

Valleywise Health's 10-year Campus Master Plan Recommendations

What's next for Valleywise Health?

The projects under our 2014 Care Reimagined plan were coming to conclusion.

- Opened the replacement hospital in June 2024.
- Built Community Health Centers in South Phoenix/Laveen, North Phoenix, Peoria, Maryvale and Mesa.
- Outpatient Specialty Care in a new building in Peoria
- Purchased and renovated Maryvale Hospital as a Behavioral Health Hospital and renovated a 24/7 ED

We needed a plan for the NEXT 10 years to take us into the future.

What's next for Valleywise Health?

Put a steering team together in 2022 including:

- Chief Administrative Officer, Chief Clinical Officer, Chief Financial Officer, Chief Nursing Officer, CEO of District Medical Group, CEO of FQHC clinics, SVP Behavioral Health, SVP Strategy, Marketing and Communications and SVP Government Relations

What questions did we need answered?

- What neighborhoods and underserved communities don't have a Valleywise Health presence?
- How should our health system's campus prepare for future expansion of services?
- What specific programs and campus infrastructure will best support our patient populations and expanding communities?

Initial Work

- **Stakeholder Interviews: 2022**
 - Board Members
 - Physician Leadership
 - Senior Leadership
- **Data Analyzed: 2022-2024**
 - Inpatient admissions, discharges by payor, zip code, age, gender stratification.
 - Outpatient volumes by location, physician, payor, zip code, age, gender stratification
 - ER census by hour/day by payor, zip code, age, gender stratification
 - Procedural data to include Imaging, GI, Surgical and Cardiology
 - Daily bed census
 - Clinic capacity by location
 - AZ population demographics by region (Census data)
 - State inpatient data
 - Geographical data on Google Maps
- **Site Tours**

Primary Care Recommendations

Central Region

- We know that central region's ambulatory facilities are aging, and the population is growing.
- To support the growing population in the central region, an expanded primary care presence will be required.
- An enhanced primary care presence will provide additional teaching opportunities for our learners and will support our teaching programs.
- This will require rebuilding some primary care clinics, e.g., South Central and CHC-Phoenix.
- The new clinics will have expanded spaces and additional exam rooms to meet industry standards.



Primary Care and Outpatient Services

South Central Clinic



Replace the South Central clinic with a modern facility.

Family Medicine Residency program is currently in this clinic

Space at the South Central Clinic is constrained today, and opportunity exists to expand Valleywise Health’s teaching mission by modernizing the South Central clinic.

Recommendations:
New Replacement

Comprehensive Health Center-Phoenix



Replace the CHC-Phoenix due to its age and space limitations.

Expanding and modernizing the CHC-Phoenix facility will provide broader teaching opportunities at the main hospital campus.

This will further enhance Valleywise Health’s Family Medicine residency program by creating access to a more diverse patient population, and an enriched learning experiences for students and residents.

Recommendations:
New Replacement

Chandler Clinic



Replace the Chandler clinic due to its age and space limitations.

Factors that need to be considered include population served and accessibility for our target population

Recommendations:
New Replacement

Behavioral Health Assessments and Recommendations

Valleywise Behavioral Health– Site Assessment Summary

BH Phoenix - Annex

93 Patient Beds



Assessment Findings | Constraints

Significant issues with roof and drainage, frequent leaks and water damage. Lack of usable patient outdoor amenity space during summer months. Plumbing throughout in need of replacement. Poor building insulation.

Assessment Findings | Pros

Proximity to main hospital is optimal.

Recommendations:

New Replacement

BH Mesa - Desert Vista

126 Patient Beds



Assessment Findings | Constraints

Constant **maintenance and upgrades**, both interior (phased refresh currently underway) and exterior. **All exterior windows in need of replacement.** Current rooms and units, not meeting industry standards. Issues with mechanical systems. Overall shortage of parking.

Assessment Findings | Pros

Ample secure and shaded outdoor amenities for patients. Indoor gym frequently used, especially during summer.

