

# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020 1:00 p.m.

Agenda



#### **Board Members**

Mark G. Dewane, Chairman, District 2 Mary Rose Wilcox, Vice Chair, District 5 Mary A. Harden, R.N., Director, District 1 Susan Gerard, Director, District 3 J. Woodfin Thomas, Director, District 4

#### **President & Chief Executive Officer**

Stephen A. Purves, FACHE

## Clerk of the Board

Melanie Talbot

#### Meeting Location

Valleywise Health Medical Center 2601 East Roosevelt Street Phoenix, Arizona 85008 Conference and Administration Center Auditoriums 1 & 2

# **AMENDED**

# **AGENDA** - Formal Meeting

Maricopa County Special Health Care District Board of Directors

#### **Mission Statement**

The Valleywise Health's mission is to provide exceptional care, without exception, every patient, every time.

#### Welcome

The Board of Directors is the governing body for the Maricopa County Special Health Care District. Each member represents one of the five districts in Maricopa County. Members of the Board are public officials, elected by the voters of Maricopa County. The Board of Directors sets policy and the President & Chief Executive Officer, who is hired by the Board, directs staff to carry out the policies.

### **How Citizens Can Participate**

Each meeting is open to the public and there is a "Call to the Public" at the beginning of each meeting. An individual may address the Board of Directors at this time or when the agenda item to be addressed is reached. If you wish to address the Board, please complete a Speaker's Slip and deliver it to the Clerk of the Board prior to the Call to Public. If you have anything that you wish distributed to the Board and included in the official record, please hand it to the Clerk who will distribute the information to the Board members and Valleywise Health Senior Staff.

Speakers will be called in the order in which requests to speak are received. Your name will be called when the Call to Public has been opened or when the Board reaches the agenda item which you wish to speak. As mandated by the Arizona Open Meeting Law, officials may not discuss items not on the agenda, but may direct staff to follow-up with the citizen.

#### **Public Rules of Conduct**

The Board Chair shall keep control of the meeting and require the speakers and audience to refrain from abusive or profane remarks, disruptive outbursts, applause, protests, or other conduct which disrupts or interferes with the orderly conduct of the business of the meeting. Personal attacks on Board members, staff, or members of the public are not allowed. It is inappropriate to utilize the Call to Public or other agenda item for purposes of making political speeches, including threats of political action. Engaging in such conduct and failing to cease such conduct upon request of the Board Chair will be grounds for ending a speaker's time at the podium or for removal of any disruptive person from the meeting room, at the direction of the Board Chair.

Agendas are available within 24 hours of each meeting in the Office of the Board, Valleywise Health Medical Center, 2601 East Roosevelt, Phoenix, Arizona 85008, Conference and Administration Center, 2<sup>nd</sup> Floor, Monday through Friday between the hours of 8:00 a.m. and 5:00 p.m. and on the internet at https://valleywisehealth.org/about/board-of-directors/. Accommodations for Individuals with disabilities, alternative format metrials, sign language interpretation, and assistive listening devices are available upon 72 hours advance notice through the Office of the Board, Valleywise Health Medical Center, 2601 East Roosevelt, Phoenix, Arizona 85008, Conference and Administration Center, 2<sup>nd</sup> Floor, (602) 344-5177. To the extent possible, additional reasonable accommodations will be made available within the time constraints of the request.

Valleywise Health Medical Center
2601 East Roosevelt Street
Phoenix, Arizona 85008
Conference and Administration Center
Auditoriums 1 & 2

Wednesday, October 28, 2020 1:00 p.m.

One or more of the members of the Board of Directors of the Maricopa County Special Health Care District may attend telephonically. Board members attending telephonically will be announced at the meeting.

Pursuant to A.R.S. § 38-431.03(A)(3), or any applicable and relevant state or federal law, the Board may vote to recess into an Executive Session for the purpose of obtaining legal advice from the Board's attorney or attorneys on any matter listed on the agenda. The Board also may wish to discuss any items listed for Executive Session discussion in General Session, or the Board may wish to take action in General Session on any items listed for discussion in Executive Session. To do so, the Board will recess Executive Session on any particular item and reconvene General Session to discuss that item or to take action on such item.

If you are carrying a cell phone, pager, computer, or other sound device, we ask that you silence it at this time to minimize disruption of the meeting.

#### 1:00 Call to Order

#### **Roll Call**

#### Pledge of Allegiance

# 1:05 Call to the Public

This is the time for the public to comment. The Board of Directors 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

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

# 1:10 1. Approval of Consent Agenda: 15 min

Note: Approval of contracts, minutes, IGA's, proclamations, etc. 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 Board member.

### a. Minutes:

 Approve Special Health Care District Board of Directors meeting minutes dated September 23, 2020

Melanie Talbot, Chief Governance Officer; and Clerk of the Board

# b. Contracts:

Approve a new Intergovernmental Agreement (90-21-032-1 [ADHS # IGA2020-049]) between Arizona Department of Health Services (ADHS) and the Maricopa County Special Health Care District dba Valleywise Health, for the HIV Prevention Program, to provide HIV testing in the Valleywise Health Emergency Departments Michael White, M.D., Executive Vice President, Chief Clinical Officer

- 1:10 1. Approval of Consent Agenda, cont.:
  - b. <u>Contracts, cont.</u>:
    - ii. Approve a new contract (90-21-065-1) between Sierra Auction Management Inc. and the Maricopa County Special Health Care District dba Valleywise Health, for Auction Services as needed to salvage excess or obsolete equipment or other material

Claire Agnew, Interim Chief Financial Officer

iii. Approve amendment #3 to Intergovernmental Agreement (90-19-176-1-03 [ADHS# CTR050459]) between Arizona Department of Health Services (ADHS) and Maricopa County Special Health Care District dba Valleywise Health, for the Refugee Clinic pertaining to Diabetes Management and Type 2 Diabetes Prevention strategies

Michael White, M.D., Executive Vice President, Chief Clinical Officer

- iv. Approve a new Intergovernmental Agreement (90-21-133-1) with Arizona Health Care Cost Containment System (AHCCCS) for Valleywise Health to participate in the Access to Professional Services Initiative (APSI). This IGA commences October 1, 2020 through September 30, 2021. Valleywise Health shall transfer funds to AHCCCS in the amount of \$175,500 for the administration of the APSI Claire Agnew, Interim Chief Financial Officer
- v. Approve a new Intergovernmental Agreement (90-21-134-1) with Arizona Health Care Cost Containment System (AHCCCS) for Valleywise Health to participate in the Access to Professional Services Initiative (APSI). This IGA commences October 1, 2020 through September 30, 2021. Valleywise Health will provide State match funds in the amount of \$4,464,945.08 to the State of Arizona in order to receive Federal match funds

Claire Agnew, Interim Chief Financial Officer

vi. Approve a new Intergovernmental Agreement (90-21-135-1) with Arizona Health Care Cost Containment System (AHCCCS), on behalf of Phoenix Children's Hospital, to participate in the Access to Professional Services Initiative (APSI). This IGA commences October 1, 2020 through September 30, 2021. Valleywise Health will provide State match funds in the amount of \$3,769,500 on behalf of Phoenix Children's Hospital to the State of Arizona in order to receive Federal match funds

Claire Agnew, Interim Chief Financial Officer

vii. Approve a new Intergovernmental Agreement (90-21-136-1) with Arizona Health Care Cost Containment System (AHCCCS), on behalf of Dignity Health, to participate in the Access to Professional Services Initiative (APSI). This IGA commences October 1, 2020 through September 30, 2021. Valleywise Health shall transfer funds to AHCCCS in the amount of \$99,500 on behalf of Dignity Health for the administration of the APSI

Claire Agnew, Interim Chief Financial Officer

viii. Approve a new Intergovernmental Agreement (90-21-137-1) with Arizona Health Care Cost Containment System (AHCCCS), on behalf of Dignity Health, to participate in the Access to Professional Services Initiative (APSI). This IGA commences October 1, 2020 through September 30, 2021. Valleywise Health will provide State match funds in the amount of \$2,358,355.51 on behalf of Dignity Health, to the State of Arizona in order to receive Federal match funds Claire Agnew. Interim Chief Financial Officer

- 1:10 1. Approval of Consent Agenda, cont.:
  - b. <u>Contracts, cont.</u>:
    - ix. Approve amendment #40 to the Professional Services Agreement (90-12-084-1-40) between the Maricopa County Special Health Care District dba Valleywise Health, and District Medical Group

Michael White, M.D., Executive Vice President, Chief Clinical Officer

x. Approve a new Intergovernmental Agreement (90-21-138-1) with Arizona Health Care Cost Containment System (AHCCCS) to provide matching funds in support of the Targeted Investment Program. This agreement allows Valleywise Health to contribute to the Non-Federal Share of delivery system reform incentive payments through the Targeted Investment Program. Valleywise Health's match of \$7,000,000 will be used to permit a more advantageous bundled behavioral health rate for services Valleywise Health provides

Claire Agnew, Senior Vice President, Interim Chief Financial Officer

xi. Approve a revised amendment #2 to the Blood Product Services Agreement (90-20-064-1-02) between Vitalant and Maricopa County Special Health Care District dba Valleywise Health, for Convalescent Plasma

Michael White, M.D., Executive Vice President, Chief Clinical Officer

xii. Approve amendment #2 to the Service Agreement (90-19-192-1-02) between GE Healthcare and Maricopa County Special Health Care District dba Valleywise Health, to add equipment to the service agreement. The anticipated annual expense of the amendment is \$45,402

Kelly Summers, Senior Vice President, Chief Information Officer

xiii. Approve a new contract (90-21-139-1) between Intuitive Surgical, Inc., and Maricopa County Special Health Care District dba Valleywise Health, for the purchase and maintenance of the da Vinci Xi Dual Console System (associated with CER#21-005, da Vinci Surgical Xi System)

Michael White, M.D., Executive Vice President, Chief Clinical Officer

xiv. Approve a new Intergovernmental Agreement (90-21-141-1) between the Arizona Department of Economic Security (ADES) and Maricopa County Special Health Care District dba Valleywise Health, to provide health care management services under the ADES Refugee Resettlement Program.

