

**FY 2014-15 FINAL REPORT**

FOR CBO/PHG GRANT FUNDING  
FROM THE COUNTY OF SAN LUIS OBISPO  
TO THE SLO NOOR FOUNDATION

Grant Amount Received: \$150,000  
Grant Amount that had been Requested: \$155,000

Program Name: SLO Noor Clinic: Healthcare for the Uninsured

Submitted: September 1, 2015

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**SLO NOOR FOUNDATION'S  
FINAL REPORT FOR CBO/PHG FUNDING AWARDED  
FOR FISCAL YEAR 2014-15**

**Grant Funds for Fiscal Year 2014-15:                   \$155,000 Requested/\$150,000 Awarded**

**Program/Project Summary: SLO Noor Clinic: Healthcare for the Uninsured**

Through the grant period ending June 30, 2015, the SLO Noor Clinic (**SNC**) has provided uninsured SLO County residents (ages 18 to 64) with access to quality healthcare – *primary care exams and treatments, diagnostic screenings, vision, dental, physical therapy, health education, and auxiliary services* – with an emphasis on preventative care. By evaluating and treating patients via these multiple perspectives and disciplines, we have continuously (since opening in October 2011) contributed to the overall health and wellness of the population we serve and have helped reduce healthcare costs countywide.

<b>Goal/Objective</b>	<b>Major Tasks (in order to achieve goal)</b>	<b>% of Goal Achieved (as of 6/30/15)</b>
Continue to provide primary care exams/treatments, vision care, dental care, physical therapy, health education & auxiliary services.	A. Continue utilizing volunteer & paid medical professionals to deliver patient care services B. 90% (or more) of patient care team to be volunteers C. Replenish supplies and small equipment as needed.	A. 100% and ongoing B. 100% and ongoing C. 100% and ongoing  (See #1 below)
Offer dental services more days/hrs. each week as demand grows and sufficient personnel is available.	A. Begin w/soft opening: 1 day/wk. B. Evaluate size of wait list C. Negotiate/secure a sublease tenant to defray overhead costs D. Hire a p/t Dental Assistant E. Order additional supplies and small equipment as needed	A. 100% completed. (Dental clinic opened March 2014 1 day/week; expanded to 2 days/week) B. 100% accomplished via monthly evaluations C. 100% accomplished. Sublease began summer 2014. D. 100%. Employment began summer 2014. E. 100% and on-going (See #2 below)
Increase capacity to accept additional vision care patients	A. Begin tenant improvements to create 1 vision exam room B. Secure equipment & supplies C. Replenish supplies/sm. equip.	A. County Supervisors informed 5/2015 of board approved change to better meet patient needs. (See #3 below for details.) B. 100% accomplished C. 100% accomplished and ongoing

Continue in-house laboratory services to provide accurate, reliable test results in minutes	A. Replenish supplies & small equipment as needed. B. Provide refresher courses or new protocol training to existing volunteer medical team. C. Train new volunteer (or paid) medical team members on I-Stat.	A. 100% and ongoing B. 100% and ongoing C. 100% and ongoing (See #4 below)
Continue providing appropriate patients with physician advised diagnostic testing that cannot be performed at SLO Noor Clinic	A. Continue to work collaboratively with current facilities/agencies that provided outside services in 2013. B. Re-negotiate/renew discounted rates for outside services C. Cultivate new relationships with specialized facilities or agencies.	A. 100% and ongoing B. 100% and as needed C. 100% and ongoing (See #5 below)
Strengthen administrative infrastructure and systems to a higher level of capacity, sophistication, and efficiency	A. Hire a part-time Clinic Director to provide oversight for administrative activities, protocols, systems, and fund development B. Hire a part-time Director of Operations to provide oversight for accounting, inventory control, pre-audit preparation, and ITT needs	A. County Supervisors informed 5/2015 of board amended plan. B. Same as "A." (See #6 below)
Identify/secure additional sources of revenue	A. Contribute to Endowment Fund established 12/2013 B. Pursue possible compensation for participation in clinical trial(s) C. Prepare to have an audit done to open doors for new grant application opportunities D. Continue to promote for additional participation in our Miracle Thousand donation plan E. Solicit collaborations, sponsors, & attendees for repeat & new fundraising events.	A. 100% and ongoing B. 100% and ongoing C. 100% and 2 <sup>nd</sup> audit underway D. 100% and ongoing E. 100% and ongoing (See #7 below)

