

## Minutes

**Maricopa County Special Health Care District  
Board of Directors Meeting  
Virginia G. Piper Charitable Trust Pavilion  
2609 East Roosevelt Street, Phoenix, Arizona 85008  
3<sup>rd</sup> Floor, Board Room  
January 24, 2024, 1:00 p.m.**

**Present:** J. Woodfin Thomas, Chairman, District 4  
Mark G. Dewane, Vice Chairman, District 2  
Mary A. Harden, RN, Director, District 1  
Kate Brophy McGee, Director, District 3 – *participated remotely*

**Absent:** Mary Rose Garrido Wilcox, Director, District 5

**Others Present:** Steve A. Purves, FACHE, President & Chief Executive Officer  
Michael D. White, MD, MBA, Executive Vice President, Chief Clinical Officer  
Claire Agnew, CPA, MBA, Executive Vice President, Chief Financial Officer  
Lia Christiansen, MBC, Executive Vice President, Chief Administrative Officer  
Sherry Stotler, RN, MSN, Senior Vice President, Chief Nursing Officer  
Mark M. MacElwee, MD, Chief of Staff  
Ijana Harris, JD, Senior Vice President, General Counsel

**Guest Presenters/  
Speakers:** Patti Gentry, Valleywise Health Foundation Board of Directors, Chairman  
Nicole Rivet, Valleywise Health Foundation, President & Chief Executive Officer  
Crystal Garcia, MBA/HCM, RN, Vice President, Specialty Services, Quality and Patient Safety  
Michael Fronske, Legislative and Governmental Affairs Director  
L.T. Slaughter, CPA, MBA, Chief Compliance Officer  
Michael Murphy, Communications Director

**Recorded by:** Melanie Talbot, Chief Governance Officer; and Clerk of the Board  
Cynthia Cornejo, Senior Deputy Clerk of the Board

### **Call to Order:**

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

### **Roll Call**

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

For the benefit of all participants, Ms. Talbot announced the Board members participating remotely.

### **Moment of Silence**

Chairman Thomas announced that a member of the Valleywise Health workforce had recently passed away and requested a moment of silence.

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**Pledge of Allegiance**

Chairman Thomas led the Pledge of Allegiance.

**Call to the Public**

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

**Mission Statement**

Mr. Purves read the mission statement aloud.

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

1. Approval of Consent Agenda
  - a. Minutes:
    - i. Approve Maricopa County Special Health Care District Board of Directors meeting minutes dated November 21, 2023
    - ii. Approve Maricopa County Special Health Care District Board of Directors meeting minutes dated December 13, 2023
  - b. Contracts:
    - i. Approve a new agreement (MCO-24-002-MSA) between Blue Cross and Blue Shield of Arizona, Inc, and Maricopa County Special Health Care District dba Valleywise Health, to allow members to receive dental services through Valleywise Health dental providers
    - ii. Approve addendum #7 to the contract (90-19-192-1-07) between GE Precision Healthcare LLC, a GE HealthCare Business, and Maricopa County Special Health Care District dba Valleywise Health, to add GE XR Service at Valleywise Community Health Center-Avondale from February 1, 2024 through August 31, 2024
    - iii. Approve amendment #2 to the contract (90-16-044-6-02) between Carefusion Solutions, LLC, and Maricopa County Special Health Care District dba Valleywise Health, to add equipment for the Pyxis stations at the new acute care hospital
    - iv. Approve a new grant agreement (90-24-184-1) between the Arizona Early Childhood Development and Health Board Phoenix South Regional Partnership Council, and Maricopa County Special Health Care District dba Valleywise Health, for grant funding for Family Resource Center services at the Valleywise Community Health Center-West Maryvale

