Parkland

HOMES
Homeless Outreach Medical Services
Agenda

The agenda for the Board of Managers HOMES meeting of the Dallas County Hospital District is scheduled for **Wednesday, June 24, 2026, at 12:30 PM** at 5200 Harry Hines Blvd, Dallas, Texas, 75235 WISH Building Conference Room 02-175. (If assistance is needed in locating the room, please see the Administration receptionist on the 4th floor, 04-131.) Videoconferencing access is also possible via Webex. That application is available at https://www.webex.com/downloads.html. Teleconferencing access is possible by calling +1-415-655-0001. Both virtual access forms require inputting (meeting number: 2318 161 7385; meeting password: 1234) to join the meeting. The ***Board of Managers HOMES*** reserves the right to exercise discretion and may convene in Executive Session as permitted by Texas Government Code §§551.071 (consultation with attorney), 551.072 (deliberations regarding real estate), 551.074 (personnel matters), 551.076 (deliberations regarding security devices or security audits), 551.078 and/or 551.0785 (deliberations by medical committee or by governmental body that administers a public insurance, health or retirement plan regarding individuals' medical or psychiatric records), 551.085 (deliberation by governing board of certain providers of health care services), 551.087 (deliberation regarding economic development negotiations), 551.088 (deliberation regarding test item); Texas Government Code §418.183 (deliberation of information under §§418.175 – 418.182 for purposes of disaster management or disaster planning); Texas Health & Safety Code §161.032 (medical committee or medical peer review committee records, information or reports; and/or medical committee or medical peer review committee proceedings under Tex. Health & Safety Code Chapter 161 and/or Tex. Occ. Code Chapters 151 and 160); and/or as otherwise authorized by law on any item listed below. The ***Board of Managers HOMES*** may consider any of the agenda items in open or executive session and may continue the meeting as necessary to accomplish the business at the time and place designated by the Chair to reconvene.

		PAGE	TIME (MIN)	PRESENTER(S)
I.	**Determine the Presence of a Quorum /Call to Order/Mission Statement** ***Advance Wellness | Relieve Suffering | Develop and Educate*** **I CARE** **I**ntegrity **C**ompassion and Collaboration **A**ccountability **R**espect **E**quity **Public Comments Regarding Agenda Items** *See public comment registration information and rules at https://www.parklandhospital.com/board-of-managers* The agenda has been developed by the Chief Governance Officer in consultation with the Board Chair and reviewed and affirmed by Counsel.			Chair
II.	**Consent Agenda**			Chair
A.	Appropriate Action Regarding Minutes 2026-05-21 HOMES	3	1	
B.	Appropriate Action Regarding Minutes 2026-06-08 HOMES Advisory Board	7		
III.	**Reports Requiring Deliberation(s) and/or or Possible Action**			
A.	Operations Update (day-to-day operations including but not limited to-staffing/operational challenges/partner site activity)	13	3	Kyla Rankin
B.	Management and Finance Update (volume, revenue, expenses, overtime)	14	3	Kyla Rankin
C.	Governance Update: Organization of HOMES meetings, Upcoming Meetings (HOMES advisory board which meets the 2nd Monday of every other month)	15	3	Kyla Rankin

		PAGE	TIME (MIN)	PRESENTER(S)
D.	Review and Discuss Provisions of the Health Resources and Services Administration (HRSA)	16	3	Kyla Rankin
E.	Review and Discuss Provisions of the Health Resources and Services Administration (HRSA) Compliance Manual Requirements: Chapter 5: Clinical Staffing	17	3	Kyla Rankin
A.	HOMES Policy Approval i. Credential and Privilege Requirements for HOMES Other Clinical Staff ii. FQHC Sliding Fee Discount Program	18	3	Kyla Rankin
B.	Review and Discuss Compliance Quarterly Report	45	3	Melanie Roberts
II.	**Action Items**			
A.	Board May Take Action on Any Agenda Item(s) Above			Chair
III.	**Adjourn**			
A.	Closing Remarks			
B.	Call to Adjourn			

Appropriate Action Regarding Minutes 2026-05-21 HOMES

Parkland

MINUTES

Dallas County Hospital District Board of Managers

HOMES
May 21, 2026

Minutes of the Board of Managers HOMES meeting of the Dallas County Hospital District, held Thursday, May 21, 2026, scheduled for 12:30 pm, in the WISH 02-175 Executive Conference Room at Parkland Health and via Webex. These minutes do not constitute a certified agenda for the meeting.

I. Attendance and Call to Order

Chair Vincent Hall noted that a quorum was physically present and called the meeting to order at 12:32 pm.

Board Member attendees included: Marjorie Petty, JD, Miriam Sharma, RN, Farida Minner, RN, Ramon Miguez, PE, Todd Furniss, JD, Byron Cryer, MD, Eric G. Bing, PhD, MD, Reina Gonzalez, JD, Yasmin Simon, JD and Jeff Tillotson, JD.

Staff Present (via Webex and in-person) included:
Brad Nitschke, Interim EVP Legal Affairs
Brett Moran, Chief Health Officer
Donna Richardson, EVP & CNE
Edmundo Castañeda, EVP & Chief Operating Officer
Fred Cerise, President & Chief Executive Officer (via Webex)
Felicia Miller, EVP & Chief Talent Officer
Jeffery Giles, Sr., Associate Attorney (via Webex)
Jessica Hernandez, Chief Health Equity Officer
James Perez, VP Clinic Operations
Joseph Chang, SVP & CMO
Kareem AbdelFattah, VP & ACMO
Keri Disney-Story, VP/Clinical Finance
Kyla Rankin, HOMES Project Director
Lance Mendiola, VP Construction Facilities Real Estate
Morgan Simmons, Governance Program Manager
Melanie Roberts, SVP/Chief Compliance & Ethics Officer
Michael Lane, SVP Chief Quality and Safety Officer
Natalie Garza Vasquez, Administrative Resident
Roshan Thayil, Sr. Dir. Compliance
Pam Bryant, SVP/Supply Chain Management
Saul Cordero, SVP & Chief Governance & Strategy Officer

Additional Attendees: None

II. Mission Statement

Chair began the meeting by stating the mission statement:
Advance Wellness | Relieve Suffering | Develop and Educate

III. Public Comments Regarding Agenda Items

No members of the public registered for comments regarding the agenda items.

IV. Conflicts of Interest

After reviewing the agenda, the Chair noted zero conflicts of interest for Board Members present.

V. Consent Agenda

A. Appropriate Action Regarding Minutes 2026-04-22 HOMES

Marjorie Petty motioned for the approval of the Consent Agenda. Yasmin Simon seconded the motion. The motion passed unanimously.

VI. Reports Requiring Deliberation(s) or Approval(s)

A. Operations Update (day-to-day) operations, including but not limited to – staffing/operational challenges/partner site activity)
Kyla Rankin provided staffing updates, noting that an internal candidate accepted an offer for a social worker position and is expected to start within the month. Interviews are ongoing for the dental assistant supervisor role, and recruitment is underway for a new registered nurse position following an internal staff member's transition to the float pool to pursue nurse practitioner training. Kyla then discussed operational challenges with the mobile units, citing significant equipment issues with air conditioning and generators that reduced capacity to as few as two operating units at times, compared to the usual five plus dental services. These disruptions resulted in cancellations and downtime; however, mitigation strategies included use of a telehealth-enabled mini mobile unit and redeploying providers to fixed sites while working closely with Fleet Management to restore full functionality.

B. Management and Finance Update – volume, revenue, expenses, and overtime
Kyla mentioned HOMES met the visit expectation for April and overtime is consistently decreasing. Kyla and her team will continue to look at opportunities to decrease overtime through scheduling optimization and workflows.

C. Governance Update: Organization of HOMES meetings, Upcoming Meetings (HOMES advisory board, which meets on the 2nd Monday of every other month)
Kyla mentioned the next HOMES Advisory Board meeting will be held on Monday, June 8th, 2026, at 11:30 AM with a hybrid option available.