**Details of Goal/Objective Results:**

1. Our volunteer medical teams remain as the cornerstone for the SLO Noor Clinic's (SNC's) operations. On rotating shifts throughout the year, 175+ dedicated practitioners who already have busy professional lives, but believe in healthcare for all and contribute personal time on-site at SNC to care for the uninsured. Based on EDD Occupational Wage Charts, the value of the volunteers' hours was \$299,135 between 7/2014 and 6/2015. Additional pro-bono hours were provided by specialists who graciously accepted 81 physician advised referrals – especially in the areas of cardiology and orthopedics -- over these 12 months (at their offices) for consultations/exams, which brings the value of volunteer manhours to a total of nearly \$400,000. Recruitment of specialists is always ongoing.
2. Our 3-chair dental clinic, located in Suite 110 at 3071 S. Higuera in San Luis Obispo began seeing patients in late March 2014. Demand for dental services has been EXTREMELY high. It's been a HIGH priority item to do everything feasible to help reduce the appointment waiting list as quickly as

possible. Initially open 1 day/week, we have already increased days/hours of operation to both Wed. & Fri. The P/T Dental Assistant hired during summer 2014 increased her role to F/T (by Board approval) and now provides dental assistant services 2 days weekly and office manager services + appointment prep (like X-rays) the balance of the workweek. Because so many of the patients seen are in are in such poor oral health that they have required multiple or appointment times that far exceed normal time blocks. Due to the patients' need for complex procedures, we've also recruited more specialists. So, in addition to our initial in-house offerings of exams, hygiene, and basic restorative procedures (such as extractions and fillings), we've added root canals, crowns, etc. At this point, for oral surgeries, we must rely on discounted rates from specialists at their facilities. For 7/2014 thru 6/2015, our dental team has provided 466 exams or procedures valued at \$231,387. Furthermore, we've gone to a "triage" system for new patient appointment availability. First priority is given to men/women in severe pain, needing dental clearance (like for a severe infection) before the patient can be scheduled for a medical surgery, and/or experiencing difficulty eating/talking. In taking these measures, the waiting list has decreased from 300 persons in 6/2014 to currently 172. However, this means up to a nearly 2 year wait for "routine" patients. We've been working on this throughout early 2015 and forecast having new personnel in place by this Sept. to see 30-40 additional patients monthly. Note: while 17% of SLO County residents are without medical insurance, the percentage is much higher for dental insurance. Cost for premiums is a factor. Another is that as the Affordable Care Act has no provisions for dental care for adults, some residents may have medical insurance, but not dental or vision and this adds to the demand for these services via SNC.

Sublease:

The sublease agreement with Tolosa Clinic began the summer of 2014. They are currently using the fully-equipped dental suite each Thursday. Rent began at \$1,000/mo. However, this spring they learned that insurance reimbursement rates they receive for their pediatric patients are being decreased ... so they requested a rent reduction from SNC. As SNC clinic itself has been the recipient of many helpful hands from throughout the county, we agreed to a 6-month 50% reduction on the rent they pay us ... to give them some time to bolster their fund-raising activities. This action will also allow their Paso Robles-based operation to continue to have a presence in the City of San Luis Obispo, which is more convenient for many parents.

