100 or below and will receive notification of the impending sale by means of:

6.3.4.1 a notice will be placed in the Star and the Star Highlights notifying NBHD employees of the availability of surplus property and the date of the sale; and

6.3.4.2 the Manager of Material Operations will prepare an advertisement, to be placed in both the Sun Sentinel and the Westside Gazette and the advertisement will be published not less than thirty (30) days prior to the bid opening and will notify governmental agencies and the general public of the availability of surplus property, and inform interested parties where they may view surplus property of specific bidding instructions.

6.3.5 Surplus property will be sold "as is" and subject to the same terms and conditions as in Section 6.3.3.1.

6.3.6 Sale of the surplus property will be made to the highest responsible bidder. The NBHD reserves the right to accept all, any or none of the bids submitted. The NBHD reserves the right to make award of the bid on the basis of total bid, group of items, or an item basis, whichever is in the best interest of the NBHD.

6.3.7 Successful bidders will be notified by mail or other means available and will be required to take possession of the surplus property within ten (10) calendar days after the bids are awarded. Bidders who do not take possession within this timeframe will forfeit their claim to the surplus property.

6.3.8 The successful bidder will be required to pay for all surplus property prior to taking possession. A cashier’s check made payable to the NBHD is preferred, although cash is acceptable for successful bids of $25 or less. After moneys have been collected, bidders will sign a release form.

6.3.9 The Manager of Material Operations will collect the cashier's check or cash and will annotate the appropriate account to give credit to the appropriate GL surplus property account.

6.3.10 The Manager of Material Operations will forward any cashier’s checks and/or moneys to Accounting. Accounting is responsible for deleting the equipment from the NBHD property files, and depositing the moneys in the master bank account.

6.3.11 Scrapping Surplus Property

Surplus property which is not transferred, or sold through public auction as described above shall be scrapped at the discretion of the VP of Finance and the signature of the employee.
witnessing this procedure will be obtained as per the "Auditor General" regulations, p. 11, (2), (d). The Material Operations department will retain documentation associated with the sale of surplus property for a period of 3 years following disposition.

6.3.12 After the final sale/scraping of surplus property, Material Operations will be responsible for the removal of all asset tags (see Section 6.4) for items previously collected.

6.4 CAPITAL ASSET TAG MANAGEMENT

The NBHD Accounting and CRMM Departments shall provide adequate internal controls to establish and maintain timely, efficient, and accountable procedures for the assignment of asset tag numbers for both the documentation and replacement of asset tags on capital equipment. The objectives of asset tag management is to support compliance with Florida statutes as implemented in Rules of the Auditor General regarding records; and to provide for the identification and disposition of property and inventory procedures:

6.4.1 The NBHD shall tag all intangible equipment purchased under minor or major projects; i.e., all types of furniture, such as chairs, tables, desks, beds, filing cabinets, etc., fax machines, copiers, wheelchairs, gurneys, medical equipment, TVs, VCRs, computer equipment, such as CPUs, monitors and printers (no keyboards) that fits the definition of capital equipment included in Accounting Policies and Procedures Manual Section 510. If unable to apply a tag, i.e., software, note "not tagged" on log or in P039 notes and forward.

6.4.2 Accounting shall:

6.4.2.1 provide support for equipment to be insured;

6.4.2.2 maintain records to avoid duplication of purchases of capital equipment;

6.4.2.3 provide accurate identification of capital equipment in case of loss;

6.4.2.4 document all data for capital equipment from acquisition to disposition;

6.4.2.5 assign custodian of capital equipment to user departments in order to facilitate annual asset inventories and random audits of assets;

6.4.2.6 record movement and transfer of capital equipment between departments; and provide appropriate supporting documentation for all capital equipment recorded in the NBHD general ledger;

6.4.2.7 list the Capital Equipment Request (CER) number and the general ledger account number on the CER;

6.4.2.8 Is responsible for determining if an item is to be tagged and will record instructions on applicable requests/requisitions.

6.4.2.9 will conduct a quarterly audit of asset tags on those assets added during the previous 3 months and report their findings to Internal Audit.

6.4.3 NBHD Materials Managers shall perform or coordinate the following:

6.4.3.1 apply asset tags upon receipt daily;

6.4.3.1.1 The Accounting Manager, Regional Materials Managers, Regional ...
Directors of Finance, Regional Departmental Managers and the Director of CRMM will be responsible for ensuring the asset tags assigned to all regions are affixed; ensure that upon receipt of biomedical equipment at each region, a biomedical representative inspects and tags:

6.4.3.2 enter the asset tag number into MMIS on the receiver and staff will write the asset tag number on the asset tag log and fax or hand deliver to Accounting daily;

6.4.3.3 ensure the placement of the tag(s) will be consistent for items of similar nature to facilitate location of the tag (asset tags will be placed in conspicuous locations);

6.4.3.5 ensure that in an emergent situation, when the asset tag(s) is/are not yet available and the item MUST BE delivered, that the tag(s) is/are subsequently affixed properly; and

6.4.3.6 After the final sale/scrapping of surplus property (see Section 6.3), Material Operations will be responsible for the removal of all asset tags for items previously collected.

6.4.4 Routinely, inside deliveries are not received by NBHD Materials receiving areas. OCR for each project will obtain asset tags from appropriate Materials Departments at point of receiving equipment for a project. Equipment will then be tagged and a listing of equipment will be provided on an asset tag assignment form. Regional Facilities Services shall:

6.4.4.1 ensure that all computers and printers delivered to a construction/renovation site and accepted by either the owner and/or general contractor is tagged;

6.4.4.2 notify Materials upon completion of projects and make them aware of the location, type of assets, and quantity and then collaboratively assign and apply appropriate asset tags;

6.4.4.3 tag all furnishings, tangible and/or moveable, delivered to the construction/renovation site and accepted by the facilities manager;

6.4.4.4 tag all physical plant equipment, electrical, mechanical, plumbing and HVAC (heating, ventilation, air conditioning) received at the regional construction/renovation site and accepted by the owner and/or owner's representative.

PART 7: EMERGENCY AND DISASTER PLANNING PROCEDURES

7.1 EMERGENCY/DISASTER SUPPLY DISTRIBUTION

The NBHD will establish and maintain an effective and accountable distribution system for timely and appropriate response to all actual or potential emergency or disaster situations as they become known. Such response will be in relation to the seriousness of the emergency or disaster and to the extent that supplies are in stock at the JIT or local distributors, the Material Distribution/Receiving areas at the medical centers and/or in use within the departments of the
NBHD, the medical centers and satellite facilities.

Section 24 of the Charter of the NBHD states that when emergency or unusual conditions exist for the acquisition of supplies, equipment, and material, the President/CEO or designee shall provide resolution to identify the emergency or unusual conditions for approval by the Board of Commissioners to waive prescribed bidding procedures (see Part 3). The purchase requisition for such acquisitions shall refer to the resolution and shall be signed by the President/CEO or designee. ITEMS EXCEEDING THE PRESIDENT/CEO'S APPROVAL LIMITS WILL BE BROUGHT TO THE FOLLOWING MONTH'S BOARD MEETING AS AN INFORMATIONAL UPDATE.

The Director of CRMM or designee have the overall responsibility to plan, organize, direct and control all aspects of the emergency/disaster supply distribution program for supplies and equipment used throughout the NBHD facilities.

The Manager of Material Operations will have the use of the departmental vehicles to transport and deliver supplies to departments throughout the NBHD facilities.

All emergency/disaster supply distribution procedures will support and/or supplement the requirements set forth in the NBHD Comprehensive Emergency Management Plan (CEMP). Furthermore, NBHD CRMM and NBHD Materials staff will adhere to NBHD disaster response needs as outlined in the NBHD Comprehensive Emergency Management Plan (CEMP).

7.2 PROCUREMENT OF SUPPLIES IN EVENT OF DISASTER

The CRMM Department will facilitate the procurement and distribution of supplies for disaster preparedness in conjunction with the NBHD Comprehensive Emergency Management Plan (CEMP). This procurement will include items supplied by the primary "just in time (JIT)" distributors, as well as from outside vendors. The purpose of this policy is to address emergency needs in an organized manner prior to or in the event of an actual disaster.

The medical centers/satellite business units plan for and requisition supplies in advance to prepare for disasters as identified in the NBHD Comprehensive Emergency Management Plan (CEMP). This planning will be accomplished during June each year and arrangements will be made by CRMM to assist in procuring those supplies within thirty (30) days.

Procedure:

In collaboration with CRMM, each medical center/business unit, as applicable, will complete, as part of their disaster planning effort, a par level list of supplies required in the event a disaster strikes. Additionally, supplies, which are non-stock shall be requisitioned from CRMM via a Purchase Requisition form.

7.2.1.1 Stock/JIT Supplies
12.1.1  The disaster supply lists are reviewed and updated by NBHD CRMM and NBHD Materials Managers each year during June.

12.1.2  CRMM, NBHD Materials Managers and JIT distributors will maintain copies of the disaster supply lists.

7.2.1.1.3 Upon notification by the NBHD Chief Executive Officer (President/CEO) or designee, CRMM will instruct the JIT distributors to begin processing disaster supply lists. The supplies will be delivered no later than 6 hours after notification.

7.2.1.2  Procurement of Supplies in Event of Hurricane

7.2.1.2.1 Non-Stock/Special Order Supplies

7.2.1.2.2 Requisition(s) for non-stock supplies must be filled out and signed by authorized personnel. Note on the requisition(s) “DISASTER SUPPLIES.”

7.2.1.2.3 The requisition(s) must be forwarded to CR.MM, Attn: Manager of CRMM; June each year.

If specific requirements, such as contingency deliveries, are needed it must be specified on the requisition(s). NOTE: orders are placed, not held.
Broward Health
2019 Proposed Procurement Code
MASTERS PROCUREMENT CODE

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I. INTRODUCTION AND PURPOSE

North Broward Hospital District d/b/a Broward Health ("Broward Health"), a special taxing district of the State of Florida, was originally established and created through its enabling legislation in 1951 under chapter 27438, Laws of Florida, and such enabling legislation was recodified in Chapter 2006-347, Laws of Florida, and subsequently amended by 2007-299, Laws of Florida (collectively, the “Charter”). It is the policy of Broward Health, consistent with its Charter, to promote competitive, fair, open and transparent Procurement processes for its effective and efficient operation, to reduce the appearance of improprieties and opportunities of favoritism, and to establish public confidence in the process by which commodities and contractual services are procured. To that end, the purpose of this Master Procurement Code (the “Code”) is to govern the Procurement of goods and services by Broward Health and to facilitate such goals and processes, except to the extent a more specific policy of the Board of Commissioners of North Broward Hospital District (the “Board”) applies to specific types of Procurements, including, but not limited to, those for design and construction services. This Code is intended to provide guidance to Broward Health employees in the conduct of orderly administrative Procurements under ordinary circumstances. Minor or immaterial deviations from this Code shall not constitute grounds for a protest or appeal by the persons affected by the activity at issue. As a special taxing district, Broward Health is not necessarily subject to all Florida state laws and regulations relating to Procurement matters but must still conduct its business efficiently, with integrity, and in compliance with all applicable laws and regulations.

II. DEFINITIONS AND ACRONYMS

The words and acronyms defined in this Section shall have the meanings set forth below wherever they appear in this Code, regardless of whether they are capitalized, unless:

1. The context in which they are used clearly requires a different meaning; or
2. A different definition is prescribed for a particular Section of this Code.

Words not defined shall be given their common and ordinary meaning unless the context in which they are used requires otherwise.

