OKLAHOMA CITY INDIAN CLINIC

YEAR IN REVIEW

HONORING AND RESPECTING NATIVE TRADITIONS





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Find us on:

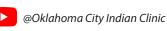




@OKCIndianClinic



@OKCIndianClinic







Introduction

Alahoma City Indian Clinic (OKCIC) is the largest urban Indian health care facility in the United States of America and serves as the AAAHC Medical and Dental home to over 22,000 patients each year. Patients from over 200 federally recognized tribes receive various services, including medical, dental, pediatrics, prenatal, pharmacy, optometry, physical fitness, nutrition, family programs, behavioral health services and more. These patients receive excellent, culturally sensitive health care from over 300 highly qualified staff members practicing at the top of their licensure.

The CEO's initiative for 2021 was a culture of safety. With the continuation of the COVID-19 pandemic, more than ever, the topic of safety is at the forefront of everyone's minds. OKCIC has created many safety measures to ensure the safety of patients and employees. Some of the safety measures include the creation of a standalone respiratory clinic for adult and pediatric patients. This clinic offers drive-thru visits for

patients experiencing respiratory symptoms, including COVID-19. Mandatory masking of employees and patients. Technology such as disinfecting robots that clean high-traffic areas and virtual visits also helped keep patients safe during the pandemic.

At the beginning of 2021, COVID-19 vaccines

became available to the public. OKCIC quickly began administering vaccines to patients and the community. Two mass vaccination events were held at OKCIC early in the year, and



many elated people of all ages received these life-saving vaccines. Additionally, OKCIC staff went out into the community and hosted 37 COVID-19 vaccination outreach events, bringing vaccinations to people that may have otherwise not had easy access to vaccines.

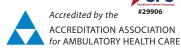


In response to continued growth and needs, OKCIC has created 70 new positions in 2021. Over half of these new staff members are a direct response to the demand for additional health and wellness services due to COVID-19. Additionally, new services were added in 2021 to meet patients' needs. New services include the Medication-Assisted Treatment Clinic (MAT) to treat opioid misuse; and the Behavioral Health department expanded to offer child psychiatry and developmental testing. To mitigate the spread of COVID-19, the drive-thru COVID-19 respiratory clinic was built, and a Contact Tracing Team was assembled. Denture services are now available to patients with a need for them. Funds for denture services were raised during OKCIC's annual Red Feather Gala fundraiser.

OKCIC strives to reach its vision as the national model for American Indian health care. For the 11th year, OKCIC has been voted one of the Best Places to Work in Oklahoma. As a part of the journey to excellence, OKCIC applied to Quality Texas Foundation to be examined and improve performance and received Achievement Level recognition, which is the second-highest award. During a year of constant uncertainty and change, OKCIC met 72% of the GPRA (Government Performance and Results Act) performance measure goals.

The COVID-19 pandemic pushed OKCIC staff to implement creative solutions to continue providing American Indian people with excellent health care. As a result, OKCIC is more prepared for crises in the future, and patients' access to health and wellness services is more flexible than ever before. Although masks are still required on campus, and rigorous disinfection procedures are performed, these procedures ensure a high level of safety for both patients and staff. As growth continues, the goal of OKCIC staff and board of directors is to continue offering the highest level of health and wellness services to the American Indian patients we serve.





18TH ANNUAL OKLAHOMA CITY AREA INDIAN HEALTH SERVICE, TRIBAL AND URBAN AWARDS

Several OKCIC employees were honored with a total of seven awards at the 18th Annual Oklahoma City Area Indian Health Service, Tribal and Urban (OCAIHS I/T/U) Awards Virtual Ceremony held on YouTube. The OCAIHS I/T/U awards recognize the individual and team efforts that contribute to the improvement of Indian Health Service, Tribal and Urban Health programs.

Technician, received the Merit Award Urban; and Staci Deland, RN Care Manager, received the Peer Recognition Award.

Lastly, all of OKCIC's staff received a special recognition for its response to the COVID-19 pandemic and was presented the COVID-19 Pandemic Response Award.

Awardees include: Pharmacy
Department received the Group
Excellence in Customer Service
Award; Robin Parker, Director of Policy
Development, received the Individual
Lifetime Achievement Award; Kyle Gray,
PA-C, received the Individual Excellence
in Customer Service Award Urban; Kelsey
Tangey, Pediatric Dietitian, received the
Exceptional Individual Performance
Award Health Promotion and Wellness;
Dainell Wilson, Pharmacy Billing





GPRA Measures Results

The Government Performance and Results Act (GPRA) is a federal law. It requires Federal agencies to demonstrate that they are using their funds effectively toward meeting their missions.

2021 GPRA Measure	OKCIC Target	OKCIC Result
Diabetes		
A1c > 09 (Poor Control)	16.8%	16.8%
Statin Therapy (DM)	75.0%	77.1%
Nephropathy Assessment	48.1%	65.5%
Retinopathy Assessment	53.5%	73.1%
Immunizations		
Childhood IZ (4:3:1:3/4:3:1:4)	42.8%	52.7%
Dental		
Dental Sealants (2-15)	13.8%	26.6%
Topical Fluoride (1-15)	27.6%	44.9%
Cancer Screening		
Pap Smear Rates (24-64 F)	38.4%	56.5%
Mammogram Rates (52-64 F)	43.4%	46.3%
Colorectal Cancer Screen (50-75)	32.6%	46.7%
Tobacco Cessation Counseling	34.0%	50.3%
Prevention		
Statin Therapy (CVD)	62.0%	63.6%
Prenatal HIV Testing	98.0%	100.0%
Universal HIV Screen - Ever (13-64)	79.0%	79.1%
Breastfeeding (2 mos exclusive/mostly)	40.0%	40.6%
Behavioral Health		
Alcohol Screening (9-75)	39.0%	51.8%
IPV/DV Screening (14-46 F)	37.5%	51.7%
Depression Screen (18+)	49.4%	52.4%
Depression Screen (12-18)	43.2%	58.0%

Medical Home Care Teams

Gold Care Team

Gold care team specializes in care for adults, including acute and chronic conditions, women's health and minor surgical procedures with an emphasis on preventative health.

Red Care Team

Red care team specializes in care for adults, including acute and chronic conditions, minor surgical procedures and low risk prenatal care, with an emphasis on preventative health.

Blue Care Team

Blue care team specializes in primary health care services from young adult to geriatrics, emphasizing the care of patients with diabetes, women's health, low risk prenatal care and general preventive health care services.

Sage Care Team

Sage care team specializes in complicated medical problems, such as diabetes, heart disease, kidney disease, lung disease, liver disease, cancer monitoring and follow-up.

Pink Care Team

Pink care team provides thorough women's health assessments, annual well woman exams, preventative screenings, birth control services, low risk prenatal care and delivery for women.

Harmon-y Pediatric Clinic

Harmon-y Pediatric Clinic specializes in newborn babies, children and adolescents through age 17. Everyday procedures include, well child, physical examinations, immunizations, vision, fluoride treatments and hearing checks.

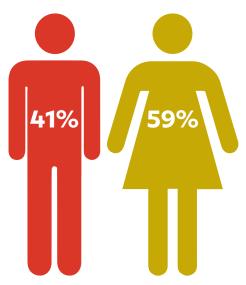
Metabolic Care Center

Metabolic care center specializes in diabetes and thyroid conditions with emphasis on preventative health, contraception, nutrition and exercise.

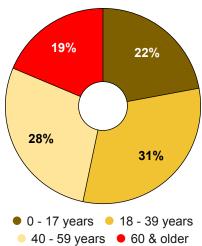


Who We Serve

Patient Gender



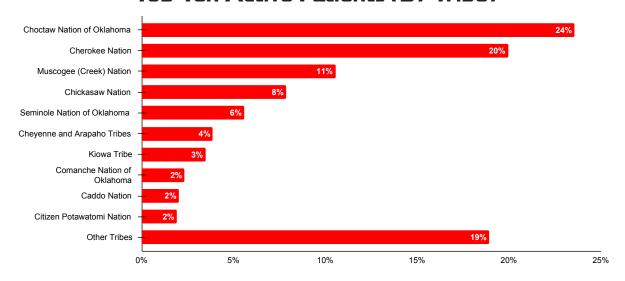
Active Patient Age Distribution



Fiscal Year	2020	2021
Active Users	20,889	22,401

Fiscal Year	2020	2021
Tribes Served	192	202

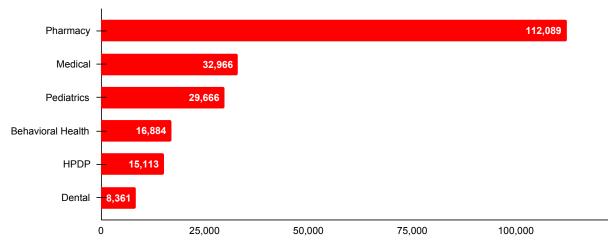
Top Ten Active Patients (By Tribe)



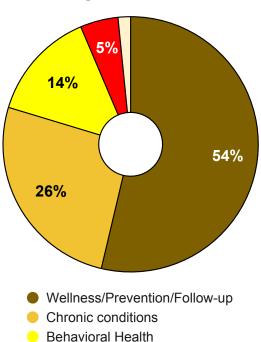


Patient Analysis

Top Six Patient Visits Per Department



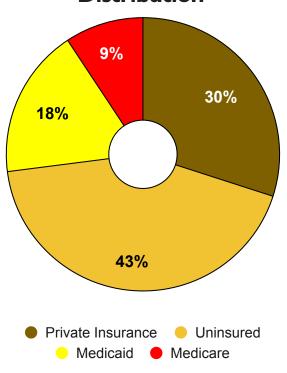
Top Five Adult Patient Purpose of Visit



Acute conditions

Dental

Insurance Coverage Distribution

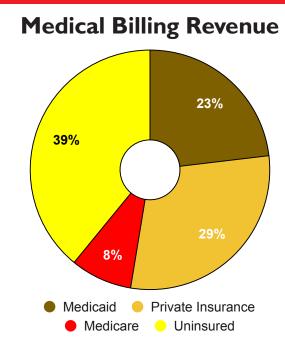




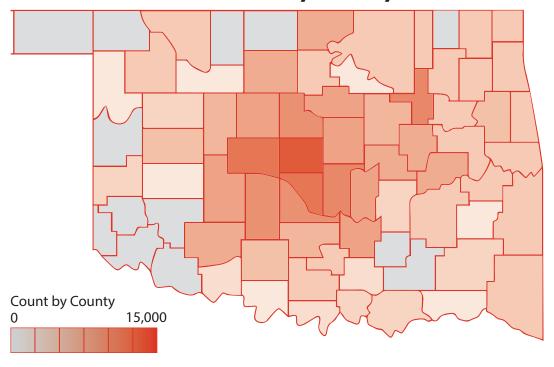
Patient Analysis cont.

Total Cost of Services: \$50,398,138 (Excluding Pharmacy) 27% 36% Uncollectable Uninsured

Revenue collected



Where Our Patients Live by County in Oklahoma



COVID-19 Respiratory Clinic

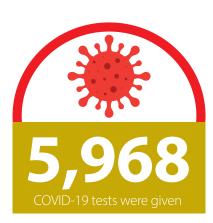


The COVID-19 Respiratory Clinic operates as a drive-thru clinic for patients' convenience and adheres to OKCIC's infection control standards implemented to limit staff and patient exposure to COVID-19. The clinic provides access to rapid antigen testing or polymerase chain reaction (PCR) testing for adult and pediatric patients experiencing COVID-19 or respiratory symptoms.

An appointment with the COVID-19 clinic includes a visit with an OKCIC medical provider and the opportunity to discuss results and treatment immediately. Rapid antigen test results are provided within 30 minutes, while PCR test results are available in 1.5 hours.



- OKCIC's COVID-19 clinic team evaluated approximately 6,800 patients and administered 5,968 COVID-19 tests with 14% positivity rate.
- A stand-alone, drive-thru pod was implemented in OKCIC's 309 S. Ann Arbor location to serve adult and pediatric patients as increased requests for respiratory illness were received. This location was created to keep more vulnerable patients and staff safe by applying social distancing measures as much as possible.





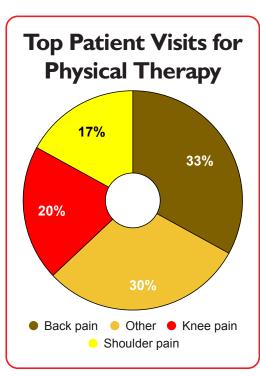


Medical Services

Oklahoma City Indian Clinic (OKCIC) is a patient-centered medical home. A physician-directed team of health care providers, nurses and support staff who provide comprehensive, accessible, continuous and organized care to meet the needs of patients and families.

New patients are assigned a Medical Care Team specifically designed to meet individual patient needs. Care teams develop a relationship and communicate with patients, caregivers and other OKCIC providers.

- To ensure the safety of staff and patients, three Xenex© Lightstrike™ Robots were deployed throughout OKCIC's buildings to deactivate pathogens in patient areas through the use of pulsed xenon UV light.
- Mammogram services improved their capacity from 119 to 166 patients per month.
- Physical Therapy expanded staff and now includes two full-time physical therapists, two fulltime physical therapist assistants, and one full-time patient relations representative, in an effort to improve patient access. Physical Therapy had a total of 4,558 visits in 2021, which is an 86% increase from 2020.
- The Easy Access Clinic was established to provide immediate access to healthcare for nonemergent or minor needs for OKCIC patients. In 2021, the Easy Access clinic provided 2,851 in-clinic appointments and 126 virtual visits to OKCIC patients.
- OKCIC met and exceeded the final target for GPRA measures: Pap Smear Rates (24-64F) with 56.5%, Mammogram Rates (52-64F) with 46.3%, Colorectal Cancer Screen (50-75) with 46.7%, Tobacco Cessation Counseling with 50.3% and Statin Therapy (CVD) with 63.6%.
- Over 11,000 referrals were completed in 2021, which is a 20.5% increase from 2020.
- OKCIC staff assisted patients with establishing a Purchased/Referred Care chart for referrals to treatment outside of OKCIC. In 2021, there were 1,090 Purchased/Referred Care applications distributed.