3. The 2014-2015 grant application was submitted in January 2014 and included information about our plan at that time to add an additional optometry lane in the SNC Phillips Lane suite. However, by May 2014, our Board considered that a slightly amended plan might better serve our current and future patients. The Board still wanted to increase the clinic's capability to provide vision care for more patients, but floor space was beginning to be more congested and we already were increasing vision patient counts because (as part of our chronic illness management and preventative care activities) we began closely monitoring 130 SNC patients with diabetes and 243 heart disease patients who were at higher risk for developing glaucoma or other vision complications due to their chronic illness. With the donations of a Humphrey visual field machine and a Heidelberg HRT digital optic nerve analyzer by a local vision practice and a small equipment purchase (of a Pachymeter to measure corneal thickness), we now are able to offer *comprehensive* glaucoma service in-house.

And we also were able to provide vision exams/eyeglasses to an additional 107 persons in October without capital improvement costs to SNC because our volunteer vision team was again selected to participate in a 2-day marathon event in October. Final tally for this grant term: our vision team volunteered 2 days/wk. to give 590 exams and/or eye disease treatments + dispensed 542 free eyeglasses, plus the 107 additional patient encounters (mentioned above) when we teamed with VSP's traveling mobile van in October.

4. I-Stat and other medical supplies have been purchased to re-supply inventory as needed. July through June, \$32,335 was spent for medical supplies; a portion of which was funded by the CBO/PHG grant. Now regarded as an "established" customer, suppliers also extended discounted

pricing to their allowable limits. This helped keep our expenses quite modest. To aid our physicians determine patients' true health status, 785 basic + 341 more complex lab tests were performed between 7/2014 and 6/2015. The "Top 5" lab tests performed during this grant period were: glucose, lipid, urine dips, CMP, and WBC. Under the direction of the Clinic's Medical Director, existing volunteer practitioners and our paid Physician's Assistant received refresher courses or new protocol training as applicable. Prospective new Volunteer Physicians and health professionals must complete a thorough vetting system. When approved and his/her credentials and licensing information has been input into our system, the new team member is trained on the Clinic's protocols and the I-Stat plus other pertinent equipment such as the EKG machine. Note: the Lead Optometrist and Lead Dentist also insure that volunteer practitioners in their respective centers are fully vetted and then trained on equipment and/or software.

5. During this grant term, diagnostic screening/specialty procedure top highlights included 239 radiology services (X-rays, CT scans, etc.), 77 mammograms, and 36 colonoscopies. We negotiate discounted pricing agreements with outside facilities – primarily Sierra Vista Regional Medical Center and Pueblo Radiology Medical Group as we are not equipped to perform them in-house. We pay Medi-Cal rates or less for these services. ultrasounds, x-rays, and biopsies. July through June, \$15,040 has been spent; the ability to provide our physicians with information that otherwise would be "hidden" is priceless. As the vast majority of our new patients are significantly past due on recommended screening schedules (like for mammograms), bringing patients up to date has been a highly important component in early detection for our focus on preventative care. Treating conditions and diseases before they escalate to more serious levels provides benefits to both the patients and the community. We also note that our multi-disciplinary approach further enhances the opportunity to elevate and/or optimize patient health. Patient files from our vision and dental centers provides our physicians with information to evaluate patients from an overall health perspective and provide in-house treatments. *Example: research indicates dental plaque can decrease heart health.*
6. As we've grown in size/scale of operation annually since SNC opened in 2011 and now that we have both the Phillips Lane site and a satellite location (for dental operations), the Board is in agreement that it is appropriate and prudent to strengthen the administrative infrastructure and systems to a higher level of capacity, sophistication, and efficiency. The Board feels this is best accomplished by hiring personnel who can deliver executive level oversight for daily operations and manage administrative activities during regularly scheduled office hours... rather than continuing with our volunteer CEO/Founder (Dr. Nooristani) and Board members sharing responsibilities. In Jan. 2014 when the application for this grant was submitted, the Board's plan was to hire and divide the responsibilities between two .5 FTE persons: a Clinic Director and Operation Director. Upon further consideration, the Board approved hiring one person, a .75 FTE Executive Director with a start date of 8/01/2015. Well-qualified Consuelo Meux, Ph.D., who has served on the SLO Noor Foundation Board multiple years, has been hired. The decision was influenced, in part, by these additional factors: (a) A thoughtful review of the 2015 budget to determine what line item changes (plus or minus) would be required to implement desired changes, along with an appraisal of whether or not there would/could be sufficient funding available to cover a revised grand total. (b) As reducing the current dental clinic waiting list by increasing days per week for appointments is a priority item, it appeared imminent that hiring one P/T dentist or dental assistant before the end of 2015 would happen. (c) The impact of the temporary decrease in sub-lease income from Tolosa Clinic needed to be considered. (d) Rather than adding a second optometry lane, office space to be shared by our Executive Director and Alliance for Pharmaceutical Access' representative to meet with SNC patients needed to be created and (e) analyze current expenses and then enlist volunteers to become "bargain hunters" (via securing in-kind donations and/or discounted pricing whenever possible) so cash was available as needed.
7. (a) As promised, a contribution for 2014 was made to our endowment fund. Balance as of 6/30/15 is \$36,440. (b) We continue to participate with clinical studies by Discovery Life Science (DLS)