Michael White, M.D., Executive Vice President, Chief Clinical Officer

xv. Approve amendment #1 to the contract (90-19-224-1-01) between MiMedx Group, Inc. and Maricopa County Special Health Care District dba Valleywise Health to update company name and update the consignment to add additional product.

Sherry Stotler, R.N., M.S.N., Senior Vice President, Chief Nursing Officer

xvi. Approve a new contract (90-21-140-1) between DiaSorin and Maricopa County Special Health Care District dba Valleywise Health for Liaison XL equipment and Qiagen reagents.

Jo-el Detzel, Vice President, Ancillary and Support Services

xvii. Approve a new contract (90-21-091-1) between Otis Elevator and Maricopa County Special Health Care District dba Valleywise Health, for the Valleywise Behavioral Health Center-Maryvale Elevator Upgrade (associated with CER#21-301, elevators 1 through 6 at Valleywise Behavioral Health Center-Maryvale)

Jo-el Detzel, Vice President, Ancillary and Support Services

- 1:10 1. Approval of Consent Agenda, cont.:
  - b. <u>Contracts, cont.</u>:
    - xviii. Approve Amendment #4 to the contract (90-14-206-1-04) between Integrated Health Management Services, LLC and Maricopa County Special Health Care District dba Valleywise Health, to extend services for 2 additional years.

      Nancy Kaminski, Senior Vice President, Revenue Cycle
  - c. <u>Governance</u>:
    - i. **Approve** Proposed Changes to the Following Board Policy Statements:
      - a. 99002 G Billing
      - b. 99300 G Call to the Public: Addressing the Board at a Meeting Melanie Talbot, Chief Governance Officer; and Clerk of the Board
    - ii. Approve Board Resolution No. 2020-10-28-001 and Affidavit of Compliance Regarding the November 3, 2020 General Election

      Melanie Talbot, Chief Governance Officer; and Clerk of the Board
    - iii. Approve Application of Robert Hess as Potential Member to the Valleywise Community Health Centers Governing Council

      Barbara Harding, Senior Vice President, Ambulatory Services and Federally Qualified Health Center Clinics Chief Executive Officer
    - iv. Approve Application of Ylenia Aguilar as Potential Member to the Valleywise Community Health Centers Governing Council

      Barbara Harding, Senior Vice President, Ambulatory Services and Federally Qualified Health Center Clinics Chief Executive Officer
    - v. Approve a No Objection Letter to the Proposed Property Tax Reclassification of Real and Personal Property of TSMC, to be located within Foreign Trade Zone 75 Warren Whitney, Senior Vice President, Government Affairs
  - d. Medical Staff:
    - Approve Valleywise Health Medical Staff appointments, FPPEs, reappointments, change of privileges/status, waiver requests, and resignations for October 2020 William D. Dachman, M.D., Chief of Staff
    - ii. Approve Valleywise Health Allied Health Professional Staff appointments, FPPEs, reappointments, change of privileges/status, waiver requests, and resignations for October 2020

      William D. Dachman, M.D., Chief of Staff
    - iii. Approve Proposed Revisions to the Department of Dentistry Delineation of Privileges

William D. Dachman, M.D., Chief of Staff

iv. Approve Proposed Revisions to the Valleywise Health Medical Staff and Allied Health Professional Staff Conditions of Application, Release, and Immunity Forms William D. Dachman, M.D., Chief of Staff

- 1:10 1. Approval of Consent Agenda, cont.:
  - d. Medical Staff, cont.:
    - v. Approve Proposed Revisions to the Valleywise Health Medical Staff Rules and Regulations Policy #31201 T

      William D. Dachman, M.D., Chief of Staff
    - vi. Approve Jeffrey Randal Stowell, M.D., as Department Chair of Emergency Medicine

William D. Dachman, M.D., Chief of Staff

- e. <u>Care Reimagined Capital:</u>
  - Approve Amendment #27 (480-90-18-012-4.06), Guaranteed Maximum Price (GMP) number 4.06 with Kitchell Construction for construction of the Roosevelt Medical Center – Tower project, which provides funding for final core and shell scope inclusive of mechanical, electrical, framing drywall, roofing, rooftop helipad, pneumatic tube, door frames and envelope finishes in the amount of \$83,924,821 (CER#19-947 RSVT Acute Tower)

Michael White, M.D., Executive Vice President, Chief Clinical Officer

- f. Capital:
  - i. Approve Capital Expenditure Request (21-403) for the purchase of a fleet of Medtronic Defibrillators from Zoll Defibrillators for an annual cost of \$311,000 over three years, for a total project cost of \$933,000

    Michael White, M.D., Executive Vice President, Chief Clinical Officer
  - ii. Approve Capital Expenditure Request (21-301) for the purchase of a full modernization upgrade for elevators 1 through 6 at Valleywise Behavioral Health Center Maryvale, for a cost of \$1,993,654 (\$750,000 FY21 Clinical Capital Funds and \$1,243,654 TIP Funds)

Jo-el Detzel, Vice President, Ancillary and Support Services

#### End of Consent Agenda

- 1:25 2. Valleywise Health's Response to COVID-19 5 min

  Michael White, M.D., Executive Vice President, Chief Clinical Officer
- 1:30 3. Review National Patient Safety Goals and Focuses for Patient Safety 10 min

  Crystal Garcia, Vice President, Quality Management and Patient Safety
- 1:40 4. Discuss and Review September 2020 Valleywise Health's Financials and Statistical Information, and Quarterly Investment of Funds Report 15 min

  Claire Agnew, Interim Chief Financial Officer
- 1:55 5. Review and Possible Action on Reports to the Board of Directors 15 min
  - a. Monthly Marketing and Communications Report

    Bill Byron, Senior Vice President, Marketing and Communications

- 1:55 5. Review and **Possible Action** on Reports to the Board of Directors, cont.:
  - b. Monthly Care Reimagined Capital Purchases
    Claire Agnew, Interim Chief Financial Officer
  - c. Monthly Valleywise Health's Employee Turnover Report (September 2020)

    Justina Sanchez Cox, Senior Vice President, Chief Human Resources Officer
  - d. Quality Management Council Meeting Minutes (August 2020)

    Crystal Garcia, Vice President, Quality Management and Patient Safety
  - e. Quarterly Valleywise Community Health Centers Governing Council Member Structure Report

    Melanie Talbot, Chief Governance Officer; and Clerk of the Board
  - f. Quarterly Creighton University Arizona Health Education Alliance Report Michael White, M.D., Executive Vice President, Chief Clinical Officer
  - g. 2020 Employee Engagement Survey Results

    Justina Sanchez Cox, Senior Vice President, Chief Human Resources Officer
- 2:10 6. Concluding Items 15 min
  - a. Old Business:
  - b. Board Member Requests for Future Agenda Items or Reports
  - c. Comments
    - i. Chairman and Member Closing Comment
    - ii. President and Chief Executive Officer Summary of Current Events
- 2:25 Adjourn



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 1.a.i.

Minutes September 23, 2020

#### **Minutes**

Maricopa County Special Health Care District
Board of Directors Meeting
Valleywise Health Medical Center



Conference and Administration Center, Auditoriums 1 & 2
September 23, 2020
1:00 p.m.

**Present:** Mark G. Dewane, Chairman, District 2

Mary Rose Wilcox, Vice Chairman, District 5

Mary A. Harden, Director, District 1 – participated telephonically Susan Gerard, Director, District 3 – participated telephonically

J. Woodfin Thomas, Director, District 4

Others Present: Steve Purves, President & Chief Executive Officer

Michael White, M.D., Executive Vice President, Chief Clinical Officer

Claire Agnew, Interim Chief Financial Officer

Sherry Stotler, R.N., M.S.N., Senior Vice President, Chief Nursing Officer

William D. Dachman, M.D., Chief of Staff

Melanie Talbot, Chief Governance Officer; Clerk of the Board - participated

telephonically

Martin Demos, General Counsel

Guest Presenters: Crystal Garcia, Vice President, Quality Management and Patient Safety

Justina Sanchez Cox, Senior Vice President, Chief Human Resources

Officer

Sara Wilson, President and Chief Executive Officer, Home Assist Health Ryan Winkle, Chairman, Valleywise Community Health Centers Governing

Council - participated telephonically

Bill Byron, Senior Vice President, Marketing and Communications

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

# **Call to Order:**

Chairman Dewane called the meeting to order at 1:05 p.m.

#### Roll Call

Ms. Cornejo called roll. Following roll call, it was noted that all five voting members of the Maricopa County Special Health Care District Board of Directors were present, which represented a quorum. Director Gerard and Director Harden participated telephonically.

For the benefit of all participants, Ms. Cornejo announced the individuals present as well as those participating telephonically.

# Pledge of Allegiance

Vice Chairman Wilcox lead the Pledge of Allegiance.

# **Call to the Public**

Chairman Dewane called for public comment.

Vice Chairman Wilcox requested a moment of silence, in remembrance of all the individuals that had died from COVID-19 during the pandemic.

Mr. Purves highlighted a token of appreciation, a gift bag containing hand sanitizer and individually wrapped snacks, that was distributed to all leaders within the organization, including the Board for their leadership, guidance and support during the COVID-19 pandemic.

Chairman Dewane expressed his appreciation to Home Assist Health for providing services to an individual in need.

#### **Mission Statement**

Ms. Cornejo read the mission statement aloud.

