

Minutes

**Maricopa County Special Health Care District
Board of Directors Meeting
Virginia G. Piper Charitable Trust Pavilion
2609 East Roosevelt Street, Phoenix, Arizona 85008
3rd Floor, Board Room
November 25, 2025, 1:00 p.m.**

Present: Virginia L. Korte, Chairman, District 2
Earl V. Wilcox, Vice Chairman, District 5
Martin C. Demos, Director, District 1
Barbara R. Mundell, Director, District 3
J. Woodfin Thomas, Director, District 4

Others Present: Steve Purves, FACHE, President & Chief Executive Officer
Michael D. White, MD, MBA, Executive Vice President, Chief Clinical Officer
Claire Agnew, CPA, MBA, Executive Vice President, Chief Financial Officer
Lia Christiansen, MBC, Executive Vice President, Chief Administrative Officer
Ijana Harris, JD, Chief Legal Officer

**Guest Presenters/
Speakers:** Amanda De Los Reyes, MBA, CRCR, Vice President, Revenue Cycle
Stephanie Hines, RN, Senior Vice President, Chief Information Officer
Oliver Jurkovic, Partner, Plante Moran
Josh Richards, Principal, Plante Moran

Recorded by: Melanie Talbot, Chief Governance Officer; and Clerk of the Board

Call to Order:

Chairman Korte called the meeting to order at 1:00 p.m.

Roll Call

Ms. Talbot called roll. Following roll call, she noted all five voting members of the Maricopa County Special Health Care District Board of Directors were present, which represented a quorum.

Pledge of Allegiance

Director Thomas led the Pledge of Allegiance.

Call to the Public

Chairman Korte called for public comment.

Mr. Purves introduced the members of the Finance, Audit and Compliance Committee (FACC) in attendance. He expressed his appreciation for their years of volunteer service at Valleywise Health and presented them with Years of Service pins to commemorate their service.

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 25, 2025**

Mission Statement

Director Mundell read the Mission Statement aloud.

General Session, Presentation, Discussion and Action:

1. Approval of Consent Agenda:
 - a. Minutes:
 - i. Approve Maricopa County Special Health Care District Board of Directors meeting minutes dated October 22, 2025
 - b. Contracts:
 - i. Approve a new agreement (90-26-106-1) between Vitalant and Maricopa County Special Health Care District dba Valleywise Health, for blood product services
 - ii. Approve a new intergovernmental agreement (IGA)(90-26-121-1) between Arizona Health Care Containment System (AHCCCS) and Maricopa County Special Health Care District dba Valleywise Health, for the transfer \$33,905,831.70 of public funds for use as the Non-Federal Share of the Medicaid payment due under this Agreement for graduate medical education (GME) programs, for the period of July 1, 2024 through June 30, 2025, for the following GME programs; Abrazo Arrowhead (\$3,394,919.06); Abrazo Central (\$926,510.69); Abrazo West (\$2,735,459.82); Canyon Vista Medical Center (\$1,260,591.47); and Valleywise Health Medical Center (\$25,588,350.66), for a total benefit of \$100,372,503.57
 - iii. Approve a new intergovernmental agreement (IGA)(90-26-127-1) between Arizona Health Care Cost Containment System (AHCCCS) and Maricopa County Special Health Care District dba Valleywise Health, for the transfer of \$500,000 in public funds for use as the Non-Federal Share of the Medicaid payment under this Agreement for graduate medical education (GME) programs, for the period of July 1, 2024 through June 30, 2025, for the benefit to Phoenix Children's Hospital of \$1,480,165.78
 - iv. Approve amendment #3 to the group participation agreement (MCO-20-009-03) between United Behavioral Health Inc and Maricopa County Special Health Care District, dba Valleywise Health, allowing Medicare Advantage members to receive comprehensive healthcare services through Valleywise Health's Federally Qualified Health Centers (FQHCs)
 - v. Approve a new facility participation agreement (MCO-25-011-MSA) between United Healthcare and Maricopa County Special Health Care District, dba Valleywise Health, for the provision of comprehensive healthcare services
 - vi. Approve a new medical group agreement (MCO-25-012-MSA) between United Healthcare and Maricopa County Special Health Care District, dba Valleywise Health, for the provision of comprehensive healthcare services
 - vii. Approve amendment #8 to the accountable care organizational agreement (MCO-20-039-08) between UnitedHealthcare Insurance Company and Maricopa County Special Health Care District dba Valleywise Health, for quality-based incentive program participation