D. Review and Discuss Provisions of the Health Resources and Services Administration (HRSA) Annual Review

Kyla reminded the Board of the HRSA Compliance manual, which has 21 chapters, 19 of which are requirements in four areas:

- Clinical
- Financial
- Governance
- Annual training has been added as the 20th requirement.

Kyla further noted that Chapter 18 program monitoring requirements continue to be met through established systems for tracking performance and reporting data. She highlighted that Parkland utilizes tools such as Epic, Workday, and patient satisfaction surveys to monitor utilization, budget, and outcomes, enabling ongoing evaluation of program effectiveness and compliance with HRSA expectations.

E. State of Homelessness Address

Kyla reported that the point-in-time count of individuals experiencing homelessness has continued to decline since 2021, decreasing from 3,541 individuals in the prior year to 3,513 in 2026. While this reflects an overall reduction, Kyla emphasized that the point-in-time count represents a single-night snapshot and may not fully capture the broader dynamics of homelessness. She highlighted that Housing Forward has identified a significant ongoing need, with an 83% increase in households requiring intervention annually and approximately 11,000 households seeking assistance to avoid or exit homelessness.

II. Action Items

A. Board May Take Action on Any Agenda Item(s) Above

VII. Adjourn

With no further business to discuss, Vincent Hall adjourned the meeting at 12:45 pm.

SO RECORDED:

Vincent Hall Chair	Brad Nitschke, JD Assistant Secretary

Appropriate Action Regarding Minutes 2026-06-08 HOMES Advisory Board

HOMES ADVISORY BOARD
MEETING MINUTES

Date: 6/8/2026 **Time:** 11:30 **Location:** Moody Outpatient Center/Zoom

Facilitators: Kyla Rankin

Attendees							
x	Kyla Rankin	x	Charsha Crump	x	Farida Minner	x	Wanda Wonzer
	Dolores Diaz		Margie Roberts		Marjorie Petty		Rebecca Hickom
	Donna Persaud		Elfreida Cole	x	Vicki Gies		
	Micheal Gilot	x	Tim Grigsby	X	Dochele Jennings		
Guests							

	Agenda Item/ Presenter	Discussion	Action items
	Minutes	- Minutes were approved by Mr. Grigsby and Ms. Wonzer.	
	Staffing	- HOMES has hired the Lead Dental Assistant, Sixtos Huerta-Cabrera and Lead Physician, Jamie Williamson, MD. Both positions were internal hires. This will be the first time HOMES has a lead physician, but this is to better align with other departments at Parkland. Our new dentist will also be starting in August. - Since our last staff meeting we have also filled the social worker position, Davetta Cluke, Renee Bennett, MMU Driver and Tasha Williams MPA.	
	Operations	- Stewpot construction is making progress. The design has been completed, and the lease agreements have been finalized. The agreements have to be taken to both leadership and the commissioner's court. We were hoping to be in the facility by end of summer but might be until December. - Kyla shared with the board an image of current progress of the new Salvation Army - Parkland Foundation received some money for SoloProtect Devices. Currently the staff have personal alarms that make a loud noise but the new ones that staff will receive are monitored and will dial 911. Employees will be receiving these devices on 6/18. This cost will be added to HOMES cost center in FY27. For FY26 these will be covered by Parkland Foundation. - All staff will be going through SAMA training. - Residential substance contract is still pending. Because of the grant we must provide these contract services. We are paying a contractor for a per diem fee for beds. - At Stewpot, we had a fixed site but when they moved we had to use our mobile units and the mobile units are showing wear and tear. Last month, we had 18 sessions/9 days where we didn't have clinic. One of the mobile units had an accident at Nexus and our shuttle was also in a minor accident which has not gone in for repairs yet. - On some of our recent patient satisfaction surveys, there were a lot comments about PFA. So HOMES has started a PFA initiative. Shirrita and a HOMES MPA went to Austin Street and collected about 17-20 applications. These applications have been reviewed and submitted. Overall, it was a good turnout.	

Parkland

HOMES ADVISORY BOARD
MEETING MINUTES

Date: 6/8/2026 **Time:** 11:30 **Location:** Moody Outpatient Center/Zoom

Facilitators: Kyla Rankin

		- Ms. Wonzer asked if we had dental services on mobile medical unit and Kyla responded by telling her that we do have a dental unit and when Stewpot opens we will have dental inside. She also asked what if person does not have any income? And Shirrita stated they can fill out an application and they would also be given a good faith estimate. We will see you but Parkland might also want to collect from patient. Mr. Grigsby asked what about prescriptions. Kyla told him patients need to come to RJA Pharmacy because we have a section for HOMES medications. Ms. Wonzer asked what the hours are for RJA and informed her that it is open 24 hours. Mr. Grigsby stated he thinks this PFA initiative would be really helpful. The PFA question has been on the survey since January 2025 and only until recently noticed there were a lot of comments about PFA. - This month we made some schedule changes. We decreased the hours at Dallas Deflection Center to Monday to Friday, 8 hours a day. Productivity never really picked up. Nurses know that first thing on Monday morning they are responsible to see what happened over the weekend. We started going weekly to all St. Jude locations. We removed Vogel Alcove from our weekly schedule and will only go once a month for immunizations. UGM day was reduced to two half day sessions. Jonthan's Place will now rotate with Genesis instead us going weekly. We will now have a session for Grand Prairie as requested by Tammy Chan, Grand Prairie homeless advocate. Grand Prairie will have a half day session once a month.	
	Ambulatory Care Division Update	- Employee satisfaction survey will be coming to staff soon. - In July, they will launch annual training for all Parkand employees. - Parkland had their Celebrate Us our annual employee appreciation. - HOMES leadership encourage staff to listen to Employee town halls. - HOMES continues to work on employee engagement like our communication. We have had IT challenges in the last three weeks and have had a lot of complaints from staff.	
	HRSA Update	- We are applying for FY 2026 Expanding Nutrition Services funding. We are putting a plan to get awarded a $350,000 per center/per year grant. It is a 2-year performance period. FTE's are allowed under this grant but we will probably not do that being that after two years they would have to be let go or we will have to pay of our cost center. Mr. Grigsby asked if we could use the money for current FTE's which Kyla said yes. He also stated he would like another mobile unit to which Kyla replied we probably would not get another unit with that funding.	
	Scorecard	- Kyla showed the board the scorecard for April in which we were over on our visits which is good. In May, we might see it under visits due to the mobile medical units.	
	State of Homeless Address	- The results showed that an 83% increase in number of households that need an intervention each year.	

HOMES ADVISORY BOARD
MEETING MINUTES

Date: 6/8/2026 **Time:** 11:30 **Location:** Moody Outpatient Center/Zoom

Facilitators: Kyla Rankin

	Recognitions & Celebrations	- In May, Parkland had Celebrate Us which is employee appreciation for Parkland employees. During our staff meeting, staff had Baker's Ribs BBQ to celebrate.	
	HOMES in the community	- One of our employees asked if we could please take a mobile unit to his wife's school and we try to accommodate these requests but with our mobile units having issues, we only sent two of our employees. We sent a nurse and a dental assistant to Townsell Elementary.	
	Next meeting	- Next meeting will be August 10, 2026.	

The minutes, records and improvement activities operate under HB 4495b and the Texas Health & Safety Code, Sec. 161.031 & 161.032 affording protection from disclosure or discovery. Records of these committees are not public and are not subject to court subpoena. Records may be made available to persons who have a right to review the records and who are required to keep the information confidential.

