

# 2026 GVI FISCAL YEAR REPORT



Celebrating Our Impact,  
Shaping Our Future

**Budget Hearing Testimony**

**July 30, 2025**  
**Tess G. Richards, MD**  
**Executive Director**




# Introduction

Good morning, Honorable Senator Novelle Francis - Chairman of the Budget and Appropriations Committee, Honorable Senators of the Budget and Appropriations Committee, other Honorable Senators of the 36<sup>th</sup> Legislature present, St. Thomas East Medical Center board of directors and staff, and the listening and viewing audience. I am Dr. Tess Richards, the Executive Director of St. Thomas East End Medical Center Corporation (STEEMCC).

Thank you for the opportunity to appear before this Committee to present testimony on STEEMCC's budget for FY2026. Our testimony today is a reflection of two years of grit, sacrifice, and hope. We have rebuilt, reimagined, and renewed our mission. Ours is the story of a health center that chose to rise rather than retreat, and it is an invitation to you, our humble leaders, to co-author the next chapter with us: one where the health of our people is not determined by circumstance, but secured by collective will. While we are immensely proud of the progress we've made, we remain acutely aware that our transformation is still underway. The work before us is formidable, and the barriers to equitable care are not merely operational; they are systemic. It is our mission and our greatest honor to open our doors to serve this community each day, without fail. We want to remain a sanctuary for those with no other options, and for those who trust us above all others. It is an act of endurance, of love, and of purpose, but sustaining that mission requires more than heart. As we continue striving to deliver high-quality, compassionate care to the residents of the St. Thomas-St. John district, we must also confront the fiscal realities that threaten our momentum. With your partnership, we can continue supporting the people we serve and the resilient team at STEEMCC who rise to meet this mission every day. To that end, we will review our current financial situation, including our accounts payable and the rising volume of uncompensated care that grows with each patient we refuse to turn away.

Over the last 12 months, we have heard your repeated demands for improved healthcare within the territory, and we thank you for voicing what so many of our patients feel every day. You've made it clear that healthcare is a priority for this body, and we are heartened to know that we share that same conviction. At STEEMCC, that conviction guides every decision we make. For us, it is not just a priority, it is our entire purpose; it is a promise we make to this community every single day, and it is the pulse that propels us forward.

STEEMCC has come a long way. For years, the establishment weathered a quiet storm, trapped in a cycle of mismanagement, limited funding and uncertainty that threatened to erode the very care our community depends on, but we did not falter. Through bold choices and unshakable resolve, we rose, steadily and deliberately, out of a long and difficult chapter. We streamlined operations, deepened our services, restored stability, and began to rebuild something more powerful than infrastructure: and that is the trust of our community, our partners, and the people who walk through our doors hoping to be seen, heard, and healed.



The STEEMCC team works tirelessly every single day, with limited resources, limited funding, but unlimited heart. We stretch, we sacrifice, and we show up. It is not easy, but we know that this community deserves nothing less than our full commitment to serve.

If dedication alone were enough, STEEMCC would be thriving, but compassion does not cover payroll, commitment cannot expand our hours or services, and heart, no matter how full, cannot fill a budget gap or increase access for the patients who depend on us.

While STEEMCC has made meaningful strides, we know our work is far from done. We've found our footing, but stability is only the beginning. To continue this upward path, what we need now is not rescue, but partnership and your continued support. We are well-aware that there is more to improve; there always will be. Many of the challenges that remain are not reflections of inaction or indifference. They are reflections of reality: a community health center doing all it can with all it has. STEEMCC is not just our health center, it is yours, it is the community's. It belongs to every family who walks through our doors, every elder who counts on us to stay healthy, and every child whose first doctor visit happens in our exam rooms.

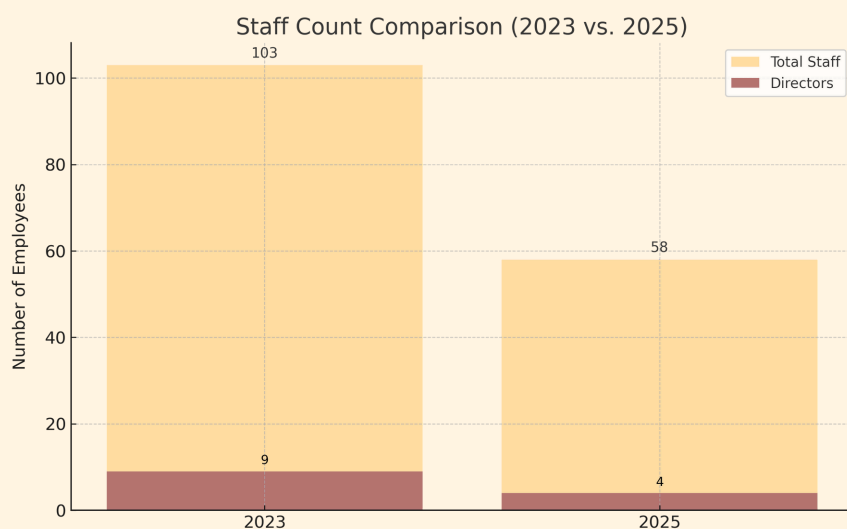
The future of the only federally qualified health center (FQHC) serving St. Thomas and St. John rests in the decisions made in this room that directly impact those of us who have long been doing more with less, stretching every dollar, and carrying the weight with quiet determination.

At STEEMCC, we do not wait for change, we create it. We know that while local and federal government assistance is essential to supplement, self-sufficiency is our responsibility. Since this leadership team began its tenure, we have taken bold, often difficult steps to reduce expenses, generate new revenue, and lay the foundation for a stronger, more sustainable future.

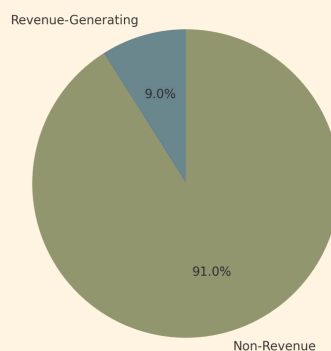
We have had to be resilient, working deliberately and urgently to reduce costs, grow revenue, and build something sustainable. And we did so, even in the face of financial crisis, community skepticism and limited resources.

That is what progress looks like when resilience leads the way.

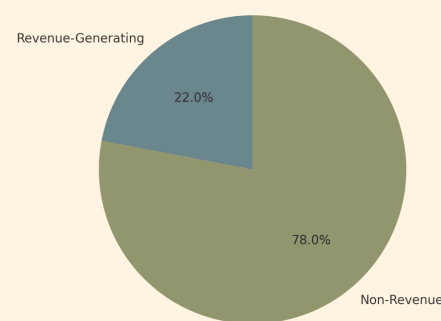
STEEMCC began by right-sizing our team, making the difficult, highly scrutinized and very unpopular, but necessary decision to restructure. In 2023, we reduced our workforce from 103 employees, 9 of which were directors, to a leaner, more efficient team of 58 employees and just 4 directors. This was not downsizing, it was “rightsizing.” The composition of our staff has changed from 9% of the staff generating revenue in 2023, to 22% of the staff generating revenue in 2025. Every position at STEEMCC now has purpose, and every dollar is accounted for.