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

1. Approval of Consent Agenda
  - b. Contracts, cont.:
    - v. Approve amendment #3 to the sub-recipient agreement (90-23-13-1-03) between Arizona Association of Community Health Centers dba Arizona Alliance for Community Health Centers (AACHC), and Maricopa County Special Health Care District dba Valleywise Health, for grant funding for facility alterations and renovations at Valleywise Community Health Center-Chandler
    - vi. Approve a new agreement (90-24-189-1) between Abbott Laboratories, Inc, and Maricopa County Special Health Care District dba Valleywise Health, for the Alinity i analyzer equipment, service, products, and consumables for the lab at the new acute care hospital
    - vii. Approve amendment #1 to the intergovernmental agreement (90-22-167-1-01) between Maricopa County, Ryan White Part A Program, and Maricopa County Special Health Care District dba Valleywise Health, to increase funding and revise the scope of service
    - viii. Approve amendment #4 to the contract (90-17-083-1-04) between Progressive Management Systems, and Maricopa County Special Health Care District dba Valleywise Health, to add collection services for employee contract defaults with the Sign On and Retention (SOAR) program
    - ix. Approve amendment #3 to the sub-recipient agreement (90-23-14-1-03) between Arizona Association of Community Health Centers dba Arizona Alliance for Community Health Centers (AACHC), and Maricopa County Special Health Care District dba Valleywise Health, for grant funding for facility renovations at Valleywise Community Health Center-Guadalupe
    - x. Approve a new agreement (90-24-196-1) between Elevate Patient Financial Solutions, LLC, and Maricopa County Special Health Care District dba Valleywise Health, for revenue cycle services to include underpayment recovery, third party liability reimbursement, workers compensation, and Veterans Administration services
  - c. Governance:
    - i. Approve revisions to policy 06503 S: HRSA Legislative Mandate Compliance Policy
    - ii. Approve Valleywise Health Foundation's ALL IN Campaign donor recognition requests
  - d. Medical Staff:
    - i. Approve Valleywise Health's Medical Staff credentials for December 2023 and January 2024
    - ii. Approve Valleywise Health's Advanced Practice Clinician/Allied Health Professional Staff credentials for December 2023 and January 2024
    - iii. Approve proposed revisions to the Certified Nurse Mid-Wife Privileges/Practice Prerogatives

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

1. Approval of Consent Agenda
  - d. Medical Staff, cont.:
    - iv. Approve proposed revisions to the Nurse Practitioner – Women’s Health Privileges/Practice Prerogatives
    - v. Approve proposed revisions to the Nurse Practitioner Family & Community Medicine Privileges/Practice Prerogatives
    - vi. Approve proposed revisions to the Physician Assistant Family & Community Medicine Privileges/Practice Prerogatives
    - vii. Approve proposed revisions to the Department of Family & Community Medicine Privileges
    - viii. Approve proposed revisions to the Global Advanced Hand Surgery Privileges
    - ix. Approve proposed revisions to the Department of Surgery-Plastic Surgery Privileges
    - x. Approve proposed revisions to the Department of Orthopedic Surgery Privileges
    - xi. Approve proposed revisions to the Department of Surgery Privileges
  - e. Care Reimagined Capital:
    - i. INTENTIONALLY LEFT BLANK
  - f. Capital:
    - i. INTENTIONALLY LEFT BLANK

**MOTION:** Director Harden moved to approve the consent agenda. Vice Chairman Dewane seconded.

**VOTE:** 4 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee,  
Director Harden  
0 Nay  
1 Absent: Director Wilcox

2. Presentation on Valleywise Health Foundation’s 2024 Organizational and Budget Goals

Ms. Gentry announced that 2023 was a year of incredible milestones for the Valleywise Health Foundation, including but not limited to raising \$54.2 million through the ALL IN capital campaign, and providing \$10.8 million in direct support to Valleywise Health.

Ms. Rivet stated the Amended and Restated Cooperative Services Agreement (CSA) between the Maricopa County Special Health Care District and the Valleywise Health Foundation, approved in April 2023, required an annual report related to the Foundation’s operational processes and fundraising results.

She highlighted key achievements made throughout calendar year (CY) 2023, including the receipt of two major gifts. The first being \$3 million in commitments for the First Episode Centers, from the Stardust Foundation and other donors.

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

2. Presentation on Valleywise Health Foundation's 2024 Organizational and Budget Goals, cont.

Ms. Rivet said the second major gift was a \$2.1 million grant from CVS Health to support poly-chronic patients and will serve nearly 500 patients over three years. If successful, there was an opportunity to secure an additional \$1.4 million in grant monies.