- Historically, many American Indian patients felt the only option for a diabetic wound was amputation, but the wound care clinic has changed that outlook for hundreds of patients. In 2021, wound care had 52 new consults, conducted 1,010 total visits and prevented 246 patients from losing limbs.
- The wound care clinic was recently approved to do peripherally inserted central catheter (PICC) line dressing changes. This change allows patients to have the procedure with providers they are comfortable with instead of outside providers. Wound care also added the Pyxis medication station, which allows patients to obtain medications without waiting for pharmacy.



78 babies

were delivered by an OKCIC provider through a partnership with INTEGRIS Baptist Medical Center.





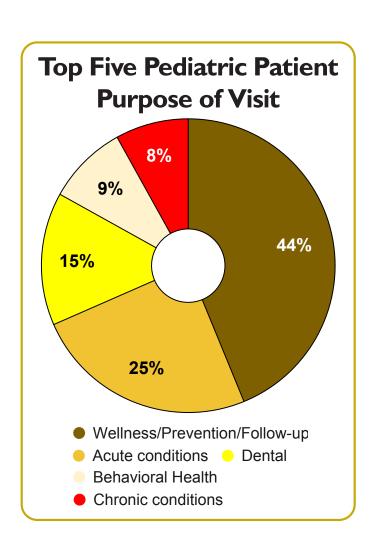




Harmon-y Pediatric Clinic

Harmon-y Pediatric Clinic is a team of providers, nurses, patient relations representatives, a medical assistant and benefits coordinators that work together to improve the health of pediatric patients. Harmon-y Pediatric Clinic treats patients ranging from newborn babies through age 17, and provides well-child visits, chronic and acute care treatment, physical examinations, immunizations, vision and hearing checks, fluoride applications and same day sick visits. Harmon-y Pediatric Clinic also provides an asthma clinic for children with asthma, pediatric foster care clinic, a home visit program, virtual medical visits, and has a Pediatric Endocrinologist on staff to treat children with hormone and glandular disorders.

- OKCIC Pediatric Clinic checks patients' eyes with a Spot Vision Screening. This handheld vision screening device detects vision issues in patients from 6 months into adulthood. This tool does not require the ability to read to detect visual problems.
- OKCIC met and exceeded the final target for GPRA measure: Childhood Immunizations (4:3:1:3/4:3:1:4) with 52%.
- Topical fluoride applications were provided in Pediatrics.
- All of OKCIC's nurses and providers are trained on Mend© Telemedicine program to better serve OKCIC's patients during the pandemic. Nearly 50% of pediatric patient encounters were completed virtually, and





most were primarily from COVID-19 Respiratory Clinic initial evaluations. This process allowed a patient evaluation to be completed by an OKCIC provider, and patients were tested for flu, strep, and RSV to rule out other ailments in case COVID-19 testing proved to be negative.



Achieved GPRA Measure

final target for Childhood
Immunizations

2,640

Patient encounters completed at the COVID-19 Respiratory Clinic





Pharmacy

The Pharmacy department is a team of pharmacists, pharmacy technicians, a patient advocate, and billing technicians who work together to fulfill patients' needs. Pharmacists hold specialty clinics and have access to a patient's entire health record, including laboratory results, immunization status, past medical history and drug allergies. They fully utilize this information, their knowledge and their skills to assist providers in assessing the appropriate drug therapy.

2021 Highlights

- Pharmacy processed 483,768 prescriptions in 2021, with an average monthly volume of 40,314 prescriptions.
- The total number of patient medication pickups was 358,913, which is an average of 29,909 per month.
- Pharmacy administered 13,758 COVID-19 vaccinations to patients age 12 and older, and maintained a high COVID-19 vaccination rate with minimal vaccine waste at 2.77%.

Prescription Cycle Time (in minutes) 60.0 54.3 40.0 20.0 24.9 21.6 25.6 24.7 22.6

- Medication Assisted
 Treatment (MAT) clinic had over 100 patient visits in 2021.
- The clinics managed by pharmacy were condensed to provide a more holistic and complete approach to medication management. There

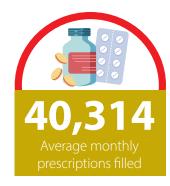
 were 2.016 pharmacy-managed clinic visits which

were 2,016 pharmacy-managed clinic visits, which includes Hepatitis C, Immunizations (excluding COVID-19), Pediatric Asthma, MAT, Tobacco Cessation, Anticoagulation, Cardiovascular Risk Reduction, and Metabolic Care.

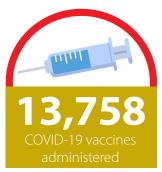
 Reviewed 13,500 non-insured patients to recoup reimbursements. 112,089

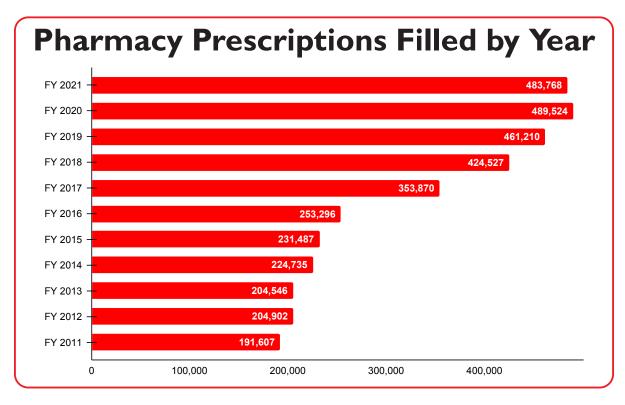
Pharmacy Visits

- Almost 30 fourth year pharmacy interns from the University of Oklahoma and SWOSU Colleges of Pharmacy completed their ambulatory and/or informatics pharmacy rotation at OKCIC during 2021.
- Nearly 1,100 COVID-19 vaccines were administered throughout 37 outreach events to Oklahoma City's community members.
- The Alliance for Patient Medication Safety (APMS) program promotes continuous quality improvement within the pharmacy to maintain high standards of safety for patients. APMS allows OKCIC to comply with Quality Assurance requirements found in network contracts, Medicare Part D and state regulations. In 2021, there were 419 patient documentations made.
- A total of 6,290 of patients were enrolled in Consolidated Mail Order Program (CMOP), which is a 7% increase compared to 2020. Over 124,100 prescriptions were mailed through CMOP, which is more than any of the other Indian Health Service registered sites. OKCIC also has the lowest cost per prescription at \$9.82.
- Pharmacy installed six MedSelect™ automated dispensing cabinets to help prevent in-clinic medication errors, control costs and to increase efficiency.
- ScripTalk® Technology was implemented to assist vision impaired patients with reading prescription labels.
- Pharmacy fixed rejections and prior authorizations to recover reimbursements.











Public Health

The Public Health department is a team of registered nurses, licensed practical nurses, medical assistants, patient relations representatives, social services specialists, immunization nurse, employee nurse, women's health care navigator, lactation counselor and prevention specialist. This staff is dedicated to optimizing the health and well-being of Oklahoma City Indian Clinic (OKCIC) patients and employees through prevention education, immunizations (including pneumonia vaccinations), tuberculosis screening, mammogram services, Eagle's Nest prenatal classes, prescription assistance, smoking cessation information, home visits, HIV/AIDS/STI counseling, health education, referrals and patient appointment transportation services.

- OKCIC met and exceeded the final target for GPRA measures: Prenatal HIV Testing with 100%, Universal HIV Screen Ever (13-64) with 79.1% and Breastfeeding (2mos exclusively/mostly) with 40.6%
- Eagle's Nest Prenatal Education had 935 encounters from patients.
- In 2021, rates of every single sexually transmitted disease increased. Chlamydia accounted for almost 61% of the total number of cases of sexually transmitted infections (STI) reported. The next most frequently reported STI was gonorrhea, which accounted for 24% of total cases. These two diseases represent a substantial percentage of the total burden of disease from STI.
- The Prescription Assistance Program saved 108 patients around \$2,500,000, a substantial increase from 2020's \$1,100,000.
- Social Services Specialists experienced an increase of requested resources likely due to the COVID-19 pandemic. The total number of referrals was over 500 and over 3,200 resources were dispersed to patients and the community. The most requested resource was food, followed closely by transportation and housing. Social Services events in 2021 included: backpack and school supply drive for back-to-school week; the Warmness collection of socks, gloves and hats; and family game night drive.
- Annual N95 mask fit tests were completed for 431 employees.
- OKCIC staffs three certified American Heart Association Basic Life Support (BLS) CPR instructors who renewed, or initially certified, 166 OKCIC employees in 2021.
- Employee vaccination rates for COVID-19 (from Moderna, Pfizer or Johnson and Johnson) and Influenza were 100% in 2021, excluding exemptions.
- Nearly 200 transports were completed through OKCIC's Community Health Representative (CHR) Transportation Assistance program.



- The breast care program had 1,331 in-house mammograms performed, 441 mammogram referrals for abnormal mammograms and breast exams to outside entities for further imaging and care, and eight new breast cancer diagnoses.
- Nearly 600 social services referrals and 3,213 social services resources were distributed to patients and the community.
- There were 5,622 Vaccines for Children Program immunizations administered in 2021.
- OKCIC's Public Health department did contact tracing for employees with exposures to COVID-19 and/or positive test results. Over 700 contact tracing interviews were performed.
- Public Health department processed 128 new hires through the Employee Health on-boarding process, including orientation (virtual), vaccination requirements reviewed, vaccines administered, N95 fit test and a tuberculosis screening.



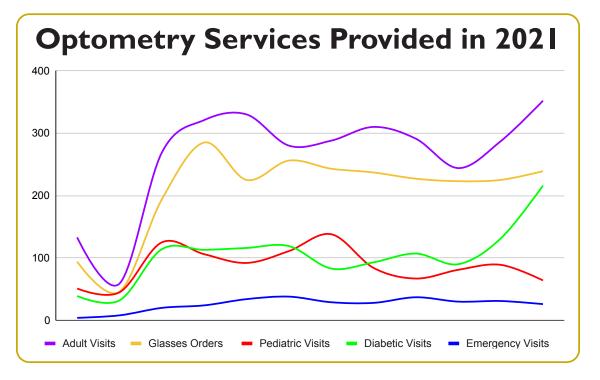




Optometry

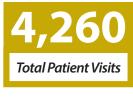
The Optometry department is a team of an adult and pediatric optometrist, optometry assistants and patient relations representatives. This staff is dedicated to optimizing the health and wellbeing of Oklahoma City Indian Clinic (OKCIC) patients and employees eye care through offering vision therapy, retinal imaging comprehensive eye examinations and eyeglass fittings for patients.

- Optometry moved to OKCIC's new building located at 309 S. Ann Arbor and transitioned all documentations to digital. One software utilized in the digital transition is Revolution Electronic Health Record© (EHR). RevolutionEHR© is the leading cloud-based EHR and practice management software for optometry. It simplifies the work allowing staff the ability to focus more time on caring for patients. This led to increased access to care with nearly 54% more patients seen in 2021 compared to 2020 and nearly 32% increase in pediatric visits.
- Patient's criteria limitations were lifted. This allowed patients of all ages and medical needs to benefit from optometry's services, including emergency visits, pediatric visits, adult visits, diabetic visits, glasses fittings/adjustments and much more.
- Optometry saw an increase of 57% in optical orders since 2019.



Total Number of Patient Visits 5,000 4,000 3,000 2,798 1,968 1,968 CY 2019 CY 2020 CY 2021



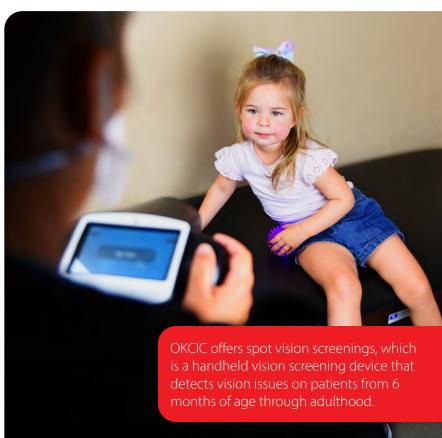










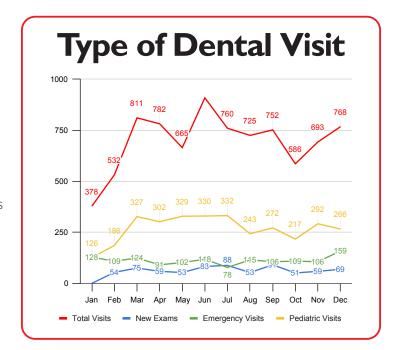




Dental

The Dental department is a team of dentists, dental hygienists, dental assistants, sterilization technician and support staff. Services include: routine exams and cleanings, root planing and scaling, fillings, fluoride treatments, sealants, tooth extractions, anterior and premolar root canals, and all-day urgent care.

- OKCIC met and exceeded the final target for GPRA measures: Dental Sealants (2-15) with 26.6% and Topical Fluoride (1-15) with 44.9%.
- Oklahoma City Indian Clinic's (OKCIC) 2021 Red Feather Gala fundraising event raised money towards providing dentures to patients in need. At the end of 2021, 108 patients were referred, nearly 50 patients received dentures and nearly 50 more are awaiting completion of their dentures.