Parkland

Homeless Outreach Medical Services Program Monthly Update Report – June 2026

Kyla Rankin, Project Director

Agenda

- Operational Updates
  - Operations
  - Management and Finance
- Governance
- HRSA Update
- HRSA Chapter Review-Chapter 5 – Staffing
- HOMES Policy Approval
- Compliance Quarterly Report

Operational Updates

Staffing

- 1.0 FTE Dental Assistant
- 1.0 FTE Dentist (August start)
- 1.0 FTE Registered Nurse (pending start date)

Operations

- Fixed site updates
- Mobile Unit updates
  - Maintenance/Repairs
  - Tex Oak/Stewpot Shorelines

Management & Finances – May

	Month				Year to Date			
Metric	**Actual**	**Budget**	**Variance**	**% Var**	**Actual**	**Budget**	**Variance**	**% Var**
Visits	2592	3185	(593)	18.6%	23,924	24,830	(906)	(3.6%)
Expenses	$702,432	$786,033	$83,602	10.6%	$5,601,027	$6,295,020	$693,993	11.%
Charges	$2,616,261	$2,215,950	$400,311	18.1%	$21,278,772	$17,276,024	$3,002,748	23.2%
Revenue	$73,929				$650,146			
Commercial	$417				$11,608			
Medicaid	$51,805				$448,307			
Medicare	$21,707				$190,231			
FTE	62.84				61.69			
FTE - OT	0.85	1.12	0.27	(23.9%)	1.13	1.12	(0.00)	(0.4)%

- HRSA grant year: January 1, 2026 to December 31, 2026
- HRSA recommendation is claims billed in less than 30 days.

Governance

- HOMES Advisory Board Meeting:
  - June 8, 2026-11:30 am
  - 4 community members present
  - Next Advisory Board Meeting
  - August 10, 2026-11:30 am

HRSA Update

- Ending the HIV Epidemic-Primary Care HIV Prevention (PCHP)
  - Notice of Award received May 21, 2026
  - $67K award amount
  - Use to be consistent with terms outlined in the initial funding and compliant with post award requirements
  - Budget to be submitted to grants management

- FY27 Expanding Nutrition Services Grant (ENS)
  - forecasting status

HRSA Health Center Program Requirements – Chapter 5: Clinical Staffing

Requirements

- Provide the required primary health services and approved additional health services
- Services are available and accessible promptly and in a manner that will assure continuity of services
- Utilize staff that are qualified by training and experience

HRSA Health Center Program Requirements – Chapter 5: Clinical Staffing

Demonstrating Compliance

- HRSA Approved Form 5A: Services Provided
- Consider the size, demographics, and health needs of its population
  - Community Needs Assessment
  - Staffing Profile
- Operating procedures for all initial and recurring review of credentials and privileges for all clinical staff members
  - Policy: Privileges – Requirements for HRSA Providers
  - Policy: Credential and Privilege Requirements for HOMES Other Clinical Staff
  - Policy: Verification of Privileges
- Maintain files or records for its clinical staff
  - Medical Staff Professional Services
  - Office of Talent Management: Workday

Policy Approval

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program

- Update 2026 Federal Poverty Guidelines

Credential and Privilege Requirements for HOMES and Other Clinical Staff (POP.HMS.001)

- Minor update to reflect Parkland transition to Workday

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program		Published: XX05/XX01/XXX2025
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PURPOSE:

To establish a Sliding Fee Discount Program (SFDP) for HOMES patients who are determined to be at or below 200% of the Federal Poverty Guidelines as published annually by the U.S. Department of Health Human Services. No patient will be denied services due to an individual's inability to pay.

SCOPE:

All Parkland Health ("Parkland") Federally Qualified Health Center (FQHC) Homeless Outreach Medical Services (HOMES) service locations which include only those populations who are considered homeless under 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;
- Who reside in permanent supportive housing or other housing programs that are targeted to homeless populations; and/or
- Who are children and youth at risk of homelessness, homeless veterans, and veterans at risk of homelessness.

PROCEDURE:

1. The Sliding Fee Discount Scale (SFDS) is available to all patients who initiate services with HOMES program. Depending on household size and household income, patients are assigned a discount tier.
2. Parkland will evaluate, at least once every three years, its SFDP by:

   A. Collecting utilization data that allows it to assess the rate at which patients

within each of its discount pay classes, as well as those at or below 100% of Federal Poverty Guidelines (FPG), are accessing the HOMES program.;

B. Utilizing this and, if applicable, other data (for example, results of patient satisfaction surveys or focus groups, surveys of patients at various income levels) to evaluate the effectiveness of its sliding fee discount program in reducing financial barriers to care; and

C. Identifying and implementing changes as needed.

3. The recipient's ability or inability to pay does not affect eligibility and does not impact the provision of care. Parkland does not discriminate in the provision of services to individuals based on their inability to pay, race, color, sex, national origin, disability, religion, or sexual orientation.

4. Discount pay classes are defined as Tiers and are based on current year FPG guidelines as shown in the Appendix.

   A. A full discount is extended to individuals and families with annual incomes at or below 100 percent of the current FPG. No nominal charge will be applied.
   B. Partial discounts are extended to individuals and families with incomes above 100 percent of the current FPG and at or below 200 percent of the current FPG. The discounts are adjusted based on gradation in income levels and include three discount pay classes. HOMES offers a flat fee for Tiers 2 to 4, regardless of services provided at the visit. Due to safety and risk concerns, collections are waived in the field.
   C. No discounts are extended to individuals and families with annual incomes above 200 percent of the current FPG.

5. Eligibility Criteria
   A. Eligibility is self-declared at the homeless service sites by completing the HOMES Initial Evaluation form at each visit.
   B. Coverage: Applicants will be assigned to Tier 1 when there is no reported income.

      1) Homeless Applicants

2) Applicants who state they are homeless, and

3) Have no fixed residence

4) Living in transitional housing

5) Living in an emergency shelter

6) Living in a place not meant for habitation

B. Homeless applicants who do not have proof of Dallas County residency must be able to explain the following during the interview.

1) Living arrangements

2) Reason for no proof of residency

6. Eligibility Screening

A. Patients are screened according to the Parkland Financial Assistance (PFA) program criteria, except for residency and asset testing.

1) Patients are required to attest at the point of service for each visit stating that they are homeless and provide information relative to any other insurance coverage and the sources of any income.

2) Coverage information will be obtained to identify other sources of funding.

3) The SFDS tiers are assigned a flat fee discount and are updated each year using federal poverty guidelines.

4) Once approved, patients are eligible from the date of application approval for up to six months with no retroactive coverage.

5) Status may be updated if the household size or household income changes.

B. At a minimum, a new application must be completed every six months to qualify for the Sliding Fee Discount Program.

7. Patients we have identified with the propensity to pay upon validation may be subject to actions taken to align with our self-pay collections policy.

8. Account Validation

   A. Clinic staff is responsible for on-site screening for existing coverage, verification of coverage and updating of the patient accounting system with applicant's eligibility information at the next HOMES administrative business cycle.

   B. Patients are screened for third-party funding and Parkland will bill insurance for medical visit charges.

   C. Patients with insurance plans that are contracted with Parkland will not be eligible for the Sliding Fee Discount Program and will be responsible for any co- payment, co- insurance or deductible amounts deemed payable by their insurance carrier.

   D. For in-scope services provided via contracts (Form 5A: Services Provided, Column II, Formal Written Contract/Agreement,) HOMES ensures that fees for such services are discounted at the same or greater rate than as would be received if HOMES were to provide the services.

   E. For in-scope services provided via written referral arrangement (Form 5A: Services Provided, Column III, Formal Written Referral Arrangement) HOMES ensures that fees for such services are discounted at the same or greater rate than as would be received if HOMES were to provide the services.

9. The HOMES Sliding Fee Discount Program is reviewed and approved no less than annually by the HOMES Board of Managers to align with the US Department of Health and Human Services Poverty Guidelines.

EQUIPMENT:

N/A

DEFINITIONS:

Household Size: A household or family size for PFA eligibility purposes is defined as

a person living alone or two or more persons living together where legal responsibility for support exists.