Recommendations:

Update and modernize existing structures

BH Maryvale

192 Patient Beds



Assessment Findings | Constraints

Issues with water leakage from floors above, has caused damage in admin areas. All AHUs are original and will need of replacement. Kitchen is in original condition, requires refresh and upgrade.

Assessment Findings | Pros

Most recently updated facility, new finishes and modern look. Comprehensive services including ED. Rooms all meeting industry size standards. No triple-occupancy rooms.

Recommendations:

Maintain regularly/Upgrade/Campus Update

Inpatient Behavioral Health

- Population growth across the region will continue to drive significant growth in demand.
- Building a replacement Behavioral Health tower should include:
 - Outpatient behavioral health clinics for seamless delivery of behavioral health care on the main campus, with expanded treatment offerings. Examples include early intervention programs, “intermediate” care programs, additional fully integrated outpatient and inpatient programs.
 - Expanded teaching spaces for enriched practical learning experiences.
 - Spaces that offer resources to support the reintegration of patients into their communities. Examples include spaces that offer trainings on activities of daily living and interviewing skills, patient workout gyms etc.
 - Inpatient beds that can treat complex patients presenting with dual medical and behavioral conditions.
 - Larger, welcoming spaces that contribute to mental health healing and well-being.
 - Additional private, single rooms to create a balanced environment between single and double occupancy rooms.
 - Increase overall bed capacity for treatment of behavioral health patients.

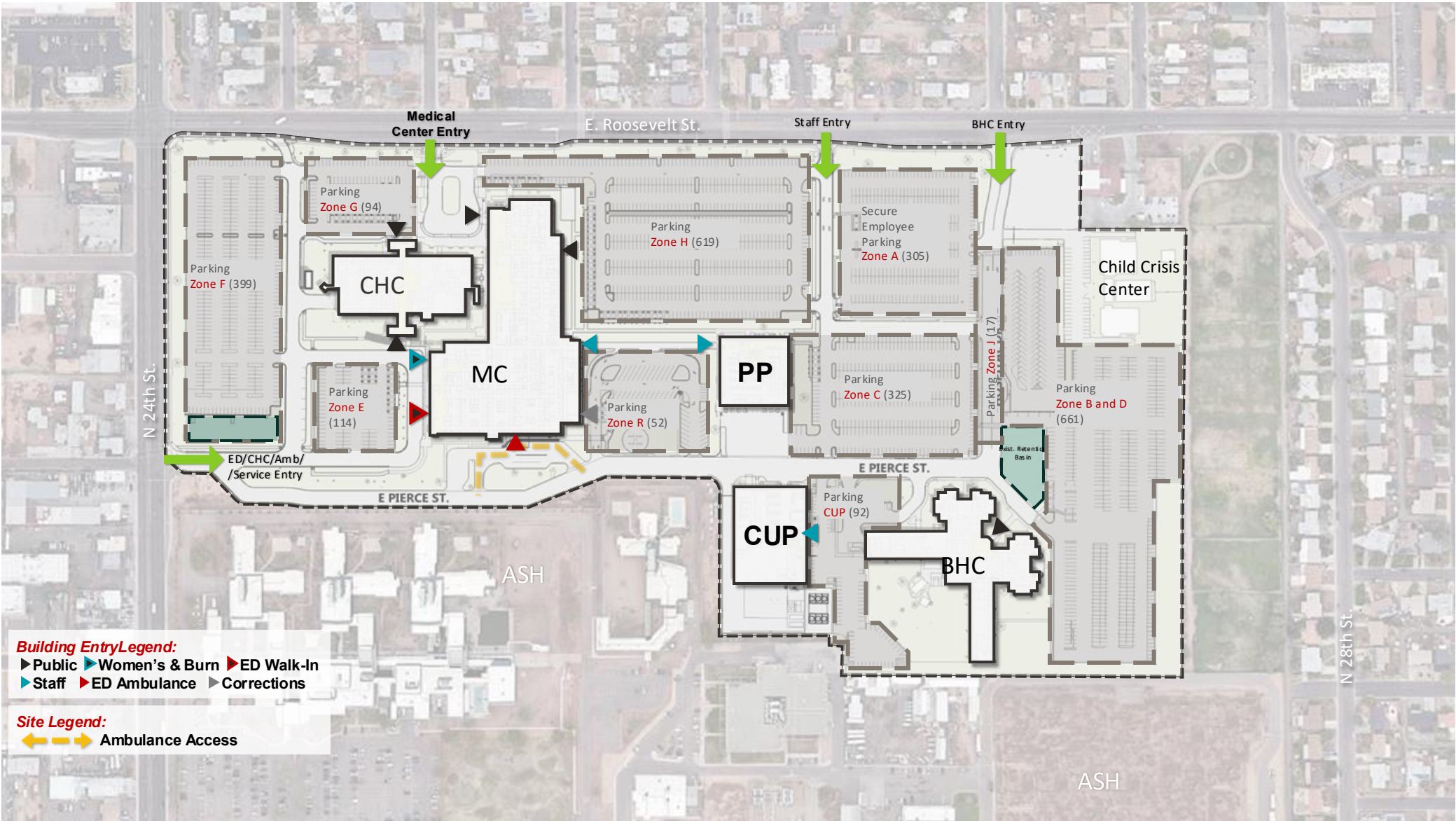
Inpatient Assessments and Recommendations

