Clinic/Organization: Space Coast Volunteers in Medicine

1. Total Number of Medical Patient Visits: _______4,332

(A patient visit is a face-to-face meeting between a patient and a health care professional in order to receive medical services.)

2. Total Number of Dental Patient Visits _419

(A patient visit is a face-to-face meeting between a patient and a health care professional in order to receive dental services.)

3. Total Number of Patient Visits __4751

4. Total Number of Active Licensed Health Care Providers Participating in your organization__ Volunteer (If hours are documented.): _______81

(Total number of 766 and non-766 providers that are actively participating in your clinic.)

5. Total Number of Licensed Healthcare Provider Volunteer Hours_7,781.00

6. Total Dollar Value of Services for Licensed Healthcare Providers_____$945,202 (To be determined by: (1) An hourly rate based on the figures below; (2) Actual cost of services; or (3) Value based on visits or referrals.)

7. Total Dollar Value of Donations: ____$1,207,268.77 _____

(Donations include items such as: monies, pharmaceuticals, eyeglasses, labs, x-rays, equipment, etc., do not include grants.)

8. Total Number of General Staff Volunteers : _______38

(Volunteers performing general duties, answer the phone, medical records, make copies, repairs, etc.)

9. Total Number of General Staff Volunteer Hours: ______5,927

10. Total Value of Services for General Staff Volunteers: _____$136,735.89

11. Total Value of Service: _____$2,289,206.66

(Add lines 4, 5, and 8 together.)

12. Total Number of Active DOH 110 Volunteers: _________26

(Include only the DOH 110 volunteers that have applications on file who complete the eligibility and referral process for DOH.)

13. Total Number of DOH 110 Volunteer Hours: _______1858.75
14. Total Dollar Value of Services for DOH 110 Volunteers: _____$42,881.36

(Multiply line 11 by $21.79) This value will be reported under the CHD.

The following values per hour are offered as a suggested guideline for your use in estimating the value of your volunteer services.

<table>
<thead>
<tr>
<th>Professional</th>
<th>Hourly Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician</td>
<td>$250/Hour</td>
</tr>
<tr>
<td>Optometrist</td>
<td>$50/Hour</td>
</tr>
<tr>
<td>Dentist</td>
<td>$200/Hour</td>
</tr>
<tr>
<td>ARNP/PA</td>
<td>$75/Hour</td>
</tr>
<tr>
<td>Respiratory Therapist</td>
<td>$40/Hour</td>
</tr>
<tr>
<td>Chiropractor</td>
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</tr>
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<td>$25/Hour</td>
</tr>
<tr>
<td>Physical Therapist</td>
<td>$60/Hour</td>
</tr>
<tr>
<td>Support Staff</td>
<td>$21.79/Hour</td>
</tr>
<tr>
<td>Social Worker</td>
<td>$50/Hour</td>
</tr>
</tbody>
</table>

TOTAL VALUE OF SERVICES PROVIDED BY SCVIM: $2,289,206.66

VHCPP ANNUAL REPORTING FORM

(July 1, 2014 – June 30, 2015)

Clinic/Organization: Space Coast Volunteers in Medicine

1. Total Number of Patient Visits: 1,556

(A patient visit is a face-to-face meeting between a patient and a health care professional in order to receive medical services.)

2. Total Number of Active Licensed Health Care Providers Participating in Your Organization: 70

(Total number of 766 and non-766 providers that are actively participating in your clinic.)

3. Total Number of Licensed Health Care Provider Volunteer Hours: (If hours are documented.)

4. Total Dollar Value of Services for Licensed Health Care Providers: _____$463,143

Providers: (To be determined by: (1) An hourly rate based on the figures below; (2) Actual cost of services; or (3) Value based on visits or referrals.)

5. Total Dollar Value of Donations: _____$219,623 _____

(Donations include items such as: monies, pharmaceuticals, eyeglasses,
labs, x-rays, equipment, etc., do not include grants.)

