



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

6:00 p.m.

Agenda

**Council Members**

Michelle Barker, DHSc., Chairman
Scott Jacobson, Vice Chairman
VACANT, Treasurer
Chris Hooper, Member
Salina Imam, Member
Liz McCarty, Member
Eileen Sullivan, Member
Jane Wilson, Member
Mary Rose Garrido Wilcox, District Board,
Non-Voting Member

AGENDA**Valleywise Community Health Centers
Governing Council****Mission Statement of the
Federally Qualified Health Centers**

Serve the population of Maricopa County with excellent, comprehensive health and wellness in a culturally respectful environment.

• Valleywise Health Medical Center • 2601 East Roosevelt Street • Phoenix, Arizona 85008 •

Meeting will be held remotely. Please visit <https://valleywisehealth.org/events/valleywise-community-health-centers-governing-council-meeting-february-1-2023/> for further information.

Wednesday, February 1, 2023
6:00 p.m.

One or more members of the Valleywise Community Health Centers Governing Council may be in attendance by technological means. Council members attending by technological means will be announced at the meeting.

Please silence cell phone, computer, etc., to minimize disruption of the meeting.

6:00 **Call to Order**

Roll Call**Call to the Public**

This is the time for the public to comment. The Valleywise Community Health Centers Governing Council may not discuss items that are not specifically identified on the agenda. Therefore, pursuant to A.R.S. § 38-431.01(H), action taken as a result of public comment will be limited to directing staff to study the matter, responding to any criticism, or scheduling a matter for further consideration and decision at a later date.

ITEMS MAY BE DISCUSSED IN A DIFFERENT SEQUENCE

Agendas are available within 24 hours of each meeting via the Clerk's Office, Valleywise Health Medical Center, 2601 East Roosevelt Street, Phoenix, Arizona 85008, Monday through Friday between the hours of 9:00 a.m. and 4:00 p.m. and on the internet at <https://valleywisehealth.org/about/governing-council/>. Accommodations for individuals with disabilities, alternative format materials, sign language interpretation, and assistive listening devices are available upon 72 hours advance notice via the Clerk's Office, Valleywise Health Medical Center, 2601 East Roosevelt Street, Phoenix, Arizona 85008, (602) 344-5177. To the extent possible, additional reasonable accommodations will be made available within the time constraints of the request.

General Session, Presentation, Discussion and Action:

- 6:15 1. Approval of Consent Agenda: 5 min
Any matter on the Consent Agenda will be removed from the Consent Agenda and discussed as a regular agenda item upon the request of any voting Governing Council member.
- a. Minutes:
 - i. **Approve** Valleywise Community Health Centers Governing Council Meeting Minutes dated January 4, 2023
 - b. Contracts:
 - i. **Accept** amendment #1 to the intergovernmental agreement (90-22-255-1-01) between the Arizona Department of Health Services and the Maricopa County Special Health Care District dba Valleywise Health, for the Well Woman Health Check Program grant which provides breast and cervical cancer screenings for the uninsured and underinsured
 - c. Governance:
 - i. **Appoint** Marisue Garganta to the Valleywise Community Health Centers Governing Council
 - ii. **Acknowledge** Valleywise Health's Federally Qualified Health Centers Service Area by Zip Code
 - iii. **Authorize** staff to register Valleywise Community Health Centers Governing Council members for the Arizona Alliance for Community Health Centers (AACHC) Annual Conference in April 2023, in Scottsdale, Arizona, utilizing the Governing Council's seminar fees budget in an amount not to exceed \$1,800
 - d. Medical Staff:
 - i. INTENTIONALLY LEFT BLANK

End of Consent Agenda

- 6:20 2. Discuss and Review Federally Qualified Health Centers Financials and Payor Mix for the Second Quarter of Fiscal Year 2023 15 min
Matthew Meier, Vice President, Financial Services
- 6:35 3. Discuss and Review Federally Qualified Health Centers Uniform Data System (UDS) Quality Metrics for Calendar Year 2022 15 min
Crystal Garcia, Vice President, Specialty Services, Quality and Patient Safety
- 6:50 4. Discuss and Review Federally Qualified Health Centers Patient Safety Report for the Second Quarter of Fiscal Year 2023 10 min
Crystal Garcia, Vice President, Specialty Services, Quality and Patient Safety
- 7:00 5. Discuss and Review Federally Qualified Health Centers National Research Corporation (NRC) RealTime Platform Patient Satisfaction Data for the Second Quarter of Fiscal Year 2023 15 min
Crystal Garcia, Vice President, Specialty Services, Quality and Patient Safety

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

- 7:15 6. Discuss and Review Valleywise Community Health Centers Governing Council's Committees' Effectiveness 15 min
Valleywise Community Health Centers Governing Council
- 7:30 7. Update on Search for Federally Qualified Health Centers Chief Executive Officer 5 min
Michael D. White, MD, MBA, Interim Federally Qualified Health Centers Chief Executive Officer
- 7:35 8. Maricopa County Special Health Care District Board of Directors Report 5 min
Mary Rose Garrido Wilcox, Director, District 5, Maricopa County Special Health Care District Board of Directors
- 7:40 9. Valleywise Health's President and Chief Executive Officer's Report 5 min
Steve Purves, President and Chief Executive Officer, Valleywise Health
- 7:45 10. Chairman and Council Member Closing Comments/Announcements 5 min
Valleywise Community Health Centers Governing Council
- 7:50 11. Review Staff Assignments 5 min
Melanie Talbot, Chief Governance Officer
- Old Business:
- None
- 7:55 **Adjourn**



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 1.

Consent Agenda



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 1.a.i.

Minutes
January 4, 2023

Minutes

**Valleywise Community Health Centers Governing Council
Valleywise Health Medical Center
Conference and Administration Center, Auditoriums 1 through 4
January 4, 2023
6:00 p.m.**

DRAFT

Members Present:	Michelle Barker, DHSc, Chairman Scott Jacobson, Vice Chairman Salina Imam, Member Eileen Sullivan, Member Jane Wilson, Member
Members Absent:	Liz McCarty, Member
Non-Voting Member Present:	Mary Rose Garrido Wilcox, Maricopa County Special Health Care District Board of Directors
Others/Guest Presenters:	Barbara Harding, RN, MPA, Chief Executive Officer, Federally Qualified Health Centers Claire Agnew, Chief Financial Officer Melanie Talbot, Chief Governance Officer Chris Hooper, Governing Council Member-elect
Recorded by:	Cynthia Cornejo, Deputy Clerk of the Board

Call to Order:

Chairman Barker called the meeting to order at 6:00 p.m.

Roll Call

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

Call to the Public

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

General Session, Presentation, Discussion and Action:

1. Approval of Consent Agenda:
 - a. Minutes:
 - i. Approve Valleywise Community Health Centers Governing Council meeting minutes dated December 7, 2022

**Valleywise Community Health Centers Governing Council
Meeting Minutes – General Session – January 4, 2023**

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

1. Approval of Consent Agenda, cont.:

b. Contracts:

- i. INTENTIONALLY LEFT BLANK

c. Governance:

- i. Approve job description for Chief Executive Officer of the Federally Qualified Health Centers
- ii. Approve Maricopa County Special Health Care District dba Valleywise Health, organizational chart for the Federally Qualified Health Centers
- iii. Appoint Chris Hooper to the Valleywise Community Health Centers Governing Council
- iv. Accept Health Resources and Services Administration Notice of Award No. 1 H8GCS47835-01-00, FY 2023 Expanding COVID-19 Vaccination Supplemental Funding
- v. Approve no cost extension submission to Health Resources and Services Administration for Notice of Award No. 1 H8FCS41092-01-00, American Rescue Plan Act Funding for Health Centers

d. Medical Staff:

- i. Acknowledge the Federally Qualified Health Centers Medical Staff and Advanced Practice Clinician/Allied Health Professional Staff Credentials

MOTION: Vice Chairman Jacobson moved to approve the consent agenda. Ms. Wilson seconded.

VOTE: 5 Ayes: Chairman Barker, Vice Chairman Jacobson, Ms. Imam, Ms. Sullivan, Ms. Wilson
0 Nays
1 Absent: Ms. McCarty
Motion passed.

Ms. Talbot administered the Oath of Office to Mr. Hooper for appointment of membership to the Valleywise Community Health Centers Governing Council (Governing Council), as required by the Governing Council bylaws.

2. Approve the Appointment of Michael D. White, MD, as Interim Project Director/ Chief Executive Officer of the Federally Qualified Health Centers effective January 9, 2023

Chairman Barker stated that until the position is filled, Health Resources and Services Administration (HRSA) required that an interim Project Director/Chief Executive Officer (CEO) be appointed.

**Valleywise Community Health Centers Governing Council
Meeting Minutes – General Session – January 4, 2023**

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

2. Approve the Appointment of Michael D. White, MD, as Interim Project Director/ Chief Executive Officer of the Federally Qualified Health Centers effective January 9, 2023, cont.

MOTION: Ms. Sullivan moved to approve the appointment of Michael D. White, MD, as Interim Project Director/Chief Executive Officer of the Federally Qualified Health Centers effective January 9, 2023. Vice Chairman Jacobson seconded.

VOTE: 6 Ayes: Chairman Barker, Vice Chairman Jacobson, Mr. Hooper, Ms. Imam, Ms. Sullivan, Ms. Wilson
0 Nays
1 Absent: Ms. McCarty
Motion passed.

3. Discuss, Review and Approve Budget Submission to Health Resources and Services Administration for Notice of Award No. 1 H8GCS47835-01-00, FY 2023 Expanding COVID-19 Vaccination Supplemental Funding

Ms. Harding announced that HRSA recently issued \$800,581 to Valleywise Health to increase the number of individuals vaccinated against COVID-19. She outlined the proposed budget on how to utilize the funds, including support for activities related to outreach and education, vaccine administration, enabling services, personnel, and supplies. There was a six-month deadline to spend the funds.

Chairman Barker asked if the cultural navigators would be included in the outreach and education.

Ms. Harding confirmed that the cultural navigators would be included, as they were an important aspect.

Chairman Barker asked if Valleywise Health would participate in community health fairs.

Ms. Harding stated that the Federally Qualified Health Centers (FQHCs) were hospital-based clinics and clinical services were limited to the clinic property. However, clinical services will be offered in the community upon completion of the mobile health unit, which was expected in late 2023.

Chairman Barker questioned the six-month timeline and asked if the funds had to be spent or if the scopes of service had to be rendered within that timeframe.

Ms. Harding said she believed that the intent was to spend the funds within the timeframe. She encouraged staff to implement the plans efficiently and effectively.

Director Wilcox suggested using part of the funds to offer evening hours at a specific location to accommodate individuals that may not be able to get vaccinated during normal business hours. She mentioned that there may be additional interest in receiving the COVID-19 vaccination if there was a partnership with local professional sports teams. She was willing to connect staff with the appropriate parties if they were interested.

Ms. Harding appreciated the feedback and noted the staff would take everything into consideration.

Ms. Wilson asked if the grant funding was specific to COVID-19 vaccinations, or if the initiative could be expanded to influenza vaccinations, as well.

Ms. Harding confirmed the funding was specific to COVID-19 vaccinations.

Ms. Imam asked if the cultural navigators would be used for a variety of different languages. She also offered to assist staff in providing education and communication to various refugee populations.

**Valleywise Community Health Centers Governing Council
Meeting Minutes – General Session – January 4, 2023**

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

3. Discuss, Review and Approve Budget Submission to Health Resources and Services Administration for Notice of Award No. 1 H8GCS47835-01-00, FY 2023 Expanding COVID-19 Vaccination Supplemental Funding, cont.

Ms. Harding said that plans on how to engage cultural navigators have not been developed. She appreciated Ms. Imam's offer to assist with outreach, since she worked with a different refugee population than Valleywise Health.

Mr. Hooper asked if the funds would be used toward the mobile health unit that was referenced earlier.

Ms. Harding explained that funds from a previous grant were allocated for the mobile health unit, which was in the process of being purchased and built. She reiterated, once complete, clinical services would be offered out in the community.

Mr. Hooper asked if there were specific communities that were less vaccinated than others.

Ms. Harding expected that there were areas that were, however, she did not have the data that identified those areas.

MOTION: Vice Chairman Jacobson moved to approve the budget submission to Health Resources and Services Administration for Notice of Award No. 1 H8GCS47835-01-00, FY 2023 Expanding COVID-19 Vaccination Supplemental Funding. Ms. Imam seconded.

VOTE: 6 Ayes: Chairman Barker, Vice Chairman Jacobson, Mr. Hooper, Ms. Imam, Ms. Sullivan, Ms. Wilson
0 Nays
1 Absent: Ms. McCarty
Motion passed.

5. Discuss, Review and Accept the Maricopa County Special Health Care District dba Valleywise Health, annual audit for fiscal year ending June 30, 2022, including information related to the Federally Qualified Health Centers

Ms. Agnew provided an overview of the Maricopa County Special Health Care District dba Valleywise Health annual audit for fiscal year ending June 30, 2022. The audit was conducted by Ernst & Young and was inclusive of the entire organization. The FQHCs were not audited separately.

There were no material statements or audit adjustments. She explained the post-close adjustments, including the receipt of federal funding received in July 2022, which was allocated to fiscal year (FY) 2022.

She provided details that resulted in the overall net loss for FY 2022 and stated that it was a difficult year.

Ms. Wilson asked if FY 2022 was exceptionally difficult or was every year a difficult year.

Ms. Agnew stated the past couple of years had been especially difficult, due the COVID-19 pandemic and the unusual circumstances that followed. Prior to the pandemic, the organization would operate at or near a break-even budget.

She noted the pandemic had been particularly tough on Valleywise Health, given the population served and being excluded from receiving safety net funding from the federal government due to an accounting technicality. She mentioned the efforts underway to develop a safety net hospital designation and acknowledged staff for uncovering other options for supplemental funding.

**Valleywise Community Health Centers Governing Council
Meeting Minutes – General Session – January 4, 2023**

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

5. Discuss, Review and Accept the Maricopa County Special Health Care District dba Valleywise Health, annual audit for fiscal year ending June 30, 2022, including information related to the Federally Qualified Health Centers, cont.

MOTION: Vice Chairman Jacobson moved to accept the Maricopa County Special Health Care District dba Valleywise Health, annual audit for fiscal year ending June 30, 2022, including information related to the Federally Qualified Health Centers. Ms. Sullivan seconded.

VOTE: 6 Ayes: Chairman Barker, Vice Chairman Jacobson, Mr. Hooper, Ms. Imam, Ms. Sullivan, Ms. Wilson
0 Nays
1 Absent: Ms. McCarty
Motion passed.

4. Discuss and Review Valleywise Community Health Centers Governing Council's Committees' Structure and Effectiveness

Chairman Barker reflected on the current committee structure of the Governing Council, specifically the Compliance and Quality Committee and Finance Committee. The information provided in those committees' meetings was very informative and given the importance, it may be best shared with the entire Governing Council. Currently, the information is shared with the Governing Council during the committee reports in small doses. She recommended those two committees be incorporated into the Governing Council, with regular reports related to finance and quality provided throughout the year.

The required reports were reviewed with staff, and it was possible to include on the Governing Council's monthly meeting agendas without adding additional time to the overall meeting. She acknowledged that additional time may be required in the beginning, as members learned how to understand the information provided. The downside of this proposal would be fewer opportunities for guest speakers.

Ms. Talbot provided an overview of a potential agenda calendar, which outlined when specific reports or presentation would be on the meeting agendas. She reiterated that she referenced the HRSA Compliance Manual, the Co-Applicant Operational Arrangement, and coordinated with finance, quality, and compliance staff to ensure appropriate reports were included in the calendar.

Director Wilcox stated that she thought it was a good idea to share financial and quality information with the Governing Council. She highly recommended that the members read the information when they received their meeting packets and submit any questions to staff prior to the meeting. She also suggested that additional time be allocated during the meeting when discussing the various reports so staff can explain the information.

Chairman Barker appreciated the feedback.

Director Wilcox also recommended the tasks delegated to the Strategic Planning and Outreach Committee be discussed with the full Governing Council.

Chairman Barker disagreed and was suggesting the Strategic Planning and Outreach Committee continue however, the focus of the committee may need to be reevaluated or expand the outreach scope to include new members, new patients, and new community partnerships.

Director Wilcox reiterated her thoughts on including the full Governing Council on developing a strategic plan.

***Valleywise Community Health Centers Governing Council
Meeting Minutes – General Session – January 4, 2023***

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

4. Discuss and Review Valleywise Community Health Centers Governing Council's Committees' Structure and Effectiveness, cont.

Chairman Barker said that first, strategic planning had to be clearly defined, so all members were operating toward a common goal. She believed the committee's charge was to focus on outreach in various forms. She agreed that strategic planning should include all members to outline the goals for the upcoming year, identify resources needed and how to accomplish those tasks.

Ms. Harding reminded everyone that it was a HRSA requirement for the Governing Council to have a strategic plan. The community needs assessment was in development and should be used to develop the FQHCs strategic plan.

Chairman Barker asked if the strategic plan should be developed by the Governing Council, be presented by the CEO of the FQHCs, or a collaboration between the two.

Ms. Harding agreed a collaboration may be best.

Chairman Barker was grateful for the feedback and stated that the new structure would eliminate redundancy, as many reports were presented to the committees and subsequently outlined at the Governing Council. She understood that it would be a big change, however, she was flexible, and the committees could be reinstituted if needed.

Ms. Talbot reiterated that it was imperative for members to read the materials prior to the meeting and encouraged them to ask questions to gain a better understanding. She would instruct staff to include memos related to their reports or presentations to explain the information that the Governing Council would receive.

Mr. Hooper asked if a training manual was available, including a list of frequently used acronyms.

Chairman Barker said that the orientation process for new members was a work in progress.

Vice Chairman Jacobson requested time to consider the option. It was essential for members to understand the reports presented, so they could make informed decisions on where to focus their efforts.

Ms. Sullivan said that members would need time to fully understand the information provided and members had an obligation to attend meetings prepared on the matters at hand. The committee structure did not work unless the members were reading the reports and contributing to the solutions or efforts to improve. Due to the small number of Governing Council members, eliminating the committees may be beneficial. If the Governing Council's membership increased, she did not think it would be wise to shift back and forth between having or not having committees.

Chairman Barker thought that it would be beneficial for the entire Governing Council to be presented with quality and financial information, regardless of the number of members.

Vice Chairman Jacobson said that the incoming CEO may have suggestions on how to structure the committees.

Chairman Barker thanked all for their input.

**Valleywise Community Health Centers Governing Council
Meeting Minutes – General Session – January 4, 2023**

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

6. Recent meeting reports from the Valleywise Community Health Centers Governing Council's Committees
 - a. Compliance and Quality Committee
 - b. Executive Committee
 - c. Finance Committee
 - d. Strategic Planning and Outreach Committee

Ms. Sullivan announced the next Compliance and Quality Committee was scheduled for February 13, 2023.

There was nothing to report for the Executive Committee.

Ms. Agnew provided an overview of the financial reports, and explained the metrics measured on a monthly and year-to-date basis, including visits, net patient service revenue, expenses, medical service fees, supplies, purchased services and allocated ancillary expenses. The margin before overhead allocation had a negative 213.3% variance for the month of November 2022.

Ms. Imam asked if there were plans in place to address the variance.

Ms. Agnew stated that there were plans and stated that monthly fluctuations were normal and may be the result of timing differences.

Ms. Imam asked if the Sliding Fee Discount Program schedule would be reviewed and adjusted, given the increased expenses.

Ms. Agnew said that there was a process for evaluating and revising the Sliding Fee Discount Program schedule and that any changes required Governing Council approval.

Vice Chairman Jacobson confirmed that all Governing Council members were emailed the monthly marketing. He stated the Strategic Planning and Outreach Committee met in December and committee members discussed shifting the FQHC outreach position to work with the mobile health unit and coordinate services within the community.

7. Maricopa County Special Health Care District Board of Directors report

Director Wilcox announced that Director Kate Brophy McGee was sworn-in to the Maricopa County Special Health Care District Board of Directors in December 2022. She represents District 3.

She expressed her appreciation for staff securing supplemental funding from a variety of sources to address shortfalls in the operating revenues, including grants from Maricopa County, the State of Arizona, and the Valleywise Health Foundation. She mentioned funds recently received from the Phoenix Industrial Development Authority (IDA) to improve amenities within the Valleywise Health Family Resource Centers.

She provided an update related to the opening of the new acute care hospital, scheduled for October 2023 and the ongoing contract negotiations with District Medical Group (DMG).

She thanked the nursing and clinical staff for providing exceptional care to the patients served, especially during the COVID-19 pandemic.

With the retirement of Ms. Harding approaching, Director Wilcox applauded the contributions to the ambulatory network and presented her with a plaque of appreciation.

**Valleywise Community Health Centers Governing Council
Meeting Minutes – General Session – January 4, 2023**

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

8. Valleywise Health's President and Chief Executive Officer's report

Ms. Agnew conveyed Mr. Purves's apologies for not being present. He was attending an event for Governor Hobbs.

She provided a status update related to the public health emergency. She explained how the organization would be impacted upon the conclusion, which was anticipated in mid-April 2023.

She outlined Ms. Harding contributions to Valleywise Health during her tenure, including but not limited to achieving full FQHC status resulting in millions of dollars in granting funding. She was also responsible for expanding integrated behavioral health to all FQHCs.

She has supported the Family Resource Centers, the Refugee Program, and the services at Valleywise Community Health Center-McDowell, which was dedicated to serving HIV/AIDS patients. Ms. Harding was an ally of the LGBTQ+ (lesbian, gay, bisexual, transgender, queer/questioning, and others) community and to the most vulnerable patients in the community.