whenever a study is available and appropriate for our patient population. Example: in 2014, 30 patients participated in an influenza study. Studies are not available every month, but one related to thyroid disease began 8/19/15 with 13 patients participating that kickoff week. The revenue is modest, but it is our hope that study findings will also contribute to scientific breakthroughs that benefit patients. (c) A respected local CPA firm completed an audit FY2013 during 2014 and an audit FY 2014 is currently underway and expected to be completed during Sept. 2015. (d) Miracle Thousand donation program: Additional participants signed up during this grant period. Our goal is to have 1,000 participants who donate \$10 or more monthly on an on-going basis. The program is promoted on our website, on brochures, and during fundraising or public speaking events. It's a convenient and on-going way for individuals or businesses to show support for SNC. (e) Favorite fundraising events (Ex: MoTav night and Shades of Color Fashion Revue) were repeated and groundwork already started during this grant term to add new elements when they are again held in 2015-16. Our goal is to have them become "signature" events that continue to grow annually. In the later part of 2014, one of our multi-year supporters met with Board members several times to craft a matching fund challenge this local philanthropist wanted to (anonymously) spearhead to benefit our organization. Community members we invited Aug. – Dec. and his own friends responded generously to the campaign (which kicked off at his August birthday party and ran through Dec. 2014) ... and the gentleman matched every dollar raised!

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### Program/Project OUTPUTS:

#### Output Measures:

- **Medical professionals will provide 2000 (or more) patient appointments for primary care and/or physical therapy sessions during a 12-month period.**  
*Exceeded 2,000. There were 2,498 patient encounters for primary care/PT 7/2014 – 6/2015.*
- **200 (or more) patients will receive physician-advised diagnostic testing and/or specialty procedures not currently available on-site at clinic**  
*Accomplished. There were 352 diagnostic tests or specialty treatments this grant period.*
- **1400 (or more) lab tests will be conducted in-house during a 12-month period.**  
*Nearly accomplished. There were 1,126 (785 basic + 341 complex) lab tests, plus 10 patients received testing at special Lipid Testing Events held on 7/25 & 8/29/14, plus 19 patients participated in a 1-day (2<sup>nd</sup> Qtr.2015) Women's Heart Health Fair & each woman received an EKG, blood sugar test, blood panel test, as well as referral "coupons" for a mammogram or pap smear if needed.*
- **650 (or more) vision exams (& free prescription eyeglasses if needed) during a 12-month period**  
*Accomplished. Our vision team volunteered 2 days/wk. to give 590 exams and/or eye disease treatments + dispensed 542 free eyeglasses, plus the 107 additional patient encounters (mentioned earlier) when we teamed with VSP's traveling mobile van in October 2014.*
- **400 (or more) appointments for dental exams/procedures will be provided within 10 months**  
*Accomplished. There were 466 patients. Value of exams/procedures received was \$231,387.*