3,901

Fluoride treatments

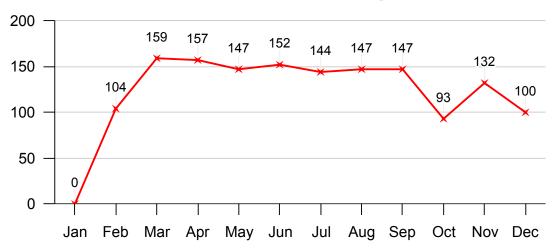
1,600

Sealants applied

1,482

Oral Cancer Screenings

Oral Cancer Screenings for 2021





Special Diabetes Programs for Indians

Oklahoma City Indian Clinic (OKCIC) Diabetes Education department consists of several programs funded by the Special Diabetes Program for Indians (SDPI) grant. Native Americans experience a higher rate of diabetes than other races/ethnicities. In response to this epidemic, Oklahoma City Indian Clinic (OKCIC) received the SDPI grant that funds programs for diabetes education, treatment and prevention. These programs include the STAR, BRAID, and Get SET and Fight Diabetes.

Patients diagnosed with pre-diabetes are referred to **STAR (Steps To Achieve Results)** program. This year-long program is designed to help patients at-risk for developing type 2 diabetes. This intense lifestyle modification program is nationally certified by the Centers for Disease Control and Prevention Diabetes Prevention Recognition Program. It is led by a team of trained life coaches who coach and mentor patients through a series of classes and activities designed to improve lifestyle choices that lead to overall wellness and ultimately the prevention of type 2 diabetes. Patients who enroll in STAR have a personal lifestyle coach, a registered dietitian, and access to OKCIC's Wellness Center and STAR cooking classes.

Patients diagnosed with diabetes are immediately referred to **BRAID** (**Being Responsible American Indians with Diabetes**) program for education. The BRAID program is a nationally recognized diabetes self management education and support program, which began in 1996. It is designed to equip patients to control their diabetes successfully. This five-session coordinated program includes instruction on monitoring, nutrition, physical activity, mental/emotional health and medications. Classes are taught by a multidisciplinary team, including certified diabetes care and education specialist, registered dietitians, registered nurses, behavioral health therapists and certified personal trainers. The BRAID program also provides follow-up support education, including a medical nutrition therapy class called **BRAID Balance.**

Patients are encouraged to participate in **Get SET (Screening, Education and Treatment) and Fight Diabetes.** Get SET is a quarterly exercise and nutrition program open to all patients, promoting a healthy lifestyle that prevents and/or controls diabetes. Patients who complete the required fitness and diet education sessions within each session earn an exercise gear incentive card. To keep patients engaged and focusing on their health, Get SET has developed an online program to respect the needs of social distancing.

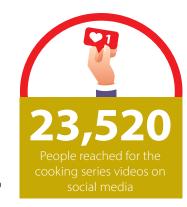
- OKCIC met and exceeded the final target for GPRA measures: A1c > 9 (Poor Control with 16.8%, Statin Therapy (DM) with 77.1%, Nephropathy Assessment with 65.5% and Retinopathy Assessment with 73.1%.
- BRAID Balance had 29 group medical nutrition therapy encounters.

- The COVID-19 pandemic created challenges in reaching patients.
 Virtual STAR (telehealth) was created to meet this need. Patients met one hour each week for 12 weeks with a Lifestyle Coach in a group virtual meeting. The two major goals for both versions of the program are the same: 5-7% weight loss or weight maintenance and a minimum of 150 minutes of physical activity weekly.
- In 2020, OKCIC began virtual BRAID group classes to meet the needs of patients with diabetes. In 2021, as part of OKCIC's reopening plan, in-clinic group classes resumed and virtual classes continued. Both in-clinic and virtual classes are planned to continue to be offered for 2022.
- The STAR program had 1,408 individual life coaching encounters and 776 group encounters.
- STAR continued to partner with Community Development to produce a cooking series published on social media platforms. In 2021, there were 40 weekly videos produced that reached over 23,520 people on social media.
- OKCIC utilized Joslin Vision Network© retinal imaging machines to perform diabetic retinopathy screenings for 1,621 patients.

The BRAID program had 505 encounters, 1,534 diabetes education encounters and 316 pharmacist diabetes education encounters.













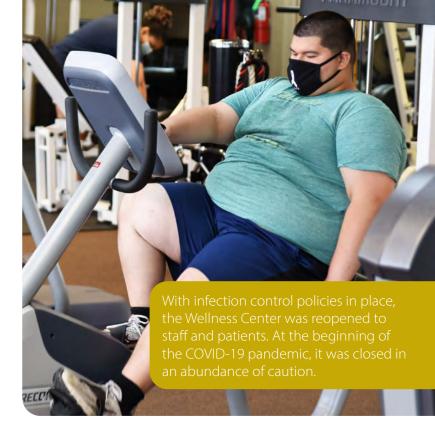
Health Promotion & Disease Prevention

Health Promotion and Disease Prevention (HPDP) department is a team of registered and licensed dietitians, certified personal trainers, a registered nurse, certified lactation counselors and patient relations representatives that encourage American Indians of all ages to be healthy through fitness training and nutrition education offered by Oklahoma City Indian Clinic (OKCIC) Wellness Center, youth camps, afterschool programs, and fitness and education classes.

- Despite the COVID-19 pandemic, HPDP staff continued to work with patients to increase health and wellness with the use of virtual visits.
- Employees are encouraged to live a healthy lifestyle through virtual Employee Wellness Challenges.
- Multiple virtual and in-person group classes were offered, including: Tai Chi, Yoga, Zumba, Moccasin Movers, Circuit Training and Core Power.
- Virtual and in-person family activities were offered, including Family Dinner Night and various online exercise videos.
- OKCIC Wellness Center had 4,895 one-on-one in-person and virtual personal training patient encounters.
- OKCIC Wellness Center had 867 virtual family and adult group exercise class encounters.
- Virtual and in-person adult group activities were offered to help patients stay healthy, including: Healthy Heart Class, Adult Weight Management, Senior Nutrition, Adult Fancy Fringe and Kidney Class.



 Virtual and in-person youth group wellness activities were offered, including: after-school programs (Running, Basketball, MISS, Jr. MISS, Kids in the Kitchen, Kids in the Kitchen Jr., Jump Rope, Zumba, Dance, Twirling, Yoga, Tai Chi and Cheer), school break programs (TURTLE Camp, Culture Camp, Football Camp, Softball/ Baseball Camp, Yoga Camp and NYPD Camp). All HPDP programming continues to focus on the 5210 concept (>5 fruits and vegetables per day, <2 hours of screen time per day, >1 hour of physical activity per day and 0 sugar-sweetened beverages per day).



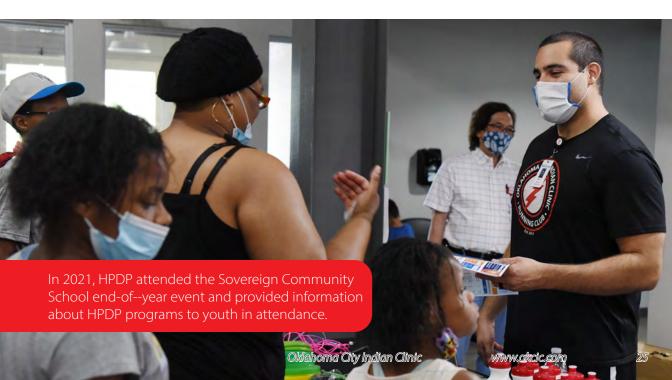
5,404

Wellness Center Visits 2,968

One-on-one dietitian encounters

979

School break virtual encounters

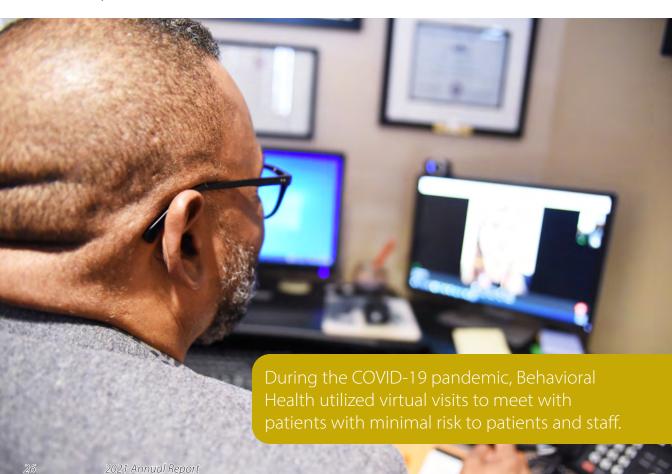




Behavioral Health

Oklahoma City Indian Clinic's (OKCIC) Behavioral Health department encompasses a staff of licensed mental health professionals, psychiatrists, registered nurse, patient advocate, grant coordinator, mentors, case manager, peer recovery specialists, and program and administrative support that helps individuals and families.

- Behavioral Health offers integrated behavioral health. This includes having a licensed counselor included on physical health appointments, which helps to normalize that physical and mental health are interconnected.
- OKCIC met and exceeded the final target for GPRA measures: Alcohol Screening (9-75) with 51.8%, IPV/DV Screening (14-46 F) with 51.7%, Depression Screen (18+) with 52.4% and Depression Screen (12-17) with 58.0%.





- Behavioral Health expanded services and now offers child psychiatry and child developmental testing.
- Four culture night events were offered to expand cultural knowledge and skills, and additionally five suicide prevention and substance use trainings were offered.
- It is now easier for patients to access behavioral health services through OKCIC's website. Once the online paperwork is complete, counseling is available in as little as one week.
- Therapy Assistance Online tools are now available to patients. This includes over 150 brief, effective, educational sessions covering over 50 common topics and skills related to mental health, wellness and substance use issues.

1,100

Peer Recovery Support
Specialist visits

3,101

Psychiatry visits

6,489

Adult therapy visits

2,389
Child therapy visits

3,905

Medical family therapy visits



Administration

Oklahoma City Indian Clinic (OKCIC), a 501(c)(3) non-profit clinic providing health and wellness services to American Indians in central Oklahoma, would not flourish without the support of American Indian tribes and the Oklahoma community. The administration team works tirelessly behind the scenes to support clinic operations. There are over 100 staff members representing business office, community development, finance, health information management, human resources, integrated technology solutions, maintenance, quality, grants management and registration/benefits departments, all overseen by the senior leadership team. This team possesses a wide range of talent, experience and education that helps to create a positive experience for patients. During the COVID-19 pandemic, to reduce the spread of the coronavirus, many of these staff members began working remotely every day to work.

Quality

The Quality department staff consists of the Chief Quality Officer, Epidemiologists, Director of Continuous Improvement and support staff. They implement and oversee the quality goals for over 300 staff members.

2021 Highlights

- OKCIC curriculum was developed and delivered in 12 classes that included: quality; behavioral health; and lean white, yellow and green belt trainings.
- Quality offered training activities to 269 employees.
- Over 20 value stream maps were developed with an enterprise-wide approach. Enterprise-wide risk management is a process of coordinated risk management that places greater emphasis on co-operation among departments to manage an organization's range of risks as a whole.
- At the end of 2021, there were eight process improvement efforts running and five additional efforts were completed and closed.
- OKCIC continued to utilize lean process improvement strategies. Lean is an industry-recognized program that provides organizations a systematic road map for improving processes without

increasing costs. There are 39 employees who are certified "Green Belt," which is the third level.

• In 2021, a Quality Texas Foundation examination was performed at OKCIC.

"Green Belt" certified employees

- Notable improvement processes for 2021 include, but are not limited to:
 - Mammogram capacity improved from 119 to 166 patients per month.
 - Lab reduced 88% of missing orders.
 - Billing implemented standard work practices with a work instruction document to provide consistency in training and expectations.

Business Office

The Business Office staff consists of 16 billers and coders and is led by the Director of Billing.

2021 Highlights

 The business office sends all patient visit information to insurance providers for reimbursement. Fifty percent of visits were sent to the insurance company two weeks after coding was completed and 10% were sent 24 hours after coding was completed.



2021
Employee
of the Year
Elizabeth
Angeles, DA

Health Information Management

The Health Information department consists of six staff members. This team focuses on the organization and management of patient data by importing medical records into the Electronic Health Record (EHR) system, processes medical record requests from medical providers outside of OKCIC and ensures patient's private health information and records are complete, accurate and protected.

2021 Highlights

 Health Information Management scanned and placed 94,468 images in the EHR system.



Registration & Benefits Coordinators

Registration staff consists of Director of Patient Services, patient relations representatives and patient benefits coordinators. They are the first faces patients and visitors see when coming to OKCIC. Patient relations representatives are highly trained in customer service as they update patient information and register new patients.

2021 Highlights

• Benefits coordinators screened 820

patients to determine eligibility for additional health benefit resources.

2,796

New patient charts

Finance

Finance consists of seven members and is led by the Chief Finance Officer. In today's environment, it is important that OKCIC finds every available dollar and operates efficiently to meet its mission to provide excellent health care to American Indians.

*OKCIC's financial audit is available at the end of this report.

- Finance collaborated with OKCIC staff members and senior leaders to maintain clinic profitability.
- During the pandemic, PPE usage increased drastically. Finance was able to get additional personnel resources to increase the PPE ordered to maintain the health and safety of OKCIC's on-site employees and medical staff seeing patients.
- Finance works diligently to accommodate the purchasing needs of the clinic's departments and staff.



Administration cont.