She reviewed other achievements made throughout the year, including the receipt of \$1 million to establish the Herbert Johnson Louis, MD Faculty and Resident Education Endowment, A Night in the Valley raising over \$1 million, and the Foundation generating over \$15 million in revenue, with \$10.8 million provided to Valleywise Health in direct support. She expressed gratitude to Vice Chairman Dewane and his wife, as they were co-chairs of A Night in the Valleywise fundraising event.

She reiterated that the ALL IN capital campaign raised \$54.2 million, with an additional \$5.4 million in outstanding pledges. She noted the Foundation surpassed all CSA benchmarks.

Ms. Rivet provided an overview of the Foundation's annual areas of focus, philanthropy, people, and engagement. A major goal was to increase the number of donors, retain current donors, and reengage donors that had lapsed. There was also focus on obtaining unrestricted support and she outlined various strategies that implemented to reach the goal. A leadership development program was created for employees to increase professionalism and the skill set of the team.

The Foundation strived to stand-out amongst other foundations within the community. She and the staff worked to develop operational processes, instituted annual performance reviews, and moved to a new office space.

The Foundation's goals for CY 2024 consisted of continuing to improve build operational processes, increase alignment and collaboration between the Foundation and Valleywise Health. The budget included \$13.9 million in total revenue, with \$11.2 million provided to Valleywise Health in support. The cost per dollar raised was \$0.27 per dollar.

She thanked all that were involved with the Valleywise Health Foundation.

Director Harden requested clarification on the dates for future fundraising activities, specifically the date for A Night in the Valley.

Ms. Rivet explained that A Night in the Valley was tentatively scheduled for December 2024, however, the finalized date was Saturday, November 9, 2024.

3. Discuss and Review Valleywise Health's Patient Experience Data and Action Plans

Ms. Garcia outlined the initiatives that were being developed to improve patient experience scores throughout Valleywise Health. She explained the organization used two different platforms within National Research Corporation (NRC) to gain insight into the patient's perspective.

Catalyst was used for inpatient setting, to meet the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) requirement for Centers for Medicare and Medicaid Services (CMS). RealTime was used for the ambulatory setting, for both specialty services and primary care within the Federally Qualified Health Centers (FQHCs).

One of the organization's goals was to improve the overall HCAHPS rating of the hospital, with the current benchmark set to be better than 69.6% by the end of fiscal year (FY) 2024. After the first quarter, the rating was 69.4 percent. At the start of the fiscal year, the Patient Improvement Collaborative was developed, which would focus on patient satisfaction scores for three areas, inpatient, FQHCs, and specialty services.

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

3. Discuss and Review Valleywise Health's Patient Experience Data and Action Plans, cont.

The Patient Improvement Collaborative began utilizing a priority matrix, a tool used to identify which questions would have the greatest impact on the overall score, if improved.

For inpatient, it was determined staff would focus on the 'got help as soon as wanted' question.

Director Harden noted the low score related to the cleanliness of the rooms and asked what measures were in place to improve the score.

Ms. Christiansen said that room cleanliness was evaluated daily, and environmental services leadership was involved in those meetings.

Ms. Garcia provided an overview of the action plans in place to improve inpatient scores, including but not limited to the well-performing units provide assistance to the units with lower scores.

Director Harden stated that the scores were subjective, based on the patient's perspective, which may differ from the actual response time.

Ms. Garcia agreed that the scores reflected the patient's opinion, however, staff would work to improve on that perception.

The benchmark for the specialty clinics located within Valleywise Comprehensive Health Centers-Phoenix and Peoria was to achieve a net promoter score (NPS) of at least 73% for 'would you recommend the facility'. Both locations were performing better than the benchmark, however, it was determined that there was an opportunity to improve the question 'seen in a timely manner'.

The benchmark for the FQHCs was to achieve a NPS of 73% for the same question as the specialty clinics. Ms. Garcia noted that the benchmark was currently being met, with a 73.2% positive response. The area of focus for the FQHCs was related to the 'registration staff helpful' question.