2023 Workforce Composition



2025 Workforce Composition



We were also forced to make some of the hardest decisions any leadership team can face— decisions that put mission over comfort. In order to safeguard the future of STEEMCC, we temporarily furloughed staff and implemented an 8% salary reduction in July of 2024. These were not easy conversations, and they were not decisions made lightly, but they were necessary, strategic measures to stabilize our operations during a time of real uncertainty. By the middle of November— four months later, we had done what we set out to do; we stabilized, we recovered, and we were able to fully restore salaries and reimburse the staff all of the money that was withheld during those 4 months— just as we had promised.

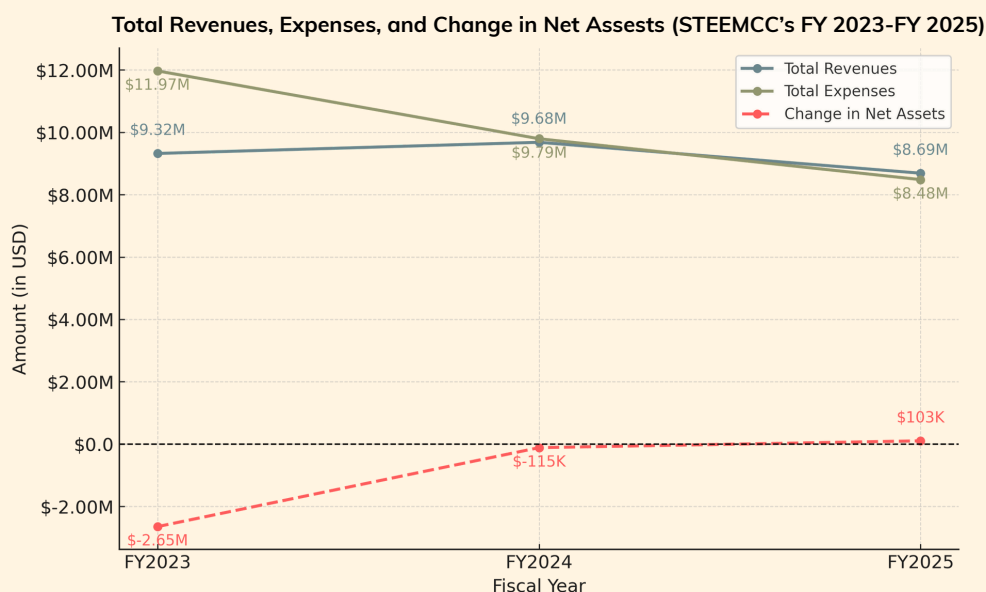


To further strengthen our financial operations, we brought on a dedicated revenue cycle team— experts now helping us optimize billing, increase collections, and ensure that every dollar earned is reinvested into patient care. This is about building smart systems, not just strong intentions, and certainly not just talk.

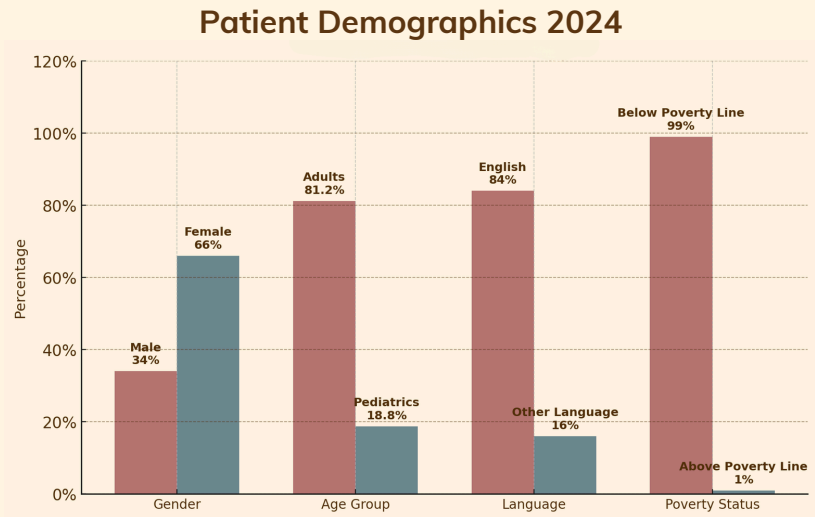
In addition to these financial decisions, we remained financially disciplined. Through intentional cost-cutting measures, we eliminated what was once a \$300,000 monthly shortfall. That deficit could have crippled us. Instead, we closed the gap, and we did it without compromising our mission. We took bold steps to untangle ourselves from the burdens of the past, including terminating a land lease that carried an estimated \$40 million liability. That single decision cleared the path for fiscal recovery and long-term sustainability.

The impact of these strategic decisions is best understood when we examine our financial performance over the last three years. You'll see that while our revenues remained fairly stable, we made a significant impact by reducing our expenses year over year. That's a direct result of our cost-cutting measures and improved operational efficiency.

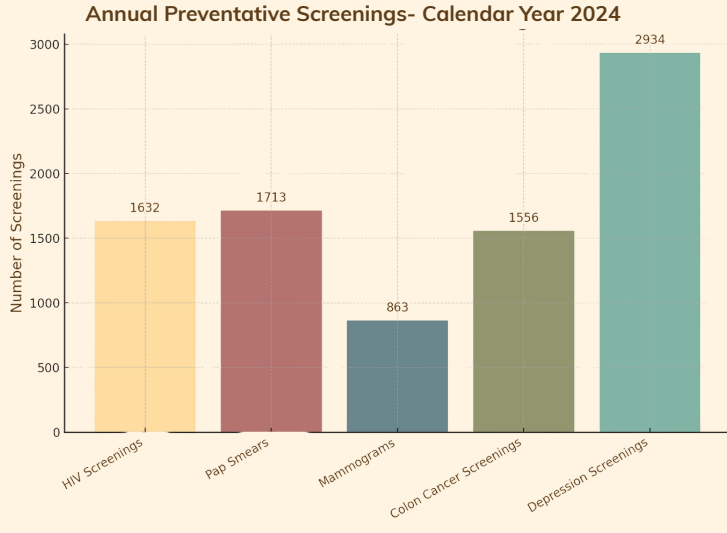
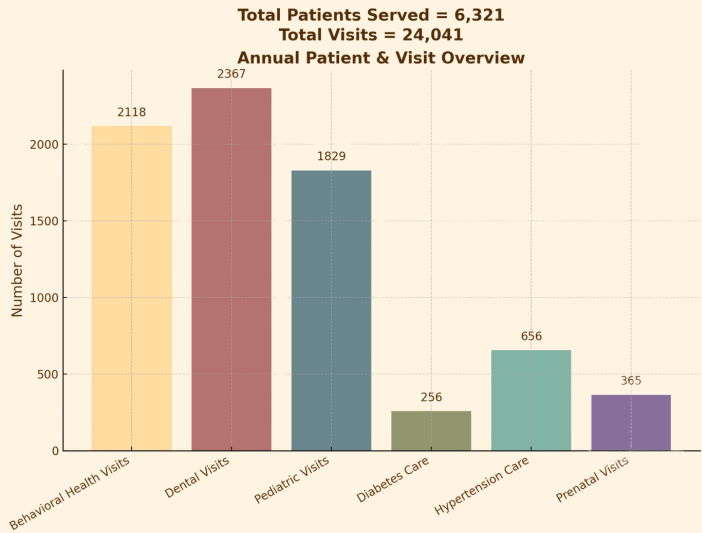
The red line shows our change in net assets. In 2023, we had a large deficit, but by 2024, we nearly broke even, and in 2025, we were able to end the year with a small surplus of \$103,000. This steady progress reflects the strength of the financial decisions we made to stabilize and strengthen STEEMCC for the long term.