A. Definitions

<table>
<thead>
<tr>
<th>TERM</th>
<th>DEFINITION</th>
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<tbody>
<tr>
<td>“Applicable Law”</td>
<td>Means the Charter, applicable provisions of the Florida Constitution, and applicable Florida and federal laws, rules, and regulations, all as amended from time to time.</td>
</tr>
<tr>
<td>“Bid” or “Proposal”</td>
<td>Means an offer submitted by a vendor in response to a Request for Quote or a Request for Proposal issued by Broward Health.</td>
</tr>
<tr>
<td>“Bidder” or “Offeror”</td>
<td>Means a person or entity submitting a Bid, quote, or Proposal to Broward Health for the supply of goods or services.</td>
</tr>
<tr>
<td>“Biomedical Equipment”</td>
<td>Means all clinical, electrical equipment used to treat patients.</td>
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<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td>“Board”</td>
<td>Means the Board of Commissioners of North Broward Hospital District.</td>
</tr>
<tr>
<td>“Broward Health”</td>
<td>Means the fictitious name established in 2007 for North Broward Hospital District to promote and effectively target the services of North Broward Hospital District in the healthcare marketplace. The naming of Broward Health does not modify or amend any covenants, Contracts, or other obligations of North Broward Hospital District. References to Broward Health throughout this Code mean and refer to the North Broward Hospital District and all of North Broward Hospital District’s other DBAs and wholly-owned entities now established and as further established from time to time by the Board. The term “Broward Health” shall specifically exclude all joint ventures of North Broward Hospital District unless the charter or articles of such joint venture indicate otherwise or unless the Board establishes a policy to subject such joint venture to the provisions of this Code.</td>
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<tr>
<td>“Budgeted”</td>
<td>Means expenditures by Broward Health which have been approved by the Board at a regular or a special meeting called for that purpose following a Budget Workshop and/or revised through the Final Tax Hearing.</td>
</tr>
<tr>
<td>“Business Day”</td>
<td>Means Monday through Friday from 9:00 a.m. to 5:00 p.m., excluding legal holidays that are recognized by the Broward County Government.</td>
</tr>
<tr>
<td>“Chief Procurement Officer”</td>
<td>Means the Broward Health employee acting as the principal public purchasing official for Broward Health that shall be responsible for the Procurement of goods, services, and materials in accordance with this Code.</td>
</tr>
<tr>
<td>“Code”</td>
<td>Means this Master Procurement Code.</td>
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<tr>
<td>“Code of Conduct”</td>
<td>Means Broward Health’s Code of Conduct, then in effect and as amended from time to time, as established by Broward Health’s Compliance and Ethics Program.</td>
</tr>
<tr>
<td>“Construction”</td>
<td>Means the process of designing, building, altering, repairing, remodeling, renovating, modifying, improving, or demolishing any structure, or building any real property owned or under the control of Broward Health.</td>
</tr>
<tr>
<td>“Contract”</td>
<td>Means all types of Broward Health agreements, regardless of what they may be called or referred to, for the Procurement or disposal of goods or services of any kind. Contracts also include amendments, modifications, supplemental agreements, addendums, exhibits, and/or attachments with respect to any of the foregoing. Every Contract must be duly authorized and approved prior to execution as provided within this Code.</td>
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<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td>“Contract Custodian”</td>
<td>Means the Broward Health employee designated in the Contract as the individual who is responsible for understanding the terms of the Contract and for insuring/monitoring the compliance of the Contract.</td>
</tr>
<tr>
<td>“Contract Modification”</td>
<td>Means any written alteration in specifications, delivery point, rate of delivery, period of performance, price, quantity, term, delivery date, payment date or other dates, or any other provisions of any Contract accomplished by mutual action of the parties to the Contract, in accordance with the terms the Contract.</td>
</tr>
<tr>
<td>“Contract Renewal”</td>
<td>Means the exercise of extending the term that a Contract is in effect.</td>
</tr>
<tr>
<td>“Contractor”</td>
<td>Means any person or entity having a Contract with Broward Health to provide goods or services of any kind.</td>
</tr>
<tr>
<td>“Cooperative Purchasing/Piggyback Contracts”</td>
<td>Means a Procurement process to procure goods or services by direct negotiation or another method from a supplier where the underlying purchasing agreement or Contract was competitively awarded by Broward Health or another public or government agency or entity (including, but not limited to, federal agencies or entities; tribal governments and entities; agencies, entities, counties, municipalities, special districts, boards, local governments, or other political subdivisions of the State of Florida; buying cooperatives; and other state and local governments) and which may also include shared Procurement programs and resources including advice and assistance.</td>
</tr>
<tr>
<td>“Diverse Vendor”</td>
<td>Means a Broward Health Certified or Verified Minority, Woman or Small Business Enterprise (M/W/SBE)</td>
</tr>
<tr>
<td>“Diverse Vendor Enhancements”</td>
<td>Means strategies designed by Broward Health which are intended to increase Procurement opportunities with Diverse Vendors, in accordance with the Procurement Policy Table.</td>
</tr>
<tr>
<td>“Formal Bid”</td>
<td>Means an RFP or RFQ as defined in this Code.</td>
</tr>
<tr>
<td>“Formal Bid Process”</td>
<td>Means the process of proceeding with the Procurement Procedures of an RFP or RFQ as provided in this Code.</td>
</tr>
<tr>
<td>“Group Purchasing Organization”</td>
<td>Means an entity or organization that aggregates the purchasing volume of members, such as hospitals and other health care providers, to leverage discounts with manufacturers, distributors, and other vendors to realize administrative savings and efficiencies. Also referred to as “Group Purchasing Plans.”</td>
</tr>
<tr>
<td>“General Services Administration Contracts” or “GSA Contracts”</td>
<td>Means Contracts entered into by the General Services Administration of the Federal Government (also known as GSA Schedules) that are multiple award contracts containing prices to be utilized by all federal government agencies. GSA Contracts also contain the most-preferred-customer clause, making the prices contained in GSA Contracts equivalent with those that are given to the most preferred customer of the vendor. For purposes of this Code, GSA Contracts are a form of Cooperative Purchasing/Piggyback Contracts.</td>
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<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td>“Legacy System”</td>
<td>Means systems including, but not limited to, computer software, computer hardware, and Biomedical Equipment that are integrated into the daily operations of one or more of Broward Health’s Departments, are considered strategic in nature, or are unique to the producer, manufacturer, distributor, and/or provider.</td>
</tr>
<tr>
<td>“Legal Counsel”</td>
<td>Means the General Counsel in charge of Broward Health’s General Counsel’s office, other legal counsel of Broward Health’s General Counsel’s Office of Broward Health, or other legal counsel reporting to or retained by Broward Health’s General Counsel’s Office.</td>
</tr>
<tr>
<td>“Line-Item Budget” or “Line-Item Budgeted”</td>
<td>Means a budget for the current fiscal year that was sorted by line-item categories presented separately in the budget and approved by the Board. Such line items must be separated into categories and subcategories specific enough to identify the services to be rendered or goods to be Procured to be considered Line-Item Budgeted.</td>
</tr>
<tr>
<td>“Non-Professional Services”</td>
<td>Means services that do not require professional licensure or professional expertise.</td>
</tr>
<tr>
<td>“Person”</td>
<td>Means any business, individual, union, committee, club, other organization, or group of individuals.</td>
</tr>
<tr>
<td>“Procurement” or “Procuring” or “Procurement Procedures”</td>
<td>Means the buying, purchasing, renting, leasing, or otherwise acquiring of any supplies, commodities, products, equipment, or services, and all functions that pertain thereto, including the description of requirements, selection, and solicitation of sources and award of Contracts.</td>
</tr>
<tr>
<td>“Procurement Policy” or “Procurement Policies”</td>
<td>Means all of the Board’s Procurement policies and procedures referenced in the Procurement Policy Table, PC-XXX-XXX within Broward Health’s electronic policy database.</td>
</tr>
<tr>
<td>“Procurement Policy Table”</td>
<td>Means the Broward Health Policy containing the list and incorporation of all Procurement Policies applicable to this Code.</td>
</tr>
<tr>
<td>“Professional Services” and “Consulting Services”</td>
<td>Means non-Construction related services that require professional licensure or professional expertise.</td>
</tr>
<tr>
<td>“Purchase Order”</td>
<td>Means a purchaser’s document to formalize a purchase transaction with a vendor conveying acceptance of a vendor’s Proposal or Bid. The Purchase Order should contain statements as to quantity, description, and price of the supplies or services ordered, and applicable terms as to payment, discounts, date(s) of performance, transportation, and other factors or suitable references pertinent to the purchase and its execution by the vendor.</td>
</tr>
<tr>
<td>“Qualified Contractor”</td>
<td>Means an entity or person who: (1) has evidenced current qualifications to do business in the State of Florida; (2) possesses appropriate licensure; (3) maintains liability insurance in an amount determined to be adequate by Broward Health’s Risk Management Department; and (4) is registered in VRS.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>“Request for Information”</td>
<td>Means a request by Broward Health for specific information from a group of suppliers or the general public. An RFI does not commit Broward Health to a purchase and is not a method of Procurement of goods or services by Broward Health. An RFI usually requests suppliers to provide qualifications, products, or services regarding interest in the general areas of the information requested. The information gathered may be used to assist in developing an RFQ or RFP or to simply validate the availability or interest level of suppliers responding to the specific RFI request.</td>
</tr>
<tr>
<td>“Request for Proposal”</td>
<td>Means a solicitation by Broward Health for Proposals and includes all documents, whether attached or incorporated by reference, utilized for soliciting Proposals.</td>
</tr>
<tr>
<td>“Request for Quote”</td>
<td>Means a solicitation by Broward Health for Bids, and includes all documents, whether attached or incorporated by reference, utilized for soliciting Bids.</td>
</tr>
<tr>
<td>“Responsible Bidder” or “Offeror”</td>
<td>Means a Bidder or Offeror who, as determined by Broward Health, has the capability in all respects to perform fully the Contract requirements, and the integrity and reliability which will assure good faith performance.</td>
</tr>
<tr>
<td>“Responsive Bidder”</td>
<td>Means a Bidder or Offeror who, as determined by Broward Health, has submitted a Bid which conforms in all material respects to a solicitation.</td>
</tr>
<tr>
<td>“Selection/Evaluation Committee”</td>
<td>Means a group of persons appointed by the Chief Procurement Officer or designee to evaluate Proposals in competitive Procurement processes by Broward Health.</td>
</tr>
<tr>
<td>“Senior Management”</td>
<td>Means Broward Health’s President/CEO and certain other Executive Vice Presidents and Senior Vice Presidents overseeing North Broward Hospital District’s operations.</td>
</tr>
<tr>
<td>“Sole Source”</td>
<td>Means the only vendor or the only reasonable vendor capable of providing a service or commodity.</td>
</tr>
<tr>
<td>“Solicitation”</td>
<td>Means a Request for Proposals or a Request for Quote.</td>
</tr>
<tr>
<td>“Spending Threshold”</td>
<td>Means the threshold amount referenced within the Procurement Policy Table which permits authorized signatories to execute Contracts and requisitions without obtaining Board approval.</td>
</tr>
<tr>
<td>“Standardization”</td>
<td>Means the use (standardization) of the same, similar, or compatible products or services providing consistency throughout Broward Health thereby reducing inventory of product, maximizing cost savings resulting in greater cost efficiencies, including, but not limited to, price, training, maintenance of equipment, etc.</td>
</tr>
<tr>
<td>“Supply Chain Services”</td>
<td>Means the entire Procurement Department and all of its individual divisions including, but not limited to, Purchasing, Sourcing, Materials Management, Materials Management, IT Systems, Bids, and Value Analysis.</td>
</tr>
</tbody>
</table>
“Threshold Category” Means the specific Threshold Category referenced within the Procurement Policy Table

“Vendor” or “Supplier” Means any person or entity, other than a Broward Health employee, that is doing business with or providing a service or product to Broward Health, or that otherwise seeks to do so.

“Vendor Registration System” Means a Broward Health system where vendors and prospective vendors are required to register as a condition to providing goods or services to Broward Health.

B. Acronyms

To the extent used in this Code, the acronyms below refer to the following:

<table>
<thead>
<tr>
<th>TERM</th>
<th>NAME/TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>CEO</td>
<td>Chief Executive Officer of Broward Health</td>
</tr>
<tr>
<td>CFO</td>
<td>Chief Financial Officer of Broward Health</td>
</tr>
<tr>
<td>CPO</td>
<td>Chief Procurement Officer</td>
</tr>
<tr>
<td>GA</td>
<td>General Administrative</td>
</tr>
<tr>
<td>GPO</td>
<td>Group Purchasing Organization</td>
</tr>
<tr>
<td>GSA</td>
<td>General Services Administration</td>
</tr>
<tr>
<td>OEM</td>
<td>Original Equipment Manufacturer</td>
</tr>
<tr>
<td>OSD</td>
<td>Office of Supplier Diversity</td>
</tr>
<tr>
<td>PSC</td>
<td>Procurement Steering Committee</td>
</tr>
<tr>
<td>RFI</td>
<td>Request for Information</td>
</tr>
<tr>
<td>RFP</td>
<td>Request for Proposal</td>
</tr>
<tr>
<td>RFQ</td>
<td>Request for Quote</td>
</tr>
<tr>
<td>VRS</td>
<td>Vendor Registration System</td>
</tr>
</tbody>
</table>

III. APPLICATION OF THIS CODE

This Code shall apply to the purchase of goods or services made by Broward Health, irrespective of the source of funds, except as otherwise provided by Applicable Law, the provisions of this Code, or any applicable and related policies. No provision of this Code shall be construed as conflicting with or exceeding Applicable Law. In the event of a conflict between this Code and Applicable Law, Applicable Law shall govern and control as if fully set forth herein. In the event of a conflict between this Code and any applicable and related Procurement Policies or other policies, the Procurement Policy or other policy or policies shall govern and control unless otherwise specifically provided in this Code or prohibited under Applicable Law.

If any one or more of the provisions of this Code, 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 this Code and all other applications of any provision shall not be affected thereby. The headings contained in this Code are for
reference purposes only and shall not affect in any way the meaning or interpretation of this Code.

IV. EXCLUSIONS

This Code does not apply to Procurement by Broward Health of the following:

1. Design and construction services, selection of construction contractors and professional design services providers as related to construction;
2. Real estate initiatives;
3. Professional Services and Consulting Services (non-construction);
4. Finance-related services;
5. Accounting or audit services;
6. Travel and entertainment-related services;
7. Marketing services;
8. Purchasing and Procurement of Federal Awards;
9. Physician services;
10. Legal services;
11. Lobbyist services;
12. Employment contracts and employment matters generally;
13. Purchases with Broward Health Procurement Cards;
14. Pharmaceuticals and products specific to the Regional Pharmacy Departments;
15. Products specific to the Nutritional Services Department.

V. OTHER POLICIES RELEVANT TO PROCUREMENT

Notwithstanding any specific exclusions to this Code, the Board has established several policies and procedures complementary to this Code that pertain to the Procurement of supplies, materials, and services to ensure an open, transparent, and fair Procurement process. To that end, any and all Procurement Policies, as defined above, are hereby incorporated by reference as if fully set forth herein. All such Procurement Policies are Board policies and may only be modified upon Board approval and any such modifications of these Procurement Policies absent Board approval are void ab initio.

Broward Health’s officers, employees, agents, and personnel are responsible for reviewing and complying with all applicable Procurement Policies and for raising any issues of applicability or interpretation with the CPO as appropriate. In the event of a conflict between this Code and any Procurement Policy, the Procurement Policy shall control, unless otherwise explicitly stated in the Procurement Policy or this Code.

Supply Chain Services may establish a Standard Operating Procedure (the “SOP”) that establishes further procedures pertaining to the Procurement of goods and services whether covered under this Code or excluded from this Code; provided, however, in no event may the SOP contain provisions that conflict with this Code or any Procurement Policies. Broward Health’s officers, employees, agents, and personnel, in addition to reviewing and complying with this Code and any Procurement Policies, are also responsible for reviewing
and complying with the SOP. In the event of a conflict between the SOP, this Code, or any Procurement Policy, this Code and such Procurement Policy shall control.

VI. CODE OF ETHICS AND PROFESSIONAL CONDUCT

Broward Health and its officers, employees, and personnel, as well as persons or entities who offer to or do business or provide services at or on behalf of Broward Health, must at all times comply with Applicable Law and perform their responsibility in an ethical and proper manner, consistent with the Code of Conduct.

For questions or concerns related to a compliance issue under the Code of Conduct or Broward Health’s Compliance and Ethics Program, please contact the Compliance Department at 954-473-7500 or contact the Compliance Hotline at 1-888-511-7370.

VII. PROCUREMENT ORGANIZATION AND AUTHORITIES

A. Chief Procurement Officer

The President/CEO shall appoint a CPO for Broward Health, which role may be served by a current employee of Broward Health. The CPO shall perform the duties of the principal public purchasing official for Broward Health and shall be responsible for the Procurement of goods, services, and materials in accordance with this Code. Except as otherwise provided in this Code, the CPO shall be responsible for:

1. Interpreting the provisions of this Code;
2. Procuring or supervising the Procurement of all goods, materials, and services needed by Broward Health in accordance with this Code;
3. Soliciting and advertising Bids and Proposals for public improvements, goods, materials and services;
4. Establishing and maintaining programs for the inspection, testing, and acceptance of goods and services; and
5. Ensuring compliance with this Code by reviewing and monitoring Procurements conducted by any person to whom the CPO has delegated authority under this Code.

The CPO may delegate in writing the authority assigned or delegated by this Code to designees within Broward Health. All Procurement transactions and commitments to vendors must be performed by the CPO or such designees.

B. Procurement Steering Committee (PSC)

PSC performs pre-purchase analysis when (a) requests for Procurements of Contracts exceed Threshold Category 3, or (b) in the event of multiple Contracts for one single Project, requests whereby the aggregate cost of the Contracts for a single Project exceeds Threshold Category 4. For the purposes of this Section, a “Project” shall be defined as a large or major undertaking, especially one involving considerable money, personnel,
and/or equipment (e.g., construction, renovations, improvements to real or personal property, etc.).

PSC’s pre-purchase analysis includes, but is not limited to, focusing on and ensuring that Broward Health employees and departments are properly adhering to this Code and its Formal Bid requirements, and compliance with maximum diverse vendor participation as assigned by the OSD and approved by PSC.