She explained the standardized process the Patient Improvement Collaborative used to determine the areas of focus for all three areas, to yield the greatest impact to the overall scores. Action plans were then developed, with timelines and identified the accountable leaders.

She provided an overview of the actions plans in place for each specific area. For the inpatient specific items, the configuration of the call light system was reviewed and standardized on all floor, and staff was given suggestions on how to maximize hourly rounding on each unit. For the specialty clinics, staff would manage the perception of the patients by communicating wait times and informing them that there may be multiple clinics within the one office.

Director Harden said there may be times when a patient needed appointments with various specialist, and asked if there were efforts to schedule all appointments on one day, to minimize the number of trips the patient had to make to the facility.

Ms. Stotler said the schedule staff attempted to coordinate all appointments; however, it was not always feasible.

Ms. Garcia outlined the action plans in place for the FQHCs, including regularly reviewing patient comments, ensuring registration leadership was involved in appropriate meetings and received accurate information.

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

4. Discussion and Possible Action on Valleywise Health’s 2024 Legislative Agenda and/or the Maricopa County Special Health Care District’s position regarding proposed State and Federal legislative items

Mr. Fronske reviewed the statistics of the current legislative session, which has been in session for 17 days, 999 bills had been posted, and three resolutions had been passed.

The Governor released a \$16 billion budget, with \$24 million included to improve health care licensing systems, and \$24 million included for medical school initiatives for the three state universities. The legislature was currently working from a baseline budget.

There were 32 bills sent to staff for comment and an additional 36 bills were being monitored. He provided a summary of some bills that may impact the organization, specifically Senate Bill (SB) 1037, Arizona Health Care Cost Containment System (AHCCCS) comprehensive dental care, which would allow for the \$1,000 in AHCCCS coverage for emergency dental to be used for preventative dental for adults.

Mr. Fronske requested the ability to support three bills; House Bill (HB) 2290, certificates of operations, interfacility transfer fill, as it would allow for hospitals to operate or contract to operate interfacility transfers. Staff was working with the sponsors on a clarifying amendment to ensure Valleywise Health would be included. The second bill was HB 2035, insurance claims, appeals, provider credentialing, which would streamline the claims and appeals process and reduce the credentialing timeline within the health plans. The third bill was HB 2078, advisory committee; subcommittee; exemption, which would exclude such committees from the public meeting laws and would affect the Valleywise Community Health Centers Governing Council. He reviewed the bill with Board Counsel and Board staff, and it was recommended that the organization support the measure.

He also requested the ability to support or oppose bills and amendments with timely feedback to the Board.

Director Brophy McGee addressed HB 2035, which was sponsored by Representative Cook, and asked if he had sponsored other healthcare bills that may impact Valleywise Health.

Mr. Fronske said he was unaware of other healthcare bills sponsored by Representative Cook, but he would research and provide additional information at a later time.

**MOTION:** Director Harden moved to authorize staff to support or oppose bills and amendments with timely feedback to the Board, with the addition to support House Bill 2290, Certificates of operation; interfacility transfers; House Bill 2035, Insurance; claims; appeals; provider credentialing; and House Bill 2078, Advisory committee, subcommittee; exemption. Vice Chairman Dewane seconded.

**VOTE:** 4 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee, Director Harden  
0 Nay  
1 Absent: Director Wilcox

Mr. Fronske provided an overview of the federal issues that staff would be focused on, including the continued effort to support an emergency funding pathway to address essential workforce needs and ongoing advocacy for an essential hospital designation, 340B funding, and protecting hospitals from site-neutral payment cut proposals.

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

5. Annual Compliance and Conflict of Interest Training and Education

Mr. Slaughter provided an overview of the Board's role in the oversight of the compliance program at Valleywise Health. He explained that to properly oversee the compliance program, the Board had to understand the healthcare environment, key regulations, changes in the healthcare market, and the various nuances involved. A risk assessment was used to identify issues to address, action plans were developed to mitigate the risks, and staff monitored the organization's compliance with regulations from numerous regulatory agencies.

