Council Members	AGENDA
Scott Jacobson, Chairman Eileen Sullivan, Vice Chairman Earl Arbuckle, Treasurer Nelly Clotter-Woods, Member Chris Hooper, Member Salina Imam, Member Norma Muñoz, Member William O'Neill, Member Essen Otu, Member Wayne Tormala, Member Jane Wilson, Member Mary Rose Garrido Wilcox, District Board, Non-Voting Member	**Valleywise Community Health Centers Governing Council** **Mission Statement** The Valleywise Health's mission is to provide exceptional care, without exception, every patient, every time.

▪ Virginia G. Piper Charitable Trust Pavilion ▪
▪ 2609 East Roosevelt Street ▪ Phoenix, Arizona 85008 ▪
▪ 2nd Floor ▪ Auditoriums 1 and 2 ▪

Wednesday, October 2, 2024
5:30 p.m.

Access to the meeting room will start at 5:20 p.m., 10 minutes prior to the start of the meeting.

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.

5:30 **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 at Valleywise Community Health Centers and at Valley Comprehensive Health Centers, 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, Virginia G. Piper Charitable Trust Pavilion, 2609 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.

9/26/2024 2:02 PM

General Session, Presentation, Discussion and Action:

5:35 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 September 4, 2024

b. Contracts:

i. **Acknowledge** amendment #2 to the intergovernmental agreement (90-22-167-1-02) between Maricopa County, Ryan White Part A Program and Maricopa County Special Health Care District dba Valleywise Health, to increase the amount of funding

c. Governance:

i. Intentionally Left Blank – No Handout

d. Medical Staff:

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

End of Consent Agenda

5:40 2. Mission Moment – A Patient Story 5 min - No Handout
Sherrie Beardsley, Director, Professional Practice and Service Excellence

5:45 3. Discuss, Review and **Acknowledge** Valleywise Health's Federally Qualified Health Centers Locations, Hours of Operation and Services 5 min
Michelle Barker, DHSc, Chief Executive Officer, Federally Qualified Health Centers

5:50 4. Discuss and Review the Annual Federally Qualified Health Centers Fixed Assets Report 10 min
Matthew Meier, MBA, Vice President, Financial Services

6:00 5. Valleywise Health's Federally Qualified Health Centers Year-in-Review Report 10 min
Michelle Barker, DHSc, Chief Executive Officer, Federally Qualified Health Centers

6:10 6. Federally Qualified Health Centers' Chief Executive Officer's Report, including Ambulatory Operational Dashboards 10 min
Michelle Barker, DHSc, Chief Executive Officer, Federally Qualified Health Centers

6:20 7. Maricopa County Special Health Care District Board of Directors Report 5 min - No Handout
Mary Rose Garrido Wilcox, Director, Board of Directors

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

6:25 8. Valleywise Health's President and Chief Executive Officer's Report 5 min
Steve A. Purves, FACHE, President and Chief Executive Officer, Valleywise Health

6:30 9. Governing Council Member Closing Comments/Announcements 5 min - No Handout
Valleywise Community Health Centers Governing Council

6:35 10. Concluding Items 10 min

a. Old Business: - No Handout

January 2024
Future presentation on effectiveness of depression interventions

August 2024
Report on opioid crisis

b. Governing Council Member Closing Comments/Announcements - No Handout

6:45 **Adjourn**

1.a.i. - Minutes - Meeting Minutes dated September 4, 2024

Minutes

Valleywise Community Health Centers Governing Council Meeting
Virginia G. Piper Charitable Trust Pavilion
2609 East Roosevelt Street, Phoenix, AZ 85008
2nd Floor, Auditoriums 1 and 2
September 4, 2024, 5:30 p.m.

DRAFT

Members Present:
Scott Jacobson, Chairman
Earl Arbuckle, Treasurer
Nelly Clotter-Woods, Member
Chris Hooper, Member
Salina Imam, Member
Norma Muñoz, Member
William O'Neill, Member – *participated remotely*
Essen Otu, Member
Jane Wilson, Member

Members Absent:
Eileen Sullivan, Vice Chairman
Wayne Tormala, Member

Non-Voting Member Absent: Mary Rose Garrido Wilcox, District Board

Others/Guest Presenters:
Michelle Barker, DHSc, Chief Executive Officer of the Federally Qualified Health Centers
Steve Purves, FACHE, President and Chief Executive Officer
Michael D. White, MD, MBA, Chief Clinical Officer – *participated remotely*
Claire Agnew, CPA, MBA, Executive Vice President, Chief Financial Officer
Ijana Harris, JD, General Counsel
Melanie Talbot, Chief Governance Officer; and Clerk of the Board – *participated remotely*
L.T. Slaughter, CPA, MBA, Chief Compliance Officer
Jason Vail Cruz, Senior Practice Manager
Jenn Coder, Program Coordinator
Eugene Slutsky, Clinic Coordinator
Sherrie Beardsley, Director Professional Practice and Service Excellence

Recorded by: Denise Tapia, Deputy Clerk of the Board

Call to Order:

Chairman Jacobson called the meeting to order at 5:30 p.m.

Roll Call

Ms. Tapia called roll. Following roll call, she noted that seven of the eleven voting members of the Valleywise Community Health Centers Governing Council were present, which represented a quorum. Ms. Imam and Mr. Otu arrived after roll call.

For the benefit of all participants, Ms. Tapia announced the Governing Council member participating remotely.

Call to the Public

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

NOTE: Ms. Imam arrived at 5:31 p.m.

General Session, Presentation, Discussion and Action:

1. Approval of Consent Agenda:

   a. Minutes:

      i. Approve Valleywise Community Health Centers Governing Council meeting minutes dated August 7, 2024

   b. Contracts:

      i. Acknowledge amendment #1 to the contract (90-25-023-1-01) between Arizona Department of Health Services and Maricopa County Special Health Care District dba Valleywise Health, for the Well Woman Healthcheck Program grant, provides breast and cervical cancer screenings for uninsured and underinsured

   c. Governance:

      i. Intentionally Left Blank

   d. Medical Staff:

      i. Intentionally Left Blank

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

VOTE: 8 Ayes: Chairman Jacobson, Mr. Arbuckle, Dr. Clotter-Woods, Mr. Hooper
Ms. Imam, Ms. Muñoz, Mr. O'Neill, Ms. Wilson
0 Nays
3 Absent: Vice Chairman Sullivan, Mr. Otu, Mr. Tormala,
Motion passed.

2. Mission Moment – A Patient Story

Mr. Vail Cruz stated that a patient recently diagnosed with Human Immunodeficiency Virus (HIV) was seen by a care coordinator at Valleywise Community Health Center - McDowell. Anxious about the diagnosis, the coordinator provided a sense of relief to the patient after answering his questions.

The patient returned to the clinic to thank the staff for all the encouraging words, kindness, respect, and support, and to let them know he was doing great.

General Session, Presentation, Discussion and Action:

3. Valleywise Health HIV and LGBTQ+ Service report

Mr. Vail Cruz noted that Valleywise Community Health Center - McDowell was one of the largest providers of HIV services in Arizona. The providers were experts in all aspects of LGBTQ+ medical care, with special training to treat transgender individuals.

He discussed HIV prevention measures.

Mr. Vail Cruz explained that HIV testing was done during regular care visits and patients were educated on the importance of testing. However, patients could opt-out of being tested.

NOTE: Mr. Otu arrived at 5:44 p.m.

Mr. Vail Cruz stated that the program linkage to care was important for newly diagnosed patients, patients who had just moved to the valley and had already been diagnosed, and folks who may be transitioning care from one provider to another provider. The Linkage coordinators did a comprehensive intake with the patients and would be with them every part of their visit.

Valleywise Health partners with Phoenix Children's Hospital and helps fund the Phoenix Children's Youth HIV clinic; once a youth was ready to transfer to the adult system, they would go to one of the Valleywise Health Federally Qualified Health Centers (FQHCs) or another clinic.

Mr. Vail Cruz stated there were patient re-engagement coordinators for the patients who fell out of care; they contacted the patients who had missed care for six months to a year to try and get them re-engaged and make sure they were back in care with their medications.

There was a stigma about HIV in the community; there was a grant for a program called Our Voices of Hope Speakers Bureau; people living with HIV who were training in storytelling go into the community as ambassadors or as storytellers and tell stories or share information to eliminate the stigma of HIV and increase the knowledge of HIV.

Mr. Vail Cruz stated the Ryan White grant paid for a lot of the dental services but because of the growth in new HIV cases and the care involved they had to reduce the amount from $1,500 to $1,000.

Financial eligibility was on site to help patients with the Arizona Health Care Cost Containment System (AHCCCS), other sliding-scale fees, and central eligibility for Ryan White grant.

On the first Saturday of the month, the new mobile health unit (MHU) would be traveling around the city to provide HIV services like if they would have gone to the Valleywise Community Health Center - McDowell; this would include testing and prep. Some mapping had been done based on the patient information epidemiology so it could be stationed to provide services.

Mr. Vail Cruz stated coordinators were out in the community being visible at all the community events across Maricopa County with Valleywise Health information. The practice was that the people that are served are more than just numbers or statistics, the Valleywise Health mission is to provide exceptional care, without exception, every patient, every time.

General Session, Presentation, Discussion and Action:

4. Approve Change in Scope of Service (CIS): add Saturday hours at Valleywise Community Health Center - McDowell

Dr. Barker stated that Valleywise Health Center - McDowell would open one Saturday a month from 7 a.m. to 11 a.m.

Mr. Otu asked if there was a plan for possibly expanding the hours in the future based on the need or demand.

Dr. Barker stated that staff reviewed appointment demand which led to the addition of Saturday hours.

Ms. Muñoz commented she did not realize the clinics did so much and noted it was a wonderful thing.

MOTION: Mr. Arbuckle moved to approve a change in scope to add Saturday hours, once per month from 7 a.m. to 11 a.m., at Valleywise Community Health Center - McDowell. Ms. Wilson seconded.

VOTE: 9 Ayes: Chairman Jacobson, Mr. Arbuckle, Dr. Clotter-Woods, Mr. Hooper
Ms. Imam, Ms. Muñoz, Mr. O'Neill, Mr. Otu, Ms. Wilson
0 Nays
2 Absent: Mr. Tormala, Vice Chair Sullivan
Motion passed.

5. Discuss and Review the Federally Qualified Health Centers Semiannual Compliance and Internal Audit Work Plans and Ethics Line Report

Mr. Slaughter outlined the semiannual compliance and internal audit reports for the FQHCs which included the last two quarters of fiscal year (FY) 2024. He also reported on the Ethics Line calls and the FY 2024 compliance training results.

He noted the status of compliance projects, including information blocking, pharmacy 340b, IT security review, and Health Resources and Services Administration's (HRSA) operational site visit (OSV) preparation.

He explained there were new Health Insurance Portability and Accountability Act (HIPAA) regulations with reproductive reporting.

Mr. Otu asked for an explanation of the initial risk rating and the post review ranking.

Mr. Slaughter stated that prior to the audit, he assessed each project's potential risk to Valleywise Health. The initial risk rating was from one to five with a five being high risk. The post review ranking assessed the risk to Valleywise Health after the audit and controls were implemented.

He reviewed the ongoing internal audit work projects.

Mr. Slaughter reviewed the Ethics Line statistics, noting an average of two calls per quarter and the average days to close each case were less than 30. He would continue to monitor and investigate all calls.

He reported that overall, 97.1% of staff members assigned compliance education training for FY 2024 completed the training.

General Session, Presentation, Discussion and Action:

5. Discuss and Review the Federally Qualified Health Centers Semiannual Compliance and Internal Audit Work Plans and Ethics Line Report cont.

Mr. Otu asked who would call the ethics hotline.

Mr. Slaughter stated it was mainly employees, however, patients also called.

MOTION: Mr. Otu moved to recess general session and convene in executive session at 6:28 p.m. Mr. Hooper seconded.

VOTE: 9 Ayes: Chairman Jacobson, Mr. Arbuckle, Dr. Clotter-Woods, Mr. Hooper
Ms. Imam, Ms. Muñoz, Mr. O'Neill, Mr. Otu, Ms. Wilson
0 Nays
2 Absent: Mr. Tormala, Vice Chair Sullivan
Motion passed.

Chairman Jacobson reconvened general session at 6:43 p.m.

6. Discuss, Review and Approve the Strategic Plan for the Federally Qualified Health Centers for Fiscal Years 2024-2026

Dr. Barker stated she was presenting the strategic plan and would give quarterly updates on where they were in the process. She noted Valleywise Health's strategic plan had five strategic pillars; best people engagement, best patient experience, best quality and safety, best financial management and best learning environment. The FQHCs strategic plan was similarly modeled. The goals for the FQHCs were empowering the team, connecting with the community, modernizing operations, and mobilizing equitable health initiatives. The conclusion was the focus on an enhanced patient experience.