1. Committee Membership

PSC’s membership is as follows:

<table>
<thead>
<tr>
<th>Chairperson:</th>
<th>CPO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ex Officio:</td>
<td>Internal Audit representative</td>
</tr>
<tr>
<td>Membership:</td>
<td>Procurement/Sourcing representative</td>
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<tr>
<td></td>
<td>Contracts Administration representative</td>
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<tr>
<td></td>
<td>Director, Supply Chain Services</td>
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<tr>
<td></td>
<td>Value Analysis representative</td>
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<tr>
<td></td>
<td>Vendor Relations/Bids representative</td>
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<td></td>
<td>OSD representative</td>
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<tr>
<td></td>
<td>Clinical/Biomedical Engineering representative</td>
</tr>
<tr>
<td></td>
<td>Design &amp; Construction representative</td>
</tr>
<tr>
<td></td>
<td>CFO or designee</td>
</tr>
<tr>
<td></td>
<td>CIO or designee</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Non-Membership</th>
<th>Regular Invitees:</th>
</tr>
</thead>
<tbody>
<tr>
<td>These individuals receive meeting invitations, meeting agendas, and minutes of the PSC, but are not eligible to vote or participate in the PSC’s deliberations:</td>
<td></td>
</tr>
<tr>
<td>Supply Chain Managers</td>
<td></td>
</tr>
<tr>
<td>Regional CEOs</td>
<td></td>
</tr>
<tr>
<td>Regional CFOs</td>
<td></td>
</tr>
<tr>
<td>Regional COOs</td>
<td></td>
</tr>
</tbody>
</table>

2. PSC Committee Meetings

PSC’s committee meetings shall be conducted as follows:

a. Meetings are scheduled on a monthly basis unless otherwise rescheduled due to extenuating circumstances. Special meetings may be called by the CPO.

b. Pre-meeting documents (i.e., agendas, exhibits and prior month’s minutes) should be distributed via e-mail prior to the scheduled meeting.

c. A quorum for any meeting is fifty percent (50%) of PSC’s members. A majority vote of the members in attendance at a meeting at which there is a quorum shall constitute an affirmative vote and recommendation of PSC to the CPO regarding the issues at hand. Members may attend meetings via telephone or
videoconference and such attendance shall be counted towards the quorum and vote. Notwithstanding, in no event shall a PSC committee meeting be held unless the CPO or CFO are present; provided, however, the CFO can delegate temporary Chairperson authority in the CPO’s and CFO’s absence and, in such an event, a PSC committee meeting may be held.

d. The CPO shall be the ultimate authority regarding the decisions of the PSC. In making decisions and/or determinations, the CPO shall consider the recommendations and consensus of PSC’s members, but the CPO’s decision regarding a particular issue shall be the final decision unless otherwise overruled in whole or part by the CFO. In the event the CPO makes a final decision adverse to the consensus of PSC’s members, the CPO shall indicate his or her reasoning on the record.

e. Because the CPO is the ultimate authority regarding the decisions of PSC, in the event PSC cannot meet—because of an inability to establish a quorum or otherwise—or the CPO decides it is within Broward Health’s best interests, the CPO may make any decisions regarding Procurement methods and/or diverse vendor enhancements in the absence of a gathering of the PSC and without any input from the PSC. To the extent the CPO makes any such decisions in the absence of input from PSC, the CPO must properly document such decisions within the applicable arrangement in Broward Health’s electronic contracting database.

f. The CFO may, in his or her sole discretion, overrule in whole or part any final decision of the CPO regarding Procurements and/or diverse vendor enhancements. The CFO may also make any decisions regarding Procurement methods and/or diverse vendor enhancements in the absence of a gathering of the PSC and without any input from the PSC. To the extent the CFO makes any such decisions in the absence of input from PSC, the CFO must properly document such decisions within the applicable arrangement in Broward Health’s electronic contracting database.

g. In the absence of the CPO, the CFO may temporarily delegate the authority of Chairperson of the PSC to another responsible individual.

h. Minutes shall be taken for all PSC meetings. Following the preparation of draft minutes, such draft minutes shall be distributed to PSC’s committee members via e-mail. All minutes shall be reflective of recommendations of PSC, decisions of the CPO, actions affected and approved, and will include any post-PSC action items such as Supplier Diversity Enhancements or any pending portions of the regular monthly meeting. All minutes shall be formerly approved at the following PSC meeting.

i. A master set of all agendas, minutes, exhibits, and supporting documentation shall be retained in Supply Chain Services as
required under Florida law and its record retention schedules, as amended from time to time.

3. PSC’s and CPO’s Role in Procurement

PSC shall be tasked with reviewing and recommending, and the CPO for deciding and approving, proper Procurement methods (collectively, “PSC’s Roles”). The following list contains PSC’s Roles:

a. *Formal Bids* – Reviewing and approving all requests for Formal Bids to Procure any goods or services exceeding Threshold Category 3 except those purchases made in Emergency Situations (as defined below);

b. *Bid Waivers* – Reviewing and approving all Bid Waivers except those purchases made in Emergency Situations (as defined below);

c. *Vendor Performance Issues* – Reviewing and recommending actions related to vendor performance issues; and

d. *Supplier Diversity Vendor Opportunities* - Reviewing and approving Supplier Diversity Enhancements made by the OSD.

VIII. BID WAIVERS

A Contract may be awarded without following this Code’s Formal Bid Process when a Bid Waiver applies in accordance with this Section or as otherwise required by Applicable Law.

The Board waives this Code’s Formal Bid Process for the following types of Procurements even when the value of such Procurements exceeds Threshold Category 3. Notwithstanding the foregoing, with the exception of Procurements obtained through a GPO Contract, GSA Contract, Cooperative Purchasing/Piggyback Contract, or purchases made in an Emergency Situation (as defined below), the following Bid Waivers do not apply to Procurements of supplies, equipment, materials, or construction projects if the value of such Procurements, exceed one-and-one-half (1.5) mills of the total annual District revenues for the previous fiscal year. In such an event, such Procurements shall follow the Formal Bid Process.

A. Group Purchasing Organizations & General Services Administration

The Board recognizes, in accordance with its Charter, that purchases made through a GPO and/or GSA Contract are best practices in hospital Procurements nationwide with associated efficiencies, savings, and speed. Purchasing completed utilizing GPO or GSA Contracts are exempt from the competitive acquisition or Procurement process; however, should the purchase be a GPO multisource contract, Supply Chain Services may obtain multiple GPO and/or GSA Contract quotes.

B. Cooperative Purchasing/Piggyback Contracts
When it is in the best interest of Broward Health, and consistent with Applicable Law, Broward Health may Procure goods or services through Cooperative Purchasing/Piggyback Contracts whereby the Formal Bid Process or another process of competitive solicitations were consistent with the provisions of this Code and Procured by another government or public entity including, but not limited to, any state, regional, county, local, or municipal government entity of Florida or another state, whether executive, judicial, or legislative; any department, division, bureau, commission, authority, board, local government, special district, or political subdivision of Florida or another state; any public school, community college, or state university of Florida or another State; any and all federal or tribal agencies or entities, whether executive, judicial, or legislative; any public agencies or entities of any state, federal, or tribal governments; any buying cooperatives; and any other units of Florida government, other state governments, tribal governments, or the federal government. Notwithstanding the foregoing, Broward Health may, in its sole and absolute discretion, negotiate the terms and pricing of any Cooperative Purchasing/Piggyback Contract provided such negotiation is in accordance with Applicable Law.

PSC, consistent with its procedures as set forth in this Code, shall review and approve all requests for procurement by virtue of a Cooperative Purchasing/Piggyback Contract status. All items presented to PSC as a Cooperative Purchasing/Piggyback Contract must be validated and approved before further action may be taken.

C. Legacy Systems

All determinations regarding the status of systems as Legacy Systems and all requests for the support, maintenance, and expansion of Legacy Systems including, but not limited to, computer software, computer hardware, and Biomedical Equipment shall be decided, reviewed, and approved by PSC. The criteria used to identify and determine whether a system is deemed a Legacy System includes, but is not limited to, the following:

1. Systems that are fully integrated into the daily operations of one or more departments of Broward Health;
2. Systems that are strategic in nature; and/or
3. Systems that are unique to the producer, manufacturer, distributor, and/or provider.

Any unbudgeted Legacy System expenditures exceeding Threshold Category 4 in a single fiscal year require the Board’s determination that a system is a Legacy System and the Board’s approval to continue the maintenance, support, expansion and/or funding of a Legacy System. Notwithstanding the foregoing, a Legacy System that is Line-Item Budgeted indicates the Board’s determination that a system is indeed a Legacy System and includes a commitment to the continued maintenance and expansion of these Legacy Systems. The Board’s approval of a Line-Item Budget with Legacy Systems thereby empowers the PSC to waive/exempt Legacy Systems exceeding Threshold Category 4 from the Formal Bid Process requirements without further Board approval even in the event the proposed Contract will extend beyond a single fiscal year; provided, however, in no
event shall a Budgeted Legacy System Contract be entered into, renewed, or extended beyond a three (3) year term without the Board’s approval. Notwithstanding anything in this Code to the contrary, Legacy System expenditures requiring Board approval are not approved when Budgeted unless the line item specifically designates the Legacy System or Contract. The CPO, or his or her designee, is responsible for determining whether a line item in a budget is specific enough to constitute Board approval of a Legacy System.

Any expenditures or Contracts deemed Legacy Systems by PSC or the Board shall maintain the status of a Legacy System for a period of five (5) years from the date the status of the Legacy System was decided. All Legacy System determinations must be reviewed at least every five (5) years by PSC or the Board, as applicable, for a previously deemed Legacy System to continue in its status as a Legacy System.

D. Sole Source

All determinations regarding the status of Sole Source shall be decided, reviewed, and approved by PSC. The criteria used to identify and determine whether Sole Source status is appropriate in a particular Procurement includes, but is not limited to, the following:

1. Equipment or services which are deemed unique and have a single producer, manufacturer, distributor, and/or provider;
2. Software and hardware upgrades and maintenance agreements and Contracts for such software and hardware as provided by the OEM;
3. Equipment needed to add to or expand an existing system and maintenance agreements and Contracts for such equipment as provided by the OEM; and/or
4. Equipment, supplies, or services needed where using an alternative product jeopardizes a warranty, maintenance agreement, or Contract, or creates any user, patient, and/or financial risks. This includes consideration of lead times and geographical availability to avoid these risks.

All unbudgeted Sole Source expenditures exceeding Threshold Category 4 in a single fiscal year require the Board’s approval and a determination that the goods, equipment, and/or services are a Sole Source. Notwithstanding the foregoing, a Sole Source expenditure that is Line-Item Budgeted indicates the Board’s determination that the goods, equipment, and/or services are indeed a Sole Source and the Board’s approval to proceed with a Procurement exceeding Threshold Category 4 in a single fiscal year without further Board approval even if the proposed Contract will extend beyond a single fiscal year; provided, however, in no event shall a Budgeted Sole Source Contract be entered into, renewed, or extended beyond a three (3) year term without the Board’s approval. Notwithstanding anything in this Code to the contrary, Sole Source expenditures or Contracts requiring Board approval are not approved when Budgeted unless the line item specifically designates the Sole Source expenditures or Contract. The CPO, or his or her designee, is responsible for determining whether a line item in a budget is specific enough to constitute Board approval of a Sole Source expenditure or Contract.
Any expenditures or Contracts deemed a Sole Source by PSC or the Board shall maintain the status of a Sole Source for a period of five (5) years from the date the status of the Sole Source was decided. All Sole Source determinations must be reviewed at least every five (5) years by PSC or the Board, as applicable, for a previously deemed Sole Source to continue in its status as a Sole Source.

E. Standardization

All requests for Bid Waivers by virtue of a Standardization status shall be reviewed, determined, and approved by the PSC. The criteria used to determine a Standardization status includes, but is not limited to, the following:

1. Equipment or services which are deemed appropriate to standardize at two (2) or more facilities due to technology or to promote cost savings and cost efficiencies including consistency of negotiated prices, services, training, or maintenance for equipment;
2. Reduction of inventory requirements (one (1) item is stocked in place of two (2) or more items);
3. Reduction in purchase price because the volume of purchases for two (2) or more previous items will be added together to provide additional leverage in negotiating price concessions;
4. Savings in training time when the same products are used throughout Broward Health or within individual facilities or hospitals;
5. Negotiating long-term Contracts for the purchase of multiple units over a period of multiple years which can be undertaken by standardizing one (1) type of equipment and such a purchase can provide significant savings in the cost of a few units that might be purchased within a single year; and/or
6. Supplies required to operate the equipment and equipment repair parts will be consistent because multiple units are in use throughout Broward Health, such consistency reduces the inventories necessary to support the equipment, and higher-volume purchases can be used to negotiate lower purchase prices.

All unbudgeted requests for Standardization Bid Waivers exceeding Threshold Category 4 within a single fiscal year require the Board’s approval unless the selection of the equipment, goods, or services were initially made through the Formal Bid process. Notwithstanding, a Standardization expenditure or Contract that is Line-Item Budgeted indicates the Board’s approval to proceed with a Procurement exceeding Threshold Category 4 in a single fiscal year without further Board approval even if the proposed Standardization expenditure or Contract will extend beyond a single fiscal year; provided, however, in no event shall a Budgeted Standardization Contract be entered into, renewed, or extended beyond a three (3) year term without the Board’s approval. Notwithstanding anything in this Code to the contrary, Standardization expenditures requiring Board approval are not approved when Budgeted unless the line item specifically designates the
Standardization expenditures or Contract. The CPO, or his or her designee, is responsible for determining whether a line item in a budget is specific enough to constitute Board approval of a Standardization expenditure or Contract.

Any expenditures or Contracts deemed a Standardization Contract by PSC or the Board shall maintain the status of a Standardization Contract for a period of five (5) years from the date the status of the Standardization Contract was decided. All Standardization Contract determinations must be reviewed at least every five (5) years by PSC or the Board, as applicable, for a previously deemed Standardization Contract to continue in its status as a Standardization Contract.

IX. EMERGENCY COMMITMENTS AND INTERNAL APPROVALS

Broward Health’s hospitals, medical centers, and non-acute health care facilities provide patient care twenty-four (24) hours per day and three hundred sixty-five (365) days per year. The Board, in accordance with the Charter, is permitted via resolution to identify emergency or unusual conditions, the existence of which compliance with this Code and the Formal Bid Process would be detrimental to the District. Accordingly, the Board has determined and makes a finding that in the event that following this Code may result in an actual or perceived threat to: (a) Broward Health’s compliance with regulatory requirements; (b) the life, health, safety, or welfare of patients, employees, or the public; or (c) the operations of Broward Health facilities (an “Emergency Situation”), such an Emergency Situation constitutes emergency or unusual conditions to permit deviations from this Code and the Formal Bid Process. Accordingly, in the event such an Emergency Situation exists, Broward Health may, at its sole discretion and without following the Formal Bid Process or the provisions of this Code, acquire goods, supplies, and/or services through an emergency purchase (“Emergency Purchase”) by adhering to the following procedures:

1. To the extent possible, before engaging in any Emergency Purchase, appropriate authorization must be obtained from a department head;
2. To the extent possible, prior confirmation of funding and approval by the CFO, or his or her designee, shall accompany all Emergency Purchases. If confirmation of funding and approval cannot be obtained in advance, such confirmation shall be obtained as soon as possible following the Emergency Purchase;
3. An Emergency Purchase shall be communicated to the CPO, or his or her designee, by email the same day or otherwise as soon as such communication is possible;
4. The requesting department must complete an emergency procurement authorization request, as approved by Supply Chain Services, with a justification for the Emergency Purchase. The completed emergency procurement authorization request with its accompanying justification must be forwarded to the CPO, or his or her designee, prior to the Emergency Purchase or otherwise as soon as such communication is possible following the Emergency Purchase.
The CPO, or his or her designee, will verify and forward the completed emergency procurement authorization request for approval to a person with a sufficient limit of requisition authority. Once signed by such person, a copy of the approved emergency procurement authorization form shall be retained by Supply Chain Services and the original emergency procurement authorization request shall be returned to the requesting department; and

The requesting department shall enter a requisition and forward the requisition along with the emergency procurement authorization request and invoice to Accounts Payable for processing, if applicable.

Any Emergency Purchase shall be limited only to those goods, supplies, or services necessary to meet the Emergency Situation. All emergency purchases exceeding the CEO’s Spending Threshold shall be submitted to the Board for ratification as soon as possible following the Emergency Purchase.