Chairman Thomas commented on the complexity of the variety of regulations that Valleywise Health had to comply with and expressed his appreciation that there were processes in place to remain in compliance with all requirements.

Mr. Slaughter outlined the top risks for Valleywise Health in 2023, including the move to the new acute care hospital, residual effects of the COVID-19 pandemic, and cybersecurity.

A key element to an effective compliance program was for the Board to act in good faith and to ensure an adequate information and reporting system was in place. He reviewed the main business units within Valleywise health, along with the major payers and sources of revenue. There were internal processes in place to monitor each department as it related to the overall performance of the organization.

The Valleywise Health model included the FQHCs, which were governed by the Valleywise Community Health Centers Governing Council through the Co-Applicant Operational Agreement between the Maricopa County Special Health Care District and the Valleywise Community Health Centers Governing Council. He outlined the reasoning for the separate council and the responsibilities shared between the two governing bodies.

The Enterprise Risk Management process was used to identify risk, prioritize and score risks, and respond to the risk by implementing action plans. Mr. Slaughter outlined the internal controls, a system-based preventative control and presented the top 25 risk factors for FY 2024. The internal audit utilized the Committee of Sponsoring Organizations of the Treadway Commission (COSO) model, which implement three types of controls: preventive, detective, and corrective.

He outlined the elements of an effective compliance program and highlighted how Valleywise Health addressed each element, including the annual review of the Code of Conduct and Ethics, which was recently revised to update definitions, clarify roles and responsibilities, and separate the Board members from the workforce. The Code of Conduct and Ethics also integrated Board policy related to Board Member Conflict of Interest and Gift policy.

Other aspects of an effective compliance program included having a compliance officer, providing effective training, having lines of communication, ensuring policies and procedures were in place, auditing and monitoring risks, instituting corrective actions, and monitoring the effectiveness of the compliance plan.

He provided an overview of regulations, such as Anti-Kickback Statute, Stark Law, False Claims Act, and the Health Information Portability and Accountability Act (HIPAA). He explained the Emergency Medical Treatment and Active Labor Act (EMTALA) and named the Valleywise Health facilities that were subjected to regulation and required to log, screen, and stabilize every patient, every time.

Mr. Slaughter noted the Deficit Reduction Act was applicable since Valleywise Health received more than \$5 million in Medicaid funding annually. He announced that the organization was deemed 100% compliant through a recent audit.

He concluded that Valleywise Health proactively mitigated risks by complying with all of the elements of an effective compliance program.



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

5. Annual Compliance and Conflict of Interest Training and Education, cont.

Director Harden requested a larger image of the Enterprise Risk Model graph.

Director Brophy McGee requested clarification on the various compliance committees and asked which committee a Board member participated in.

Mr. Slaughter stated that a Board member, currently Chairman Thomas, participated on the Finance, Audit and Compliance Committee. There was also the hospital compliance committee, which was cross-functional throughout the organization, with different management teams participating.

Director Brophy McGee asked if Mr. Slaughter was an employee of Valleywise Health.

Mr. Slaughter stated that he was a contractor.

Director Brophy McGee asked if there may be considered a conflict or may cause an issue for the organization.

Ms. Harris said that Mr. Slaughter had occupied the position for several years, and she did not believe that it created a conflict.

Director Brophy McGee reiterated an earlier request pertaining to the development of a policy related to transparency and disclosure of gifts received by Board members.

Ms. Harris said that she would work with Director Brophy McGee on the request to gain further insight into the request.

6. Discuss and Review Valleywise Health's November and December 2023 Financials, Statistical Information and Quarterly Investment of Funds Report

Ms. Agnew reviewed the statistical information for November 2023, noting total admissions were 11.8% better than budget, emergency department visits were 1.3% better than budget, and ambulatory visits were better than budget by 0.7%, or 127 visits.

She discussed the payer mix for November 2023, stating the higher number of emergency department visits led to a higher percentage in the uninsured category. There was also an increase in uninsured outpatient surgery cases that contributed to the shift in payer mix.

She then reviewed the financial statements for November 2023. Despite increased volumes throughout the system, net patient service revenue had a negative 12.7% variance, due to the payer mix. Other revenue had a 39% positive variance, due to the 340B program, retail pharmacy, Health II payment, and a value-based payment received.