6. Total Number of General Staff Volunteers: ______34
   (Volunteers performing general duties, answer the phone, medical
   records, make copies, repairs, etc.)

7. Total Number of General Staff Volunteer Hours: _____6068
8. Total Value of Services for General Staff Volunteers: _____$139,988
9. Total Value of Service: _____$822,754
   (Add lines 4, 5, and 8 together.)
10. Total Number of Active DOH 110 Volunteers: _________25
    (Include only the DOH 110 volunteers that have applications on file who
    complete the eligibility and referral process for DOH.)

11. Total Number of DOH 110 Volunteer Hours: _______854
    (110 volunteers hours doing patient eligibility and referrals only.)
12. Total Dollar Value of Services for DOH 110 Volunteers: _____$19,702
    (Multiply line 11 by $21.79) This value will be reported under the CHD.

The following values per hour are offered as a suggested guideline for your use in estimating the
value of your volunteer services.

Physician: $250/Hour  Optometrist: $50/Hour  LPN: $25/Hour
Dentist: $200/Hour  ARNP/PA: $75/Hour  Respiratory Therpt: $40/Hour
Chiropractor: $90/Hour  Registered Nurse: $35/Hour  Dental Hygienist: $25/Hour
Pharmacist: $75/Hour  Physical Therapist: $60/Hour  Support Staff: $21.79/Hour
Social Worker: $ 50/Hour

TOTAL VALUE OF SERVICES PROVIDED BY SCVIM: $822,754

(July 1, 2013 – June 30, 2014)

Clinic/Organization: Space Coast Volunteers in Medicine

1. Total Number of Patient Visits: _______2,047
   (A patient visit is a face-to-face meeting between a patient and a
   health care professional in order to receive medical services.)

2. Total Number of Active Licensed Health Care Providers
   Participating in Your Organization: ________81
   (Total number of 766 and non-766 providers that are actively
participating in your clinic.)

3. **Total Number of Licensed Health Care Provider Volunteer Hours:** (If hours are documented.)

4. **Total Dollar Value of Services for Licensed Health Care Providers:** $472,519

   **Providers:** To be determined by: (1) An hourly rate based on the figures below; (2) Actual cost of services; or (3) Value based on visits or referrals.

5. **Total Dollar Value of Donations:** $121,973

   (Donations include items such as: monies, pharmaceuticals, eyeglasses, labs, x-rays, equipment, etc., **do not include grants**.)

6. **Total Number of General Staff Volunteers:** 44

   (Volunteers performing general duties, answer the phone, medical records, make copies, repairs, etc.)

7. **Total Number of General Staff Volunteer Hours:** 6,861

8. **Total Value of Services for General Staff Volunteers:** $151,902.54

9. **Total Value of Service:** $746,394.54

   (Add lines 4, 5, and 8 together.)

10. **Total Number of Active DOH 110 Volunteers:** 21

    (Include only the DOH 110 volunteers that have applications on file who complete the eligibility and referral process for DOH.)

11. **Total Number of DOH 110 Volunteer Hours:** 682

    (110 volunteers hours doing patient eligibility and referrals only.)

12. **Total Dollar Value of Services for DOH 110 Volunteers:** $15,099.48

    (Multiply line 11 by $21.79) This value will be reported under the CHD.

The following values per hour are offered as a suggested guideline for your use in estimating the value of your volunteer services.

- **Physician:** $250/ Hour
- **Optometrist:** $50/ Hour
- **LPN:** $25/ Hour
- **Dentist:** $200/ Hour
- **ARNP/PA:** $75/ Hour
- **Respiratory Therpt:** $40/ Hour
- **Chiropractor:** $90/ Hour
- **Registered Nurse:** $35/ Hour
- **Dental Hygienist:** $25/ Hour
- **Pharmacist:** $75/ Hour
- **Physical Therapist:** $60/ Hour
- **Support Staff:** $21.79/ Hour
- **Social Worker:** $50/ Hour

rev. 08/22/16
TOTAL VALUE OF SERVICES PROVIDED BY SCVIM: $746,394.54

VHCPP ANNUAL REPORTING FORM
(July 1, 2012 – June 30, 2013)

Clinic/Organization: Space Coast Volunteers in Medicine

1. Total Number of Patient Visits: _______2,811
   (A patient visit is a face-to-face meeting between a patient and a health care professional in order to receive medical services.)