Grants Management

Grant funding provides many services and offerings to OKCIC patients that would not otherwise be available. These grants are written by dedicated staff members and overseen by a grants coordinator that see a need not being met and want to offer expanded services to better serve patients. Services provided by grant funding include:

2021 Highlights

- In 2021, OKCIC submitted requests for 31 grants and was awarded 16 with one pending, which is a grant award percentage of 51.6%.
- **Grants** Awarded Grants awarded include, but are not limited to: Good Health and Wellness in Indian Country from the Center for Disease Control and Prevention (CDC), Tribal Practices in Indian Health from the CDC, AstraZeneca© Foundation

Connections for Cardiovascular Health program, Nike® CAFAmerica Foundation and much more.

 Departments and programs who received grants or continued grants from previous years include: Metabolic Care Center with nine grants, Behavioral Health with six grants, Behavioral Health and Pharmacy with two grants, Public Health with four grants, Community Development with one grant, Dental with one grant, Medical with two grants, Optometry with one grant, Harmon-y Pediatrics with one grant, Quality with one grant, women's health with one grant, and one grant for general operations at OKCIC.

Integrated Technology Solutions

Integrated Technology Solutions (ITS) staff consists of nine employees who keep over 300 workstations updated and operating every day.

- ITS upgraded dental department workstations, server and software to Dentrix Enterprise 11™. In 2021, ITS also installed and implemented the Cerec[®] System in dental.
- Staff assisted optometry with installation and implementation for the new Optometry RevolutionEHR© system.
- Moved employee's workstations to the new building OKCIC acquired located at 309 S. Ann Arbor.
- ITS staff implemented new network hardware and cabling in OKCIC's 4913 W. Reno Ave. location.
- Developed interface and file export for NRC and Relatient data file.

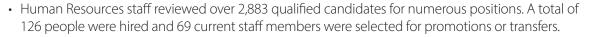


Human Resources

Human Resources (HR) oversees employment related functions. The staff consists of six members, including the Chief Human Resources Officer, Payroll Coordinator, Credentialing Coordinator, HR Manager and Recruiter.

2021 Highlights

- OKCIC has been voted one of the Best Places to Work in Oklahoma 11 times in the last 13 years and placed top nine in the large business category in 2021, which was the clinic's first year in that category for companies with more than 250 employees.
- OKCIC was named Certified Healthy Oklahoma Business with the "Excellence" certification.
- Human Resources standardized the electronic process for Paycom® by implementing applicant tracking & benefits to carrier processes, and updating credentialing checklists specific to each type of licensure for pre-employment.
- A total of 70 new positions were created, which is more than double from 2020. Forty-three those positions were in response to the COVID-19 pandemic.
- Staff member onboardings were held for 21 new employees, which is a two and a half day process.





Human Resources helped organize employee appreciation events to boost morale and show appreciation to staff. Due to the COVID-19 pandemic, these events were held outside to ensure the safety of staff.

Maintenance

The team consists of twelve hard-working members that keep the 113,000-square-feet of OKCIC campus clean and operational. The continued growth of OKCIC would not be possible without the tireless efforts of this team. Maintenance staff are the first to arrive and the last to leave on most days.

- Maintenance has been a major component in minimizing the spread of COVID-19 within OKCIC.
- Staff continuously cleaned and disinfected high-touch areas, which has been especially important during COVID-19 operations.
- Successfully moved the entire medical, human resources, community development, finance, laboratory and medical records departments to the newly remodeled 309 S. Ann Arbor building.
- Installed counter-top workstations for the growing Wellness Center and HPDP departments.
- Installed fixtures in all of the new 309 exam rooms for patient privacy.
- Install handrails at all three of OKCIC's buildings for the clinic's Culture of Safety goal.



Administration cont.

Community Development

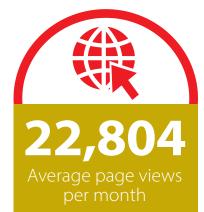
Community Development staff consists of the Chief Development Officer; Communications, Marketing and Events Director; and two Communications Specialists. They work together with each department to position OKCIC as a public health expert in social and news media by communicating health information, clinic events, wellness tips and other clinic operations to patients and stakeholders.

2021 Highlights

- All marketing collateral for OKCIC continues to be created by Community Development.
- Community Development created content for, maintained and updated all social media platforms (Facebook, Twitter, Instagram and YouTube) to keep patients and the community informed of clinic events, wellness tips and important notices.
 - On Facebook, OKCIC gained 178 new followers for a total of 4,746 followers.
 - On Twitter, OKCIC gained 85 new followers for a total of 1,001 followers.
 - On Instagram, OKCIC gained 118 followers for a total of 1,536 followers.
 - On YouTube, OKCIC gained 263 subscribers for a total of 375 subscribers.
- In 2021, 32 press releases were written and submitted to the news media. These were published 86 times through print or online, which secured an audience of nearly 25.3 million, which is an increase of 74% from 2020.
- Email marketing campaigns continued to promote OKCIC programming, events and COVID-19 health updates to patients. Quarterly email updates were also sent to OKCIC supporters and community partners.
- OKCIC's website is maintained and updated throughout the year by Community Development. In 2021, OKCIC's website had 273,657 page views with an average of over 22,804 page views per month.
- Three in-house publications were produced, including OKCIC's bi-annual HORIZONS magazine and a 2020 Annual Report. Staff also created the program for 2020-21's Annual Oklahoma City Area Indian Health Service, Tribal and Urban Awards Ceremony.
- Staff created 144 videos for various events and programs, including a cooking series, Wellness Tips and Tricks, breastfeeding health benefits, meditation and more.

Measurable media impressions estimated a total audience of nearly

25.3 million



Red Feather Gala



Red Feather Gala, produced by the Community Development department, is Oklahoma City Indian Clinic's (OKCIC) annual fundraising event held each fall and coincides with Native American Heritage Month. Red Feather Gala is an event that allows OKCIC to highlight American Indian culture and honor individuals who have helped raise the quality of health care in the Indian community. The evening allows OKCIC to thank supporters and sponsors; all while having fun and raising money for OKCIC services.

2021 Highlights

- Due to the coronavirus pandemic, the 17th Annual Red Feather Gala fundraising event was held virtually from November 6 - 13, 2021, instead of in-person.
- For 2021, this virtual event raised funds to benefit OKCIC's patients in need of dentures, giving them their smile back. Items in the auction included Native American jewelry, paintings, sports memorabilia, virtual outings for groups and more.
- The virtual fundraiser had support from many businesses, tribes and organizations including, Chickasaw Nation, Choctaw Nation of Oklahoma, Citizen Potawatomi Nation, Blue Cross and Blue Shield of Oklahoma, Cheyenne & Arapaho Tribes of Oklahoma, Oklahoma Complete Health,





Indian Healthcare Resource Center of Tulsa, Diagnostic Laboratory of Oklahoma, Southern Plains Tribal Health Board, Stephenson Cancer Center, Dr. Max Burchett Jr., Boutwell Family, Mel Cannon, Sac and Fox Nation, Prairie Band Potawatomi Nation, Tinker Federal Credit Union, Sterling Management Group, Monica Krienke, Robyn Sunday-Allen, David Toahty, Chris Van Ess, Lysa Ross, Dr. Janice Hixson, John Daugherty Jr. and Dr. Hazel Lonewolf.



Community Involvement

Oklahoma City Indian Clinic (OKCIC) staff works for and partners with the community by lending a helping hand, and donating money, time and resources to the American Indians we serve.

2021 Highlights

• The award-winning, employee-funded Warm and Fuzzy program at OKCIC came from a desire to help. The employee-sponsored program raises funds through voluntary employee payroll deductions, fundraising and individual donations throughout the year. This program supplies meals, coats, toys and school supplies to OKCIC patients and their families. Warm coats were provided to 95 children during the "Keep Kids Warm and Fuzzy" coat giveaway. At Thanksgiving, 50 families received "ThankFULL Baskets" which included dietitian recommended items to make a delicious Thanksgiving meal. During the "Toy Wonderland," 130 children received toys. Parents or guardians signed up for these opportunities through their providers at OKCIC.







• When the COVID-19 vaccines were released in late 2020, OKCIC employees worked diligently to vaccinate the Oklahoma City community. Shortly after the vaccines were released, staff held mass vaccination events and 37 community outreach events throughout the Oklahoma City metro. Outreach locations included, but are not limited to: Lopez Food, Lee's Sandwiches, Sovereign Community School, Skyline Urban Ministries and more.











OKLAHOMA CITY INDIAN CLINIC 2021 ANNUAL REPORT

Board of Directors



Brian Gabbard

Board Chairman



David Thomas Board Vice Chairman



Gena Timberman

Board Secretary

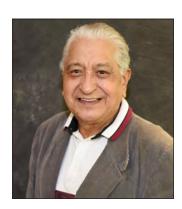


John Daugherty Jr.

Board Treasurer



Tara Dawkins
Board Member



Rev. Alvin Deer
Board Member



Dr. James Kennedye

Board Member



Mashell Sourjohn
Board Member



Rev. David Wilson
Board Member

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Executive Staff





Robyn Sunday-Allen Chief Executive Officer



Dr. Max Burchett, Jr. Chief Information Officer



Dr. Janice Hixson Chief Medical Officer



Monica Krienke
Chief Human Resources Officer



Dr. Hazel Lonewolf
Chief Quality Officer



Lysa Ross Chief Operating Officer



David Toahty
Chief Development Officer



Chris Van Ess Chief Finance Officer



OKLAHOMA CITY INDIAN CLINIC 2021 ANNUAL REPORT

Community Partners

Oklahoma City Indian Clinic thanks the following supporters and community partners:

Tribal Support

Absentee Shawnee Tribe of Oklahoma

Cherokee Nation

Cheyenne and Arapaho Tribes

Chickasaw Nation

Choctaw Nation of Oklahoma

Citizen Potawatomi Nation

Delaware Nation

Eastern Shawnee Tribe of Oklahoma

Iowa Tribe of Oklahoma

Kaw Nation

Kiowa Tribe of Oklahoma

Muscogee (Creek) Nation

Osage Nation

Otoe-Missouria Tribes

Pawnee Nation of Oklahoma

Sac and Fox Nation

Seminole Nation of Oklahoma

Benefactors and Supporters

110 Events

21c Museum Hotel

3Sixty Restaurant & Bar

A1 Pet Imporium

Academy Sports + Outdoors

Ada Vision

Adam Vascellaro, D.O.

Aetna

AIDS Care Fund

Albert GrayEagle

Ali Meyer

Alligator Alley

Alma Hickman

Ambassador Hotel

American Academy of Pediatrics

American Association of Pediatric Dentists

American Association of Retired Persons

American Cancer Society

American Dental Foundation Association

American Heart Association

American Indian Cancer Foundation

American Lung Association

American Red Cross

Ana Lalor Burdick Foundation

Andy Alligator's Fun Park

Ann Ackerman

Annetta and Jim Abbott

Anthony Georgiades

Anthony Kong

Antonia Belindo

April Dawn Blaine

Artesian Hotel, Casino & Spa

Arthritis Foundation

Arvest Bank

Ashton Gatewood

Association of American Indian Physicians (AAIP)

AstraZeneca HealthCare Foundation

Avon Foundation

Bacone College

Bailey Axelrod

Bank 2

Barking Dog Bakery

Barrels and Mash

Barry Axelrod

Barry Balindo

Bart Conner Gymnastics Academy

BC Clark Jewelers

Bea Lewis Family

Beautiful Dream Society

Bedford Camera and Video

Bedré Fine Chocolates

Benefit Designers Insurance Company

Bertram Bobb Family

Beverly Riggan Photography

Big Brothers Big Sisters of Oklahoma

Bikers Against Child Abuse International

Bill and Alden Snipes

Bill McCully

BJ's Brewhouse Outlet Mall

Black Optical Blau Law Firm Blazers Ice Center

DIAZCIS ICC CCITICI

Blue Cross and Blue Shield of Oklahoma

Blue Sage Studios Boardroom Salon for Men

Bob Funk and Janine Regier

Bob Holderby Body Mind Yoga

Boeing Bogdan Pesut Born in November Bow & Arrow Boutique

Brad Lyman Brandi Wilkins

Braum's Ice Cream and Dairy Stores

Bray Auction

Breastfeeding Task Force Brenda Taylor Jeney Brent and Andrea Boutwell Brent and Kennetha Greenwood

Brent Wilborn

Brett Farris and Michelle Dennison-Farris, PhD

Brian Gabbard Brooke Townsend Brown's Shoes Bruce Caesar Bruce Walton Builders Drywall

Bunky Echo-Hawk and Jasha Lyons

Buttersweet Cakes
Buy For Less
Cabot Cheese
Café do Brasil
Caitlin Baker
Candidly Christin

Canterbury Choral Society

Capitol Hill Florist Cara Cowan Watts

Carmelita and Andrew Skeeter Carolyn and Dennis Maxwell Carr and Carr Attorneys at Law

Carters

Case of Champions Catalyst Consultant Group Cecil and Hauli Gray Cecil Autaubo

Celebration Station

Centers for Disease Control and Prevention

Central Baptist Church Central Plains Dancers Chad McCarty Chairman John "Rocky" Barrett

Charles Logan

Charleston's Restaurant Cherokee Ballard

Cherokee Hotels and Casinos WSS Cherokee Nation Businesses

Cherokee Nation Entertainment, LLC Cherokee Nation Health Services

Chickasaw Nation Aalhakoffichi' Adolescent Chickasaw Nation Chokka' Kilimpi' Family

Chief Bill John Baker Chief Gary Batton Chief Glenna J. Wallace Chief Gregory Pyle family Chief James Floyd