Total operating revenue had a 6.1% negative variance. Contributing factors included increases expenses within salaries and wages, due to more employed individuals and the Sign On and Retention (SOAR) program. There was a 4.2% positive variance in contract labor expenses. Supplies, particularly pharmaceuticals and surgery supplies, had a 23.6% negative variance.

Non-operating revenues and expenses had a 28.8% positive variance. Net assets, after factoring in non-operating revenue and expenses and removing bond related activity, decreased by \$9,079,373, compared to a budgeted decrease of \$8,001,708, resulting in a negative variance of \$1,077,665.

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

6. Discuss and Review Valleywise Health's November and December 2023 Financials, Statistical Information and Quarterly Investment of Funds Report, cont.

Ms. Agnew reviewed the statistical information for December 2023, noting total admissions were 11.1% better than budget, with 16.8% more acute admissions than budgeted. Emergency department visits were 8.7% better than budget, with 14.8% more visits at Valleywise Emergency Department-Maryvale than budgeted.

Director Harden asked if the increased emergency department visits were attributed to the respiratory conditions.

Dr. White said that while there had been an increase in respiratory complaints, there were a variety of reasons individuals were seeking care within the emergency department, including but not limited to acute exacerbation of chronic illnesses.

Director Harden noted the daily report stated there were a large number of patients that were being held in the emergency department, awaiting a bed to be admitted to the hospital. She asked if that was due to staffing challenges.

Dr. White responded that staffing was not the issue, there issue was a lack of physical beds to place the patients.

Ms. Agnew said ambulatory visits missed budget by 2.3% for the month, due to increased paid time off (PTO) and provider vacancies.

Director Harden asked how the provider vacancies was being addressed.

Dr. White confirmed that the physician partner, District Medical Group (DMG), was actively recruiting and new providers would begin in Spring 2024, with more opportunities to bring new providers in Summer 2024, with the focus on primary care and behavioral health providers.

Ms. Agnew reviewed the statistics on a year-to-date basis, noting total admissions were 1.7% better than budget, emergency department visits were 5.7% better than budget, and ambulatory visits were 2.2% better than budget.

She discussed the payer mix and announced that AHCCCS had completed the redetermination process, resulting in 457,000 individuals losing Medicaid coverage and 1.4 million maintain coverage. The disenrollment rate of 18% was the tenth lowest of all the states.

Director Harden asked if staff was aware of what happened to those that were disenrolled.

Ms. Agnew noted that there were approximately 60,000 individuals that were able to reapply and regain AHCCCS coverage.

Mr. Purves said the other individuals may have gotten insurance coverage through employer provided benefits or through the marketplace. He was concerned that many may remained uninsured, which was demonstrated through the current payer mix.

Director Brophy McGee stated that while the inflation rate was stabilizing, the increase in the cost of living impacted may also be a contributing factor.

Ms. Agnew reiterated that financial counselors throughout Valleywise Health worked with uninsured individuals to obtain the best coverage options for them.

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

6. Discuss and Review Valleywise Health's November and December 2023 Financials, Statistical Information and Quarterly Investment of Funds Report, cont.

Ms. Agnew continued to review the payer mix and mentioned the uninsured percentage in December 2023 had improved from the prior month. On a year-to-date basis, the shift from AHCCCS to uninsured was significant and impacted net patient service revenue.

The December 2023 financial statements were reviewed, and the payer mix attributed to the negative 3.3% variance in net patient service revenue. Changes within the 340B program caused a \$1.7 million shortfall for the month, however, retail pharmacy and Health II performed better than budget, resulting in a negative 5.2% variance.

Total operating expenses had a 1.8% negative variance. Contributing factors included salaries and wages, supplies, and rent for medical equipment. There was a 10.8% positive variance for contract labor expenses.

Net assets, after factoring in non-operating revenue and expenses, and removing bond related activity, decrease by \$11,305,798 compared to a budgeted decrease of \$8,570,045, resulting in a negative variance of \$2,735,751. There were 67.3 days of cash on hand and 75 days in accounts receivable.