Ms. Harding worked hard during the COVID-19 pandemic, relocating services and patients to new facilities, and overseeing renovations to existing locations. She was instrumental in the development of the Family Medicine residency program. She also implemented virtual care at the onset of the pandemic ensuring patients had continuous access to care and set up COVID-19 testing and vaccination clinics.

Ms. Agnew attributed Ms. Harding's success to her ability to work with a variety of departments to get the job done.

9. Chairman and Council Member Closing Comments/Announcements

Chairman Barker added that Ms. Harding was responsible for changing the culture of the Governing Council and would be part of the legacy she would leave.

The remaining members shared their experiences working with Ms. Harding throughout the years and wished her well in her future endeavors.

Ms. Harding encouraged the Governing Council to continue to grow and work together to tackle any obstacle that may come their way.

10. Review Staff Assignments

Old Business:

October 5, 2022

Provide feedback about monkeypox educational materials circulated within the Federally Qualified Health Centers

Staff to work with Marketing to circulate appropriate materials about monkeypox needed in the Federally Qualified Health Centers

Staff to contact Marketing to connect with Dr. Khalsa and prepare an editorial/educational piece to present to the Hispanic Community, specifically Prensa, Hispania

There were no requests that stemmed from the meeting. Ms. Talbot announced that an editorial related to monkeypox had been submitted to Spanish publications, and the Governing Council would be informed when that information ran in the papers.

***Valleywise Community Health Centers Governing Council
Meeting Minutes – General Session – January 4, 2023***

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

10. Review Staff Assignments, cont.

Ms. Harding stated monkeypox educational materials were circulated in the FQHCs and commended the rapid response to the outbreak. Collaboration with outside organizations allowed Valleywise Health patients access to treat infections and the skill set of the providers was crucial in early intervention.

Adjourn

MOTION: Vice Chairman Jacobson moved to adjourn the January 4, 2023 Valleywise Community Health Centers Governing Council Meeting. Ms. Wilson seconded.

VOTE: 6 Ayes: Chairman Barker, Vice Chairman Jacobson, Mr. Hooper, Ms. Imam, Ms. Sullivan, Ms. Wilson
0 Nays
1 Absent: Ms. McCarty
Motion passed.

Meeting adjourned at 7:48 p.m.

Cynthia Cornejo
Deputy Clerk of the Board



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 1.b.i.

Contracts
90-22-255-1-01

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Wednesday, January 11, 2023 5:13 PM
To: Melanie Talbot
Subject: Contract Approval Request: Amendment #1 - ADHS Well Woman (WWHP) CTR059657 Arizona Department of Health Services (ADHS)

CAUTION: External Email. This Email originated outside of Valleywise Health. THINK BEFORE YOU CLICK. It could be a phishing email.

Do not click links or open attachments unless you recognize the sender and know the content is safe.





Message Information

From [Purves, Steve](#)
To [Talbot, Melanie](#);
Subject Contract Approval Request: Amendment #1 - ADHS Well Woman (WWHP) CTR059657 Arizona Department of Health Services (ADHS)
Additional Information Indicate whether you approve or reject by clicking the Approve or Reject button below.

Approve/Reject Contract

[Click here](#) to approve or reject the Contract.

Attachments

Name	Description	Type	Current File / URL
RFBA		File	 RFBA - ADHS Amend 1.pdf
ADHS Well Woman Amendment #1 - pending Board signature		File	 CTR059657 A1 (90-22-255-1 Amendment 1).pdf
OIG - Arizona Department of Health Services (ADHS) 2023		File	 OIG - Arizona Department of Health Services (ADHS) 2023.pdf
SAM - Arizona Department of Health Services (ADHS) 2023		File	 SAM - Arizona Department of Health Services (ADHS) 2023.pdf

Contract Information

Division Contracts Division
Folder Amendments
Status Pending Approval
Title Amendment #1 - ADHS Well Woman (WWHP) CTR059657
Contract Identifier Board - Amendment
Contract Number 90-22-255-1-01

Primary Responsible Party Tymczyna, Katherine

Departments WELL WOMENS HEALTH CHECK GRANT

Product/Service Description Amendment #1 ADHS Well Woman Health Check Program (WWHP) Grant

Action/Background Approve Amendment #1 to the Agreement between the Arizona Department of Health Services (ADHS) and Maricopa County Special Health Care District dba Valleywise Health for the Well Woman Health Check Program (WWHP) Grant (CTR059657). ADHS, Division of Public Health Services (PHS), receives funding through a cooperative agreement with the CDC and the State of Arizona to provide a statewide breast and cervical cancer screening and quality improvement program, known locally as the WWHP for uninsured or underinsured Women.

The Amendment #1 will extend the term through January 28, 2024 for an aggregate term of June 24, 2022 through January 28, 2024. The anticipated annual revenue is increased by \$13,560.00 for a total annual amount of \$702,760.00 and has been budgeted for operational funding to the Grants department.

Amendment #1 will revise and replace the Scope of Work, the Price Sheet, Exhibit 1, the Boycott of Israel document and include the Forced Labor or Ethnic Uyghurs Ban document. All other provisions shall remain in their entirety.

This Amendment #1 is sponsored by Dr. Michael White, EVP and Chief Clinical Officer.

Evaluation Process The Contractor was determined to meet the requirements of the requesting department and Valleywise Health. Procurement has been satisfied pursuant to HS-102B(2) of the Procurement Code in that any Valleywise Health compliance with the terms and conditions of a grant, gift or bequest is exempt from the solicitation requirements of the Procurement Code.

Category Other

Effective Date

Term End Date 1/28/2024

Annual Value \$13,560.00

Expense/Revenue Revenue

Budgeted Travel Type No

Procurement Number

Primary Vendor Arizona Department of Health Services (ADHS)

Responses

Member Name	Status	Comments
Pardo, Laela N.	Approved	Reviewed and approve.
Joiner, Jennifer L.	Approved	
White, Michael	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	
Landas, Lito S.	Approved	

Demos, Martin C.
Melton, Christopher C.

Approved
Approved



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 1.c.i.

Governance
Appointment of a Governing
Council Member



DATE: February 1st, 2023

TO: Valleywise Community Health Centers Governing Council

FROM: Michael D. White, MD., MBA, Interim Federally Qualified
Health Centers Chief Executive Officer

SUBJECT: Valleywise Community Health Centers Governing Council
Member Application: Maria-Suzette Garganta

The Co-applicant Operational Arrangement between the Maricopa County Special Health Care District Board and the Valleywise Community Health Centers Governing Council will provide District staff with a fully completed membership applications for review of those individuals who are under consideration to serve on the Governing Council.

Attached is the completed application of Ms. Garganta, requesting to serve as a member on the Valleywise Community Health Centers Governing Council. Ms. Garganta resides in District 2. She has nearly 40 years of experience working in non-profit, education, community engagement, health, for-profit industries, philanthropy, and international business areas.

Valleywise Community Health Centers Governing Council ApplicationFull Legal Name: Maria-Suzette Garganta

(As it appears on your Arizona Driver's License, Federal, State, or Locally Issued Identification Card, or U.S. Passport)

Chosen Name: Marisue

What are your pronouns? _____

Home Address: [REDACTED]City: [REDACTED] State: [REDACTED] Zip: [REDACTED]Home Telephone: [REDACTED] Cell: [REDACTED]E-mail Address: [REDACTED]Employer: [REDACTED]Work Address: [REDACTED]City: [REDACTED] State: [REDACTED] Zip: [REDACTED]

Do you, your spouse, child, parent, or sibling, by blood or by marriage, work for Valleywise Health, or any other hospital or health care institution as defined in A.R.S. §36-401?

YES ☐ NO ☒Health care industry is defined as hospitals, other health care institutions, nurses, doctors, dentist, and other licensed healthcare professionals whose primary responsibility is providing primary preventative and therapeutic healthcare services. Do you receive more than 10% of your annual income from the health care industry? YES ☐ NO ☒Were you referred by someone? YES ☒ NO ☐If yes, please list his/her name: Barbara Harding



Valleywise Community Health Centers Governing Council Application

1. Have you personally or a dependent child received care at a Valleywise Health Community Health Center (dental care included) or at one of the Federally Qualified Health Center Clinics located within Valleywise Comprehensive Health Center-Phoenix or Peoria? YES ☐ NO ☒

If yes, please list the Clinic utilized, and approximate month/year of last visit:

Name of Clinic

Date of Visit

2. Why would you like to be a member of the Valleywise Community Health Centers Governing Council?

I am interested in becoming a member of the Valleywise Community Health Centers Governing Council because I have over 40 years of caring and working within the community to create a healthier, safer place for everyone to live, work, play and pray in. Everyone deserves the opportunity to receive quality, affordable and comprehensive health and social services within their communities and Valleywise Community Health Centers continues to provide these services in many locations. I look forward to providing my knowledge of community health and caring for the poor, disenfranchised and marginalized members of our community.

3. As a community member, what do you feel are the greatest health care concerns in Maricopa County?

I feel the greatest concerns in Maricopa County are the lack of the following services:

- Affordable and no cost health services (including mental health, substance abuse treatment, and physical health)
- Affordable housing
- Easy access to nutrition, food and water
- Assistance with utilities such as telephone, Internet, water, and electricity
- Employment assistance
- Transportation assistance
- Access to safe play areas and walkable environments

Valleywise Community Health Centers Governing Council Application

4. What special interests or experiences do you have that would benefit the Council?

I have many special interests and experiences that I can offer the council. Some of my experiences and interest are:

-I have nearly 40years of experience that are in non-profit, education, community engagement, health, for-profit industries, philanthropy and international business areas.

-I am a connector, convener, collaborator, and collective impact advocate

-I am well-connected to the community resources in Arizona and nationally

5. Council members are appointed to a three (3) year term. The Council meets one evening a month for approximately two hours. In addition to meetings, a member should allow time for other duties such as reading meeting material in order to prepare for meetings. Furthermore, members are required to sit on at least one standing committee. Standing committee meetings generally occur once a month during the daytime for approximately two hours. Do you have at least eight hours per month to devote to the Valleywise Community Health Centers Governing Council?

YES ☒ NO ☐

6. Have you served or are you currently serving on any other boards or committees? If so, please list the board/committees and dates of service.

Emeritus Board member-Foundation for Senior Living (FSL)

Emeritus Board member- Catholic Charities Services

Advisory Board member- Brian Injury Alliance of Arizona

Committee member- Leveraging Anchor Philanthropy Initiative- Democracy

Founding Board member- ALIRO Foundation

7. Health Resources and Services Administration (HRSA), the government agency that provides funding for our Federally Qualified Health Center Clinics, requires information on Council members including members' areas of expertise, race/ethnicity and gender.

Area of expertise (select no more than two):

Healthcare ☒

Finance ☐

Legal ☐

Community Affairs ☒

Trade Unions ☐

Government ☐

Social Services ☐

Education ☐

Business ☐

Labor Relations ☐



Valleywise Community Health Centers Governing Council Application

Ethnicity:

Hispanic or Latino ☐

Non-Hispanic or Latino ☒

Prefer not to answer ☐

Race:

Asian ☐

Native Hawaiian ☐

Other Pacific Islander ☐

Black/African American ☐

American Indian/Alaska Native ☐

White ☒

More than one race ☐

Prefer not to answer ☐

Gender: Male ☐

Female ☒

Prefer not to answer ☐

Please share anything about yourself that you think would add to the diversity and/or advocacy of the Council.

I am Portuguese/American and first generation American. I speak languages other than English. I speak Portuguese and Spanish. I also am familiar with French and Italian languages. I am not as proficient in the last two, but can understand. I am very interested in assisting the homeless community, human trafficking and diverse cultures and groups.

8. All members of the Valleywise Community Health Centers Governing Council must comply with the Maricopa County Special Health Care District Code of Conduct and Ethics and Conflict of Interest and Gift Policy. One of the Principles of Standards of Conduct included in the Code is for Valleywise Health to complete a background check on existing and potential Governing Council members.

Would you consent and authorize Valleywise Health to procure background checks?

YES ☒ NO ☐

11/18/2022
Date

Please Note: This application is considered a public record



Valleywise Community Health Centers Governing Council Application

Please check at least one standing committee you potentially would like to serve on if appointed to the Council.

☐

Finance Committee:

The purpose of the Finance Committee is to: (1) recommend an annual operating budget for the Valleywise Health Federally Qualified Health Center (FQHC) Clinics; (2) provide oversight of the financial performance of the Valleywise Health FQHC Clinics; and (3) review the annual audit performed by an independent, external auditor.

☐

Compliance and Quality Committee:

The purpose of the Compliance and Quality Committee is to: (1) ensure the quality of care provided at the Valleywise Health Federally Qualified Health Center (FQHC) Clinics; (2) ensure patient safety and satisfaction provided throughout the Valleywise Health FQHC Clinics; (3) ensure compliance with Health Resources & Services Administration's (HRSA) Program requirements.

☒

Strategic Planning and Outreach Committee:

The purpose of the Strategic Planning and Outreach Committee is to: identify, develop, and implement strategic planning and outreach initiatives to identify Valleywise Health Federally Qualified Health Centers (FQHC) Clinics health equity priorities to address health care needs in Maricopa County.

Completed Applications need to be mailed, emailed, or faxed to:

Barbara Harding
Valleywise Health Medical Center
2601 E Roosevelt Street, Phoenix, AZ 85008
barbara.harding@valleywisehealth.org Fax:
602-655-9102



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 1.c.ii.

Governance
FQHCs Service Area by Zip Code



Office of the Interim CEO FQHC Clinics

2601 East Roosevelt Street • Phoenix • AZ• 85008

Date: February 1, 2022

To: Valleywise Community Health Centers Governing Council

From: Michael D. White, MD, MBA
Interim CEO FQHC Clinics

Subj: Valleywise Health's FQHC Service Area by ZIP Code

The Health Resources and Services Administration (HRSA) requires that health center programs annually review their service area based on where current or proposed patient populations reside as documented by the ZIP codes reported.

Attached is the Valleywise Health's annual review of the FQHCs Service Area by ZIP Code.

Valleywise Health Clinic ZIP Code Data
Calendar Year 2022

Valleywise Community Health Center Avondale	% of Total Patient Population	
Top 10 ZIP Codes	6.63%	
	Patient Count	% of Clinic Patients
85323	2,526	25.28%
85353	977	9.78%
85338	667	6.68%
85326	643	6.44%
85037	571	5.72%
85392	549	5.49%
85033	468	4.68%
85035	378	3.78%
85043	346	3.46%
85340	210	2.10%

Valleywise Community Health Center Chandler	% of Total Patient Population	
Top 10 ZIP Codes	4.08%	
	Patient Count	% of Clinic Patients
85225	3,054	36.38%
85286	677	8.07%
85224	423	5.04%
85249	233	2.78%
85226	214	2.55%
85204	196	2.34%
85210	192	2.29%
85295	174	2.07%
85248	170	2.03%
85142	160	1.91%

Valleywise Community Health Center Guadalupe	% of Total Patient Population	
Top 10 ZIP Codes	1.66%	
	Patient Count	% of Clinic Patients
85283	1,074	31.33%
85282	331	9.66%
85042	240	7.00%
85281	178	5.19%
85040	150	4.38%
85044	134	3.91%
85204	80	2.33%
85225	72	2.10%
85008	69	2.01%
85202	69	2.01%

Valleywise Community Health Center McDowell	% of Total Patient Population	
Top 10 ZIP Codes	4.32%	
	Patient Count	% of Clinic Patients
85008	219	4.57%
85015	187	3.90%
85021	127	2.65%
85041	124	2.59%
85009	119	2.48%
85014	117	2.44%
85301	113	2.36%
85016	111	2.32%
85013	104	2.17%
85017	104	2.17%

Total Patient Population = number of billed patients by FQHC service location

Clinic Patients = number of unique patients at each FQHC service location

**Valleywise Health Clinic ZIP Code Data
Calendar Year 2022**

Valleywise Community Health Center Mesa	% of Total Patient Population	
Top 10 ZIP Codes	5.11%	
	Patient Count	% of Clinic Patients
85008	179	9.27%
85201	62	3.21%
85007	49	2.54%
85210	46	2.38%
85281	43	2.23%
85301	42	2.18%
85040	40	2.07%
85204	38	1.97%
85009	36	1.87%
85042	30	1.55%

*New Mesa clinic opened 1.24.2022

Valleywise Community Health Center Mesa (Former)	% of Total Patient Population	
Top 10 ZIP Codes	5.11%	
	Patient Count	% of Clinic Patients
85204	167	9.89%
85201	132	7.82%
85210	107	6.34%
85203	85	5.04%
85225	56	3.32%
85202	44	2.61%
85041	39	2.31%
85301	34	2.01%
85345	34	2.01%
85281	33	1.95%

*Former Mesa clinic closed 1.21.2022

Valleywise Community Health Center North Phoenix	% of Total Patient Population	
Top 10 ZIP Codes	4.49%	
	Patient Count	% of Clinic Patients
85021	1225	14.30%
85029	803	9.38%
85051	790	9.22%
85017	522	6.09%
85301	472	5.51%
85020	408	4.76%
85015	387	4.52%
85019	313	3.65%
85032	310	3.62%
85023	257	3.00%

Valleywise Community Health Center South Central Phoenix	% of Total Patient Population	
Top 10 ZIP Codes	5.41%	
	Patient Count	% of Clinic Patients
85041	1,674	16.80%
85040	1,097	11.01%
85009	847	8.50%
85007	740	7.43%
85042	669	6.71%
85008	408	4.09%
85003	254	2.55%
85006	213	2.14%
85015	213	2.14%
85339	202	2.03%

Total Patient Population = number of billed patients by FQHC service location

Clinic Patients = number of unique patients at each FQHC service location

**Valleywise Health Clinic ZIP Code Data
Calendar Year 2022**

Valleywise Community Health Center South Phoenix/Laveen	% of Total Patient Population	
Top 10 ZIP Codes	3.29%	
	Patient Count	% of Clinic Patients
85041	2,304	31.89%
85339	941	13.02%
85009	745	10.31%
85040	589	8.15%
85042	444	6.15%
85043	266	3.68%
85035	193	2.67%
85007	169	2.34%
85008	101	1.40%
85031	92	1.27%

Valleywise Community Health Center West Maryvale	% of Total Patient Population	
Top 10 ZIP Codes	3.11%	
	Patient Count	% of Clinic Patients
85033	898	12.16%
85035	841	11.38%
85031	786	10.64%
85009	589	7.97%
85301	568	7.69%
85037	383	5.18%
85019	303	4.10%
85043	302	4.09%
85017	297	4.02%
85303	197	2.67%

*West Maryvale clinic opened 10.29.2021

Valleywise Comprehensive Health Center Maryvale (Former)	% of Total Patient Population	
Top 10 ZIP Codes	9.90%	
	Patient Count	% of Clinic Patients
85031	4,038	16.18%
85301	3,781	15.15%
85035	2,512	10.06%
85033	2,211	8.86%
85009	1,529	6.13%
85019	1,442	5.78%
85017	928	3.72%
85008	612	2.45%
85043	573	2.30%
85303	512	2.05%

*Former Maryvale clinic closed on 10.28.2021

Valleywise Comprehensive Health Center Peoria	% of Total Patient Population	
Top 10 ZIP Codes	9.90%	
	Patient Count	% of Clinic Patients
85301	1,638	9.76%
85345	1,352	8.05%
85335	1,233	7.34%
85033	921	5.49%
85303	717	4.27%
85031	627	3.74%
85035	591	3.52%
85323	545	3.25%
85037	497	2.96%
85302	403	2.40%

Total Patient Population = number of billed patients by FQHC service location

Clinic Patients = number of unique patients at each FQHC service location

Valleywise Health Clinic ZIP Code Data
Calendar Year 2022

Valleywise Comprehensive Health Center Phoenix	% of Total Patient Population	
Top 10 ZIP Codes	24.72%	
	Patient Count	% of Clinic Patients
85008	5,368	10.59%
85009	2,922	5.76%
85041	2,505	4.94%
85040	2,004	3.95%
85301	1,711	3.38%
85017	1,608	3.17%
85006	1,598	3.15%
85035	1,585	3.13%
85033	1,448	2.86%
85042	1,385	2.73%

Total Patient Population = number of billed patients by FQHC service location

Clinic Patients = number of unique patients at each FQHC service location



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 1.c.iii.

Governance
AACHC Annual Conference
Registration

2023 Annual Conference

April 18 @ 7:30 am - April 19 @ 2:30 pm



Each year the Arizona Alliance for Community Health Centers [the Alliance] hosts more than 200 Arizona Community Health Center [CHC] team members and partner organization representatives for its Annual Conference. Participants include executive and senior leadership from CHCs, Look-Alikes, Federally Qualified Health Centers, Rural Health Centers, hospitals, tribal organizations, and other safety net providers. We are excited to be hosting the event at The Scottsdale Resort at McCormick Ranch again next year, April 18-19, 2023. This conference will highlight best practices in primary healthcare service delivery, current issues affecting CHCs and their patients, health center board governance, and the future of the Health Center Program.