The next steps were to create an action plan and report the progress to the Governing Council quarterly. A dashboard with the five pillars would be reviewed annually to monitor and measure key performance indicators.

Mr. Otu asked if the staff that participated in the retreat also had the opportunity to give feedback on the strategic plan.

Dr. Barker replied once the Governing Council approved the strategic plan it would be disseminated to the team to begin the work.

Ms. Muñoz asked if the strategic plan would be brought back to the Governing Council to report on its implementation.

Dr. Barker stated they would report on it quarterly.

MOTION: Mr. Hooper moved to approve the Strategic Plan for the Federally Qualified Health Centers for Fiscal Years 2024-2026. Ms. Wilson seconded.

VOTE: 9 Ayes: Chairman Jacobson, Mr. Arbuckle, Dr. Clotter-Woods, Mr. Hooper
Ms. Imam, Ms. Muñoz, Mr. O'Neill, Mr. Otu, Ms. Wilson
0 Nays
2 Absent: Mr. Tormala, Vice Chair Sullivan
Motion passed.

General Session, Presentation, Discussion and Action:

7. Report on the 2024 National Association of Community Health Centers (NACHC) Annual Conference

Mr. Hooper stated he took advantage of the breakout sessions that stood out to him: governing board recruitment, understanding social engagement as a social driver of health, and narrative leadership.

He noted the movement forward was in healthcare was toward a more impactful active role in a patient's life by utilizing partnerships with the community.

Ms. Muñoz thanked the administration and Dr. Barker for allowing her to attend the very informative and enlightening conference noting she learned a lot about what was going on with the health centers.

Ms. Muñoz stated there were several general sessions she attended, the ones that stood out to her were advancing the health of underserved populations: utilizing lab data to support health equality initiatives, health centers role in facilitating healthy transitions out of incarceration, and driving opportunities and expanding access through the growth of mobile health units.

The general session that stood out the most was using your voice and asking questions in the boardroom, it reinforced her knowledge and reminded her that she was the voice of her community and she represented them.

Mr. Otu thanked Mr. Hooper and Ms. Muñoz for representing the Governing Council at the conference.

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

Dr. Barker stated patient satisfaction, quality and finances metrics were on a good start for the first month of the fiscal year, noting the quality metrics were based on the calendar year.

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

This item was not discussed.

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

Mr. Purves expressed his gratitude to the Governing Council for representing Valleywise Health.

He noted that staff had obtained supplemental funding, which was crucial for Valleywise Health to continue to provide care to the most vulnerable individuals within the community.

Mr. Purves announced the documentary film, *Courage Rising,* was about the incredible journey of eight survivors from the Diane & Bruce Halle Arizona Burn Center as they conquer Mt. Kilimanjaro and rediscover the power of the human spirit; it would premiere on September 7, 2024 on a streaming platform, Kino and all the proceeds would support the Valleywise Foundation.

He announced that the Chief Information Officer and the Chief Human Resources Officer positions were recently filled.

He mentioned the Det Norske Veritas (DNV) surveyors for the Valleywise Health accreditation were exceptionally complimentary of the organization.

General Session, Presentation, Discussion and Action cont.:

10. Valleywise Health's President and Chief Executive Officer's Report cont.

Chairman Jacobson asked if the information was publicized.

Mr. Purves stated the successes were promoted internally.

11. Governing Council Member Closing Comments/Announcements

There were no comments or announcements.

12. Concluding Items

a. Old Business:

January 2024
Future presentation on effectiveness of depression interventions

12. Concluding Items cont.

August 2024
Report on opioid crisis

Ms. Tapia reviewed old business.

Adjourn

MOTION: Mr. Arbuckle moved to adjourn the September 4, 2024, Valleywise Community Health Centers Governing Council Meeting. Mr. Otu seconded.

VOTE: 9 Ayes: Chairman Jacobson, Mr. Arbuckle, Dr. Clotter-Woods, Mr. Hooper, Ms. Imam, Ms. Muñoz, Mr. O'Neill, Mr. Otu, Ms. Wilson
0 Nays
2 Absent: Mr. Tormala, Vice Chairman Sullivan
Motion passed.

Meeting adjourned at 7:31 p.m.

_____
Denise Tapia
Deputy Clerk of the Board

1.b.i. - Contracts - Contract (90-22-167-1-02)

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Tuesday, September 10, 2024 3:52 PM
To: Melanie Talbot
Subject: Contract Approval Request: Amendment #2 - IGA Increased Funding - Ryan White Part A (C-86-22-145-X-00) Emergency Relief Project Grant Maricopa County by and through the Ryan White Program

Message Information

From Purves, Stephen
To Talbot, Melanie;
Subject Contract Approval Request: Amendment #2 - IGA Increased Funding - Ryan White Part A (C-86-22-145-X-00) Emergency Relief Project Grant Maricopa County by and through the Ryan White Program
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
OIG - Maricopa County 2024		File	OIG - Maricopa County 2024.pdf
SAM - Maricopa County 2024		File	SAM - Maricopa County 2024.pdf
RFBA		File	RFBA - Amend 2.pdf
Amendment #2 - pending BOARD signature		File	Valleywise Health IGA Amendment 2.pdf

Contract Information

Division Contracts Division
Folder Amendments
Status Pending Approval
Title Amendment #2 - IGA Increased Funding - Ryan White Part A (C-86-22-145-X-00) Emergency Relief Project Grant
Contract Identifier Board - Amendment
Contract Number 90-22-167-1-02

Primary Responsible Party	Tymczyna, Katherine
Departments	Grants - Ryan White Part A Primary
Product/Service Description	Amendment #2 - IGA Increased Funding - Ryan White Part A (C-86-22-145-X-00) Emergency Relief Project Grant
Action/Background	Approve Amendment #2 to the Intergovernmental Agreement (IGA) between Maricopa County, Ryan White Part A Program (C-86-22-145-X-00) Emergency Relief Project Grant and Maricopa County Special Health Care District dba Valleywise Health to revised Number 3., Agreement Amount, currently stated as “$3,000,000 annually” will be deleted and replaced with “$4,500,000 for the period from March 1, 2024, to February 28, 2025.” This amendment includes an additional $1,500,000 for the specified period. All other terms and conditions of the original agreement shall remain in full force and effect. This Amendment #2, adding $1,500,000.00 to the final year (March 1, 2024 through February 28,2025) of this IGA, for a new aggregate value of $10,500,000.00. This Amendment #2 is sponsored by Dr. Michael White, EVP and Chief Clinical Officer.
Evaluation Process	The requesting department has determined that the Contractor is performing satisfactorily and is meeting the goals and objectives of the organization. The requesting department has elected that the contract should be continued and extended.
Category	IGA
Effective Date	
Term End Date	2/28/2025
Annual Value	$1,500,000.00
Expense/Revenue	Revenue
Budgeted Travel Type	Yes
Procurement Number	
Primary Vendor	Maricopa County by and through the Ryan White Program

Responses

Member Name	Status	Comments
Pardo, Laela N.	Approved	Reviewed and approve.
Melton, Christopher C.	Approved	
Joiner, Jennifer L.	Approved	
Barker, Michelle J.	Approved	
Hixson, Jeffrey B.	Approved	
Harris, Ijana M.	Approved	
White, Michael	Approved	
Agnew, Claire F.	Approved	
Purves, Stephen A.	Approved	
Talbot, Melanie L.	Current	

1.d.i. Medical Staff - Medical Staff and Advanced Practice Clinician_Allied Health Professional Staff Credentials

Recommended by Credentials Committee: July 2, 2024
Recommended by Medical Executive Committee: July 9. 2024
Submitted to MSHCDB: August 28, 2024

VALLEYWISE HEALTH
CREDENTIALS AND ACTION ITEMS REPORT
MEDICAL STAFF

The credentials of the following individuals including, current licensure, relevant training and experience, malpractice insurance, current competence and the ability to perform the requested privileges have been verified.

INITIAL MEDICAL STAFF APPOINTMENT				
NAME	**CATEGORY**	**DEPARTMENT/SPECIALTY**	**APPOINTMENT DATES**	**COMMENTS**
Daxa Clarke, M.D.	Courtesy	Pediatrics	09/01/2024 to 08/31/2026	

INITIAL/FOCUSED PROFESSIONAL PRACTICE EVALUATION			
NAME	**SPECIALTY/PRIVILEGES**	**RECOMMENDATION EXTEND or PROPOSED STATUS**	**COMMENTS**
Nothing to report			

REAPPOINTMENTS/ONGOING PROFESSIONAL PRACTICE EVALUATION				
NAME	**CATEGORY**	**DEPARTMENT/SPECIALTY**	**APPOINTMENT DATES**	**COMMENTS**
Lenore Sandra Encinas, M.D.	Active	Family & Community Medicine	09/01/2024 to 08/31/2026	
Mark M. MacElwee, M.D.	Active	Internal Medicine	09/01/2024 to 08/31/2026	
Rachel Justine Maurice, M.D.	Active	Pediatrics	09/01/2024 to 08/31/2026	
Lakshmi K. P. Murthy, M.D.	Courtesy	Internal Medicine	09/01/2024 to 08/31/2026	
Edward G. Paul, M.D.	Active	Family & Community Medicine	09/01/2024 to 08/31/2026	
Salil V. Pradhan, M.D.	Active	Pediatrics	09/01/2024 to 08/31/2026	
Sonam Singh, M.D.	Active	Obstetrics & Gynecology	09/01/2024 to 08/31/2026	
Dale Michael Stern, M.D.	Active	Internal Medicine	09/01/2024 to 08/31/2026	

CHANGE IN PRIVILEGES			
NAME	**DEPARTMENT/SPECIALTY**	**ADDITION / REDUCTION / WITHDRAWAL**	**COMMENTS**
Edward G. Paul, M.D.	Family & Community Medicine	Withdrawal: Acupuncture Privileges	Voluntary Relinquishment of Privileges due to non-utilization of Privileges
Sonam Singh, M.D.	Obstetrics & Gynecology	Withdrawal: Robotic Surgery Privileges	Voluntary Relinquishment of Privileges due to non-utilization of Privileges

Recommended by Credentials Committee: July 2, 2024
Recommended by Medical Executive Committee: July 9. 2024
Submitted to MSHCDB: August 28, 2024

RESIGNATIONS *Information Only*			
NAME	**DEPARTMENT/SPECIALTY**	**STATUS**	**REASON**
Marli Gabriel, D.O.	Internal Medicine	Active to Inactive	Resigned effective February 11, 2024

Definitions:

Active	≥ 1,000 hours/year – Active members of the medical staff have voting rights and can serve on medical staff committees
Courtesy	< 1,000 hours/year – Courtesy members do not have voting rights and do not serve on medical staff committees
Reappointments	Renewal of appointment and Privileges is for a period of two years unless otherwise specified for a shorter period of time.
FPPE	Focused professional practice evaluation is a process by which the organization validates current clinical competence. This process may also be used when a question arises in practice patterns.

Recommended by Credentials Committee: July 2, 2024
Recommended by Medical Executive Committee: July 9, 2024
Submitted to MSHCDB: August 28, 2024

VALLEYWISE HEALTH
CREDENTIALS AND ACTION ITEMS REPORT
ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL STAFF

The credentials of the following individuals including, current licensure, relevant training and experience, malpractice insurance, current competence and the ability to perform the requested privileges have been verified.

ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL – INITIAL APPOINTMENTS				
NAME	**DEPARTMENT**	**PRACTICE PRIVILEGES/ SCOPE OF SERVICE**	**APPOINTMENT DATES**	**COMMENTS**
Nothing to report				

INITIAL/FOCUSED PROFESSIONAL PRACTICE EVALUATION			
NAME	**DEPARTMENT/SPECIALTY**	**RECOMMENDATION EXTEND or PROPOSED STATUS**	**COMMENTS**
Samantha Ari Bianchi, P.A.-C.	Family & Community Medicine	FPPE successfully completed	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Therapeutic Procedures to include Arthrocentesis/Joint Aspiration Privileges.

ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL – REAPPOINTMENTS				
NAME	**DEPARTMENT**	**PRACTICE PRIVILEGES/ SCOPE OF SERVICE**	**APPOINTMENT DATES**	**COMMENTS**
Nothing to report				

RESIGNATION (Information Only)			
NAME	**DEPARTMENT/SPECIALTY**	**STATUS**	**REASON**
Brian David Arey, A.N.P.	Family & Community Medicine	Allied Health Professional to Inactive	Resigned effective August 20, 2024
Barbara Benincaso, F.N.P.	Family & Community Medicine	Allied Health Professional to Inactive	Resigned effective November 10, 2023
Ann Marie Bergren, F.N.P.	Family & Community Medicine	Allied Health Professional to Inactive	Resigned effective July 12, 2024
Joshua Daniel Lehrer, F.N.P.	Family & Community Medicine	Allied Health Professional to Inactive	Resigned effective July 16, 2024

General Definitions:

Advanced Practice Clinician	An Advanced Practice Clinicians (APC) means individuals other than Medical Staff members who are licensed healthcare professionals who are board certified and have at least a master's degree. APCs are trained to practice medicine and prescribe within the scope of their training as outlined by their specific scope of practice and are authorized by law and by the Hospital to provide patient care services.
Allied Health Professional	An Allied Health Professional (AHP) means individuals other than Medical Staff members or APCs who are qualified by training, experience, and current competence in a discipline permitted to practice in the hospital and are authorized by law and by the Hospital to provide patient care services.
Practice Prerogatives	Scopes of practice summarizing qualifications for the respective category, developed with input from the physician director of the clinical service and the observer/sponsor/responsible party of the AHP, Department Chair, and other representatives of the Medical Staff, Hospital management, and other professionals.

Supervision Definitions:

(1) General Supervision	The procedure is furnished under the physician's overall direction and control, but the physician's presence is not required during the performance of the procedure or provision of the services.
(2) Direct Supervision	The physician must be present in the office suite or on the premises of the location and immediately available to furnish assistance and direction throughout the performance of the procedure. It does not mean that the physician must be present in the room when the procedure is performed.
(3) Personal Supervision	A physician must be in the room during the performance of the procedure.

Recommended by Credentials Committee: August 6, 2024
Recommended by Medical Executive Committee: August 13, 2024
Submitted to MSHCDB: August 28, 2024

VALLEYWISE HEALTH
CREDENTIALS AND ACTION ITEMS REPORT
MEDICAL STAFF

The credentials of the following individuals including, current licensure, relevant training and experience, malpractice insurance, current competence and the ability to perform the requested Privileges have been verified.

INITIAL MEDICAL STAFF APPOINTMENT				
NAME	**CATEGORY**	**DEPARTMENT/SPECIALTY**	**APPOINTMENT DATES**	**COMMENTS**
Ahmed Abdel Kerim, M.D.	Active	Internal Medicine	9/1/2024 to 8/31/2026	
Hana Zaidan Alkahlout, D.O.	Active	Family & Community Medicine	9/1/2024 to 8/31/2026	
Lindsay Leigh Allen, M.D.	Courtesy	Obstetrics & Gynecology	9/1/2024 to 8/31/2026	
Kaitlyn Marie Bates, M.D.	Courtesy	Pediatrics	9/1/2024 to 8/31/2026	
Daniel Adam Davis, M.D.	Active	Internal Medicine	9/1/2024 to 8/31/2026	
Xavier Mikal Douglas, M.D.	Active	Family & Community Medicine	9/1/2024 to 8/31/2026	
Taylor Marie Jenkins, M.D.	Courtesy	Obstetrics & Gynecology	9/1/2024 to 8/31/2026	
Gabriel Murillo Nader, M.D.	Active	Family & Community Medicine	9/1/2024 to 8/31/2026	
Chloe Anne Wood, M.D.	Courtesy	Obstetrics & Gynecology	9/1/2024 to 8/31/2026	

INITIAL/FOCUSED PROFESSIONAL PRACTICE EVALUATION			
NAME	**SPECIALTY/PRIVILEGES**	**RECOMMENDATION EXTEND or PROPOSED STATUS**	**COMMENTS**
Kassandra Jean Kosinski Romero, M.D.	Internal Medicine	FPPE successfully completed	FPPE reviewer has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Internal Medicine Core Privileges.
Vineet Syal, M.D.	Family & Community Medicine	FPPE successfully completed	FPPE reviewer has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Ambulatory Pediatrics, Adolescent and Adult Core Privileges.

REAPPOINTMENTS/ONGOING PROFESSIONAL PRACTICE EVALUATION				
NAME	**CATEGORY**	**DEPARTMENT/SPECIALTY**	**APPOINTMENT DATES**	**COMMENTS**
Nazim Robert Bal, D.O.	Courtesy	Internal Medicine	9/1/2024 to 8/31/2026	
Michael David Dobbs, M.D.	Active	Pediatrics	9/1/2024 to 8/31/2026	
Lucas Alberto Falco, M.D.	Active	Pediatrics	9/1/2024 to 8/31/2026	

Recommended by Credentials Committee: August 6, 2024
Recommended by Medical Executive Committee: August 13, 2024
Submitted to MSHCDB: August 28, 2024

REAPPOINTMENTS/ONGOING PROFESSIONAL PRACTICE EVALUATION				
Syma A. Hamidi, M.D.	Courtesy	Internal Medicine	9/1/2024 to 8/31/2026	
Raj Makadia, M.D.	Active	Family & Community Medicine	9/1/2024 to 8/31/2026	
Frances Mariel Palermo Alvarado, M.D.	Active	Internal Medicine	9/1/2024 to 8/31/2026	
Janiel Lucia Pimentel Vasquez, M.D.	Courtesy	Pediatrics	9/1/2024 to 8/31/2026	
Anthony Joseph Vaccarello, M.D.	Courtesy	Internal Medicine	9/1/2024 to 8/31/2026	
Angela Fimbres Veesenmeyer, M.D.	Courtesy	Pediatrics	9/1/2024 to 8/31/2026	
Alicia S. Willey, M.D.	Active	Obstetrics & Gynecology	9/1/2024 to 8/31/2026	

CHANGE IN PRIVILEGES			
NAME	**DEPARTMENT/SPECIALTY**	**ADDITION / REDUCTION / WITHDRAWAL**	**COMMENTS**
Santiago Garcia Ortiz, M.D.	Internal Medicine	Withdrawal: Basic Critical Care Privileges	Voluntary Relinquishment of Privileges due to non-utilization of Privileges
Frances Mariel Palermo Alvarado, M.D.	Internal Medicine	Withdrawal: Basic Critical Care Privileges	Voluntary Relinquishment of Privileges due to non-utilization of Privileges
Alicia S. Willey, M.D.	Obstetrics & Gynecology	Withdrawal: Robotic Surgery Privileges	Voluntary Relinquishment of Privileges due to non-utilization of Privileges

RESIGNATIONS *Information Only*			
NAME	**DEPARTMENT/SPECIALTY**	**STATUS**	**REASON**
Melia Kay Cox, D.O.	Family & Community Medicine	Courtesy to Inactive	Resigned effective August 15, 2024
Renee Jasmine Crawford, D.O.	Pediatrics	Courtesy to Inactive	Resigned effective July 22, 2024
Jared Andrew Kusma, M.D.	Pediatrics	Courtesy to Inactive	Resigned effective June 3, 2024
Maria Gabriela Moros, M.D.	Pediatrics	Courtesy to Inactive	Resigned effective June 30, 2024
Anil Nanda, M.D.	Internal Medicine	Active to Inactive	Resigned effective December 31, 2023
Shelly Sood, M.D.	Obstetrics & Gynecology	Active to Inactive	Resigned effective June 30, 2024
Dorothy Beth Thomas, M.D.	Pediatrics	Courtesy to Inactive	Resigned effective June 3, 2024

Definitions:

Active	≥ 1,000 hours/year – Active members of the medical staff have voting rights and can serve on medical staff committees
Courtesy	< 1,000 hours/year – Courtesy members do not have voting rights and do not serve on medical staff committees
Reappointments	Renewal of appointment and Privileges is for a period of two years unless otherwise specified for a shorter period of time.
FPPE	Focused professional practice evaluation is a process by which the organization validates current clinical competence. This process may also be used when a question arises in practice patterns.

Recommended by Credentials Committee: August 6, 2024
Recommended by Medical Executive Committee: August 13, 2024
Submitted to MSHCDB: August 28, 2024

VALLEYWISE HEALTH
CREDENTIALS AND ACTION ITEMS REPORT
ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL STAFF

The credentials of the following individuals including, current licensure, relevant training and experience, malpractice insurance, current competence and the ability to perform the requested privileges have been verified.

ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL – INITIAL APPOINTMENTS				
NAME	**DEPARTMENT**	**PRACTICE PRIVILEGES/ SCOPE OF SERVICE**	**APPOINTMENT DATES**	**COMMENTS**
Nothing to report				

INITIAL/FOCUSED PROFESSIONAL PRACTICE EVALUATION			
NAME	**DEPARTMENT/SPECIALTY**	**RECOMMENDATION EXTEND or PROPOSED STATUS**	**COMMENTS**
Jesus Ryan Arvizo, F.N.P.	Family & Community Medicine	FPPE successfully completed	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Family & Community Medicine Nurse Practitioner Core Privileges.
Samantha Ari Bianchi, P.A.-C.	Family & Community Medicine	FPPE successfully completed	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Toenail removal Privileges.
Brandon Vinh Quang Dang, F.N.P.	Internal Medicine	FPPE successfully completed	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Internal Medicine Nurse Practitioner Core Privileges.

ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL – REAPPOINTMENTS				
NAME	**DEPARTMENT**	**PRACTICE PRIVILEGES/ SCOPE OF SERVICE**	**APPOINTMENT DATES**	**COMMENTS**
Micaela Fernandes, C.N.M.	Obstetrics & Gynecology	Practice Prerogatives on file	9/1/2024 to 8/31/2026	
Veliria Virginia Jackson, F.N.P.	Internal Medicine	Practice Prerogatives on file	9/1/2024 to 8/31/2026	
Stephanie Ann Rideaux, W.H.N.P.	Obstetrics & Gynecology	Practice Prerogatives on file	9/1/2024 to 8/31/2026	
Jenna Christine Stooks, F.N.P.	Family & Community Medicine	Practice Prerogatives on file	9/1/2024 to 8/31/2026	

CHANGE IN PRIVILEGES			
NAME	**DEPARTMENT/SPECIALTY**	**ADDITION / REDUCTION / WITHDRAWAL**	**COMMENTS**
Micaela Fernandes, C.N.M.	Obstetrics & Gynecology	Withdrawal: Insulin start, Adjustments privileges	Voluntary Relinquishment of Privileges due to non-utilization of privileges

Recommended by Credentials Committee: August 6, 2024
Recommended by Medical Executive Committee: August 13, 2024
Submitted to MSHCDB: August 28, 2024

RESIGNATION (Information Only)			
NAME	**DEPARTMENT/SPECIALTY**	**STATUS**	**REASON**
JoAnne Ellen Bracewell, F.N.P.	Internal Medicine	Allied Health Professional to Inactive	Resigned effective August 14, 2024
Jennifer Faluade, F.N.P.	Family & Community Medicine	Allied Health Professional to Inactive	Resigned effective July 19, 2024
Patricia Lannon Johnson, D.N.P., N.N.P.	Pediatrics	Allied Health Professional to Inactive	Resigned effective August 2, 2024
Kortni Ruth Jones, P.A.-C.	Family & Community Medicine	Allied Health Professional to Inactive	Resigned effective August 1, 2024
Thanyathorn Madrid, F.N.P.	Pediatrics	Allied Health Professional to Inactive	Resigned effective June 3, 2024

General Definitions:

Advanced Practice Clinician	An Advanced Practice Clinicians (APC) means individuals other than Medical Staff members who are licensed healthcare professionals who are board certified and have at least a master's degree. APCs are trained to practice medicine and prescribe within the scope of their training as outlined by their specific scope of practice and are authorized by law and by the Hospital to provide patient care services.
Allied Health Professional	An Allied Health Professional (AHP) means individuals other than Medical Staff members or APCs who are qualified by training, experience, and current competence in a discipline permitted to practice in the hospital and are authorized by law and by the Hospital to provide patient care services.
Practice Prerogatives	Scopes of practice summarizing qualifications for the respective category, developed with input from the physician director of the clinical service and the observer/sponsor/responsible party of the AHP, Department Chair, and other representatives of the Medical Staff, Hospital management, and other professionals.

Supervision Definitions:

(1) General Supervision	The procedure is furnished under the physician's overall direction and control, but the physician's presence is not required during the performance of the procedure or provision of the services.
(2) Direct Supervision	The physician must be present in the office suite or on the premises of the location and immediately available to furnish assistance and direction throughout the performance of the procedure. It does not mean that the physician must be present in the room when the procedure is performed.
(3) Personal Supervision	A physician must be in the room during the performance of the procedure.