Director Harden commended all involved on reducing contract labor expenses. She addressed the number of admissions in December 2023, 1,171 total, and asked how many of those admissions had a payer source.

Ms. Agnew said that she would have the information by the end of the meeting.

Director Harden referenced the number of surgeries and noted a decline of endoscopy procedures at the Valleywise Health Medical Center and asked if there was a reason.

Dr. White stated that there was a vacancy within the gastroenterology department, which impacted the number of procedures that could be performed.

Director Harden highlighted the number of individuals that left the emergency department without treatment and asked if any trends had been identified as to why that number increased.

Dr. White said there were a variety of factors, including but not limited to the wait time to be seen. Staff was tracking and monitoring the metrics.

Ms. Agnew reviewed the quarterly investment of funds report and said there had been an improvement in the yield.

7. Update on Care Reimagined Projects

Ms. Christiansen provided an update on the Care Reimagined projects, highlighting the opening of the new acute care hospital was 77 days away. To date, approximately 14,305,687 manhours had been accumulated throughout the various projects. There were no changes to the program dashboard, which provided an overview of concerns.

She reviewed the construction progress of the new acute care hospital, noting ongoing testing of the elevators and fire alarm systems. Supplies and medical equipment were being transitioned into the new building, and within the next 30 days, the lab automation line would be installed, and the medical gas testing and certification would be completed. She showcased photos of the current state.

Ms. Christiansen provided an overview of the Day in the Life (DIL) activities scheduled, which were simulated exercises to test workflows, facility systems, and equipment. Staff would act out several scenarios throughout the day to uncover areas for improvement.

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

7. Update on Care Reimagined Projects, cont.

Ms. Christiansen outlined the DIL activities and timeline, stating a mock-move would be conducted with each DIL, so there would be six opportunities for staff to prepare for the patient move on April 11, 2024.

Director Harden asked when the hospital would obtain the proper licensing.

Ms. Christiansen said that while the exact date was not known, staff had requested the licensing survey take place the week of March 25, 2024.

She provided a list of scenarios that would be tested during a DIL sequence, including patient codes and security response practices. She reviewed specific examples that staff would be testing.

Chairman Thomas asked if the emergency medical services (EMS) participated in the DIL activities, to eliminate confusion once the new facility opened.

Dr. White said the trauma team and emergency department coordinators had been meeting regularly with Phoenix Fire Department and other ambulance companies, informing them of new processes and timelines.

Ms. Christiansen reviewed the path to go-live schedule, stating the temporary certificate of occupancy was expected to be received the following week. Once received, staff may begin moving equipment, patient beds, and stocking supplies. She highlighted the activities completed over the past two months and the plans for February 2024.

She provided an update on the Piper Pavilion. The fifth floor was near complete, and the physicians were scheduled to move into the building on March 8, 2024.

Director Harden asked if anyone would occupy the Conference and Administration Center (CAC) after the physicians transitioned into the Piper Pavilion.

Ms. Christiansen said there were various information technology components supporting the current acute care hospital located within the CAC. Once the new acute care hospital was operational, the current acute care hospital would be decommissioned, then the CAC would be decommissioned after that.

Vice Chairman Dewane commended a recent article in *The Arizona Republic*, reporting on the progress of the new acute care hospital. He asked if there was an opportunity to expand on the coverage to demonstrate that the Maricopa County Special Health Care District fulfilled the promises made with Proposition 480. The opening of the new hospital was a tremendous accomplishment and should be touted.

Ms. Christiansen said there were various events that were scheduled leading up to the opening of the new acute hospital and asked Mr. Murphy to elaborate on the public relations plans.

Mr. Murphy agreed the recent article showcased some of the great work completed thus far. There were plans to conduct a burn center tour with the media, and other tours with various media outlets. Media would be present during the DIL activities, as well. A movie outlining the history of Valleywise Health had been produced and would demonstrate the importance of the organization in the community.

**NOTE:** Director Brophy McGee exited the meeting at 3:01 p.m.

Director Harden asked if EMS would be offered a tour of the new emergency department.