X. ACQUISITION PROCEDURES

The CPO shall select the method of Procurement based on the application of the guidelines set forth in this Code. Unless a Bid Waiver applies, an Emergency Situation exists, or unless otherwise authorized by this Code, the Charter, or Applicable Law, all Broward Health Contracts subject to this Code shall be Procured in accordance with the methods outlined below as applicable to each of the following categories:

1. Micro Purchases or Commitments Up To and Including Threshold Category 1;
2. Small Purchases or Commitments Exceeding Threshold Category 1 and Up To and Including Threshold Category 2;
3. Medium Purchases or Commitments Exceeding Threshold Category 2 and Up To and Including Threshold Category 3; and
4. Large/Formal Purchases or Commitments Exceeding Threshold Category 3.

All transactions are subject to be reviewed and audited periodically by Supply Chain Services to ensure adherence to this Code. DEPARTMENTS SHALL NOT BREAK UP REQUESTS WITH THE INTENT TO AVOID REQUIRED APPROVALS.

A. Micro Purchases or Commitments Up To and Including Threshold Category 1

For a Procurement equal to or less than Threshold Category 1 (“Micro Purchase”), only one (1) quotation is required. The quotation may be written or verbal and shall be recorded on the purchase requisition. However, to the extent there is time and multiple available suppliers/vendors, Broward Health employees are encouraged to obtain information from multiple vendors/sources to maximize savings. Broward Health employees must still conduct business in a manner that is fair and reasonable regardless if such Procurement is a Micro Purchase.
The Procurement of goods and services constituting a Micro Purchase may be made without any Formal Bid or other competition because the benefits from following such procedures typically will not outweigh the costs. Notwithstanding, Broward Health employees should still conduct reasonable checks, such as a telephone or written quote request, to ensure pricing is fair and reasonable.

A written record shall be maintained in the Procurement file for each Micro Purchase and shall contain the price information obtained to support the determination of reasonableness and any other pertinent information regarding a particular Micro Purchase. Supply Chain Services may, in its sole and absolute discretion, solicit written Proposals or quotes via VRS.

B. Small Purchases or Commitments Exceeding Threshold Category 1 and Up To and Including Threshold Category 2

With respect to a Procurement exceeding Threshold Category 1 and up to and including Threshold Category 2 (“Small Purchase”), to the extent sufficient vendors are reasonably available, quotations or Proposals must be requested from a minimum of two (2) different vendors unless the transaction has an approved Bid Waiver, there is an Emergency Situation, or the transaction is otherwise exempt from this Code. Written quotes and Proposals may be in electronic form.

The Procurement of goods and services constituting a Small Purchase may be made based on quotations or Proposals from only two (2) vendors/suppliers because the benefits from a Formal Bid or conducting competition from a broader pool of vendors typically will not outweigh the time and costs.

A written record shall be maintained in the Procurement file for each Small Purchase and shall contain the price information obtained to support the determination of reasonableness of a particular Small Purchase and any other pertinent information regarding a particular Small Purchase. In cases where the selected vendor is not the apparent lowest-cost vendor, an explanation of the factor(s) considered and relied upon to select such vendor shall be provided. Supply Chain Services may, in its sole and absolute discretion, solicit written Proposals or quotes via VRS.

C. Medium Purchases or Commitments Exceeding Threshold Category 2 and Up To and Including Threshold Category 3

With respect to a Procurement exceeding Threshold Category 2 and up to and including Threshold Category 3 (“Medium Purchase”), to the extent sufficient vendors are reasonably available, quotations or Proposals must be requested from a minimum of three (3) different vendors unless the transaction has an approved Bid Waiver, there is an Emergency Situation, or the transaction is otherwise exempt from this Code. Written quotes and Proposals may be in electronic form.

The Procurement of goods and services constituting a Medium Purchase may be made based on quotations or Proposals from three (3) vendors/suppliers because the benefits
from a Formal Bid or conducting competition typically will not outweigh the time and costs.

A written record shall be maintained in the Procurement file for each Medium Purchase and shall contain the price information obtained to support the determination of reasonableness of a particular Medium Purchase and any other pertinent information regarding a particular Medium Purchase. In cases where the selected vendor is not the apparent lowest-cost vendor, an explanation of the factor(s) considered and relied upon to select such vendor shall be provided. Supply Chain Services may, in its sole and absolute discretion, solicit written Proposals or quotes via VRS.

D. Large/Formal Purchases or Commitments Exceeding Threshold Category 3

All purchases and Contracts exceeding Threshold Category 3 must be conducted pursuant to the advertisement requirements set forth below unless a Bid Waiver applies, there is an Emergency Situation, or such Procurement is otherwise exempt from this Code.

The CPO may authorize the release of an RFI to gather information to assist in determining acquisition methodology in the best interests of Broward Health. Since an RFI does not commit Broward Health to any business endeavor, it does not need to follow the advertisement requirements below.

1. Cancellation of Solicitation, Rejection of Bids/Proposals and Waiver of Minor Irregularities

Any RFQ, RFP, RFI or other solicitation may be canceled, or any or all Bids or Proposals may be rejected, in whole or in part, when it is in the best interests of Broward Health. Broward Health further reserves the right to waive any minor irregularity, technicality or omission in any Bid or Proposal if Broward Health determines, in its sole and absolute discretion, that doing so will serve Broward Health’s best interests.

2. Advertisement Requirements

The following advertisement requirements apply to Large/Formal Purchases or Commitments unless otherwise provided in Applicable Law:

(a) Large/Formal Purchases up to and including Threshold Category 5: Where it is anticipated that the total Contract price for the initial term of an awarded Contract to a Bidder will be equal to or less than Threshold Category 5, the Formal Bid Process only requires an online advertisement via a posting on Broward Health’s website, www.browardhealth.org and a physical advertisement via a posting on a “Sunshine Board” located in the lobby of Broward Health’s Corporate Offices (“Advertisement Category 1”). The foregoing Advertisement Category 1 is based only on the anticipated total Contract price of the initial term of the awarded Contract and is not applicable to any renewal options or future or potential renewals or
extensions of such Contracts. Notwithstanding, to the extent the total Contract price for the initial term of an awarded contract comes in at a higher value than was expected and exceeds Advertisement Category 1, the Formal Bid will be considered valid in the absence of a newspaper advertisement provided the total value of the initial term of the awarded contract does not exceed Threshold Category 6 (a “Permitted Increase Over Expected Amount”).

(b) **Large/Formal Purchases over Threshold Category 5:** Except to the extent the total Contract price for the initial term of an awarded Contract is a Permitted Increase Over Expected Amount as defined above, where it is anticipated that the total Contract price for the initial term of an awarded Contract to a Bidder will exceed Threshold Category 5, advertisements during the Formal Bid Process must be made by a publication in a newspaper of general circulation in the North Broward Hospital District (“Advertisement Category 2”). In addition to, but not in lieu of, such publication in a newspaper of general circulation, advertisements of Formal Bids over Threshold Category 5 may also be made by posting at www.browardhealth.org, and/or by posting on a “Sunshine Board” located in the lobby of Broward Health’s Corporate Offices. The foregoing Advertisement Category 2 is based only on the anticipated total Contract price of the initial term of the awarded Contract and is not applicable to any renewal options or future or potential renewals or extensions of such Contracts.

(c) **Construction-Related Contracts:** These Advertisement Requirements are inapplicable to construction-related projects. Such construction-related projects must follow the applicable policy referenced in the Procurement Policy Table.

**XI. SUPPLIER DIVERSITY IN PROCUREMENT**

Broward Health is committed to the participation of diverse vendors in the Procurement of supplies, equipment, services, and Contracts for general business purposes and will adhere to the OSD procedures documented in the Procurement Policy Table.

**XII. SELECTION/EVALUATION COMMITTEES**

Selection/Evaluation Committees shall be utilized for the evaluation of Bids and Proposals in Formal Bid Processes. The determination of the membership of Selection/Evaluation Committees shall follow the following procedures:

1. Recommendations are requested from the project custodian regarding the Selection/Evaluation Committee participants. Those recommendations are provided to CPO for consideration and approval. The CPO may approve or modify the Selection/Evaluation Committee as considered appropriate.
(2) The CPO may appoint, alternate or substitute members to a Selection/Evaluation Committee as the CPO deems necessary. The CPO may also, in his or her sole discretion, permit a Selection/Evaluation Committee to consist of a reduced number of voting members when appointed members are unavailable to serve and the appointment of alternate members would, in CPO’s sole determination, compromise or unreasonably delay the Procurement process.

(3) Supply Chain Services will provide appropriate instructions and training regarding the roles and responsibilities of the Selection/Evaluation Committee. Prior to serving on the Selection/Evaluation Committee, each member shall execute a Conflict of Interest Certification Form.

XIII. CONE OF SILENCE

Broward Health prohibits communication by any potential Vendor, contractor, subcontractor, service provider, Bidder, lobbyist, or consultant to or with any member of Broward Health’s Board or to or with any Broward Health officer, employee, agent, department, or division related to any Broward Health RFQ, RFP, or other competitive solicitation beginning upon the date on which the solicitation is first advertised by Broward Health and continuing until the later of the date of the final award of the competitive solicitation, the date of rejection of all Bids or responses to the competitive solicitation, or the date of final disposition by Broward Health of any protest of the competitive solicitation ("Cone of Silence"). Violation of this Cone of Silence may, at Broward Health’s sole discretion, result in disqualification of the offending vendor from the competitive solicitation, as well as possible suspension or debarment from participating in any future Broward Health Procurements or competitive solicitations. The Cone of Silence shall not apply to: (1) communications to or with the designated point of contact identified in any RFQ, RFP, or other competitive solicitation; (2) presentations by any Bidder or Proposer at duly noticed pre-Bid conferences; or (3) presentations before duly noticed Selection/Evaluation Committee meetings. All RFQs RFPs, and other competitive solicitations shall include provisions describing the requirements and prohibitions of this Cone of Silence.

XIV. CHANGES AND MODIFICATIONS WITHIN 20% OF AGREED PRICE

Pursuant to the Charter, Broward Health may negotiate and agree with a successful Bidder for changes and modifications to the successful Bid provided the total value of changes and modifications do not exceed twenty percent (20%) of the agreed price. To the extent any changes or modifications to the agreed price exceed twenty percent (20%), the Contract shall be void and the Formal Bid Process shall be redone.

XV. OWNER DIRECT PURCHASES (TAX-EXEMPT STATUS)

Rather than reimburse a contractor for the costs of the materials or supplies, which would include sales tax, Broward Health may determine, in its sole and absolute discretion, it is in its best interest to use its tax-exempt status to purchase materials or supplies on its own directly from its own suppliers or from suppliers or subcontractors designated by an awarded
contractor. In such event, Broward Health may issue a Purchase Order for such supplies or materials, pay all associated invoices, and deduct from the awarded contract the cost of the materials and supplies and the amount of sales tax that would have been owed if the contractor had made the purchase or the actual amount stipulated in the contract for such materials or supplies.

XVI. **APPROVAL AND EXECUTION AUTHORITY**

The Board from time to time sets Spending Thresholds and permits Senior Management to execute Contracts and requisitions to purchase services, goods, supplies, materials, and other Procurements. When such Procurements or Contracts are below the Spending Threshold, no Board authorization or approval is required. Any Procurements or Contracts beyond the Spending Threshold require Board authorization or approval. The President/CEO is permitted to set his or her own authorization levels for requisitions when they do not exceed the Spending Threshold. However, only the Board may designate those positions authorized to bind the District to Contracts.

The Board’s approval of a Contract over the Spending Threshold only constitutes approval to enter into a Contract over the Spending Threshold and is not approval of a Bid Waiver or any other provisions of this Code requiring Board approval unless the Board so indicates. To that end, to the extent Broward Health requests Procurements and Contracts over the Spending Threshold that contain Bid Waivers or any other procedures or exemptions of this Code requiring Board approval, Broward Health must request Board approval and the Board must approve all of the foregoing before Broward Health proceeds with the Procurement. If the Board, pursuant to a request to approve all the foregoing, only approves the Procurement over the Spending Threshold, Broward Health may only proceed after following the Formal Bid Process.

A. **Exceptions to the Spending Threshold**

1. **Line-Item Budgets**

The Spending Threshold is inapplicable to Budgeted Contracts or Procurements provided such Contracts or Procurements are Line-Item Budgeted and approved by the Board. Once the Board approves the annual budget, the goods, services, Contracts, and other Procurements requested, as defined in the approved Line-Item Budget category regardless of amount, are approved for acquisition in accordance with Broward Health’s Policies and Procedures without further Board approval. To the extent a category is Line-Item Budgeted, the total amount of expected expenditures within the category—or any combination thereof (whether in one or multiple Contracts) up to the total amount in the Line-Item Budget category—may be Procured without further Board approval regardless of if the compensation amount in the Contract exceeds the Spending Threshold within a single year of the Contract’s effective term. Board-approved Line-Item Budgeted expenditures or Contracts are approved to extend beyond a single fiscal year; provided, however, in no event shall an expenditure or Contract in a Line-Item Budget that exceeds the Spending Threshold be entered into, renewed, or extended beyond a three (3) year term without the Board’s approval. Line-Item Budgeted expenditures are not approval of Bid Waivers unless the line
item specifically designates the system, expenditure, or Contract claiming such Bid Waiver. The CPO, or his or her designee, is responsible for determining whether a line item in a budget is specific enough to constitute a Bid Waiver or an exception to the Spending Threshold.

2. **Pass-Through Funds**

The Spending Threshold is inapplicable to funding obtained from grantors, government entities, or private entities used to fund a program or programs for which such funding was furnished to Broward Health (“Program”) provided such funding is solely pass-through funding and there are no funds (whether received from ad valorem taxes or otherwise) used from Broward Health’s own finances. Accordingly, the use of such pass-through funds and entering into Contracts using pass-through funds which exceed the Spending Threshold do not require Board approval. Notwithstanding, this exception for pass-through funds does not exempt such Procurements from any other procedures of this code including, but not limited to, the Formal Bid Process unless such Procurements are required from a particular Vendor or contractor pursuant to the terms of the Program.

3. **Receipt of Funds**

The Spending Threshold is inapplicable to Broward Health’s receipt of funds regardless of its source. Accordingly, any grants, Contracts, or other methods or means used by Broward Health to receive funding which are over the Spending Threshold do not require Board approval.

**B. Execution of Contracts**

1. **Entering Into or Renewing Contracts**

The Board hereby delegates the authority of executing Contracts and Contract renewals, whether on the same or different terms, to the CEO and the CFO.

2. **Delegation of Signing Authority**

The CEO and/or CFO may, in their absence, delegate the authority to execute Contracts to another employee or officer of Senior Management. Any delegation of signing authority shall be evidenced by a letter from the CEO or CFO, as applicable, delegating the authority to the employee or officer and such letter shall be documented in the Contract’s electronic file within Broward Health’s electronic database. In the event of delegation, the employee or officer delegated the CEO’s or CFO’s signing authority shall have the same power to bind the District as the CEO or CFO and may execute Contracts exceeding the Spending Threshold provided such Contracts were approved by the Board. Any authority delegated by the CEO or CFO shall no longer be effective upon return of the CEO or CFO unless and until the CEO again delegates his or her signing authority pursuant to this Section. Nothing herein shall be construed as preventing the CEO from delegating such authority in his or her absence despite the presence of the CFO nor shall it be construed as preventing the CFO from delegating such authority in his or her absence despite the presence of the CEO.
XVII. **PUBLIC RECORDS AND SUNSHINE LAW**

All Bidders, Offerors, and Vendors are put on notice that Broward Health is subject to Florida’s Public Records Law (Ch. 119, Fla. Stat.) and Florida’s Government in the Sunshine Law (Ch. 286, Fla. Stat.). It is the responsibility of all Bidders, Offerors, and Vendors, consistent with the directions contained within each RFP or RFQ, to protect any trade secrets or proprietary information they submit in response to a Formal Bid. Broward Health is not responsible for protecting any trade secrets or proprietary information. Submission of a response to a Formal Bid constitutes the agreement by Bidders, Offerors, and Vendors to indemnify, defend, and hold Broward Health, its commissioners, officers, employees, and agents harmless from and against any actions pertaining to a public records request due to the Bidder’s, Offeror’s, or Vendor’s assertion of an exemption under Florida law. If a Bidder, Offeror, or Vendor has any questions regarding application of these laws, such questions should be sent to Broward Health’s Public Records Custodian at PublicRecordsRequest@browardhealth.org.