3. FQHCs Locations, Hours of Operation and Services

Clinic	Site Locations	Hours of Service	SERVICES														
		Days/Hours	Family Medicine	Internal Medicine	OB/GYN	Peds	Dental	WIC	IBH	FRC	Lab	Pharm	Image	OB Cardio	CHN	Diabetes	Vision
Valleywise Comprehensive Healthcare Center- Phoenix	2525 E Roosevelt St. Phoenix, AZ 85008	7 AM-5 PM M-F		x	x	x	x		x	x	x	x	x	x	x	x	x
Valleywise Comprehensive Healthcare Center- Peoria*	8088 W. Whitney Dr., Peoria AZ 85345	7 AM-6 PM M-F	x	x	x	x	x	x	x	x	x	x	x		x	x	x
Valleywise Community Health Center- West Maryvale	7808 W Thomas Rd., Phoenix, AZ 85033	7 AM-6 PM M-F	x		x	x			x	x	x	x	x		x		
Valleywise Community Health Center- South Phoenix Laveen	5650 S 35th Ave., Phoenix, AZ 85041	7 AM-6 PM M-F	x	x	x	x			x	x	x	x	x			x	
Valleywise Community Health Center- South Central	33 W. Tamarisk St., Phoenix, AZ 85041	7 AM-5:30 PM M-F 7 AM-12 PM S	x		x	x			x	x	x	x			x	x	x
Valleywise Community Health Center- North Phoenix	2025 W Northern Ave., Phoenix, AZ 85021	7AM-6 PM M-F 7 AM-11 AM S	x	x	x	x			x	x	x	x	x			x	x
Valleywise Community Health Center- Mesa	950 E Main St. Mesa, AZ 85203	7 AM-6 PM M-F	x	x	x	x			x	x	x	x	x			x	x
Valleywise Community Health Center- McDowell**	1101 N Central #204, Phoenix, AZ 85004	7 AM-5 PM M-F 7 AM-11 AM S	x	x	x		x		x		x				x		
Valleywise Community Health Center- Guadalupe	5825 E Calle Guadalupe, Gaudalupe, AZ 85283	7:30 AM-4:30 PM M-F	x		x				x		x					x	
Valleywise Community Health Center- Chandler	811 S Hamilton St., Chandler, AZ 85225	7 AM-5:30 PM M-F 7 AM-11 AM S	x	x	x	x	x		x	x	x	x	x			x	x
Valleywise Community Health Center- Avondale	950 E Van Buren St., Avondale, AZ 85323	7AM-5PM M-F 7AM-11AM S	x				x		x		x	x	x			x	x

**Peoria location offers GYN services ONLY (No OB services)*

**McDowell location offers GYN Services ONLY to HIV + (OB care in conjuction with OB/GYN provider)

4. FQHCs Fixed Assets Report

FQHC Fixed Asset Report Summary as of August 31, 2024

Location	Asset Type	Sum of Asset cost	Sum of Accumulated Depreciation	Sum of Net Book Value
Main Campus	Equipment	$ 8,866	$ 6,839	$ 2,027
	Equipment	$ 332,835	$ 219,823	$ 113,012
	Building	$ 973,434	$ 344,000	$ 629,433
Main Campus Total		**$ 1,315,135**	**$ 570,663**	**$ 744,473**
System Wide	Building	$ 165,487	$ 134,669	$ 30,818
	Equipment	$ 2,005,543	$ 1,358,305	$ 647,238
System Wide Total		**$ 2,171,030**	**$ 1,492,974**	**$ 678,056**
Avondale FHC	Land	$ 320,000	$ -	$ 320,000
	Building	$ 2,264,432	$ 2,144,230	$ 120,202
	Equipment	$ 203,197	$ 57,120	$ 146,077
	Building	$ 50,477	$ 28,000	$ 22,477
		$ 139,897	$ 1,614	$ 138,282
Avondale FHC Total		**$ 2,978,002**	**$ 2,230,963**	**$ 747,040**
Chandler FHC	Land	$ 1,640,369	$ -	$ 1,640,369
	Building	$ 345,327	$ 308,753	$ 36,575
	Equipment	$ 29,495	$ 24,790	$ 4,705
		$ 210,675	$ 99,916	$ 110,759
Chandler FHC Total		**$ 2,225,867**	**$ 433,459**	**$ 1,792,408**
South Phoenix Laveen FHC	Land	$ 729,546	$ -	$ 729,546
	Building	$ 12,039,395	$ 2,521,741	$ 9,517,655
	Equipment	$ 1,855,403	$ 949,971	$ 905,432
South Phoenix Laveen FHC Total		**$ 14,624,345**	**$ 3,471,711**	**$ 11,152,634**
North Phoenix FHC	Land	$ 2,307,776	$ -	$ 2,307,776
	Building	$ 12,957,857	$ 3,133,110	$ 9,824,747
	Equipment	$ 1,332,255	$ 500,798	$ 831,458
North Phoenix FHC Total		**$ 16,597,888**	**$ 3,633,907**	**$ 12,963,981**
Mesa FHC	Land	$ 1,989,756	$ -	$ 1,989,756
	Building	$ 12,755,246	$ 1,887,912	$ 10,867,334
	Equipment	$ 1,520,061	$ 324,586	$ 1,195,474
Mesa FHC Total		**$ 16,265,062**	**$ 2,212,498**	**$ 14,052,565**
West Maryvale FHC	Land	$ 1,879,026	$ -	$ 1,879,026
	Building	$ 13,187,414	$ 2,003,996	$ 11,183,418
	Equipment	$ 635,090	$ 187,365	$ 447,725
West Maryvale FHC Total		**$ 15,701,529**	**$ 2,191,361**	**$ 13,510,168**
Peoria Campus	Land	$ 5,681,176	$ -	$ 5,681,176
	Equipment	$ 4,095,787	$ 901,321	$ 3,194,466
		$ 13,197	$ 133	$ 13,064
Peoria Campus Total		**$ 9,790,159**	**$ 901,454**	**$ 8,888,705**
McDowell FHC	Building	$ 207,812	$ 100,861	$ 106,951
	Equipment	$ 18,128	$ 13,693	$ 4,435
		$ 683,628	$ 340,977	$ 342,651
McDowell FHC Total		**$ 909,569**	**$ 455,531**	**$ 454,037**

FQHC Fixed Asset Report Summary as of August 31, 2024

Location	Asset Type	Sum of Asset cost	Sum of Accumulated Depreciation	Sum of Net Book Value
South Central Phoenix FHC	Land	$ 200,000	$ -	$ 200,000
	Building	$ 346,559	$ 208,227	$ 138,332
	Equipment	$ 51,053	$ 42,060	$ 8,993
		$ 290,002	$ 87,430	$ 202,573
South Central Phoenix FHC Total		**$ 887,615**	**$ 337,717**	**$ 549,898**
Guadalupe FHC	Land	$ 230,000	$ -	$ 230,000
	Building	$ 417,590	$ 397,935	$ 19,655
	Equipment	$ 9,927	$ 5,543	$ 4,384
		$ 43,333	$ 500	$ 42,833
Guadalupe FHC Total		**$ 700,850**	**$ 403,978**	**$ 296,872**
Grand Total		**$ 84,167,052**	**$ 18,336,216**	**$ 65,830,836**

5. FQHCs Year-in-Review Report

Governing Council Report to the Board

Dr. Michelle Barker, Sr VP Ambulatory Services and CEO FQHC

Scott Jacobson, Governing Council Chair

October 23, 2024

Purpose

The Co-applicant Operational Arrangement between the Maricopa County Special Health Care District Board and the Valleywise Community Health Centers Governing Council (VCHCGC) requires a review of Federally Qualified Health Centers (FQHC) Clinics' performance.

On behalf of the Valleywise Community Health Centers Governing Council, this summation of FQHC Clinic performance for July 1, 2023 – June 30, 2024, reflects the VCHCGC's oversight and management of Operations, Quality, and Finances for Health Resources and Services Administration (HRSA) H80CS33644: MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT FQHC Clinics.

FY 2024 – Year in Review

Accomplishments

Regulatory

- Operational Site Visit compliance
- DNV
- AEGD Accreditation
- TAPI – Eleven Awards

Improvements

- Quality Metrics
- Patient Experience
- Standardization
- Referrals ready to book in 3 days
- AHCCCS TIP 2.0

Services

- Primary Care
  - Mobile Health
  - DEEP
  - IV Infusion
- IBH
  - Peri-Natal Cert.
  - Expansion
  - SU and MAT
- Dental
  - Pediatric Dentist
  - 70% dental sealants

Engagement

- Governing Council
- Community Health Needs Assessment
- 2024-2026 Strategic Plan
- Conference presentations

Challenges

Workforce	Reimbursements	Patient Access	Resources	Governing Council
• Providers • Staff • Burnout • Compensation	• Payer Mix • Work Queues • 340B Concerns	• Appt wait times for new and est • Specialty • Walk in Clinics • Continuity of Care	• Space • Grant Funding • Growth	• Recruitment • Training • Participation • BOD Representation