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

- 1. Approval of Consent Agenda:
  - a. Minutes:
    - i. Approve Special Health Care District Board of Directors meeting minutes dated August 26, 2020

#### b. Contracts:

- Approve amendment #1 to the contract (MCO-20-001-01) between United HealthCare Insurance Company and the Maricopa County Special Health Care District dba Valleywise Health, excluding Valleywise Health from a network that United HealthCare developed for the Commercial Line of Business
- ii. Approve amendment #1 to the contract (90-19-077-1-01) between Magellan Healthcare, Inc. and the Maricopa County Special Health Care District dba Valleywise Health, assigning the contract to the Magellan Complete Care of Arizona, Inc. There are no changes to the terms of the agreement
- iii. Approve amendment #39 to the Professional Services Agreement (90-12-084-1-39) between the Maricopa County Special Health Care District dba Valleywise Health and District Medical Group

# c. <u>Governance</u>:

- i. Approve Review and Proposed Changes to the Following Board Policy Statements:
  - a. 99001 G Annual External Audit
  - b. 99400 G Accrediting Bodies
- ii. Approve Revisions to the Valleywise Health's Fiscal Years 2020-2024 Strategic Plan
- iii. Approve Application of Robert Hess as Potential Member to the Valleywise Community Health Centers Governing Council

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

- 1. Approval of Consent Agenda, cont.:
  - c. Governance, cont.:
    - iv. Approve Application of Ylenia Aguilar as Potential Member to the Valleywise Community Health Centers Governing Council
    - v. Approve Policy 06503 S; Health Resources & Services Administration Legislative Mandate Compliance Policy
    - vi. Approve a No Objection Letter to the Proposed Foreign-Trade Zone Proposed Property Tax Reclassification of Real and Personal Property of Ball Metal Beverage Container Corporation, Inc., to be located within Foreign Trade Zone 277
    - vii. Approve a No Objection Letter to the Proposed Foreign-Trade Zone Proposed Property Tax Reclassification of Real and Personal Property of Commercial Metals Company, to be located within Foreign Trade Zone 221
    - viii. Approve the Phoenix Desert Sky Amended and Restated Covenants, Conditions and Restrictions Declaration
    - ix. Approve Valleywise Health Foundation's ALL IN Campaign donor recognition requests

#### d. Medical Staff:

- i. Approve Valleywise Health Medical Staff appointments, FPPEs, reappointments, change of privileges/status, waiver requests, and resignations for September 2020
- ii. Approve Valleywise Health Allied Health Professional Staff appointments, FPPEs, reappointments, change of privileges/status, waiver requests, and resignations for September 2020
- iii. Approve of Proposed Revisions to the Department of Internal Medicine Cardiology Delineation of Privileges

# e. <u>Care Reimagined Capital:</u>

i. Approve amendment #3 to the contract (480-90-19-018-03) for Okland Construction Company, Inc., for Construction Manager at Risk (CMAR) for Guaranteed Maximum Price (GMP) One (1) for the following facilities: Valleywise Community Health Centers-Chandler, Mesa, Maryvale and West Maryvale. This GMP value is \$9,440,917. The Revised Contract Value is \$9,572,300. Total Project cost is \$69,000,000 (CER 19-944)

# f. Capital:

i. Approve Capital Expenditure Request (21-005) for the purchase of a da Vinci Surgical Xi System from Intuitive Surgical for a total project cost of \$2,543,000

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

1. Approval of Consent Agenda, cont.

Chairman Dewane requested to remove consent agenda item 1.b.iii., to be discussed and voted on separately.

Director Harden requested consent agenda items 1.c.iii., 1.c.iv., and 1.f.i. be removed from the consent agenda to be discussed and voted on separately. For consent agenda items 1.c.iii. and 1.c.iv., she requested legal advice and suggested the Board recess general session and recess into executive session toward the end of the meeting.

**MOTION:** Vice Chairman Wilcox moved to approve the consent agenda minus consent agenda items

1.b.iii., 1.c.iii., 1.c.iv., and 1.f.i. Director Thomas seconded.

**VOTE:** 5 Ayes: Chairman Dewane, Vice Chairman Wilcox, Director Gerard, Director Harden,

Director Thomas

0 Nays

Motion passed.

Dr. White addressed consent agenda item 1.b.iii., amendment #39 to the Professional Service Agreement between the Maricopa County Special Health Care District dba Valleywise Health and District Medical Group. He explained the proposed amendment included a 1.0 full-time equivalent (FTE) orthopedic physician, however, staff continued to work through the details surrounding that position. He requested the physician be removed from the amendment.

**MOTION:** Director Harden moved to approve consent agenda 1.b.iii., amendment #39 to the

Professional Services Agreement (90-12-084-1-39) between the Maricopa County Special Health Care District dba Valleywise Health and District Medical Group with the following changes; remove the addition of 1.0 FTE Orthopedic Physician (effective June 16, 2020), resulting in the total impact of the amendment for fiscal year 2020 to be \$50,211 instead of \$64,363 and for fiscal year 2021 to be \$703,369 instead of \$1,042,778. Director Thomas

seconded.

**VOTE:** 5 Aves: Chairman Dewane. Vice Chairman Wilcox. Director Gerard. Director Harden.

**Director Thomas** 

0 Nays

Motion passed.

Dr. White addressed consent agenda item 1.f.i., the capital expenditure request (21-005) for the purchase of a da Vinci Surgical Xi System and outlined the need for the equipment.

Director Harden understood the need to acquire a da Vinci Surgical Xi System, however, she requested further information on the funds used to purchase the equipment and questioned if the Federally Qualified Health Centers capital contingency funds would be utilized.

Ms. Agnew stated that there was an error on the information provided and the general capital contingency funds would be utilized.

Director Harden stated that the Board approved \$3 million for the general capital contingency, of which the proposed purchase would require the majority of those funds.

Dr. White said staff had not completed the negotiations, and the amount included was the maximum amount for the total project.

4

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

1. Approval of Consent Agenda, cont.

Ms. Agnew said that staff would update the Board on the final cost of the project.

**MOTION:** Director Thomas moved to approve consent agenda 1.f.i., the capital expenditure request

(21-005) for the purchase of a da Vinci Surgical Xi System from Intuitive Surgical for a total

project cost not to exceed \$2,543,000. Vice Chairman Wilcox seconded.

**VOTE:** 5 Ayes: Chairman Dewane, Vice Chairman Wilcox, Director Gerard, Director Harden,

Director Thomas

0 Nays

Motion passed.

# 2. Valleywise Health's Response to COVID-19

Dr. White outlined the statistics surrounding COVID-19 patients in the hospital and noted the continued decline of patients throughout the continuum of care. He attributed that success to the precautions in place, such as individuals wearing masks, social distancing, and good hand hygiene. However, despite those efforts, the virus would continue to spread throughout the community and require hospitalization for the upcoming months.

Director Thomas questioned how widespread Valleywise Health's test capabilities were.

Dr. White said that Valleywise Health had tested approximately three percent of the total population tested.

Director Harden noted that the influenza season was set to begin, and there were cities that were seizing the mask requirements for the public. She questioned if those actions may result in an increase of infections.

Dr. White said that he anticipated an increase in infections as individuals began to congregate in larger groups. He noted that Valleywise Health would continue to advocate for the precautionary measures, since those measures could reduce the transmission of COVID-19 and other respiratory viruses.

Director Gerard asked if adequate testing supplies were available.

Dr. White said that while the process to obtain testing supplies had improved, the system was not perfect. Valleywise Health had the capacity to test individuals that required testing, however, a challenge to acquire the testing reagents remained. He noted that there was an adequate supply of testing materials to accommodate a surge, should one happen. He noted that Northern Arizona recently experienced an increase in positive cases, specifically surrounding the areas with a large student population.

# 3. Results of the Culture of Safety Survey

Ms. Garcia provided an overview of the Culture of Patient Safety Survey results and noted that there were three versions of the survey conducted in 2020. Version One (V1) was a version that had been used in previous years for inpatient and behavioral health employees, however, this would be the last year that V1 would be available. Version Two (V2) was a new survey that would replace V1. The two different versions were each administered to half of inpatient and behavioral health employees, allowing staff to compare data from V1 to previous years, and develop a baseline for future comparisons for V2. Although both versions of the survey were similar, the differences were distinct enough that would not allow comparable data year over year. The Medical Office survey was new and was directed toward outpatient and medical office employees.

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

3. Results of the Culture of Safety Survey, cont.

Ms. Garcia outlined the results of each survey and noted the participate rate had declined from previous years, which she attributed to the COVID-19 pandemic. She highlighted V1 had a higher positivity response in the behavioral health facilities, while V2 had a higher positivity response in the medical center. The Medical Office survey was administered to establish benchmarks for the upcoming years.

In reference to the nonpunitive response to error questions, the positive responses for V1 were within the 40<sup>th</sup> percentile and improvement had been made year over year.

Director Thomas questioned if errors made by an employee were documented in the employee's personnel file. If so, he asked how long that information was retained in their file.

Ms. Sanchez Cox stated that disciplinary actions were documented in the employee's personnel file and remained active for 12 months. All disciplinary actions remained in the file for the remainder of the employee's career at Valleywise Health, however, those actions were not active after 12 months.

Ms. Garcia noted that survey results highlighted areas of opportunity. Staff would continue to communicate with employees through "Just Culture", a concept of systems thinking that focused on ways to improve process, not blame individuals. Moving forward, staff would focus on improving feedback and communication about error and communication openness. She outlined to action plans to achieve the benchmarks set forth.

Director Harden asked if the established benchmarks were developed using national benchmarks. She also believed that the benchmark for communication openness should be higher, specifically, staff speaking up if they see something that may negatively affect patient care.

Ms. Garcia confirmed that national benchmarks were considered when developing the organizational benchmarks.

Vice Chairman Wilcox asked if the response rate was impacted by the shift of employees working from home

Ms. Garcia said that all employees had the opportunity to respond to the survey, regardless of their work location.