XVIII. **PROTESTS**

Protest provisions enhance the accountability of the Procurement process, but the protest process also must not interfere with the prompt and efficient acquisition of goods and services needed by Broward Health. Broward Health’s goal is to ensure the prompt and fair resolution of vendor protests. The CPO, or his or her designee, shall be the point of contact for all Timely Protests, as defined below, to an RFP or RFQ advertisement and/or award. Upon receipt of a written and Timely Protest in accordance with the timeline and procedures below, the CPO, or his or her designee, shall notify appropriate parties and proceed consistent with the following:

1. Any actual or prospective Bidder, Offeror, or contractor who is an interested party and is aggrieved in connection with a solicitation or award of a Contract over Threshold Category 3 may protest an award by submitting a timely and written protest to the Chief Procurement Officer no later than:
   a. five (5) Business Days after the solicitation or any amendment/addendum to the solicitation is issued if protesting or challenging any of the terms or conditions of the solicitation or addendum, or
   b. five (5) Business Days after the date of Notice of Intent to Award is given by Broward Health if protesting or challenging an award (“Timely Protest”). The Timely Protest must: (1) adequately identify the solicitation or Contract number; (2) set forth a detailed statement of the legal and factual grounds of protest, including copies of relevant documents; (3) provide a statement as to how the protestor is interested and aggrieved; and (4) state the relief requested. THE FAILURE TO TIMELY SUBMIT A WRITTEN PROTEST CONSISTENT WITH THIS SECTION SHALL CONSTITUTE A WAIVER OF ANY AND ALL PROTEST RIGHTS. Protests relating to solicitations or awards below Threshold Category 3 may
be considered, but are not required to be considered by Broward Health and such consideration is within Broward Health’s sole and absolute discretion.

(2) In the event of a Timely Protest, Broward Health may decide, within its sole and absolute discretion, not to proceed further with the solicitation or with the award of the Contract until a final decision on the protest is issued by Broward Health.

(3) All protests shall follow the procedures in this Section and all appeals must be exhausted before the commencement of an action in court concerning the controversy. The CPO, or his or her designee, shall have the authority, in consultation with Legal Counsel, to settle and resolve a protest or appeal of an aggrieved actual or prospective Bidder, Offeror, or contractor concerning the solicitation or award of a Contract prior to the commencement of an action in court or another venue of competent jurisdiction concerning the controversy. In the event an action is filed in court or another venue of competent jurisdiction, any resolution or settlement may only be approved by the Board. Broward Health may allow an awardee to participate in a protest as an intervenor if deemed advantageous to the resolution of the matter by Broward Health in its sole discretion.

(4) If the protest is not resolved by mutual agreement, the CPO, or his or her designee, will endeavor to issue a written decision on the protest within sixty (60) days after receipt of the protestor’s written and Timely Protest (“Written Decision”). The Written Decision shall state the reasons for the action taken and advise the protestor of its right to appeal the decision in accordance with this Code. The Written Decision on the protest shall be provided to the protesting vendor and, if relevant, the intended awardee by email and/or by certified mail, return receipt requested. Such delivery through the foregoing methods shall be deemed sufficient delivery of notice of the Written Decision and, in the event of delivery by email, such notice of the Written Decision shall be deemed received by the protesting vendor upon sending the email.

(5) Aggrieved parties to the original protest may appeal the CPO or his or her designee’s decision by filing a written appeal with the CFO within five (5) Business Days of the date of receipt of the Written Decision (“Written and Timely Appeal”). The Written and Timely Appeal must: (1) adequately identify the solicitation or Contract number; (2) attach a copy of the decision being appealed as rendered by the CPO, or his or her designee; (3) set forth a detailed statement of the legal and factual grounds for the appeal; and (4) state the relief requested. THE FAILURE TO SUBMIT A WRITTEN AND TIMELY APPEAL SHALL CONSTITUTE WAIVER OF ALL APPEAL RIGHTS AND THE CPO’S DECISION SHALL BE CONSIDERED FINAL.

(6) To the extent a Written and Timely Appeal is filed, the CFO will endeavor to render a written decision on the Written and Timely Appeal within ninety (90) days after receipt of the notice of the Written and Timely Appeal. The CFO’s written decision shall state the reasons for the decision, actions taken, if any, and shall be the final order on the protest. The written decision...
shall be provided to the appealing party by email and/or by certified mail, return receipt requested. The institution and filing of an appeal, and obtaining a decision from the CFO thereon, is an administrative remedy to be satisfied as a condition precedent to the institution and filing of any civil action against Broward Health concerning the action or intended action by Broward Health.

(7) The burden in any protest or appeal under this Section is on the party filing the protest or appeal to establish that the intended action by Broward Health is materially contrary to Broward Health’s governing statutes, its Charter, this Code, Broward Health’s Policies and Procedures, or the solicitation’s specifications. The standard of proof for such proceedings shall be whether the intended action by Broward Health would be clearly arbitrary or capricious.
Broward Health
Procurement Policies
I. Purpose

This Procurement Policy Table establishes and contains the listing of all established Board Procurement policies with the procedures to be used when acquiring certain supplies, equipment, materials, and services (“Procurement Policies”) that are subject to or exempt from the Master Procurement Code, GA-001-150 (the “Code”).

II. Definitions

The words and acronyms defined in this Policy shall have the meanings set forth in the Code regardless of whether they are capitalized, unless:

(a) The context in which they are used clearly requires a different meaning; or

(b) A different definition is prescribed for a particular section of this Policy.

Words not defined shall be given their common and ordinary meaning unless the context in which they are used requires otherwise.

III. Policy

Notwithstanding any specific exclusions to the Code, the Board has established several policies and procedures complementary to the Code that pertain to the Procurement of supplies, materials, and services to ensure an open, transparent, and fair Procurement process. To that end, any and all Procurement Policies referenced in this Policy are hereby incorporated by reference as if full set forth herein and are also incorporated by reference into the Code as if fully set forth therein. To the extent the Code or any Procurement Policy references this Procurement Policy Table, such reference includes a reference to the applicable Procurement Policy listed in the Procurement Policy Table below. All such Procurement Policies are Board policies and may only be modified upon Board approval and any such modifications of these Procurement Policies absent Board approval are void ab initio.
Broward Health’s officers, employees, agents, and personnel are responsible for reviewing and complying with all applicable Procurement Policies and for raising any issues of applicability or interpretation with the CPO as appropriate. In the event of a conflict between the Code and any Procurement Policy referenced below, the Procurement Policy shall control, unless otherwise explicitly stated in the Procurement Policy or the Code.

IV. Procurement Policy Table

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V. Related Policies

GA-001-150, Master Procurement Code

VI. Interpretation and Administration

Administration and Interpretation of this policy is the responsibility of the Chief Procurement Officer.
I. Purpose

These Threshold Categories of the Procurement Code (this “Policy”) establishes and contains the threshold amounts referenced in the Master Procurement Code, GA-001-150 (the “Code”) and the signature authority and ability of certain officers of Broward Health to bind North Broward Hospital District (the “District”) to Contracts.

II. Definitions

The words and acronyms defined in this Policy shall have the meanings set forth in the Code regardless of whether they are capitalized, unless:

(a) The context in which they are used clearly requires a different meaning; or

(b) A different definition is prescribed for a particular section of this Policy.

Words not defined shall be given their common and ordinary meaning unless the context in which they are used requires otherwise.

For purposes of this Policy, the below terms shall have the following meanings associated with them:

“Contract Term” means the length of time a Contract is in effect.

“Spending Threshold” means the threshold amount referenced in this Policy and incorporated into the Code, which permits authorized signatories to execute Contracts and requisitions without obtaining Board approval.

“Threshold Category” means the particular threshold category amount referenced in this Policy and incorporated into the Code.

III. Policy

The Board has established several spending thresholds applicable to the Code that pertain to the District’s acquisition of services, supplies, goods, and materials. To that end, any and all
IV. Threshold Amounts

A. Threshold Categories

The following Threshold Categories are hereby created:

(1) Threshold Category 1: $5,000
(2) Threshold Category 2: $50,000
(3) Threshold Category 3: $100,000
(4) Threshold Category 4: $250,000
(5) Threshold Category 5: $1,000,000
(6) Threshold Category 6: $1,250,000

B. Spending Threshold

The Board from time to time sets Spending Thresholds and permits Broward Health’s President/CEO (“CEO”) and Broward Health’s Chief Financial Officer (“CFO”) to execute Contracts and requisitions to purchase services, goods, supplies, materials, and other Procurements. When such Procurements or Contracts are below the Spending Threshold, no Board authorization or approval is required. Any Procurements or Contracts beyond the Spending Threshold require Board authorization or approval. The CEO and/or CFO may, from time to time, delegate their signing authority to other officers of Senior Management in accordance with the procedures established in the Code.

The following Spending Threshold is hereby created:

Spending Threshold: Up to and including Four Hundred Thousand Dollars ($400,000.00) for each year of a Contract Term for a maximum Contract Term of five (5) years.

Notwithstanding the foregoing, Contracts without the exchange of monetary compensation may exceed a five (5) year Contract Term or contain an auto-renewal clause without obtaining Board approval.

As provided in the Code, this Spending Threshold is inapplicable to (1) line-item Budgeted Contracts and/or Procurements; (2) pass-through funding obtained from
grantors, government entities, or private entities used to fund a program or programs for which such funding was furnished; and (3) the receipt of funds regardless of its source.

V. Related Policies
GA-001-150, Master Procurement Code
PC-####-####, Procurement Policy Table

VI. Interpretation and Administration
Administration and Interpretation of this policy is the responsibility of the Chief Procurement Officer.
I. Purpose

This Policy establishes the procedures to be used in the Vendor Registration process.

II. Definitions

The words and acronyms defined in this Policy shall have the meanings set forth in the Master Procurement Code, GA-001-150 (the “Code”) of North Broward Hospital District (the “District”) regardless of whether they are capitalized, unless:

(a) The context in which they are used clearly requires a different meaning; or

(b) A different definition is prescribed for a particular section of this Policy.

Words not defined shall be given their common and ordinary meaning unless the context in which they are used requires otherwise.

For purposes of this Policy, the below term shall have the following meaning associated with it:

“Vendor Registration Application” means Broward Health’s vendor registration application form available on Broward Health’s website that must be completed by all business vendors wishing to conduct business with Broward Health prior to Broward Health engaging in business operations with such vendors.

“Vendor Registration System” means the Broward Health electronic system where vendors and prospective vendors are required to register as a condition precedent to providing goods or services to Broward Health or any other wholly-owned entity and/or DBAs of the District.

III. Policy

Broward Health requires all vendors wishing to conduct business with Broward Health or any other wholly-owned entities and/or DBAs of the District register their business entities
by completing a Vendor Registration Application available online at www.browardhealth.org. Vendors must complete the Broward Health Vendor Registration application to participate in business transactions and to be included in Broward Health’s competitive solicitation process. It is the vendor’s responsibility to keep their information current.

IV. Procedure

(1) New Registration

(a) Vendors shall register in the Vendor Registration System by completing all sections of the Vendor Registration Application. Vendors requiring assistance in completing the registration may contact Broward Health Vendor Relations at (954) 473-7289.

(b) All hospitals, departments, divisions, and employees of the District who, when procuring goods and/or services, have selected a particular vendor must direct the vendor to Broward Health’s website or Vendor Relations so the vendor can complete the Vendor Registration Application.

(c) The Office of Supplier Diversity shall also refer all diverse vendors to Broward Health’s website to complete the Vendor Registration Application. Diverse Vendors will upload their Minority Business Enterprise (MBE), Woman Business Enterprise (WBE), or Small Business Enterprise (SBE) certification documents into the Vendor Registration System.

(2) Benefits of the Vendor Registration Program

Although a requirement prior to conducting business with Broward Health, registration in the Vendor Registration System provides several benefits to prospective and current vendors:

(a) Registered vendors may, in Broward Health’s sole discretion, be contacted for quotations for purchases of goods and services according to Broward Health Procurement Code based on the product code(s) selected during the registration process.

(b) Registered vendors may also receive notification of Formal Bids (RFQs and RFPs) and RFIs whenever Broward Health deems it appropriate. It is the sole responsibility of the vendor to monitor public announcements regarding Solicitations, ensure that its contact information is accurate, and to contact the Vendor Relations department if its contact information changes.

(c) Registered vendors will, where reasonably requested and deemed helpful by Broward Health, be allowed to schedule appointments with department directors, cost center managers, or designated personnel to conduct ongoing business.

(d) Registered vendors will be allowed to participate in the product standardization process for Solicitations where reasonably requested and deemed appropriate by Broward Health.
(3) **Vendor Orientation Process**

Broward Health generally conducts quarterly vendor orientation sessions. The orientation sessions should provide attendees with detailed information on how to conduct business with Broward Health. The dates for all vendor orientation sessions will be listed and available online at www.browardhealth.org.

**V. Exceptions**

This Policy and the requirement of registration in the Vendor Registration System is not applicable to:

1. Any state, federal, or tribal government and/or public entity including, but not limited to, any state, federal, or tribal branch, department, division, bureau, commission, authority, board, local government, special district, political subdivision, public school, community college, or state or government university;
2. Any organizations exempt from taxation under the Internal Revenue Code, 26 U.S.C. § 501, and that are providing monetary compensation or in-kind contributions to Broward Health through a research or other charitable grant;
3. Organizations or entities that Broward Health submits bids to in response to requests for proposals or other competitive solicitations; and
4. Any other individuals or entities who the Chief Procurement Officer, or his or her designee, decides should be exempt from such registration for good cause.

In the event any of these exceptions are applicable to a given entity, organization, individual, or situation, the circumstances and/or exempting status must be properly documented within the applicable arrangement in Broward Health’s electronic contracting system.

**VI. Related Policies**

GA-001-150, Master Procurement Code

PC-###-####, Procurement Policy Table

**VII. Interpretation and Administration**

Administration and Interpretation of this policy is the responsibility of the Chief Procurement Officer.
I. Purpose

This policy is being established to delineate the policies and procedures pertaining to the selection and approval of Professional Consulting Services Agreements.

II. Definitions

The words and acronyms defined in this Policy shall have the meanings set forth in the Master Procurement Code, GA-001-150 (the “Code”), regardless of whether they are capitalized, unless:

(a) The context in which they are used clearly requires a different meaning; or
(b) A different definition is prescribed for a particular section of this Policy.

Words not defined shall be given their common and ordinary meaning unless the context in which they are used requires otherwise.

For purposes of this Policy, the term:

“Professional” means specialized degrees, licensures, certifications, patents, proprietary or specialized knowledge, business acumen, science, law, or the arts.

“Professional Consulting Services” means services rendered by an independent contractor who has a professed knowledge or professional expertise sought for the purpose of providing specialized guidance for specialized services required by Broward Health. Professional Consulting Services shall include, but not be limited to, legal services, lobbyist services, management services, finance-related services, consulting services and accounting and audit services.