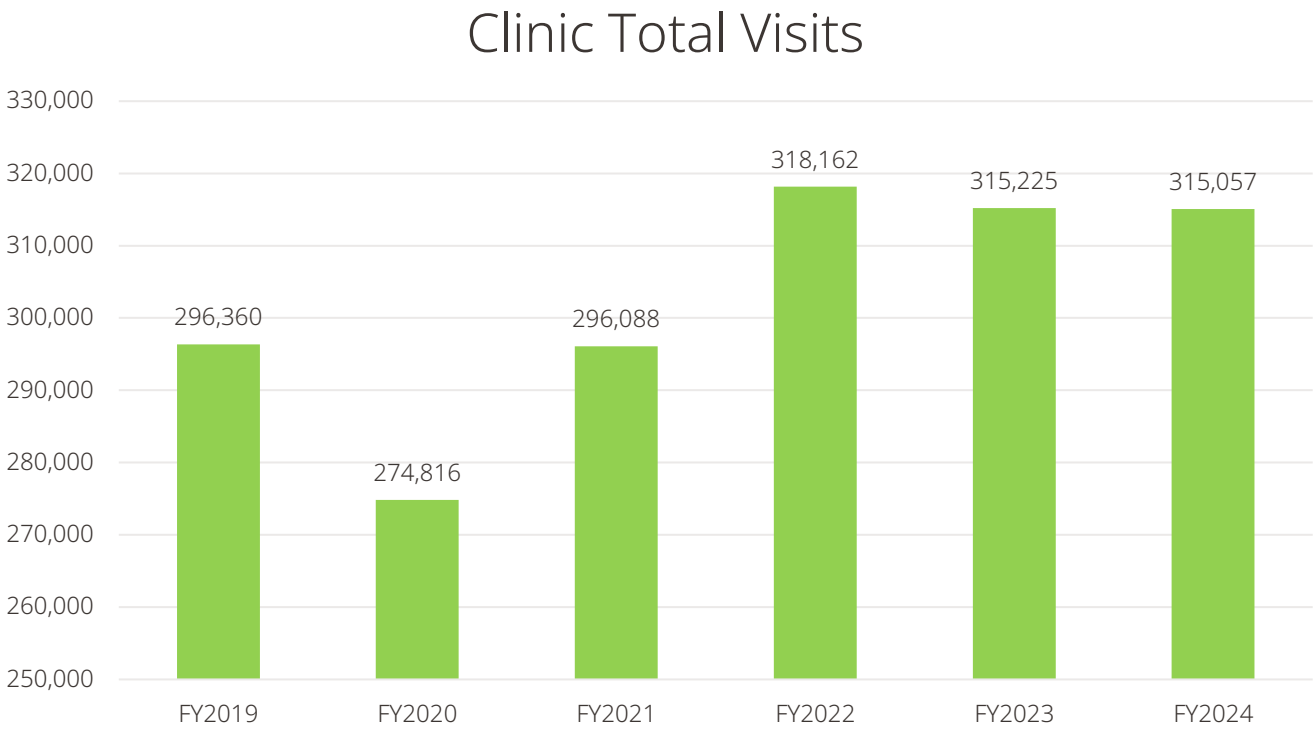
YOY Comparison to Phoenix Area FQHCs

Unique Unduplicated Patients Year Over Year- Phoenix FQHCs

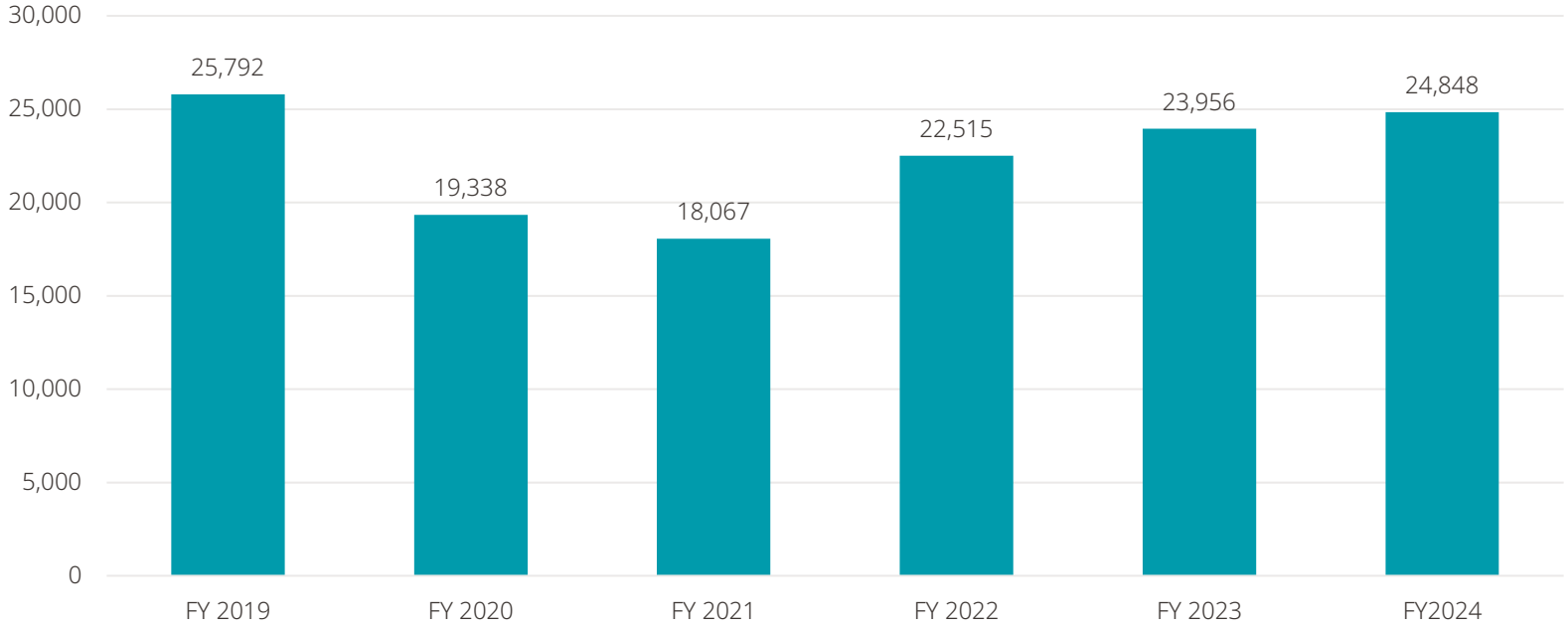
Health Center Name	2023	2022	2021	2020	2019
Adelante Healthcare Inc.	84,220	80,325	82,403	75,499	75,218
Circle the City	7,896	7,437	8,267	7,699	6,502
Horizon Health and Wellness, Inc.	14,966	11,604	10,275	9,494	8,981
Maricopa County Special Health District	87,572	87,875	83,659	78,554	87,378
Mountain Park Health Center	104,115	99,276	92,067	85,476	87,258
Native American Community Health Center, Inc.	7,980	9,528	9,626	9,885	10,276
Neighborhood Outreach Access to Health (NOAH)	47,427	47,431	45,440	37,921	36,948
Terros, Inc.	22,753	23,934	25,125	24,719	3,881
Valle Del Sol, Inc.	10,695	9,429	9,863	6,777	4,518
Wesley Community Center, Inc.	6,976	6,892	6,636	6,381	7,019

YOY Comparison to Phoenix Area FQHCs by Payer Mix

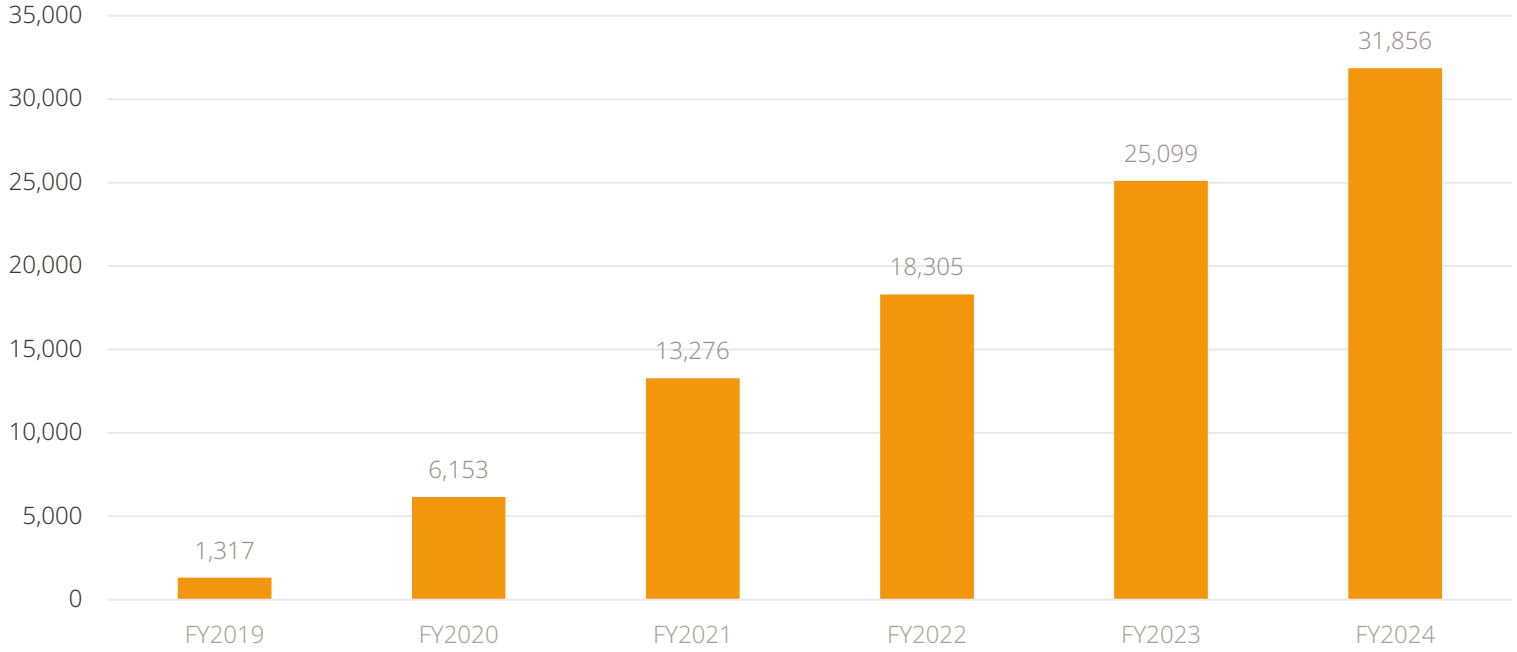
Health Center Name	Uninsured	Medicaid	Medicare	3rd Party	Other
Adelante Healthcare, Inc.	15.94%	41.19%	9.58%	3.31%	33.30%
Circle the City	14.49%	68.96%	14.02%	13.21%	2.53%
Horizon Health and Wellness, Inc.	3.17%	58.92%	10.87%	2.59%	27.03%
Maricopa County Special Health Care District	30.20%	44.40%	7.36%	5.24%	18.04%
Mountain Park Health Center	14.23%	63.57%	6.64%	2.20%	15.56%
Native American Community Health Center, Inc.	9.77%	61.33%	6.04%	4.07%	22.86%
Neighborhood Outreach Access to Health	17.01%	36.74%	9.53%	3.49%	36.71%
Terros, Inc.	6.33%	66.73%	8.64%	5.99%	18.31%
Valle Del Sol, Inc.	14.29%	69.17%	7.33%	5.35%	9.21%
Wesley Community Center, Inc.	59.81%	22.28%	4.39%	2.41%	13.53%



Dental Total Visits



Integrated Behavioral Health



Valleywise Health FQHC UDS Quality Measure Report Results: December 2023 CYTD

UDS Clinical Quality Measure	CY 2021	Adjusted Quartile Ranking 2021**	CY 2022	Adjusted Quartile Ranking 2022**	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	HP 2030 Goal	2021 UDS National Average	*Target Goal* (2022 UDS National Average)	Variance from Current Target	Intended Direction	Monthly Status (2022 UDS average)
Body Mass Index (BMI) Screening and Follow-Up Plan	34.26%	4	66.13%	2	89.54%	91.66%	92.88%	93.32%	93.53%	93.69%	93.79%	93.93%	92.11%	92.14%	92.20%	92.28%	N/A*	61.32%	61.04%	31.24%	↑	
Cervical Cancer Screening	49.77%	3	53.62%	2	54.68%	54.81%	54.76%	54.84%	55.10%	55.59%	55.83%	56.38%	56.45%	56.45%	56.73%	56.73%	84.3%	52.95%	53.99%	2.74%	↑	
Childhood Immunization Status (CIS)	47.72%	2	9.40%	4	3.13%	36.63%	38.85%	40.77%	39.78%	39.51%	39.72%	39.07%	38.40%	38.63%	38.06%	37.74%	N/A*	38.06%	33.23%	4.51%	↑	
Colorectal Cancer Screening	50.85%	1	51.39%	1	37.75%	33.64%	35.97%	37.79%	38.80%	39.90%	40.89%	42.43%	43.24%	44.24%	45.34%	46.06%	74.4%	41.93%	42.82%	3.24%	↑	
Controlling High Blood Pressure	47.76%	4	53.68%	4	46.59%	48.74%	51.35%	53.49%	55.36%	56.29%	58.15%	59.19%	59.10%	59.03%	58.65%	58.07%	N/A*	60.15%	63.40%	-5.33%	↑	
Diabetes: Hemoglobin A1c Poor Control	31.85%	2	30.28%	3	61.15%	53.74%	45.41%	40.59%	37.29%	34.46%	32.94%	31.56%	30.76%	30.30%	30.05%	30.13%	11.6%	32.29%	30.42%	-0.29%	↓	
Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	78.51%	3	75.07%	3	74.29%	75.78%	76.58%	76.74%	76.87%	77.07%	76.87%	76.53%	76.83%	76.85%	76.98%	76.88%	N/A*	78.25%	76.83%	0.05%	↑	
Screening for Clinical Depression and Follow-Up Plan if positive screen	48.75%	4	54.67%	4	48.25%	50.16%	52.84%	55.06%	58.36%	62.93%	65.53%	68.52%	70.21%	71.91%	73.44%	74.71%	13.5%	67.42%	70.02%	4.69%	↑	
Tobacco Use: Screening and Cessation Intervention	87.78%	2	88.88%	2	85.29%	86.69%	87.81%	88.43%	88.77%	89.03%	89.29%	89.61%	89.49%	89.74%	89.91%	90.09%	N/A*	82.34%	84.60%	5.49%	↑	
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	78.09%	2	78.55%	2	51.04%	54.62%	58.55%	60.81%	63.25%	67.00%	70.29%	73.96%	74.47%	75.20%	76.70%	78.08%	N/A*	68.72%	69.81%	8.27%	↑	
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	68.40%	4	71.68%	4	76.56%	77.44%	77.70%	77.41%	77.19%	77.00%	76.74%	76.83%	76.63%	76.21%	76.85%	76.81%	N/A*	73.10%	76.07%	0.74%	↑	
Breast Cancer Screening	58.56%	1	59.89%	1	51.10%	51.68%	54.03%	56.03%	56.79%	57.83%	58.79%	59.93%	60.17%	60.61%	61.02%	61.25%	80.5%	46.29%	50.28%	10.97%	↑	
HIV Screening	58.18%	1	63.40%	1	69.14%	68.38%	68.00%	67.91%	67.88%	67.86%	67.74%	67.66%	67.55%	67.48%	67.44%	67.44%	N/A*	38.09%	43.82%	23.62%	↑	