While we were restoring our financial health, we also expanded our capacity to serve our unique patient population (which is depicted in the graph below). With 99% of our patients below the Federal Poverty line, it is a daily imperative to embody our mission statement: to eliminate barriers to healthcare for those who are poor, uninsured, or who simply lack access to doctors and basic health services.



Since 2023, we’ve added eight new revenue-generating providers across our clinical departments, including behavioral health, family medicine, women’s health, internal medicine, dental, and pediatric care, bringing critical services closer to the people who need them most. The impact of these additions is evident in our 2024 visit breakdown, which showcases the most frequently utilized services, along with the substantial number of preventive screenings performed, reflecting both the rising demand for care and our capacity to deliver it.

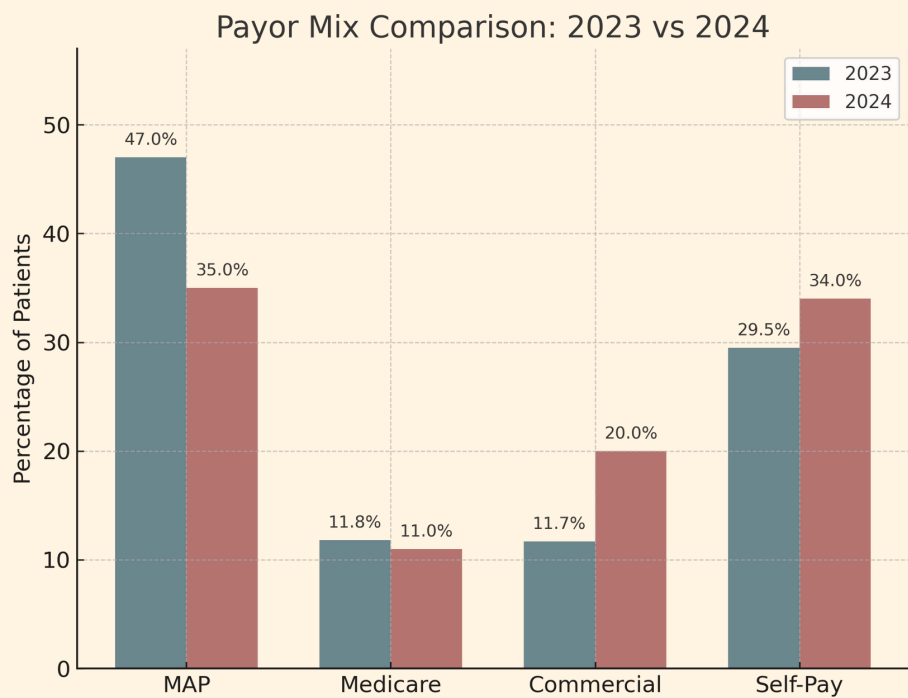


The downstream effects of our fiscal interventions and operational reforms are perhaps most evident in the evolving composition of our payor mix.

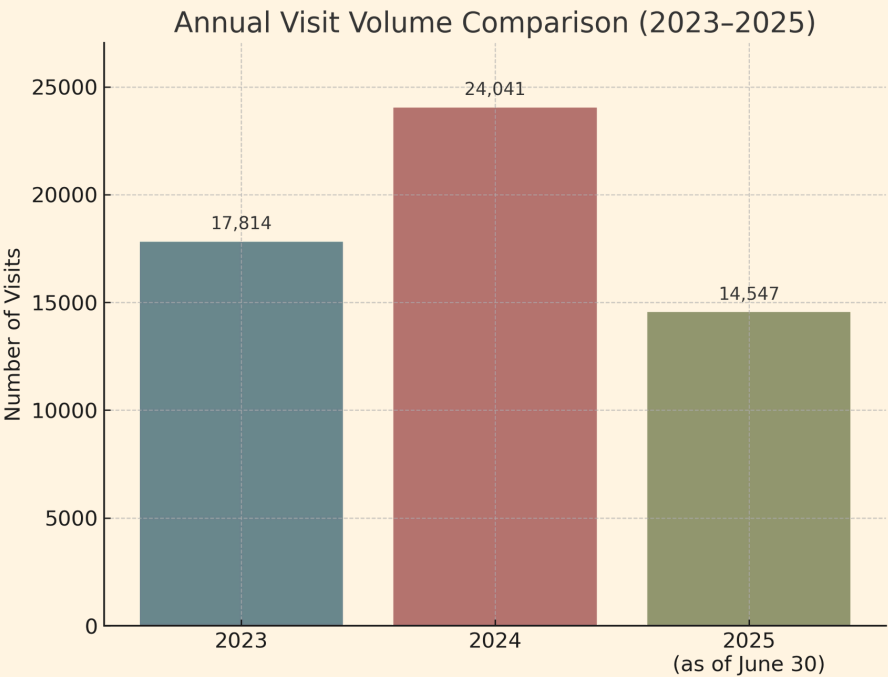
Between calendar years 2023 and 2024, we observed a pronounced decline in patients on the Medical Assistance Program (MAP), dropping from 47% to 35% of our patient base. Concurrently, the proportion of self-pay patients rose from 29.5% to 34%, a shift that is indicative of gaps in insurance coverage and greater accessibility for uninsured individuals. As a Federally Qualified Health Center, we do not turn away individuals without insurance, and we offer several discount programs to ensure that care is accessible. While this inclusivity aligns with our mission to serve the most vulnerable, it inevitably contributes to a growing burden of uncompensated care.

Notably, the share of patients with commercial insurance nearly doubled, increasing from 11.7% to 20%. This upward trend suggests improved engagement with working professionals and employer-sponsored plans, reflecting both growing trust in our services and expanded reach into a more economically diverse population. Medicare coverage remained relatively consistent, with only a marginal decrease from 11.8% to 11.0%.

Collectively, these shifts reveal a more diversified and dynamic revenue structure that aligns with our broader commitment to sustainability, equity, and community responsiveness.



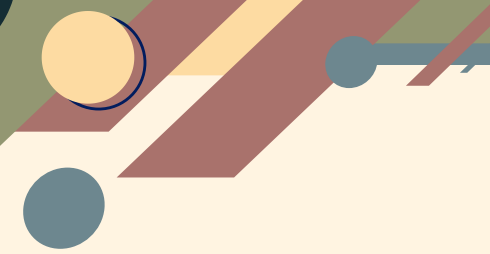
These shifts in payor composition occur in tandem with a broader resurgence in service utilization. As coverage types and service providers diversified, so too did demand for care, as evidenced by the steady upward trajectory in our annual visit volume. As the graph illustrates, our visit volume has grown consistently over the past three years, signaling a strong rebound in service demand. In 2023, we recorded 17,814 visits. That number rose sharply in 2024 to 24,041, a nearly 35% increase year-over-year. As of June 30, 2025, we had already documented 14,547 visits, which positions us to potentially surpass the previous year's total by year-end.