# 4. Home Assist Health (HAH) Year End Report – Fiscal Year 2020

Ms. Wilson highlighted the accomplishments Home Assist Health (HAH) made in fiscal year (FY) 2020, in the midst of the COVID-19 pandemic. Those accomplishments included but were not limited to the implementation of a Point of Care Tracking system for real time care alerts, visit and task verification, providing care to 320 unique Valleywise Health patients, including 269 patients recovering from COVID-19, and performing better than budget. She outlined the infrastructure developed to improve quality, reduce cost, and reduce re-admissions, while maintaining an industry best caregiver turnover rate of 40 percent. She also mentioned the accolades and recognition HAH received throughout the year, including being selected as a finalist for the 2020 AZ Business Angels Award.

Ms. Wilson reviewed the impact that the COVID-19 pandemic had on operations and outlined the proactive adjustments made, including the establishment of administrative and operational safety precautions and preventions and the advocation on a local and national level to gain support and protection through the pandemic.

She commended the resiliency of the staff and stated that HAH finished FY 2020 with a net income of \$355,228, surpassing the budget by \$126,695, and operating expenses were \$155,000 better than budget.

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

5. Annual Valleywise Community Health Centers Governing Council Report

Mr. Winkle updated the Board on the Valleywise Community Health Centers Governing Council's (Governing Council) activities for FY 2020. He noted the top priorities were increasing visits to the Valleywise Community Health Centers, improving quality health outcomes, and improving patient experiences. He commended the rapid implementation of telehealth visits at the onset of the COVID-19 pandemic, which was instrumental in providing access to primary care and behavioral health patients.

He outlined the current membership of the Governing Council and noted that all members were encouraged to utilize the services provided by Valleywise Health. He said the goals of the Governing Council included the continued focus on increasing visits and building on the relationship with the Board.

Director Harden thanked Mr. Winkle for volunteering his time to serve on the Governing Council.

6. Discuss and Review August 2020 Valleywise Health's Financials and Statistical Information

Ms. Agnew reviewed the statistical information for August 2020 and noted the COVID-19 pandemic continued to impact patient volumes, operating revenues and operating expenses. Overall admissions were one percent below budget, with inpatient acute admissions below budget by 4.4% and behavioral health admissions exceeding budget by 6.1 percent. Combined emergency department visits were below budget by 20.7 percent. Ambulatory visits, which included telehealth visits, exceeded budget by 28.3%, with telehealth comprising 47% of total visits. On a year-to-date basis, total admissions were 1.8% below budget, emergency department visits were 17.5% below budget and ambulatory visits were 26% over budget.

The decrease in emergency department visits impacted the payer mix throughout the organization, decreasing the percentage of uninsured patients while increasing the percentage of Medicare and Other Governmental payor sources. She reviewed the unusual items for the month, including a relief payment of \$200,000 from the Valleywise Health Foundation and the receipt of \$1.2 million for COVID-19 High Impact Areas targeted distribution. She highlighted the increase of contract labor for the surge nurse relief received from the State of Arizona, however, she stated that cost was offset and accounted for in non-operating revenue.

Ms. Agnew reviewed the income statement for August 2020 and noted net patient service revenue was over budget by 4.9%, operating expenses exceeded budget by 3.1%, resulting in a loss of \$2,313,324 compared to a budgeted loss of \$4.097,388.

Chairman Dewane asked how the COVID-19 pandemic impacted staffing.

Ms. Agnew stated that employees were deployed to areas with the greatest need, as opposed to sending them home. The organization maintained minimum staffing requirements in lower volume areas, to ensure those with the greatest need had adequate staff.

Chairman Dewane asked how the physicians adjusted to the staffing requirements.

Dr. White said that many physicians assisted in the care of COVID-19 positive patients, while some physicians were able to utilize their personal time off without limiting patient care.

Vice Chairman Wilcox commended staff and their ability to adapt to the circumstances as they presented themselves.

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

6. Discuss and Review August 2020 Valleywise Health's Financials and Statistical Information, cont.

Ms. Agnew recounted the uncertainty of many operational aspects during the COVID-19 surge that took place in mid-July. She noted that personal protective equipment (PPE) supplies had decreased, causing prices to increase and it was a team effort to adjust to those challenges to ensure staff and patients were adequately protected. Those challenges were reflected in the FY 2020 results, which reported increased costs accompanied by lower volumes. She was pleased with the financial position, however, staff focused on rebuilding the lost revenues and preparing for the next surge of patients.

Vice Chairman Wilcox questioned if the national and local response to the pandemic had been organized and if staff was confident in the ability to acquire needed PPE and other supplies moving forward.

Mr. Purves noted that improvements had been made in the national emergency response, however, there continued to be room for improvement. He stated that there would be a robust after-action review to improve upon the lessons learned. On a local level, there was a great effort to partner with businesses and Arizona Department of Health Services to provide expert advice and improve preparedness efforts.

Dr. White agreed and stated that he continued to meet with stakeholders to maintain preparedness. He acknowledged that the supply chain was constrained across the country and he commended the team at Valleywise Health for their ability to ensure that staff had the necessary equipment to ensure the safety of employees and patients.

Mr. Purves said that the pandemic exposed areas of inadequacies within the current healthcare delivery system.

Director Harden questioned if the marketplace for PPE and other supplies had stabilized.

Ms. Agnew said that vendors continued to operate under an allocation methodology to prevent hoarding situations. While the prices for PPE and other supplies were higher than pre-pandemic prices, there had been a decrease in costs after the surge passed. She noted that Valleywise Health had received several donations of PPE and expressed her appreciation to all staff members that had coordinated those efforts.

7. Discuss, Review and Approve the President & Chief Executive Officer's Performance Goals for Fiscal Year 2021

**MOTION:** Director Thomas moved to approve the President & Chief Executive Officer's Performance Goals for fiscal year 2021. Vice Chairman Wilcox seconded.

Director Harden expressed the need to continue to focus on reducing the first year voluntary turnover rate and have that metric included in the performance goals for FY 2021.

**MOTION:** Director Harden moved to amend the motion to include a goal to reduce turnover costs specific to employees in their first year of employment, with the metrics; minimum 27.69%, midpoint 27.13% and maximum 26.56 percent. Director Gerard seconded.

Vice Chairman Wilcox said she was assured that staff would continue to monitor the first year voluntary turnover rate while tracking overall employee retention. She noted that the Board would continue to receive a monthly report.

Director Gerard requested a roll call vote.

Director Harden expressed her concern with the increasing turnover rate for first year employees.

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

7. Discuss, Review and Approve the President & Chief Executive Officer's Performance Goals for Fiscal Year 2021, cont.

Mr. Purves appreciated the comments and stated that staff would continue to track and monitor the first year turnover within the organization, however, he did not believe focusing on that specific measure was an accurate reflection of the overall employee retention within the organization. There were various factors that contributed to a higher turnover rate within the first year, including but not limited the competitive marketplace and the significant increase in positions within the behavioral health service line.

Ms. Sanchez Cox concurred and noted that retention of all employees was the focus of the organization, not just those within the first year of employment.

Mr. Purves noted the current hiring rate within Valleywise Health was the highest it had been in several years and it would continue increase as the Care Reimagined Program was implemented.

Director Thomas stated that there was a general trend of reduced turnover over the last several months.

Director Gerard called the question on the amendment to the motion.

**VOTE:** 2 Ayes: Director Gerard, Director Harden

3 Nays: Chairman Dewane, Vice Chairman Wilcox, Director Thomas

Motion failed.

Chairman Dewane called the question on the original motion.

**VOTE:** 3 Ayes: Chairman Dewane, Vice Chairman Wilcox, Director Thomas

2 Nays: Director Gerard, Director Harden

Motion passed.

8. Consideration, Discussion, and Possible Action on the Performance Evaluation for Fiscal Year 2020 for Melanie Talbot, Chief Governance Officer and Clerk of the Board.

**MOTION:** Director Harden moved that based on the Board's review of Melanie Talbot's performance

for the 2020 fiscal year, the Board has determined that she exceeded expectations. Director

Thomas seconded.

**VOTE:** 5 Ayes: Chairman Dewane, Vice Chairman Wilcox, Director Gerard, Director Harden,

**Director Thomas** 

0 Nays

Motion passed.

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

- 9. Review and Possible Action on Reports to the Board of Directors
  - a. Monthly Marketing and Communications Report
  - b. Monthly Care Reimagined Capital Purchases
  - c. Monthly Valleywise Health's Employee Turnover Report (August 2020)
  - d. Quality Management Council Meeting Minutes (July 2020)
  - e. Return on Investment on Strategic & Capital Investment Report Cath Lab/EP Equipment
  - f. Valleywise Health Nurse Staffing Plan for Fiscal Year 2021

Mr. Bryon addressed item 9.a., Monthly Marketing and Communications report and outlined the new format, highlighting data included.

- 10. Concluding Items
  - a. Old Business:
  - b. Board Member Requests for Future Agenda Items or Reports
  - c. Comments
    - i. Chairman and Member Closing Comment
    - ii. President and Chief Executive Officer Summary of Current Events

Mr. Purves announced that Ms. Stotler had been selected to serve on the Det Norske Veritas Germanischer Lloyd (DNV GL) Advisory Board, specifically on the Accreditation Committee. He also expressed his appreciation to all employees, as Valleywise Health had been named among the nation's 100 Top Hospitals by IBM Watson Health and was the only Arizona Hospital to receive an Everest Award, which recognized hospitals that had the fastest rate of improvement during a five-year period.

1. Approval of Consent Agenda, cont.

**MOTION:** Director Thomas moved to recess general session and convene in executive session,

pursuant to A.R.S. § 38-431.03(A)(3) for the purpose of obtaining legal advice at 3:02 p.m.

Vice Chairman Wilcox seconded.