#### Data will be collected on:

- **The number and type(s) of health education given to patient/family seen at our clinic 100% of patients have either attended an in-house education offerings or received one-on-one consultation from a volunteer physician to develop a personalized wellness plan. "Diabetes Conversations" (a nutrition/mgmt. class) held the 3<sup>rd</sup> Thurs. monthly is our most popular class. Attendance usually 6-10 per class. HeartAware is our 2<sup>nd</sup> most popular class. Informational brochures/handouts particular to a patient's particular circumstance are also distributed. . In coordination with a state-sponsored program manned by SLO County's Tobacco Control Board, patient sign-up sheets to attend Smoking Cessation classes held off-site are always available at SNC. In coordination with French Hospital**

health educators, SNC patients also informed and invited to attend classes/workshops held at FHMC such as Diabetes/Nutrition and a special series "Healthier Living/Your Life/Take Care" held Sept. 5, 12, 19, 20 + Oct. 3, 10, 2014. As mentioned earlier, SNC personnel has also been participating in local workshops and health fairs and SNC patients receive flyers in advance of event dates.

- **The number of referrals sent to sub-specialist and what kind of specialist was needed**

During this grant term, medical specials assisted 81 patients. Top specialties were gastrointestinal (36), cardiology (25), orthopedic (18), and neurology and urology (1 each). In addition, vision and dental patients were referred as needed on a case-by-case basis and assisted by local ophthalmologists, retinal specialists, periodontists, oral surgeons, etc.

- **Data will show medication assistance stats as provided by Alliance for Pharmaceutical Access**

- Teaming with APA, has facilitated our patients received medication assistance valued at \$113,696 during this grant term. As needed, diabetic supplies such as home testing kits were also distributed. As a side note, in July 2015, we agreed to provide pro-bono part-time office space at SNC beginning 8/2015 for APA's local representative. This arrangement will give SNC patients easy access to her 20/hrs/wk and help APA keep their overhead costs minimal so prescriptions can continue to be provided to patients for free.

Other examples of collaborative relationships: we continued working collaboratively with AIDS Support Network to provide HIV testing on site at our clinic and also assist their personnel (a specialist they bring over monthly from the Central Valley) when treatment is needed for a patient. During this grant term, we've also been in conversations with a kidney dialysis facility and an audiology practice to begin providing access to these services when needed.

**Program/Project OUTCOMES:**

We will measure the effectiveness of our program with these goals in mind:

- **Dental care services will be started during 2014.**

Yes. Ribbon cutting was in March 2014, soft opening for patients began April 2014.

- **50% (or more) increase in total number of patients served in 2014 compared to 2013 figures**

Yes. In spite of the bottleneck in assisting dental patients as explained earlier, there were a total of 3,591 patient encounters 7/2014 thru 6/2015 compared with 2, 451 in the previous 12 months..

- **75% of our in-house lab testing/sampling costs will be lower than local "market rate."**

Yes. Our costs to perform lab tests continue to be an average of 1/6<sup>th</sup> the cost to provide had they been outsourced and paid for at Medi-Cal rates. Lab results are also available to SNC practitioners far more quickly.

- **75% of clinic patients will not seek primary care at a hospital ER unless physician advised**

Yes. During this grant term, 39 patients were admitted to a hospital ER per SNC physician order, most often for a cardiac related event. With our expanded hours/days of operation for primary care, we also assisted 132 patients with post-ER appointments. (Ex: to remove stitches).