Choctaw Construction Services

Choctaw Nation of Oklahoma Health Services

Chris and Angie Goldsby Chris and Donna Tallbear Chris and Sarah Van Ess Chris Anoatubby Chris McAtee Chris Winters Chuck Olson Cigna Foundation

Citizen Potawatomi Nation Firelake Bowling Center Citizen Potawatomi Nation Grand Casino Hotel and Resort

Clark Construction Clinical Pathology Labs

Cao Nguyen

Comanche Nation IMNDN Program

Community Nutrition Education Program (CNEP)

Concentra, Inc. Connie Wolfe

Coolgreens Lifestyle Eatery

Corps Officers Foundation (USPHS)

CorVel Corporation

Cosmetic Surgery Affiliates

Courtney Reeder Courtyard Marriot Cox Communication Craig Mullens

Craig Smith Crest Foods Curtis Billy Cyclebar Dairy Maxx

Dallas Cowboys Football Club, Ltd. Dana and Doug Drummond Dana Culton and Joe Swalwell

Dana Miller
Dave & Busters

David and Betty Wharton David and Lisa Toahty

David and Sandy Thomas

David Gibson

David Stinson David Wanzer

David Wanzer David Wilson Dawn Yazzie Deacon Nauslar

Debbie Hite

Deborah Doray Dee Porter Deep Fork Grill

Delaware Nation Vocational Rehabilitation Program

Dental Trade Alliance Foundation

Department of Health and Human Services

Devon Energy DG Smallings

Diagnostic Laboratory of Oklahoma

Dianna Sunday Dick's Sporting Goods Dodge City Paintball of OKC

Don Manning

Double D Ranchwear

Downtown Oklahoma City Partnership Dr. Anita Le and Edward Gonzales

Dr. Courtney Caplin Dr. Dorothy Rhoades

Dr. Ed Shadid

Dr. Everett R. and Bernadine Rhoades Dr. Hazel Lonewolf and Carlos Johnson Dr. Heather and Chairman John Shotton

Dr. James Kennedye Dr. Janice Hixson Dr. John Farris Dr. John Ketcher

Dr. Kenneth and Lucia Copeland

Dr. Mac Moore

Dr. Marek and Ginger Greer

Dr. Mark Doescher

Dr. Michael and Donna Wright

Dr. Michael Elder

Dr. Paul Dasari and Naveena Boindala

Dr. Randel and Kim Hicks Dr. Robert J. Duncan Dr. Robert K. Brown Dr. Ronald Shaw Family Dr. Sanjaykumar Hapani Dr. Sean and Stacy Ludlow

Dr. Star Yellowfish Dr. Steve and Kim Moyer

Dr. Terry Cline

Dr. Venkataraman Kalyanaraman

Dr. Yvette Roubideaux Dreamcatcher Magazine Drew and Linda Edmondson Drs. Charles and Gloria Grim

Drs. Daniel Molina and Jasmine Gaddy

Drs. Jin Kong and Fiona Li

Drs. Nicasio and Ana Marie Gutierrez

Dust Bowl & Fassler Hall Dylan and Lindsey Cavin Dynasty Care Services E & D Custom Concepts, Inc.

Eagle Adventure - Chickasaw Nation Nutrition

Eagle Imaging

Eagle Ridge Institute, Inc.

Earl's Rib Palace

Eastpoint Community Church

Echelon Medical Ed Galigher Edwina Amos Elemental Coffee

Elevations Trampoline Park

Elijah Allen Elissa Barnes EMBARK Embassy Suites

Emily and Richie Bolusky

Emily Taylor

Energy Football Club Enoch Kelly Haney Ernold Toppah Essilor Labs Everett Moore

Express Employment Professionals Expressions Community Center

Extreme Animals
Eyecare Centre
Family Expectations
Farmers Market
Feed The Children
Fellers Snider

First Americans Museum First National Bank

First Nations Development Institute

First Serve Foundation
First Tee of Metropolitan OKC

Float OKC

FOUR Modern Housing Community

Fran and Dave Smith Frank Marshall Freddie Robertson FYeYe Optical

Gabbard and Company PC

Gary and Rebecca Halfmoon Briggs

Gary Pitchlynn Gena Timberman

Gene and Jerry Jones Family Gene and Mary Schroeder Gerald and Leesa Adams Gil's Clothing & Denim Bar Girl Scouts of Western OK, Inc.

Girls Gone Wine Glen and Mary Rice Glenda Cohrs

Glorietta Indian Baptist Church Go Mitch Go Foundation Goldsby Construction

Golf USA

Gordon Yellowman Governor Bill Anoatubby Governor Brad and Kim Henry Governor Eddie Hamilton Governor Edwina Butler-Wolfe Grand Casino Hotel & Resort Greater Oklahoma City Chamber

Green Bambino

Greg and Darcy Oplotnik

Greta Stewart Grisso Mansion Gum-Ely Foundation

Hairport

Hal Smith Restaurant Group Hank and Jeannie Van Veen

Happy Frejo

Hard Rock Hotel & Casino of Tulsa

Harn Homestead Harold Hamm

Harold Hamm Diabetes Center Head Over Heels Boutique

Healthcare Partners Investments, LLC

Heartline 211

Hefner Golf Course and Pro Shop

Hepatitis C Roundtable

HeyDay

Hiawatha and Carol Bouldin

Hickory Starr Hilton Garden Inn

HIV Prevention Co-op Group Holmes Murphy and Associates Inc.

Home Depot Honey Do Creations

Hope Baptist Church Health Fair Hope Community Services Howard Brothers Florist Iguana Mexican Grill

IMAGEN

IMAGEN Foundation

In the Raw

Indian Health Care Resource Center of Tulsa

Indian Health Service Infant Crisis Services, Inc. Infant Mortality Alliance INTEGRIS Health System Intertribal Designs INTRUST Bank INTRUST Foundation

JT Petherick J. Nicole Hatfield

Jacobson House Native Art Center

Jacque Hensley James Avery James Lambertus

Jan Peery Jane Davis Janny Cooper Jason Merrell Jason Wilson Jay Mule

Jazmo'z Bourbon Street Cafe

JD Home Jeff McClellan Jeff Peters Jeffrey Cartmell

Jennifer and Salvador Ontiveros

Jennifer McKenna Jennifer Wilson

Jerry Hawkins and Wende McKenzie

Jersey Mike's Subs

Jim Everett

Jim Thorpe Native American Games Jimmy and Sharolyn Murphy

Joanne Kauffman Jody Perez Joe Chama

Joe Swalwell and Dana Culton John and Susan Daugherty, Jr.

John Fryrear John Sciarra Johnnie Sands Johns Hopkins Joleen Chaney Journal Record Judy Gibson

Justice Yvonne Kauger Kandace Howell

Kathy and Nick Randall

Kay Bills Kayla Davis

Ken and Mary Brown Ken and Renee Guthery Kendra Scott Jewelry Kenneth Hauk

Kevin and Ginger Ogle Keys Family Eye Care Kimberlie Gilliland

Kiowa Black Leggings Warrior Society

Kiowa Teen Suicide Prevention Program

Kirk Humphreys Kirkpatrick Family Fund Knock Out Bullying Inc. Kristi Lake-Gross

Kristie Sheen and Daryl Pinto

Kyle Killingsworth Kyle Taylor Lab Corp Lance West Lancer Stephens

Langston's Western Wear LASH Lauren Jones Lavenia Boutwell

LCDR Julie Erb-Alvarez LCDR Kayla DeWitt Leadership Oklahoma

Learning Tree Lee Keener

Lee Rhoades and Melinda Yoder

Leonard Cozad Jr. Leslie Gee Let's Play Soccer

Lighthouse Fitness Center

Lisa Rhoades

Little Axe Health Fair Liza Hernandez LKW Designs

Lloyd and Kathy Deere

Lopez Foods Lonnie Emhoolah Lori and Perry Burris Lou Geimausaddle

Lou Kerr

Louie's Grill and Bar Lt. Governor Jari Askins

Lt. Governor Jefferson Keel Lucky Star Casino Luksi Creations, LLC

Lush Fashion Lounge Lyric Theater of Oklahoma

Lysa and Nate Ross Mabee Foundation Madeline Redwine Madell Henderson

Mahogany Prime Steakhouse

Mallory Taylor

Mama Roja Mexican Kitchen

Many Nations March of Dimes Margaret Knight Marjorie Rogers

Mark and Monica Krienke

Mark Harmon
Marsha Houck
Marshall Gover
Mary and Ira Kaulay
Mary Ann Brittan Family
Mary Blankenship Pointer

Maschino, Hudelson and Associates

Mashell Sourjohn Matt and Meghan Miller

Matt Pinto Mayor David Holt McAfee and Taft McKesson McNellie's Group Mel Cannon

Melanie Rhoades-Campos

Melting Pot OKC Melvin Burris

Menopause Center of Oklahoma

Meredith Rivas Brockman and Matt Brockman

MGen Rita Aragon (Ret)

Micah Wesley
Michael Elizondo, Jr.
Michael Hanes
Michael Maus
Mick Cornett
Mickal Laudermilk
Mickey Hatcher
Mickey Peercy
Microsoft
Midge Gustas

Midwest City High School Alumni

Mike Blake Mike Rogers Mike Turpen

MMR Prime Steakhouse Mobile Smiles Oklahoma

Monica McKee Moore Public Schools

Moroch

Mother to Baby North Texas

Muscogee (Creek) Nation Department of Health

Mutual Assurance Administration, Inc.

Mutual Mineral Partners Myriad Botanical Gardens Nabholz Construction Services

NAFA Capital Markets Naifeh Fine Jewelry

Nancy Farha's Women's Clothing and Accessories

National Council Of Urban Indian Health National Council on Urban Indian Health

National Cowboy and Western Heritage Museum National Fetal and Infant Mortality Review Program

National Indian Health Board

National Park Service

National Softball Hall of Fame and Museum

Native Alliance Against Violence

Native American Winds Natural Awakenings NBC Lend-a-Hand NDN Collective

New Addiction Tattoo

Nicole Doyle Nike N7

Nike CAF America Foundation.

Nike, Inc.

Noel R. Williams, M.D. Nothing Bundt Cakes

NYPD Camp

O. Joseph Williams Law Office

Office of the Special Trustee for American Indians

OKC Kayak

OKIE Express Auto Wash

Okie Twister

Oklahoma American Indian Chamber of Commerce

Oklahoma Aquarium

Oklahoma Breast Care Center

Oklahoma Breastfeeding Resource Center Oklahoma Bureau of Narcotics and Dangerous

Drugs Control

Oklahoma Caring Foundation Oklahoma Center for Nonprofits

Oklahoma City Area Indian Health Service

Oklahoma City Area Indian Health Service Health

Care Systems Oklahoma City Ballet

Oklahoma City Boathouse Foundation Oklahoma City Community College

Oklahoma City Community College Native American Club

Oklahoma City Councilman James Cooper Oklahoma City Councilman Larry McAtee Oklahoma City Councilwoman Nikki Nice Oklahoma City County Health Department

Oklahoma City Dodgers Oklahoma City Energy FC Oklahoma City Faith Church Oklahoma City Fire Department

Oklahoma City Indian Clinic Board of Directors Oklahoma City Metropolitan Library System

Oklahoma City Museum of Art Oklahoma City Police Athletic League Oklahoma City Police Department Oklahoma City Pride Festival

Oklahoma City Public Schools - Indian Education Program Oklahoma City Public Schools - JOM and NASA Program

Oklahoma City Tennis Center - First Serve Oklahoma City Thunder NBA Basketball Team

Oklahoma City University

Oklahoma City Veteran Affairs Medical Center

Oklahoma Complete Health

Oklahoma County Commissioner Brian Maughn Oklahoma County Commissioner Willa Johnson

Oklahoma County Sheriff

Oklahoma County TSET Healthy Living

Oklahoma Dental Foundation

Oklahoma Department of Child Services

Oklahoma Department of Mental Health Services

Oklahoma Department of Veteran Affairs Oklahoma Health Care Authority - LARC Project

Oklahoma Indian Bar Association Oklahoma Indian Gaming Association Oklahoma Indian Legal Services Oklahoma Intertribal Diabetes Coalition Oklahoma Lt. Governor Todd Lamb

Oklahoma Museum of Art

Oklahoma Native American Task Force Oklahoma Native Art and Jewelry

Oklahoma Natural Gas

Oklahoma Nutrition Information and Education

Oklahoma Primary Care Association

Oklahoma Skydiving Center Oklahoma Spine Center

Oklahoma State Department of Health

Oklahoma State Parks

Oklahoma State Representative Chelsey Branham Oklahoma State Representative Collin Walke Oklahoma State Representative Cyndi Munson

Oklahoma State Senator Al McAffrey Oklahoma State Senator Anastasia Pittman

Oklahoma State Senator Kay Floyd

Oklahoma State University - Athletic Department Oklahoma State University - Oklahoma City

Oklahoma State University Center for Health Sciences

Oklahoma State University Extension Office

Oklahoma Tourism and Recreation Oklahoma Tribal Education Partners

Oklahoma University's Children's Diabetes Center

Oklahoma Zoological Society Olive Garden Italian Restaurant

On A Whim On The Border Optimal Health Optovue Orr Family Farm

OSSO Health Care Network

Otoe-Missouria Development Authority

Ozarka Water

Packard's New American Kitchen

Pam Jimmy Panera Bread Parent Pro Parent Promise Party Galaxy Past Designs

Pat Allen and Michelle Corona-Allen

Pat Cantley Paula Huck

Pebble Creek Golf Course

Peter Dubrawski

Pinkitzel Cupcakes and Candy

Pitchlynn Law Firm Pollard Theatre

Pride Mixed Martial Arts

Qdoba

Quicker Wine and Spirits R & S Optical Rehab R. L. Allen Insurance R.K. Black, Inc.