One notable enhancement has been the successful resumption of in-house laboratory services. This has streamlined clinical operations and enhanced the patient experience, contributing meaningfully to the increase in visit volume. Our patients shouldn't have to bounce from building to building just to get a simple blood test. Now, they can walk through one door, be seen, be heard, have their labs drawn, and leave knowing they were cared for, not passed along. This year alone, 3,334 lab draws have been done on in our in-house laboratory! That's what patient-centered care looks like, and that's what we have built and continue to build.

We also added a part-time specialty service, dermatology, to address a critical gap in care and improve our payor mix. And in that suite, we are identifying and treating skin cancers early, giving our patients a future.

Furthermore, we expanded our 340B program, both to generate revenue (from \$1,800-\$2,000 per month in 2024, to approximately \$20,000-\$25,000 per month in 2025) and to ensure that our patients can afford the medications they need. No one should have to choose between treatment and groceries.



STEEMCC also developed a robust care management program to ensure continuity and personalized support across the patient journey. This, too, is a revenue generating stream bringing in approximately \$15,000 per month.

STEEMCC's new foundation, called VI HELP (Virgin Islands Health Empowerment for Low Income Persons) is officially off the ground. VI HELP has held a few small introductory events and we are in the process of planning our annual gala which will kick off in 2026.

Even as we strengthened from within, facing one obstacle after another, we never lost sight of our mission- who we serve or how we serve them. We reached out to several government agencies and developed MOUs to provide care to their employees using innovative, mutually beneficial frameworks that benefit both our workforce and the community. We are also actively in discussions with additional agencies and private sector partners to expand these efforts and find other ways of generating revenue and bringing more of our community into care.

One way we are bringing more of our community into care is through our tele-behavioral health services, made possible by a \$1.75 million Behavioral Health grant awarded over five years, secured in September 2024. This funding has allowed us to significantly grow our capacity and provide critical mental health support to some of our most vulnerable and high-risk patient populations. Our goal through this project is to reduce poor behavioral health outcomes by addressing disparities and ensuring equitable access to care in alignment with HRSA's definition of health equity. Recognizing the urgent need for intervention and addressing the lasting effects of hurricanes, pandemics and other disasters on mental health services and infrastructure is paramount. Integrated tele-health services will play a crucial role in bridging these exacerbated gaps. Through high-impact patient recruitment leveraging targeted outreach, engaging presentation series, collaborative partnerships, and strategic social media campaigns, our mission is to broaden access to remote behavioral health services, including individual/group therapy, psychiatry, and Substance Use Disorder treatment for all residents in the St. Thomas-St. John district.

We are not stopping there! STEEMCC submitted two additional federal grant applications, each one focused on expanding our infrastructure, impact, and reach. We are hopeful that both grants will be approved so we can expand access and increase services for our community (out east, down west and in St. John) by deploying the state-of-the-art mobile tele-health units equipped with broadband-enabled telemedicine technology, cloud-based electronic health records (EHRs), and secure Health Information Exchange (HIE) networks we requested as part of our grant application.



Beyond the walls of our clinic, we've made it a point to meet the community where they are. Over the past year, we've hosted and participated in events focused on breast cancer awareness, intimate partner violence, HIV/AIDS, diabetes, mental health, and more— reaching hundreds of patients. We showed up at the Carnival Food Fair, the VI Boating Expo, and everywhere in between with services, screenings, and our genuine support. We bring care to where life unfolds— on the street, at the fair, in the quiet spaces between celebration and survival— because healing doesn't wait for a clinic door, and compassion doesn't ask people to come find it.

Domestic Violence Awareness- First Responder Care Package Delivery to Emergency Room nurses to show appreciation for all that they do.



STEEMCC Staff showing their support for domestic violence awareness month



Community Artwork "Breaking Free" Donation to the Family Resource Center. Community members added a butterfly to the piece to show their support for domestic violence warriors



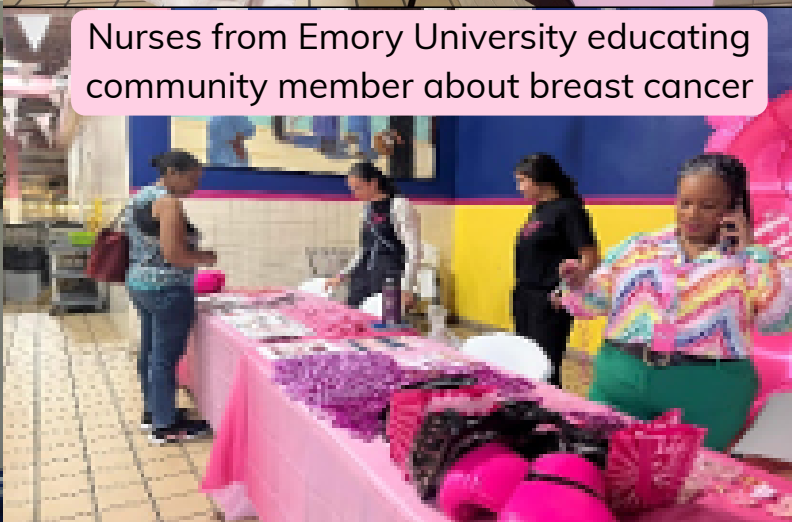
Breast Cancer Awareness- community members adding a flower to "Blossoms of Hope" in solidarity of breast cancer victims and survivors



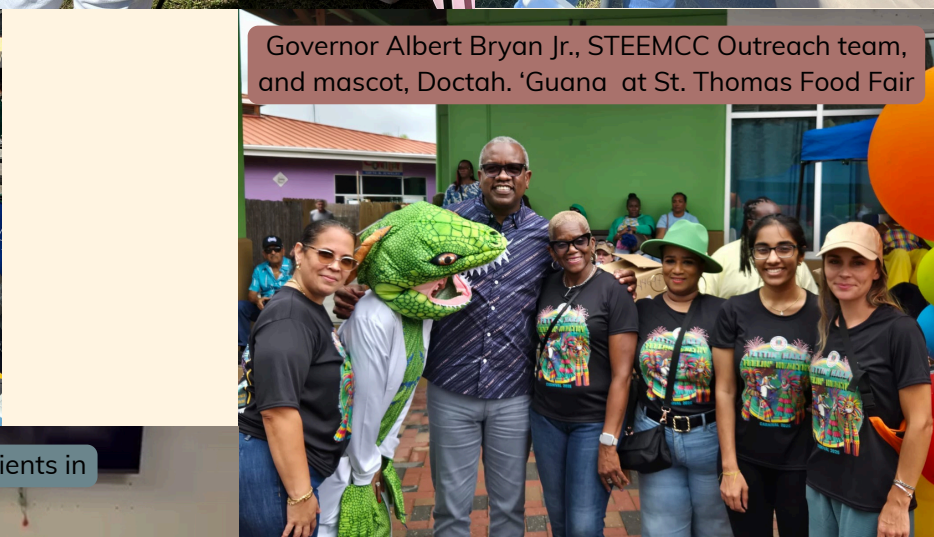
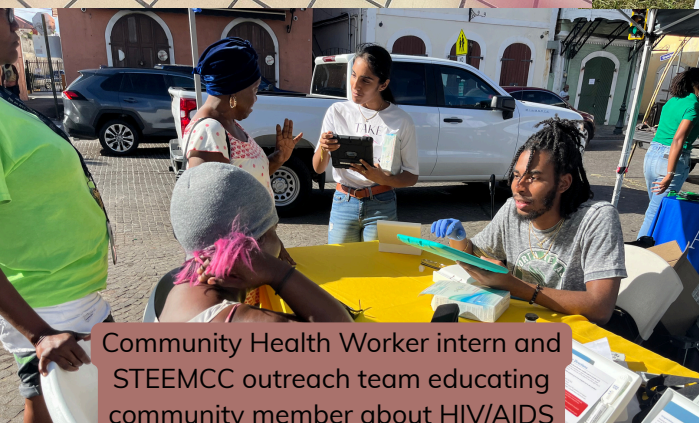
Community Artwork "Blossoms of Hope" donation to the Charlotte Kimelman Cancer Institute