Tuesday, April 18th

7:30-8:30am: Registration & Breakfast

8:30-10am: Keynote – Workforce

10-10:30am: Break

10:30-11:15am: General Session – Topic TBD

11:15am-12pm: General Session – Topic TBD

12-1pm: Lunch

1-2:30pm: General Session – CHC Best Practice Presentations

2:30-2:45pm: Award Presentations

2:45-3:15pm: Break

3:15-4pm: General Session – Topic TBD

Note: Health Center Board Member Training will take place from 12-4pm

4-6pm: Reception

Wednesday, April 19th

7:30-8:30am: Registration & Breakfast

8:30-9:30am: General Session – Topic TBD

9:30-10am: Break

10-10:50am: Breakout Sessions

11:10am-12pm: Breakout Session

12-1pm: Lunch

1-2pm: General Session – Topic TBD

2-2:15pm: Award Presentations

2:15-2:30pm: Raffle Prizes & Closing

Tickets

Member, in-person early bird (both days)

\$ 425.00

206 available



0



Member, in-person early bird (one day)

\$ 265.00

25 available



0



Health Center Board Member, BOD training AND
full conference, in-person

\$ 300.00

48 available



0



Health Center Board Member, BOD Training AND
Day 1 of conference, in-person

\$ 210.00

8 available



0



Health Center Board Member, BOD Training
ONLY, in-person

\$ 105.00

20 available



0



Non-member, in-person early bird (one day)

\$ 345.00

24 available



0



Non-member, in-person early bird (both days)

\$ 505.00

24 available



0





Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 1.d.i.

Medical Staff
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Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 2.

FQHCs Financials and Payor
Mix

OCT-DEC FY23 Actual vs Budget

	VCHC				OP Behavioral Health				VCHC - Phoenix			
	OCT - DEC FY 2023				OCT - DEC FY 2023				OCT - DEC FY 2023			
	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%
(a) Visits	40,527	39,921	606	2%	5,949	6,538	(589)	(9%)	16,099	15,898	201	1%
Operating Revenues												
(b) Net patient service revenue	\$ 9,019,043	\$ 8,989,237	\$ 29,806	0%	\$ 1,453,955	\$ 1,677,946	\$ (223,991)	(13%)	\$ 2,783,979	\$ 2,771,440	\$ 12,539	0%
(c) Other Operating Revenue	663,560	650,639	12,921	2%	229,561	253,287	(23,726)	(9%)	98,357	113,330	(14,973)	(13%)
(d) PCMH Revenue	-	-	-	-	-	-	-	-	-	-	-	-
(e) Total operating revenues	\$ 9,682,602	\$ 9,639,876	\$ 42,727	0%	\$ 1,683,516	\$ 1,931,233	\$ (247,716)	(13%)	\$ 2,882,336	\$ 2,884,770	\$ (2,434)	(0%)
Operating Expenses												
(f) Salaries and wages	3,377,283	3,009,208	(368,075)	(12%)	687,118	669,021	(18,097)	(3%)	1,458,307	1,217,822	(240,486)	(20%)
(g) Contract labor	8,429	1,133	(7,295)	(644%)	-	187	187	100%	15,098	453	(14,644)	(3,229%)
(h) Employee benefits	1,071,869	1,007,959	(63,910)	(6%)	223,768	190,832	(32,935)	(17%)	440,998	381,362	(59,636)	(16%)
(i) Medical service fees	3,324,736	3,295,588	(29,148)	(1%)	168,266	132,101	(36,165)	(27%)	1,415,510	1,550,027	134,518	9%
(j) Supplies	623,900	568,028	(55,872)	(10%)	2,980	3,856	876	23%	171,323	115,392	(55,931)	(48%)
(k) Purchased services	17,389	39,284	21,895	56%	2,204	6,299	4,094	65%	5,976	15,254	9,278	61%
(l) Other expenses	189,378	198,331	8,954	5%	6,174	5,843	(330)	(6%)	9,181	6,460	(2,721)	(42%)
(n) Allocated ancillary expense	2,153,819	1,993,834	(159,985)	(8%)	227	-	(227)	(100%)	241,859	316,475	74,616	24%
(o) Total operating expenses	\$ 10,766,802	\$ 10,113,365	(653,437)	(6%)	\$ 1,090,737	\$ 1,008,139	(82,598)	(8%)	\$ 3,758,251	\$ 3,603,246	(155,005)	(4%)
(p) Margin (before overhead allocation)	\$ (1,084,200)	\$ (473,490)	\$ (610,710)		\$ 592,779	\$ 923,094	\$ (330,314)		\$ (875,915)	\$ (718,476)	\$ (157,439)	
(q) Percent Margin	(11%)	(5%)			35%	48%			(30%)	(25%)		
(u) Overhead Allocation	2,643,826	2,510,410	(133,416)		287,015	265,213	(21,802)		924,823	866,870	(57,954)	
(v) Margin (after overhead allocation)	\$ (3,728,026)	\$ (2,983,900)	\$ (744,126)		\$ 305,765	\$ 657,881	\$ (352,116)		\$ (1,800,739)	\$ (1,585,346)	\$ (215,393)	
(w) Percent Margin	(39%)	(31%)			18%	34%			(62%)	(55%)		
Per Visit Analysis (\$/Visit)												
(x) Net patient service revenue	\$ 222.54	\$ 225.18	\$ (2.63)		\$ 244.40	\$ 256.65	\$ (12.24)		\$ 172.93	\$ 174.33	\$ (1.40)	
(y) Other Operating Revenue	16.37	16.30	0.08		38.59	38.74	(0.15)		6.11	7.13	(1.02)	
(aa) Total operating revenues	\$ 238.92	\$ 241.47	\$ (2.56)	(1%)	\$ 282.99	\$ 295.39	\$ (12.39)	(4%)	\$ 179.04	\$ 181.45	\$ (2.42)	(1%)
(ab) Total operating expenses	265.67	253.33	(12.34)	(5%)	183.35	154.20	(29.15)	(19%)	233.45	226.65	(6.80)	(3%)
(ac) Margin (before overhead allocation)	\$ (26.75)	\$ (11.86)	\$ (14.89)	(126%)	\$ 99.64	\$ 141.19	\$ (41.55)	(29%)	\$ (54.41)	\$ (45.19)	\$ (9.22)	(20%)
(af) Overhead Allocation	65.24	62.88	(2.35)	(4%)	48.25	40.56	(7.68)	(19%)	57.45	54.53	(2.92)	(5%)
(ag) Margin (after overhead allocation)	\$ (91.99)	\$ (74.75)	\$ (17.24)	(23%)	\$ 51.40	\$ 100.62	\$ (49.23)	(49%)	\$ (111.85)	\$ (99.72)	\$ (12.13)	(12%)

OCT-DEC FY23 Actual vs Budget

	VCHC - Peoria				Dental				All Clinics Combined			
	OCT - DEC FY 2023				OCT - DEC FY 2023				OCT - DEC FY 2023			
	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%
(a) Visits	6,967	7,310	(343)	(5%)	5,604	5,560	44	1%	75,146	75,227	(81)	(0%)
Operating Revenues												
(b) Net patient service revenue	\$ 1,320,704	\$ 1,489,734	\$ (169,030)	(11%)	\$ 720,637	\$ 825,782	\$ (105,145)	(13%)	\$ 15,298,318	\$ 15,754,138	\$ (455,820)	(3%)
(c) Other Operating Revenue	40,736	51,702	(10,966)	(21%)	129,384	147,903	(18,519)	(13%)	1,161,598	1,216,860	(55,262)	(5%)
(d) PCMH Revenue	-	-	-	-	-	-	-	-	-	-	-	-
(e) Total operating revenues	\$ 1,361,440	\$ 1,541,436	\$ (179,995)	(12%)	\$ 850,021	\$ 973,685	\$ (123,663)	(13%)	\$ 16,459,916	\$ 16,970,998	\$ (511,082)	(3%)
Operating Expenses												
(f) Salaries and wages	566,647	485,980	(80,667)	(17%)	1,020,000	975,110	(44,889)	(5%)	7,109,356	6,357,141	(752,214)	(12%)
(g) Contract labor	-	208	208	100%	-	159	159	100%	23,526	2,140	(21,386)	(999%)
(h) Employee benefits	178,574	150,303	(28,271)	(19%)	282,551	275,510	(7,042)	(3%)	2,197,759	2,005,965	(191,794)	(10%)
(i) Medical service fees	510,657	560,046	49,389	9%	-	-	-	-	5,419,169	5,537,762	118,593	2%
(j) Supplies	55,818	67,184	11,366	17%	95,100	84,269	(10,831)	(13%)	949,121	838,729	(110,392)	(13%)
(k) Purchased services	2,509	6,878	4,369	64%	46,192	53,724	7,533	14%	74,270	121,439	47,168	39%
(l) Other expenses	2,729	3,202	473	15%	14,963	13,702	(1,261)	(9%)	222,424	227,539	5,114	2%
(n) Allocated ancillary expense	135,399	191,723	56,324	29%	-	-	-	-	2,531,303	2,502,032	(29,271)	(1%)
(o) Total operating expenses	\$ 1,452,334	\$ 1,465,524	13,190	1%	\$ 1,458,806	\$ 1,402,474	(56,332)	(4%)	\$ 18,526,930	\$ 17,592,748	(934,182)	(5%)
(p) Margin (before overhead allocation)	\$ (90,893)	\$ 75,912	\$ (166,806)		\$ (608,784)	\$ (428,789)	\$ (179,995)		\$ (2,067,014)	\$ (621,749)	\$ (1,445,264)	
(q) Percent Margin	(7%)	5%			(72%)	(44%)			(13%)	(4%)		
(u) <i>Overhead Allocation</i>	383,993	387,481	3,487		416,517	400,164	(16,353)		4,656,174	4,430,137	(226,037)	
(v) Margin (after overhead allocation)	\$ (474,887)	\$ (311,569)	\$ (163,318)		\$ (1,025,301)	\$ (828,953)	\$ (196,348)		\$ (6,723,188)	\$ (5,051,886)	\$ (1,671,301)	
(w) Percent Margin	(35%)	(20%)			(121%)	(85%)			(41%)	(30%)		
Per Visit Analysis (\$/Visit)												
(x) Net patient service revenue	\$ 189.57	\$ 203.79	\$ (14.23)		\$ 128.59	\$ 148.52	\$ (19.93)		\$ 203.58	\$ 209.42	\$ (5.84)	
(y) Other Operating Revenue	5.85	7.07	(1.23)		23.09	26.60	(3.51)		15.46	16.18	(0.72)	
(aa) Total operating revenues	\$ 195.41	\$ 210.87	\$ (15.45)	(8%)	\$ 151.68	\$ 175.12	\$ (23.44)	(15%)	\$ 219.04	\$ 225.60	\$ (6.56)	(3%)
(ab) Total operating expenses	208.46	200.48	(7.98)	(4%)	260.32	252.24	(8.07)	(3%)	246.55	233.86	(12.68)	(5%)
(ac) Margin (before overhead allocation)	\$ (13.05)	\$ 10.38	\$ (23.43)	(226%)	\$ (108.63)	\$ (77.12)	\$ (31.51)	(41%)	\$ (27.51)	\$ (8.26)	\$ (19.24)	(233%)
(af) <i>Overhead Allocation</i>	55.12	53.01	(2.11)	(4%)	74.32	71.97	(2.35)	(3%)	61.96	58.89	(3.07)	(5%)
(ag) Margin (after overhead allocation)	\$ (68.16)	\$ (42.62)	\$ (25.54)	(60%)	\$ (182.96)	\$ (149.09)	\$ (33.87)	(23%)	\$ (89.47)	\$ (67.16)	\$ (22.31)	(33%)

YTD Actual vs Budget

	VCHC				OP Behavioral Health				VCHC - Phoenix			
	DEC Year to Date				DEC Year to Date				DEC Year to Date			
	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%
(a) Visits	85,286	80,144	5,142	6%	12,805	13,211	(406)	(3%)	33,812	32,824	988	3%
Operating Revenues												
(b) Net patient service revenue	\$ 18,971,648	\$ 17,816,863	\$ 1,154,785	6%	\$ 3,099,165	\$ 3,341,192	\$ (242,027)	(7%)	\$ 5,871,721	\$ 5,621,834	\$ 249,887	4%
(c) Other Operating Revenue	1,276,429	1,285,693	(9,264)	(1%)	443,127	507,783	(64,656)	(13%)	169,463	222,990	(53,527)	(24%)
(e) Total operating revenues	\$ 20,248,077	\$ 19,102,555	\$ 1,145,521	6%	\$ 3,542,292	\$ 3,848,975	\$ (306,683)	(8%)	\$ 6,041,183	\$ 5,844,824	\$ 196,360	3%
Operating Expenses												
(f) Salaries and wages	6,610,433	6,020,051	(590,381)	(10%)	1,309,939	1,343,679	33,741	3%	2,874,825	2,493,598	(381,227)	(15%)
(g) Contract labor	8,429	2,255	(6,174)	(274%)	-	374	374	100%	15,098	928	(14,169)	(1,526%)
(h) Employee benefits	2,153,729	2,013,011	(140,718)	(7%)	413,823	382,650	(31,174)	(8%)	885,175	781,160	(104,015)	(13%)
(i) Medical service fees	6,720,044	6,591,766	(128,278)	(2%)	330,327	264,196	(66,131)	(25%)	2,934,608	3,099,700	165,092	5%
(j) Supplies	1,048,423	1,020,176	(28,247)	(3%)	4,961	7,371	2,410	33%	272,787	236,947	(35,840)	(15%)
(k) Purchased services	22,478	65,907	43,429	66%	2,929	10,491	7,562	72%	7,865	26,066	18,202	70%
(l) Other expenses	434,121	433,634	(487)	(0%)	12,502	13,974	1,472	11%	19,139	17,349	(1,790)	(10%)
(n) Allocated ancillary expense	4,226,540	4,045,751	(180,789)	(4%)	880	-	(880)	(100%)	531,658	659,595	127,936	19%
(o) Total operating expenses	\$ 21,224,197	\$ 20,192,552	(1,031,645)	(5%)	\$ 2,075,360	\$ 2,022,735	(52,626)	(3%)	\$ 7,541,155	\$ 7,315,344	(225,812)	(3%)
(p) Margin (before overhead allocation)	\$ (976,120)	\$ (1,089,996)	\$ 113,876		\$ 1,466,932	\$ 1,826,240	\$ (359,309)		\$ (1,499,972)	\$ (1,470,520)	\$ (29,452)	
(q) Percent Margin	(5%)	(6%)			41%	47%			(25%)	(25%)		
(u) <i>Overhead Allocation</i>	5,234,628	5,012,122	(222,506)		546,332	532,277	(14,055)		1,846,174	1,760,698	(85,476)	
(v) Margin (after overhead allocation)	\$ (6,210,748)	\$ (6,102,118)	\$ (108,629)		\$ 920,600	\$ 1,293,963	\$ (373,363)		\$ (3,346,145)	\$ (3,231,218)	\$ (114,928)	
(w) Percent Margin	(31%)	(32%)			26%	34%			(55%)	(55%)		
Per Visit Analysis (\$/Visit)												
(x) Net patient service revenue	\$ 222.45	\$ 222.31	\$ 0.14		\$ 242.03	\$ 252.91	\$ (10.88)		\$ 173.66	\$ 171.27	\$ 2.39	
(y) Other Operating Revenue	14.97	16.04	(1.08)		34.61	38.44	(3.83)		5.01	6.79	(1.78)	
(aa) Total operating revenues	\$ 237.41	\$ 238.35	\$ (0.94)	(0%)	\$ 276.63	\$ 291.35	\$ (14.71)	(5%)	\$ 178.67	\$ 178.07	\$ 0.60	0%
(ab) Total operating expenses	248.86	251.95	3.09	1%	162.07	153.11	(8.96)	(6%)	223.03	222.87	(0.17)	(0%)
(ac) Margin (before overhead allocation)	\$ (11.45)	\$ (13.60)	\$ 2.16	16%	\$ 114.56	\$ 138.24	\$ (23.68)	(17%)	\$ (44.36)	\$ (44.80)	\$ 0.44	1%
(af) <i>Overhead Allocation</i>	61.38	62.54	1.16	2%	42.67	40.29	(2.38)	(6%)	54.60	53.64	(0.96)	(2%)
(ag) Margin (after overhead allocation)	\$ (72.82)	\$ (76.14)	\$ 3.32	4%	\$ 71.89	\$ 97.95	\$ (26.05)	(27%)	\$ (98.96)	\$ (98.44)	\$ (0.52)	(1%)

YTD Actual vs Budget

	VCHC - Peoria				Dental				All Clinics Combined			
	DEC Year to Date				DEC Year to Date				DEC Year to Date			
	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%	FY23 Actual	FY23 Budget	Variance Favorable (Unfavorable)	%
(a) Visits	14,059	15,027	(968)	(6%)	11,426	10,639	787	7%	157,388	151,845	5,543	4%
Operating Revenues												
(b) Net patient service revenue	\$ 2,700,881	\$ 3,021,270	\$ (320,389)	(11%)	\$ 1,579,911	\$ 1,589,713	\$ (9,802)	(1%)	\$ 32,223,325	\$ 31,390,871	\$ 832,455	3%
(c) Other Operating Revenue	67,625	102,576	(34,950)	(34%)	255,196	287,215	(32,019)	(11%)	2,211,841	2,406,257	(194,416)	(8%)
(e) Total operating revenues	\$ 2,768,506	\$ 3,123,845	\$ (355,339)	(11%)	\$ 1,835,108	\$ 1,876,928	\$ (41,821)	(2%)	\$ 34,435,166	\$ 33,797,128	\$ 638,038	2%
Operating Expenses												
(f) Salaries and wages	1,082,215	1,003,539	(78,676)	(8%)	1,972,811	1,852,508	(120,303)	(6%)	13,850,223	12,713,375	(1,136,848)	(9%)
(g) Contract labor	-	424	424	100%	-	301	301	100%	23,526	4,284	(19,242)	(449%)
(h) Employee benefits	349,791	310,190	(39,600)	(13%)	551,955	536,077	(15,878)	(3%)	4,354,473	4,023,088	(331,385)	(8%)
(i) Medical service fees	1,053,722	1,119,862	66,141	6%	-	-	-	-	11,038,701	11,075,524	36,823	0%
(j) Supplies	95,724	119,208	23,485	20%	183,437	158,182	(25,255)	(16%)	1,605,332	1,541,885	(63,447)	(4%)
(k) Purchased services	3,238	11,722	8,484	72%	97,340	102,817	5,477	5%	133,849	217,003	83,154	38%
(l) Other expenses	6,731	8,942	2,211	25%	29,634	28,865	(770)	(3%)	502,127	502,763	636	0%
(n) Allocated ancillary expense	269,792	394,632	124,840	32%	-	-	-	-	5,028,871	5,099,978	71,107	1%
(o) Total operating expenses	\$ 2,861,212	\$ 2,968,519	107,307	4%	\$ 2,835,176	\$ 2,678,750	(156,427)	(6%)	\$ 36,537,101	\$ 35,177,899	(1,359,201)	(4%)
(p) Margin (before overhead allocation)	\$ (92,706)	\$ 155,326	\$ (248,032)		\$ (1,000,069)	\$ (801,822)	\$ (198,247)		\$ (2,101,935)	\$ (1,380,772)	\$ (721,163)	
(q) Percent Margin	(3%)	5%			(54%)	(43%)			(6%)	(4%)		
(u) <i>Overhead Allocation</i>	756,497	784,869	28,372		808,848	763,697	(45,152)		9,192,478	8,853,662	(338,816)	
(v) Margin (after overhead allocation)	\$ (849,202)	\$ (629,542)	\$ 276,404		\$ (1,808,917)	\$ (1,565,518)	\$ (243,399)		\$ (11,294,413)	\$ (10,234,433)	\$ (1,059,979)	
(w) Percent Margin	(31%)	(20%)			(99%)	(83%)			(33%)	(30%)		
Per Visit Analysis (\$/Visit)												
(x) Net patient service revenue	\$ 192.11	\$ 201.06	\$ 8.95		\$ 138.27	\$ 149.42	\$ (11.15)		\$ 204.74	\$ 206.73	\$ (1.99)	
(y) Other Operating Revenue	4.81	6.83	2.02		22.33	27.00	(4.66)		14.05	15.85	(1.79)	
(aa) Total operating revenues	\$ 196.92	\$ 207.88	\$ 10.96	(6%)	\$ 160.61	\$ 176.42	\$ (15.81)	(10%)	\$ 218.79	\$ 222.58	\$ (3.78)	(2%)
(ab) Total operating expenses	203.51	197.55	5.97	(3%)	248.13	251.79	3.65	1%	232.15	231.67	(0.48)	(0%)
(ac) Margin (before overhead allocation)	\$ (6.59)	\$ 10.34	\$ 16.93	(164%)	\$ (87.53)	\$ (75.37)	\$ (12.16)	(16%)	\$ (13.36)	\$ (9.09)	\$ (4.26)	(47%)
(af) <i>Overhead Allocation</i>	53.81	52.23	1.58	(3%)	70.79	71.78	0.99	1%	58.41	58.31	(0.10)	(0%)
(ag) Margin (after overhead allocation)	\$ (60.40)	\$ (41.89)	\$ 18.51	(44%)	\$ (158.32)	\$ (147.15)	\$ (11.17)	(8%)	\$ (71.76)	\$ (67.40)	\$ (4.36)	(6%)