For the purpose of this Policy, “Professional Consulting Services” shall not include design and construction services relating to architecture, professional engineering, landscape architecture, registered surveying and mapping, or construction and/or renovation services of any kind. For these services, please consult the relevant policy provided in the Procurement Policy Table.
III. Policy

Broward Health enters into contractual relationships with contractors providing Professional Consulting Services. When selecting contractors to provide Professional Consulting Services, Broward Health shall follow the procedures outlined herein to ensure proper transparency and competitiveness.

IV. Procedure

A. Contract Initiation

A request for Professional Consulting Services is initiated by a Broward Health department by obtaining at least two (2) proposals from qualified contractors providing reasonably similar services and then following the procedures for submission, review, and approval of a contract as set forth in the Contract Administration Standard Operating Procedure.

B. Exceptions to this Policy

1. In the event following this Policy and obtaining two (2) proposals would subject Broward Health to undue financial or operational risk, the relevant Broward Health department may forego obtaining two (2) proposals provided the procedures in the Section of the Code entitled “Emergency Commitments and Internal Approvals” are followed.

2. Professional Consulting Services that are strategic in nature, as determined by the President/CEO, in writing, shall be exempt from this Policy.

3. Arrangements where there are no other contractors to provide a second quote.

4. Arrangements where the Professional Consulting Services are so specialized that obtaining a second quote would be merely procedural in nature. These include, but are not limited to, arrangements for legal services and lobbying services.

V. Related Policies

GA-001-150, Master Procurement Code

VI. Interpretation and Administration

Administration and Interpretation of this policy is the responsibility of the President/CEO, CFO and Chief Procurement Officer.
I. Purpose

The purpose of this Policy is to set forth the general guidelines for the submission, approval, and administration of contracts, in conjunction with the Master Procurement Code, GA-001-150 (the “Code”) of North Broward Hospital District (the “District”).

II. Definitions

The words and acronyms defined in this Policy shall have the meanings set forth in the Code regardless of whether they are capitalized, unless:

(a) The context in which they are used clearly requires a different meaning; or

(b) A different definition is prescribed for a particular section of this Policy.

Words not defined shall be given their common and ordinary meaning unless the context in which they are used requires otherwise.

For purposes of this Policy, the below terms shall have the following meanings associated with them:

“Arrangement” means every District Contract, arrangement, procurement, or transaction, whether set forth in writing or otherwise, with another person, party, or entity that involves, directly or indirectly, the offer of payment, solicitation, or receipt of anything of value.

“Contract” means all types of contractual agreements and Arrangements of the District, regardless of what they may be called or referred to, for the procurement or disposal of goods or services of any kind.

“Contract Initiator” means an authorized employee of the District who initiates the contracting process.

“Contracts Administration” means the District department responsible for overseeing the review and administration of the District’s Contracts.
“Contracts Management System” means the District’s electronic contracting system that serves as the centralized repository for all District Contracts and which contains all Contract reviews, approvals, and supporting documentation.

“Contracting Process” means the process followed, in accordance with Contracts Administration’s Standard Operating Procedure, in the Contracts Management System when the District is entering into a Contract.

“Corporate Executive Management” means the District’s President/Chief Executive Officer, the District’s Chief Financial Officer, their designees, or any other individuals authorized by the Board to bind the District to Contracts.

“Department Authority” means the relevant individual in the District’s Corporate Executive Suite who, as provided within the District’s Organizational Chart, (1) possesses authority over the District or over a particular District hospital, facility, department, or division; and (2) with the exception of the President/Chief Executive Officer, reports directly to the President/Chief Executive Officer. Such individuals include, without limitation, the District’s (a) President/Chief Executive Officer, (b) Chief Financial Officer, (c) Chief Administrative Officer, (d) Chief Medical Officer, (e) Chief Human Resources Officer, (f) any other individual who meets the criteria for being deemed “Department Authority,” and/or (g) any other individual or position delegated such “Department Authority” from time to time by the President/Chief Executive Officer.

“Focus Arrangement” means a Contract with an actual source of health care business or referrals to the District and involves, directly or indirectly, the offer, payment, or provision of anything of value; or is between the District and any physician (or a physician's immediate family member as defined in 42 C.F.R. § 411.351) who makes a referral to the District for designated health services (as defined in 42 U.S.C. § 1395nn(h)(6)).

III. Policy

This Policy governs the review, approval, and administration of the District’s Contracts. All of the District’s Contracts must be procured in accordance with the provisions of the Code and/or any applicable policy in the Procurement Policy Table that governs the procurement of goods and/or services.

IV. Procedure

(1) Every Arrangement entered into by the District shall follow the provisions of the Code and/or any applicable policy in the Procurement Policy Table.

(2) Every Arrangement entered into by the District shall be reviewed by the District’s Compliance and Ethics Department to determine whether such Arrangement is a Focus Arrangement. To the extent an Arrangement is deemed a Focus Arrangement, such Focus Arrangement shall always be in the form of a written Contract signed by both...
POLICY AND PROCEDURE

parties to the Contract and shall always conform to the requirements of Section III.D. of the Corporate Integrity Agreement entered into on August 31, 2015 between the District and the Office of Inspector General, U.S. Department of Health and Human Services ("CIA").

(3) Unless an exception otherwise exists as defined in Section V., Exceptions, below, all Contract requests shall be submitted by the Contract Initiator in the Contracts Management System where it will be reviewed and approved prior to its execution.

(4) Contracts Administration shall supervise and oversee the Contracting Process to ensure that all Contracts are properly routed to all applicable departments, divisions, and employees to receive the proper reviews and approvals.

(5) The Contracting Process procedure is set forth in Contracts Administration’s Standard Operating Procedure (a link to the Standard Operating Procedure can be found below).

(6) Following the Contracting Process, all Contracts shall be executed by Corporate Executive Management.

V. Exceptions

The following two (2) exceptions apply to temporarily exempt a District hospital, facility, department, or division from the Contracting Process:

(1) An actual or perceived threat or emergency exists whereby strictly adhering to the Contracting Process may result in (1) a negative effect to patient care; (2) a threat to the life, health, welfare, or safety of patients, employees, or the public; (3) the District failing to comply with regulatory requirements or its CIA; (4) severe financial consequences; or (5) adverse effects or negative consequences to the operations of any District hospital, facility, department, or division. To the extent such a perceived or actual threat or emergency exists, it must be communicated to the Department Authority before proceeding forward without adhering to the Contracting Process. The Department Authority possesses the ultimate authority to decide whether or not a Contract may proceed forward without following the Contracting Process. To the extent such an exception is granted, the relevant circumstances of the perceived or actual threat or emergency and the approval of the Department Authority must be documented within the relevant Contract file in the Contracts Management System.

(2) The General Counsel’s Office may draft, negotiate, and review Contracts and legal terms outside the Contracts Management System to ensure that all relevant reviews are being done in an effective and timely manner.

Notwithstanding the two (2) exceptions above, any and all documentation and completed reviews must be properly documented within the relevant Contract file in the Contracts Management System following such reviews and approval. In no event shall any of the exceptions above apply to exempt a Focus Arrangement from adhering to the requirements of Section III.D. of the CIA.
VI. Related Policies
GA-001-150, Master Procurement Code
PC-###-###, Procurement Policy Table
Contracts Administration Standard Operating Procedure (the Standard Operating Procedure may be found by clicking this link: Standard Operating Procedure)

VII. Interpretation and Administration
Administration and Interpretation of this policy is the responsibility of the Chief Procurement Officer.
I. Purpose

This Policy establishes written procurement and audit procedures for use of Federal Awards from the U.S. Department of Health & Human Services (“HHS”) that comply with Federal procurement standards, including a process for ensuring that all procurement costs directly attributable to the Federal Award are allowable, consistent with Federal Cost Principles.

II. Definitions

The words and acronyms defined in this Policy shall have the meanings set forth in the Code regardless of whether they are capitalized, unless:

(a) The context in which they are used clearly requires a different meaning; or

(b) A different definition is prescribed for a particular section of this Policy.

Words not defined shall be given their common and ordinary meaning unless the context in which they are used requires otherwise.

For purposes of this Policy, the below terms shall have the following meanings associated with them:

“Broward Health Department” means any office, department, entity, or DBA of North Broward Hospital District that accepts Federal Awards from any Federal Agency including, but not limited to, Broward Health, Community Health Services, and Children’s Diagnostic & Treatment Center.

“Contract” means a written agreement used for the purpose of obtaining goods and services needed to carry out a project or program under a Federal Award. It does not include a legal instrument when the substance of the transaction meets the definition of a Federal Award or Subaward. Contract characteristics include:

(a) The provision of goods and services within normal business operations;

(b) The provision of similar goods or services to many different purchasers;
(c) Normally operating within a competitive environment;
(d) The provision of goods or services that are ancillary to the operation of the Federal Program; and
(e) Not being subject to compliance requirements of the Federal Program as a result of the relationship with Broward Health, although similar requirements may apply for other reasons, including as a result of contractual provisions.

“Compliance Manual” means the HRSA Health Center Program Compliance Manual that applies to all entities and Subrecipients that apply for or receive Federal Awards under the Health Center Program authorized under section 330 of the Public Health Service Act ("PHS Act") (codified at 42 U.S.C. § 254b).

“Federal Agency” means any executive department, Federal Government corporation, Federal Government controlled corporation, or other establishment within HHS that provides Federal Awards including, but not limited to, the Health Resources and Services Administration (HRSA), Centers for Disease Control and Prevention (CDC), Food and Drug Administration (FDA), National Institutes of Health (NIH), and Substance Abuse and Mental Health Services Administration (SAMHSA).

“Federal Award” means, depending on the context, either: (1) The Federal financial assistance or the cost-reimbursement contract under the Federal Acquisition Regulations that a non-Federal entity receives directly from a Federal Agency or indirectly from a Pass-Through Entity, as described in 45 C.F.R. § 75.101; or (2) An instrument setting forth the terms and conditions which can be a grant agreement, cooperative agreement, other agreement for assistance, or the cost-reimbursement contract awarded under the Federal Acquisition Regulations.

“Federal Program” means (1) all Federal Awards that are assigned a single number in the Catalog of Federal Domestic Assistance (CFDA); (2) all Federal Awards to non-Federal entities from the same Federal Agency made for the same purpose; or (3) a cluster of programs as defined in 45 C.F.R. § 75.2.

“Pass-Through Entity” means a non-Federal entity that provides a Subaward to a Subrecipient to carry out part of a Federal Program.

“Subaward” means an award provided by a Pass-Through Entity to a Subrecipient for the Subrecipient to carry out part of a Federal Award received by the Pass-Through Entity. A Subaward does not include payments to a contractor or payments to an individual that is a beneficiary of a Federal Program.

“Subrecipient” means a non-Federal entity that receives a Subaward from a Pass-Through Entity to carry out part of a Federal Program.

“Uniform Data System” or “UDS” means the standardized reporting system whereby entities receiving Federal Awards under the Health Center Program authorized under section 330 of the PHS Act are required to input certain information including patient demographics, services provided, clinical processes and health outcomes, patients’ use of services, costs, and revenues.
III. Policy

Broward Health Departments receive Federal Awards for various purposes as authorized under Federal law. This Policy is being established to clarify the procedures for the procurement of supplies and other expendable property, equipment, real property and other services using funds from Federal Awards to ensure that such materials and services are obtained in an effective manner and in compliance with the provisions of Federal Programs and applicable Federal law. This Policy further establishes the audit procedures required when Federal Award funds are used for procurement of services and/or supplies as well as for Subawards to Subrecipients. Between the Code and any Procurement Policy referenced below, the Procurement Policy shall control, unless otherwise explicitly stated in the Procurement Policy or the Code.

IV. Procurement Procedure

1. Before procuring any materials and services using Federal Award funds, the Broward Health Department shall determine, on a case-by-case basis, consistent with the characteristics outlined in 45 C.F.R. § 75.351, whether an individual agreement will be carried out through a Contract or Subaward and the agreement shall be structured accordingly.

2. Before beginning the procurement process, the Broward Health Department shall request and receive approval from the relevant Federal Agency to contract for work and/or substantive programmatic work, as defined within the Compliance Manual, under its Federal Award by either an approved competing continuation/renewal of designation application or other competitive application; or by an approved post-award request for such arrangements submitted within the project period (for example, change in scope).

3. Any and all procurements of supplies or services paid in whole or part with a Federal Award shall conform with 45 C.F.R. Part 75. Such procurement transactions shall be conducted in a manner that provides full and open competition consistent with the standards of 45 C.F.R. § 75.328.

4. All procurements of goods and services directly attributable to a Federal Award shall be allowable consistent with Federal Cost Principles.

5. Non-competitive proposals may only be used when:
   (a) The item is available only from a single source;
   (b) The public exigency or emergency for the requirement will not permit a delay resulting from competitive solicitation;
   (c) The non-competitive proposal is specifically authorized by the Federal Agency in response to a written request from Broward Health; or
   (d) Competition is determined to be inadequate after soliciting a number of sources.
6. A cost or price analysis shall be performed in connection with every procurement action paid for in whole or in part by the Federal Award in excess of the Simplified Acquisition Threshold as set by the Federal Acquisition Regulation at 48 C.F.R. subpart 2.1 and in accordance with 41 U.S.C. § 1908.

7. All Subrecipient agreements that provide Subawards that support the Federal-approved scope of project must include provisions that address the following:
   (a) The specific portion of the approved scope of project to be performed by the Subrecipient;
   (b) The applicability of all Broward Health’s Federal Program requirements to the Subrecipient;
   (c) The applicability to the Subrecipient of any distinct statutory, regulatory, and policy requirements of other Federal Programs associated with their Federal-approved scope of project;
   (d) Mechanisms for Broward Health to monitor Subrecipient compliance and performance;
   (e) Requirements for the Subrecipient to provide data to Broward Health necessary to meet Broward Health’s applicable Federal financial and programmatic reporting requirements;
   (f) Provisions addressing record retention and access, audit, and property management; and
   (g) Requirements that all costs paid for by the Federal Subaward are allowable consistent with Federal Cost Principles.

8. All Contracts with other providers for the provision of health services within the Federal Agency-approved scope of project must include:
   (a) The specific activities or services to be performed or goods to be provided;
   (b) Mechanisms to monitor contractor performance;
   (c) Requirements for the contractor to provide data necessary to meet Broward Health’s applicable Federal financial and programmatic reporting requirements;
   (d) Provisions addressing record retention and access, audit, and property management; and
   (e) A schedule of rates and method of payment for such services.

9. Records must be maintained for all procurements—whether competitive or noncompetitive—paid for in whole or in part under a Federal Award and such records must include the rationale for method of procurement, selection of contract type, contractor selection or rejection, and the basis for the Contract price.

Any contractual or administrative issues arising out of procurements, with respect to Contracts (protests, disputes, claims, etc.) or how to take enforcement actions in the case
of Subawards (collectively, “Disputes”) shall be initially resolved through reasonable methods established by the Broward Health Department in conjunction with Broward Health’s Chief Administrative Officer. To the extent necessary, if such Disputes cannot appropriately be resolved or cured, the Broward Health Department, the contractor, or the Subrecipient may appeal to Broward Health’s President/CEO to take appropriate action. The President/CEO, to the extent necessary, may work with Broward Health’s General Counsel’s Office and/or Compliance & Ethics Department to resolve the Disputes in a matter consistent with Federal guidelines.

V. Monitoring of Subawards and Contracts

1. All contractors and Subrecipients shall be overseen and monitored to ensure their performance is in accordance with the terms, conditions, and specifications of their agreements and Contracts and to assure compliance with applicable Federal requirements.