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General Session, Presentation, Discussion and Action, cont.:

1. Approval of Consent Agenda, cont.
 - b. Contracts, cont.:
 - viii. Approve amendment #9 to the accountable care organizational agreement (MCO-20-039-09) between UnitedHealthcare Insurance Company and Maricopa County Special Health Care District dba Valleywise Health, for quality-based incentive program participation
 - ix. Approve new agreement (MCO-25-013-MSA) between Aetna Network Services and Maricopa County Special Health Care District dba Valleywise Health for the provision of comprehensive dental services
 - x. Approve addendum A to the dental provider agreement (MCO-20-035-ADD-A) between Liberty Dental and Maricopa County Special Health Care District dba Valleywise Health, allowing Medicaid members to receive dental services through Valleywise Health's Federally Qualified Health Centers (FQHCs)
 - xi. Approve amendment #1 to the agreement (90-24-025-1-01) between Mission Linen Supply and Uniform Service and Maricopa County Special Health Care District dba Valleywise Health for linen rental at Valleywise Health facilities
 - xii. Approve amendment #2 to the contract (90-21-043-1-02) between First Class Valet dba FC Health (FC Health) and Maricopa County Special Health Care District dba Valleywise Health, to extend the contract for an additional two (2) years and add services
 - xiii. Approve amendment #1 to the intergovernmental agreement (90-25-174-1-01) between Office of the Governor of the State of Arizona (GVA) and Maricopa County Special Health Care District dba Valleywise Health, to replace Section IV. Manner of Financing to the reproductive healthcare initiatives. Authorize Valleywise Health's President & Chief Executive Officer to execute amendment
 - c. Governance:
 - i. Approve revisions of the following Board policies and form:
 - a. Policy 99300 G – Call to the Public – Addressing the Board of Directors at a Meeting
 - b. Form 45556 – Board of Directors Request to Speak Form and Procedure
 - ii. Approve affidavits appointing Dustin Bui, DO, and Kate Gillpatrick, DO, as Deputy Medical Directors in the Department of Psychiatry

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General Session, Presentation, Discussion and Action, cont.:

1. Approval of Consent Agenda, cont.

c. Governance, cont.:

- iii. Approve insurance premium payments and policy renewals for the following Maricopa County Special Health Care District insurance providers:
- COPIC / MedPro / Arch / Cap Specialty / MedPro / Sompco (Hospital Liability)
 - Sentry (Workers' Compensation and Auto Liability & Physical Damage)
 - Beazley (Directors' & Officers/ Employment Practices and Fiduciary)
 - RSUI (Excess Director's & Officers Liability / Employment Practices Liability)
 - WR Berkley (Excess Employment Practices Liability)
 - RLI (Excess Director's & Officers / Employment Practices Liability)
 - Beazley (Crime)
 - Beazley (Security-Privacy)
 - ACE (Helipad / Non-Owned Aircraft Liability)
 - Ironshore (Environmental Liability)

d. Medical Staff:

- i. Approve Valleywise Health's Medical Staff credentials for November 2025
- ii. Approve Valleywise Health's Advanced Practice Clinician/Allied Health Professional Staff credentials for November 2025
- iii. Approve revisions to the Department of Surgery - Nurse Practitioner Surgery Delineation of Privileges and Practice Prerogatives
- iv. Approve revisions to the Department of Surgery - Physician Assistant Surgery Delineation of Privileges and Practice Prerogatives
- v. Approve revisions to Policy 39021 – Practitioner Access to Confidential Files
- vi. Confirm Paul Edwin Pugsley, MD, (Emergency Medicine), as Vice Chief of Staff (January 1, 2026 – December 31, 2027)
- vii. Confirm Joel Edward Barkley, MD, (Obstetrics & Gynecology and Women's Health Care), Jeffrey James Miller, MD, (Internal Medicine), Megan Lynn McElhinny, MD, (Emergency Medicine), Shabnam Sood, MD, (Psychiatry), Michele Dee Kassmeier, PA-C, (Orthopedic Surgery), Stacey Elizabeth Klein, ACNP, (Internal Medicine), as Medical Executive Committee Members-at-Large (January 1, 2026 – December 31, 2027)

e. Capital:

- i. Approve Capital Expenditure Request (CER) #26-201 for the design and construction of a new, temporary parking lot on the Roosevelt Campus for \$1,614,000

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General Session, Presentation, Discussion and Action, cont.:

1. Approval of Consent Agenda, cont.

MOTION: Director Thomas moved to approve the consent agenda. Vice Chairman Wilcox seconded.

VOTE: 5 Ayes: Chairman Korte, Vice Chairman Wilcox, Director Demos, Director Mundell,
Director Thomas

0 Nays

Motion passed.

2. Discuss and Review Revisions to Valleywise Health Sliding Fee Discount Schedule and Federally Qualified Health Centers Sliding Fee Discount Schedule

Ms. De Los Reyes provided an overview of the changes to the sliding fee discount schedule, as well as the system that implements the criteria into patients' accounts. Prior to the changes, the sliding fee discount schedule was placed within the patient's insurance coverage module and had five categories. She explained that patients without insurance were automatically placed within Category 5, or the category with the least number of discounts available. It was also noted that discounts were previously based on a percentage of Medicare rates.

There were now four categories, and the sliding fee discount was appropriately operating within the financial assistance module. She explained that with that shift, patients could upload documents to the system to ensure they were placed in the correct category and received the correct discounts. The discounts were now based on the percentage of total charges, which was easier for patients to understand. The staff had conducted an in-depth financial analysis to convert the discounts. Staff also reviewed the market to ensure equity. It was noted that Valleywise Health's Federally Qualified Health Centers (FQHCs) charges were among the lowest in the greater Phoenix area.

She highlighted how the changes to the system streamlined the financial eligibility process for both patients and staff.

The specific changes to the FQHC sliding fee discount schedule were outlined, noting increases to the nominal charge, outpatient imaging, and shifting to a different model for dental services. There were also increases to the sliding fee discount schedule for specialty services and inpatient procedures. There were no changes related to outpatient behavioral health services. The self-pay maternity packages were revised and were now based on whether or not the patients lived within Maricopa County.

Chairman Korte expressed her appreciation for the effort in making the needed revisions.

3. Discuss and Review the Quarterly Quality Report and Metrics Dashboard, including but not limited to Patient Safety and Patient Experience Scores

Dr. White outlined the results of the quality metrics for the first quarter of fiscal year (FY) 2026, noting that many of the quality metrics met the established benchmarks. He highlighted improvements made in several metrics, including but not limited to STEMI door to balloon and controlling high blood pressure. He reviewed the patient safety indicators (PSIs) and mentioned PSI-03, pressure ulcer rate, did not meet the benchmark.

Director Thomas said that while the metric did not meet the benchmark, there were two occurrences of the 1,631 patients throughout the reporting period, which emphasized the standard for excellence and expressed his appreciation to the staff for their work.

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General Session, Presentation, Discussion and Action, cont.:

3. Discuss and Review the Quarterly Quality Report and Metrics Dashboard, including but not limited to Patient Safety and Patient Experience Scores, cont.

Dr. White agreed that even one occurrence may result in missing the benchmark and staff was diligent in preventing harm to patients. He provided an in-depth overview of the action plans within critical care and burn units to improve the metric.

He then informed the Board of the outcomes related to operative and procedural services, provided examples of occurrences that affected the results, and explained how staff addressed the situation to prevent future occurrences. The infection control metrics were reviewed, noting hand hygiene compliance, hospital acquired catheter associated urinary tract infections (CAUTIs), and surgical site infection-colon surgery did not meet the benchmark. The action plans to improve outcomes were outlined.

Dr. White provided an overview of Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey results received between October 2024 through August 2025, noting that the organization was in the 97th percentile among safety net hospitals, an improvement from prior years. He outlined the patient experience results for the Federally Qualified Health Centers (FQHCs) and specialty clinics and highlighted areas for improvement. He reviewed the action plans in place to improve the results.