- **25% decrease in average wait time for patient care appointments (compared to Dec. 2013).**

Yes. For primary care medical appointments, wait time has gone from a high of 3-months to now usually 2 weeks and we offer at least one appointment slot per day the clinic is open for walk-ins or post-ER follow-ups. We're optimistically hopefully that we can accomplish the same kind of dramatic turnaround for dental patients.

- **100% of patients will receive health education related to their clinic visit.**

*Yes. As we encourage patients to be active participants in maintaining or elevating their personal wellness levels, we assist with informational tools and tips as described earlier in this report.*

- **100% of patients will receive services at no charge.**

*Yes for medical and diagnostic services and physical therapy, plus the range of vision and dental services detailed earlier. At this point, however, for patients needing more complex procedures such as cataract surgery or delicate laser treatments for advanced glaucoma ... or oral surgery or advanced periodontal treatments, we have been able to coordinate free services for a few uninsured patients with extremely grave health situations and no ability to pay. To assist patients as much that we can, we've also worked with hospital case workers and/or organizations like the Hearst Cancer Resource Center for patients requiring surgery to assist patients as much as is possible. However, we are not in a position to offer all patients these complex procedures in-house or free of charge. Instead, we currently refer most patients to the private practices of certain specialists who are offering their services to our patients pro-bono, but for the associated facility use fees and/or lab materials/fabrication costs (like for dentures), we have negotiated discounted rates with the providers that the patient pays. It is a future goal to gradually be able to assist patients further.*

October 2014 will mark the fourth anniversary of the opening of the SLO Noor Clinic. From the start, the County of San Luis Obispo has been a leading supporter of the Clinic and we are grateful.

Our multi-faceted operations have become a valued asset to provide access to quality healthcare for uninsured adults (ages 18-64) from throughout San Luis Obispo County. A chief goal is to optimize the health status of the population we serve.

With that in mind, to illustrate how our multi-disciplinary approach (medical/vision/dental/education all working in tandem) is producing successes worth noting – especially in the area of chronic illness management. Here's a sampling of chronic illness patient stats from 2<sup>nd</sup> qtr. of 2015:

- SNC decreased the time interval between blood sugar and hypertension testing. For 11 patients (8 male; 3 female; with an average age 46), 2Q 2015 blood sugar counts dropped from an average 289 to 141. And for 8 hypertension patients (5 male, 3 female; with an average age of 48), blood pressure readings which had averaged 160/84 in April 2015 dropped to an average of 125/83 by the end of June.

In closing, may we share just a few examples of how SNC and its supporters are making a positive difference in the lives of the population SNC serves ... and in the community at large:

- "Patient A" is a woman in the travel agency profession who is so very thankful for healthcare received at SNC that she volunteered to co-chair the Spring 2015 fashion show fundraiser to benefit SNC.
- Again employed, "Patient B" wrote this note: "I appreciate the help in getting me glasses. After losing a sales job, I went back to school and have been pulling a 4.0, but had a hard time reading the books. Just landed a full time substitute teaching job and it would be hard grading papers without glasses. Thank you!"
- Over the several months in early 2015, 54-year-old "Patient C" has been receiving dental care at the SLO Noor Dental Clinic. She is a working, single parent with two teenaged children. Her husband passed away a few years ago and she struggles to make ends meet. She had multiple dental problems but always presented a cheerful attitude. In spite of abscesses, root canals and crowns she never complained about any pain. Now several months and many procedures later she is healthier than she has been in years and is able to enjoy life with her children.

- “Patient D” is a farmworker who also cleans office at night. He works 7 days per week. He complained of constant pain throughout his mouth and hadn't been able to eat anything solid for months and couldn't sleep. He was treated with 7 root canal procedures and is pain free. He's back at work ... smiling .... and ready for the fall harvest!.

We look forward to a healthy future ahead for both our current and new patients!

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Ahmad Nooristani', is placed on a light blue rectangular background.