**Valleywise Health
FQHC**

**With Ancillary Services
DEC FY 2023**

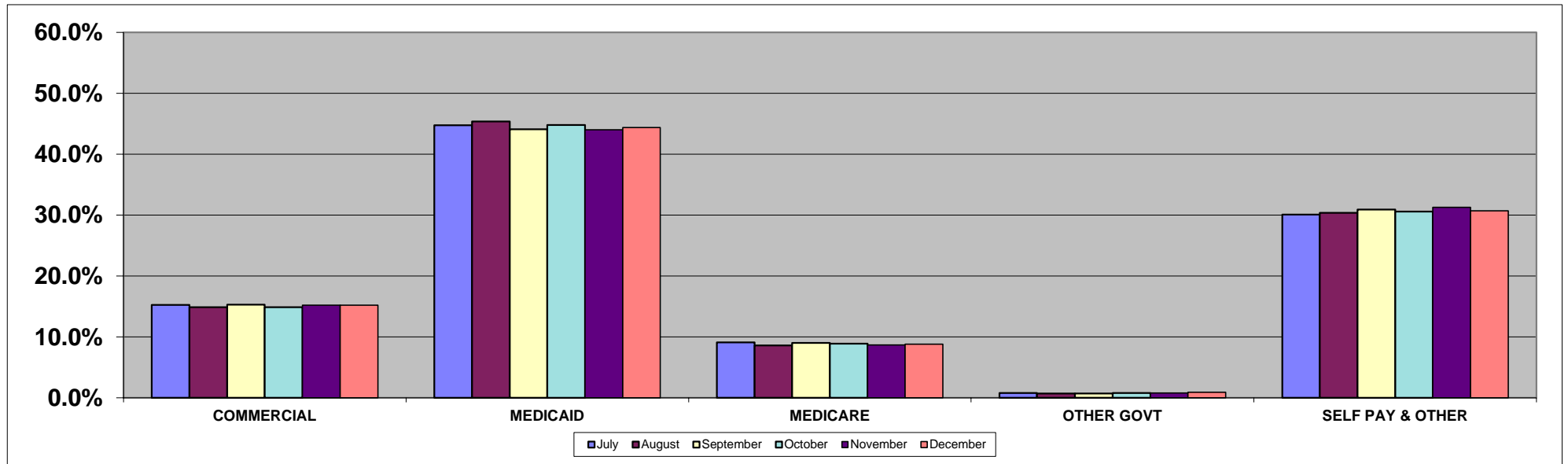
(a) Visits	The number of times patients were seen at the clinics
Operating Revenues	
(b) Net patient service revenue	This amount reflects the estimated amount of revenue we expect to collect as cash from regular operations
(c) Other Operating Revenue	All other operating revenue not listed in another category (Ex: rental revenue, financial assessment form program revenue)
(e) Total operating revenues	Net patient service revenue (b) + Other Operating Revenue + PCMH revenue (d) = (e)
Operating Expenses	
(f) Salaries and wages	Salaries and wages paid to MIHS employees via payroll
(g) Contract labor	Temporary staff and contractors
(h) Employee benefits	Benefits paid to MIHS employees (Ex: health insurance)
(i) Medical service fees	Fees paid per the contract with District Medical Group (DMG) for providing physician/provider services
(j) Supplies	Expenses related to items consumed (Ex: medical and office supplies)
(k) Purchased services	Expenses related to consulting, dental lab services, lab courier services, and uniform/laundry cleaning
(l) Other expenses	All other expenses not listed in another category (Ex: equipment or facility maintenance agreements, utilities, etc.)
(n) Allocated ancillary expense	Expense amounts from the following departments are allocated to the individual FQHC cost centers: radiology, pharmacy, and laboratory because those services were done at the clinics. This is done in order to match revenue with expenses.
(o) Total operating expenses	Sum of all Operational Expenses, lines (f) through (n) = (o)
(p) Margin (before overhead allocation)	Total Operating Revenue (e) - Total Operating Expense (o) = (p)
(q) Percent Margin	Margin (before overhead allocation) (p) / Total operating revenue (e) = (q)
(u) Overhead Allocation	Expense amounts from departments that provide indirect services to the FQHC departments (such as: Human Resources, Accounting, Payroll, Security, Information Technology). This is done in order to match revenue with expenses.
(v) Margin (after overhead allocation)	Margin (before overhead allocation) (s) - Overhead Allocation (u) = (v)
(w) Percent Margin	Margin (after overhead allocation) (v) / Total operating revenue (e) = (w)
Per Visit Analysis (\$/Visit)	
(x) Net patient service revenue	Net patient service revenue line (b) / Visits line (a) = (x)
(y) Other Operating Revenue	Other Operating Revenue line (c) / Visits line (a) = (y)
(aa) Total operating revenues	Total operating revenues line (e) / Visits line (a) = (aa)
(ab) Total operating expenses	Total operating expenses line (o) / Visits line (a) = (ab)
(ac) Margin (before overhead allocation)	Margin (before overhead allocation) line (p) / Visits line (a) = (ac)
(af) Overhead Allocation	Overhead allocation line (u) / Visits line (a) = (af)
(ag) Margin (after overhead allocation)	Margin (after overhead allocation) line (v) / Visits line (a) = (ag)

Note: Reports do not include overhead allocations (i.e. additional expenses related to Financial Services (including: Payroll, Accounts Payable, Billing), Human Resources, Facilities and Maintenance, etc.)

**Valleywise Health - Federally Qualified Health Centers
Comparison ALL FQHC Visits by Payor - 6 Month Trend**

Payer	July	August	September	October	November	December
COMMERCIAL	3,750	4,509	4,178	3,858	3,934	3,580
MEDICAID	11,016	13,761	12,062	11,556	11,369	10,429
MEDICARE	2,238	2,598	2,452	2,297	2,247	2,057
OTHER GOVT	195	227	179	199	196	213
SELF PAY & OTHER	7,399	9,224	8,454	7,905	8,081	7,225
Total	24,598	30,319	27,325	25,815	25,827	23,504

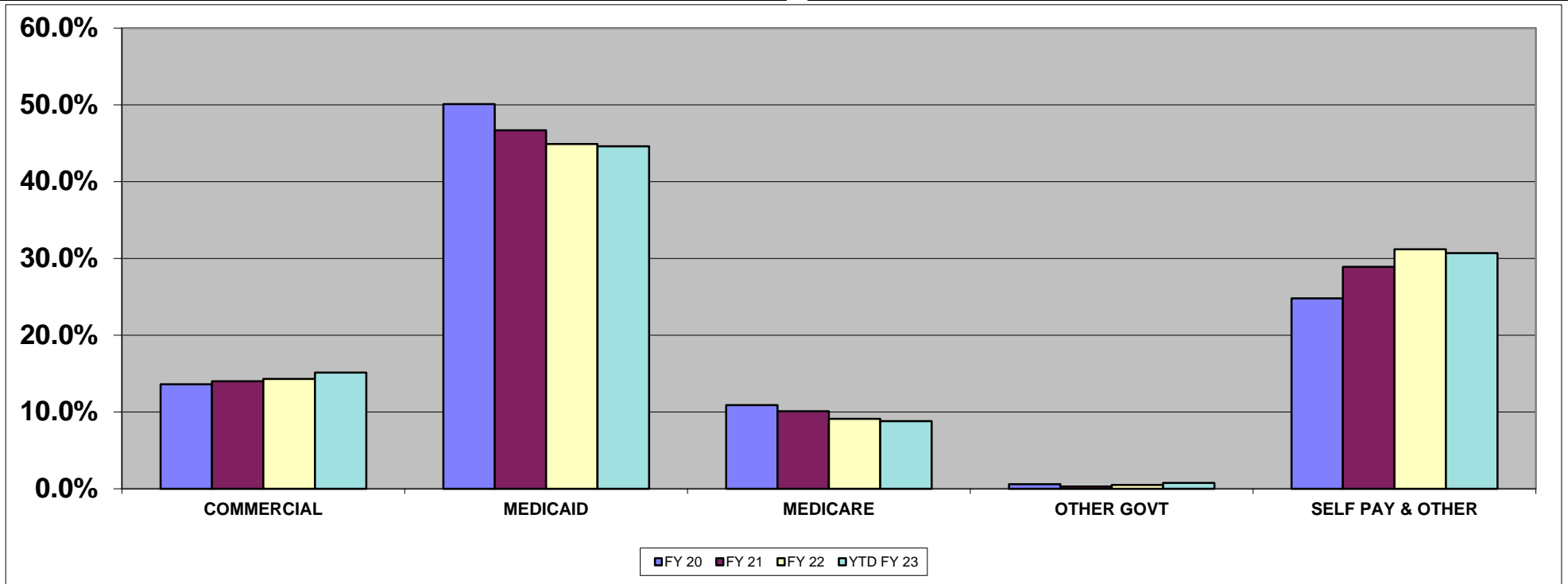
Payer	July	August	September	October	November	December
COMMERCIAL	15.3%	14.9%	15.3%	14.9%	15.2%	15.2%
MEDICAID	44.8%	45.4%	44.1%	44.8%	44.0%	44.4%
MEDICARE	9.1%	8.6%	9.0%	8.9%	8.7%	8.8%
OTHER GOVT	0.8%	0.7%	0.7%	0.8%	0.8%	0.9%
SELF PAY & OTHER	30.1%	30.4%	30.9%	30.6%	31.3%	30.7%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%



**Valleywise Health - Federally Qualified Health Centers
Comparison ALL FQHC Visits by Payor - 4 Year Trend**

Payer	FY 20	FY 21	FY 22	YTD FY 23
COMMERCIAL	39,635	41,517	45,520	23,809
MEDICAID	146,012	138,284	142,824	70,193
MEDICARE	31,709	29,857	28,805	13,889
OTHER GOVT	1,704	979	1,737	1,209
SELF PAY & OTHER	72,209	85,451	99,276	48,288
Total	291,269	296,088	318,162	157,388

Payer	FY 20	FY 21	FY 22	YTD FY 23
COMMERCIAL	13.6%	14.0%	14.3%	15.1%
MEDICAID	50.1%	46.7%	44.9%	44.6%
MEDICARE	10.9%	10.1%	9.1%	8.8%
OTHER GOVT	0.6%	0.3%	0.5%	0.8%
SELF PAY & OTHER	24.8%	28.9%	31.2%	30.7%
Total	100.0%	100.0%	100.0%	100.0%





Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 3.

FQHCs UDS Quality Metrics



FQHC UDS 2022 CYTD Data

Person(s) Reporting:
Crystal Garcia, VP of Specialty Services, Quality and Patient Safety

Report Prepared by: Amanda Jacobs, Quality Analyst

Reporting Month: February 2022

Valleywise Health FQHC UDS Quality Measure Report Results: December 2022 CYTD

UDS Clinical Quality Measure	CY 2020	Adjusted Quartile Ranking 2020**	CY 2021	Adjusted Quartile Ranking 2021**	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	HP 2030 Target Goal	Target Goal (2021 UDS National Average)	Prior Goal (2020 UDS National Average)	Intended Direction	Monthly Status (2021 UDS average)
Body Mass Index (BMI) Screening and Follow-Up Plan	61.39%	3	34.26%	4	29.45%	29.80%	30.42%	31.00%	31.05%	31.47%	32.09%	32.13%	38.29%	49.79%	58.55%	62.89%	N/A*	61.32%	65.72%	↑	
Cervical Cancer Screening	45.84%	3	49.77%	3	46.59%	48.17%	49.03%	49.95%	51.22%	51.47%	51.56%	52.25%	52.68%	52.92%	53.25%	53.49%	84.3%	52.95%	51.00%	↑	
Childhood Immunization Status (CIS)	52.28%	1	47.72%	2	36.23%	41.67%	45.28%	46.36%	9.34%	9.68%	9.18%	9.29%	9.19%	9.17%	9.37%	9.40%	N/A*	38.06%	40.42%	↑	⚠
Colorectal Cancer Screening	45.91%	2	50.85%	1	37.04%	39.44%	41.21%	43.16%	44.21%	45.22%	46.58%	47.65%	48.79%	49.74%	50.74%	51.29%	74.4%	41.93%	40.09%	↑	
Controlling High Blood Pressure	46.37%	4	47.76%	4	33.93%	39.72%	43.48%	46.91%	49.18%	51.35%	53.29%	53.89%	54.70%	54.08%	53.71%	53.69%	60.8%	60.15%	57.98%	↑	
Diabetes: Hemoglobin A1c Poor Control	35.20%	2	31.85%	2	70.50%	59.49%	50.22%	42.90%	38.95%	36.25%	34.25%	32.76%	31.90%	31.04%	30.68%	30.28%	11.6%	32.29%	35.60%	↓	
Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	78.54%	3	78.51%	3	80.00%	79.64%	78.74%	79.28%	79.20%	79.45%	78.85%	78.50%	78.25%	78.52%	77.87%	77.94%	N/A*	78.25%	78.80%	↑	
Screening for Clinical Depression and Follow-Up Plan if positive screen	39.54%	3	48.75%	4	35.68%	39.48%	42.05%	44.79%	44.59%	45.84%	47.65%	49.49%	50.93%	52.06%	53.48%	54.68%	13.5%	67.42%	64.21%	↑	
Tobacco Use: Screening and Cessation Intervention	85.46%	2	87.78%	2	83.00%	83.13%	84.75%	85.61%	86.40%	86.98%	87.61%	87.92%	88.18%	88.37%	88.68%	88.88%	N/A*	82.34%	83.43%	↑	
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	66.57%	2	78.09%	2	39.45%	44.94%	52.94%	58.32%	61.07%	64.23%	69.05%	72.09%	74.56%	76.68%	77.73%	78.43%	N/A*	68.72%	65.13%	↑	
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	70.86%	3	68.40%	4	72.67%	72.48%	72.72%	72.58%	76.84%	76.91%	76.69%	76.72%	76.64%	76.44%	76.42%	76.53%	N/A*	73.10%	71.92%	↑	
Breast Cancer Screening	55.53%	1	58.56%	1	52.41%	54.73%	55.90%	56.77%	57.49%	57.66%	58.23%	58.54%	58.86%	59.23%	59.40%	59.77%	80.5%	46.29%	45.34%	↑	
HIV Screening	47.75%	1	58.18%	1	63.55%	62.75%	62.82%	63.10%	63.41%	63.52%	63.43%	63.26%	63.12%	63.13%	63.25%	63.39%	N/A*	38.09%	32.29%	↑	

Monthly Status Key

Target Met or Exceeded	Indicator has met or is exceeding the target goal
Approaching Target	Indicator is within 10% of the target goal
Not in Target	Indicator is > 10% outside target goal
Improving	Indicator is NOT meeting the target goal but has shown consistent improvement (3 months or longer) *Consistent improvement identified as ≥ 5% over a 3 month lookback period
Alert Icon !	Significant CMS logic change/discrepancy impacting performance rates

*HP 2030 Objective definition not equivalent to UDS Quality of Care

UDS Measures Meeting Benchmark – Reporting Year 2022

Measure	UDS Benchmark	Nov 2022 CYTD	CY 2022 Year End
Body Mass Index (BMI) Screening and Follow-Up Plan	> 61.32%	58.55%	64.40%
Breast Cancer Screening	> 46.29%	59.40%	59.86%
Cervical Cancer Screening	> 52.95%	53.25%	53.61%
Colorectal Cancer Screening	> 41.93%	50.74%	51.33%
Diabetes: HbA1c Poor Control	< 32.29%	30.68%	30.28%
HIV Screening	> 38.09%	63.25%	63.40%
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	> 73.10%	76.42%	74.33%
Weight Assessment & Counseling for Nutrition & Physical Activity for Children & Adolescents	> 68.72%	77.73%	78.43%
Tobacco Use: Screening and Cessation Intervention	> 82.34%	88.68%	88.88%

- Metrics on this page continue to meet/exceed national averages

UDS Measures Not Meeting Benchmark - Reporting Year 2022

Measure	UDS Benchmark	Nov 2022 CYTD	CY 2022 Year End
Controlling High Blood Pressure	> 60.15%	53.71%	53.69%
Screening for Clinical Depression and Follow-Up Plan if Positive Screen	> 67.42%	53.48%	54.68%
Ischemic Vascular Diseases (IVD): Use of Aspirin or Another Antithrombotic	> 78.25%	77.87%	76.67%

- Metrics on this page fall below national averages

Note – No current action plan for IVD metric

UDS Measure with Logic Error Reporting Year 2022



Childhood Immunization Status (CIS) Random Chart Review			
	Total Charts in Random Sample	30	
Not Met Comparison	Number NOT MET per Epic Report	24	
	Number NOT MET per Manual Review	12	
Met Comparison	Number MET per Epic Report	6	
	Number MET per Manual Review	18	
<div> <div>MET Breakdown:</div> <div>40% (12 of 30) of Epic report sample were false negatives</div> </div>			
Summary of Manual Review "MET" Charts	Number charts with CMS logic error noted causing fall-out (HEP B DAY 0) "Corrected from Not Met to Met"	12	18
	Number of charts that Met (error did not impact)	6	
	3 doses Hep B (not day 0)		
Performance Based on 30 Chart Manual Review	Numerator	18	60.00%
	Denominator	30	
	Current UDS Benchmark		38.06%

Measure	UDS Benchmark
Childhood Immunizations	> 38.06%
Nov 2022 CYTD	CY 2022 Year End
9.37%	9.40%

Historical Note

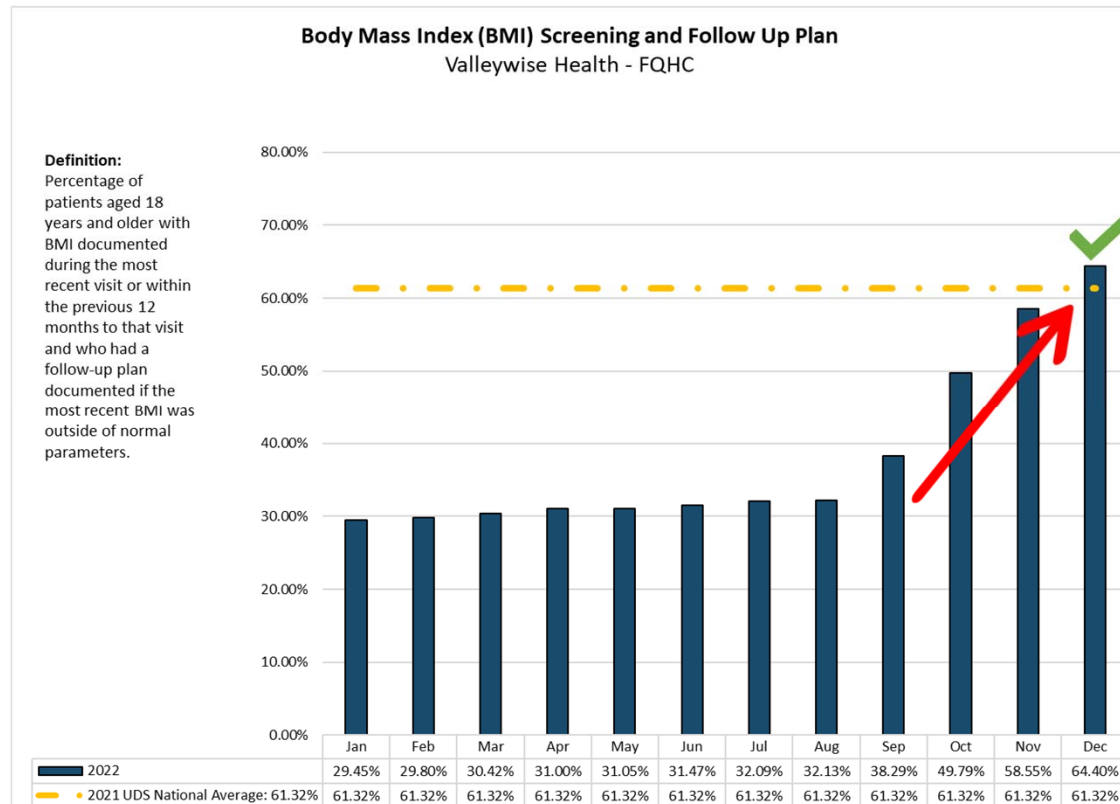
This UDS measure had a significant CMS logic change/discrepancy in May 2022 impacting performance rates –

The fallout is not truly related to our performance.

Logic flaw has eliminated counting vaccines on day of birth. This goes against standard best practice of Hepatitis B vaccine which is frequently given shortly after birth.