Inpatient Bed Capacity

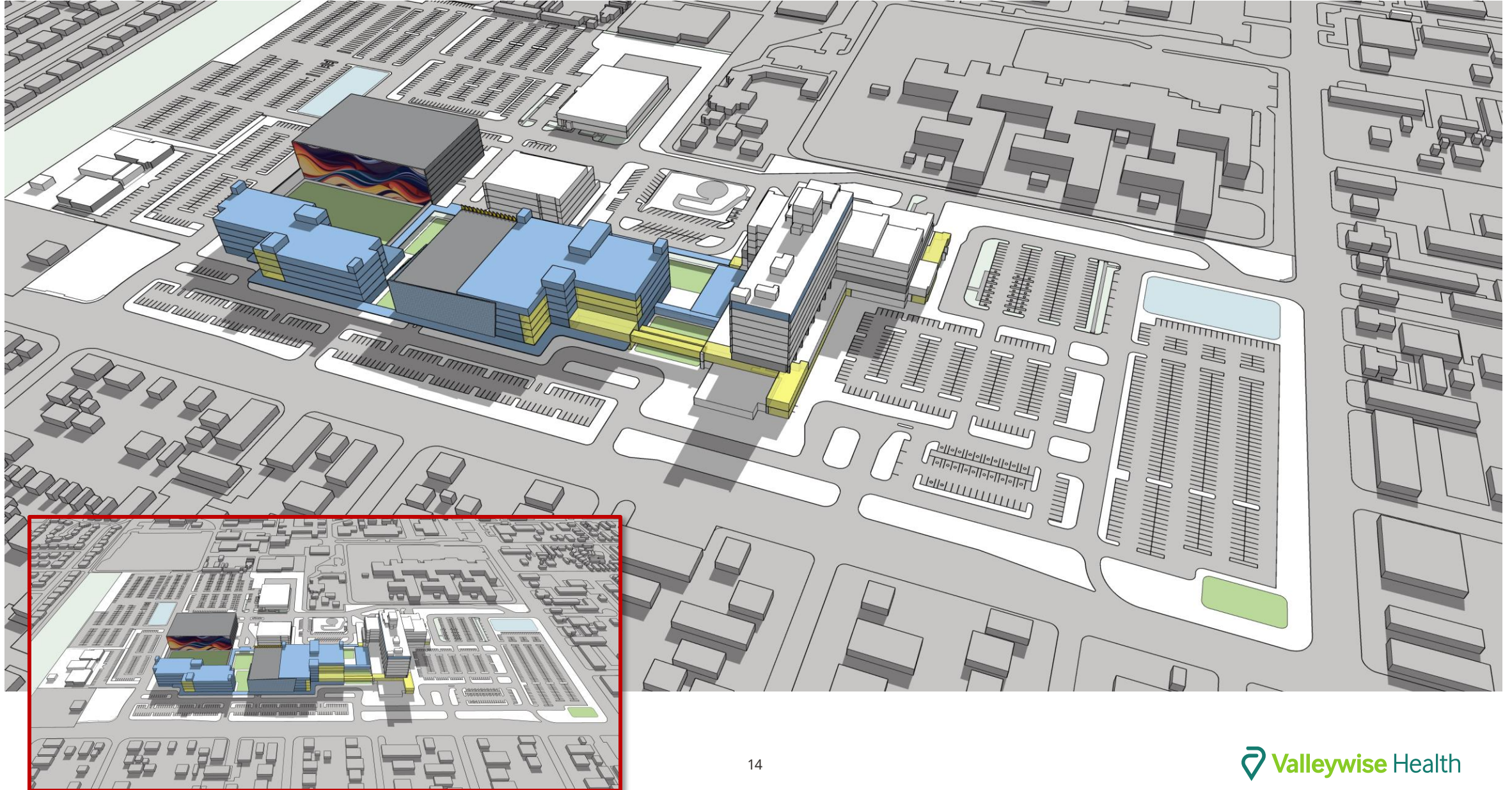
- We have reached our projected inpatient volumes sooner than anticipated. We are operating at our projected 2028 average daily census.
- This high census is requiring us to move patients to overflow units, and some patients are having to wait in the Emergency Department and Surgery recovery rooms for inpatient beds.
- As more patients seek care in the emergency department, increased numbers of patients are requiring extended treatment for their condition, but do not meet the criteria for admission to the hospital. **Adding observation beds** will create additional capacity to continue the treatment and create appropriate follow-up for the conditions evaluated.
- In addition to our MedSurg capacity issues, we are experiencing higher than anticipated volumes in our L&D and Postpartum units. Our current beds can accommodate ~ 2,400 annual deliveries. Based on the first 9 months of data, we are projecting closer to 3,000+ annual deliveries. **Remodel parts of the 5th and 6th floor for additional capacity.**
- 10th floor of the current hospital was shelled for future expansion. As we are exceeding our capacity today, **build out the 10th floor** as we continue to see growth.
- Due to the projected shortage of beds, further in the future a new bed tower is recommended.