Ahmad Nooristani, M.D.  
Executive Director and CEO  
SLO Noor Foundation

(Budget information on next page)

**FY 2014-15 CBO/PHG GRANT - SLO NOOR FOUNDATION**

	<b>Project Budget</b> (as submitted in application)	<b>Grant Budget Requested</b>	<b>(Overall) Actual Spent</b> 7/1/14 thru 6/30/2015
<b>I. PERSONNEL EXPENSES</b> (associated with the proposed project)			
Clinic Manager – 40hrs/wk (\$4,000 mo.)	\$ 48,000		
Clinic Coordinator – 20hrs/wk (\$2,000 mo)	\$ 24,000		
Physician Asst. – 20hrs/wk (\$4,767 mo)	\$57,200	\$10,000	
Dental Asst.– 20hrs/wk (10 mos @ \$1,936 mo.)	\$ 19,360	\$10,000	
<del>Clinic Dir. – 20hrs/wk (9 mos @ \$3,333mo)</del>	<del>\$ 30,000</del>		
<del>Operation Dir. – 20hrs/wk (9 mos @ \$1,666mo)</del>	<del>\$ 15,000</del>		
(Taxes & Benefits included in figures listed) (We project Volunteer hours value @ \$400,000+)			
<b>Subtotal – Personnel Expenses</b>	<b>\$193,560</b>	<b>\$ 20,000</b>	<b>\$ 166,498</b>
Note: Budget originally planned for Clinic Dir. & Oper. Dir. will be switched to Exec. Dir. payroll for Aug. – Dec. 2015.			Including applying \$19,560 from 10% indirect from column 3)
<b>II. OPERATING EXPENSES</b> (associated with the proposed project)			
<b>Patient Care Expenses</b>	\$152,000	\$90,000	
Supplies (Est. \$74,000)			\$ 32,335
Sm. Equip/Durable Goods (Est.\$10,000)			\$ 806
Maint./Repair (Est. \$5,000)			\$ 558
Haz. Waste Disp. (Est. \$3,000)			\$ 1,762
Diagnostics/Specialty Treatments & Medical Expenses (Est. \$60,000)			\$ 15,040
<i>Possible breakdown, but this is an estimate:</i>			\$ 21,319
100 Mammograms (Avg. \$210 ea = \$21,000)			
100 X-rays (Avg. \$174 ea = \$17,400)			
2 Colonoscopies (Avg. \$2,758 ea = \$5,516)			
12 PSAs (Avg. \$80 ea = \$960)			
10 CT Scan/Neck/Pelvis/Spine (@\$1,216 ea)			
198 Specialty Eyeglass Lens (Avg. \$15 ea)			
<b>Core Operating Expenses</b>	\$113,475	\$15,440	\$ 111,074
<b>Capital Outlay (Perm. Equip) <del>New Vision Lane</del></b>	\$ 32,000	\$ 5,000 (AA)	\$ 0 (B)
<b>Subtotal – Operating Expenses</b>	<b>\$297,475</b>	<b>\$115,440</b>	<b>\$182,894</b>
<b>VI. INDIRECT @10% OF PAID PERSONNEL</b>		<b>\$ 19,560</b>	
<b>Total Grant Project Expenses</b>	<b>\$491,035</b>	<b>\$150,000</b>	<b>\$ 349,692</b>
		Was received. (\$155K had been requested)	

**Note:** The check (of \$150,000) for 2014-15 CBO/PHG funding was received Oct. 2014, so thru 6/30/15, we have spent all of the \$150,000 except \$25,000. \$20K which we plan to apply to Patient Care Expenses for the period of July – Oct. 2015 and \$5K which we plan to apply toward costs to create office for Exec. Director & APA rep will share. That work was done Aug. 2015; invoices anticipated in Sept. 2015. See **(B)** in last column. **(AA)** Original request for \$10K for “Capital Outlay” decreased to \$5K to adjust for the difference in the original total request of \$155K to the \$150K actually received.