Nurses from Emory University educating community member about breast cancer









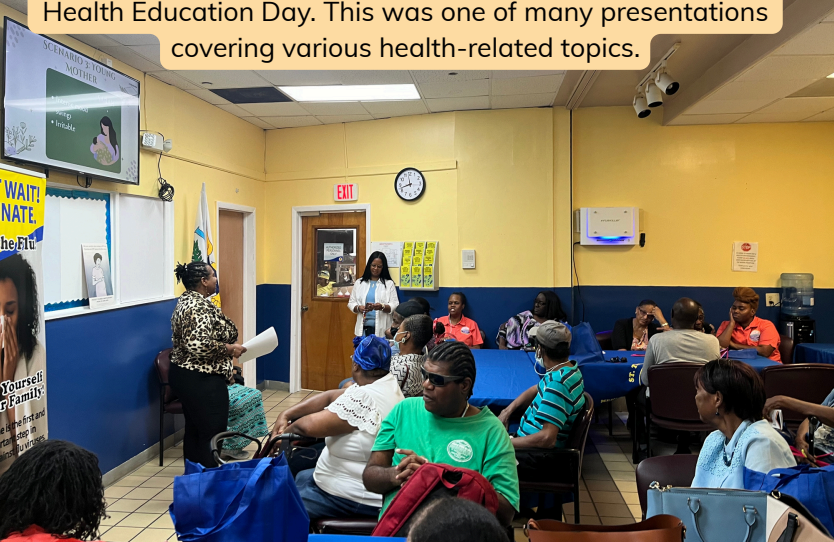
STEEMCC Outreach team and community members at the Virgin Islands Boating Expo



Dr. Fill, our dental mascot, educating the community's youth about oral hygiene



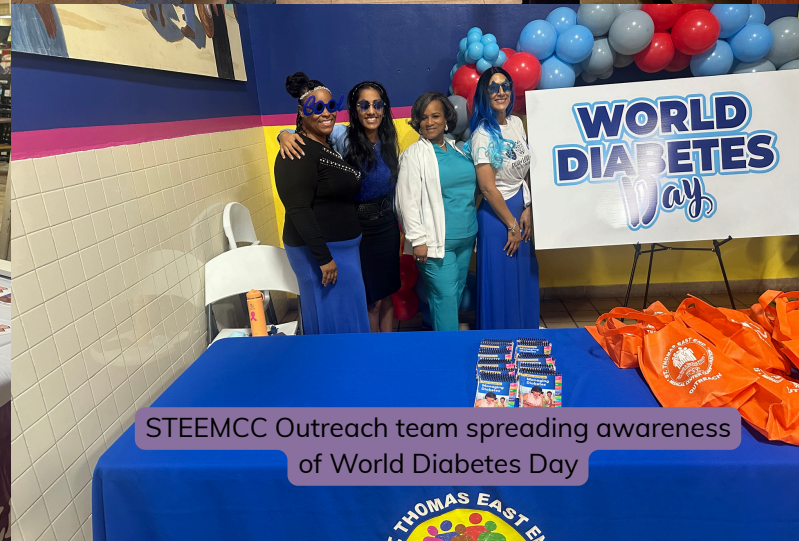
STEEMCC Behavioral Health Unit Manager educating community members about Behavioral Health for STEEMCC Health Education Day. This was one of many presentations covering various health-related topics.



STEEMCC Executive Director, Tess G. Richards, MD, donating care packages for breast cancer patients to cancer specialist, Dr. Bachan, in honor of breast cancer awareness month.

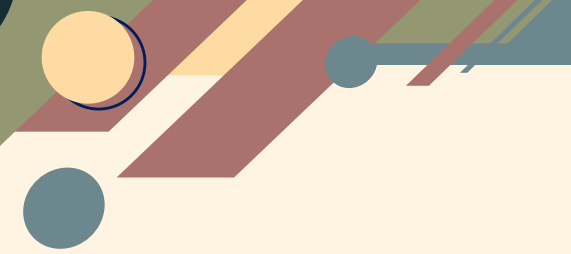


STEEMCC Executive Director, Tess G. Richards, MD, educating the community about domestic violence and empowering our survivors



STEEMCC Outreach team spreading awareness of World Diabetes Day






STEEMCC's commitment doesn't stop at care delivery, it extends into the future of our healthcare workforce. Each year, we welcome local high school students to intern with us, to shadow, to learn, and to be inspired. We regularly give presentations at the University of the Virgin Islands as part of the Cardiovascular Research and Empowerment Workforce Program, sharing our expertise and helping shape the next generation of health professionals. We've also opened our doors to students in medicine, nursing, and allied health, offering clinical rotations to physician assistants, nurse practitioners, and even medical students from right here in the Virgin Islands who have gone away for training but wish to return home to serve.

We do not deny them the opportunity to learn, because to do so would be to deny the future of this Territory's healthcare. Our collective success rests on our ability to nurture and sustain the next generation of healthcare leaders. At STEEMCC, mentorship is how we multiply the impact of care far beyond a single visit or a single patient. It's how we make sure the next wave of providers is rooted, invested, and prepared to serve this community.

Just as we are intentional about cultivating future providers through mentorship, we are equally intentional about protecting the systems and structures they will inherit. Our investment in the next generation is mirrored by our commitment to fortifying the present. Since this leadership team began in 2023, risk mitigation has been at the forefront of our strategy. This includes providing high quality patient care, all the steps we have taken to improve our financial position, and extends to ensuring the security and safeguarding of our patient information.

From a quality standpoint, we have undertaken significant investments in the technological substratum that is the foundation of providing comprehensive, high-quality care. Foremost among these initiatives is the deployment of a new Electronic Medical Records (EMR) system, which has markedly enhanced our capacity to capture, analyze, and report critical performance indicators. These include, but are not limited to, patient throughput, appointment metrics, provider compliance with documentation, and the precision of our billing mechanisms. These metrics serve as administrative benchmarks and pivotal instruments in our pursuit of continuous quality improvement and institutional accountability. Please see Appendix A for Sample Quality Assurance Report.

Moreover, we are in the process of evaluating the integration of clinical documentation specialists, commonly referred to as medical scribes, into our care delivery model. This intervention is projected to mitigate the clerical burden borne by our providers, thereby augmenting the quality of patient-provider interactions, making each encounter more personal, while concurrently enhancing clinical documentation and maximizing reimbursement potential through improved coding accuracy.