2. To accomplish the purposes of audit and oversight of contractors and Subrecipients, Broward Health must have access to records and reports related to Federal Program activities in order to ensure that all activities and reporting requirements are being carried out in accordance with the provisions and timelines of their Contracts and agreements, including, but not limited to, making sure performance goals are achieved, UDS data is submitted by appropriate deadlines, and funds are used only for authorized purposes.

3. When monitoring contractors, the Broward Health Department shall:
   (a) Conduct periodic evaluations of contractor performance that are shared with the board and management staff; and/or
   (b) Receive and review appropriate documentation at the time of Contract completion or renewal that the contractor has met the terms, conditions, and specifications of the Contract.

4. Broward Health Departments shall utilize accepted methods of monitoring Subrecipients to ensure compliance with their agreements and Federal guidelines governing receipt of the Subaward. Such accepted methods may include any of the following, or a combination thereof:
   (a) Receiving/reviewing copies of the Subrecipient governing board’s meeting minutes;
   (b) Performing site visits;
   (c) Conducting regular check-in calls and updates regarding Federal Program requirements or new Federal Program policies;
   (d) Receiving/reviewing the Subrecipient’s annual audit;
   (e) Conducting periodic joint meetings between the two entities’ boards, or between the Broward Health Department’s key management staff and the Subrecipient’s board;
(f) Receiving/reviewing periodic written reports from the Subrecipient; and/or

(g) Sharing data and creating systems for the sharing of financial and medical records for the purpose of Broward Health’s Federal Program data reporting.

5. When monitoring Subrecipients, Broward Health shall:

(a) Make documented, case-by-case determinations whether the agreement for the disbursement of Federal Program funds casts the party receiving the funds in the role of a Subrecipient, consistent with the characteristics outlined in 45 C.F.R. § 75.351;

(b) Identify Subawards as such to the Subrecipient, and provide all applicable information to the Subrecipient as described in 45 CFR § 75.352(a)(1), including the total amount of the Federal Award committed to the Subrecipient;

(c) If any of the data elements contained in 45 C.F.R. § 75.352(a)(1) change, the change(s) shall be included in a subsequent Subaward modification or amendment;

(d) Ensure that such funds are only used for authorized purposes;

(e) Ensure, by monitoring the ongoing activities of the Subrecipient, that the Subaward is used only for authorized purposes and that the Subrecipient maintains compliance with all applicable requirements specified in the Federal Award, including, but not limited to, those found in section 330 of the PHS Act, implementing program regulations, and grants regulations in 45 C.F.R. Part 75;

(f) Review financial and performance reports required by the Broward Health Department in order to ensure performance goals are achieved, UDS data is submitted by appropriate deadlines, and funds are used only for authorized purposes;

(g) Ensure that the Subrecipient takes timely and appropriate action on all deficiencies pertaining to the Subaward that may be identified through audits, on-site reviews, and other means;

(h) Issue a management decision for audit findings pertaining to the Subaward.

Consider whether the results of the Subrecipient's audits, on-site reviews, or other monitoring indicate conditions that necessitate adjustments to the Broward Health Department’s own records and whether the Broward Health Department must consider taking enforcement action against noncompliant Subrecipients as described in 45 C.F.R. § 75.371.

VI. Document Retention

Final Contracts, Subrecipient agreements, and related procurement records, financial records, supporting documents, statistical records, and all other records pertinent to the Federal Program (collectively, “Records”) carried out under Contracts and agreements consistent with Federal document maintenance requirements, must be retained for procurements paid for in whole or part under a Federal Award. As such, each Broward Health Department shall maintain Records for procurement actions paid for in whole or in part under the Federal Award that includes the rationale for method of procurement, selection of
Contract or agreement type, contractor selection or rejection, and the basis for the Contract price. This includes documentation related to noncompetitive procurements. Such Records shall retained either (a) for a period of three (3) years from the date of the submission of the final expenditures report to HHS or (b) for the minimum period required by the Florida Department of State Division of Library and Information Services General Records Schedules GS1-SL and GS4, whichever is longer.

VII. Regulatory Standards and References

Section 330(k)(3)(I) and Section 330(q) of the PHS Act; 42 C.F.R. § 51c.113, 42 C.F.R. § 56.114, 42 C.F.R. § 51c.303(t), and 42 C.F.R. § 56.303(t); 45 C.F.R. Part 75, Subpart D; 45 C.F.R. Part 75, Subpart E: Cost Principles; and Section 1861(aa)(4)(A)(ii) and Section 1905(l)(2)(B)(ii) of the Social Security Act.


Simplified Acquisition Procedures: https://www.acquisition.gov/content/part-13-simplified-acquisition-procedures.


VIII. Related Policies

GA-001-150, Master Procurement Code
PC-###-###, Procurement Policy Table

IX. Interpretation and Administration

Administration and Interpretation of this policy is the responsibility of the President/CEO, CFO and Chief Procurement Officer.
I. Purpose
It is the mission of the Office of Supplier Diversity (OSD) to provide accessibility to all Diverse Vendors seeking inclusion in the procurement opportunities with Broward Heath (BROWARD HEALTH). The vision of OSD is to be the leader in diverse supply chain management.

II. Definitions
Broward Heath: the North Broward Hospital District d/b/a Broward Heath, a political subdivision of the State of Florida.

Second Tier Direct: spend with Broward Heath’s diverse vendors working directly with a prime vendor / contractor on a Broward Heath contract / project (i.e. such as a sub-contractor of the contract / project)

Second Tier In-Direct: spend with small, minority and women owned businesses that support a prime vendor / contractor’s overall business strategy, but does not directly support Broward Heath’s contract / project (i.e. such as a diverse vendor providing office supplies or accounting services)

Broward Heath Certification Partner: governmental agencies and national organizations approved by Broward Heath’s SD policy for SBE/MBE/WBE certification recognition, listed under the section titled - “Certified Diverse Vendor Process”.

Certified Diverse Vendor (CDV): vendors approved as a SBE/MBE/WBE with one of Broward Heath’s approved certification partners. ONLY Certified Diverse Vendors are eligible to participate in Broward Heath’s Supplier Diversity Program.

Commercial Useful Function: to own, operate and maintain a licensed establishment in which commodities are bought and regularly sold to the general public in the usual course of doing business or an establishment which professional services are offered to the general public in the usual course of doing business.

Diverse Vendor (DV): any Broward Heath Certified or Verified Small, Minority or Woman Business Enterprise (SBE/MBE/WBE).
Diverse Vendor Enhancements (DVE): strategies designed by Broward Heath which are intended to increase procurement opportunities with Certified Diverse Vendors.

Front: a business concern that falsely claims to be owned and controlled by minority persons or women or a business concern that provides fraudulent or incorrect information regarding the size of the firm.

Good Faith Effort: the process of documenting a prime vendor/consultant/contractor’s efforts of solicitation and utilization of certified diverse vendors on a project/contract with CDV subcontracting requirements. (i.e. Prime Vendor/Contractor/Consultant, must contact BROWARD HEATH’s Office of Supplier Diversity for assistance).

Minority Business Enterprise (MBE): any for profit legal entity which is organized to perform a commercial useful function and which is at least 51% owned, managed, and operated by minority person(s), as defined by an approved Broward Heath’s Certification Partner.

Non-Diverse Vendor: any vendor that has not been designated as a certified or verified Diverse Vendor with Broward Heath.

Participation: any activity involving Diverse Vendors that results in dollars awarded to SBE/MBE/WBEs.

Procurement Divisions: Contracts Administration (CA) and Corporate Resource and Materials Management (CRMM)

Small Business Enterprise (SBE): firms certified as a local or National/Federal SBE by one of Broward Heath approved Certification partners for Small Business status.

SBE/MBE/WBE Certification: the process and necessary documentation required to determine that a vendor is a small, minority or women business enterprise, as defined by an approved Broward Heath Certification Partner.

Vendor Development: the practice of providing specific and directed technical assistance to Broward Heath’s certified Diverse Vendors that enhances their capability to do business with Broward Heath.

Verified Diverse Vendor (VDV): vendors identified via the vendor registration process, by self-declaring size, minority or woman owned business status via completing the verified diverse vendor affidavit. Vendors seeking VDV status as a small business must provide proof of SBE certification by a Federal, State or Local governmental agency, not listed as a Broward Heath’s approved certification partner. Vendors that register as a small business in the Federal Government – System for Award Management (SAM), must provide a copy of the firm’s SAM registration profile; noting the confirmed size standard by the SBA, DUNN number, and SAM Registration Expiration date.

VRS: Broward Heath’s online “vendor managed” Vendor Registration System (VRS). The system is the resource pool for all vendors to include CDVs and VDVs.
**Woman Business Enterprise (WBE):** any for profit legal entity, which is organized to perform a commercial useful function, and which is at least 51% owned, managed and operated by one or more women, as defined by an approved Broward Heath Certification Partner.

**Note:** SBE, MBE and WBE certification status is determined by Broward Heath’s Approved Certification Partners.

### III. Policy

**SUPPLIER DIVERSITY STRUCTURE**

Broward Heath Office of Supplier Diversity is aligned with Broward Heath’s Procurement Divisions, incorporating Diverse Vendor Development/Advocacy & Diverse Supply Chain Management and reports directly to the Director of Corporate Resource and Materials Management.

1. **Supplier Diversity Functional Areas:**

   a. **Outreach** - Broward Heath reaffirms its commitment to equal access procurement via its outreach efforts. Broward Heath’s Outreach efforts include Internal initiatives such as the Annual Supplier Diversity EXPO and Key Contact Matchmaking (Staff and Broward Heath Prime Vendors/Contractors). External Outreach Initiatives include: Vendor Advocacy and Matchmaking; Research & Development (Best Practices); and SD Promotion & Marketing (i.e. the presence and participation of Supplier Diversity and Procurement Staff in public forums, EXPOs, organizations and publications that advocate diversity within procurement). Also, Certification Outreach, serving on certification committees of Broward Heath’s approved certification partners (non-governmental agencies) to ensure the integrity of the certification process.

   b. **Vendor Development** – Broward Heath is committed to conducting business with diverse vendors and ensuring those wanting to do business with Broward Heath are ready, willing and able to provide quality products/services at a competitive price. Broward Heath’s Vendor Development Initiatives include – the application of Diverse Vendor Enhancements, Second Tier Matchmaking, and Technical Assistance (TA). OSD provides in-house procurement TA and business development TA via referral to Broward Heath’s Supplier Diversity Resource Partners.

   c. **Compliance** – Via its compliance initiatives, OSD ensures systems, procedures, processes, and individuals conform to the policies, regulations and contractual agreements governing Certified Diverse Vendor participation.
i. **Contract Compliance** ensures all segments of the procurement process are complied with; tracking all phases of the process from the assignment of the Diverse Vendor Enhancement - RFP/RFQ language to contract completion, verifying assigned certified diverse vendor participation levels have been met and sending final payment/project-end communication to the project/contract manager. **ONLY**, CDV spend will meet the contract requirement for diverse vendor participation.

Should the Prime Vendor/Contractor not meet the established Diverse Vendor Enhancement a waiver may be requested. OSD will document the Prime Vendor/Contractor’s “good faith efforts” and present to the Supplier Diversity Committee for approval.

ii. **Certification and Verification Compliance** ensures that all segments of the certification and verification process is complied with, that those vendors in the Diverse Vendor Resource Pool are “what they say they are”. And, the spend and participation levels of the Diverse Vendors (certified and verified) are recorded accurately via current Data Management reporting tools.

The verified vendor status is intended to be a “temporary” status, as it is Broward Heath’s goal to have all Small, Minority and Women owned businesses certified, as such. Verified vendors are NOT eligible to participate in Broward Heath’s SD program; **ONLY** Broward Health Certified Diverse Vendors are eligible to participate. The Verified Diverse Vendor process ensures Broward Heath accounts for all Diverse Vendor participation accurately.

2. **Supplier Diversity Committee (SDC)**

   a. A Supplier Diversity Committee shall be established to ensure the mission of Broward Heath’s Supplier Diversity Program is achieved. The primary focus of the Committee is to ensure all certified diverse vendors wanting to do business with Broward Heath have equal access to Broward Heath’s procurement opportunities. The Committee shall review, when deemed necessary, formal procurement requests ($50,000 or more) for certified Diverse Vendor participation. The Supplier Diversity Committee has final approval / authority to apply enhancements to procurement requests not approved at the Procurement Steering Committee (PSC) or by OSD. This ensures the maximum participation of certified diverse vendors. Also, the SDC is responsible for approving waivers for prime vendors / contractors that do not meet assigned diverse vendor participation/enhancements.
b. The SDC will meet quarterly to review Diverse Vendor participation and Supplier Diversity programmatic matters. Special Call meetings of the SDC may be convened, as deemed necessary. (i.e. to review Procurement Requests for Diverse Vendor participation)

c. The SDC shall be composed of the President/CEO (serves as the Committee’s chairperson), Senior Vice President Chief Financial Officer, Chief Operating Officer, VP of Financial Operations, Director of Corporate Resource and Materials Management, and Manager of the Office of Supplier Diversity.

d. General Counsel shall serve ex-officio as council to the Committee.

e. Chief of Internal Audit shall serve ex-officio as advisor to the Committee.

ADMINISTRATIVE PROCEDURES

1. Procurement Process

a. The Procurement Process is governed by Broward Heath’s Procurement Code, which provides direction and guidance for the internal operations of the procurement of supplies, equipment, and services.

Broward Heath has designed methods, which are intended to increase certified Diverse Vendor participation in the procurement process. For those procurement requests of $50,000 or less, an informal quotation process and vendor selection process is used in accordance with Broward Health’s Procurement Code to ensure the equitable inclusion of Certified Diverse Vendors (CDV). Informal quotations processed via VRS will be subject to the standard 5% Quote Price Tolerance (i.e. if a CDV is within 5% of the lowest quote, the CDV will be automatically selected by VRS and awarded upon final review.)

Formal procurement requests, exceeding $50,000, presented at the Procurement Steering Committee (PSC) and deemed available for CDV participation, OSD will assign a Diverse Vendor (DV) Enhancement to be approved at PSC in collaboration with the procurement divisions and the project/contract manager. The DV Enhancement is designed to encourage greater participation by Broward Health’s Certified Diverse Vendors in the procurement process. Formal procurement requests not submitted via PSC shall be reviewed by the OSD for certified Diverse Vendor participation prior to release for public bid.

Vendors registered in Broward Heath’s VRS will receive notification of procurement opportunities within their specified product / service code(s), according to Broward Heath Procurement Code

2. Diverse Vendor Enhancements
The OSD and / or the SDC, when feasible, will develop, design and otherwise structure potential Broward Health’s procurement requests utilizing one or more of the following Diverse Vendor Enhancements in order to encourage and maximize certified Diverse Vendor participation. Once the Diverse Vendor Enhancement has been approved, it shall be incorporated into the procurement request and the final contract. ONLY, Certified Diverse Vendors are eligible to participate in these DV Enhancements:

i. Reduction of Large Contracts;
ii. Payment and Performance Bond Waiver;
iii. Prohibit Double Bonding Requirement;
iv. Prompt Payment Mandate;
v. Quote Price Tolerance (QPT) Initiative;
vi. Request for Proposal (RFP) Scoring Criteria;
vii. Subcontracting Initiative;
viii. Targeted Marketing; and
ix. Any other options as recommended by the SDC.