**VOTE:** 5 Ayes: Chairman Dewane, Vice Chairman Wilcox, Director Gerard, Director Harden,

**Director Thomas** 

0 Navs

Motion passed.

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

Chairman Dewane reconvened general session at 3:28 p.m.

1. Approval of Consent Agenda, cont.

Chairman Dewane noted that consent agenda items 1.c.iii. and 1.c.iv. would not be discussed or voted on.

Vice Chairman Wilcox asked that the item be placed on the agenda next month, with a discussion on the Valleywise Community Health Centers Governing Council application process.

# <u>Adjourn</u>

MOTION: Director Thomas moved to adjourn the September 23, 2020 Special Health Care District

Board of Directors Formal Meeting. Vice Chairman Wilcox seconded.

**VOTE:** 5 Ayes: Chairman Dewane, Vice Chairman Wilcox, Director Gerard, Director Harden,

**Director Thomas** 

0 Nays

Motion passed.

Meeting adjourned at 3:30 p.m.

Mark G. Dewane, Chairman Special Health Care District Board of Directors

11



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 1.b.i.

Contracts 90-21-032-1

# **Melanie Talbot**

From: Compliance 360 < msgsystem@compliance360.com >

Wednesday, September 30, 2020 3:59 PM Sent:

To: Melanie Talbot

**Subject:** Contract Approval Request: (IGA) HIV Prevention Program (TESTAZ) Arizona Department of Health

Services (ADHS)

# Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: (IGA) HIV Prevention Program (TESTAZ) Arizona Department of Health Services (ADHS)

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

# Approve/Reject Contract

**Click here** to approve or reject the Contract.

### **Attachments**

Name	DescriptionTypeCurrent File
IGA Agreement (pending	File IGA Contract Template Revised
signatures)	09.14.20.pdf
SAM 2020	File ADHS.pdf
OIG 2020	File ADHS.pdf
RFBA	File RFBA - TESTAZ IGA 2020.pdf

# **Contract Information**

**Division Contracts Division** Folder Contracts \ Grants Status Pending Approval

Title (IGA) HIV Prevention Program (TESTAZ)

Contract Identifier Board - New Contract

MIHS Contract 90-21-032-1 (ADHS # IGA2020-049) Number

Primary Responsible Tymczyna, Katherine Party

Departments GRANTS ADMINISTRATION

Product/Service IGA for the HIV Prevention Program

Action/Background Approve a new Intergovernmental Agreement (IGA) with Arizona Department of Health Services (ADHS) and Maricopa County Special Health Care District dba Valleywise Health for the HIV Prevention Program.

> Arizona's HIV Prevention Program is based upon priorities established during the HIV Prevention Community Planning process and in conjunction with the Cooperative Agreement guidelines between ADHS, Bureau of Tobacco and Chronic Disease (BTCD) and the U.S. Centers for Disease Control and Prevention (CDC). The overall recommendation for statewide prevention programming is to target HIV positive persons and their partners, men who have sex with men (MSM), and injection drug users (IDU).

The purpose of this agreement is to provide HIV testing to individuals presenting for treatment in the Valleywise Health Emergency Departments. All HIV testing sessions shall be in accordance with the CDC recommendations for HIV testing and linkage to care. The initial term of this intergovernmental agreement is from October 1, 2020 to September 30, 2025. ADHS shall have the right, at its sole option, to renew the Agreement, so long as the aggregate term does not exceed five (5) years. Both Valleywise Health and ADHS may terminate this Agreement at any time with thirty (30) days' notice I writing specifying the termination date. Such notices shall be given by personal delivery or by certified mail, return receipt requested.

This is a cost reimbursement of \$200,000 to Valleywise Health. All expenses are 100% grant funded. Revenue will equal expenses.

This IGA is sponsored by Dr. Michael White, EVP and Chief Clinical Officer.

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

Notes Contract No. IGA2020-049

Category IGA

Effective Date 10/1/2020

Expiration Date 9/30/2025

Annual Value \$200,000.00

Expense/Revenue Revenue

Budgeted Travel Type Yes

Procurement Number

Primary Vendor Arizona Department of Health Services (ADHS)

# Responses

Member Name	Status	Comments
Melton, Christopher C.	Approved	Reviewed and approved
Joiner, Jennifer L.	Approved	
Landas, Lito S.	Approved	
White, Michael	Approved	
Demos, Martin C.	Approved	

Agnew, Claire F. Approved
Purves, Steve A. Approved
Talbot, Melanie L. Current
Harding, Barbara J. Approved



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 1.b.ii.

**Contracts** 90-21-065-1

# **Cynthia Cornejo**

From: Compliance 360 < msgsystem@compliance360.com>

Sent: Wednesday, September 16, 2020 10:45 AM

**To:** Melanie Talbot

**Subject:** Contract Approval Request: Auction Services Sierra Auction

# **Message Information**

From <u>Purves</u>, <u>Steve</u>
To <u>Talbot</u>, <u>Melanie</u>;

Subject Contract Approval Request: Auction Services Sierra Auction

Additional Indicate whether you approve or reject by clicking the Approve or Reject button. Information

Add comments as necessary.

# Approve/Reject Contract

**Click here** to approve or reject the Contract.

# **Attachments**

Name	DescriptionTypeCurrent File
ADSPO17-174072-Procurement_File_ADSPO-00007213.zip	File ADSPO17-174072- Procurement_File_ADSPO-00007213.zip
ADSPO17-174072-BAFO_Pricing_1.docx	File ADSPO17-174072- BAFO_Pricing_1.docx
ADSPO17-174072- Buyer_Terms_and_Conditions.pdf	File ADSPO17-174072- Buyer_Terms_and_Conditions.pdf
ADSPO17-174072-Clarification_email_2.pdf	File ADSPO17-174072- Clarification_email_2.pdf
ADSPO17-174072- Amendment_1_toSection_2A _Scope_of_Work.pdf	File ADSPO17-174072- Amendment_1_toSection_2AScope_of_Work.pdf
ADSPO17-174072-Attachment_2A _Experience_and_Capacity_Questionnaire.pdf	File ADSPO17-174072-Attachment 2A -
ADSPO17-174072-Attachment_2B _Organization_Profile_1.docx	File ADSPO17-174072-Attachment_2BOrganization_Profile_1.docx
ADSPO17-174072-Attachment_3A _Method_Proposal.pdf	File ADSPO17-174072-Attachment_3AMethod_Proposal.pdf
ADSPO17-174072-Attachment_3C _Proposed_Subcontractors_1.docx	File ADSPO17-174072-Attachment_3CProposed_Subcontractors_1.docx
ADSPO17-174072-Attachment_3D _Performance_Guarantee_1.docx	File ADSPO17-174072-Attachment_3DPerformance_Guarantee_1.docx
ADSPO17-174072-Attachment_5B _Conformance_Statements_1.docx	File ADSPO17-174072-Attachment_5B _Conformance_Statements_1.docx

ADSPO17-174072-Attachment 5C -\_Insurance\_and\_Bonding\_Evidence\_1.docx ADSPO17-174072-Garda Secure Transportation Services.docx ADSPO17-174072-Letter\_of\_Assurance.pdf

ADSPO17-174072-Samples\_of\_Reports.pdf

ADSPO17-174072-Section\_1A\_-\_Solicitation\_Summary\_4.pdf ADSPO17-174072-Section 1B -\_Standard\_Instructions\_to\_Offerors\_4.pdf

ADSPO17-174072-Section 3B -\_Uniform\_Terms\_and\_Conditions\_4.pdf

ADSPO17-174072-Section\_3A\_-\_Special\_Terms\_and\_Conditions\_4.pdf

Surplus Pickup Regust form 2020.pdf

Surplus drop off sheet 2020.html

Unsigned Cooperative Agreement

File ADSPO17-174072-Attachment\_5C\_-\_Insurance\_and\_Bonding\_Evidence\_1.docx

File ADSP017-174072-Garda\_Secure\_Transportation\_Services.docx

File ADSPO17-174072-Letter\_of\_Assurance.pdf

File ADSPO17-174072-Samples\_of\_Reports.pdf

File ADSPO17-174072-Section\_1A\_-Solicitation\_Summary\_4.pdf

File ADSPO17-174072-Section\_1B\_-Standard\_Instructions\_to\_Offerors\_4.pdf

File ADSPO17-174072-Section\_3B\_-\_Uniform\_Terms\_and\_Conditions\_4.pdf

File ADSPO17-174072-Section\_3A\_-\_Special\_Terms\_and\_Conditions\_4.pdf

File Surplus Pickup Requst form 2020.pdf

File Surplus drop off sheet 2020.html

File 90-21-065-1 Sierra Auction-Valleywise-Cooperative Purchasing Agreement.pdf

# Contract Information

**Division Contracts Division** 

Folder Contracts \ Services - Management/Outsourcing

Status Pending Approval

Title Auction Services

Contract Identifier Board - New Contract

MIHS Contract 90-21-065-1

Primary Responsible Hammer, Mary P. Party

Departments PURCHASING

Product/Service Auction Services
Description

Action/Background Approve a new contract between Sierra Auction Management Inc. and Maricopa County Special Health Care District dba Valleywise Health for Auction Services. The purpose of this agreement is to provide Auction Services Management Inc. for Valleywise Health. The initial contract term is from October 1,2020 to June 22, 2021 and may be extended for one (1) additional year. Either party may terminate the contract upon ninety (90) days written notice

FINANCIAL IMPLICATIONS:

This is a revenue generating contract.

This new contract is sponsored by Claire Agnew, SVP & Interim Chief Financial Officer

Evaluation Process The Contractor was determined to meet the requirements of the requesting department and Valleywise Health. Procurement has been satisfied pursuant to HS-102B(1) of the Procurement Code in that contracts between Valleywise Health and other political subdivisions, cooperative purchasing agreements with governmental entities or other governments are exempt from the solicitation requirements of the Procurement Code.