Our impact is only made possible through meaningful partnerships that strengthen our reach and improve our service. We are proud to collaborate with a range of organizations, agencies, and community leaders who share our commitment to health equity, access, and innovation. Together, we have developed initiatives, expanded services, and brought vital resources to the patients and communities we serve. The chart below depicts a snapshot of these partnerships.

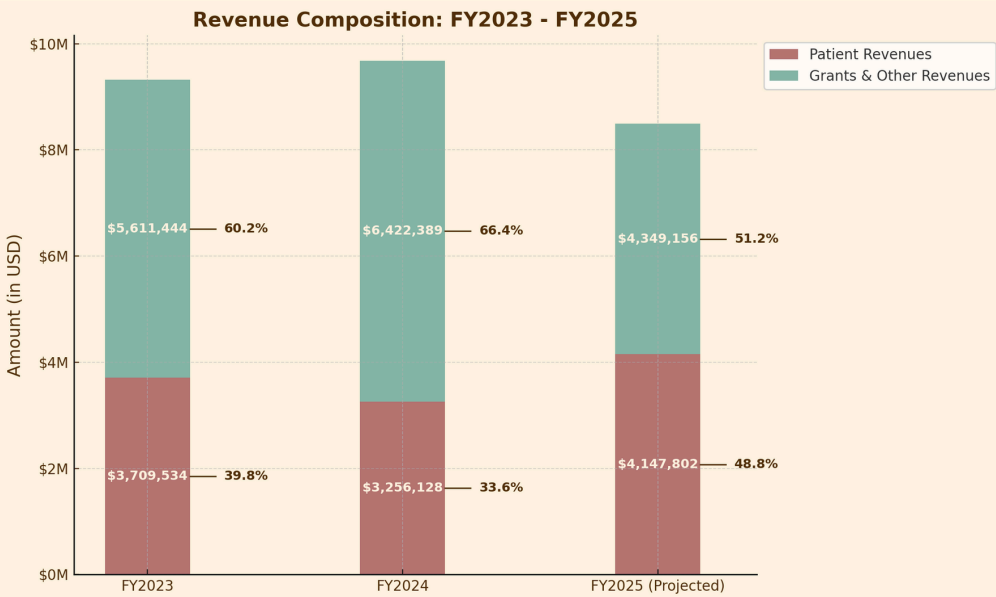
Collaborator	Contribution
Frederiksted Health Care (FHC)	HIV/AIDS Strategy Grant Sub-Recipients
Department of Health	Multiple Outreach Events and Programs; Community Health Workers
Department of Tourism	Multiple Outreach Events and Programs
Emory University/ CDC	Disaster Planning
National Association of Chronic Disease Directors	Diabetes Project
PPCAN	Member of Primary Care Association
Digiimed	Care Management
Howard University	Doctor of Pharmacy Program, REACH-VI Key Collaborator
Zane Networks	REACH-VI Key Collaborator
SUNY	Psychiatry Residents
Marist University	Physician Assistant Students
Bureau of Corrections	Dental Patients, 340B Expansion
Catholic Charities of the Virgin Islands	Care for the Homeless; Screenings
AIDS Education Training Center	Multiple Trainings and Programs
Department of Education	Patient Education- Adolescent Health, Behavioral Health, and Sexual Health
Tutu Park Mall	Multiple Outreach Events and Programs
NAMI (National Alliance on Mental Illness)	Behavioral Health Awareness
Yellow Cedar	Behavioral Health Awareness and Programs
Celestino A. White Senior Center	Hypertension and Diabetes Program
Eldra Schulerbrandt	Hypertension and Diabetes Program; Behavioral Health Program
Ebenezer Gardens	Hypertension and Diabetes Program
Lucinda Millin Home	Hypertension and Diabetes Program
Office of Highway Safety	Multiple Outreach Events and Programs
CC1 Virgin Islands (Coca-Cola)	Multiple Outreach Events
Frenchman's Cove	Multiple Outreach Events
University of the Virgin Islands	REACH-VI Collaboration and Outreach
Family Resource Center	Domestic Violence Awareness
Charlotte Kimelman Cancer Institute	Breast Cancer Awareness
CARIB-CARES	Climate Change Resilience, Literacy, and Awareness



STEEMCC is advancing plans to fortify our cybersecurity infrastructure. As the frequency and sophistication of digital threats continue to escalate, these enhancements will be indispensable to mitigating operational disruptions, safeguarding protected health information, and preserving the institutional integrity of our Center. Taken together, these technological advancements are emblematic of our strategic commitment to sustainability, systems resilience, and the evolving demands of modern healthcare delivery.

From the standpoint of our finances, STEEMCC has already begun to improve our billing and collections and continue to work on revenue generating strategies and exploring new avenues for revenue generation. Despite the improvements we have already made, we are very aware of the need to continue to make improvements, continue to see patients and provide quality care, continue to work on our customer service and continue to work on our billing, collections and revenue cycle as a whole. We’ve already demonstrated the improved financial position we’re in today, closing the year with a surplus of over \$100,000— a clear reversal from the deficits of prior years. Now, let’s take a closer look at how that revenue is structured.

As we look at our revenue composition from FY2023 through FY2025, this chart tells a clear story about how we’ve continued to diversify and sustain our funding streams. What’s important to note here is the balance we’ve maintained. For example, in FY2023, grants made up about 60% of our revenue, while patient revenue covered the remaining 40%. And though projections for FY2025 show a dip in total revenue, our patient revenue share is expected to rise, which signals progress toward financial sustainability. Our journey toward financial balance has not been overnight. It’s taken intentional effort, deep community trust, and tireless work from every part of our organization.



I would like you to take a moment to think about what we have accomplished—*not with surplus, but with scarcity and endurance*. Every advance we’ve made, every life we’ve touched, has been powered by our resolve. We have exhausted every tool, every talent, every ounce of ingenuity we possess to stretch limited resources into lasting impact. We have cut what could be cut, built what could be built, and served everyone who came through our doors. Now imagine what could be possible with more. With the right support, we could expand access, extend hours, alleviate hospital strain, and reach further into the margins where unmet needs still reside. We are not asking for excess; we are asking for enough—enough to sustain the progress we’ve made, enough to honor the labor of those who give so much, and enough to ensure this community health center not only survives, but thrives as well.

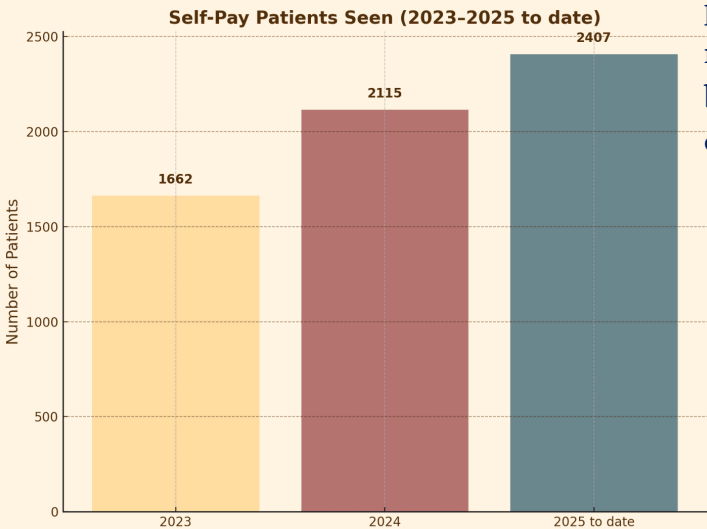
That brings me to what you, as stewards of this Territory, can do for us. Once again, what we need from this body is not charity, it is partnership. We are asking for the resources necessary to fulfill our mission: to care for the underserved with dignity, excellence, and compassion. Our vision is simple, yet profound: a community health center where every patient is met with kindness, seen without delay, treated with skill, and welcomed into a space that is clinically sound, clean, beautiful, and worthy of the people it serves. If you share that vision— if you believe that access, respect, and equity should define healthcare in this Territory— then we ask that you reflect that belief in how we are funded. We are taking care of tomorrow with all that we have, but to move forward freely and fully, we need your help in reconciling the debts of yesterday.