Campus Master Plan Recommendations

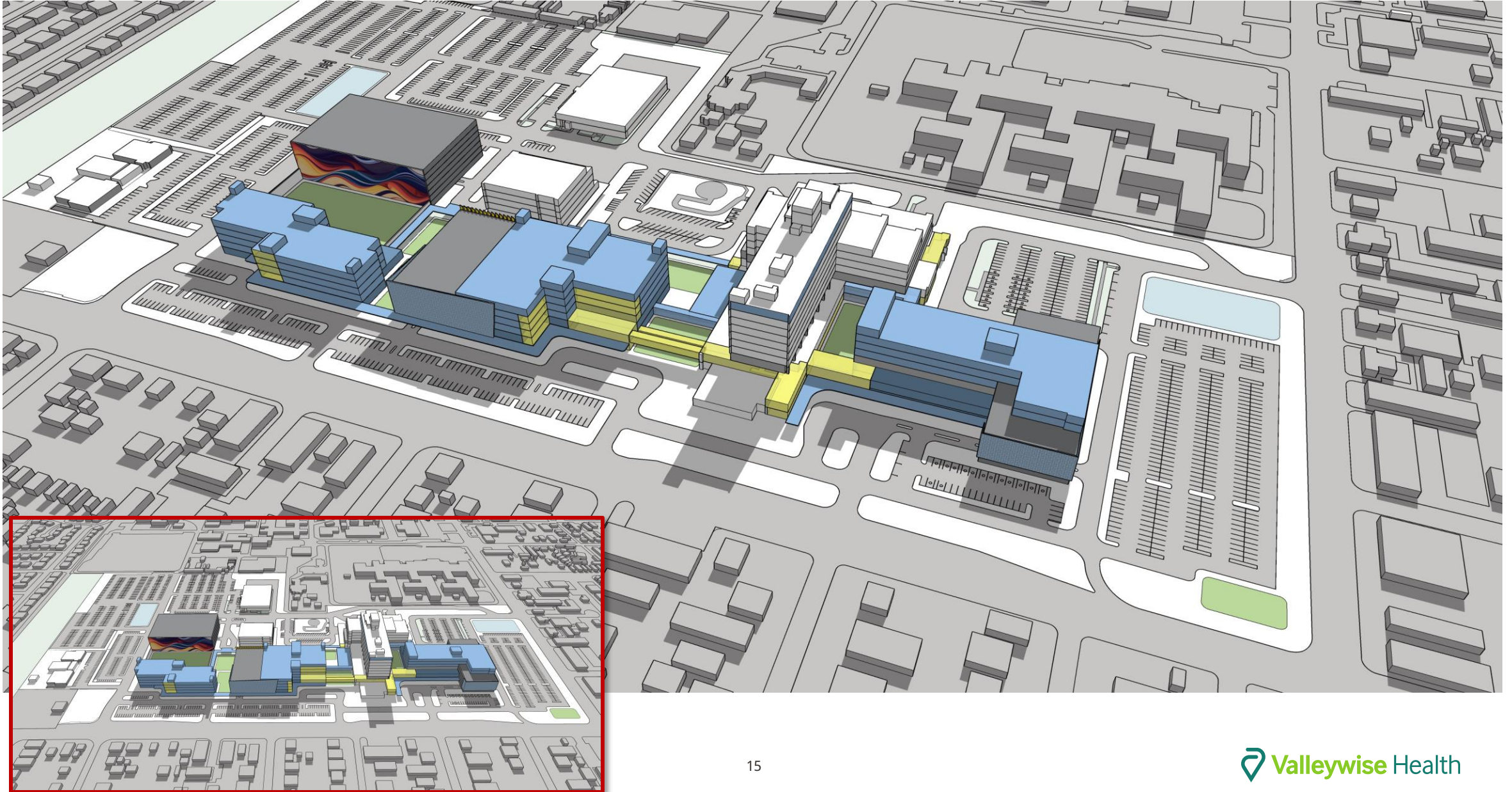
Main Campus Plan – Post Opening, Demolition - 2025/2026



Recommended Roosevelt Campus Master Plan – 3D – Phase 1



Recommended Roosevelt Campus Master Plan – 3D – Phase 2



Estimated Capital Costs – Phase 1

PHASE 1

Grand Total
(Project Cost)
+ Escalation

PHASE I:

Inpatient Renovation/Additions for increased capacity: ~\$49.50 M