Notes

Category Co-op
Effective Date 10/1/2020
Expiration Date 6/22/2021
Annual Value \$0.00
Expense/Revenue Revenue
Budgeted Travel Type N/A
Procurement Number
Primary Vendor Sierra Auction

# Responses

Member Name	Status Comments
Melton, Christopher C.	ApprovedReviewed and approved
Dereadt, Paul J.	Approved a maware of this vendor and they appear to be a good option Valleywise Health when the need arises to salvage excess or obsolete equipment or other material.
Landas, Lito S.	Approved
Demos, Martin C.	Approved
Agnew, Claire F.	Approved
Purves, Steve A.	Approved
Talbot, Melanie L.	Current



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 1.b.iii.

Contracts 90-19-176-1-03

# **Cynthia Cornejo**

From: Compliance 360 < msgsystem@compliance360.com >

Wednesday, October 7, 2020 1:52 PM Sent:

To: Melanie Talbot

Subject: Contract Approval Request: Amendment #3 (IGA) Refugee Clinic - Price Sheet Update Arizona

Department of Health Services (ADHS)

# Message Information

From Harding, Barbara

To Talbot, Melanie;

Subject Contract Approval Request: Amendment #3 (IGA) Refugee Clinic - Price Sheet Update Arizona Department of Health Services (ADHS)

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

# Approve/Reject Contract

**Click here** to approve or reject the Contract.

### **Attachments**

Name	DescriptionTypeCurrent File
Amendment #3 - Pending signatures	File IGA - CTR050459 - A3 - BCDHP.pdf
RFBA (assigned)	File RFBA - IGA Refugee Clinic (CTR05049 A3) 90-19- 176-1-03 signed (002).pdf
SAM 2020	File ADHS.pdf
OIG 2020	File ADHS.pdf
E-Mail with Details	File FW CTR050459 - Valleywise - Refugee Clinic - A3.msg

## **Contract Information**

**Division Contracts Division** 

Folder Amendments

Status Pending Approval

Title Amendment #3 (IGA) Refugee Clinic - Price Sheet Update

Contract Identifier Board - Amendment

MIHS Contract 90-19-176-1-03 (ADHS# CTR050459)

Primary Responsible Tymczyna, Katherine Party

Departments GRANTS ADMINISTRATION

Product/Service Refugee Clinic for A1C>9

Action/Background Approved Amendment #3 to replace the current Price Sheet for the period of June 30, 2020 through June 29, 2021 to Valleywise Health for CTR050459.

> This agreement references the Intergovernmental Agreement (IGA) with Arizona Department of Health Services ("ADHS") and Maricopa County Special Health Care District dba Valleywise Health for the Refugee Clinic pertaining to the Category A, addressing Diabetes Management and Type 2 Diabetes Prevention strategies.

The continuing objective of this IGA is to address a variety of health conditions such as diabetes and prevention strategies designed to impact performance measure, and to promote behavior changes so that public health impact will be maximized. This IGA provides EMR enhancement that accommodates automatic referrals for refugee patients with an AIC>9. Valleywise Health funded Cultural Health Navigators, PCP, and Pharmacists plays a role in providing education and referrals to a certified Chronic Disease Self-Management Programs and other diabetes prevention programs. The term of this IGA is from February 1, 2019 to January 31, 2024. Both Valleywise Health and ADHS may terminate this this IGA at any time with thirty (30) days' notice in writing specifying the termination date.

This is a cost reimbursement with a \$30,000 annual reimbursement to Valleywise Health. Budget includes an indirect cost of 10% of total expenses.

This Amendment #3 is sponsored by Dr. Michael White, EVP & Chief Clinical Officer.

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

Notes CTR050459

Category IGA

Effective Date 6/30/2020

Expiration Date 6/29/2021

Annual Value \$30,000.00

Expense/Revenue Revenue

Budgeted Travel Type No

Procurement Number

Primary Vendor Arizona Department of Health Services (ADHS)

# Responses

Member Name	Status	Comments
Melton, Christopher C.	Approved	Reviewed and approved
Joiner, Jennifer L.	Approved	
Landas, Lito S.	Approved	
White, Michael	Approved	
Demos, Martin C.	Approved	

Agnew, Claire F. Approved
Purves, Steve A. Approved
Talbot, Melanie L. Current
Harding, Barbara J. Approved



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 1.b.iv.

**Contracts** 90-21-133-1

# **Cynthia Cornejo**

From: Compliance 360 < msgsystem@compliance360.com >

Sent: Saturday, October 10, 2020 7:01 AM

To: Melanie Talbot

**Subject:** Contract Approval Request: IGA Administration of the Access to Professional Services Initiative (APSI)

- Valleywise Health CY21 AHCCCS

# Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: IGA Administration of the Access to Professional Services Initiative (APSI) - Valleywise Health CY21 AHCCCS

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

# Approve/Reject Contract

**Click here** to approve or reject the Contract.

### **Attachments**

Name DescriptionTypeCurrent File

(Draft) CYE21 APSI Admin IGA\_Valleywise.pdf

File (Draft) CYE21 APSI Admin IGA\_Valleywise.pdf

#### Contract Information

**Division Contracts Division** 

Folder Contracts \ Services - Consulting/Auditing & Other

Status Pending Approval

Title IGA Administration of the Access to Professional Services Initiative (APSI) -

Valleywise Health CY21

Contract Identifier Board - New Contract

MIHS Contract 90-21-133-1 Number

Primary Responsible Party Melton, Christopher C.

Departments HOSPITAL ADMINISTRATION

Product/Service Access to Professional Services Initiative (APSI): AHCCCS has received Description approval from CMS to provide enhanced support to certain professionals in

order to (1) preserve and enhance access to these professionals who deliver

essential services to Medicaid recipients in Arizona and (2) support

professionals who are critical to professional training and education efforts. APSI is a program to preserve and promote access to medical services

through a uniform percentage increase to the Contractor's rates for professional services provided by qualified physicians and non-physician professionals affiliated with designated teaching hospitals. APSI is effective with dates of service on and after October 1, 2020. On or before November 1 of the Contract Year, Valleywise Health shall transfer to AHCCCS the amount of \$175,500, on behalf of Dignity Health, for the administration of the APSI for the Contract Year ending September 30, 2021.

The purpose of this Agreement is to set forth the procedures under which the Public Entity will, at its discretion, transfer public funds for use as the Nonfederal Share of expenditures by the administration for the administration of the APSI Payment IGA.

Action/Background Approve an Intergovernmental Agreement ("IGA") with Arizona Health Care Cost Containment System ("AHCCCS") for Valleywise Health to participate in the Access to Professional Services Initiative ("APSI"). This IGA commences October 1, 2020 through September 30, 2021 and is eligible for annual renewal by AHCCCS via an amended Attachment A for a future Contract Year and the timely transfer of funds in accordance with any such amended Attachment A.

> This new IGA is sponsored by Claire Agnew, SVP & Interim Chief Financial Officer.

**Evaluation Process** 

Notes

Category IGA

Effective Date 10/1/2020

Expiration Date 9/30/2021

Annual Value \$175,500.00

Expense/Revenue Expense

**Budgeted Travel Type** 

Procurement Number

Primary Vendor AHCCCS

# Responses

Member Name	Status	Comments
Melton, Christopher C.	Approved	
Demos, Martin C.	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 1.b.v.

**Contracts** 90-21-134-1

From: Compliance 360 < msgsystem@compliance360.com >

Saturday, October 10, 2020 7:01 AM Sent:

To: Melanie Talbot

**Subject:** Contract Approval Request: IGA Support of Access to Professional Services Initiative (APSI) –

Valleywise Health CY21 AHCCCS

## Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: IGA Support of Access to Professional Services Initiative (APSI) – Valleywise Health CY21 AHCCCS

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

## Approve/Reject Contract

**Click here** to approve or reject the Contract.

#### **Attachments**

Name DescriptionTypeCurrent File (Draft) CYE21 APSI Support File (Draft) CYE21 APSI Support IGA\_Valleywise.pdf IGA\_Valleywise.pdf File CYE21 APSI IGA\_Valleywise\_Attachment CYE21 APSI IGA\_Valleywise\_Attachment B.pdf B.pdf

#### Contract Information

**Division Contracts Division** 

Folder Contracts \ Services - Consulting/Auditing & Other

Status Pending Approval

Title IGA Support of Access to Professional Services Initiative (APSI) - Valleywise

Health CY21

Contract Identifier Board - New Contract

MIHS Contract 90-21-134-1

Party

Primary Responsible Melton, Christopher C.

Departments HOSPITAL ADMINISTRATION

Product/Service Access to Professional Services Initiative (APSI): AHCCCS has received Description approval from CMS to provide enhanced support to certain professionals in

order to (1) preserve and enhance access to these professionals who deliver

essential services to Medicaid recipients in Arizona and (2) support

professionals who are critical to professional training and education efforts. APSI is a program to preserve and promote access to medical services through a uniform percentage increase to the Contractor's rates for professional services provided by qualified physicians and non-physician professionals affiliated with designated teaching hospitals. APSI is effective with dates of service on and after October 1, 2020. Valleywise Health will provide State match funds in the amount of \$4,464,945.08 to the State of Arizona in order to receive Federal match funds.

The purpose of this Agreement is to set forth the procedures under which the Public Entity will, at its discretion, transfer public funds for use as the Nonfederal Share of expenditures by the administration for the APSI program and payments made by AHCCCS to MCOs for the Contract Year in support of the APSI described in this Agreement.

Action/Background Approve an Intergovernmental Agreement ("IGA") with Arizona Health Care Cost Containment System ("AHCCCS") for Valleywise Health to participate in the Access to Professional Services Initiative ("APSI"). This IGA commences October 1, 2020 through September 30, 2021 and is eligible for annual renewal by AHCCCS via an amended Attachment A for a future Contract Year and the timely transfer of funds in accordance with any such amended Attachment A.