Let’s go over the FY2026 budget request as well as the infusion of cash request presented before this body. The FY2026 budget will cover the following:

1.UNCOMPENSATED CARE:

The budget we requested will help us cover the ever-growing uncompensated care we treat every year. The number of self-pay patients has increased from 1662 in 2023, to 2115 in 2024 to 2,407 already seen in 2025!! With more than 1/3 of our patients uninsured and ineligible for insurance, more than 1/3 of our services receive minimal compensation from our patients. It is our honor to provide care for all of our

patients, but our love for the community we serve does not pay our bills. Our vendors do not send us 1/3 of their bill. If STEEMCC is not open and operational, providing care to the underserved, where will they go?





If we are unable to meet the community's primary care needs, patients will inevitably turn to an already overburdened hospital system. As primary care providers, it is our responsibility to keep patients healthy and out of the hospital, but we can only do that if we are given the resources and funding necessary to deliver that care.

Our appropriation must reflect both the rising cost of healthcare and the growing burden of uncompensated care that we provide each year. Without adequate support, our ability to serve this community is at serious risk.

This brings me to point 2. Legacy Debt

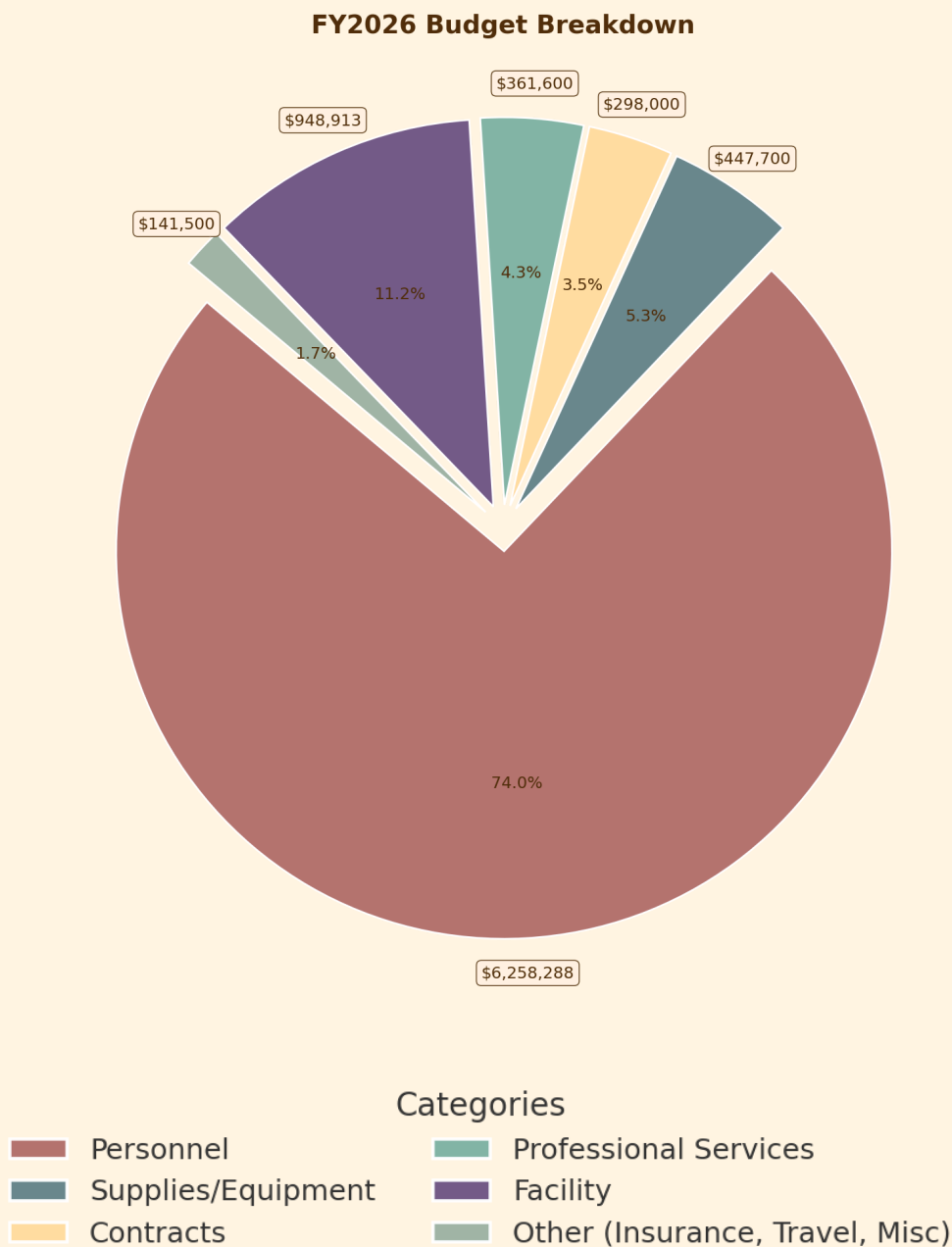
STEEMCC urgently requires strategic financial intervention to address its outstanding accounts payable liabilities, which currently total \$3,725,825. Upon assuming leadership in 2023, this administration inherited a deficit of approximately \$300,000 per month, a fiscal imbalance that jeopardized the viability of the Center. Through rigorous austerity measures, judicious reorganization, and a series of deliberate cost-containment strategies, we successfully eradicated that monthly shortfall. At present, we are operating within our means and are able to meet our monthly obligations.

Yet, despite our ongoing progress, the residual burden of legacy debt remains a persistent encumbrance. While we have made consistent efforts to service this outstanding liability, the accrual of penalties and interest has rendered full repayment increasingly onerous. These debts, and the residual effects of long term historical mismanagement, continue to exert downward pressure on our financial stability.

We have exercised discipline and autonomy over the areas within our control to work towards stabilizing the Center: staffing, procurement, operations, and efficiency. To meet our monthly obligations, including vendor payments and payroll, the timely allocation of government appropriations and prompt Medicaid and insurance remittances is not a matter of discretion; it is absolutely essential to sustaining our operations. When these critical inflows falter, the resulting ripple effect destabilizes our vendor relationships and undermines that stability we have worked so hard to accomplish.

Now that we have a picture of who we are, what we do and why we must continue to provide services to this community, the remainder of this discussion will be about our operating budget for FY 2026.

It is within this context that we respectfully submit our FY2026 budget of \$8,456,001, designed to preserve operational stability, meet rising service demands, and ensure continuity of care for the patients who rely on us most. The requested GVI Appropriation for STEEMCC for FY26 is \$2,500,000-- only a marginal difference from the current appropriation of \$2,400,000.