(Obs expansion, 10th floor build out, OR build out and 5th/6th floor renovations)

Primary Care Rebuild and Expansion ~\$138.51 M
(South Central, Chandler and additional expansion)

New Buildings:

New CHC/Outpatient Surgery (+ Parking Garage 2) ~\$362.00 M

New BHC (Annex) + Outdoor Rec. ~\$220.00 M

Parking Garage 1 (1300) ~\$64.90 M

MEP Infrastructure/Site Development/Landscaping: ~\$53.93 M

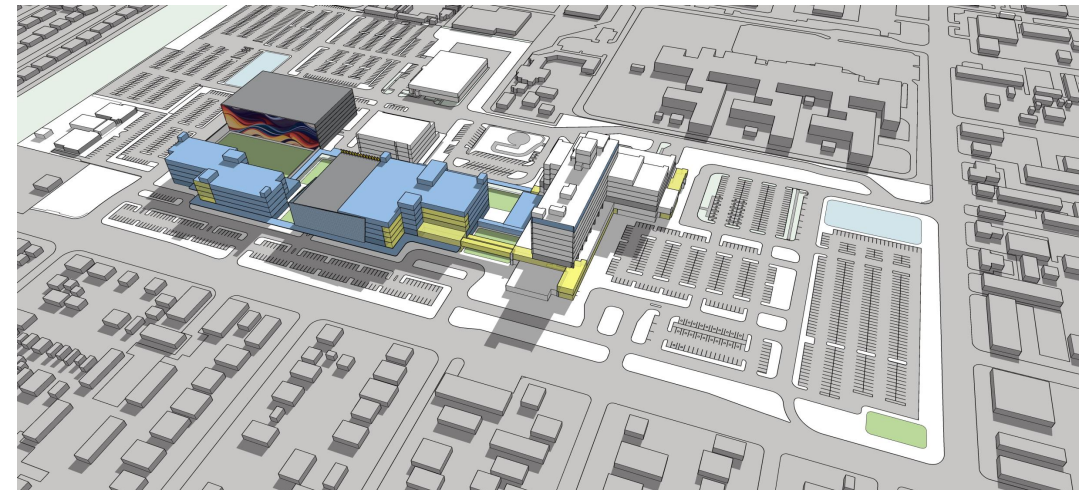
Demolition of existing CHC and Annex: ~\$4.44 M