4. Discuss and Review Valleywise October 2025 Financials and Statistical Information

Ms. Agnew reviewed statistical information for October 2025, noting total admissions were 7.5% better than budget, emergency department visits were 1.4% better than budget, and ambulatory visits were 4.8% better than budget. On a year-to-date basis, admissions, emergency department visits and ambulatory visits were better than budget. She noted that payer mix was on budget.

She provided an overview of the financial statements for October 2025, highlighting the 6.1% positive variance in net patient service revenue. The negative 0.9% variance in other revenue was due, in part, to a new 340B vendor. Total operating revenue was 2.5% better than budget. She noted that the federal fiscal year began in October 2025, and staff was awaiting a response from the Centers of Medicare and Medicaid Services (CMS) regarding the three major state direct payment programs, however, the amounts received the prior year were included in the financial statements.

Ms. Agnew outlined operating expenses, provided explanations for both positive and negative variances, highlighting the year-over-year reduction in contract labor and stating higher volumes contributed to increased expenses for supplies, medical service fees, and purchased services. Total operating expenses missed budget by 0.7%, resulting in an operating income of \$7,695,629 compared to a budgeted income of \$5,836,248.

She reviewed non-operating income and expenses, which included grant funding, non-capital transfers from local government, and tax levy dollars. The normalized net assets, excluding bond related expenses, increased by \$910,917 compared to a budgeted loss of \$824,324, resulting in a positive variance of \$1,735,241.

On a year-to-date basis, net patient service revenue was 1.6% better than budget, operating expenses were 0.8% better than budget, resulting in a \$6,344,450 increase in net assets, compared to a budgeted loss of \$2,082,224, a \$8,426,674 positive variance. There were 91 days of cash on hand and 44.9 days in accounts receivable.

Ms. Agnew provided details on patient volumes, mentioning the number of surgeries, procedures, and deliveries that were performed by dedicated employees throughout the organization. She also commended the efforts to improve the length of stay for acute and behavioral health patients.

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General Session, Presentation, Discussion and Action, cont.:

5. Consideration, Discussion, and Possible Action on the Performance Evaluation and Attainment of Performance Goals for Steve Purves, Valleywise Health’s President & Chief Executive Officer, for Fiscal Year 2025

MOTION: Director Demos moved that based on the Board’s review of Steve Purves’s performance for the 2025 fiscal year, the Board had determined that he exceeded expectations. The Board also determined that he met the minimum target set by the Board for part two of the patient experience goal, and met the midpoint target set by the Board for the learning environment goal, and met the maximum target set by the Board for the quality and safety goal, part one of the patient experience goal, the people engagement goal, and the financial goal. Vice Chairman Wilcox seconded.

VOTE: 5 Ayes: Chairman Korte, Vice Chairman Wilcox, Director Demos, Director Mundell,
Director Thomas
0 Nays
Motion passed.

6. Consideration, Discussion, and Possible Action on the Performance Evaluation for Melanie Talbot, Maricopa County Special Health Care District’s Chief Governance Officer and Clerk of the Board, for Fiscal Year 2025

MOTION: Director Demos moved that based on the Board’s review of Melanie Talbot’s performance for the 2025 fiscal year, the Board had determined that she met expectations, and the CEO and Chair will meet with Ms. Talbot to provide additional comments and feedback. Vice Chairman Wilcox seconded.

VOTE: 5 Ayes: Chairman Korte, Vice Chairman Wilcox, Director Demos, Director Mundell,
Director Thomas
0 Nays
Motion passed.

7. Election of Officers for the Board of Directors

Director Demos stated that he was honored to serve on the Board and appreciated the guidance and leadership from the current officers.

MOTION: Director Demos moved to elect Virginia Korte as Chair effective December 1, 2025. Director Thomas seconded.

VOTE: 5 Ayes: Chairman Korte, Vice Chairman Wilcox, Director Demos, Director Mundell,
Director Thomas
0 Nays
Motion passed.