> This new IGA is sponsored by Claire Agnew, SVP & Interim Chief Financial Officer.

**Evaluation Process** 

Notes

Category IGA

Effective Date 10/1/2020

Expiration Date 9/30/2021

Annual Value \$4,464,945.08

Expense/Revenue Expense

**Budgeted Travel Type** 

Procurement Number

Primary Vendor AHCCCS

Member Name	Status	Comments
Melton, Christopher C.	Approved	
Demos, Martin C.	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.vi.

**Contracts** 90-21-135-1

From: Compliance 360 < msgsystem@compliance360.com >

Sent: Saturday, October 10, 2020 7:00 AM

To: Melanie Talbot

**Subject:** Contract Approval Request: IGA Support of Access to Professional Services Initiative (APSI) - PCH

CY21 AHCCCS

## Message Information

From Purves, Steve

To Talbot, Melanie:

Subject Contract Approval Request: IGA Support of Access to Professional Services Initiative (APSI) - PCH CY21 AHCCCS

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

## Approve/Reject Contract

**Click here** to approve or reject the Contract.

#### **Attachments**

DescriptionTypeCurrent File

(Draft) CYE21 APSI Support IGA\_Valleywise\_PCH.pdf

CYE21 APSI

IGA\_Valleywise\_PCH\_Attachment B.pdf

File (Draft) CYE21 APSI Support IGA\_Valleywise\_PCH.pdf

File CYE21 APSI

IGA\_Valleywise\_PCH\_Attachment B.pdf

#### Contract Information

**Division Contracts Division** 

Folder Contracts \ Services - Consulting/Auditing & Other

Status Pending Approval

Title IGA Support of Access to Professional Services Initiative (APSI) - PCH CY21

Contract Identifier Board - New Contract

MIHS Contract 90-21-135-1

Primary Responsible Party Melton, Christopher C.

Departments HOSPITAL ADMINISTRATION

Product/Service Access to Professional Services Initiative (APSI): AHCCCS has received

Description approval from CMS to provide enhanced support to certain professionals in order to (1) preserve and enhance access to these professionals who deliver

essential services to Medicaid recipients in Arizona and (2) support

professionals who are critical to professional training and education efforts.

APSI is a program to preserve and promote access to medical services through a uniform percentage increase to the Contractor's rates for professional services provided by qualified physicians and non-physician professionals affiliated with designated teaching hospitals. APSI is effective with dates of service on and after October 1, 2020. Valleywise Health will provide State match funds in the amount of \$3,769,500, on behalf of Phoenix Children's Hospital, to the State of Arizona in order to receive Federal match funds.

The purpose of this Agreement is to set forth the procedures under which the Public Entity will, at its discretion, transfer public funds for use as the Nonfederal Share of expenditures by the administration for the APSI program and payments made by AHCCCS to MCOs for the Contract Year in support of the APSI described in this Agreement.

Action/Background Approve an Intergovernmental Agreement ("IGA") with Arizona Health Care Cost Containment System ("AHCCCS"), on behalf of Phoenix Children's Hospital, to participate in the Access to Professional Services Initiative ("APSI"). This IGA commences October 1, 2020 through September 30, 2021 and is eligible for annual renewal by AHCCCS via an amended Attachment A for a future Contract Year and the timely transfer of funds in accordance with any such amended Attachment A.

This new IGA is sponsored by Claire Agnew, SVP & Chief Financial Officer.

**Evaluation Process** 

Notes

Category IGA

Effective Date 10/1/2020

Expiration Date 9/30/2021

Annual Value \$3,769,500.00

Expense/Revenue Expense

Budgeted Travel Type

Procurement Number

Primary Vendor AHCCCS

Member Name	Status	Comments
Melton, Christopher C.	Approved	
Demos, Martin C.	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.vii.

**Contracts** 90-21-136-1

From: Compliance 360 < msgsystem@compliance360.com >

Sent: Saturday, October 10, 2020 6:59 AM

To: Melanie Talbot

**Subject:** Contract Approval Request: IGA Administration of the Access to Professional Services Initiative (APSI)

- Dignity Health CY21 AHCCCS

## Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: IGA Administration of the Access to Professional Services Initiative (APSI) - Dignity Health CY21 AHCCCS

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

## Approve/Reject Contract

**Click here** to approve or reject the Contract.

#### **Attachments**

Name DescriptionTypeCurrent File

(Draft) CYE21 APSI Admin IGA\_Valleywise\_Dignity.pdf

File (Draft) CYE21 APSI Admin IGA\_Valleywise\_Dignity.pdf

#### Contract Information

**Division Contracts Division** 

Folder Contracts \ Services - Consulting/Auditing & Other

Status Pending Approval

Title IGA Administration of the Access to Professional Services Initiative (APSI) -

Dignity Health CY21

Contract Identifier Board - New Contract

MIHS Contract 90-21-136-1 Number

Primary Responsible Party Melton, Christopher C.

Departments HOSPITAL ADMINISTRATION

Product/Service Access to Professional Services Initiative (APSI): AHCCCS has received

Description approval from CMS to provide enhanced support to certain professionals in

order to (1) preserve and enhance access to these professionals who deliver

essential services to Medicaid recipients in Arizona and (2) support

professionals who are critical to professional training and education efforts. APSI is a program to preserve and promote access to medical services

through a uniform percentage increase to the Contractor's rates for professional services provided by qualified physicians and non-physician professionals affiliated with designated teaching hospitals. APSI is effective with dates of service on and after October 1, 2020. On or before November 1 of the Contract Year, Valleywise Health shall transfer to AHCCCS the amount of \$99,500, on behalf of Dignity Health, for the administration of the APSI for the Contract Year ending September 30, 2021.

The purpose of this Agreement is to set forth the procedures under which the Public Entity will, at its discretion, transfer public funds for use as the Nonfederal Share of expenditures by the administration for the administration of the APSI Payment IGA.

Action/Background Approve an Intergovernmental Agreement ("IGA") with Arizona Health Care Cost Containment System ("AHCCCS"), on behalf of Dignity Health, to participate in the Access to Professional Services Initiative ("APSI"). This IGA commences October 1, 2020 through September 30, 2021 and is eligible for annual renewal by AHCCCS via an amended Attachment A for a future Contract Year and the timely transfer of funds in accordance with any such amended Attachment A.

> This new IGA is sponsored by Claire Agnew, SVP & Interim Chief Financial Officer.

**Evaluation Process** 

Notes

Category IGA

Effective Date 10/1/2020

Expiration Date 9/30/2021

Annual Value \$99,500.00

Expense/Revenue Expense

**Budgeted Travel Type** 

Procurement Number

Primary Vendor AHCCCS

Member Name	Status	Comments
Melton, Christopher C.	Approved	
Demos, Martin C.	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.viii.

**Contracts** 90-21-137-1

From: Compliance 360 < msgsystem@compliance360.com >

Sent: Saturday, October 10, 2020 6:58 AM

To: Melanie Talbot

**Subject:** Contract Approval Request: IGA Support of Access to Professional Services Initiative (APSI) - Dignity

Health CY21 AHCCCS

## Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: IGA Support of Access to Professional Services Initiative (APSI) - Dignity Health CY21 AHCCCS

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

## Approve/Reject Contract

**Click here** to approve or reject the Contract.

#### **Attachments**

DescriptionTypeCurrent File

(Draft) CYE21 APSI Support IGA\_Valleywise\_Dignity.pdf

CYE21 APSI

IGA\_Valleywise\_Dignity\_Attachment

B.pdf

File (Draft) CYE21 APSI Support IGA\_Valleywise\_Dignity.pdf

File CYE21 APSI

IGA\_Valleywise\_Dignity\_Attachment B.pdf

#### **Contract Information**

**Division Contracts Division** 

Folder Contracts \ Services - Consulting/Auditing & Other

Status Pending Approval

Title IGA Support of Access to Professional Services Initiative (APSI) - Dignity

Health CY21

Contract Identifier Board - New Contract

MIHS Contract 90-21-137-1

Number

Primary Responsible Melton, Christopher C. Party

Departments HOSPITAL ADMINISTRATION

Product/Service Access to Professional Services Initiative (APSI): AHCCCS has received Description approval from CMS to provide enhanced support to certain professionals in order to (1) preserve and enhance access to these professionals who deliver essential services to Medicaid recipients in Arizona and (2) support professionals who are critical to professional training and education efforts. APSI is a program to preserve and promote access to medical services through a uniform percentage increase to the Contractor's rates for professional services provided by qualified physicians and non-physician professionals affiliated with designated teaching hospitals. APSI is effective with dates of service on and after October 1, 2020. Valleywise Health will provide State match funds in the amount of \$2,358,355.51, on behalf of Dignity Health, to the State of Arizona in order to receive Federal match funds.

The purpose of this Agreement is to set forth the procedures under which the Public Entity will, at its discretion, transfer public funds for use as the Nonfederal Share of expenditures by the administration for the APSI program and payments made by AHCCCS to MCOs for the Contract Year in support of the APSI described in this Agreement.

Action/Background Approve an Intergovernmental Agreement ("IGA") with Arizona Health Care Cost Containment System ("AHCCCS"), on behalf of Dignity Health, to participate in the Access to Professional Services Initiative ("APSI"). This IGA commences October 1, 2020 through September 30, 2021 and is eligible for annual renewal by AHCCCS via an amended Attachment A for a future Contract Year and the timely transfer of funds in accordance with any such amended Attachment A.

> This new IGA is sponsored by Claire Agnew, SVP & Interim Chief Financial Officer.

**Evaluation Process** 

Notes

Category IGA

Effective Date 10/1/2020

Expiration Date 9/30/2021

Annual Value \$2,358,355.51

Expense/Revenue Expense

**Budgeted Travel Type** 

Procurement Number

Primary Vendor AHCCCS

Member Name	Status	Comments
Melton, Christopher C.	Approved	
Demos, Martin C.	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.ix.