RADM Kevin and Janice Meeks

RADM Travis Watts Rainbow Fleet Child Care

Randy Frazier Range Resources

Reavis Drug in Pauls Valley

Rebecca King Red Coyote Running

Red Earth

Red Rock Canyon Red Rock Expressions

Red Tie Night

Redlands Community College

Reed Downey

Regional Food Bank of Oklahoma

Remington Park Renaissance Hotel

Replay RG Harris Rhiana Deck Rhonda Farrimond

Richard and Lori Parker, Sr.

Richard Henson Richard Hight Richard Mildren Rita Wright Riverwind Casino Rob Hertel

Robert and Lois Wildcat

Robert Lacy

Robert Wood Johnson

Robin Parker Robin Yeager

Robyn Sunday-Allen and Russell Allen

Rocktown Youth Mentoring
Rococo Restaurant and Catering

Ron Wallace Rose State College Ross Hill

Rufus "Buddy" Cox Rumors Salon

Russell-Murray Hospice

Rusty Van Dam Ruth Tiger Ryan Franklin Safe Sleep Workgroup SafeKids Coalition Sally Carter

Sam, Kent and Martha Bradford Santa Fe Family Life Center Sarkeys Foundation

Casaba lada

Sascha Jade

Saucony Foundation
Save the Children
Schlegel Bicycles
Schlitterbahn Waterpark
Science Museum of Oklahoma

Scott Edge Scott Hines Scott Wedman Sean Toahty

Seminole Nation Color Guard

Seneca Scott
Seva Foundation
Shannon Deere
Sheila Morago
Shereena Starr
Shoshana Wasserman
Sight and Sound Theater
Six Flags Over Texas
Skirvin Hilton Hotel

Smart Start of Central Oklahoma

Sonic Corporation Sonya Orange Soul Yoga

Southern Plains Tribal Health Board

Southwest Airlines

Southwestern Christian University Southwestern Oklahoma State University Southwestern Stationery and Bank Supply, Inc. Spiritual Healing Gift Shop and Wellness Center

St. Anthony Hospital

Stacey Halfmoon and Jason McCarty

Stacey Shuman

Staples

Star Business Solutions

Stars Band Stephen Taylor Stephen W. Cobb Stephens Law Firm

Stephenson Cancer Center Sterling Management Group Steve Klausen

Story of Hope Gift Shop

Sue Kraminga Summer Davis

Susan G. Komen Foundation

Susan Knight Susan Shannon

Suzanne Wallace Mears

Suzy Smith

T, An Urban Teahouse Talking Leaves Job Corps

Tammi Garrison

Tapp Development Corporation

Tapwerks Ale House Tatanka Ranch

TD Ready Foundation

Telligen Community Initiative

Tena Keaton Teresa Gagliano

Terra-Tri

Territory Resources, LLC

Texas Teratogen Information Services

The Boldt Company
The Cheesecake Factory
The Garage Burgers & Beer
The Glass Door Gift Shop
The Kerr Foundation
The Mabee Foundation

The Mantel

The Meat Market Refectory
The Melting Pot Restaurant

The Mule

The Pioneer Women
The Ranch Steakhouse
The Reduxion Theatre

Threshold Climbing, Fitness & Yoga

Thunderbird Casino Tiffany Pratt

Tim and Debbie Noahubi

Tim Tallchief

Tinker Federal Credit Union Tinker Inter-Tribal Council

Titanic Museum
Toby Keith Foundation
Tom and Stephanie O'Keefe
Tom and Tina Anderson

Tom Baldwin and Trisha Ricks-Baldwin

Tom John Tony Maldonado

Top Golf Trader Joe's

Transitional Living Facility

Trapped OKC Traveling Tutus Tree and Leaf Clothing Tribal Diagnostics LLC

Tribal First True Dads

Turquoise and Fringe Boutique

U.S. Air Force

U.S. Department of Agriculture Food and Nutrition Services U.S. Department of Health and Human Services U.S. District Judge Bernard M. Jones and Mautra

Staley Jones

U.S. Representative Kendra Horn U.S. Representative Tom Cole U.S. Senator Don Nickles U.S. Senator James Lankford U.S. Senator Tom Coburn

Udånder

United Healthcare Tribal Relations

United Parcel Service

United Urban Indian Council, Inc.

University of Central Oklahoma Native American

Students Association University of Oklahoma

University of Oklahoma Children's Diabetes Center University of Oklahoma Health Sciences Center University of Oklahoma Pre-pharmacy Association

Upper Crust Pizzeria

Urban Indian Health Institute Urban Inter-Tribal Center of Texas

Valarie Eschiti Valerie Sorrells Vanguard

Varangon Academy

Vera Bradley

Victory Baptist Church Vincent Knight

Walter Feather

Waters Edge Winery OKC

Wendy Dunson

Wewoka Indian Health Center

Whole Foods William Kennedye Wine and Palette

Woods and Waters Winery and Vineyard

WSKY Lounge

Wyjuana Montgomery

Yasin Perkins Yolanda Whiteman

Yonavea and Marvin Hawkins Yvonne and Lee Rhoades YWCA Oklahoma City ZOOFUNd grant

AUDITED FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

Audited Financial Statements and Supplementary Information

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

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Independent Auditors' Report

To the Board of Directors Central Oklahoma American Indian Health Council, Inc. Oklahoma City, Oklahoma

Report on the Financial Statements

We have audited the accompanying statement of financial position of the Central Oklahoma American Indian Health Council, Inc. (the "Clinic"), a not-for-profit organization, as of September 30, 2021, and the related statements of activities, cash flows and functional expenses for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Clinic's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Clinic's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Clinic as of September 30, 2021, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Other Matters

Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated June 14, 2022, on our consideration of the Clinic's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering the Clinic's internal control over financial reporting and compliance.

Rose Rock CPAs PLLC

Edmond, Oklahoma June 14, 2022

STATEMENT OF FINANCIAL POSITION

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

ASSETS

Current assets:		
Cash and cash equivalents - undesignated		\$ 13,536,317
Cash and cash equivalents - designated for capital of	campaign	10,496
Investments		84,281
Grants and contracts receivable		272,613
Patient services accounts receivable		1,520,408
Other receivables		7,028
Inventory		200,079
Prepaid expenses		 324,652
Total current assets		15,955,874
Property and equipment:		
Building and improvements		15,119,867
Land		1,015,718
Equipment		7,548,986
Less accumulated depreciation		 5,505,979
Property and equipment, net		 18,178,592
	TOTAL ASSETS	\$ 34,134,466
LIABILITIES AND NET ASSETS		
Current liabilities:		
Accounts payable and accrued expenses		\$ 455,996
Accrued payroll and related liabilities		2,035,479
Deferred revenue		1,890,254
Current portion of notes payable		 387,478
Total current liabilities		4,769,207
Noncurrent Liabilities:		
Notes payable, net of current portion		 5,126,103
	TOTAL LIABILITIES	 9,895,310
Net assets:		
Without donor restriction		23,859,725
With donor restriction		379,431
	TOTAL NET ASSETS	24,239,156
	TOTAL LIABILITIES AND NET ASSETS	\$ 34,134,466

See notes to financial statements.

STATEMENT OF ACTIVITIES

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

Year ended September 30, 2021

	Vithout Donor Restriction		With Donor Restriction	 Total
REVENUES AND OTHER SUPPORT				
Grants and contracts	\$ 20,986,197	\$	-	\$ 20,986,197
Medical services	24,818,327		-	24,818,327
Investment income	26,422		-	26,422
Forgiveness of PPP loan	3,152,700		-	3,152,700
Other	101,345		93,700	195,045
Net assets released from restriction	187,719		(187,719)	_
TOTAL REVENUES AND OTHER SUPPORT	49,272,710		(94,019)	49,178,691
EXPENSES				
Program services	29,675,811		-	29,675,811
Support services	9,140,803		-	9,140,803
Fundraising	 6,526			6,526
TOTAL EXPENSES	 38,823,140	_		 38,823,140
CHANGE IN NET ASSETS	10,449,570		(94,019)	10,355,551
NET ASSETS AT BEGINNING OF YEAR	 13,410,155		473,450	 13,883,605
NET ASSETS AT END OF YEAR	\$ 23,859,725	\$	379,431	\$ 24,239,156

See notes to financial statements.

STATEMENT OF CASH FLOWS

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

Year ended September 30, 2021

CASH FLOWS FROM OPERATING ACTIVITIES: Change in net assets	\$ 10,355,551
Adjustments to reconcile change in net assets to net cash provided by operating activities:	
Forgiveness of PPP loan	(3,152,700)
Depreciation	1,067,138
Net realized and unrealized investment gains	(19,254)
Amortization	1,858
Changes in operating assets and liabilities:	1,000
Grants and contracts receivable	(99,420)
Patient services and other receivables	(1,205,233)
Prepaid expenses	(98,743)
Inventory	(42,729)
Accounts payable and accrued expenses	(509,683)
Accrued payroll and related liabilities	(107,309)
Deferred revenue	(5,131,818)
NET CASH PROVIDED BY OPERATING ACTIVITIES	1,057,658
CASH FLOWS FROM INVESTING ACTIVITIES:	
Purchases of property and equipment, net	(4,111,309)
NET CASH USED IN INVESTING ACTIVITIES	(4,111,309)
CASH FLOWS FROM FINANCING ACTIVITIES:	
Principal payments on notes payable	(249,388)
Proceeds from notes payable	352,796
NET CASH PROVIDED BY FINANCING ACTIVITIES	103,408
NET DECREASE IN CASH	(2,950,243)
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR	16,497,056
CASH AND CASH EQUIVALENTS AT END OF YEAR	\$ 13,546,813
SUPPLEMENTAL CASH FLOW DISCLOSURE:	
Cash paid for interest	\$ 232,889

See notes to financial statements.