These enhancements are more fully described as follows:

i. Reduction of Large Contracts - Procurement Requests may be evaluated prior to release by the Supplier Diversity Committee to determine the feasibility of reducing them. This is aimed at providing greater opportunity and inclusion of certified Diverse Vendors to obtain contracts of manageable size. If the Supplier Diversity Committee determines that the Procurement Request can be broken down into smaller components, then it may direct the appropriate staff to develop the Procurement Request in a particular manner and size. The methodology used for subdividing the Procurement Requests can be tailored to the unique factors present in each situation. Various options are available including:

1. The full quantity of a given purchased item, service or project on a Procurement Request may be placed on a separate Procurement Request.
2. A partial quantity of a given item, service or project on a Procurement Request may be placed on a separate Procurement Request.
3. The term of a contract may be shortened.
4. Work to be performed may be grouped according to geographic location and placed on a separate Procurement Request.
5. Unrelated areas of work to be performed or portions of work not requiring completion by a single bidder may be placed on separate Procurement Requests.

Corporate Resource and Materials Management shall assure that any incremental cost associated with subdividing a Procurement Request is documented and made known to the Supplier Diversity Committee prior to making its determination.

ii. Payment and Performance Bond Waiver - Bonding requirements in the construction and architectural fields present obstacles to Diverse Vendors desiring to participate in Broward Health’s procurement process due to their inability to meet the standards of the surety companies. Under Florida Statute 255.05(1), a political subdivision at its own discretion may exempt any person entering into a contract which is for $200,000 or less for the construction of a public building, for the prosecution and completion of a public work, or for repairs upon a public building or a public work.

Broward Health’s bond waiver initiative shall operate as follows:

1. Broward Health’s bond waiver initiative will apply to contracts involving certified Diverse Vendors up to $200,000 except those projects, which the Supplier Diversity Committee deems to have exceptional risk, and therefore would require bonding.

2. Waiver of the performance bond may not eliminate the requirement for a bid bond. A cashier’s check will be accepted in lieu of the bid bond. This requirement should be reviewed on a case-by-case basis, and a waiver of this requirement has to be approved by the Supplier Diversity Committee.

3. Bidding on projects eligible for the bond waiver initiative should not be limited to local businesses. However, preference shall be given to local vendors in the manner indicated in Administrative Procedures.

4. Companies participating in the bond waiver initiative must successfully complete one (1) project before receiving another award under this initiative. Otherwise, companies shall not be limited to any set number of projects on an annual basis.

iii. Prohibit Double Bonding Requirement - The Supplier Diversity Committee may require that on projects in which the prime contractor’s payment and performance bond covers the work of the subcontractors, that Broward Health not require separate bonding from the subcontractors and prohibit prime contractors from requiring separate bonds from subcontractors.
Double bonding requirements are often cost-prohibitive and discourage the participation and utilization of Diverse Vendors in construction projects.

Bonding by the subcontractor may be required if the Supplier Diversity Committee deems the proposed project to have exceptional risk and therefore will require bonding.

iv. **Prompt Payment Mandate** - Upon the written request of the certified Diverse Vendor to the OSD, Broward Health will pay the vendor within 15 days from the date received in Broward Health’s Accounts Payable Department or the project/contract payment administering department. In addition, prime contractors are required to pay Diverse Vendor/Subcontractors within fifteen (15) days from the date the prime contractor is paid. This mandate is an effort to lessen the financial burden of Diverse Vendors and assist these vendors in participating in the procurement process.

v. **Quote Price Tolerance (QPT) Initiative** – QPT will be applied to the Informal ($50,000 or less) and Formal (exceeding $50,000) procurement process. Informal procurement requests will be subject to the standard 5% QPT and processed in accordance with the Procurement Code.

Under the formal procurement process, this initiative provides Broward Health with the opportunity to include a predetermined price tolerance by OSD and approved at the PSC for Certified Diverse Vendors. For purposes of illustration and assuming the QPT criteria was contained in the original Request for Quote (RFQ) specifications, a CDV who quotes a price that is higher than the lowest priced (Non-CDV) respondent, and within the defined tolerance level could be awarded the contract. The RFQ should clearly state that the quote is subject to the QPT Initiative and that, if the quote of a CDV is within the prescribed price tolerance level, the award of the RFQ is to the CDV. The maximum QPT that will be applied to any RFQ is 5% with a dollar value cap of $25,000. Also consideration will be given to the value of the RFQ and historical Diverse Vendor Participation in the specific product/service code.

vi. **RFP Scoring Criteria** - - The scoring matrix for Broward Heath’s formal procurement requests (exceeding $50,000) will include, when feasible, a scoring factor determined by the Office of Supplier Diversity and approved at the PSC. The Certified Diverse Vendor scoring portion of the RFP will be evaluated by the OSD. The original scoring evaluation form will be forwarded to CRMM Bid Office for filing with RFP documentation. This CDV scoring criteria will apply to respondents who are Broward Health Certified Diverse Vendors or Non-Diverse Vendors with documented solicitation and utilization of Broward Health
Certified Diverse Vendors with its proposal at the time of submission. The RFP scoring range, applied to any procurement request, will be a minimum of 5 evaluation points to a maximum of 20 evaluation points. The scoring factor will be determined by the current number of Broward Health Diverse Vendors in the specific product/service code divided by the Total number of Broward Health Registered vendor within the same product/service code. Then, that scoring factor percentage is applied via the matrix below.

RFP Scoring Criteria Application Matrix:

- 0.5 to 5% .................apply 5 evaluation points to the RFP
- 5.1% to 10%................apply 10 evaluation points to the RFP
- 10.1% to 15%..............apply 15 evaluation points to the RFP
- 15.1% to 20%..............apply 20 evaluation points to the RFP

The RFP evaluation points may be adjusted up or down based on the following considerations:
- Historical Diverse Vendor Participation in the specific product/service category
- The number of product and/or service/trade areas for which subcontracting / 2nd tier is feasible,
- The value of the project/contract, and
- Collaboration with the project/contract manager and/or procurement division

vii. Subcontracting Initiative – Broward Health shall apply subcontracting participation for Broward Health Certified Diverse Vendors for formal procurement requests (exceeding $50,000), when feasible in accordance with the Procurement Code. Diverse Vendor subcontracting is the mandatory usage of Broward Health certified Diverse Vendors to perform a predetermined percentage of the total work required under contract. Such contracts shall include a clause stipulating penalties for failure to meet the predetermined percentages. The predetermined subcontracting percentage is determined by the Office of Supplier Diversity and approved at the PSC. This enhancement requires non-Broward Health Certified Diverse Vendors/Prime Contractors/Consultants to comply with the assigned CDV subcontracting participation. The subcontracting participation will be determined by the current number of Broward Health Diverse Vendors in the specific product/service code divided by the Total number of Broward Health registered vendors within the
same product/service code. Then, that percentage is applied via the matrix below.

Subcontracting Application Matrix:

- 0.5 to 10% …………… apply 10% subcontracting participation
- 10.1% to 15%………… apply 15% subcontracting participation
- greater than 15.1%……….. apply 20% subcontracting participation

The CDV subcontracting participation may be adjusted up or down based on the following considerations:

- Historical Diverse Vendor Participation in the specific product/service category
- The number of product and/or service/trade areas for which subcontracting / 2nd tier is feasible,
- The value of the project/contract, and
- Collaboration with the project/contract manager and/or procurement division

viii. **Targeted Marketing** - This is an initiative to provide Diverse Vendors with an opportunity to compete for Broward Heath procurement requests based on company size.

ix. Any other options as recommended by the Supplier Diversity Committee.

3. **Priorities for Award**

Whenever equally responsive Procurement Requests have been submitted, preference shall be given to vendors in the following sequence:

- Broward County Broward Health Certified Diverse Vendor;
- Broward County vendor;
- Miami-Dade or Palm Beach County Broward Health Certified Diverse Vendor;
- Miami-Dade or Palm Beach County vendor;
- Any Broward Health Certified Diverse Vendor located in Florida outside the tri-county area;
- Florida vendors; or
- Any Broward Health Certified Diverse Vendor located outside the State of Florida.
4. **Applicability of Diverse Vendor Participation with Group Purchasing Organization - Prime Vendors and General Consultants/Contractors**

Broward Health does a significant amount of business through group purchasing organizations. These contractual arrangements allow Broward Health to receive quality goods at a competitive price. Similarly, Broward Health utilizes general contractors/consultants when a new facility is to be constructed or there is a major addition to an existing one. This arrangement provides benefits to Broward Health in terms of accessing their construction expertise and in obtaining favorable pricing arrangements with subcontractors.

Diverse Vendor Enhancements may apply to group purchasing - prime vendors and general consultants/contractors. Broward Health will communicate its Diverse Vendor participation commitment to these prime vendors and general consultants/contractors, and will encourage them to utilize diverse vendors/subcontractors to the maximum level feasible.

The Office of Supplier Diversity will serve as a resource to the group purchasing organizations – prime vendors and general consultants/contractors to assist in identifying Diverse Vendors that may be utilized.

Prime vendors and general consultants/contractors will be required to provide Diverse Vendor Monthly Utilization Reports (MUR) to the OSD indicating products/services provided, the total subcontract value, and the payments to date. Additional information may be requested by the OSD to allow proper assessment of the efforts of the prime vendors or general consultants/contractors in meeting the letter and intent of Broward Health’s Supplier Diversity policy.

5. **Certification and Verification Process**

It is the goal of Broward Heath to have all vendors that meet the SBE/MBE/WBE certification criteria of one of Broward Health’s approved certification partners to become certified as such. As, the verification process for verified diverse vendors is intended to be a “temporary status.

a. **Certified Diverse Vendor Process**

Broward Heath accepts various local, national, and federal SBE, MBE, and WBE Certifications. All vendors wishing to be recognized as Broward Health Certified Diverse Vendors (CDVs), must register in VRS and upload a current (valid more than 60 days of expiration) SBE/MBE/WBE certification certificate/document issued by one of Broward Health’s approved certification partners. An updated list of Broward Heath’s approved Certification Partners can be obtained via the Vendor Registration web page or by contacting CRMM – Office of Supplier Diversity. Also, the updated list will be available in VRS via the Supplier Diversity Screen's
Certification Partner drop down button, during the online registration process.

Once vendor registration is complete and a current SBE/MBE/WBE certification certificate/document uploaded (within 60 days of registering as a vendor), OSD will validate diverse vendor status within 10 business days and email notification will be sent via VRS.

VRS is a “vendor managed” system; therefore, the vendor is responsible for updating vendor information to include current SBE/MBE/WBE certification certificate/document. Any changes occurring in ownership and/or managerial/operational control of the firm, the vendor must notify the approving certification partner, immediately. Expired Diverse Vendor status notifications will be sent out via VRS, in accordance with the validated SBE/MBE/WBE certificate/document in VRS.

An online Broward Health Certified Diverse Vendor directory will be assessable for Prime Vendors and Contractors to utilize as a resource tool to identify Certified Diverse Vendors by product / services codes.

b. Verified Diverse Vendor Process

Those diverse vendors that do not have a current SBE/MBE/WBE certification certificate/document from one of Broward Health’s approved Certification Partners or choose not to be certified as a SBE/MBE/WBE with one of Broward Health’s approved certification partners are encouraged to complete the Verified Diverse Vendor (VDV) affidavit. The VDV affidavit affirms the company owner’s minority ancestral origin or legal gender or the company’s SBE status. This process is conducted via the vendor registration process, whereas, the vendor self-declares via a notarized Verified Diverse Vendor Affidavit that the firm is 51% owned, operated and managed by minorities and/or women or is certified as a SBE or has self-declared SBE status with a Federal, State or Local governmental agency, not listed as an approved Broward Health certification partner. Vendors that register as a small business in the Federal Government – System for Award Management (SAM), must provide a copy of the firm’s SAM registration profile; noting the confirmed size standard by the SBA, DUNN number, and SAM Registration Expiration date.

The VDV affidavit must be uploaded into VRS with 60 days after completing vendor registration. OSD will then validate VDV status and email notification will be sent within 10 business days, via VRS.

Verified Diverse Vendors are NOT eligible to participate in the Supplier Diversity Program or any of its initiatives. The verified diverse vendor process ensures Broward Health accounts for all diverse vendor spend accurately and is intended to be a temporary status, until the diverse vendor is able to provide
a current SBE/MBE/WBE certification certificate/document from one of the approved Broward Health certification partners.

6. Data Management

   i. **Vendor Registration System (VRS) - Diverse Vendor Resource Pool:**

      Broward Health will maintain a comprehensive database of registered and Diverse Vendors (certified & verified) to serve as a vendor resource pool. The database will be available for access by all procuring divisions. Prime Vendors and Consultants/Contractors will be able to access Certified Diverse Vendor via the VRS – Certified Diverse Vendor Directory.

      Broward Health will have uniformed product/service (P/S) codes. The vendor will select P/S codes during the online vendor registration process. Also, the vendor will elect whether or not they would like to be considered a Diverse Vendor with Broward Health. All Diverse Vendors (certified or verified) will be validated in VRS by OSD. Notification of procurement opportunities will be communicated via VRS.

   ii. **Statistical Reporting:**

      The OSD is responsible for maintaining Diverse Vendor procurement statistical data. This data provides the basis for enhancing the accessibility of Diverse Vendors to procurement opportunities with Broward Health. Also, the data provides the basis for achieving the objectives of Broward Health’s Supplier Diversity Program and self-benchmarking performance of Diverse Vendor.

      This statistical data will be reported quarterly to the Supplier Diversity Committee and include the current diverse vendor spend and contract compliance performance. The quarterly Diverse Vendor Participation Report will be included in the Board of Commissioners Finance Committee Meeting Agenda (Book), as an informational report.

      Broward Health is committed to the maximum level of diverse vendor participation. Annually, the Supplier Diversity Committee will evaluate Broward Health’s rate of spend with Diverse Vendors to determine if the current rate of spend warrants adjustment. Broward Health will continue to benchmark self-performance against the established baseline performance of prior year’s Diverse Vendor achievements. The annual diverse vendor performance will be presented to the
7. **Retention of Supplier Diversity Records**

Supplier Diversity records will be retained for 3 fiscal years in accordance with the Florida Department of State General Records Schedule for State and Local Government Agencies GS1 –SL Item #169 Minority Business Records effective November 1, 2006. Supplier Diversity records include:

i. Supplier Diversity Committee (SDC) minutes will be retained for 3 fiscal years, this does not include the former Minority Business Enterprise Committee (MBEC) minutes, which are maintained in accordance with Board Committee minutes

ii. Diverse Vendor Files (Certification and Verification) – dispose 3 fiscal years after Expiration

iii. Contract Compliance Files – dispose 3 fiscal years after contract/project has closed

iv. Monthly Compliance, Bid and Procurement Statistical Reports (electronic copies may still be available for historical trend reporting) - dispose 3 fiscal years after the reporting period ends

v. Outreach and Operational files – dispose 3 fiscal years after completion/expiration

**Administration and Interpretation**

The administration and interpretation of this policy is the responsibility of the Director, Materials and Procurement Officer.
PURPOSE: The North Broward Hospital District (the District) enters into contractual relationships with construction contractors and professional design services providers as related to construction. This policy provides guidance for the selection and approval of construction contractors and professional design services providers as related to construction.

BACKGROUND
The North Broward Hospital District (the District) enters into contractual relationships with construction contractors and professional design services providers as related to construction, and it is therefore necessary to delineate policies and procedures outlining the selection and approval of such agreements. This Policy, in conjunction with the General Administrative 001-020, addresses the process for selection, and the authority for approval and execution of these agreements.

PROCEDURE
The North Broward Hospital District procurement of construction services and design services as related to construction is subject to the Consultants Competitive Negotiation Act, s.s. 287.005, F.S., and as such, the procurement of these services shall adhere to the requirements therein.

References:
Related Policies: Procurement Code; General Administrative Policy 001-020; General Administrative Policy 01-140

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