Measure(s) Trending – Completed Action Items/Plan

Measure	UDS Benchmark	November 2022 CYTD	2022 CYTD Year End
Body Mass Index (BMI) Screening and Follow-Up Plan	> 61.32%	58.55%	64.40%



Action Items / Barriers:

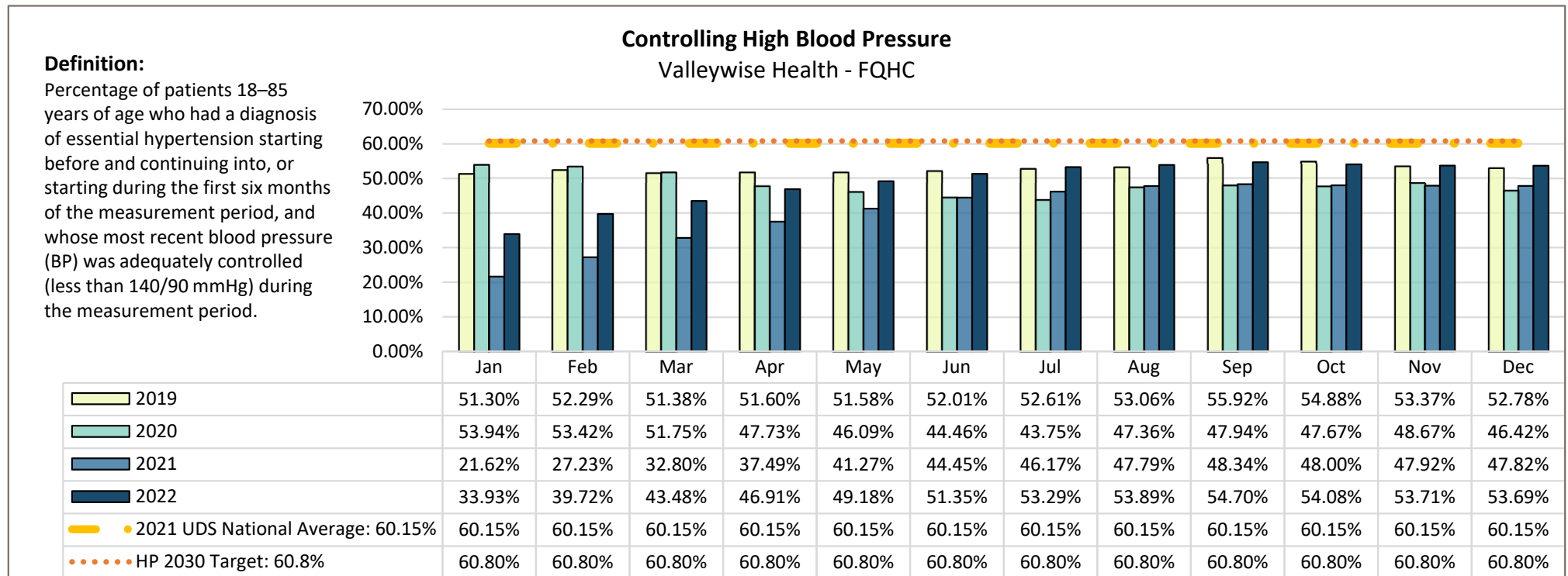
- The BMI Action item to address inconsistent follow up plan has been in place since September 21, 2022.
- Significant rapid monthly improvement noted since launch of AVS 1 page education note when a patient screens overweight.
- This measure has entered a maintenance phase. The UDS task force group will continue to track and trend for 2023.

Barriers:

- None

Measures Not meeting Benchmark

Measure	UDS Benchmark	November 2022 CYTD	2022 CYTD Year End
Controlling High Blood Pressure	> 60.15%	53.71%	53.69%



Measure Analysis and Actions

Controlling High Blood Pressure

Analysis:

2022-year end performance reflects the highest rate since year 2019.

Performance remains around 6% below the national average for this metric.



Barrier:

This is a very multilayered metric that can rapidly change visit to visit. It is highly dependent on patient compliance in addition to provider/staff interventions. Approaches to improving this measure have therefore focused on provider, staff, and patient pieces as all must work cohesively for improvement.

Action Items :

- **Action:** BPA pop-up under review that will work together with BP door Kanban signage project. BPA targets the Medical Assistant with a reminder to complete the BP re-check when outside UDS parameters.
- **Action:** Audit form to be developed for the intention of CRLs to complete random competency and compliance checks with Medical Assistants. Ex: was BP checked appropriately, re-checked, etc.
- **Action:** Provider education to highlight importance of this metric at Ambulatory DYAD and DMG Group Meeting

Measures Not meeting Benchmark

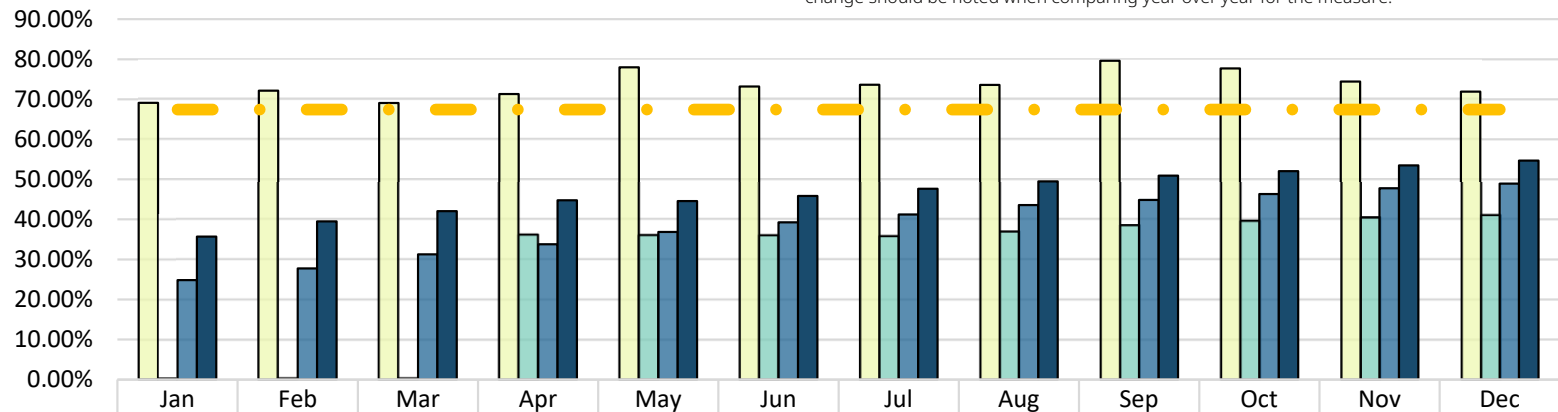
Measure	UDS Benchmark	November 2022 CYTD	2022 CYTD Year End
Screening for Depression and Follow-Up Plan if Positive Screen	> 67.42%	53.48%	54.68%

Definition:

Percentage of patients aged 12 years and older screened for depression on the date of the visit or 14 days prior to the visit using an age-appropriate standardized depression screening tool and, if screening was positive, had a follow-up plan documented on the date of the visit

Screening for Depression and Follow-Up Plan Valleywise Health - FQHC

*Historical: The Ambulatory Build Team made a change to the PHQ2/PHQ9 screening tool in late 2019; the row "refused" was not mapped due to an EPIC Foundation issue. This impacted the total number of exclusions that should have been removed from the metric denominator. The new row for "refused" was mapped and put into production end March of 2021. This change should be noted when comparing year over year for the measure.



2019	69.11%	72.15%	69.07%	71.30%	78.00%	73.17%	73.62%	73.60%	79.64%	77.69%	74.42%	71.92%
2020	0.27%	0.36%	0.42%	36.10%	36.01%	35.94%	35.70%	36.84%	38.47%	39.55%	40.36%	40.92%
2021	24.84%	27.75%	31.27%	33.79%	36.85%	39.26%	41.20%	43.57%	44.86%	46.31%	47.77%	48.91%
2022	35.68%	39.48%	42.05%	44.79%	44.59%	45.84%	47.65%	49.49%	50.93%	52.06%	53.48%	54.68%
2021 UDS National Average: 67.42%	67.42%	67.42%	67.42%	67.42%	67.42%	67.42%	67.42%	67.42%	67.42%	67.42%	67.42%	67.42%

Measure Analysis and Actions

Screening for Depression and Follow-Up Plan if Positive Screen

Analysis:

Data is demonstrating that clinics with the highest performance rates on depression screening are those that have adopted the standardized approach.

Action Items / Barriers:

- **Action:** Complete SBAR for standardized depression screening process – confirm clinic adoption of process (screen every visit for 18+ and at all child wellness visits)

Patient arrives and as part of their vitals the "Behavioral Health Vital" (PHQ2/9) should be completed

- 1) Staff verbally administers the PHQ2/9 or gives screening tool to them to fill out.
- 2) Staff enters results in EPIC PHQ2/9 flowsheet.
- 3) Staff relays positive results of 3 or higher to the provider for follow-up (e.g. verbally, document in chief complaint).

Provider meets with patient and reviews PHQ2/9 results

Based on the results the provider will use their clinical judgment to discuss and suggest the following:

- Scores of 3-9 offer behavioral health services (e.g. REF251 IBH)* and monitor in future visits.
- Scores of 10-14 refer completed (e.g. REF251 IBH)* or prescribing depression medication to treat mental health symptoms
- Scores of 15-27 refer to IBH (REF251)*, prescribing depression medication to treat mental health symptoms. If needed, follow the behavioral health crisis protocol (4705 MT).

**DRAFT
Process**





Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 4.

FQHCs Patient Safety Report



Federally Qualified Health Center (FQHC)

Patient Safety July 2022 – December 2022

Presented by: Crystal Garcia
VP of Specialty Services, Quality and Patient Safety

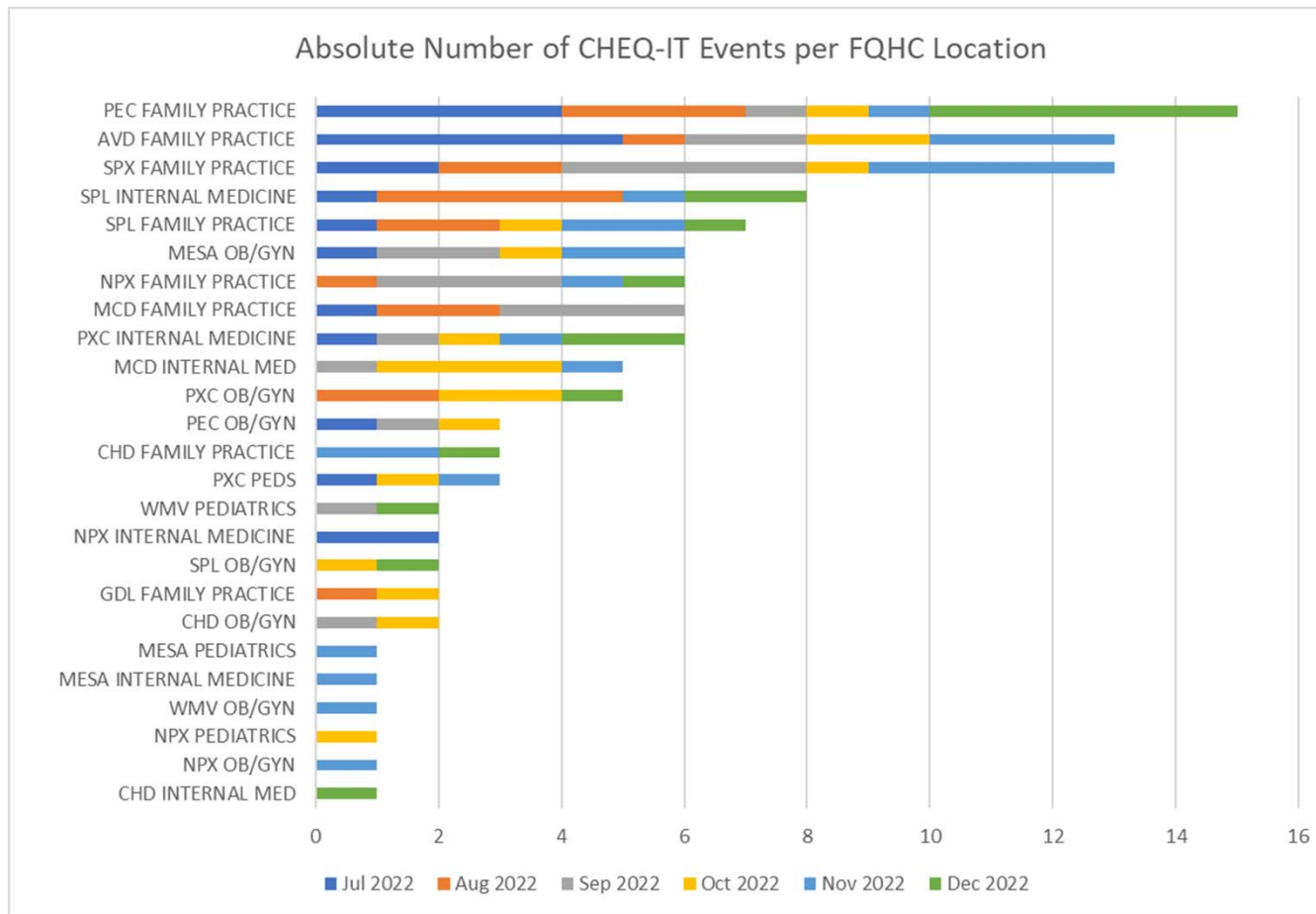
FQHC: Service Lines

- Family Practice
- Internal Medicine
- OB/GYN
- Pediatrics



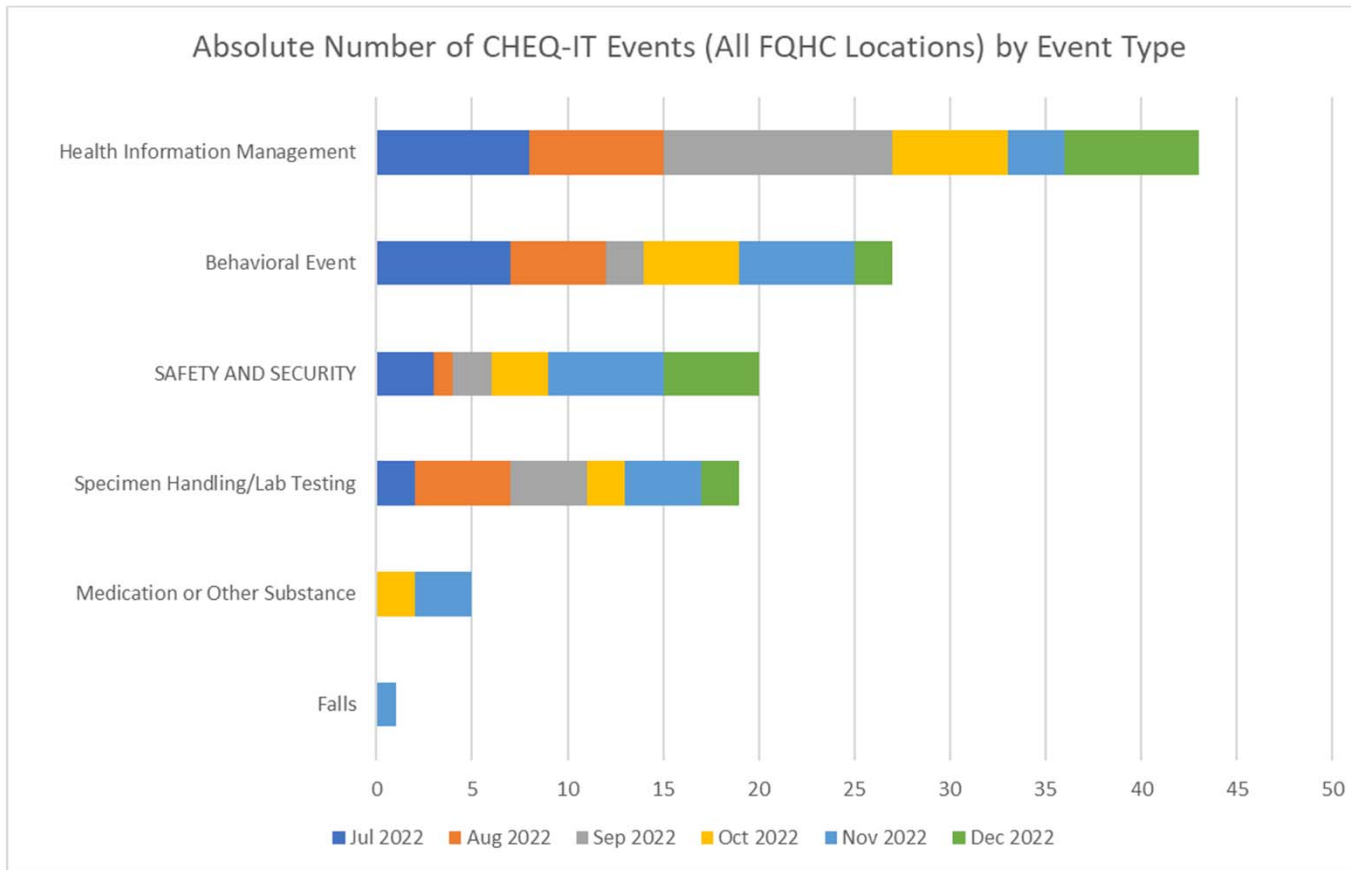
Currently, not all 'Service Lines' are available at all Valleywise FQHCs

CHEQ-IT Events by Location



- The highest number of occurrences reported are in Peoria Family Practice, Avondale Family Practice, and South Phoenix/Laveen Family Practice.
- Thank you for reporting!

CHEQ-IT Events by Type



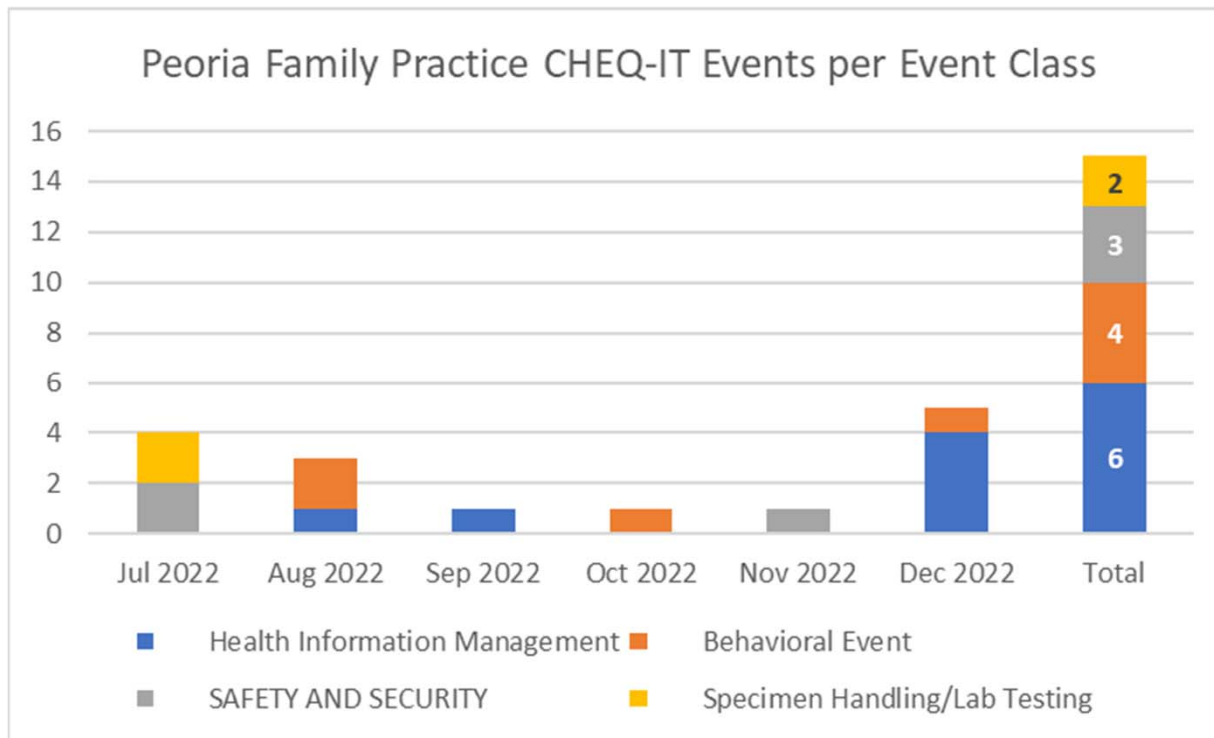
The most frequently reported types of events are Health Information Management, Behavioral Events, Safety and Security, followed by Specimen handling.

FQHC



PEC, NPX, AVD and SPX Family Practice Events

Peoria Family Practice:



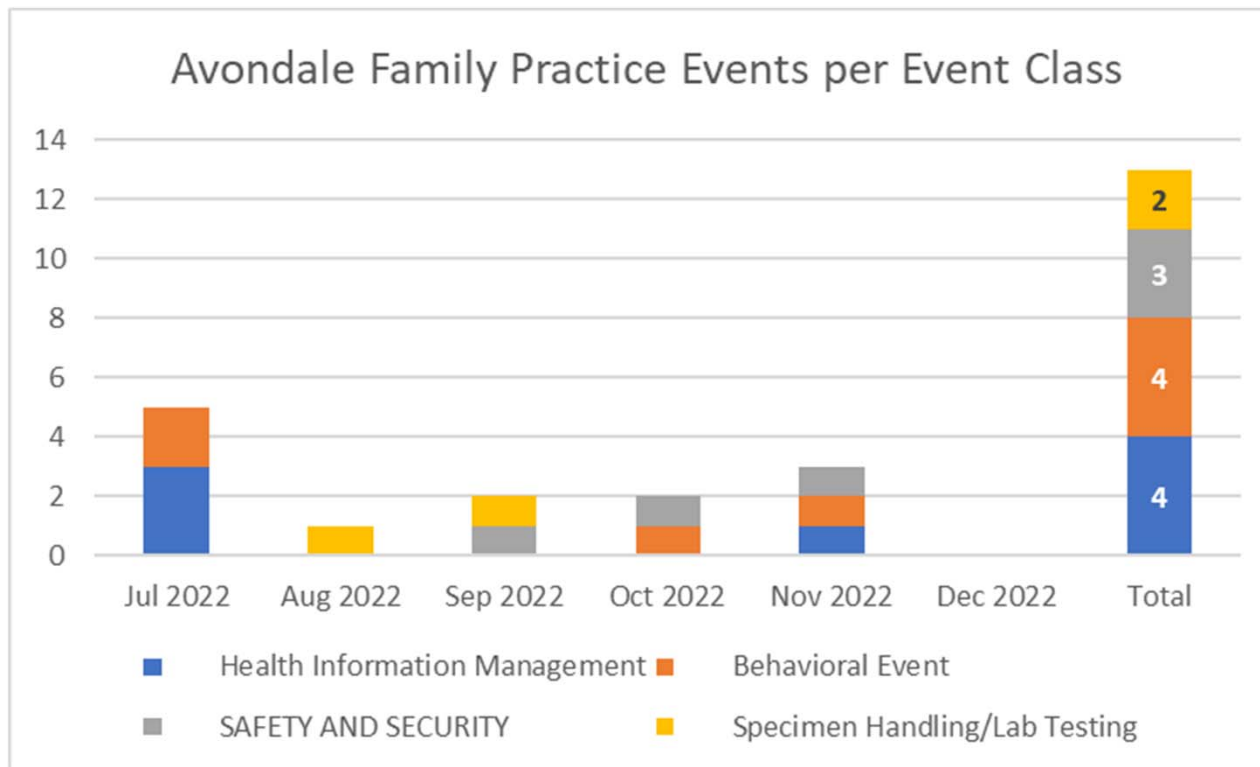
Health Information Management: 3- patient given wrong patient lab requisition; 3- Incomplete Consents

Behavioral Events: 2- Patient declined medical (triage) advice; 2- Anxious/agitated patients, care appropriate

Safety & Security: 3- Code White events

Specimen Handling: 2- Improper transport (multiple patient samples in 1 bag).

