

**Valleywise Community Health Centers Governing Council Meeting**  
**Virginia G. Piper Charitable Trust Pavilion**  
**2609 East Roosevelt Street, Phoenix, AZ 85008**  
**2<sup>nd</sup> Floor, Auditoriums 1 and 2**  
**November 1, 2023, 5:30 p.m.**

**Members Present:** Scott Jacobson, Chairman  
Eileen Sullivan, Vice Chairman – *participated remotely; then in person*  
Earl Arbuckle, Treasurer  
Chris Hooper, Member  
Salina Imam, Member  
Norma Muñoz, Member  
William O’Neill, Member – *participated remotely*  
Wayne Tormala, Member  
Jane Wilson, Member

**Non-Voting Member Absent:** Mary Rose Garrido Wilcox, Maricopa County Special Health Care District Board of Directors

**Others/Guest Presenters:** Michelle Barker, DHSc, Chief Executive Officer of the Federally Qualified Health Centers  
Steve Purves, FACHE, President and Chief Executive Officer, Valleywise Health  
Michael D. White, MD, MBA, Chief Clinical Officer – *participated remotely*  
Claire Agnew, CPA, MBA, Chief Financial Officer  
Melanie Talbot, Chief Governance Officer  
Ijana Harris, JD, General Counsel  
Matthew Meier, MBA, Vice President, Financial Services  
Crystal Garcia, RN, MBA, Vice President, Specialty Services, Quality and Safety

**Recorded by:** Denise Kreidler, Deputy Clerk of the Board  
Cynthia Cornejo, Senior Deputy Clerk of the Board

**Call to Order:**

Chairman Jacobson called the meeting to order at 5:31 p.m.

**Roll Call**

Ms. Kreidler called roll. Following roll call, she noted that all nine voting members of the Valleywise Community Health Centers Governing Council were present, which represented a quorum.

For the benefit of all participants, Ms. Kreidler announced the Governing Council members participating remotely.

**Call to the Public**

Chairman Jacobson called for public comment. There were no comments.

**Valleywise Community Health Centers Governing Council  
Meeting Minutes – General Session – November 1, 2023**

**General Session, Presentation, Discussion and Action:**

1. Approval of Consent Agenda:
  - a. Minutes:
    - i. Approve Valleywise Community Health Centers Governing Council Meeting Minutes dated October 4, 2023
    - ii. Approve Valleywise Community Health Centers Governing Council Meeting Minutes dated October 18, 2023
  - b. Contracts:
    - i. INTENTIONALLY LEFT BLANK
  - c. Governance:
    - i. Appoint Nelly Clotter-Woods to the Valleywise Community Health Centers Governing Council
    - ii. Approve Revisions to the Sliding Fee Discount Program/Policy Including Revisions to the Sliding Fee Discount Schedule
  - d. Medical Staff:
    - i. Acknowledge the Federally Qualified Health Centers Medical Staff and Advanced Practice Clinician/Allied Health Professional Staff Credentials

**MOTION:** Mr. Arbuckle moved to approve the consent agenda. Ms. Wilson seconded.

**VOTE:** 9 Ayes: Chairman Jacobson, Vice Chairman Sullivan, Mr. Arbuckle, Mr. Hooper, Ms. Imam, Ms. Muñoz, Mr. O’Neill, Mr. Tormala, Ms. Wilson  
0 Nays  
**Motion passed.**

2. Approve Community Health Needs Assessment for Valleywise Health

Dr. Barker reviewed the Executive Summary and stated that it was the core of the Community Health Needs Assessment (CHNA). The summary shows the demographics of Valleywise Health’s patient population within the Federally Qualified Health Centers (FQHCs) primary service areas. It gives the basic demographic profile of the population and then subsequently identifies each disease states selected. None of the information contained in the report was new but rather just in a different format.

**NOTE:** Vice Chairman Sullivan joined the meeting in person at 5:47.

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

2. Approve Community Health Needs Assessment for Valleywise Health, cont.

**MOTION:** Mr. Hooper moved to approve the Community Health Needs Assessment. Ms. Imam seconded.

Mr. Tormala asked for clarification of how the CHNA was translated into the priorities of the FQHCs.