2. Total Number of Active Licensed Health Care Providers Participating in Your Organization: _______85
   (Total number of 766 and non-766 providers that are actively participating in your clinic.)

3. Total Number of Licensed Health Care Provider Volunteer Hours: (If hours are documented.)

4. Total Dollar Value of Services for Licensed Health Care Providers: _______$583,165
   (To be determined by: (1) An hourly rate based on the figures below; (2) Actual cost of services; or (3) Value based on visits or referrals.)

5. Total Dollar Value of Donations: ____$183,702 _____
   (Donations include items such as: monies, pharmaceuticals, eyeglasses, labs, x-rays, equipment, etc., do not include grants.)

6. Total Number of General Staff Volunteers: _______49
   (Volunteers performing general duties, answer the phone, medical records, make copies, repairs, etc.)

7. Total Number of General Staff Volunteer Hours: _______8,179

8. Total Value of Services for General Staff Volunteers: _______$178,220
   (Multiple line 7 by $21.79)

9. Total Value of Service: _______$945,087
   (Add lines 4, 5, and 8 together.)

10. Total Number of Active DOH 110 Volunteers: _______22
    (Include only the DOH 110 volunteers that have applications on file who complete the eligibility and referral process for DOH.)
11. Total Number of DOH 110 Volunteer Hours: ______1,155
(110 volunteers hours doing patient eligibility and referrals only.)

12. Total Dollar Value of Services for DOH 110 Volunteers: _____$25,167
(Multiply line 11 by $21.79) This value will be reported under the CHD.

The following values per hour are offered as a suggested guideline for your use in estimating the value of your volunteer services.

Physician: $250/Hour  
Optometrist: $50/Hour  
LPN: $25/Hour

Dentist: $200/Hour  
ARNP/PA: $75/Hour  
Respiratory Therpt: $40/Hour

Chiropractor: $90/Hour  
Registered Nurse: $35/Hour  
Dental Hygienist: $25/Hour

Pharmacist: $75/Hour  
Physical Therapist: $60/Hour  
Support Staff: $21.79/Hour

Social Worker: $50/Hour

TOTAL VALUE OF SERVICES PROVIDED BY SCVIM: $945,087

VHCPP ANNUAL REPORTING FORM

REPORTING PERIOD: July 1, 2011 TO: June 30, 2012
(To be submitted to the Regional Coordinator by the July 30, 2012)

Clinic/Organization: Space Coast Volunteers in Medicine

1. Total Number of Patient Visits: 3006
(A patient visit is a face-to-face meeting between a patient and a health care professional in order to receive medical services.)

2. Total Number of Licensed Health Care Providers Participating in Your Organization: 91
(Total number of 766 and non-766 providers that are actively participating in your clinic.)

3. Total Number of Licensed Health Care Provider Volunteer Hours: 5141
(If hours are documented.)

4. Total Dollar Value of Services for Licensed Health Care Providers: $604,694
(To be determined by: (1) An hourly rate based on the figures below; (2) Actual cost of services; or (3) Value based on visits)
5. **Total Dollar Value of Donations: $141,337**

(Donations include items such as: monies, pharmaceuticals, eyeglasses, labs, x-rays, equipment, etc., do not include grants.)

6. **Total Number of General Volunteers:** 138

(Volunteers performing general duties, answer the phone, medical records, make copies, repairs, etc.)