Avondale Family Practice:



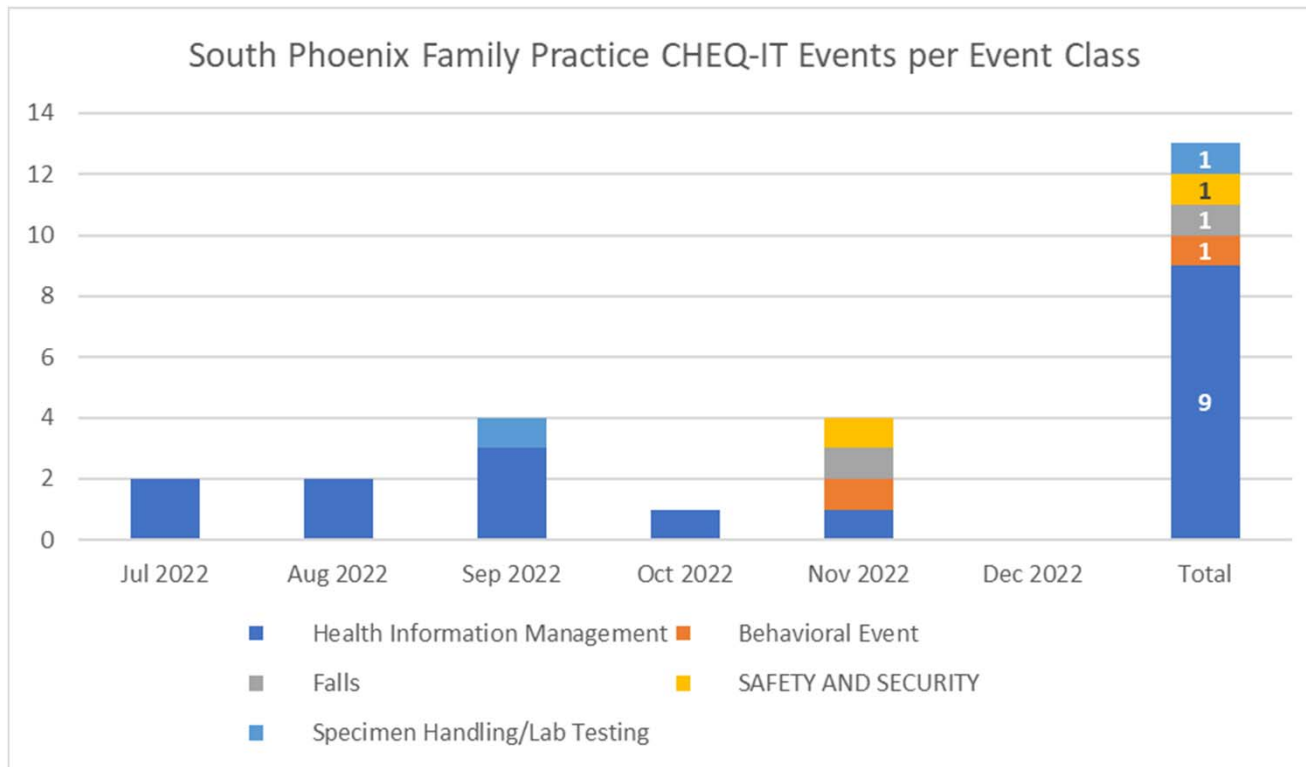
Health Information Management: 3- Incorrect Patient Chart; 1- Incorrect Patient Label

Behavioral Event: 3- Against Medical (Triage) Advice; 1- 911 assistance

Safety and Security: 3- Code White

Specimen Handling: 1- Unlabeled specimen; 1- Specimen mistakenly discarded

South Phoenix Family Practice:



Health Information Management: 9- Incomplete Consents

Behavioral Event: 1- Against Medical (Triage) Advice

Fall: 1- No injury

Safety & Security: 1-Code White

Specimen Handling: 1- Incorrect lid closure / specimen fluid spill.

FQHC's: What's Happening?

- A review of notable occurrences is now included in the daily leadership huddle.
- Incomplete consents are addressed through the peer review process.
- Ambulatory leaders created Action Plans in accordance with the Culture of Patient Safety Survey results, emphasizing Communication Openness, Organizational Learning, and Hospital Management Support for Patient Safety. Action plans are approximately 73% completed.

FQHC's: What's Happening?

- Provide overview during monthly team meetings to all direct staff on errors to educate and create awareness.
- Communicate with staff on changes in processes in the clinic and at the monthly staff meeting elicit feedback from staff on the implementation of new process went and determine if there needs to be changes based upon discussion.
- Communicate errors with staff at huddle and monthly staff meeting to make staff feel their errors are not held against them and that we learn from them.



QUESTIONS?

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Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 5.

FQHCs NRC
Patient Satisfaction Data



Service Excellence Committee Report: FQHCs

Reporting: Crystal Garcia, VP of Specialty
Services, Quality and Patient Safety

Report Prepared by: Samantha Hapitas, RN
Quality Analyst

FQHC's Combined: Survey Participation Details

Participation

☆ Favorite

📧 Subscribe

📄 Export

Dec 01, 2022 - Dec 31, 2022

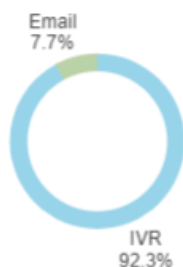
RESPONSE RATE: **27.5%**



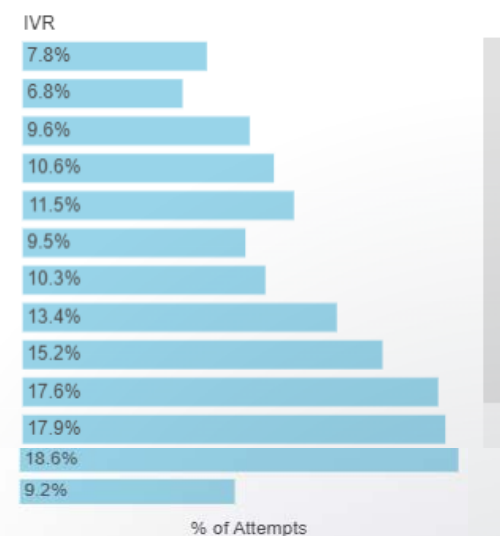
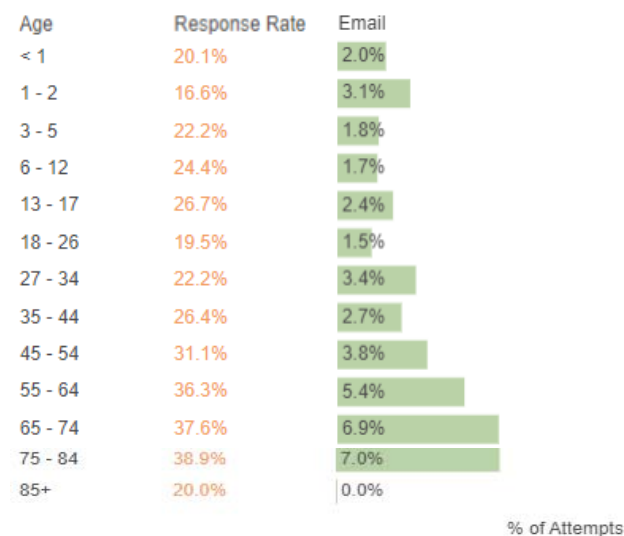
MODE PERFORMANCE



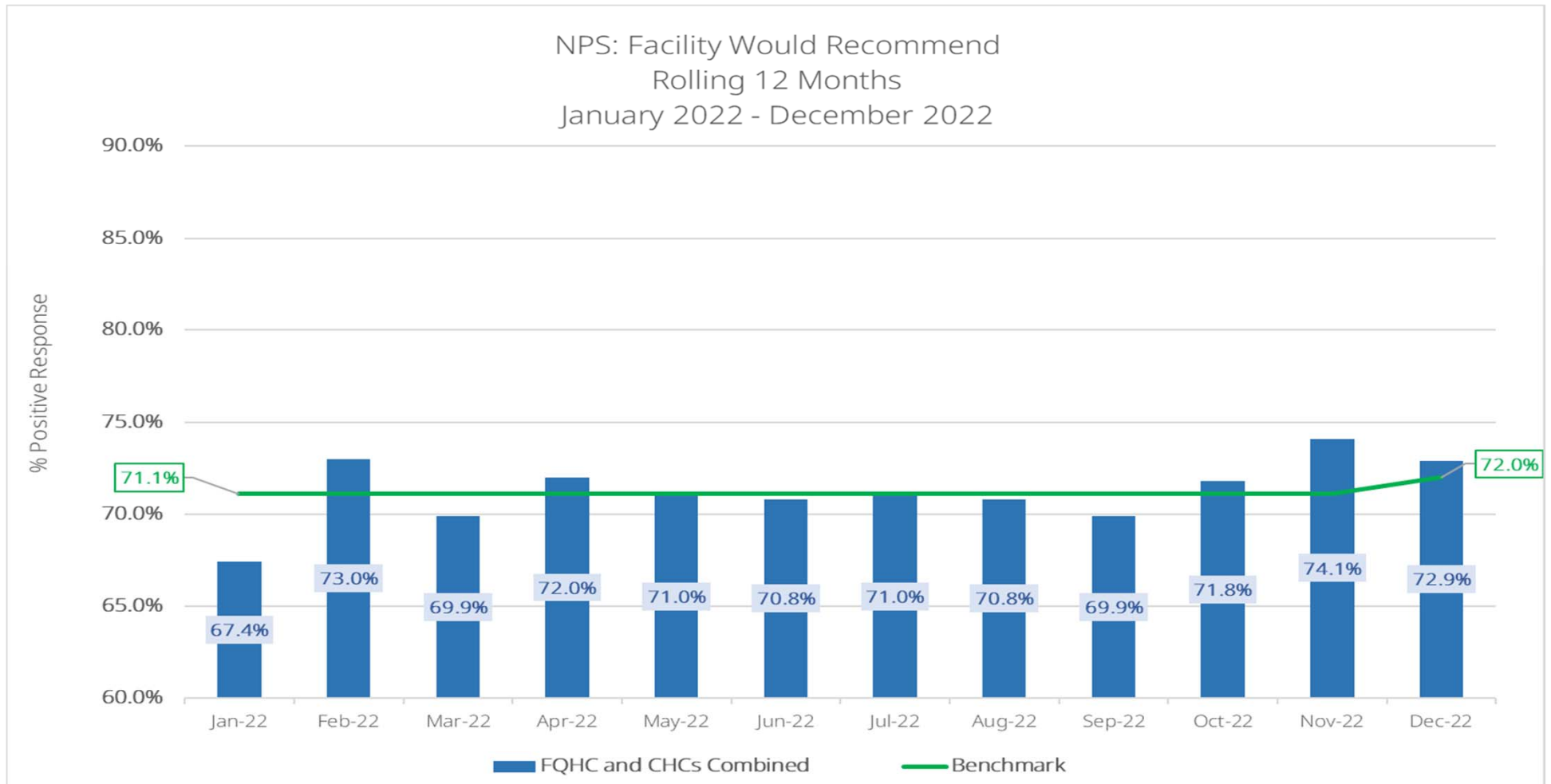
% OF TOTAL RESPONSES



AGE GROUP BREAKDOWN

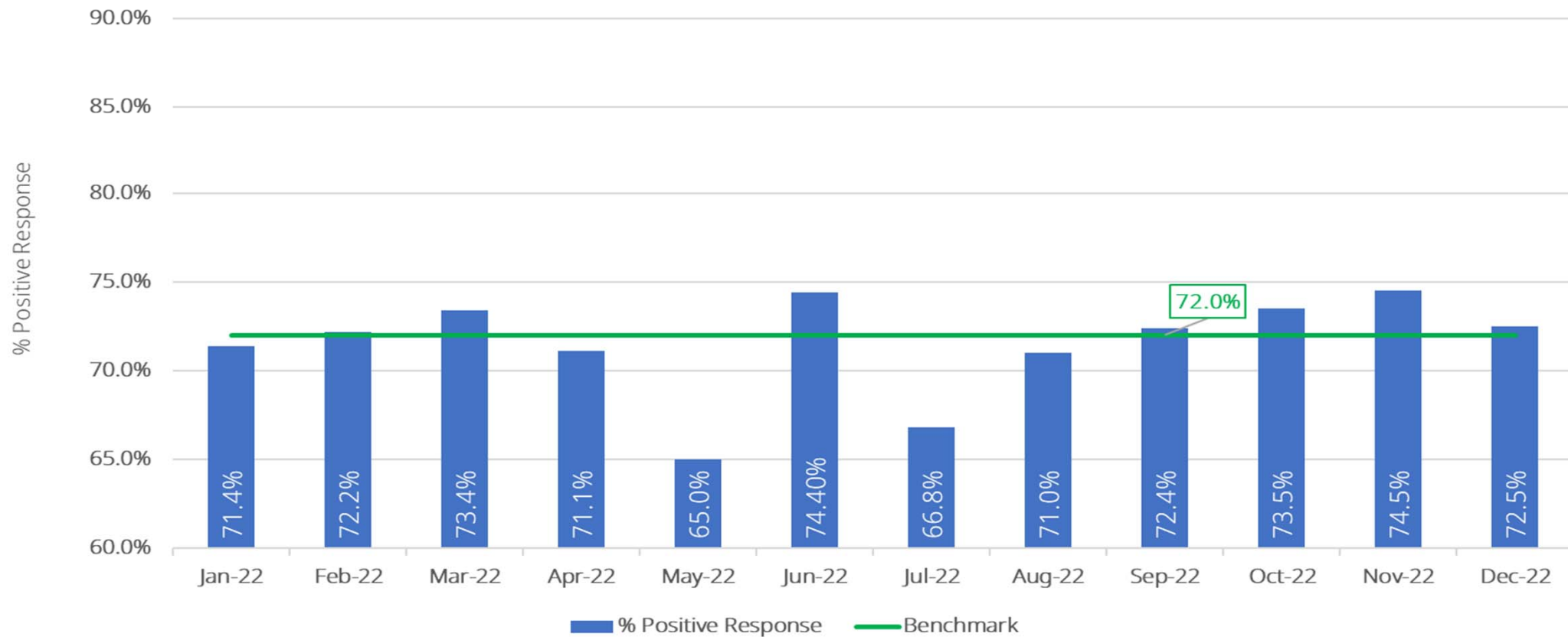


Overview of Combined Score - Phoenix CHC, Peoria CHC, and FQHC

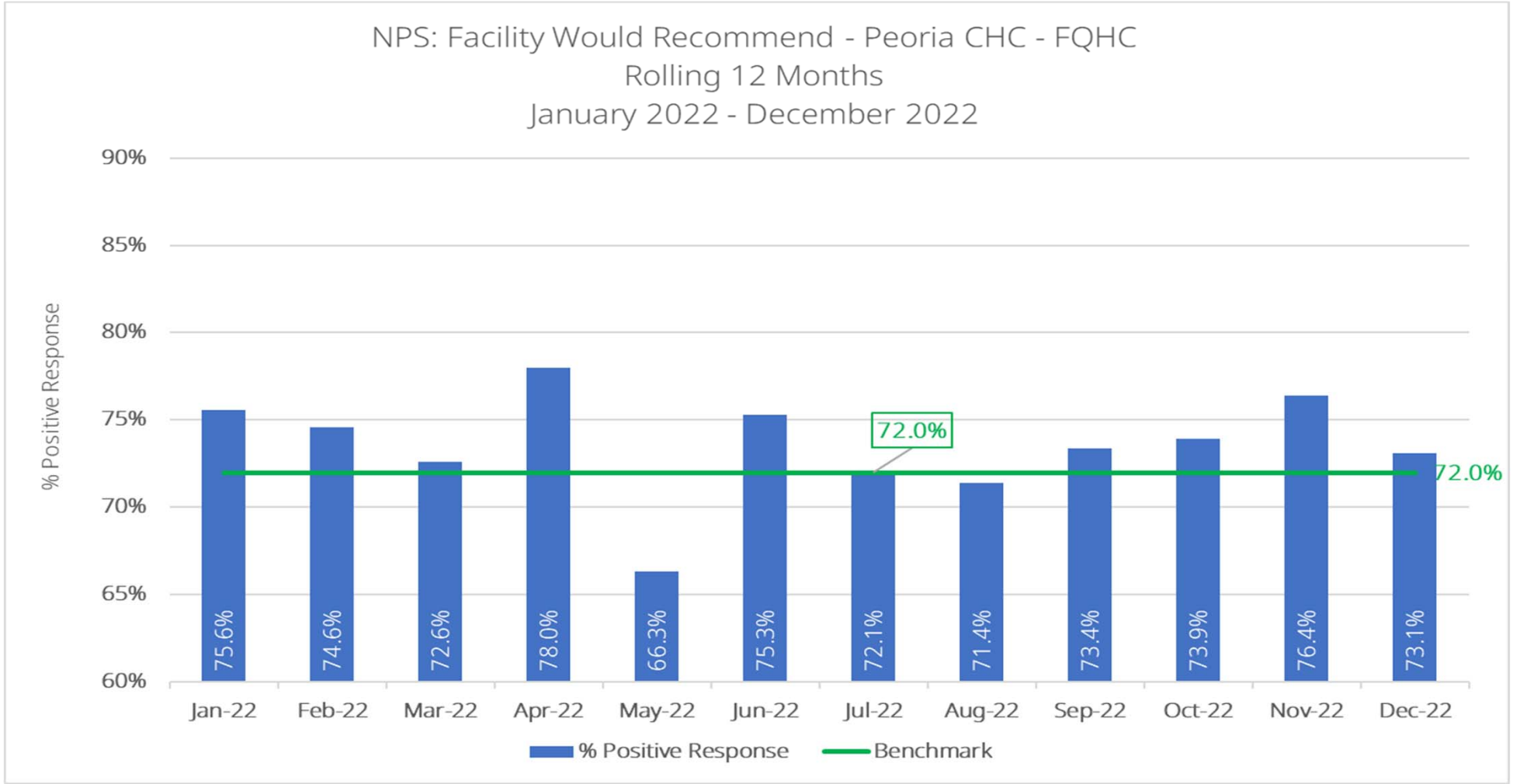


FQHC: Phoenix CHC – Rolling Year

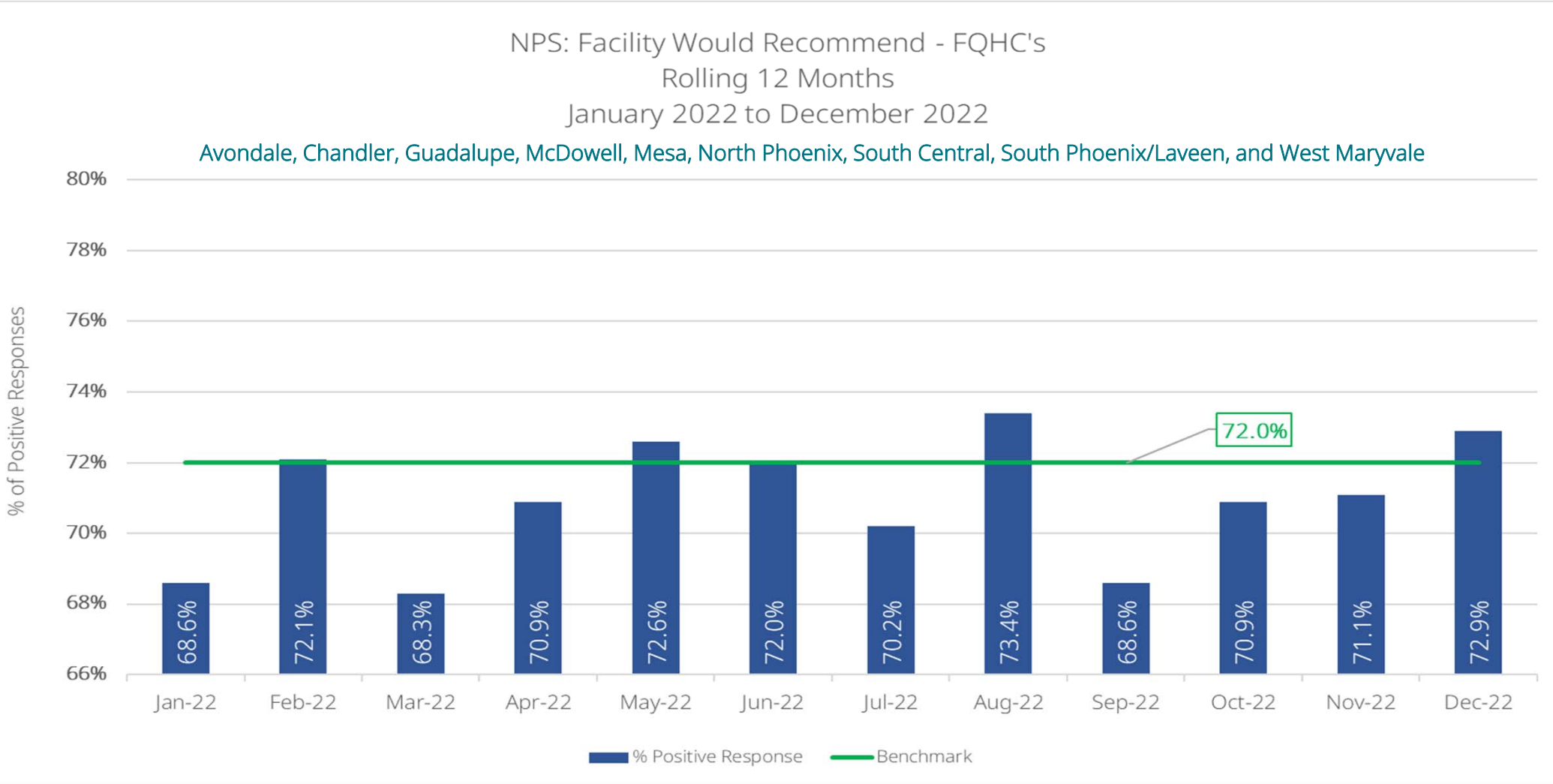
NPS: Facility Would Recommend - Phoenix CHC - FQHC
Rolling 12 Months
January 2022 - December 2022