Ms. Christiansen announced targeted events had been scheduled for specific groups, including two employee events, a community event, EMS event, and a VIP event. A list of all events would be provided to the Board.

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

8. Review and Possible Action on the Following Reports to the Board of Directors:
  - a. Monthly Marketing and Communications Report (November and December 2023)
  - b. Monthly Care Reimagined Capital Purchases Report (November and December 2023)
  - c. Monthly Valleywise Health Employee Turnover Report (November and December 2023)
  - d. Quality Management Council Meeting Minutes (December 2023)

Director Harden referenced 8.d., Quality Management Council Meeting minutes, specifically the information pertaining to unplanned return to surgery statistic. Of the 16 cases, several were due to a surgical site infection. She asked for clarification.

Ms. Garcia explained that the data was based on National Surgical Improvement Program with American College of Surgeons and the definition for surgical site infections differed from other regulatory agencies. Staff was working with the physician champion to review all cases and develop actions plans, if necessary.

9. Concluding Items
  - a. Old Business: - **NO HANDOUT**

**November 21, 2023**

Consent Agenda

Future discussion on disclosure of gifts District Board members receive

Behavioral Health Update

Provide information to the Maricopa County Board of Supervisors on projects, programs and services made possible with the ARPA grant funding

Care Reimagined Update

Once available, provide the date that the Conference and Administration Center will be decommissioned

**August 23, 2023**

Care Reimagined Update

Provide a list of the licensing requirements and steps to be taken leading up to the move to new tower including the estimated timeline for each requirement

**June 28, 2023**

Care Reimagined Update

When projects are complete, compose a letter from the Board, outlining everything that was accomplished/made possible, and send to stakeholders

Marketing and Communications Report

Have a ceremony for the launch of the mobile health unit

**May 24, 2023**

April 2023 Financials

How will fixed costs change (old facilities vs new facilities); include the change in utility costs and maintenance costs

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

9. Concluding Items, cont.

a. Old Business, cont.

**August 24, 2022**

**Monthly Update on Care Reimagined Projects**

Work with organized neighborhood groups near Valleywise Health Medical Center to build connections and invite to the opening of the new hospital

b. Board Member Requests for Future Agenda Items or Reports - **NO HANDOUT**

c. Comments - **NO HANDOUT**

i. Chairman and Member Closing Comment

ii. President and Chief Executive Officer Summary of Current Events

Ms. Talbot reiterated the requests that were made throughout the meeting. She reviewed old business, noted the items that had been completed, as well as the items that were ongoing.

Ms. Agnew addressed a question that was posed earlier in the meeting, during item 6, Financial and Statistical Information for December 2023, related to the payer mix for the inpatient acute admissions. On a year-to-date basis, 40% of admissions were covered by AHCCCS, 20% of admissions were covered by Other Government, 16% of admissions were covered by Medicare, 12% of admissions were covered by commercial insurance, and the remaining was either uninsured or categorized as other. She noted that the other category included AHCCCS pending. If the patient was approved, coverage would be retroactive to the start of the month that the application was submitted.

Chairman Thomas highlighted the article previously mentioned, as well as an article reporting on the overcrowding of the emergency department.

Mr. Purves expressed his appreciation to Ms. Rivet and the Valleywise Health Foundation. He congratulated Mr. Cavallo, Ms. Steiner, Dr. Olson, and the entire behavioral health department, for being recognized by *Beckers Healthcare* as one of the top 36 hospitals and health systems with great psychiatry and mental health programs.

He showcased a trailer of the upcoming Valleywise Health history movie, which was produced in-house. He announced the premiere of the movie would be held on Thursday, February 8, 2024.

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**Adjourn**

**MOTION:** Director Harden moved to adjourn the January 24, 2024, Maricopa County Special Health Care District Board of Directors Formal Meeting. Vice Chairman Dewane seconded.

**VOTE:** 3 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Harden  
0 Nays  
2 Absent: Director Brophy McGee, Director Wilcox  
**Motion passed.**

Meeting adjourned at 3:22 p.m.

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J. Woodfin Thomas, Chairman  
Maricopa County Special Health Care District  
Board of Directors