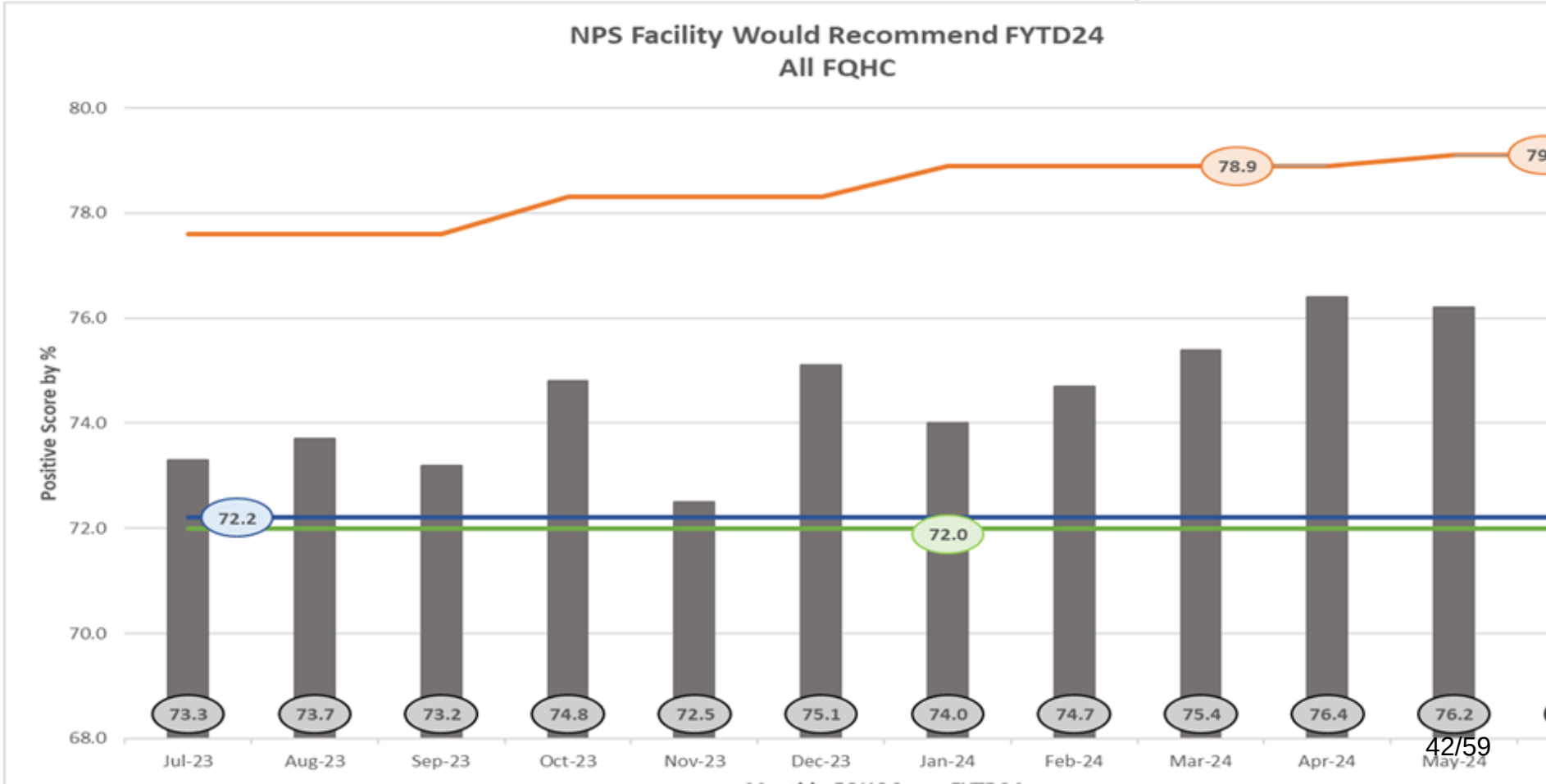
Monthly Status Key	
Target Met or Exceeded	Indicator has met or is exceeding the target goal
Approaching Target	Indicator is within 10% of the target goal
Not in Target	Indicator is > 10% outside target goal
Improving	Indicator is NOT meeting the target goal but has shown consistent improvement (3 months or longer) *Consistent improvement identified as ≥ 5% over a 3 month lookback period

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

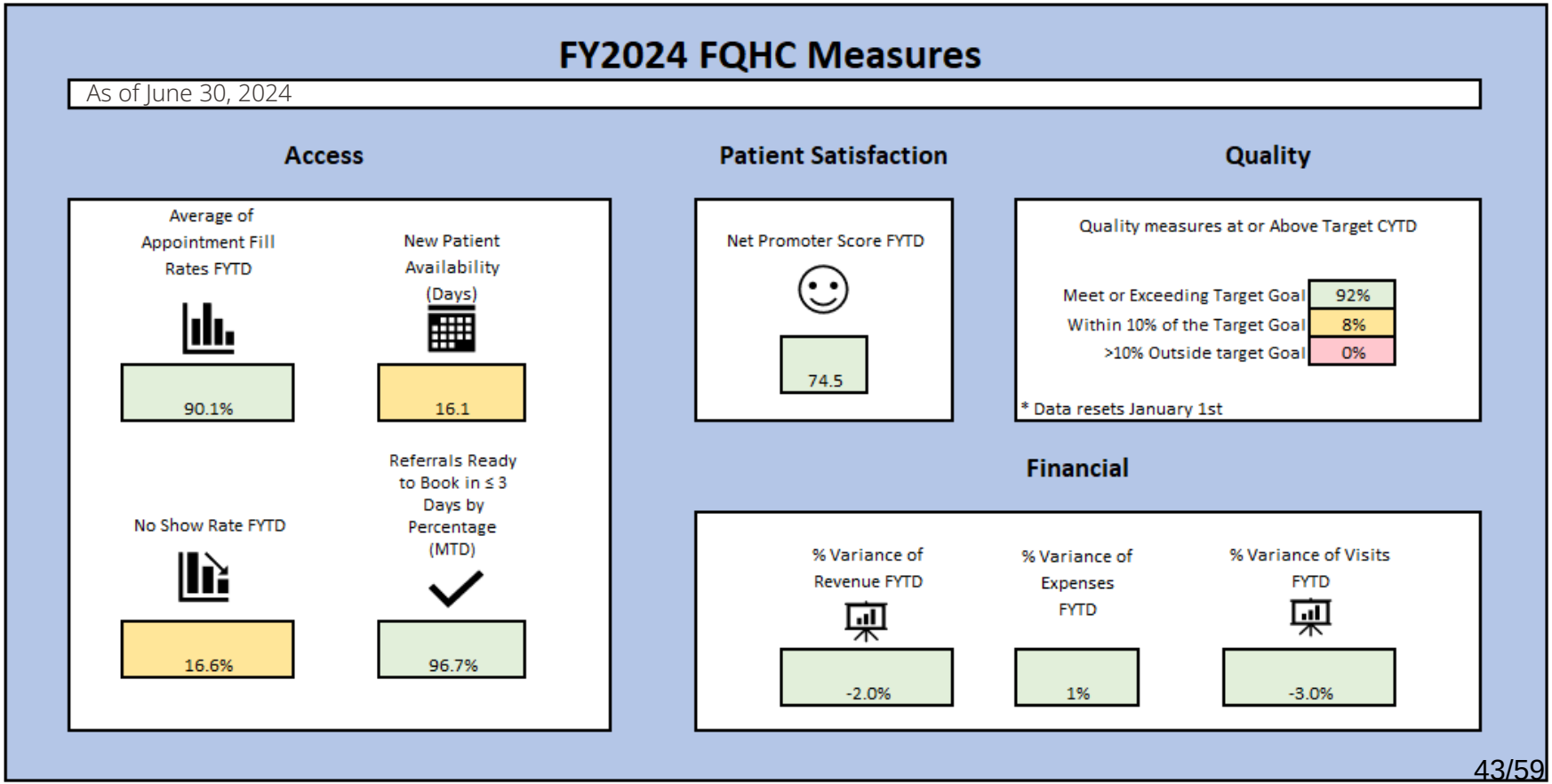
Valleywise Health FQHC Awardee Program Data - UDS Comparison - Calendar Year 2023

Quality Measures/Objectives	Healthy People 2030 Objective Target Goal	Valleywise Health FQHC Awardee	Adjusted Quartile Ranking 2023**	FQHC State Awardee	FQHC National Awardee
Maternal Care and Children's Health					
Early Entry into Prenatal Care (first visit in first trimester)	80.5%	58.48%	4	73.44%	70.98%
Low Birth Weight	N/A (Objective not equivalent to UDS Quality of Care Measure)	9.26%	3	7.37%	8.59%
Childhood Immunization Status	N/A (Objective not equivalent to UDS Quality of Care Measure)	38.12%	2	30.14%	30.23%
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	N/A (Objective not equivalent to UDS Quality of Care Measure)	78.14%	2	77.48%	71.50%
Dental Sealants for Children between 6-9 Years	42.5%	43.28%	3	64.04%	58.80%
Screening and Prevention Care					
Breast Cancer Screening	80.5%	61.32%	1	56.48%	52.40%
Cervical Cancer Screening	84.3%	57.20%	2	50.12%	54.96%
Colorectal Cancer Screening	74.4%	46.18%	1	39.48%	41.10%
HIV Screening	N/A (Objective not equivalent to UDS Quality of Care Measure)	67.50%	1	46.55%	48.45%
Preventive Care and Screening: Screening for Depression and Follow-Up Plan	13.5%	73.77%	3	77.86%	71.60%
Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow- Up Plan	N/A (Objective not equivalent to UDS Quality of Care Measure)	92.31%	1	72.97%	67.13%
Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	N/A (Objective not equivalent to UDS Quality of Care Measure)	90.12%	2	85.45%	84.90%

FQHC NPS Score FY24TD - Average 74.5



Governing Council Dashboard



FY 2025 – A Look Ahead

Strategic Plan for FQHCs

CHNA (2023-2025)

- Diabetes
- Heart Disease
- Hypertension
- Obesity/Overweight
- Substance Use
- Mental Health
- Access to Care
- Food Security

Strategic Plan (2024-2026)

- Chronic Condition Management and Prevention
- Patient Experience
- Quality Metrics
- SDOH
- Workforce Development

Priorities for 2025

- Patient Experience
- Continuity of Care
- Template Optimization and Provider Workload Distribution
- Community Engagement – Partnerships, Recruitment, Best Practices
- Governing Council – Education and Engagement

Immediate Priorities

- Patient Access – Fill Rates, Referrals, Team-Based Care, Expanded Hours, Walk-In Clinics, Mobile Health
- Primary Care Health Screenings
- Employee and Provider Satisfaction – Creating a Culture of Service and Satisfaction at Work
- Leadership Development

Questions?

6. Ambulatory Operational Dashboards

FQHC Measures

as of September 2024

Access

Average of Appointment Fill Rates FYTD

92.1%

New Patient Availability (Days)

16.2

No Show Rate FYTD

16.6%

Referrals Ready to Book in ≤ 3 Days by Percentage (MTD)

94.9%

Patient Satisfaction

Net Promoter Score FYTD

74.5

Quality

Quality measures at or Above Target CYTD

Meet or Exceeding Target Goal	77%
Within 10% of the Target Goal	15%
>10% Outside target Goal	8%