FQHC: Peoria CHC – Rolling Year



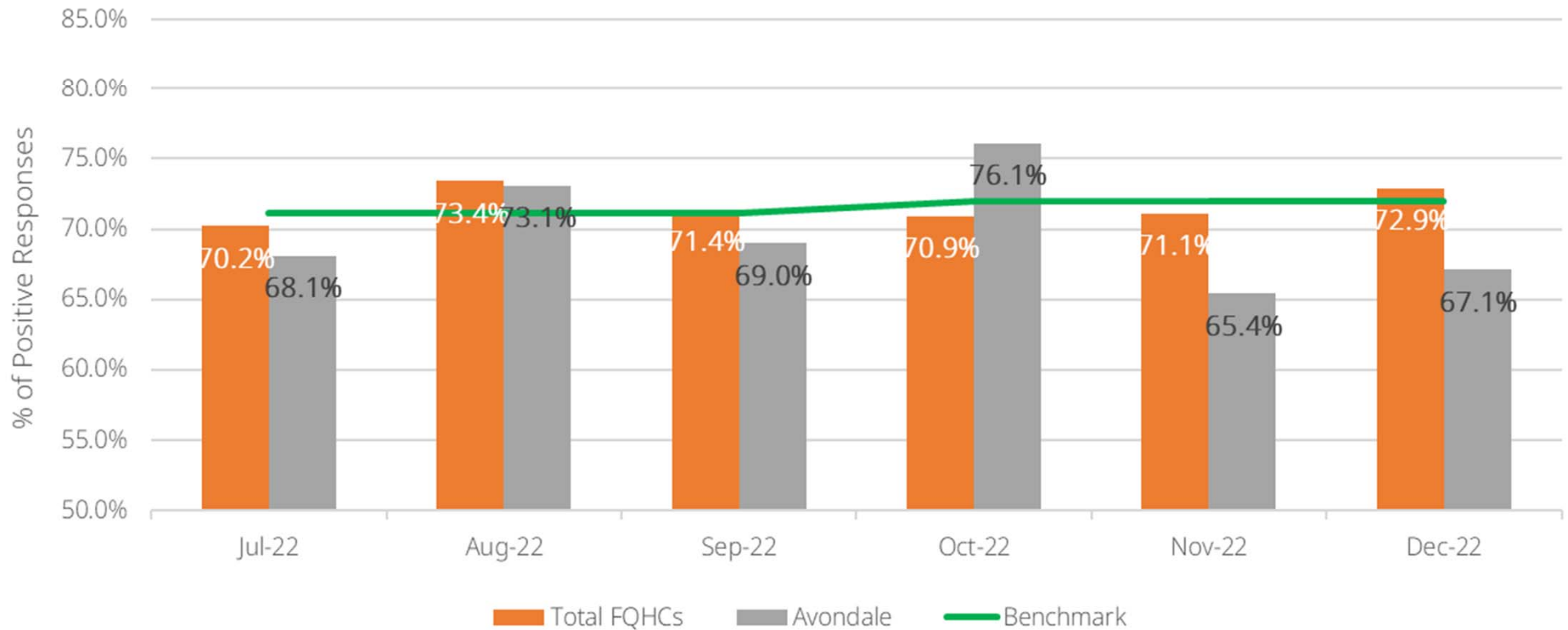
FQHCs: NPS – Facility Would Recommend - Rolling Year