STATEMENT OF FUNCTIONAL EXPENSES

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

Year ended September 30, 2021

Special Meth and Clinic - General Administrative Clinic - General Total Program Administrative Clinic - Fundraising Expenses \$ 575.596 \$ 109,956 \$ 7,241,031 \$ 14,396,392 \$ 4,441,063 \$ 1,644,159 \$ 1,644,159 \$ 4,576,491 - \$ 1,644,159 \$ 1,644,159 \$ 1,268,616 - \$ 1,644,159 \$ 1,644,159 \$ 1,043,542 - \$ 1,644,159 \$ 1,043,542 -			Pr	Program Services	70		Support Services	Fundraising	
Suicide Program Total Program Administrative Clinic - Fundraising Expenses 6 \$ 109,956 \$ 7,241,031 \$ 14,396,392 \$ 4,441,063 \$ \$ 1,888,616 \$ \$ 1,888,616 \$ \$ 1,888,616 \$ \$ 1,888,616 \$ \$ 1,888,616 \$ \$ 1,888,616 \$ \$ \$ 1,888,616 \$ \$ \$ 1,888,616 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Outpatient			Meth and	Clinic -		Clinic - General		
6 Services Expenses Administrative Clinic - Fundraising Expenses 6 \$ 109,956 \$ 7,241,031 \$ 14,396,392 \$ 4,441,063 \$ 1,268,616 \$ 1,818 9 37,205 2,251,213 4,557,695 1,268,616 \$ 5,789,491 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,616 \$ 1,268,618 \$ 1,268,616 \$ 1,268,618 \$ 1,268,618 \$ 1,268,618 \$ 1,268,618 \$ 1,268,618 \$ 1,268,618 \$ 1,268,618 \$ 1,269,618 <t< td=""><td>Medical and</td><td>S</td><td>pecial</td><td>Suicide</td><td>Program</td><td>Total Program</td><td>and</td><td></td><td>Total</td></t<>	Medical and	S	pecial	Suicide	Program	Total Program	and		Total
\$ 109,956 \$ 7,241,031 \$ 14,396,392 \$ 4,441,063 \$ - \$ 18.8 37,205 2,251,213 4,557,695 1,268,616 - - 5,759,491 - - 5,59,491 -<	Dental Services	Di	iabetes	Prevention	Services	Expenses	Administrative	Clinic - Fundraising	Expenses
37,205 2,251,213 4,557,695 1,268,616 - 5 - 1,644,159 5,759,491 - - 5 - 949,609 1,043,542 - - - - 949,609 1,043,542 - - 1 - 960,113 2,116,547 - - - - 114,274 149,704 137,800 - - - 114,274 149,704 159,374 - - - - 91,588 975,550 - - 1 - 365,764 367,277 335,045 - - - - 32,352 128,048 - <t< td=""><td>\$ 6,469,809</td><td>↔</td><td></td><td></td><td>\$ 7,241,031</td><td></td><td></td><td>•</td><td>\$ 18,837,455</td></t<>	\$ 6,469,809	↔			\$ 7,241,031			•	\$ 18,837,455
5 1,644,159 5,759,491 - - 649,609 1,043,542 - - 1 1 - 949,609 1,043,542 - - - 1 1 - 960,113 2,116,547 - <t< td=""><td>2,074,578</td><td></td><td>194,699</td><td>37,205</td><td>2,251,213</td><td>4,557,695</td><td>1,268,616</td><td>•</td><td>5,826,311</td></t<>	2,074,578		194,699	37,205	2,251,213	4,557,695	1,268,616	•	5,826,311
1 - 949,609 1,043,542 - - - 11,4274 190,790 - - - 21,457 190,790 - - 1 1 - 960,113 2,116,547 - - - - 2 1 - 114,274 149,704 137,800 - - 2 1 - 190,622 159,374 - - 1 1 - 91,588 975,550 - - 1 1 21,348 145,713 214,070 426,488 - - - 1 423 18,323 128,215 457,559 - - - 1 - 32,382 128,215 - </td <td>4,085,357</td> <td></td> <td>29,975</td> <td>1</td> <td>1,644,159</td> <td>5,759,491</td> <td>•</td> <td>•</td> <td>5,759,491</td>	4,085,357		29,975	1	1,644,159	5,759,491	•	•	5,759,491
15,230 - 21,457 190,790 - 2 960,113 2,116,547 - - - - - - - 2 -	93,933		•	•	949,609	1,043,542	•	•	1,043,542
1 960,113 2,116,547 -	775		5,452	15,230	1	21,457	190,790	1	212,247
114,274 149,704 137,800 - 10,622 159,374 - 10,622 159,374 - 10,622 159,374 - 10,622 159,374 - 11,348 145,713 214,070 426,488 12,348 145,713 128,215 457,559 12,932 128,215 457,559 - 12,983 451,424 606,839 375,417 6,526 12,983 14,173,975 \$ 29,675,811 \$ 9,140,803 \$ 6,526 \$ 38.	1,156,434		•	ı	960,113	2,116,547	1	•	2,116,547
100,622 159,374 - 190,622 159,374 - 1.588 975,550 - 1.588 - 1.588 975,550 - 1.59,550 - 1.588 - - 1.586,277 335,045 - <td>35,430</td> <td></td> <td>•</td> <td>ı</td> <td>114,274</td> <td>149,704</td> <td>137,800</td> <td>•</td> <td>287,504</td>	35,430		•	ı	114,274	149,704	137,800	•	287,504
1 365,764 367,277 335,045 - 1 1 21,348 145,713 214,070 426,488 - - 2 32,352 32,352 140,212 - - 3 18,323 128,215 457,559 - - 4 - - 232,889 - - 5 12,983 451,424 606,859 375,417 6,526 1 \$ 197,145 \$ 14,173,975 \$ 29,675,811 \$ 9,140,803 \$ 838	190,622		•	1	ı	190,622	159,374	1	349,996
1 21,348 145,713 367,277 335,045 - 2 21,348 145,713 214,070 426,488 - 32,352 32,352 140,212 - 423 18,323 128,215 457,559 - - - 232,889 - - - 375,417 6,526	91,588		•	1	1	91,588	975,550	1	1,067,138
1 21,348 145,713 214,070 426,488 - - - 32,352 32,352 140,212 - - - 23,821 - - - - 232,889 - - - - 232,889 - - - - 375,417 6,526 - - - 6,526 \$ 38.	1,513		•	ı	365,764	367,277	335,045	•	702,322
- 32,352 32,352 140,212 - 0 423 18,323 128,215 457,559 - - - 232,889 - - 3 12,983 451,424 606,859 375,417 6,526 1 \$ 197,145 \$ 14,173,975 \$ 29,675,811 \$ 9,140,803 \$ 6,526 \$ 38,	42,758		4,251	21,348	145,713	214,070	426,488	•	640,558
423 18,323 128,215 457,559 - - - 232,889 - 3 12,983 451,424 606,859 375,417 6,526 \$ 197,145 \$ 14,173,975 \$ 29,675,811 \$ 9,140,803 \$ 6,526 \$ 338.	1		•	1	32,352	32,352	140,212	1	172,564
3 12,983 451,424 606,859 375,417 6,526 4 \$ 197,145 \$ 14,173,975 \$ 29,675,811 \$ 9,140,803 \$ 6,526 \$ 38,	103,469		6,000	423	18,323	128,215	457,559	1	585,774
3 12,983 451,424 606,859 375,417 6,526 \$ \$ 197,145 \$ 14,173,975 \$ 29,675,811 \$ 9,140,803 \$ 6,526 \$ 38,8			•	ı	1	1	232,889	•	232,889
<u>\$ 197,145</u> <u>\$ 14,173,975</u> <u>\$ 29,675,811</u> <u>\$ 9,140,803</u> <u>\$</u> 6,526	51,714		90,738	12,983	451,424	606,859	375,417	6,526	988,802
	\$ 14,397,980		906,711	\$ 197,145	\$ 14,173,975	\$ 29,675,811	\$ 9,140,803	\$ 6,526	\$ 38,823,140

See notes to financial statements.

NOTES TO FINANCIAL STATEMENTS

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE A--SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization: Central Oklahoma American Indian Health Council, Inc. (the "Clinic") is a non-profit corporation organized in May of 1974 for the purpose of providing comprehensive outpatient health care services to Native Americans residing in the greater Oklahoma City area. Funding of the Clinic's activities is primarily achieved through grants from the Department of Health and Human Services ("DHHS") and through billings collected from Medicare, Medicaid, and private insurance.

<u>Basis of Presentation</u>: The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

The financial statement presentation is in accordance with Financial Accounting Standards Board ("FASB") Accounting Standards Update ("ASU") 2016-14, *Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities*, which requires the presentation of two classes of net assets — net assets with donor restriction and net assets without donor restriction.

Descriptions of the two net asset categories are as follows:

Net Assets Without Donor Restriction--Net assets available for use in general operations and not subject to donor (or certain grantor) restrictions.

Net Assets With Donor Restriction--Net assets subject to donor (or certain grantor) imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. The Clinic reports contributions restricted by donors as increases in net assets without donor restriction if the restrictions expire (that is, when a stipulated time restriction ends or purpose restriction is accomplished) in the reporting period in which the revenue is recognized. All other donor-restricted contributions are reported as increases in net assets with donor restriction, depending on the nature of the restrictions. When a restriction expires, net assets with donor restriction are reclassified to net assets without donor restriction and reported in the statement of activities as net assets released from restriction.

<u>Use of Estimates</u>: The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

<u>Cash and Cash Equivalents</u>: For purposes of the statement of cash flows, the Clinic considers all highly liquid investments with original maturities of three months or less to be cash equivalents. As of September 30, 2021, the Clinic had \$398,481 in cash equivalents.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE A--SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONTINUED

<u>Patient Services Accounts Receivable</u>: Patient services receivables primarily consist of uncollateralized receivables from federal and state agencies (under the Medicare and Medicaid programs) and insurance companies. The Clinic determines the net realizable value of its receivables based on established agreements with third-party payors that provide for payments to the Clinic at amounts that typically differ from its established rates. For services provided to Medicaid beneficiaries, estimated receivables are determined based on program guidelines for reimbursement of services that are either paid at prospectively determined rates per diagnosis or retrospectively determined costs. As changes in contract terms and the regulatory environment can significantly affect the valuation of its receivables, the Clinic closely monitors these items, along with historical collection rates, to ensure the appropriateness of its receivable valuations.

Patient services receivables are carried at original billing amount less an estimate made for doubtful receivables. Management determines any necessary allowance for doubtful accounts by using historical experience. Any receivables determined to be uncollectible are written off. Recoveries of previously written off patient services receivables are recorded when received.

<u>Grants and Contracts Receivable</u>: Grants and contracts receivable represent consideration under grant agreements and contracts for services performed, or for outlays eligible for reimbursement under the grant agreements, and for which the Clinic has an unconditional right to receive. Grants and contracts receivable are stated at the amount management expects to be collected from the outstanding balance.

<u>Property and Equipment</u>: Property and equipment with a cost of \$5,000 or more are carried at cost at the date of acquisition or fair value at the date of donation in the case of gifts. Depreciation on property and equipment is computed using the straight-line method over the estimated useful lives of the assets as follows: Equipment – 3 to 5 years; Building and improvements – 40 years.

<u>Inventory</u>: The Clinic carries pharmacy inventory at the lower of cost, determined using the first-in, first-out method, or net realizable value.

<u>Debt Issuance Costs</u>: Debt issuance costs are presented as a reduction in the carrying amount of outstanding debt and are amortized on a straight-line basis over the life of the loan. Amortization of debt issuance costs is recorded as interest expense and included in support services expenses on the statement of functional expenses.

<u>Compensated Absences</u>: The Clinic permits its employees to accumulate paid time off ("PTO") hours over their working career and to redeem such unused PTO hours in cash upon employment termination. Employees earn hours based on length of service and are subject to an accumulation cap. Employees exceeding the cap will not earn any additional hours until previously accumulated excess vacation benefits have been used. As of September 30, 2021, accrued PTO amounted to \$1,318,215, and is reported as a component of accrued payroll and related liabilities in the statement of financial position.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE A--SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONTINUED

<u>Medical Services Revenue</u>: The Clinic recognizes medical services revenue at the amount of consideration for which the Clinic expects to be entitled in exchange for providing medical services. These amounts are due from third-party payors (including commercial and governmental programs). Revenue is recognized at a point in time, which is the date of service. Payment is typically due within 60 days of service.

The Clinic determines the transaction price, and therefore the revenue recognized, based on standard charges for services provided, reduced by contractual adjustments provided to third-party payors. The Clinic determines its estimates of contractual adjustments based on contractual agreements and historical experience. Agreements with third-party payors typically provide for payments at amounts less than established charges. Medicaid and Medicare revenue is reimbursed to the Clinic at the net reimbursement rates as determined by each program. Reimbursement rates are subject to revisions under the provisions of regulations. Adjustments for such revisions are recognized in the fiscal year incurred.

The Clinic has elected the practical expedient and does not adjust the promised amount of consideration from third-party payors for the effects of a significant financing component due to its expectation that the period between the time the service is provided to a patient and the time that the third-party payor pays for that service will be one year or less.

Medical services revenue, net, categorized by major payors consists of the following for the year ended September 30, 2021:

Medicaid	\$ 14,576,386
Medicare	4,038,338
Commercial insurance	6,179,280
Other	24,323
	\$ 24,818,327

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE A--SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONTINUED

Grants and Contracts: A significant portion of the programs and services provided by the Clinic are funded by grants and/or contracts with federal, state, and local agencies. Revenue from federal, state, and local grants and contracts are recognized when certain performance requirements are met and/or the incurrence of qualifying expenses are incurred. Amounts received before meeting the restrictive conditions or incurring qualifying expenses are reported as deferred revenue. It is the Clinic's policy to record restricted grants whose restrictions are met in the same reporting as net assets without donor restrictions. Grant and contract activities and outlays are subject to audit and acceptance by the granting agency and, as a result, adjustments could be required.

<u>Contributions</u>: Contributions, including unconditional promises to give, are recognized as revenues in the period received. Conditional promises to give are not recognized until the conditions on which they depend are substantially met. Contributions of assets other than cash are recorded at their estimated fair value at the date of the gift. Contributions to be received after one year are discounted at a rate commensurate with the risk involved. Amortization of the discount is recorded as additional contribution revenue and used in accordance with donor-imposed restrictions, if any. An allowance for uncollectible receivables is established based on management's judgment and analysis of credit worthiness of the donors, past collection experience and other relevant factors. The Clinic had no contributions receivable as of September 30, 2021.

<u>Income Taxes</u>: The Clinic qualifies as an organization exempt from income taxes under Section 501(c)(3) of the Internal Revenue code, and therefore has no provision for federal or state income taxes related to normal operating activities. The Clinic is subject to federal and state taxes in relation to any profits realized from unrelated business income. No provision has been made for income taxes in the accompanying financial statements for the year ended September 30, 2021, as the Clinic had no significant unrelated business income.

The Clinic's application of accounting principles generally accepted in the United States of America regarding uncertain tax positions had no effect on its financial position as management believes they have no material unrecognized uncertain tax positions. With limited exceptions, the Clinic is no longer subject to examination by federal, state, or local tax authorities for years before 2018.

Expense Allocation: The costs of providing various programs and other activities have been summarized on a functional basis in the statement of activities and in the statement of functional expenses. Specific expenses that are readily identifiable to a single program or activity are charged directly to that function. Salaries, wages, and employee benefits are allocated based on estimates of time and effort. Certain categories of expenses attributable to more than one program or supporting function are allocated on the same basis.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE A--SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONTINUED

<u>Concentrations of Credit Risk</u>: The Clinic manages deposit concentration risk by placing deposits with financial institutions believed by management to be creditworthy. The Clinic has concentrated its credit risk for cash by maintaining deposits at financial institutions which, at times, may exceed federally insured limits. Management does not consider this to be an unreasonable risk of loss. At September 30, 2021, approximately \$148,000 of the Clinic's bank balances were uninsured and uncollateralized.

The Clinic's patient services accounts receivable amounts are uncollateralized and primarily due under third-party payer agreements. The mix of these receivables at September 30, 2021 was:

Medicaid	63%
Medicare	3%
Commercial insurance	34%
	100%

Revenue from Contracts with Customers (Topic 606) (ASC 606) following the modified retrospective method of application. ASC 606 replaced existing revenue recognition guidance, including industry-specific guidance, and requires revenue to be recognized in an amount that reflects the consideration the entity expected to be entitled in an exchange of goods and services. The adoption of ASC 606 resulted in changes to presentation and disclosure of revenue. There were no adjustments required to the opening balance of net assets for the adoption of ASC 606.

<u>Date of Management's Review of Subsequent Events</u>: Management has evaluated subsequent events through June 14, 2022, which is the date the financial statements were available to be issued, and determined that no subsequent events have occurred that require adjustment to or disclosure in the financial statements.

NOTE B--FAIR VALUE MEASUREMENTS

The Clinic follows the requirements of the FASB's ASC 820 with respect to financial assets and liabilities. ASC 820 defines fair value, establishes a framework for measuring fair value and expands disclosures about fair value measurements. Fair value under ASC 820 is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. ASC 820 establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value into three broad categories.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE B--FAIR VALUE MEASUREMENTS, CONTINUED

The three levels of the fair value hierarchy under ASC 820 are described as follows:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Clinic has the ability to access.