Dr. Barker explained that data received from Maricopa County Department of Public Health was broken down and reviewed for all the different health needs based on inpatient, morbidity, mortality, and discharge information from hospitals. That data was compiled and presented to the Governing Council with disease states, in priority for review, to determine how the Governing Council wanted to address them. The priorities were narrowed down into areas that the FQHCs could have the most impact. Once the CHNA was approved, the Governing Council would develop a strategic plan for the FQHCs, related to each of the six primary categories.

**VOTE:** 9 Ayes: Chairman Jacobson, Vice Chairman Sullivan, Mr. Arbuckle, Mr. Hooper, Ms. Imam, Ms. Muñoz, Mr. O’Neill, Mr. Tormala, Ms. Wilson  
0 Nays  
**Motion passed.**

3. Discuss and Review Federally Qualified Health Centers Uniform Data System (UDS) Quality Metrics for the Third Quarter of Calendar Year 2023

Ms. Garcia provided an overview of the FQHCs Uniform Data System (UDS) quality metrics overall scorecard and shared the results for the third quarter of calendar year (CY) 2023, highlighting the various metrics and reviewing the data from this time last year.

Ms. Garcia noted that body mass index (BMI) screening was drastically improved from CY 2022. Third quarter CY 2023 was 92.11% with a 31.07% variance from the current target goal of 61.04 percent.

Diabetes/hemoglobin A1c metrics was slightly different because the lower the number the better. The metric was right at 30.76% in September. The current target goal was 30.42 percent.

Ms. Garcia said cervical cancer screening was meeting the benchmark. Two action plans in place to ensure continued success. One was to capture an abnormal screening in the health maintenance record within the EPIC medical record system, and the other was to continue bulk mail outs.

Breast cancer screenings for the third quarter CY 2023 was 60.17% with a 9.89% positive variance from the current target goal of 50.28 percent.

Childhood immunization was better than benchmark. A logic change from how the data was pulled last year from Valleywise Health’s electronic medical record that affected all FQHCs was corrected. The measure for the third quarter of CY 2023 was 38.40% with a 5.17% positive variance from the current target goal of 33.23 percent.

Weight assessment and counseling for nutrition and physical activity for children and adolescent for the third quarter CY 2023 was better than benchmark from where the FQHCs were last year at this time at 74.47% with a 4.66% positive variance from the current target goal of 69.81 percent.

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

3. Discuss and Review Federally Qualified Health Centers Uniform Data System (UDS) Quality Metrics for the Third Quarter of Calendar Year 2023, cont.

Ms. Garcia mentioned colorectal cancer screening did not meet benchmark from this time last year. However, it was due to the change in screening age from 50 years of age to 45 years of age and over. She reviewed the action plans in place to improve the results.

Mr. Arbuckle asked if the screenings were referral based, and if so, did Valleywise Health get that information back into Valleywise Health's statistics.

Ms. Garcia responded that if the screening referral was placed through EPIC, the information should flow back into the data when pulled for UDS.

Mr. O'Neill asked how the measures were being met and what plans were in place to ensure continued improvement.

Ms. Garcia stated that the collaboration between physicians and leadership lead to positive outcomes in meeting the benchmarks.

Ms. Wilson asked who was responsible for making the changes in the requirements/benchmarks.

Ms. Garcia reported the changes in requirements/benchmarks were provided through best practices and Health Resources and Services Administration (HRSA).

Ms. Garcia discussed the controlling high blood pressure measure. In July 2023, the benchmark was 60.15%, however in August 2023, the benchmark increased to 63.40 percent. She explained that best practice alerts were established for blood pressure rechecks. Blood pressure audits by Clinical Resource Leaders (CRLs) in the FQHCs were implemented to monitor the new process.

Depression screening has improved drastically from this time last year. In September, the FQHCs met benchmark at 70.21 percent. Data for the individual FQHCs not meeting benchmark continues to be reviewed to determine any causes so they can be addressed.

Ms. Garcia reported that ischemic vascular disease (IVD) screening was meeting the benchmark at 76.83% for the month of September. The measurement would continue to be monitored. Random chart reviews were conducted to assess why patients were not meeting the measure.

Ms. Garcia stated that tobacco use screening and cessation intervention was meeting the benchmark at 89.49% for the month of September. This measurement consistently met benchmark.

HIV screenings exceeded the benchmark that was set. The FQHCs continue to do very well with this measure.

Ms. Garcia shared information about the various taskforce teams that meet regularly to develop action items to reach and maintain benchmarks.