Income: Income is defined as earnings over a given period used to support an individual/household unit based on a set of criteria of inclusions and exclusions. Income is distinguished from assets, as assets are a fixed economic resource while income is comprised of earnings.

Group household:

- Married couples including same sex marriage, both legal marriage and common law marriage
- One or both legal parent(s) and their legal children under age 19, including unborn children
- A managing conservator (person designated by a court to have daily responsibility for a child) and a minor child and the conservator's spouse and other legal minor children, if any
- Both Medicaid -ineligible parents of Medicaid-eligible children
- Students between the ages of 18-26, dependent on parental/guardian support and living with parent(s)

One-person household:

- A person aged 18 or older living alone
- An adult living with others who are not legally responsible for the adult's support
- A minor child living alone or with others who are not legally responsible for the child's support
- An inmate in a county jail
- A Medicaid-ineligible spouse
- A Medicaid-ineligible parent whose spouse and/or minor children are

Medicaid- eligible

REFERENCES:

Health Resources & Services Administration, Health Center Program Compliance Manual; https://bphc.hrsa.gov/programrequirements/compliancemanual

The US Department of Health and Human Services Poverty Guidelines; https://aspe.hhs.gov/poverty-guidelines

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program		Published: XX05/XX01/XXX2025
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APPENDIX A

PARKLAND HEALTH - HOMES PROGRAM- SLIDING SCALE DISCOUNT

	FLAT FEE AMOUNT - TIER 1				FLAT FEE AMOUNT - TIER 2				FLAT FEE AMOUNT - TIER 3				FLAT FEE AMOUNT - TIER 4			
	$0				$5				$10				$15			
FAMILY SIZE	PHHS Assistance Tier 1 (100%)				PHHS Assistance Tier 2 (125%)				PHHS Assistance Tier 3 (150%)				PHHS Assistance Tier 4 (200%)			
	Min Income	Max Income	FPG		Min Income	Max Income	FPG		Min Income	Max Income	FPG		Min Income	Max Income	FPG	
1	0	$1,304.17	0%	100%	$1,304.18	$1,630.21	>100%	125%	$1,630.22	$1,956.26	>125%	150%	$1,956.27	$2,608.34	>150%	
2	0	$1,762.50	0%	100%	$1,762.51	$2,203.13	>100%	125%	$2,203.14	$2,643.75	>125%	150%	$2,643.76	$3,525.00	>150%	
3	0	$2,220.83	0%	100%	$2,220.84	$2,776.04	>100%	125%	$2,776.05	$3,331.25	>125%	150%	$3,331.26	$4,441.66	>150%	
4	0	$2,679.17	0%	100%	$2,679.18	$3,348.96	>100%	125%	$3,348.97	$4,018.76	>125%	150%	$4,018.77	$5,358.34	>150%	
5	0	$3,137.50	0%	100%	$3,137.51	$3,921.88	>100%	125%	$3,921.89	$4,706.25	>125%	150%	$4,706.26	$6,275.00	>150%	
6	0	$3,595.83	0%	100%	$3,595.84	$4,494.79	>100%	125%	$4,494.80	$5,393.75	>125%	150%	$5,393.76	$7,191.66	>150%	
7	0	$4,054.17	0%	100%	$4,054.18	$5,067.71	>100%	125%	$5,067.72	$6,081.26	>125%	150%	$6,081.27	$8,108.34	>150%	
8	0	$4,512.50	0%	100%	$4,512.51	$5,640.63	>100%	125%	$5,640.64	$6,768.75	>125%	150%	$6,768.76	$9,025.00	>150%	
9	0	$4,970.83	0%	100%	$4,970.84	$6,213.54	>100%	125%	$6,213.55	$7,456.25	>125%	150%	$7,456.26	$9,941.66	>150%	
10	0	$5,429.17	0%	100%	$5,429.18	$6,786.46	>100%	125%	$6,786.47	$8,143.76	>125%	150%	$8,143.77	$10,858.34	>150%	
11	0	$5,887.50	0%	100%	$5,887.51	$7,359.38	>100%	125%	$7,359.39	$8,831.25	>125%	150%	$8,831.26	$11,775.00	>150%	
12	0	$6,345.83	0%	100%	$6,345.84	$7,932.29	>100%	125%	$7,932.30	$9,518.75	>125%	150%	$9,518.76	$12,691.66	>150%	
13	0	$6,804.17	0%	100%	$6,804.18	$8,505.21	>100%	125%	$8,505.22	$10,206.26	>125%	150%	$10,206.27	$13,608.34	>150%	
14	0	$7,262.50	0%	100%	$7,262.51	$9,078.13	>100%	125%	$9,078.14	$10,893.75	>125%	150%	$10,893.76	$14,525.00	>150%	
15	0	$7,720.83	0%	100%	$7,720.84	$9,651.04	>100%	125%	$9,651.05	$11,581.25	>125%	150%	$11,581.26	$15,441.66	>150%	

Patient responsibility for Tier 1 = $0, Tier 2 = $5, Tier 3 = $10, Tier 4 = $15

NOTE* Poverty Levels based on 2025 Federal Poverty Guidelines issued 01/2025

Income figures represent gross monthly income.

This sliding scale applies only to patients of the Parkland Health HOMES PROGRAM.

Parkland

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program		Published: XX05/XX01/XXX2025
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2026 Poverty Guidelines: 48 Contiguous States (all states except Alaska and Hawaii)

Dollars Per Month

Household/ Family Size	50%	75%	100%	125%	130%	133%	135%	138%	150%	175%	180%	185%
1	665.00	997.50	1,330.00	1,662.50	1,729.00	1,768.90	1,795.50	1,835.40	1,995.00	2,327.50	2,394.00	2,460.50
2	901.67	1,352.50	1,803.33	2,254.17	2,344.33	2,398.43	2,434.50	2,488.60	2,705.00	3,155.83	3,246.00	3,336.17
3	1,138.33	1,707.50	2,276.67	2,845.83	2,959.67	3,027.97	3,073.50	3,141.80	3,415.00	3,984.17	4,098.00	4,211.83
4	1,375.00	2,062.50	2,750.00	3,437.50	3,575.00	3,657.50	3,712.50	3,795.00	4,125.00	4,812.50	4,950.00	5,087.50
5	1,611.67	2,417.50	3,223.33	4,029.17	4,190.33	4,287.03	4,351.50	4,448.20	4,835.00	5,640.83	5,802.00	5,963.17
6	1,848.33	2,772.50	3,696.67	4,620.83	4,805.67	4,916.57	4,990.50	5,101.40	5,545.00	6,469.17	6,654.00	6,838.83
7	2,085.00	3,127.50	4,170.00	5,212.50	5,421.00	5,546.10	5,629.50	5,754.60	6,255.00	7,297.50	7,506.00	7,714.50
8	2,321.67	3,482.50	4,643.33	5,804.17	6,036.33	6,175.63	6,268.50	6,407.80	6,965.00	8,125.83	8,358.00	8,590.17
9	2,558.33	3,837.50	5,116.67	6,395.83	6,651.67	6,805.17	6,907.50	7,061.00	7,675.00	8,954.17	9,210.00	9,465.83
10	2,795.00	4,192.50	5,590.00	6,987.50	7,267.00	7,434.70	7,546.50	7,714.20	8,385.00	9,782.50	10,062.00	10,341.50
11	3,031.67	4,547.50	6,063.33	7,579.17	7,882.33	8,064.23	8,185.50	8,367.40	9,095.00	10,610.83	10,914.00	11,217.17
12	3,268.33	4,902.50	6,536.67	8,170.83	8,497.67	8,693.77	8,824.50	9,020.60	9,805.00	11,439.17	11,766.00	12,092.83
13	3,505.00	5,257.50	7,010.00	8,762.50	9,113.00	9,323.30	9,463.50	9,673.80	10,515.00	12,267.50	12,618.00	12,968.50
14	3,741.67	5,612.50	7,483.33	9,354.17	9,728.33	9,952.83	10,102.50	10,327.00	11,225.00	13,095.83	13,470.00	13,844.17

