



**VHCPP ANNUAL REPORTING FORM**  
**Fiscal Year July 1, 2013- June 30, 2014**

- **Clinic/Organization Name:** SPECIALCARE
  
- 1. Total Number of Patient Visits:** 2530  
 (A patient visit is a face-to-face meeting between a patient and a health care professional in order to receive medical services.)
  
- 2. Total Number of Active Licensed Health Care Providers Participating in Your Organization:** 179  
 (Total number of 766 and non-766 providers that are actively participating in your clinic.)
  
- 3. Total Number of Licensed Health Care Provider Volunteer Hours:** (If hours are documented.) 2132
  
- 4. Total Dollar Value of Services for Licensed Health Care Providers:** \$ 1,662,856.68  
 (To be determined by: (1) An hourly rate based on the figures below; (2) Actual cost of services; or (3) Value based on visits or referrals.)
  
- 5. Total Dollar Value of Donations:** \$ 302,500.00  
 (Donations include items such as: monies, pharmaceuticals, eyeglasses, labs, x-rays, equipment, etc., **do not include grants.**)
  
- 6. Total Number of General Staff Volunteers:** 0  
 (Volunteers performing general duties, answer the phone, medical records, make copies, repairs, etc.)
  
- 7. Total Number of General Staff Volunteer Hours:** 0
  
- 8. Total Value of Services for General Staff Volunteers:** \$ 0  
 (Multiple line 7 by \$22.14)
  
- 9. Total Value of Service:** \$ 1,965,356.68  
 Add lines 4, 5, and 8 together.)

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- 10. Total Number of Active DOH 110 Volunteers:** 45  
 (Include only the DOH 110 volunteers that have applications on file who complete the eligibility and referral process for DOH.)
  
- 11. Total Number of DOH 110 Volunteer Hours:** 8588  
 (110 volunteers hours doing patient eligibility and referrals only.)
  
- 12. Total Dollar Value of Services for DOH 110 Volunteers:** \$ 190,138.32  
 (Multiply line 11 by \$22.14) This value will be reported under the CHD.
- 13. PROGRAM TOTAL (9 + 12)** **\$2,155,495.00**

The following values per hour are offered as a suggested guideline for your use in estimating the value of your volunteer services. Reported value of hours should not exceed these hourly values.

Physician:	\$250/Hour	Optometrist:	\$50/Hour	LPN:	\$25/Hour
Dentist:	\$200/Hour	ARNP/PA:	\$75/Hour	Respiratory Therpt.	\$40/Hour
Chiropractor:	\$ 90/Hour	Registered Nurse:	\$35/Hour	Dental Hygienist:	\$25/Hour
Pharmacist:	\$ 75/Hour	Physical Therapist:	\$60/Hour	Support Staff	\$22.14/Hour
Social Worker	\$ 50/Hour				