Mr. Arbuckle asked if there were work groups for each FQHC or if there was a separate work group that worked with all the FQHCs.

Ms. Garcia said the work group was for all FQHCs instead of individual groups for each.

Mr. O'Neill asked about the depression evaluations and wanted to know how many of those were tracked as seriously mentally ill (SMI).

Ms. Garcia reported that she would see if that specific information could be extrapolated.

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

1. Approval of Consent Agenda, cont.:

Ms. Kreidler administered the Oath of Office to Dr. Nelly Clotter-Woods for appointment of membership to the Valleywise Community Health Centers Governing Council, as required by the Governing Council bylaws.

4. Discuss and Review Federally Qualified Health Centers Patient Safety Report for the First Quarter of Fiscal Year 2024

Ms. Garcia shared the patient safety report by Federally Qualified Health Center (FQHCs) location and discussed the electronic system called Continuous Healthcare Evaluation & Quality Improvement Tool or CHEQ-IT. The system encourages reporting of any type of process issues. The Quality and Patient Safety department review and track events to identify trends and to see if there was a need for a change in processes. Reporting anonymously was an option, however, it was encouraged to share identity in the event there were follow up questions.

She briefly discussed events reported by location and the types of events such as a medication error, specimen/lab, and safety. She indicated that a review of notable occurrences was included in daily leadership huddles. Issues were addressed through the peer review process and by tracking trends, and develop actions plans, as necessary.

5. Discuss and Review Federally Qualified Health Centers National Research Corporation (NRC) RealTime Platform Patient Satisfaction Data for the First Quarter of Fiscal Year 2024

Ms. Garcia explained that the patient satisfaction data was in a slightly different format than previously presented. The organization wanted to see which areas would make the highest impact and correlation in net promoter scores, versus areas which the organization would be unable to make much of an impact with the scores under the three areas of medical practice, outpatient behavioral health and outpatient testing. Leadership worked with providers to ensure that during patient visits, providers were using the same key words contained in the survey questions to help patients correlate those key words with what the provider stated in order to help raise scores.

Ms. Garcia touched on continuity of care for patients.

6. Discuss and Review Federally Qualified Health Centers Financials and Payor Mix for the First Quarter of Fiscal Year 2024

Mr. Meier presented the FQHCs financial statistics for the first quarter of fiscal year (FY) 2024.

Visits at the Valleywise Community Health Centers were better than budget by 439 or one percent. Total operating revenues were better than budget by \$258,780 or three percent. Total operating expenses had a positive variance of \$46,293 or one percent. The margin before overhead allocation had a positive variance of \$305,073 for the quarter.

Outpatient behavioral health visits were better than budget by 186 or three percent. Total operating revenue was better than budget by \$30,189 or two percent. Total operating expenses has a negative variance of \$315,751 or 28 percent. Most of that was salary related due to the expansion of behavioral health services. The margin before overhead allocation had a negative variance of \$285,562 for the quarter.

Visits for the FQHCs within the Comprehensive Health Center-Phoenix missed budget by 38 visits. Total operating revenues missed budget by \$88,603 or three percent. Total operating expenses had a positive variance of \$182,968 or four percent. The margin before overhead allocation, for all of the FQHCs within the Comprehensive Health Center-Phoenix were better than budget for the quarter by \$94,364.

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

6. Discuss and Review Federally Qualified Health Centers Financials and Payor Mix for the First Quarter of Fiscal Year 2024, cont.

Visits at Valleywise Community Health Center-Peoria had a negative variance of 976 visits or 14 percent. Total operating revenue missed budget by \$198,774 or 14 percent. Total operating expenses missed budget by \$91,029 or six percent with an overall a negative variance of \$107,745.

Dental clinic visits were better than budget by 43 visits or one percent. Total operating revenue missed budget by \$147,714 or 16 percent. Total operating expenses were better than budget by \$18,726 or one percent. Total margin for the quarter had a negative variance of \$166,440.

The mobile health unit was not yet operational. A driver needed to be hired.

For the quarter, visits at all FQHCs combined missed budget by 346 or less than one percent. Total operating revenues missed budget by \$139,406 or one percent. Total operating expenses had a negative variance of \$24,275 or less than one percent. Overall, total margin for fiscal year to date had a negative variance of \$163,681.