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General Session, Presentation, Discussion and Action, cont.:

7. Election of Officers for the Board of Directors, cont.

MOTION: Director Demos moved to elect Earl Wilcox as Vice Chairman effective December 1, 2025. Director Thomas seconded.

VOTE: 5 Ayes: Chairman Korte, Vice Chairman Wilcox, Director Demos, Director Mundell, Director Thomas
0 Nays
Motion passed.

Chairman Korte echoed Director Demos' comments, noting the trust and comradery between the Board members and staff.

8. Reports to the Board of Directors:

a. Quarterly Quality Management Council Meeting Minutes (August 2025)

There were no questions or comments related to the reports.

10. Closing Comments

a. Chairman and Board Members

b. President and Chief Executive Officer Summary of Current Events

Mr. Purves announced the results of the November 4, 2025, general election, specifically the passage of Proposition 409, a bond initiative to fund Valleywise Health capital projects. He thanked the Board for their leadership and was grateful to the voters, employees and supporters for believing in the organization's mission, to provide exceptional care to every patient, every time.

He thanked the Board members and staff who attended the Arizona Hospital and Healthcare Association (AzHHA) Annual Leadership Conference, noting that Ms. Agnew and Ms. Odette Colburn were panelists at the event. He also expressed his appreciation to Mr. Michael Murphy for his work promoting Valleywise Health's services, highlighting how those services positively impacted the community.

He mentioned that Ms. Hines had participated in two *Becker's Healthcare Review* panels related to information technology and human resources. He also announced the organization received the Honor Roll distinction from EPIC, the electronic medical record platform.

Ms. Hines explained the factors that contributed to the recognition, including achieving benchmarks within a continuous quality improvement program. She noted that only 17% of organizations that utilized EPIC had received that recognition, with Valleywise Health being the only organization in Arizona to be recognized, signifying that Valleywise Health deployed the best practices, clinical efficiency, financial tools and performance. The collaboration among multiple departments was instrumental in the achievement.

Mr. Purves congratulated Ms. Harris, who was named the organization's Chief Legal Officer, and Ms. Paige Pataky was promoted to Assistant General Counsel.

The Diane & Bruce Halle Arizona Burn Center celebrated 60 years of service with an event that highlighted the history and passion that led to it being the premier burn center in the country.

Mr. Purves acknowledged Ms. Lisa Hartsock and applauded the successful Valleywise Health Foundation fundraising event, A Night in the Valley, for raising over \$500,000 to support Valleywise Health's mission.

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General Session, Presentation, Discussion and Action, cont.:

MOTION: Director Thomas moved to recess general session and convene in executive session at 2:05 p.m. Vice Chairman Wilcox seconded.

VOTE: 5 Ayes: Chairman Korte, Vice Chairman Wilcox, Director Demos, Director Mundell,
Director Thomas
0 Nays
Motion passed.

General Session, Presentation, Discussion and Action:

Chairman Korte reconvened general session at 2:30 p.m.

9. Discuss, Review and Accept the Maricopa County Special Health Care District dba Valleywise Health, annual audit for fiscal year ending June 30, 2025

Mr. Jurkovic commented that the audited financial statements and communications were presented in draft form, although the information had completed the quality review, and he was working with staff to finalize the process. The Uniform Guidance (UG), a single audit of the federal awards, was planned to be completed prior to the March 31, 2026 deadline.

Mr. Jurkovic outlined the auditor's scope of work, noting the audit was performed in accordance with auditing standards generally accepted in the United States, Governmental Accounting Standards Board (GASB), and he emphasized the importance of maintaining independence from the organization. In addition to producing an opinion letter, the auditors were responsible for issuing a communication letter and a report on internal controls.

He provided an overview of the auditor's responsibilities compared to management's responsibilities, which was considered when drafting an unmodified opinion on whether the financial statements were fairly presented in conformity with standards.

There were two significant accounting policies identified, compensated absences and risk disclosures. Compensated absences included key areas of professional liabilities, defined in the post-employment benefit plan, Arizona State Retirement System (ASRS) and Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). It was noted that management did not make any significant changes in accounting methodology, and the auditors did not have any issues or concerns after evaluating key factors or the assumptions used. Mr. Jurkovic stated there were no disagreements or difficulties with management during the audit process.