Household/ Family Size	200%	225%	250%	275%	300%	325%	350%	375%	400%	500%	600%	700%
1	2,660.00	2,992.50	3,325.00	3,657.50	3,990.00	4,322.50	4,655.00	4,987.50	5,320.00	6,650.00	7,980.00	9,310.00
2	3,606.67	4,057.50	4,508.33	4,959.17	5,410.00	5,860.83	6,311.67	6,762.50	7,213.33	9,016.67	10,820.00	12,623.33
3	4,553.33	5,122.50	5,691.67	6,260.83	6,830.00	7,399.17	7,968.33	8,537.50	9,106.67	11,383.33	13,660.00	15,936.67
4	5,500.00	6,187.50	6,875.00	7,562.50	8,250.00	8,937.50	9,625.00	10,312.50	11,000.00	13,750.00	16,500.00	19,250.00
5	6,446.67	7,252.50	8,058.33	8,864.17	9,670.00	10,475.83	11,281.67	12,087.50	12,893.33	16,116.67	19,340.00	22,563.33
6	7,393.33	8,317.50	9,241.67	10,165.83	11,090.00	12,014.17	12,938.33	13,862.50	14,786.67	18,483.33	22,180.00	25,876.67
7	8,340.00	9,382.50	10,425.00	11,467.50	12,510.00	13,552.50	14,595.00	15,637.50	16,680.00	20,850.00	25,020.00	29,190.00
8	9,286.67	10,447.50	11,608.33	12,769.17	13,930.00	15,090.83	16,251.67	17,412.50	18,573.33	23,216.67	27,860.00	32,503.33
9	10,233.33	11,512.50	12,791.67	14,070.83	15,350.00	16,629.17	17,908.33	19,187.50	20,466.67	25,583.33	30,700.00	35,816.67
10	11,180.00	12,577.50	13,975.00	15,372.50	16,770.00	18,167.50	19,565.00	20,962.50	22,360.00	27,950.00	33,540.00	39,130.00
11	12,126.67	13,642.50	15,158.33	16,674.17	18,190.00	19,705.83	21,221.67	22,737.50	24,253.33	30,316.67	36,380.00	42,443.33
12	13,073.33	14,707.50	16,341.67	17,975.83	19,610.00	21,244.17	22,878.33	24,512.50	26,146.67	32,683.33	39,220.00	45,756.67
13	14,020.00	15,772.50	17,525.00	19,277.50	21,030.00	22,782.50	24,535.00	26,287.50	28,040.00	35,050.00	42,060.00	49,070.00
14	14,966.67	16,837.50	18,708.33	20,579.17	22,450.00	24,320.83	26,191.67	28,062.50	29,933.33	37,416.67	44,900.00	52,383.33

Parkland

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program		Published: XX/XX/XXX
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PURPOSE:

To establish a Sliding Fee Discount Program (SFDP) for HOMES patients who are determined to be at or below 200% of the Federal Poverty Guidelines as published annually by the U.S. Department of Health Human Services. No patient will be denied services due to an individual's inability to pay.

SCOPE:

All Parkland Health ("Parkland") Federally Qualified Health Center (FQHC) Homeless Outreach Medical Services (HOMES) service locations which include only those populations who are considered homeless under 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;
- Who reside in permanent supportive housing or other housing programs that are targeted to homeless populations; and/or
- Who are children and youth at risk of homelessness, homeless veterans, and veterans at risk of homelessness.

PROCEDURE:

1. The Sliding Fee Discount Scale (SFDS) is available to all patients who initiate services with HOMES program. Depending on household size and household income, patients are assigned a discount tier.
2. Parkland will evaluate, at least once every three years, its SFDP by:

   A. Collecting utilization data that allows it to assess the rate at which patients

within each of its discount pay classes, as well as those at or below 100% of Federal Poverty Guidelines (FPG), are accessing the HOMES program.;

B. Utilizing this and, if applicable, other data (for example, results of patient satisfaction surveys or focus groups, surveys of patients at various income levels) to evaluate the effectiveness of its sliding fee discount program in reducing financial barriers to care; and

C. Identifying and implementing changes as needed.

3. The recipient's ability or inability to pay does not affect eligibility and does not impact the provision of care. Parkland does not discriminate in the provision of services to individuals based on their inability to pay, race, color, sex, national origin, disability, religion, or sexual orientation.

4. Discount pay classes are defined as Tiers and are based on current year FPG guidelines as shown in the Appendix.

   A. A full discount is extended to individuals and families with annual incomes at or below 100 percent of the current FPG. No nominal charge will be applied.
   B. Partial discounts are extended to individuals and families with incomes above 100 percent of the current FPG and at or below 200 percent of the current FPG. The discounts are adjusted based on gradation in income levels and include three discount pay classes. HOMES offers a flat fee for Tiers 2 to 4, regardless of services provided at the visit. Due to safety and risk concerns, collections are waived in the field.
   C. No discounts are extended to individuals and families with annual incomes above 200 percent of the current FPG.

5. Eligibility Criteria
   A. Eligibility is self-declared at the homeless service sites by completing the HOMES Initial Evaluation form at each visit.
   B. Coverage: Applicants will be assigned to Tier 1 when there is no reported income.

      1) Homeless Applicants

2) Applicants who state they are homeless, and

3) Have no fixed residence

4) Living in transitional housing

5) Living in an emergency shelter

6) Living in a place not meant for habitation

B. Homeless applicants who do not have proof of Dallas County residency must be able to explain the following during the interview.

1) Living arrangements

2) Reason for no proof of residency

6. Eligibility Screening

A. Patients are screened according to the Parkland Financial Assistance (PFA) program criteria, except for residency and asset testing.

1) Patients are required to attest at the point of service for each visit stating that they are homeless and provide information relative to any other insurance coverage and the sources of any income.

2) Coverage information will be obtained to identify other sources of funding.

3) The SFDS tiers are assigned a flat fee discount and are updated each year using federal poverty guidelines.

4) Once approved, patients are eligible from the date of application approval for up to six months with no retroactive coverage.

5) Status may be updated if the household size or household income changes.

B. At a minimum, a new application must be completed every six months to qualify for the Sliding Fee Discount Program.

7. Patients we have identified with the propensity to pay upon validation may be subject to actions taken to align with our self-pay collections policy.

8. Account Validation

   A. Clinic staff is responsible for on-site screening for existing coverage, verification of coverage and updating of the patient accounting system with applicant's eligibility information at the next HOMES administrative business cycle.

   B. Patients are screened for third-party funding and Parkland will bill insurance for medical visit charges.

   C. Patients with insurance plans that are contracted with Parkland will not be eligible for the Sliding Fee Discount Program and will be responsible for any co- payment, co- insurance or deductible amounts deemed payable by their insurance carrier.

   D. For in-scope services provided via contracts (Form 5A: Services Provided, Column II, Formal Written Contract/Agreement,) HOMES ensures that fees for such services are discounted at the same or greater rate than as would be received if HOMES were to provide the services.

   E. For in-scope services provided via written referral arrangement (Form 5A: Services Provided, Column III, Formal Written Referral Arrangement) HOMES ensures that fees for such services are discounted at the same or greater rate than as would be received if HOMES were to provide the services.

9. The HOMES Sliding Fee Discount Program is reviewed and approved no less than annually by the HOMES Board of Managers to align with the US Department of Health and Human Services Poverty Guidelines.

EQUIPMENT:

N/A

DEFINITIONS:

Household Size: A household or family size for PFA eligibility purposes is defined as

a person living alone or two or more persons living together where legal responsibility for support exists.

Income: Income is defined as earnings over a given period used to support an individual/household unit based on a set of criteria of inclusions and exclusions. Income is distinguished from assets, as assets are a fixed economic resource while income is comprised of earnings.