Sustainability Efforts: ~\$4.10 M

PHASE I Sub-Total: ~\$897.4 M

PHASE I: ~\$898 M

- Estimated Capital Costs are \$898 M.
- Inflation and escalation factors have been built into the calculations.
- These calculations include contingency.
- Costs reflect an “all in” scenario, inclusive of equipment and project costs.



Estimated Capital Costs – Phase 2

PHASE 2

Grand Total
(Project Cost)
+ Escalation

PHASE II:

Renovation/Additions: ~\$27.30 M
(Outpatient Surgery Center shelled space build out, inpatient renovations)

New Buildings:

New Inpatient Tower (Includes Parking) ~\$359.00 M

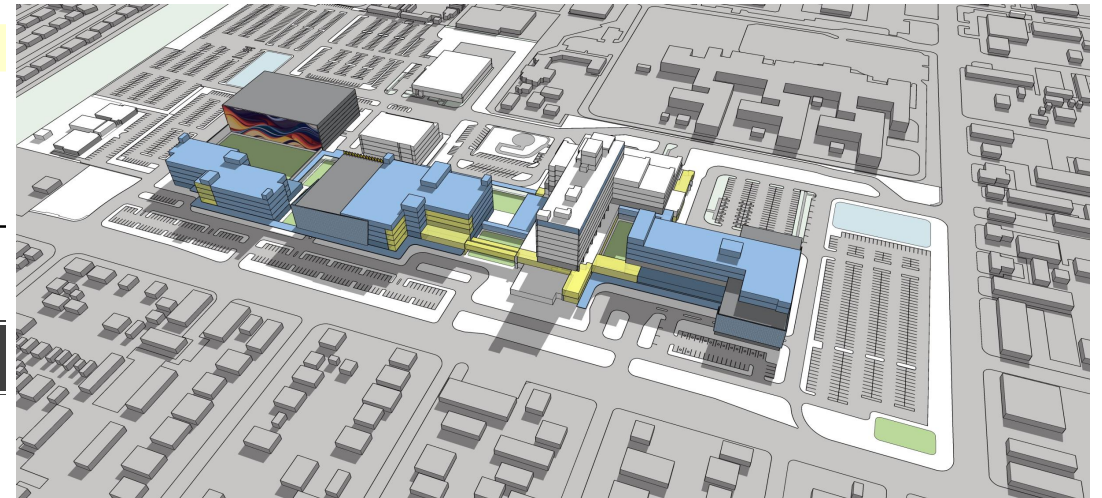
MEP Infrastructure/Site Development/Landscaping: ~\$4.82 M

Sustainability Efforts: ~\$4.20 M

PHASE II Sub-Total: ~\$395.5 M

PHASE II: ~\$396 M

- Estimated Capital Costs are \$396 M.
- Inflation and escalation factors have been built into the calculations.
- These calculations include contingency.
- Costs reflect an “all in” scenario, inclusive of equipment and project costs.



What happens now?

Our Board voted to support Phase 1 of the Campus Master Plan of \$898 million and a General Obligation Bond Election on Nov. 4th 2025.

The county elections department has assigned a proposition number to our measure – Prop 409

Final Thoughts & Questions



Thank you!