Any adjustments needed to the financial statements were required to be reported to the Board. One adjustment was related to an accounting standard called subscription based IT arrangements, which had to be represented as a right-to-use asset and liability, similar to leases and had not been represented in prior audits. An increase of \$8 million was added as an asset and liability to be in accordance with the standard.

Other adjustments included the reclassification of post-employment benefits balances to assets, an increase in unrestricted net position and decrease of restricted net position for unspent bond proceeds, and contributions from Valleywise Health Foundation for Care Reimagined project, which was corrected in fiscal year (FY) 2025.

He reiterated that Valleywise Health was complying with the rules related to the UG audit, which was required when an organization accepted federal funds.

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General Session, Presentation, Discussion and Action, cont.:

9. Discuss, Review and Accept the Maricopa County Special Health Care District dba Valleywise Health, annual audit for fiscal year ending June 30, 2025, cont.

Mr. Richards provided an overview of Valleywise Health's financial position, noting that due to the timing of the receipt of Safety Net Services Initiative (SNSI) funding, there was a decrease in cash between FY 2024 and FY 2025. There was a change in restricted cash and bond funds for the Care Reimagined project, which had no balance for FY 2025. There were 110 days cash on hand, which had been maintained over several years, noting that it costs approximately \$2.5 million a day to run Valleywise Health. The number of days in accounts receivable had decreased to 59.9 days, which was an improvement over the prior year.

The liabilities, deferred inflows of resources and net positions were outlined. Total operating revenue had increased 26%, total operating expenses increased approximately four percent, resulting in a meaningful increase in operating income. Non-operating revenue, such as property taxes, the SNSI contributions, resulted in net positive increases in those payments, and there was not a meaningful increase in debt.

Mr. Richards highlighted the significant change in the operating margin between FY 2022 and FY 2025, shifting from a negative 32.3% in FY 2022 to a positive 10.8% operating margin in FY 2025.

He explained the upcoming GASB changes, including GASB 103, which established new accounting and financial reporting requirements and modified requirements for certain financial statement schedules, disclosures, and required supplementary information to provide clarity and consistency with governmental financial statements. The second change, GASB 104, related to capital asset disclosures.

Mr. Jurkovic reviewed several factors that impact healthcare operations, noting the stabilizing workforce, shifts in insurance coverage dynamics, and emerging technologies and threats. Cyber security events were increasing and had the potential to severely impact daily operations, not just in healthcare settings, but in various industries that impacted hospital operations, such as insurance companies. He mentioned that there was also a shift to value-based care reimbursement from the fee-for-service model, explaining that payment would no longer be based solely on the service provided, but also factored in the quality of the service provided.

Chairman Korte asked for further explanation related to the value-based care approach.

Mr. Jurkovic stated that the value-based care payment model, specifically with Medicare and Medicare Advantage plans, had a quality or risk component. Hospitals may earn additional dollars, or be required to pay a penalty, based on the results of key metrics, such as hospital readmission rates. Management closely monitored those metrics, which resulted in improved quality for all patients, and a higher reimbursement for services provided.

Ms. Agnew said that while Medicare reimbursement accounted for approximately 18% of total revenue, she reiterated that staff monitored the metrics to ensure the benchmarks were achieved.

MOTION: Director Thomas moved to accept the Maricopa County Special Health Care District dba Valleywise Health, annual audit for fiscal year ending June 30, 2025. Vice Chairman Wilcox seconded.

VOTE: 5 Ayes: Chairman Korte, Vice Chairman Wilcox, Director Demos, Director Mundell,
Director Thomas
0 Nays
Motion passed.

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Adjourn

MOTION: Director Thomas moved to adjourn the November 25, 2025, Maricopa County Special Health Care District Board of Directors General and Executive Session meeting. Vice Chairman Wilcox seconded.

VOTE: 5 Ayes: Chairman Korte, Vice Chairman Wilcox, Director Mundell, Director Thomas
0 Nays
Motion passed

Meeting adjourned at 3:08 p.m.

Virginia L. Korte, Chairman
Maricopa County Special Health Care District
Board of Directors