Level 2 - Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value:

Mutual funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Clinic are open-end mutual funds that are registered with the SEC. These funds are required to publish their daily NAV and to contract at that price. The mutual funds held by the Clinic are deemed to be actively traded.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of fair values. Furthermore, although the Clinic believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

As of September 30, 2021, all of the Clinic's investments, which consisted of an S&P 500 index mutual fund, were classified as Level 1.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE C--LONG-TERM DEBT

Long-term debt at September 30, 2021, consisted of the following:

Borrowings under a revolving credit facility with a bank, with a fixed interest rate of 3.25%, due in 18 monthly installments of interest only, then 101 monthly installments of \$28,696 beginning on October 26, 2021, with all remaining principal and interest due on March 26, 2030 (a)	\$ 2,943,594
Note payable to bank due in monthly installments of principal and interest of \$16,145, with interest at Wall Street Journal Prime Rate plus .25% (3.50% at September 30, 2021), maturing in May of 2029 (b)	1,328,576
	1,326,370
Note payable to bank due in monthly installments of principal and interest of \$13,140, with interest at Wall Street Journal Prime Rate	
plus .75% (4.00% at September 30, 2021), maturing May of 2031 (b)	1,264,953
	5,537,123
Less unamortized debt issuance costs	23,542
Long-term debt net of unamortized debt issuance costs	5,513,581
Less current portion	387,478
	\$ 5,126,103

- (a) On March 25, 2020, the Clinic entered into a construction loan with a bank in connection with the Clinic's building improvement project. The maximum available borrowings under the construction loan are \$4,070,782. The loan facility is secured by real estate. The construction loan has various affirmative and restrictive covenants. Among the various covenants are specifically identified financial covenants placing requirements of a minimum debt service coverage ratio of 1.0 to 1.0. Management believes the Clinic was in compliance with all applicable covenants as of September 30, 2021.
- (b) These notes are secured by real estate and have various affirmative and restrictive covenants. Among the various covenants are specifically identified financial covenants placing requirements of a minimum debt service coverage ratio of 1.0 to 1.0. Management believes the Clinic was in compliance with all applicable covenants as of September 30, 2021.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE C--LONG-TERM DEBT, CONTINUED

Expected maturities of notes payable in future fiscal years as of September 30, 2021, are as follows:

2022	\$ 387,478
2023	405,250
2024	425,142
2025	443,332
2026	462,354
Thereafter	3,413,567
	<u>\$ 5,537,123</u>

NOTE D--401K RETIREMENT PLAN

The Clinic sponsors a 401(k) defined contribution retirement plan (the "Plan"). The Plan allows for employees of the Clinic meeting the Plan's eligibility requirement of three months of service to make elective contributions to the Plan and to receive employer safe harbor and discretionary profit sharing contributions. The Clinic makes a required safe harbor matching contribution to the Plan each year on behalf of each employee based on a percentage of the employee's compensation. The Clinic may also make a discretionary profit sharing contribution to the Plan. Employees are immediately 100% vested in all of their contributions to the Plan and in the safe harbor matching contributions made to the Plan by the Clinic on their behalf. The discretionary profit sharing contributions vest to the employee over a vesting period defined in the Plan agreement. The Clinic contributed approximately \$865,000 to the Plan during the year ended September 30, 2021.

NOTE E--CONCENTRATION

The Clinic receives a portion of its funding from federal and state grants. The Clinic's grants with DHHS/Indian Health Services comprised approximately 41% of the Clinic's total revenues. Grants can be reduced or terminated depending upon funding by the federal and state governments. If the Clinic's grants with DHHS/Indian Health Services were terminated, it would have a significant impact on the operations of the Clinic.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE F--COMMITMENTS AND CONTINGENCIES

Grant Funds

In the normal course of its operations, the Clinic receives grant funds from various federal and state agencies. The grant programs are subject to audit by the agents of the granting authority, the purpose of which is to ensure compliance with conditions precedent to the granting of funds. The Clinic's management does not believe that any liability for reimbursement which may arise as the result of such audits will be material to its operations.

Litigation

The Clinic may be subject to lawsuits and claims that arise out of the normal course of business. Management is unaware of any pending or threatened litigation, any material suit, or dispute, which would have a significant effect on the Clinic.

Global Pandemic

On January 30, 2020, the World Health Organization declared the coronavirus outbreak (COVID-19) a "Public Health Emergency of International Concern," and on March 11, 2020, declared it to be a pandemic. The related adverse public health developments, including orders to shelter-in-place, travel restrictions, and mandated business closures, have adversely affected workforces, organizations, their patients and customers, economies, and financial markets globally, leading increased market volatility and disruptions in normal business operations. The ultimate impact of the pandemic on the Clinic's operations is uncertain, but may influence patient decisions, donor decisions and may also negatively impact collections of the Clinic's receivables.

NOTE G--NET ASSETS WITH DONOR RESTRICTION

Net assets with donor restriction as of September 30, 2021 consist of \$10,496 related to a capital campaign and \$368,935 related to various private grant projects.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE H--LIQUIDITY AND AVAILABILITY OF RESOURCES

The following reflects the Clinic's financial assets as of September 30, 2021, reduced by amounts not available for general use because of contractual, donor-imposed restrictions, or board limitations within one year of the statement of financial position reporting date.

Cash and cash equivalents	\$	13,546,813
Investments		84,281
Grants and contracts receivable		272,613
Patient services accounts receivable Other receivables		1,520,408 7,028
Total financial assets available within one year		15,431,143
Less those unavailable for general expenditures due to:		
Granting agency or donor imposed restrictions		(2,316,275)
Board designated		(10,496)
Total financial assets available to meet cash needs for general expenditures within one year	\$	13,104,372
	Ψ	13,104,372

The Clinic has a goal to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due.

NOTE I--RECENTLY ISSUED ACCOUNTING STANDARDS

FASB has issued new accounting guidance which will be effective for the Clinic in future years. A description of the new accounting guidance and the fiscal year in which it will be effective is described below:

Fiscal Year Ended September 30, 2022

In September 2020, the FASB issued ASU 2020-07, *Not-for-Profit Entities (Topic 958): Presentation and Disclosures by Not-for-Profit Entities for Contributed Nonfinancial Assets*, to improve financial reporting by providing new presentation and disclosure requirements about nonfinancial assets for not-for-profit entities, including additional disclosure requirements for recognized contributed services. Application of this standard is effective for fiscal years beginning after June 15, 2021.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

September 30, 2021

NOTE I--RECENTLY ISSUED ACCOUNTING STANDARDS, CONTINUED

Fiscal Year Ended September 30, 2023

In February 2016, FASB issued ASU 2016-02, *Leases (Topic 842)*. ASU 2016-02 was issued to increase transparency and comparability among organizations by recognizing lease assets and lease liabilities on the balance sheet and disclosing key information about leasing arrangements. Due to the provisions of ASU 2020-05, the amendments were delayed to become effective for fiscal years beginning after December 15, 2021.

Management is currently evaluating the impact the adoption of these pronouncements will have on the Clinic's financial statements in future reporting periods.



Independent Auditors' Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with Government Auditing Standards

To the Board of Directors Central Oklahoma American Indian Health Council, Inc. Oklahoma City, Oklahoma

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Central Oklahoma American Indian Health Council, Inc. (the "Clinic"), a not-for-profit organization, which comprise the statement of financial position as of September 30, 2021, and the related statements of activities, cash flows and functional expenses for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated June 14, 2022.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Clinic's internal control over financial reporting ("internal control") to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Clinic's internal control. Accordingly, we do not express an opinion on the effectiveness of the Clinic's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be significant deficiencies or material weaknesses. Given these limitations, during our audit we did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Clinic's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Clinic's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Clinic's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Rose Rock CPAS PUL

Edmond, Oklahoma June 14, 2022



Independent Auditors' Report on Compliance for Each Major Program and on Internal Control over Compliance Required by the Uniform Guidance

To the Board of Directors Central Oklahoma American Indian Health Council, Inc. Oklahoma City, Oklahoma

Report on Compliance for Each Major Federal Program

We have audited Central Oklahoma American Indian Health Council, Inc.'s (the "Clinic") compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the Clinic's major federal programs for the year ended September 30, 2021. The Clinic's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditors' Responsibility

Our responsibility is to express an opinion on compliance for each of the Clinic's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 *U.S. Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Clinic's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of the Clinic's compliance with those requirements.

Opinion on Each Major Federal Program

In our opinion, the Clinic complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended September 30, 2021.

Report on Internal Control over Compliance

Management of the Clinic is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the Clinic's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Clinic's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Rose Rock CPAs PUL

Edmond, Oklahoma June 14, 2022

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

Year ended September 30, 2021

Federal Grantor/Pass-Through Grantor and Program Title	Federal Assistance Listing Number		eral Award penditures
U.S. Department of Health and Human Services			
Direct programs: Indian Health Service Health Management Development Program	93.228	\$	13,211,536
Special Diabetes Program for Indians	93.237		936,333
Methamphetamine and Suicide Prevention Initiative Community Opioid Intervention Pilot Project Domestic Violence Prevention Initiative Total Demonstration Projects for Indian Health	93.933 93.933 93.933		197,145 45,323 24,227 266,695
SAMHSA Projects - Native Connections SAMHSA Projects - Creating a Community System of Care SAMHSA Projects - Strategic Prevention Framework SAMHSA Projects - Supplemental Total SAMHSA Projects	93.243 93.243 93.243 93.243		222,001 270,594 210,968 87,137 790,700
COVID - 19 - Emergency Grants to Address Mental and Substance Abuse Disorders During COVID-19	93.665		628,433
Good Health and Wellness in Indian Country	93.479		375,000
COVID-19 - Provider Relief Fund	93.498		3,579,014
A Comprehensive Approach to Good Health and Wellness in Indian Country	93.762		154,058
Total direct awards			19,941,769
Passed Through Southern Plains Health Tribal Board: Tribal Public Health Capacity Building and Quality Improvement Umbrella Cooperative Agreement	93.772		160,261
TOR-Opioid Total passed through Southern Plains Health Tribal Board	93.788		302,350 462,611
Total U.S. Department of Health and Human Services			20,404,380
TOTAL FEDERAL PROGRAMS		<u>\$</u> 2	20,404,380

See accompanying notes to schedule of expenditures of federal awards.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

September 30, 2021

(1) BASIS OF PRESENTATION

The schedule of expenditures of federal awards is a summary of the Clinic's federal award programs presented on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America. The information in the schedule of expenditures of federal awards is presented in accordance with the requirements of the Uniform Guidance. Because the schedule presents only a selected portion of the operations of the Clinic, the schedules are not intended to and do not present the financial position, changes in net assets, or cash flows of the Clinic.

(2) SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the schedule of expenditures of federal awards are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

The Clinic allocates certain indirect expenses to its programs based on management estimates and the determination of the percentage of effort expended by employees and other statistical factors. In this manner, the Clinic has elected not to use the 10 percent de minimis indirect cost rate, which is allowed in accordance with the Uniform Guidance.

(3) <u>SUB-RECIPIENTS</u>

Of the expenditures presented in the schedule of expenditures of federal awards, the Clinic did not provide any awards to sub-recipients.

(4) OUTSTANDING FEDERAL LOANS

The Clinic has no federal loan obligations as of September 30, 2021.

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

SCHEDULE OF FINDINGS AND QUESTIONED COSTS

September 30, 2021

SECTION I-SUMMARY OF AUDITORS' RESULTS

Financial Statements

- a. The independent auditors' report on the financial statements expressed an unmodified opinion.
- b. No significant deficiencies or material weaknesses were reported in the independent auditors' report on internal control over financial reporting.
- c. No instances of noncompliance material to the financial statements of the Clinic were disclosed during the audit.

Federal Awards

- d. No significant deficiencies or material weaknesses in internal control over compliance with requirements applicable to major federal awards programs were reported in the independent auditors' report on internal control over compliance.
- e. The independent auditors' report on compliance for the major federal awards programs expressed an unmodified opinion.
- f. The audit disclosed no findings required to be reported by the Uniform Guidance.
- g. The federal award programs tested as major programs include:

	CFDA Number
Indian Health Service Health Management Development Program	93.228
Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243
Provider Relief Fund	93.498
Good Health and Wellness in Indian Country	93.479

CENTRAL OKLAHOMA AMERICAN INDIAN HEALTH COUNCIL, INC.

SCHEDULE OF FINDINGS AND QUESTIONED COSTS, CONTINUED

September 30, 2021

SECTION I--SUMMARY OF AUDITORS' RESULTS, CONTINUED

Federal Awards, Continued

Internal Control Findings

None

- A threshold of \$750,000 was used to distinguish between Type A and Type B programs, h. as those terms are defined by the Uniform Guidance.
- k

i. For the year ended September 30, 2021, the Clinic met the criteria to be a low-ris auditee, as described by the Uniform Guidance.
SECTION IIFINANCIAL STATEMENT FINDINGS
Compliance Findings
None
Internal Control Findings
None
SECTION IIIFEDERAL AWARD FINDINGS AND QUESTIONED COSTS
Compliance Findings
None
Internal Control Findings
None
PRIOR AUDIT FINDINGS AND QUESTIONED COSTS
Compliance Findings
None



VISION STATEMENT

To be the national model for American Indian health care.

MISSION STATEMENT

To provide excellent health care to American Indians.

CORE VALUES

People First Quality Integrity Professionalism