Group household:

- Married couples including same sex marriage, both legal marriage and common law marriage
- One or both legal parent(s) and their legal children under age 19, including unborn children
- A managing conservator (person designated by a court to have daily responsibility for a child) and a minor child and the conservator's spouse and other legal minor children, if any
- Both Medicaid -ineligible parents of Medicaid-eligible children
- Students between the ages of 18-26, dependent on parental/guardian support and living with parent(s)

One-person household:

- A person aged 18 or older living alone
- An adult living with others who are not legally responsible for the adult's support
- A minor child living alone or with others who are not legally responsible for the child's support
- An inmate in a county jail
- A Medicaid-ineligible spouse
- A Medicaid-ineligible parent whose spouse and/or minor children are

Medicaid- eligible

REFERENCES:

Health Resources & Services Administration, Health Center Program Compliance Manual; https://bphc.hrsa.gov/programrequirements/compliancemanual

The US Department of Health and Human Services Poverty Guidelines; https://aspe.hhs.gov/poverty-guidelines

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APPENDIX A

	PARKLAND HEALTH – HOMES PROGRAM- SLIDING SCALE DISCOUNT															
	FLAT FEE AMOUNT - TIER 1				FLAT FEE AMOUNT - TIER 2				FLAT FEE AMOUNT – TIER 3				FLAT FEE AMOUNT - TIER 4			
	$0				$5				$10				$15			
FAMILY SIZE	PHHS Assistance Tier 1 (100%)				PHHS Assistance Tier 2 (125%)				PHHS Assistance Tier 3 (150%)				PHHS Assistance Tier 4 (200%)			
	Min income	Max Income	FPG		Min income	Max Income	FPG		Min income	Max Income	FPG		Min income	Max Income	FPG	
1	0	$1,330.00	0%	100%	$1,331.00	$1,662.50	>100%	125%	$1,662.51	$1,995.00	>125%	150%	$1,995.01	$2,660.00	>150%	200%
2	0	$1,803.33	0%	100%	$1,803.34	$2,254.17	>100%	125%	$2,254.18	$2,705.00	>125%	150%	$2,705.01	$3,606.67	>150%	200%
3	0	$2,276.67	0%	100%	$2,276.68	$2,845.83	>100%	125%	$2,845.84	$3,415.00	>125%	150%	$3,415.01	$4,553.33	>150%	200%
4	0	$2,750.00	0%	100%	$2,750.01	$3,437.50	>100%	125%	$3,437.51	$4,125.00	>125%	150%	$4,125.01	$5,500.00	>150%	200%
5	0	$3,223.33	0%	100%	$3,223.34	$4,029.17	>100%	125%	$4,029.18	$4,835.00	>125%	150%	$4,835.01	$6,446.67	>150%	200%
6	0	$3,696.67	0%	100%	$3,696.68	$4,620.83	>100%	125%	$4,620.84	$5,545.00	>125%	150%	$5,545.01	$7,393.33	>150%	200%
7	0	$4,170.00	0%	100%	$4,170.01	$5,212.50	>100%	125%	$5,212.51	$6,255.00	>125%	150%	$6,255.01	$8,340.00	>150%	200%
8	0	$4,643.33	0%	100%	$4,643.34	$5,804.17	>100%	125%	$5,804.18	$6,965.00	>125%	150%	$6,965.01	$9,286.67	>150%	200%
9	0	$5.116.67	0%	100%	$5,116.68	$6,395.83	>100%	125%	$6,395.84	$7,675.00	>125%	150%	$7,675.01	$10,233.33	>150%	200%
10	0	$5,590.00	0%	100%	$5,590.01	$6,987.50	>100%	125%	$6,987.51	$8,385.00	>125%	150%	$8,385.01	$11,180.00	>150%	200%
11	0	$6,063.33	0%	100%	$6,063.34	$7,579.17	>100%	125%	$7,579.18	$9,095.00	>125%	150%	$9,095.01	$12,126.67	>150%	200%
12	0	$6,536.67	0%	100%	$6,536.68	$8,170.83	>100%	125%	$8,170.84	$9,805.00	>125%	150%	$9,805.01	$13,073.33	>150%	200%
13	0	$7,010.00	0%	100%	$7,010.01	$8,762.50	>100%	125%	$8,762.51	$10,515.00	>125%	150%	$10,515.01	$14,020.00	>150%	200%
14	0	$7,483.33	0%	100%	$7,483.34	$9,354.17	>100%	125%	$9,354.18	$11,225.00	>125%	150%	$11,225.01	$14,966.67	>150%	200%
15	0	$7,956.67	0%	100%	$7,720.84	$9,945.84	>100%	125%	$9,945.85	$11,935.00	>125%	150%	$11,935.01	$15,913.33	>150%	200%
Patient responsibility for Tier 1 = $0, Tier 2 = $5, Tier 3 = $10, Tier 4 = $15																
NOTE*	Poverty Levels based on 20266 Federal Poverty Guidelines issued 01/2026															
	Income figures represent gross monthly income.															
	This sliding scale applies only to patients of the Parkland Health HOMES PROGRAM.															

Credential and Privilege Requirements for HOMES and Other Clinical Staff

Parkland

Credential and Privilege Requirements for HOMES Other Clinical Staff	POP.HMS.001	Published: 02/16/24
HOMES		Page 1 of 4

PURPOSE:

For the Homeless Outreach Medical Services (HOMES) Program to demonstrate compliance of credentialing and privileging procedures in conformity with the standards of the Bureau of Primary Health Care, as defined in the Health Resource and Services Administration's (HRSA) Health Center Program Compliance Manual.

SCOPE:

All Parkland Health ("Parkland") Workforce members.

The scope of this procedure covers the operating procedures for credentialing and privileging of all non-independent licensed or certified practitioners (referred to in the compliance manual as OLCPs) and other clinical staff providing services on behalf of the health center, who are health center employees, individual contractors, or volunteers.

PROCEDURE:

1. The Office of Talent Management (OTM) personnel, operating in various capacities, shall ensure verification of the following credentials, as applicable:
   A. Current licensure, registration, or certification using a primary source;
   B. Education and training for initial credentialing using primary or other sources;
   C. Clinical staff member's identity for initial credentialing using a government-issued picture identification; and
   D. Current documentation of basic life support training.
   E. Completion of a query through the National Practitioner Databank (NPDB)
2. The granting and renewal of privileges will address the following:
   A. Verification of immunization and TB surveillance (through Occupational Health);

B. For initial privileging, verification of current clinical competence via training, education, and, as available, reference reviews;

C. For renewal of privileges, verification of current clinical competence via peer review or other comparable methods (for example, supervisory performance reviews); and

D. Process for denying, modifying or removing privileges based on assessments of clinical competence and/or fitness for duty.

E. Renewal of privileges and clinical competence will occur annually and as needed.

F. Upon hire and on a recurring basis verification of fitness of duty to ensure all clinical staff have the physical and cognitive ability to safely perform their duties.

3. Maintenance of Files for Clinical Staff

A. Credential files for OLCPs and other clinical staff are maintained and securely stored by OTM in accordance with the HOMES Program and the Bureau of Primary Care guidelines, as well as Joint Commission standards.

1) Each OLCP and other clinical staff are responsible for maintaining his/her own licensure/certification, TB surveillance, vaccination, and up-to-date training.

2) The OLCP and other clinical staff assume responsibility for providing OTM staff with renewed credentials prior to the expiration of the credential on file.

3) The employee will be notified by the OTM and/or manager that his/her license will expire and the date of expiration.

4) Any employee who does not present proof of renewal of registration, certification, licensure or other required credentials prior to the expiration date will be suspended without pay until proof of renewal is submitted via ~~through~~ the Parkland Workday portal (Parkland OTM Management System) . If proof is not submitted within 14 calendar days following the date of suspension, the employee will be terminated.