7. **Total Number of General Volunteer Hours:** 11,136

8. **Total Value of Services for General Volunteers:** $237,870

(Multiple line 7 by $21.36)

9. **Total Value of Service:** $983,901

(Add lines 4, 5, and 8 together.)

10. **Total Number of E&R SPECIALISTS/110 Volunteers:** 36

(Include only the DOH 110 volunteers that have applications on file who have completed the ELIGIBILITY AND REFERRAL process for DOH.)

11. **Total Number of E&R SPECIALISTS/110 Volunteer Hours:** 2,946

(110 volunteers hours doing patient eligibility and referrals only.)

12. **Total Dollar Value of Services for E&R SPECIALISTS/110 Volunteers:** $62,927

(Multiply line 11 by $21.36) This value will be reported under the CHD.

The following values per hour are offered as a suggested guideline for your use in estimating the value of your volunteer services.

- **Physician:** $250/Hour
- **Optometrist:** $50/Hour
- **LPN:** $25/Hour
- **Dentist:** $200/Hour
- **ARNP/PA:** $75/Hour
- **Respiratory Therpt.:** $40/Hour
- **Chiropractor:** $90/Hour
- **Registered Nurse:** $35/Hour
- **Dental Hygienist:** $25/Hour
- **Pharmacist:** $75/Hour
- **Physical Therapist:** $60/Hour
- **Support Staff:** $21.36/ Hour
- **Social Worker:** $50/Hour

**rev. 08/22/16**  
**TOTAL PROGRAM VALUE of SERVICES FOR SCVIM CLINIC: $983,901**

**VHCPP ANNUAL REPORTING FORM**
REPORTING PERIOD: July 1, 2010 TO: June 30, 2011 (Clinic Opened April 2011)
(To be submitted to the Regional Coordinator by the July 30, 2011)

Clinic/Organization: Space Coast Volunteers in Medicine

1. Total Number of Patient Visits: 293
   (A patient visit is a face-to-face meeting between a patient and a
   health care professional in order to receive medical services.)

2. Total Number of Licensed Health Care Providers
   Participating in Your Organization: 10
   (Total number of 766 and non-766 providers that are actively
   participating in your clinic.)

3. Total Number of Licensed Health Care Provider Volunteer Hours: 376
   (If hours are documented.)

4. Total Dollar Value of Services for Licensed Health Care Providers: $62,100
   (To be determined by: (1) An hourly rate based on the figures
   below; (2) Actual cost of services; or (3) Value based on visits
   or referrals.)

5. Total Dollar Value of Donations: $ 198,550
   (Donations include items such as: monies, pharmaceuticals, eyeglasses,
   labs, x-rays, equipment, etc., do not include grants.)

6. Total Number of General Volunteers: 119
   (Volunteers performing general duties, answer the phone, medical
   records, make copies, repairs, etc.)

7. Total Number of General Volunteer Hours: 3,110.50

8. Total Value of Services for General Volunteers: $ 66,440.72
   (Multiple line 7 by $21.36)

9. Total Value of Service: $ 327,090.72
   (Add lines 4, 5, and 8 together.)

10. Total Number of E&R SPECIALISTS/110 Volunteers: 33
    (Include only the DOH 110 volunteers that have applications on file who
    have completed the ELIGIBILITY AND REFERRAL process for DOH.)

11. Total Number of E&R SPECIALISTS/110 Volunteer Hours: 1,205.25
110 volunteers hours doing patient eligibility and referrals only.

12. **Total Dollar Value of Services for E&R SPECIALISTS/110 Volunteers: $25,744.14**

(Multiply line 11 by $21.36) This value will be reported under the CHD.

The following values per hour are offered as a suggested guideline for your use in estimating the value of your volunteer services.

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<tr>
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<th>Rate</th>
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<td>Physician</td>
<td>$250/Hour</td>
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</tbody>
</table>

*rev. 08/22/16 TOTAL PROGRAM VALUE of SERVICES FOR SCVIM CLINIC: $25,744.14*