Mr. Meier briefly reviewed the year over year payor mix which showed a decrease in number of patients on Medicaid and the offsetting increase in self-paying patients.

7. Discuss, Review and approve the Amended and Restated Maricopa County Special Health Care District's Valleywise Community Health Centers Governing Council Bylaws

Ms. Talbot reiterated the changes which were discussed at the October 18, 2023, meeting. She reported that the Co-applicant Operational Arrangement was recently updated, therefore, the Bylaws needed to align with language in the Arrangement.

She stated that the significant changes made to the Bylaws were under the responsibilities and authorities of the Governing Council. Ms. Talbot also noted the removal of the standing committees from the Bylaws. However, an option was added to allow the Governing Council to create a special advisory committee if needed.

There were minor changes to the Officer's duties related to the committees.

**MOTION:** Mr. Hooper moved to approve the Amended and Restated Maricopa County Special Health Care District's Valleywise Community Health Centers Governing Council Bylaws. Mr. Arbuckle seconded.

**VOTE:** 10 Ayes: Chairman Jacobson, Vice Chairman Sullivan, Mr. Arbuckle, Dr. Clotter-Woods, Mr. Hooper, Ms. Imam, Ms. Muñoz, Mr. O'Neill, Mr. Tormala, Ms. Wilson  
0 Nays  
**Motion passed.**

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

8. Discuss, Review and approve the Maricopa County Special Health Care District dba Valleywise Health, Organizational Chart for the Federally Qualified Health Centers

Dr. Barker indicated that a few adjustments were made to the organizational chart.

**MOTION:** Mr. Tormala moved to approve the Maricopa County Special Health Care District dba Valleywise Health, Organizational Chart for the Federally Qualified Health Centers. Ms. Muñoz seconded.

**VOTE:** 10 Ayes: Chairman Jacobson, Vice Chairman Sullivan, Mr. Arbuckle, Dr. Clotter-Woods, Mr. Hooper, Ms. Imam, Ms. Muñoz, Mr. O'Neill, Mr. Tormala, Ms. Wilson  
0 Nays  
**Motion passed.**

9. Federally Qualified Health Centers' Chief Executive Officer's Report including Ambulatory Operational Dashboards

Dr. Barker reviewed the FQHCs measures dashboard for the month of September. The FQHCs average appointment fill rate was 90.6%, and the FQHCs no show rate was 16.4 percent. She reported the Net Promoter Score was at 73.5% for the month.

Dr. Barker reminded the Governing Council the HRSA operational site visit (OSV) was November 7-9, 2023. The Governing Council was scheduled to have lunch with the reviewers on November 8, 2023

Ms. Muñoz asked if the reviewers would ask Governing Council members about figures and percentages questions.

Dr. Barker indicated that the reviewers would ask about the Governing Council members' service and experience on the council.

Ms. Imam asked why medical students from overseas did not have the same medical residency opportunities compared to medical students in the United States.

Dr. White suggested a future discussion regarding graduate medical education (GME) and medical licensing.

Ms. Wilson ask how many of the residents trained at Valleywise Health were hired after graduation.

Dr. White reported that last year, eight were hired.

10. Maricopa County Special Health Care District Board of Directors Report

This item was not discussed.

11. Valleywise Health's President and Chief Executive Officer's Report

Mr. Purves talked about Valleywise Health's academic teaching mission and reported that there were several medical schools opening in Arizona. Those schools would need to find clinical rotations, which would be good for all area hospitals. Valleywise Health continued to look for ways to maximize the clinical learning environment.

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

12. Governing Council Member Closing Comments/Announcements

There were no comments or announcement.

13. Review Staff Assignments

Ms. Kreidler reiterated the follow up requests stemming from the meeting. There was no outstanding old business.

**Adjourn**

**MOTION:** Mr. Arbuckle moved to adjourn the November 1, 2023, Valleywise Community Health Centers Governing Council Meeting. Mr. Hooper seconded.

**VOTE:** 10 Ayes: Chairman Jacobson, Vice Chairman Sullivan, Mr. Arbuckle, Dr. Clotter-Woods, Mr. Hooper, Ms. Imam, Ms. Muñoz, Mr. O'Neill, Mr. Tormala, Ms. Wilson  
0 Nays  
**Motion passed.**

Meeting adjourned at 7:30 p.m.

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Denise M. Kreidler  
Deputy Clerk of the Board