5) Verification of renewed items as described above (primary or secondary source) is required.

6) Employees will notify the OTM and the manager once certification/license has been renewed.

B. The OTM staff will alert the Clinical / Medical Director of the HOMES Program if primary source verification is not obtainable after two attempts, if OLCPs or other clinic staff do not respond to license verification requests in a timely manner after reasonable follow up has been attempted, if an OLCP or other clinical staff has allowed a credential to expire, or which seem otherwise notable.

4. If the HOMES Program has contracts with provider organizations (for example, group practices, locum tenens staffing agencies, training programs) or formal, written referral agreements with other provider organizations that provide services within its scope of project, the health center ensures that such providers are:

   A. Licensed, certified, or registered as verified through a credentialing process, in accordance with applicable Federal, state, and local laws; and

   B. Competent and fit to perform the contracted or referred services, as assessed through a privileging process.

DEFINITIONS:

Health Resources and Services Administration (HRSA) : An Agency of the Department of Health and Human Services

Licensed Independent Practitioner (LIP): Any individual permitted by law and the organization to practice independently and provide care and services without direction or supervision, within the scope of the individual's license and consistent with individually granted clinical credentials (e.g. physician, dentist, nurse practitioner).

Other Licensed Clinical Practitioner (OLCP): Any individual that is licensed to provide clinical care that is NOT an LIP.

Workforce Member: An officer, board member, employee, volunteer, contractor, vendor, trainee, or other person whose conduct, in the performance of work for

Parkland, is under the direct control of Parkland or a Parkland Affiliate, whether they are paid by Parkland or a Parkland Affiliate. “Workforce member” also includes all physicians, other members of the medical staff, and non-physician clinical providers, whether employed by Parkland.

REFERENCES:

Bureau of Primary Health Care, as defined in HRSA’s Health Center Program Compliance Manual .

“Registration, Certification & Licensure Maintenance”, Policy 5000-1301, Parkland Health and Hospital System

Parkland

Credential and Privilege Requirements for HOMES Other Clinical Staff	POP.HMS.001	Published: 02/16/24
HOMES		Page 1 of 4

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   E. Completion of a query through the National Practitioner Databank (NPDB)
2. The granting and renewal of privileges will address the following:
   A. Verification of immunization and TB surveillance (through Occupational Health);

B. For initial privileging, verification of current clinical competence via training, education, and, as available, reference reviews;

C. For renewal of privileges, verification of current clinical competence via peer review or other comparable methods (for example, supervisory performance reviews); and

D. Process for denying, modifying or removing privileges based on assessments of clinical competence and/or fitness for duty.

E. Renewal of privileges and clinical competence will occur annually and as needed.

F. Upon hire and on a recurring basis verification of fitness of duty to ensure all clinical staff have the physical and cognitive ability to safely perform their duties.

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1) Each OLCP and other clinical staff are responsible for maintaining his/her own licensure/certification, TB surveillance, vaccination, and up-to-date training.

2) The OLCP and other clinical staff assume responsibility for providing OTM staff with renewed credentials prior to the expiration of the credential on file.

3) The employee will be notified by the OTM and/or manager that his/her license will expire and the date of expiration.

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5) Verification of renewed items as described above (primary or secondary source) is required.

6) Employees will notify the OTM and the manager once certification/license has been renewed.

B. The OTM staff will alert the Clinical / Medical Director of the HOMES Program if primary source verification is not obtainable after two attempts, if OLCPs or other clinic staff do not respond to license verification requests in a timely manner after reasonable follow up has been attempted, if an OLCP or other clinical staff has allowed a credential to expire, or which seem otherwise notable.

4. If the HOMES Program has contracts with provider organizations (for example, group practices, locum tenens staffing agencies, training programs) or formal, written referral agreements with other provider organizations that provide services within its scope of project, the health center ensures that such providers are:

   A. Licensed, certified, or registered as verified through a credentialing process, in accordance with applicable Federal, state, and local laws; and

   B. Competent and fit to perform the contracted or referred services, as assessed through a privileging process.

DEFINITIONS:

Health Resources and Services Administration (HRSA) : An Agency of the Department of Health and Human Services

Licensed Independent Practitioner (LIP): Any individual permitted by law and the organization to practice independently and provide care and services without direction or supervision, within the scope of the individual's license and consistent with individually granted clinical credentials (e.g. physician, dentist, nurse practitioner).

Other Licensed Clinical Practitioner (OLCP): Any individual that is licensed to provide clinical care that is NOT an LIP.

Workforce Member: An officer, board member, employee, volunteer, contractor, vendor, trainee, or other person whose conduct, in the performance of work for

Parkland, is under the direct control of Parkland or a Parkland Affiliate, whether they are paid by Parkland or a Parkland Affiliate. “Workforce member” also includes all physicians, other members of the medical staff, and non-physician clinical providers, whether employed by Parkland.

REFERENCES:

Bureau of Primary Health Care, as defined in HRSA’s Health Center Program Compliance Manual .

“Registration, Certification & Licensure Maintenance”, Policy 5000-1301, Parkland Health and Hospital System

Compliance Report

Parkland Health Board of Managers HOMES Meeting
June 24, 2026

Compliance and Ethics Training

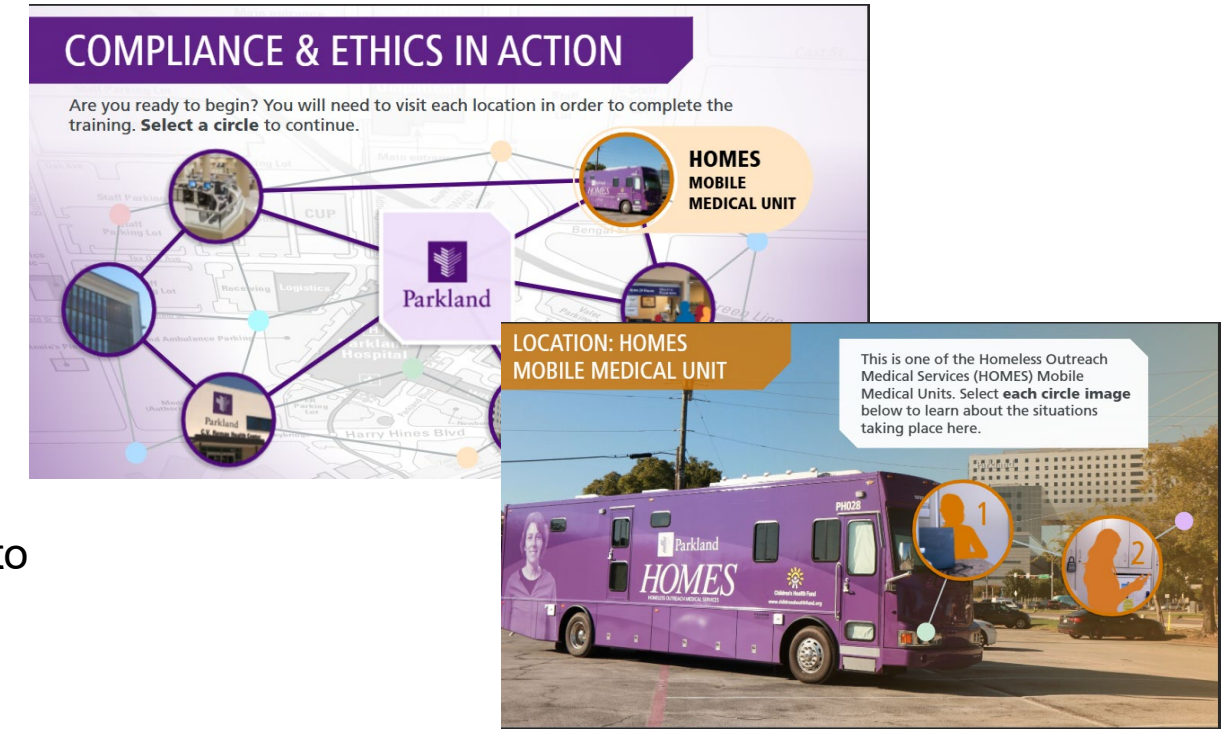
Timeline	Launch Date	Assigned Due Date	Grace Period Begin/End Dates	Date Corrective Action Procedures Begin
6-Week Schedule	July 8th	August 26th	None Planned for FY26	August 27th