Financial

% Variance of Revenue FYTD

8%

% Variance of Expenses FYTD

-2%

% Variance of Visits MTD

4.1%

Valleywise Health

Ambulatory Pillars Dashboard

August 2024

	Community Health Centers											Other FQHC Clinics								Mobile Unit	
PATIENT EXPERIENCE - Ambulatory									**	***											
	Target	Avondale	Chandler	Guadalupe	West Maryvale	Mesa	North Phoenix	S. Central Phoenix	S. Phoenix Laveen	McDowell	McDowell - Mesa		VCHCs FYTD	Peoria Primary Care	Women's Clinic	Antepartum Testing	Diabetes Ed	Internal Medicine P	Peds Primary		Other FQHC-Peoria FYTD	Mobile Health Unit	Grand Total
Net Promoter Score FYTD *(Would recommend facility)*	≥73.0	76.8	75.3	67.6	74.7	75.4	76.4	75.8	74.8	78.3	63.0		75.5	72.8	75.3	66.7	70.8	71.2	73.1		72.8		74.5
	n-size	539	656	241	384	637	818	793	626	515	27		5,236	900	766	117	24	788	438		3,033		8,269
ACCESS - Ambulatory									**	***											
	Target	Avondale	Chandler	Guadalupe	West Maryvale	Mesa	North Phoenix	S. Central Phoenix	S. Phoenix Laveen	McDowell	McDowell - Mesa		VCHCs FYTD	Peoria Primary Care	Women's Clinic	Antepartum Testing	Diabetes Ed	Internal Medicine P	Peds Primary		Other FQHC-Peoria FYTD	Mobile Health Unit	Grand Total
Appointments Scheduled FYTD		4,685	6,039	2,517	4,817	6,706	7,092	7,468	5,269	6,911	267		51,771	8,643	7,683	3,242	635	5,821	4,651		30,675		82,446
Appointment Fill Rate FYTD		97.7%	93.6%	90.2%	94.6%	90.8%	95.4%	92.0%	95.5%	95.0%	91.0%		94.0%	89.2%	86.2%	100.0%	n/a	97.2%	75.5%		88.1%		92.1%
Scheduled Appointment No-Shows FYTD		592	859	498	812	1,130	1,253	1,601	910	1,403	42		9,100	1,307	1,171	280	121	870	869		4,618		13,718
No Show Rate FYTD	<18%	12.6%	14.2%	19.8%	16.9%	16.9%	17.7%	21.4%	17.3%	20.3%	15.7%		17.6%	15.1%	15.2%	8.6%	19.1%	14.9%	18.7%		15.1%		16.6%
FINANCE - Ambulatory									**	***												****	*****
		Avondale	Chandler	Guadalupe	West Maryvale	Mesa	North Phoenix	S. Central Phoenix	S. Phoenix Laveen	McDowell	McDowell - Mesa		VCHCs FYTD	Peoria Primary Care	Women's Clinic	Antepartum Testing	Diabetes Ed	Internal Medicine P	Peds Primary		Other FQHC-Peoria FYTD	Mobile Health Unit	Grand Total FQHC	FYTD FQHC
In-Person Visits FYTD		2,507	3,137	1,234	2,539	3,472	3,275	3,827	2,494	2,438	125		25,048	4,170	3,897	2,075	154	3,367	3,001		16,664			47,832
Virtual Visits FYTD		200	214	165	123	229	425	169	209	705	25		2,464	516	54	4	3	58	8		643			7,691
Total Actual Visits (includes Nurse Only Visits) FYTD		2,707	3,351	1,399	2,662	3,701	3,700	3,996	2,703	3,143	150		27,512	4,686	3,951	2,079	157	3,425	3,009		17,307			55,523
Budgeted Visits FYTD		3,122	3,220	1,260	2,551	3,295	2,894	3,378	2,375	2,999	205		25,299	4,805	3,822	1,666	255	3,237	2,751		16,536	59		51,228
Variance FYTD		(415)	131	139	111	406	806	618	328	144	(55)		2,213	(119)	129	413	(98)	188	258		771	(59)		4,295
Variance by % FYTD		-13.3%	4.1%	11.0%	4.4%	12.3%	27.9%	18.3%	13.8%	4.8%	-26.8%		8.7%	-2.5%	3.4%	24.8%	-38.4%	5.8%	9.4%		4.7%	-100.0%		8.4%
Total Number of Patients seen by provider FYTD		2,640	3,280	1,376	2,511	3,622	3,634	3,933	2,624	2,822	147		26,589	4,614	3,520			3,340	2,964		14,438		41,027	
BEHAVIORAL HEALTH - Ambulatory																								
Finance	Target	Avondale	Chandler	Guadalupe	West Maryvale	Mesa	North Phoenix	S. Central Phoenix	S. Phoenix Laveen		BH Psychiatry		BH FYTD	PEC	PXC									
In-Person Visits FYTD		134	91	45	116	207	131	32	62		77		1,661	354	412									
Virtual Visits FYTD		497	330	313	418	672	222	532	275		751		4,584	574	0									
Total Actual Visits FYTD		631	421	358	534	879	353	564	337		828		6,245	928	412									
Budget Visits FYTD		656	376	182	383	646	377	461	375		772		5,264	569	466									
Variance FYTD		(25)	45	176	151	233	(24)	103	(38)		56		981	359	(54)									
Variance by % FYTD		-3.8%	12.1%	96.2%	39.3%	36.1%	-6.5%	22.4%	-10.1%		7.3%		18.6%	63.1%	-11.7%									
DENTAL - Ambulatory										**														
Finance		Avondale	Chandler							McDowell			Dental FYTD	PEC	PXC									
Actual Visits FYTD		436	493							522			4,459	1,028	1,980									
Budget Visits FYTD		440	505							535			3,988	849	1,659									
Variance FYTD		-4	-12							-13			471	179	321									
% Variance FYTD		-0.9%	-2.4%							-2.4%			11.8%	21.1%	19.3%									

LEGEND:

- Not in Target
- 5% less than the target
- Target ≥ 95%

** Specialty HIV Community Health Center
*** Specialty HIV Community Health Clinic - McDowell Services
**** Grand Total FQHC for Total Number of Patients seen by provider FYTD includes Community Health Centers & Other FQHCs
***** FYTD FQHC for Actual/Budgeted Visits includes Community Health Centers, Other FQHCs, Dental, & OP Behavioral Health Clinics

Last Revised Date: 9/20/2024

Valleywise Health

FQHC Grand Total Actual vs Budgeted Visits
FY 2025 Trend

	Jul-24	Aug-24
FYTD Actual Visits	26,574	28,949
FYTD Budgeted Visits	23,417	27,810

Ambulatory Care

Quality /Regulatory Metrics	Reporting Program	2022 UDS National Average	CYTD 2023	Desired Direction	Jan 2024	Feb 2024	Mar 2024	Apr 2024	May 2024	June 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	YTD
Unified Data System																	
Body Mass Index (BMI) Screening and Follow-Up Plan	HRSA	> 61.04%	92.31%	↑	✓ 88.52%	✓ 90.00%	✓ 91.00%	✓ 91.68%	✓ 92.14%	✓ 92.32%	✓ 92.54%						✓ 92.54%
Numerator					11,701	18,898	25,203	30,516	35,632	39,102	42,822						42,822
Denominator					13,219	20,997	27,696	33,285	38,671	42,354	46,276						46,276
Cervical Cancer Screening	HRSA	> 53.99%	57.20%	↑	✓ 56.60%	✓ 55.73%	✓ 56.07%	✓ 56.53%	✓ 56.83%	✓ 57.30%	✓ 57.33%						✓ 57.33%
Numerator					4,087	6,271	8,122	9,744	11,308	12,420	13,484						13,484
Denominator					7,221	11,252	14,485	17,237	19,899	21,676	23,520						23,520
Childhood Immunization Status (CIS)	HRSA	> 33.23%	37.62%	↑	✗ 15.90%	✗ 16.88%	✗ 17.35%	✗ 17.83%	✗ 18.91%	✗ 19.11%	✗ 19.42%						✗ 19.42%
Numerator					62	108	139	164	198	210	222						222
Denominator					390	640	801	920	1,047	1,099	1,143						1,143
Colorectal Cancer Screening	HRSA	> 42.82%	46.18%	↑	✗ 33.81%	✗ 36.12%	✗ 37.84%	! 39.28%	! 40.95%	! 42.13%	✓ 43.46%						✓ 43.46%
Numerator					2,646	4,444	6,070	7,457	8,865	9,870	10,986						10,986
Denominator					7,827	12,303	16,041	18,983	21,649	23,430	25,280						25,280
Controlling High Blood Pressure	HRSA	> 63.40%	58.07%	↑	✗ 55.02%	! 57.13%	! 58.04%	! 59.45%	! 60.23%	! 61.77%	! 63.31%						! 63.31%
Numerator					2,889	4,729	6,265	7,594	8,733	9,700	10,430						10,430
Denominator					5,251	8,277	10,794	12,774	14,499	15,703	16,475						16,475
Diabetes: Hemoglobin A1c Poor Control	HRSA	< 30.42%	29.87%	↓	✗ 60.66%	✗ 52.48%	✗ 45.20%	✗ 40.32%	✗ 35.87%	✗ 33.50%	! 32.10%						! 32.10%
Numerator					2,222	3,044	3,415	3,571	3,589	3,612	3,711						3,711
Denominator					3,663	5,800	7,555	8,857	10,006	10,782	11,560						11,560
Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	HRSA	> 76.83%	76.08%	↑	! 76.52%	! 76.76%	! 76.31%	! 76.03%	! 76.27%	! 76.27%	! 76.42%						! 76.42%
Numerator					528	849	1,079	1,253	1,408	1,511	1,627						1,627
Denominator					690	1,106	1,414	1,648	1,846	1,981	2,129						2,129
Screening for Clinical Depression and Follow-Up Plan if positive screen	HRSA	> 70.02%	73.77%	↑	! 67.06%	! 69.50%	✓ 71.00%	✓ 73.11%	✓ 74.11%	✓ 75.62%	✓ 76.92%						✓ 76.92%
Numerator					7,743	12,607	16,997	21,081	25,194	28,263	31,598						31,598
Denominator					11,546	18,139	23,941	28,834	33,996	37,376	41,077						41,077
Tobacco Use: Screening and Cessation Intervention	HRSA	> 84.60%	90.12%	↑	! 81.84%	✓ 84.96%	✓ 86.85%	✓ 87.66%	✓ 88.13%	✓ 88.73%	✓ 89.31%						✓ 89.31%
Numerator					3,222	7,640	12,022	16,515	21,442	25,202	29,175						29,175
Denominator					3,937	8,992	13,843	18,840	24,329	28,404	32,666						32,666
Weight Assessment & Counseling for Nutrition & Physical Activity for Children & Adolescents	HRSA	> 69.81%	78.14%	↑	✗ 46.99%	✗ 50.71%	✗ 54.42%	✗ 57.29%	✗ 61.10%	! 64.69%	! 69.17%						! 69.17%
Numerator					1,016	1,823	2,584	3,410	4,375	5,145	6,245						6,245
Denominator					2,162	3,595	4,748	5,952	7,160	7,953	9,029						9,029
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	HRSA	> 76.07%	75.29%	↑	✓ 76.40%	✓ 76.88%	✓ 76.90%	✓ 76.71%	✓ 76.64%	✓ 76.60%	✓ 76.43%						✓ 76.43%
Numerator					3,470	5,543	7,222	8,493	9,605	10,363	11,109						11,109
Denominator					4,542	7,210	9,392	11,071	12,533	13,529	14,535						14,535
Breast Cancer Screening	HRSA	> 50.28%	61.32%	↑	✓ 53.51%	✓ 55.39%	✓ 56.07%	✓ 57.41%	✓ 58.32%	✓ 59.88%	✓ 60.80%						✓ 60.80%
Numerator					1,829	2,937	3,817	4,593	5,263	5,790	6,301						6,301
Denominator					3,418	5,302	6,807	8,000	9,025	9,670	10,364						10,364
HIV Screening	HRSA	> 43.82%	67.50%	↑	✓ 71.15%	✓ 70.15%	✓ 70.15%	✓ 70.07%	✓ 69.99%	✓ 69.96%	✓ 69.90%						✓ 69.90%
Numerator					8,937	13,823	18,089	21,725	25,302	27,801	30,524						30,524
Denominator					12,561	19,706	25,787	31,005	36,150	39,739	43,667						43,667

‡ -

****Data is pulled from the UDS dashboard on the 1st Friday of every month**

Data Not Available	~
Data is not final and subject to change	‡
Equal or greater than benchmark	✓
Less than 10% negative variance	!
Greater than 10% negative variance	✗

*Known issue - childhood immunizations measure not currently recognizing PCV15 or PCV20 vaccine formulations
-Result/Impact: false negative scoring on measure
-Resolution: 2024 value set update expected in Q3 Epic Upgrade