FQHC: Avondale – Past 6 Months

FQHCs: NPS-Facility Would Recommend
Avondale
July 2022 - December 2022

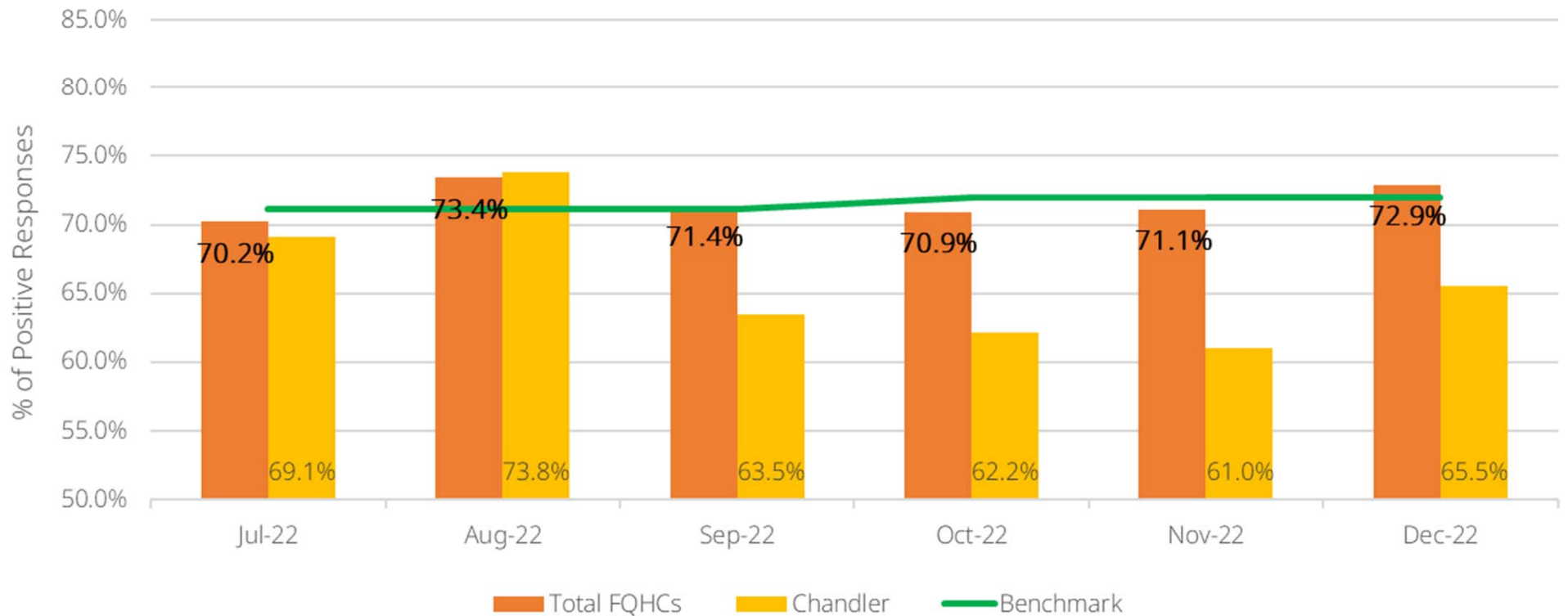
NPS – December = 67.1%



FQHC: Chandler – Past 6 Months

FQHCs: NPS-Facility Would Recommend
Chandler
July 2022 - December 2022

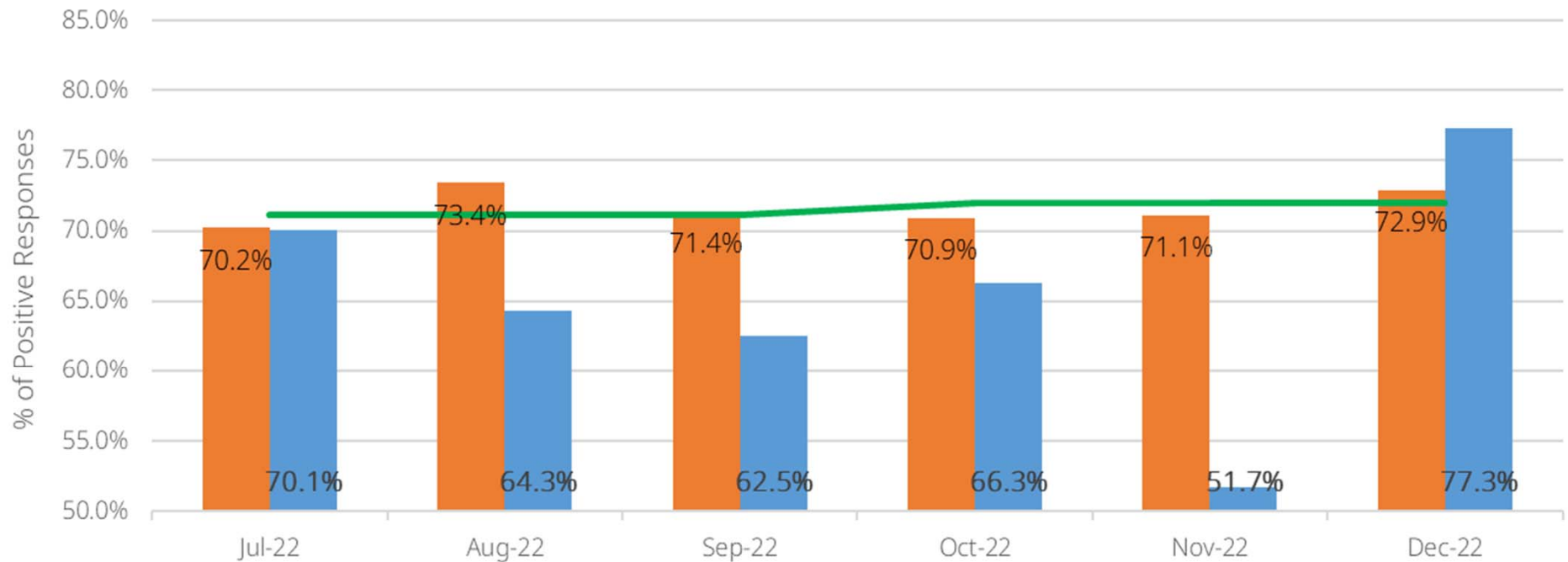
NPS – December = 65.5%



FQHC: Guadalupe – Past 6 Months

FQHCs: NPS-Facility Would Recommend
Guadalupe
July 2022 - December 2022

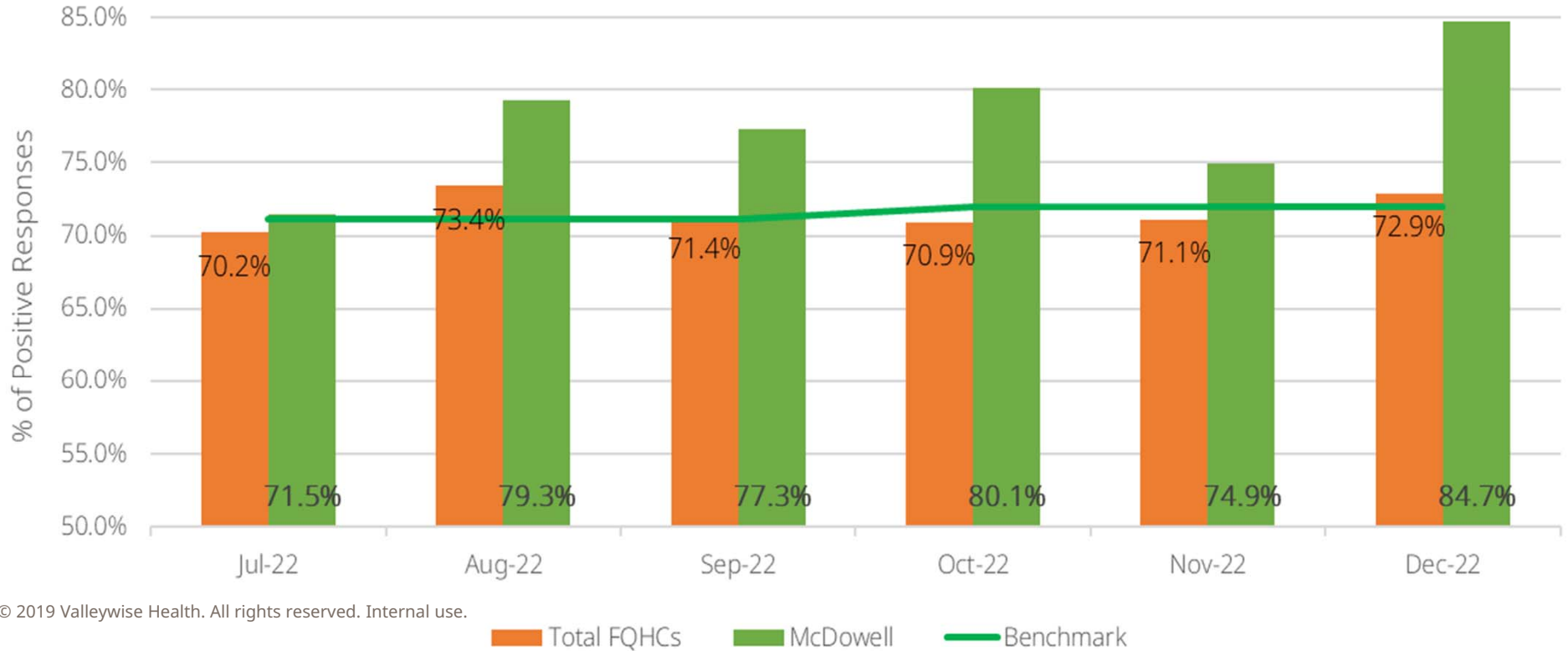
NPS – December = 77.3%



FQHC: McDowell – Past 6 Months

FQHCs: NPS-Facility Would Recommend
McDowell
July 2022 - December 2022

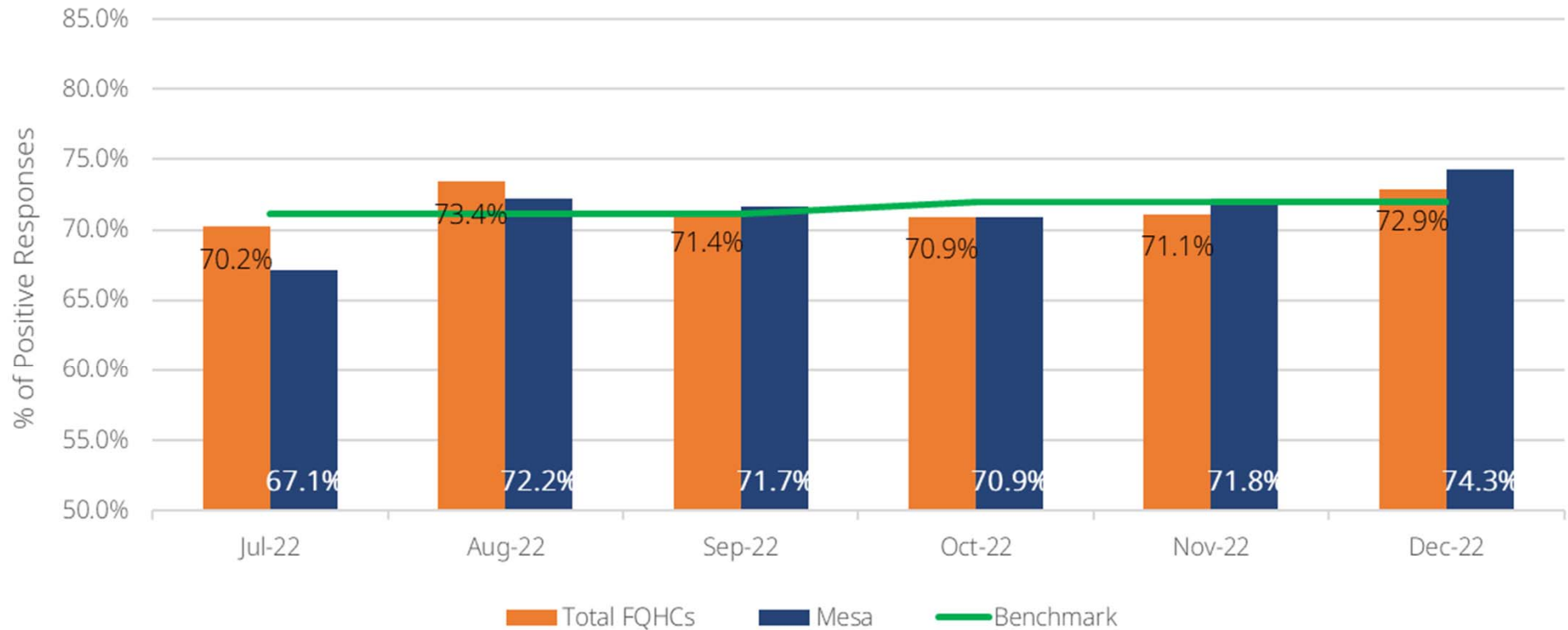
NPS – December = 84.7%



FQHC: Mesa – Past 6 Months

FQHCs: NPS-Facility Would Recommend
Mesa
July 2022 - December 2022

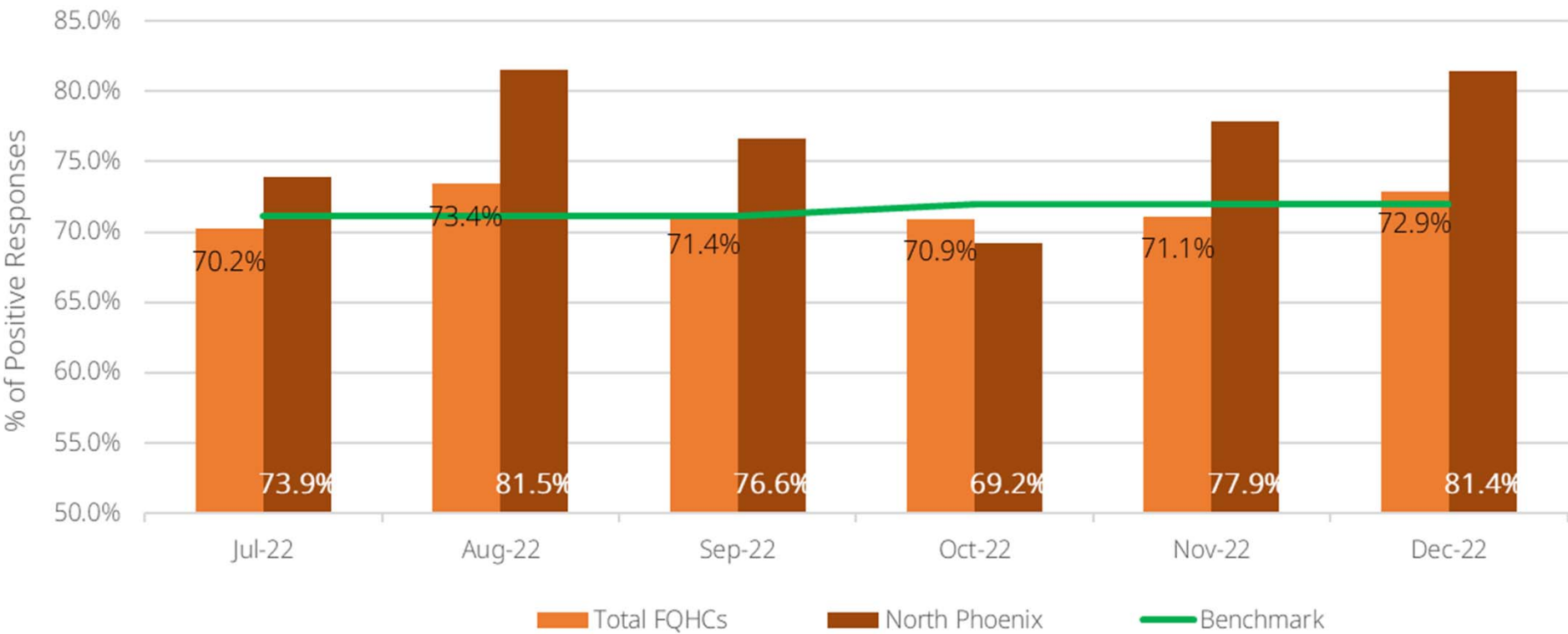
NPS – December = 74.3%



FQHC: North Phoenix – Past 6 Months

FQHCs: NPS-Facility Would Recommend
North Phoenix
July 2022 - December 2022

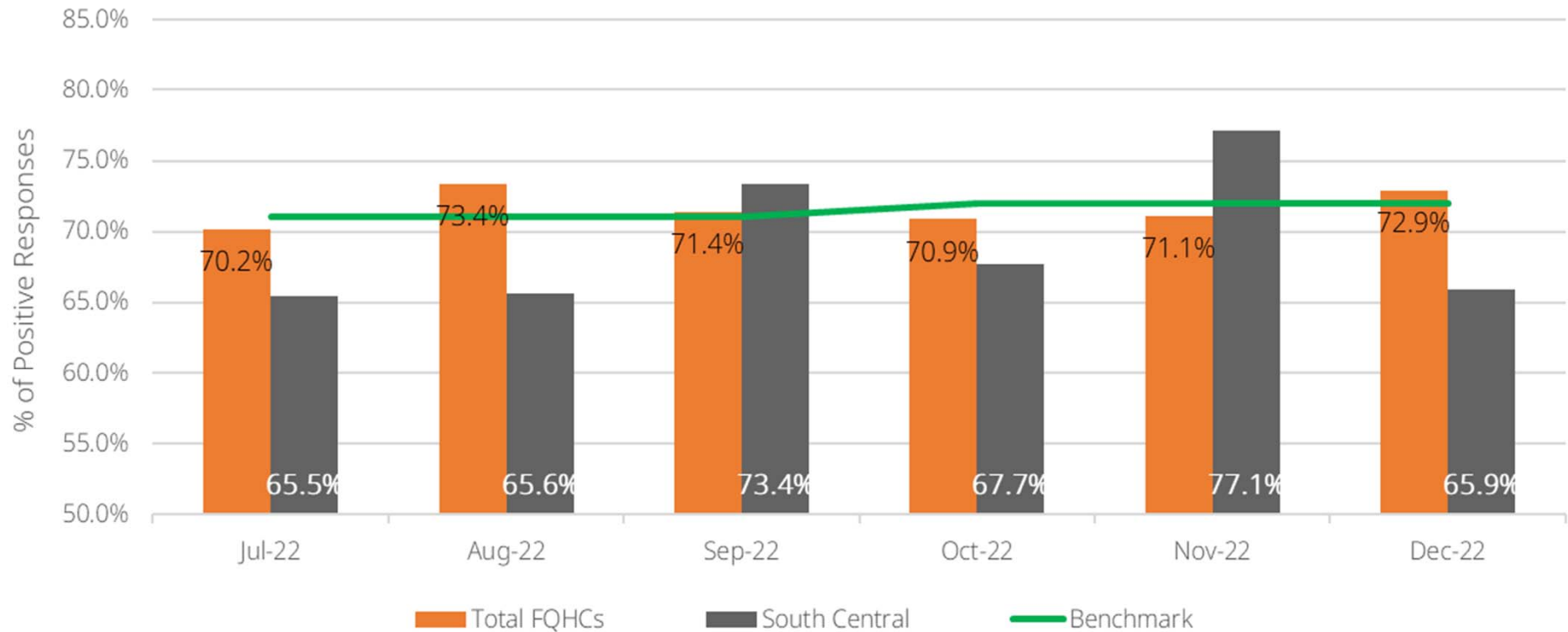
NPS – December = 81.4%



FQHC: South Central – Past 6 Months

FQHCs: NPS-Facility Would Recommend
South Central
July 2022 - December 2022

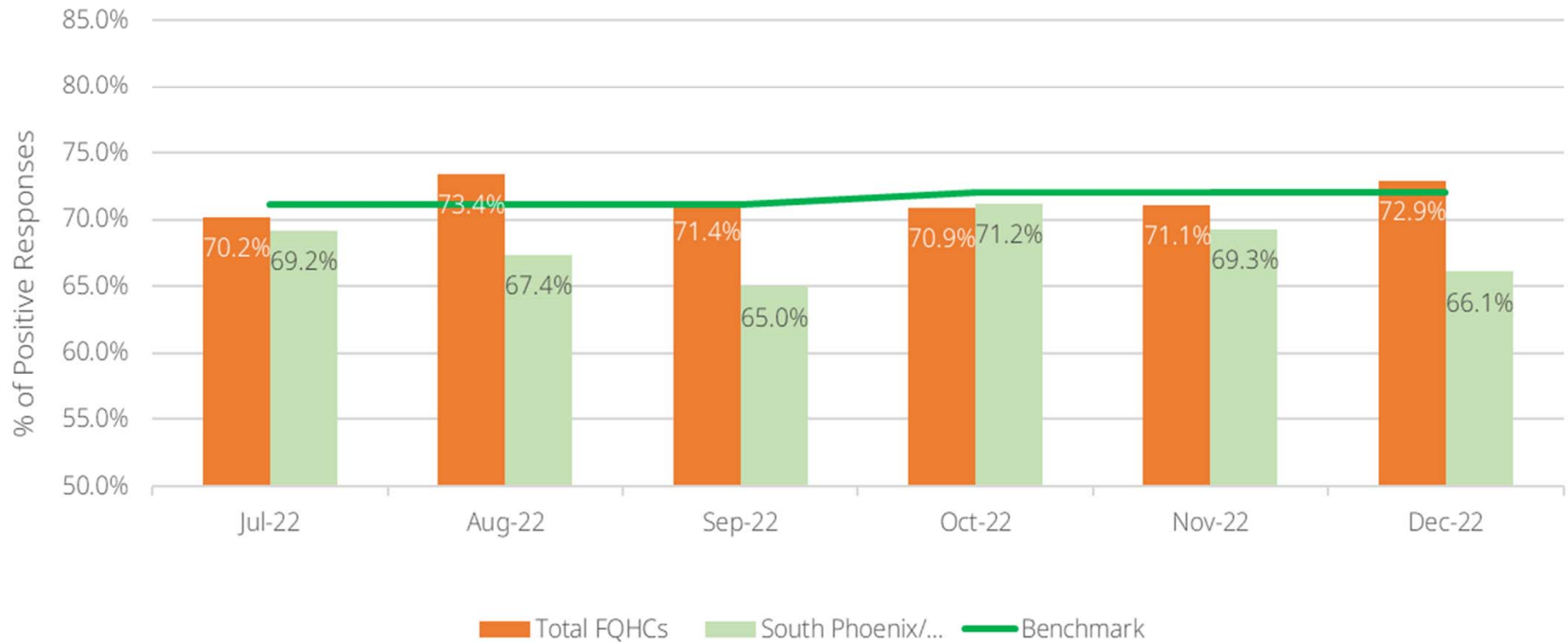
NPS – December = 65.9%



FQHC: South Phoenix/ Laveen – Past 6 Months

FQHCs: NPS-Facility Would Recommend
South Phoenix / Laveen
July 2022 - December 2022

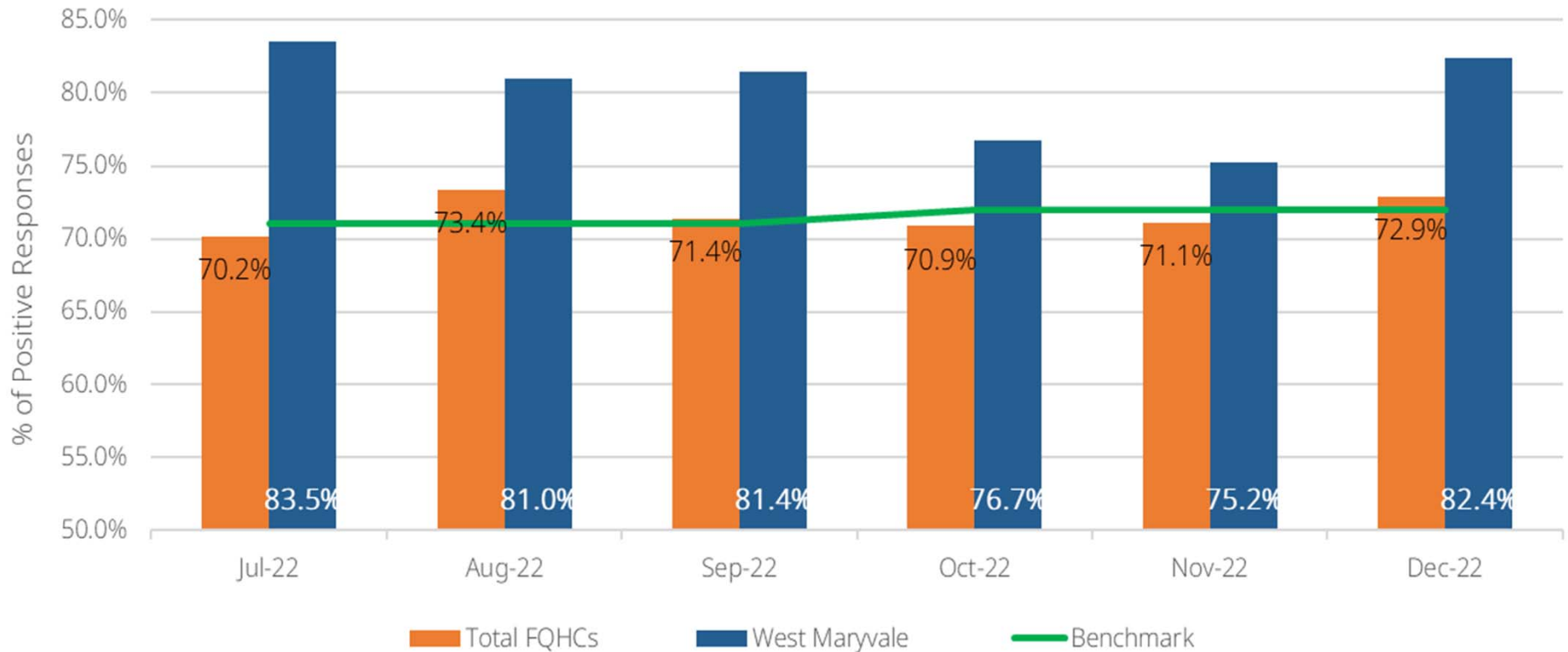
NPS – December = 66.1 %



FQHC: West Maryvale – Past 6 Months

FQHCs: NPS-Facility Would Recommend
West Maryvale
July 2022 - December 2022

NPS – December = 82.4%



Peoria CHC - FQHC

10 - This was my first time being at the facility and it was beautiful. Everyone was friendly and helpful.

10 - As a way of helping, please, yes, I am very happy because they treated me very well, the doctors are very good people, the one who treats (unreadable) also helped me a lot, I am happy and I thank you because for this plan you have for help people to have them well, thank you.

7 - The check in process was not good at all. Pre-registering both online and making the appointment and registering at that time and giving all my information, it was not in the system when I got there and I thought that that's fairly inexcusable and needs to be greatly improved

5 - I was contacted the week prior and asked to come in at an appt time 30 minutes later. Then I got text messages for my original time. When I called to verify the receptionist was curt/short with me on the phone about it. The elevator had no lights working inside, no sign to warn you either so the doors close and it's pitch black. Receptionist said she already reported it, but why not warn people as they enter, since you are sitting right there?

Phoenix CHC - FQHC

10 - Doctor allowed me to talk and she listened and she helped me out. My voice is still gone, but I feel a lot better than I did in 2 days. Thank you so much, I appreciate it. I forgot her name, because you all mentioned that at the beginning.

10 - The doctor, the cardiologist, she is amazing. She is awesome. She helped through the whole visit. She was so friendly, she was nice, and she answered all the questions that we have. She is amazing.

8 - Your time is very bad. We had to wait almost two and a half hour before we've been seen. From a 9:30 appointment. We haven't been seen 'til like quarter to 12, and that is really ridiculous, to have someone waiting that long. So, you need to improve on that

8 - Well, they don't really pay attention to you, they don't listen to you, and that should be very important, and they rush you through everything and they don't explain. Thank you.

5 - It took almost an hour to see the doctor. Need to improve on that.

AVONDALE

10 - the new doctor for me and he was very professional. He is doing extremely different than what other doctors in the past had done and I really appreciate his knowledge and what he is doing, digging deeper into what other doctors haven't. I've been having a lot of medical issues since April of this year, and he's determined to get to the bottom of what's going on with my health and I really do appreciate that.

6 - The staff members were friendly and the provider did a great job with my son. However, I wasn't really sure what to do in case my son didn't get better, but I had some questions following up with that when he wasn't really feeling better... wasn't sure what to do.

5 - Your triage nurse actually asked me if I had showered in the last 90 days.

CHANDLER

10 - I really like how they treat me there (unreadable) very very friendly and (unreadable) answer well, everyone is very kind, everyone is very kind, both the secretary with the doctor and the nurses, they are very kind and I am very happy.

10 - The doctor gave me a very good service and she behaved very well, she was aware of my health (unreadable), some things took time and the truth is an excellent service for illnesses, also a very good nurse, very attentive, everything is very good, thank you very much for everything.

0 - Yeah, I got there on my appointment they didn't know the reason why was there and I sat there there waiting on the left cab come get me. I was in the waiting room after they did my vitals for a hour and a half. It was really, I mean stressing me out okay.

GUADALUPE

9 - ***** was very non judgmental about my blood sugar spikes. She didn't criticize me for drinking beer, having ice cream and pizza, prior to the blood sugar spikes and I want to praise her for her professionalism in not judging me. Thanks, bye.

10 - It just to be nice if you would get a call back from the nurse or nurse practitioner, somebody to talk over your test results, you know. I don't get that. Nobody called me back today.

4 - The timing is really off my appointment was at noon and I didn't get seen till 1:15

0 - I felt like she rush through the information that I was trying to share with her how she was feeling. I felt like I was rush during the whole process.

MCDOWELL

10 - I felt very anxious that day and the whole staff eased my feelings!!

9 - My primary care physician who's a PA, is the most fantastic doctor ever. I can't speak more highly about him. The facility is good, the staff is good, but the care of the primary doctor is the best. Anyway, I do, I do like the care I get. Sometimes it's hard to get an appointment, but I really do like (INAUDIBLE) Health

5 - Nurses/staff were a bit rude to me because I was 5 minutes late. I'm a busy college student who shouldn't be made to feel guilty about being 5 minutes late. I also wish my doctor prescribed me actual medication for my anxiety rather than prescribe yoga and meditation.

MESA

10 - I think the facility was wonderful. Everything is helpful. You know they make you feel comfortable. So I would recommend this place every time I come there. A really great experience. It's always good and thanks very much.

10 - I am very grateful because they called me in a timely manner for this appointment and the attention of the person who did the study on me

5 - I have called the office twice to get the results of my x-rays labs and they did for me and nobody has called me to let me know what the results were and they have also not called me so that I can get a letter indicating when I can go back to work and for that reason, I can be losing my job. They haven't called me to this day. I have called twice and they haven't called back.

NORTH PHOENIX

10 - she is such a wonderful, compassionate doctor, really takes the time to listen to me and just so happy that I found her. I'm very grateful and I'm willing to recommend Valleywise to anybody

7 - At the service counter when you come in, and you received the receptionist is covered with a big screen. You cannot see their face, I think the screen should be moved over more to the right where you actually get contact with the person you're trying to talk with

10 - Yeah, the MyChart thing I couldn't log on to it, and I still ain't been logged onto it. They texted me this morning said that they would call me to schedule an appointment, and I have not heard from nobody today.

SOUTH CENTRAL

10 - It's like very well, you always attend me well with a lot of care and I am very happy for that, thank you very much.

9 - they are very kind and everything, but what I don't know is how they make them wait a few (unreadable) in the room and nobody It seems to me that they take too long to appear, at least not to even enter when something is happening, the truth is that one awaits me a lot in terms of no response. Hopefully we have to change that method a little, we don't make you wait so long there in the locked room, thank you.

5 - I think they should be more friendly and nicely with people. Sometimes they're really rough with the people. Communication is not really the way it should be. After all I mean, you guys are doing a good job. Thank you for being there for us.

SOUTH PHOENIX / LAVEEN

10 - I have confidence in my doctor she listen to me an always there to help me with my medical condition. I'm glad to be her patient to where someone actually understand me and my feelings.

10 - I made a mistake on one of the questions, I actually love the doctor, she was very knowledgeable, she asked a lot of questions about me, and I really loved her. I'm definitely going to be staying with her, she's a very good doctor. Okay, thank you. Bye

5 - I think they should be more friendly and nicely with people. Sometimes they're really rough with the people. Communication is not really the way it should be. After all I mean, you guys are doing a good job. Thank you for being there for us.

WEST MARYVALE

10 - They treated me very well and the doctor and the assistant made me feel very pleased and I'm satisfied with my medical exam.

5 - I liked the care they gave my daughter and the only ting was that they didn't give me an answer as to weather she had a throat infection or laryngitis. My daughter is not better and getting worse, like if she hadn't even been to the doctor because she didn't receive medication for the throat and my daughter still feels the same.

10 - To book an appointment, the secretary took great care of me and was very patient and tried to give me the best option for an appointment for an excellent friend, the lady nurse was excellent for a very long time, on the other hand, the doctor seemed a little rude to me this month





Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 6.

VCHCGC Committees'
Effectiveness

Strategic Planning and Outreach Committee (SPOC)

- Health Quality vs. Health Equity - Presentation to the GC to ensure a sufficient knowledge base.
- Keep reaching out to help people learn how to value cultural competence
- Advocacy for Health Equity
 - Define
 - Understand
 - Convey
 - Measure
- Bring 3 new members to the Governing Council
- Community Outreach
 - Bridge/Work out relationships w/ Valleywise Community Health Center-McDowell and Southwest Center for HIV/AIDS
- Operational Effectiveness in commodity services is baseline performance to engage market. Market Valleywise Health as unique and specific
 - Maricopa County History
 - Federally Qualified Health Centers
 - Specialties and expertise
- Become a referral center for other health systems
- Marketing
 - Let people know through example who we are

Finance Committee (FC)

- Financial Sustainability
 - Better sales job (promote the clinics better)
 - Tell our story
 - Value prop.
 - Not a commodity

Compliance and Quality Committee (CQC)

- Every time a patient calls for an appointment, the phone is answered within 3 rings, and they are not on hold or told to call another number
- Improve patient satisfaction
 - by making appointments available and easy for patients to set by making reception staff aware of their role in patients having a positive experience
 - by treating patient's health concerns not just symptoms

January		February		March		April		May		June	
Semi annual referral report	10 min	Quarterly patient satisfaction report	15 min	Approve annual SFDP	15 min	Accept annual UDS	15 min	Quarterly patient satisfaction report	10 min	Budget	
Semi annual HRSA grant award funds report	10 min	Quarterly patient safety report	15 min	Annual compliance training	20 min	Budget prep	15 min	Quarterly patient safety report	10 min	Election of Officers	10 min
Semi annual ARPA report	10 min	Quarterly quality metrics report	15 min	Semiannual compliance and IA work plan updates	15 min	Annual quality of care audit	15 min	Quarterly quality metrics report	10 min	Annual SAC budget report	10 min
Accept annual audit (Dec or Jan)	15 min	Quarterly Financials	15 min	CEO & Board reports, closing comments, staff assignments	20 min	CEO & Board reports, closing comments, staff assignments	20 min	Quarterly Financials	10 min	Compliance and IA annual plan	10 min
CEO & Board reports, closing comments, staff assignments	20 min	CEO & Board reports, closing comments, staff assignments	20 min					Budget prep	15 min	CNA (every 3 yrs)	20 min
								CEO & Board reports, closing comments, staff assignments	20 min	CEO & Board reports, closing comments, staff assignments	20 min
	65 min + consent agenda, etc		80 min + consent agenda, etc		70 min + consent agenda, etc		65 min + consent agenda, etc		75 min + consent agenda, etc		70 min + consent agenda, etc
		Annual review 5B service area by zip code								Reappoint members	

<u>July</u>		<u>August</u>		<u>September</u>		<u>October</u>		<u>November</u>		<u>December</u>	
CEO Eval	30 min	Quarterly patient satisfaction report	10 min	Annual patient grievances report	20 min	Annual Fixed assets	15 min	Quarterly patient satisfaction report	10 min	Strategic plan (every 3 yrs)	20 min
Semi annual referral report	15 min	Quarterly patient safety report	10 min	Semiannual compliance and IA work plan updates	10 min	CEO & Board reports, closing comments, staff assignments	20 min	Quarterly patient safety report	10 min	Annual QI/QA plan	15 min
Semi annual HRSA grant award funds report	15 min	Quarterly quality metrics report	10 min	CEO & Board reports, closing comments, staff assignments	20 min	National/state UDS data		Quarterly quality metrics report	10 min	CEO & Board reports, closing comments, staff assignments	20 min
Semi annual ARPA report	15 min	Quarterly Financials	10 min					Quarterly Financials	10 min		
CEO & Board reports, closing comments, staff assignments	20 min	Annual review of capital report (from PFY)	10 min					CEO & Board reports, closing comments, staff assignments	20 min		
CEO & Board reports, closing comments, staff assignments	20 min	CEO & Board reports, closing comments, staff assignments	20 min								
	75 min + consent agenda, etc		70 min + consent agenda, etc		50 min + consent agenda, etc		35 min + consent agenda, etc		60 min + consent agenda, etc		55 min + consent agenda, etc
						Annual review of addresses, hrs of operations, and services				Annual review of policies: 20075, 91105, 20080, 20082, 20077, 02014, 06503	

Not a HRSA requirement

Timing unknow at this time

Must happen in this month

separate special meeting

items below green are consent agenda items



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 7.

No Handout

Update on FQHCs Chief
Executive Officer Search



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 8.
No Handout

District Board of Directors
Report



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 9.
No Handout

Valleywise Health's Chief
Executive Officer Report



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 10.

No Handout

Closing
Comments/Announcements



Valleywise Community Health Centers Governing Council Meeting

February 1, 2023

Item 11.

No Handout

Staff Assignments