Annual Compliance & Ethics Training – Employees, Select Contract Workers & Select Physician Leaders

- 60-75 minutes of content based on job role/scope

Annual Compliance & Ethics Training – Board Members

- 60 minutes of content specific to board roles
- Delivery method for the Board of Managers/HOMES will be live; recordings will be available to those unable to attend (training dates TBD)



Compliance and Ethics Training

System – Wide Training

General Ethics & Compliance

- Course update with minor revisions
- EMTALA-focused, tailored by role/location

General Information Privacy

- Updated privacy content addressing
  - NPP revisions
  - Device Recording expectations
  - Use of AI tools

Risk-Based & Role-Specific Training

Non-Permanent Employees

Billing & Reimbursement

Employee Health Plan

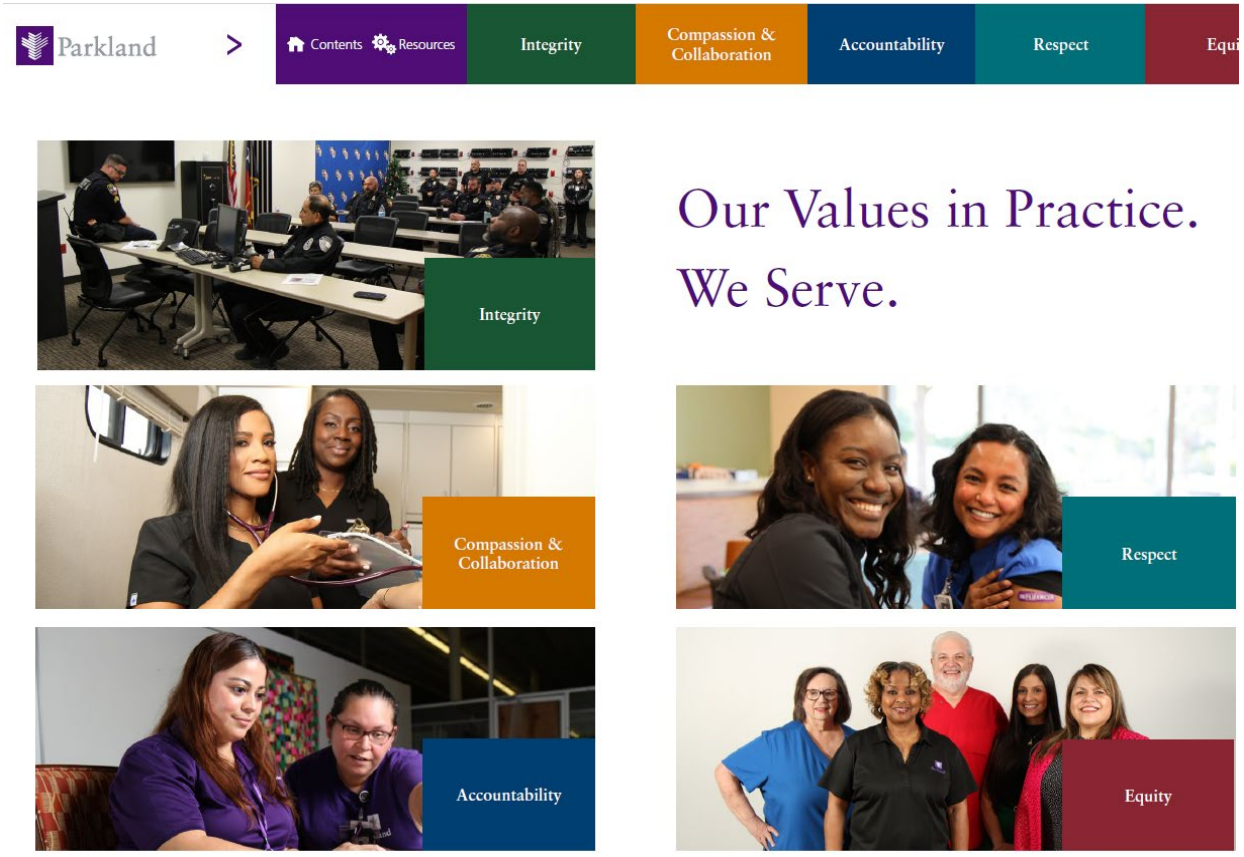
Focus Arrangements

Board & Governance

- Board of Managers/HOMES
- Foundation, Auxiliary, and PCCI Boards

Code of Conduct and Ethics Revisions
Executive Summary of Key Changes

- Expands scope and specificity, particularly around Artificial Intelligence, Health Equity, LEP access, and anti-discrimination
- Adds a new affiliate entity (Auxiliary) and refines affiliate language
- Strengthens compliance and governance language in several areas
- Modernizes HIPAA/PHI definitions and expectations
- Refines patient rights and interpreter use rules
- Clarifies limitations on advocacy, AI use, and data handling
- Updates to formatting, images of Workforce Members, policy references



Code of Conduct and Ethics Revisions
Expanded Summary of Key Changes

Code Section	Change Summary	Previous Version	New Draft
Applicability – Affiliate Organizations	Added the Parkland Auxiliary	Affiliate organizations listed: PCCI, PCHP, Parkland Health Foundation	Affiliate organizations expanded to include the Parkland Auxiliary, with description of its charitable and operational support role
Accountability – Appropriately Using Artificial Intelligence (NEW)	New section establishing governance, permitted use, and accountability for AI; aligned with AI Resolution.	No guidance on Artificial Intelligence included	New section defining AI, limiting use to Parkland-provided tools, requiring training, minimum necessary use, validation of outputs, and escalation of concerns
Integrity – Complying with Laws and Regulations	Expanded civil rights and language-access compliance expectations	General compliance with healthcare laws and regulations	Explicit reference to Title VI of the Civil Rights Act and meaningful access for Limited English Proficient (LEP) patients
Compassion & Collaboration – Protecting Patient Rights	Interpreter guidance updated to allow limited, documented exceptions	Family members and friends should not be used as medical interpreters; minors prohibited	Allows interpreter exceptions in limited circumstances at patient request with consent and required documentation; minors still generally prohibited
Compassion & Collaboration – Safeguarding Protected Health Information	Expanded definition and scope of PHI	PHI described primarily as medical, demographic, and billing information	PHI scope expanded to include device identifiers, biometric data, expanded identifiers, and additional privacy considerations
Equity – Section Structure	Reframed Equity section focus	“Promoting Diversity and Inclusion” with additional subsections	Reframed as “Promoting Health Equity / Health Equity Advancement”; substance abuse removed from Equity structure
Equity – Anti-Discrimination	Anti-Discrimination provisions significantly expanded and clarified	General anti-discrimination statements	Detailed anti-discrimination provisions covering all employment actions with expanded protected characteristics and clear legal framing

Compliance Program Activities Q3 and Q4

Culture & Engagement

Volunteer Initiative Participation
(Food Pantry at the Stewpot)

Celebrate US

Business Partner Program

Liaison Network

Risk & Oversight

Joint Enterprise Risk Assessment

CMS Open Payments Reporting

Program Effectiveness Review
Phase 2 - Ankura

Education & Transparency

Conflicts of Interest Campaign

Compliance & Ethics Training

Privacy Training
(Focused Audiences)

Focus Arrangement Training

Compliance On Demand

Volunteer Initiative Participation

Food Pantry at the Stewpot – May 7, 2026

Questions?

Parkland | Care. Compassion. Community.