### Personnel Salaries

The salaries for our current 59 Employees and projected new hires, including revenue generating employees, is budgeted at **\$4,506,008**. This includes providers, clinical support staff, billing and business office staff, administrative new hires and projected new hires.

### Employee Benefits

Employee benefits are a vital part of how we demonstrate our commitment to the health, well-being, and long-term stability of our workforce. The Center's budgeted 2026 benefit rate is approximately **24%**. We approximate total fringe at **1,752,280** to accommodate past due taxes. Our benefits package includes Life, Disability and Health insurance, Employer FICA, Pension, Unemployment Insurance and Workman's Compensation insurance and the employer portion of our retirement plan. Offering competitive benefits helps us attract and retain qualified staff in a competitive healthcare workforce environment and reinforces our commitment to caring for those who care for our community.

### Contracts and Professional Services


Contract(s) and Professional Services have been budgeted at **\$298,000** and **\$361,600** respectively, for a total of **\$659,600**. Professional services include our annual audit, legal fees, bio-waste disposal, security services, and our electronic health records system. Our contracts include IT consultants, our translator service, on call services, laboratory services, pediatric dental program, radiology, and behavioral health contractors.

### Supplies and Equipment

The cost of supplies utilized during patient care, including items used in medical and dental services delivery, laboratory reagents for our point of care testing, immunization supplies, basic office supplies, outreach supplies, and maintenance/housekeeping supplies has been budgeted at **\$387,700**. The cost of equipment, including computers, and Xerox, is budgeted at **\$60,000**. These resources are fundamental to delivering safe, efficient, and high-quality care, ensuring both clinical and operational readiness across all departments.

### Travel and Continuing Education

Travel and Continuing Education is budgeted at **\$13,500** to support management development and Board of Directors training. This investment is critical to strengthening organizational leadership, improving decision-making, and ensuring compliance with evolving healthcare regulations and governance standards. Equipping our leadership and board with up-to-date knowledge and best practices directly enhances the strategic direction, oversight, and sustainability of STEEMCC.





### Insurance

Insurance costs are budgeted at **\$60,000** and cover essential protections including building and contents, directors' liability, valuable papers, and bond insurance. Additionally, the Center utilizes Federal Tort Claims Act (FTCA) coverage to significantly reduce malpractice-related expenses, ensuring comprehensive risk management while maintaining fiscal responsibility.

### Other Charges

Other Charges are budgeted at **\$68,000** and include a variety of operational and outreach-related expenses. This covers provider recruitment activities, such as classified and journal advertisements, telephone listings, and candidate interviews. This is allocated for advertising and events, which support patient mailings, newsletters, health promotion materials, outreach efforts, National Health Center Week, open houses, health screenings, and patient engagement activities. These efforts are intended to reach the wider community, including examples such as older adults, individuals experiencing homelessness, and other underserved populations.

This category also includes staff uniforms, bank charges, postage, dues, licenses, professional fees, and subscriptions, which are necessary to support daily operations and maintain community engagement.

Facility	
Item	Allocation
STEEMCC Rentals (spaces and off-site storage)	\$743,578
Communications (updating in-house telephone, scanners, computers, patient portal, etc.)	\$23,335
Utilities (water and electricity)	\$132,000
Repairs and Maintenance	\$50,000
<b>Total</b>	<b>\$948,913</b>

Under the Facility category, we have budgeted a total of \$948,913 to cover essential infrastructure and operational needs, with the breakdown outlined in the chart. These investments are crucial for maintaining the physical and technological infrastructure that supports both patient care and day-to-day operations.

Budget Breakdown	
Item	Allocation
Personnel	\$6,258,288
Supplies/Equipment	\$447,700
Contracts	\$298,000
Professional Services	\$361,600
Facility	\$948,913
Other (Travel, Insurance, Misc.)	\$141,500
<b>Total</b>	<b>\$8,456,001</b>

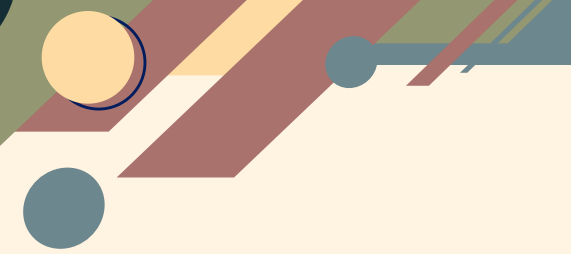
All of these individual allocations come together to form our total proposed budget for Fiscal Year 2026: \$8,456,001. Now let's have a look at the revenue breakdown, with the requested GVI allotment.

Revenue Breakdown with requested FY2026 GVI Allotment		
Item		Allocation
Program Income		\$3,587,280
HRSA 330 Cluster Grant		\$1,461,580
Behavioral Health Integration-Evidence Based Telehealth Program Grant (REACH-USVI)		\$350,000
340B Program		\$250,000
DigiiMed		\$180,000
GVI Appropriations		\$2,500,000
	<b>Total Income</b>	<b>\$8,328,860</b>
	<b>Total Budget</b>	<b>\$8,456,001</b>
	<b>Total Deficit (including depreciation and amortization)</b>	<b>\$280,283</b>

For Fiscal Year 2026, our projected total revenue is \$8,328,860, comprising:

- \$3,587,280 in Program Income,
- \$1,461,580 from the HRSA 330 Cluster Grant,
- \$350,000 through the Behavioral Health Integration – Evidence-Based Telehealth Program Grant (REACH-USVI),
- \$250,000 from the 340B Program,
- \$180,000 in anticipated reimbursements via DigiiMed, and
- \$2.5 million in requested GVI appropriations.

Our corresponding operating budget stands at \$8,456,001, yielding a projected deficit of \$280,283 inclusive of depreciation and amortization.



STEEMCC is requesting a strategic infusion, a deliberate capital infusion of \$2,500,000 that would enable us to amortize outstanding debt, restore fiscal equilibrium, and position STEEMCC for sustainable growth. To ameliorate the enduring financial encumbrances accrued prior to the commencement of our administration, we respectfully petition this body for a one-time fiscal appropriation that would enable STEEMCC to materially reduce its accounts payable obligations and reestablish critical fiscal equilibrium. This targeted capital injection would attenuate the compounding effects of inherited debt and liberate operational resources to be reallocated toward forward-facing, mission-aligned priorities, enhancing care delivery, broadening access, and amplifying community health outcomes.

We posit that this appropriation may be judiciously sourced from existing financial instruments, namely the Epstein Bill appropriations and Medicaid Cost Report reimbursements. These funding streams were explicitly intended to fortify the financial infrastructure of frontline health institutions, particularly those serving as essential safety-net providers, by promoting long-term institutional solvency and uninterrupted service to vulnerable populations.

We urge this body to act as champions on our behalf, to facilitate the timely release of these funds, and to stand with us in transforming what has been a story of survival into a future defined by strength. It is easy to critique from a distance, but we invite you to look closer at what we've overcome. We have placed our faith, our labor, and our credibility on the line for this mission. STEEMCC has demonstrated what is possible with discipline, vision, and relentless resolve. Even with limited resources, we have restructured, recalibrated, and restored. Imagine the possibilities for healthcare if the level of investment from this body matched the needs of the community and the scale of STEEMCC's commitment.