Valleywise Health

Ambulatory Pillars Dashboard

Data Dictionary

Federally Qualified Health Centers

	Data Source	Owner	Frequency	System
PATIENT EXPERIENCE - Ambulatory				
Net promoter score (Would recommend facility)	A customer loyalty index calculated based on a patient's response on a scale of 1-10 to the question "How likely would you be to recommend this facility to your family and friends?". The NPS = % Promoters (9 or 10 responses) - % Detractors (0-6 responses) *Scores are limited to include only FQHC departments by clinic cost center on this dashboard for: 416603, 416608, 416609, 416704, 416707, 416711, 416601, 416701, 416613, 476707, 576130, 576101, 476101, 476102, 476104, 476106, 476105* *Dental, Financial Counseling, Lab, Radiology, Ophthalmology, and other Specialty departments within each community health center are excluded from locational roll ups*	NRC Real Time Score Summary *pulled by Amanda Jacobs	Monthly	NRC Health - Department Summary Report
ACCESS - Ambulatory				
Appointments Scheduled FYTD	All appointment visits are included, except from Dental, Financial Counseling, Lab, Radiology, Ophthalmology, and other Specialty departments. *For FYTD. *Note: For active providers only - FYTD does not account for historical provider information	FQHC Appointment Statistics by Clinic Details (Prior Month) Report *last modified 6/2/2020 by Vondra Dee Nason *pulled by Amanda Jacobs	Monthly	EPIC Report
Appointment Fill Rate FYTD	Provider schedule utilization metric calculated by number of patients to appointment slots available. *For MTD and FYTD. Data is pulled from Epic Clarity: Availability table, which looks at the Provider Templates. *Limited to MD, NP, PA, and Midwives - as of February 2024 data*	FQHC Clinic Performance Dashboard FQHC Provider Availability *pulled by Amanda Jacobs	Monthly	Tableau
Scheduled Appointment No-Shows FYTD	All No- show appointment visits are included, except from Dental, Financial Counseling, Lab, Radiology, Ophthalmology, and other Specialty departments. *For FYTD.	FQHC Appointment Statistics by Clinic Details (Prior Month) Report *last modified 6/2/2020 by Vondra Dee Nason *pulled by Amanda Jacobs	Monthly	EPIC Report
No Show Rate FYTD	Percentage of Scheduled Patients who were a "No show" patient or same day cancellation. *For FYTD.	Amanda Jacobs	Monthly	Formula
FINANCE - Ambulatory				
In-Person Visits FYTD	Total Actual Visits (includes nurse only visits) FYTD - Virtual Visits FYTD	Nancy Horskey	Monthly	Axiom
Virtual Visits FYTD	Virtual Telemedicine Visits (telephonic/audio/visual/other virtual type) FYTD	Nancy Horskey	Monthly	Axiom
Total Actual Visits (includes nurse only visits) FYTD	All visits per Clinic (visit count methodology). For the Fiscal Year to Date	Nancy Horskey	Monthly	Axiom
Budgeted Visits FYTD	All budgeted visits per Clinic (visit count methodology) For the Fiscal Year to Date	Nancy Horskey	Monthly	Axiom
Variance FYTD	Actual Visits FYTD (includes nurse only visits) - Budgeted Visits FYTD. For the Fiscal Year to Date	Amanda Jacobs	Monthly	Formula
Variance by % FYTD	Variance FYTD / Budgeted Visits FYTD (%) For the Fiscal Year to Date	Amanda Jacobs	Monthly	Formula
Total Number of Patients seen by provider	Completed visits for provider only	Maria Aguirre	Monthly	Epic - Clarity Query
Grand Total FQHC	Includes Month Totals from Community Health Centers, Dental, Other FQHC, and OP Behavioral Health clinics	Amanda Jacobs	Monthly	Formula
FYTD FQHC	Includes FYTD Totals from Community Health Centers, Dental, Other FQHC, and OP Behavioral Health clinics	Amanda Jacobs	Monthly	Formula

Valleywise Health

Ambulatory Pillars Dashboard

Data Dictionary

Federally Qualified Health Centers

	Data Source	Owner	Frequency	System
FINANCE - BEHAVIORAL HEALTH				
In-Person Visits FYTD	Total Actual Visits (includes nurse only visits) FYTD - Virtual Visits FYTD	Nancy Horskey	Monthly	Axiom
Virtual Visits FYTD	Virtual Telemedicine Visits (telephonic/audio/visual/other virtual type) FYTD	Nancy Horskey	Monthly	Axiom
Total Actual Visits FYTD	Actual Visits per BH Clinic (all visits per Valleywise Health month end visit count methodology) For fiscal year to date	Nancy Horskey	Monthly	Axiom
Budgeted Visits FYTD	Budgeted Visits per BH Clinic (all visits per Valleywise Health month end visit count methodology) For fiscal year to date	Nancy Horskey	Monthly	Axiom
Variance FYTD	Actual Visits FYTD (includes nurse only visits) - FYTD Budgeted Visits	Amanda Jacobs	Monthly	Formula
Variance by % FYTD	Variance FYTD/ Budgeted Visits FYTD (%)	Amanda Jacobs	Monthly	Formula
FINANCE-DENTAL				
Actual Visits FYTD	All visits per Dental Clinic (visit count methodology) For fiscal year to date	Nancy Horskey	Monthly	Axiom
Budgeted Visits FYTD	All budgeted visits per Dental Clinic (visit count methodology) For fiscal year to date	Nancy Horskey	Monthly	Axiom
Variance FYTD	Actual Visits FYTD (includes nurse only visits) - FYTD Budgeted Visits	Amanda Jacobs	Monthly	Formula
Variance by % FYTD	Variance FYTD/ Budgeted Visits FYTD (%)	Amanda Jacobs	Monthly	Formula

Valleywise Health

Ambulatory Pillars Dashboard

Data Dictionary

Federally Qualified Health Centers

		Data Source	Owner	Frequency	System
QUALITY - Ambulatory					
Quality /Regulatory Metrics	**Required by:**		Quality	Monthly	
Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	**CMS69v12**	**Description:** Percentage of patients aged 18 years and older with a BMI documented during the current encounter or during the measurement period AND who had a follow-up plan documented if BMI was outside of normal parameters **Numerator:** Patients with a documented BMI during the encounter or during the measurement period, AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the measurement period **Denominator:** All patients aged 18 and older on the date of the encounter with at least one eligible encounter during the measurement period ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0069v12*	Quality	Monthly	EPIC/UDS
Cervical Cancer Screening	**CMS124v12**	**Description:** Percentage of women 21-64 years of age who were screened for cervical cancer using either of the following criteria: * Women age 21-64 who had cervical cytology performed within the last 3 years * Women age 30-64 who had cervical human papillomavirus (HPV) testing performed within the last 5 years **Numerator:** Women with one or more screenings for cervical cancer. Appropriate screenings are defined by any one of the following criteria: * Cervical cytology performed during the measurement period or the two years prior to the measurement period for women 24-64 years of age by the end of the measurement period * Cervical human papillomavirus (HPV) testing performed during the measurement period or the four years prior to the measurement period for women who are 30 years or older at the time of the test **Denominator:** Women 24-64 years of age by the end of the measurement period with a visit during the measurement period ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0124v12*	Quality	Monthly	EPIC/UDS
Childhood Immunization Status (CIS)	**CMS117v12**	**Description:** Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV), one measles, mumps and rubella (MMR); three or four H influenza type B (Hib); three hepatitis B (Hep B); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (Hep A); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday **Numerator:** Children who have evidence showing they received recommended vaccines, had documented history of the illness, had a seropositive test result, or had an allergic reaction to the vaccine by their second birthday **Denominator:** Children who turn 2 years of age during the measurement period and who have a visit during the measurement period ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0117v12*	Quality	Monthly	EPIC/UDS

		Data Source	Owner	Frequency	System
Colorectal Cancer Screening	**CMS130v12**	**Description:** Percentage of adults 45-75 years of age who had appropriate screening for colorectal cancer **Numerator:** Patients with one or more screenings for colorectal cancer. Appropriate screenings are defined by any one of the following criteria: * Fecal occult blood test (FOBT) during the measurement period * Flexible sigmoidoscopy during the measurement period or the four years prior to the measurement period * Colonoscopy during the measurement period or the nine years prior to the measurement period * Stool DNA (sDNA) withFIT during the measurement period or the two years prior to the measurement period * CT Colonography during the measurement period or the four years prior to the measurement period **Denominator**: Patients 46-75 years of age by the end of the measurement period with a visit during the measurement period ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0130v12*	Quality	Monthly	EPIC/UDS
Controlling High Blood Pressure	**CMS165v12**	**Description**: Percentage of patients 18-85 years of age who had a diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period, and whose most recent blood pressure was adequately controlled (<140/90mmHg) during the measurement period **Numerator:** Patients whose most recent blood pressure is adequately controlled (systolic blood pressure < 140 mmHg and diastolic blood pressure < 90 mmHg) during the measurement period **Denominator:** Patients 18-85 years of age by the end of the measurement period who had a visit during the measurement period and diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period. ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0165v12*	Quality	Monthly	EPIC/UDS
Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)	**CMS122v12**	**Description:** Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period **Numerator:** Patients whose most recent HbA1c level (performed during the measurement period) is >9.0% or is missing, or was not performed during the measurement period. **Denominator:** Patients 18-75 years of age with diabetes with a visit during the measurement period ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0122v12*	Quality	Monthly	EPIC/UDS
Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	**CMS164v7**	**Description:** Percentage of patients 18 years of age and older who were diagnosed with acute myocardial infarction (AMI), or who had a coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCIs) in the 12 months prior to the measurement period or who had an active diagnosis of IVD during the measurement period, and who had documented use of aspirin or another antiplatelet during the measurement period **Numerator:** Patients who had an active medication of aspirin or another antiplatelet during the measurement year **Denominator:** Patients 18 years of age and older with a visit during the measurement period who had an AMI, CABG, or PCI during the 12 months prior to the measurement year or who had a diagnosis of IVD overlapping the measurement year ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/sites/default/files/ecqm/measures/CMS164v7.html*	Quality	Monthly	EPIC/UDS

		Data Source	Owner	Frequency	System
Screening for Clinical Depression and Follow Up Plan	**CMS2v13**	**Description:** Percentage of patients aged 12 years and older screened for depression on the date of the encounter or up to 14 days prior to the date of the encounter using an age-appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of or up to two days after the date of the qualifying encounter **Numerator:** Patients screened for depression on the date of the encounter or up to 14 days prior to the date of the encounter using an age-appropriate standardized tool AND if positive, a follow-up plan is documented on the date of or up to two days after the date of the qualifying encounter **Denominator**: All patients aged 12 years and older at the beginning of the measurement period with at least one qualifying encounter during the measurement period ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0002v13*	Quality	Monthly	EPIC/UDS
Tobacco Use: Screening and Cessation Intervention:	**CMS138v12**	**Description:** Percentage of patients aged 12 years and older who were screened for tobacco use one or more times during the measurement period AND who received tobacco cessation intervention during the measurement period or in the six months prior to the measurement period if identified as a tobacco user **Numerator:** *Patients who were screened for tobacco use at least once during the measurement period and *Who received tobacco cessation intervention during the measurement period or in the six months prior to the measurement period if identified as a tobacco user **Denominator:** Patients aged 12 years and older seen for at least two medical visits in the measurement period or at least one preventive medical visit during the measurement period. ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0138v12*	Quality	Monthly	EPIC/UDS
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	**CMS155v12**	**Description:** Percentage of patients 3–17* years of age who had an outpatient visit with a primary care physician or OB/GYN and who had evidence of height, weight, and body mass index (BMI) percentile documentation, who had documentation of counseling for nutrition, and who had documentation of counseling for physical activity during the measurement period **Numerator:** Children and adolescents who have had: *their height, weight, and BMI percentile recorded during the measurement period and *counseling for nutrition during the measurement period and *counseling for physical activity during the measurement period **Denominator:** Patients 3 through 17 years of age by the end of the measurement period, with at least one outpatient visit with a PCP or OB/GYN during the measurement period ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0155v12*	Quality	Monthly	EPIC/UDS

		Data Source	Owner	Frequency	System
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	**CMS347v7**	**Description:** Percentage of the following patients - all considered at high risk of cardiovascular events - who were prescribed or were on statin therapy during the measurement period: *All patients who were previously diagnosed with or currently have a diagnosis of clinical atherosclerotic cardiovascular disease (ASCVD), including an ASCVD procedure; OR *Patients aged 20 to 75 years who have ever had a low-density lipoprotein cholesterol (LDL-C) level >= 190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial hypercholesterolemia; OR *Patients aged 40-75 years with a diagnosis of diabetes; OR *Patients aged 40 to 75 with a 10-year ASCVD risk score of >= 20 percent **Numerator:** Patients who are actively using or who receive an order (prescription) for statin therapy at any time during the measurement period **Denominator:** All patients who were previously diagnosed with or currently have a diagnosis of clinical ASCVD, including an ASCVD procedure. Patients aged 20 to 75 years at the beginning of the measurement period who have ever had a laboratory result of LDL-C >=190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial hypercholesterolemia.Patients aged 40 to 75 years at the beginning of the measurement period with Type 1 or Type 2 diabetes. Population 4: Patients aged 40 to 75 at the beginning of the measurement period with a 10-year ASCVD risk score (i.e., 2013 ACC/AHA ASCVD Risk Estimator or the ACC Risk Estimator Plus) of >= 20 percent during the measurement period. ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0347v7*	Quality	Monthly	EPIC/UDS
Breast Cancer Screening	**CMS125v12**	**Description:** Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer in the 27 months prior to the end of the Measurement Period **Numerator:** Women with one or more mammograms any time on or between October 1 two years prior to the measurement period and the end of the measurement period **Denominator:** Women 52-74 years of age by the end of the measurement period with a visit during the measurement period ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0125v12*	Quality	Monthly	EPIC/UDS
HIV Screening	**CMS349v6**	**Description:** Percentage of patients aged 15-65 at the start of the measurement period who were between 15-65 years old when tested for Human immunodeficiency virus (HIV) **Numerator:** Patients with documentation of an HIV test performed on or after their 15th birthday and before their 66th birthday **Denominator:** Patients 15 to 65 years of age at the start of the measurement period AND who had at least one outpatient visit during the measurement period ***Exclusions/Exceptions Outlined via eCQI Resource Center:*** *https://ecqi.healthit.gov/ecqm/ec/2024/cms0349v6*	Quality	Monthly	EPIC/UDS