Contracts 90-12-084-1-40



2601 E. Roosevelt Phoenix, AZ 85008 Phone: (602) 344-8551

**DATE:** October 8, 2020

**TO:** Valleywise Health Board of Directors

cc: Steve Purves, President and Chief Executive Officer

Martin Demos, General Counsel

Michael White, Executive Vice President and Chief Clinical Officer

Melanie Talbot, Chief Governance Officer

**FROM:** Claire Agnew, Interim Chief Financial Officer

**SUBJECT:** District Medical Group Contract - Amendment #40

A request for approval of Amendment #40 to the contract between District Medical Group (DMG) and Valleywise Health has been included in the October 28, 2020 Formal Meeting Consent Agenda. This amendment will be effective November 2, 2020, unless otherwise noted. The following requests are segregated by those that have or do not have a financial impact.

#### **Amendment 40 Requests with a Financial Impact**

#### Add a 1.0 FTE Burn Physician, Effective November 2, 2020

Valleywise Health is requesting the addition of 1.0 FTE Burn Physician to support distribution of physician workload, provide more consistent backfill for the burn service, and allow for increased physician supervision of the unit, which will support continuous improvement in billing and documentation of facility acuity.

This request also responds to the following needs recognized for the service line. The laser program is trending to require a minimum of 2 full operating room (OR) days in addition to the current burn OR volumes plus clinic expansion. In addition, this will allow for formal establishment of a wound clinic separate from burn, adding 2 full clinic days to schedule, and allow possible expansion of wound clinic staffing at Comprehensive Health Clinic – Peoria.

Position	Previous FTEs	New FTEs	Previous	New
			Compensation	Compensation
Burn Physician	3.3	4.3	\$2,086,689	\$2,719,019

The additional gross professional fee collections are estimated to be \$396,435 for the 1.0 FTE Burn Physician and the billing fee is estimated to be \$35,679.

The total annual cost for the addition of the 1.0 FTE Burn Physician is \$271,574. The total cost for the additional FTE for the remainder of Fiscal Year 2021 is: \$181,049.

#### • Add 0.3 FTE Burn Medical Director, Effective November 2, 2020

Valleywise Health is requesting to add 0.3 FTE Burn Medical Director to the current 0.2 FTE. The directorship position is responsible for sustaining and growing the service line. The current FTE allotment allows for marginal sustainment of services. The increase in FTE will facilitate more strategic leading and planning as competition for burn services increases across the state, specifically the Tucson and potentially Flagstaff markets.

Position	Previous FTEs	New FTEs	Previous	New
			Compensation	Compensation
Burn Medical	0.2	0.5	\$126,466	\$316,165
Director				

The total annual cost for the addition of the 0.3 FTE Burn Medical Director is: \$189,699. The total cost for the addition of the 0.3 Burn Medical Director for the remainder of Fiscal Year 2021 is: \$126,466.

• Revise Epic Department Professional Billing Appendix, regarding professional billing responsibility for all lines to remove "UNLESS RBHA", Effective, January 1, 2020. Valleywise is requesting to remove "UNLESS RBHA" where stated throughout the Epic Department Professional Billing Appendix. DMG can bill psychiatry professional fees for Post-Court Ordered Evaluations for patients with Serious Mental Illness effective 1/1/20, whereas the current language "Unless RBHA" precludes them from doing so. The estimated impact is approximately \$1.2M per year, or \$100k per month, with a 9% billing fee. We are not increasing our Psychiatry collection goal at this time.

The estimated total net collections for Fiscal Year 2020 for the revisions to the Epic Department Professional Billing Appendix is: \$546,000. The estimated total net collections for Fiscal Year 2021 for the revisions to the Epic Department Professional Billing Appendix is: \$1,092,000.

## **Amendment 40 Requests without a Financial Impact**

The following item has no impact to the cost of the DMG contract with Valleywise Health and consists of corrections or modifications to the language of the contract:

N/A

The total net financial impact **Fiscal Year 2020** for Amendment #40 to the Valleywise Health-DMG Contract is: \$546,000.

The total net financial impact **Fiscal Year 2021** for Amendment #40 to the Valleywise Health-DMG Contract is: \$784,485.

From: Compliance 360 < msgsystem@compliance360.com >

Wednesday, October 14, 2020 9:26 AM Sent:

To: Melanie Talbot

**Subject:** Contract Approval Request: Amendment #40 to the Professional Medical Services District Medical

Group (DMG)

## Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: Amendment #40 to the Professional Medical Services District Medical Group (DMG)

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

## Approve/Reject Contract

**Click here** to approve or reject the Contract.

#### **Attachments**

DescriptionTypeCurrent File

V4. Board Narrative Valleywise Health-DMG Agreement-Amendment 40-Oct. 2020 (002).pdf

File V4.Board Narrative Valleywise Health-DMG Agreement-Amendment 40-Oct. 2020 (002).pdf

#### **Contract Information**

**Division Contracts Division** 

Folder Amendments

Status Pending Approval

Title Amendment #40 to the Professional Medical Services

Contract Identifier Board - Amendment

MIHS Contract 90-12-084-1-40 Number

Primary Responsible Melton, Christopher C.

Departments

Product/Service Amendment#40 to the Professional Medical Services Agreement with District

**Description Medical Group** 

Action/Background A request for approval of Amendment #40 to the contract between District Medical Group (DMG) and Valleywise Health has been included in the October

28, 2020 Formal Meeting Consent Agenda. This amendment will be effective November 2, 2020, unless otherwise noted. The following requests are

segregated by those that have or do not have a financial impact.

Amendment 40 Requests with a Financial Impact

 Add a 1.0 FTE Burn Physician, Effective November 2, 2020
 Valleywise Health is requesting the addition of 1.0 FTE Burn Physician to support distribution of physician workload, provide more consistent backfill for the burn service, and allow for increased physician supervision of the unit, which will support continuous improvement in billing and documentation of facility acuity.

This request also responds to the following needs recognized for the service line. The laser program is trending to require a minimum of 2 full operating room (OR) days in addition to the current burn OR volumes plus clinic expansion. In addition, this will allow for formal establishment of a wound clinic separate from burn, adding 2 full clinic days to schedule, and allow possible expansion of wound clinic staffing at Comprehensive Health Clinic – Peoria.

Position Previous FTEs New FTEs Previous Compensation New Compensation Burn Physician 3.3 4.3 \$2,086,689 \$2,719,019

The additional gross professional fee collections are estimated to be \$396,435 for the 1.0 FTE Burn Physician and the billing fee is estimated to be \$35,679.

The total annual cost for the addition of the 1.0 FTE Burn Physician is \$271,574. The total cost for the additional FTE for the remainder of Fiscal Year 2021 is: \$181,049.

• Add 0.3 FTE Burn Medical Director, Effective November 2, 2020 Valleywise Health is requesting to add 0.3 FTE Burn Medical Director to the current 0.2 FTE. The directorship position is responsible for sustaining and growing the service line. The current FTE allotment allows for marginal sustainment of services. The increase in FTE will facilitate more strategic leading and planning as competition for burn services increases across the state, specifically the Tucson and potentially Flagstaff markets.

Position Previous FTEs New FTEs Previous Compensation New Compensation Burn Medical Director 0.2 0.5 \$126,466 \$316,165

The total annual cost for the addition of the 0.3 FTE Burn Medical Director is: \$189,699. The total cost for the addition of the 0.3 Burn Medical Director for the remainder of Fiscal Year 2021 is: \$126,466.

• Revise Epic Department Professional Billing Appendix, regarding professional billing responsibility for all lines to remove "UNLESS RBHA", Effective, January 1, 2020.

Valleywise is requesting to remove "UNLESS RBHA" where stated throughout the Epic Department Professional Billing Appendix. DMG can bill psychiatry professional fees for Post-Court Ordered Evaluations for patients with Serious Mental Illness effective 1/1/20, whereas the current language "Unless RBHA" precludes them from doing so. The estimated impact is approximately \$1.2M per year, or \$100k per month, with a 9% billing fee. We are not increasing our Psychiatry collection goal at this time.

The estimated total net collections for Fiscal Year 2020 for the revisions to the Epic Department Professional Billing Appendix is: \$546,000. The estimated total net collections for Fiscal Year 2021 for the revisions to the Epic Department Professional Billing Appendix is: \$1,092,000.

Amendment 40 Requests without a Financial Impact

The following item has no impact to the cost of the DMG contract with Valleywise Health and consists of corrections or modifications to the language of the contract:

N/A

The total net financial impact Fiscal Year 2020 for Amendment #40 to the Valleywise Health-DMG Contract is: \$546,000.

The total net financial impact Fiscal Year 2021 for Amendment #40 to the Valleywise Health-DMG Contract is: \$784,485.

**Evaluation Process** 

Notes

Category

Effective Date 11/2/2020

**Expiration Date** 

Annual Value \$784,485.00

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor District Medical Group (DMG)

Member Name	Status	Comments
Melton, Christopher C.	Approved	Reviewed and approved
Harding, Barbara J.	Approved	
Demos, Martin C.	Approved	
White, Michael	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.x.

**Contracts** 90-21-138-1

From: Compliance 360 < msgsystem@compliance360.com >

Saturday, October 10, 2020 6:57 AM Sent:

To: Melanie Talbot

**Subject:** Contract Approval Request: IGA - Targeted Investment Program (TIP) - YR4 AHCCCS

## Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: IGA - Targeted Investment Program (TIP) - YR4 **AHCCCS** 

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

## **Approve/Reject Contract**

<u>Click here</u> to approve or reject the Contract.

#### **Attachments**

Name DescriptionTypeCurrent File

(Draft) MCSHCD Valleywise-AHCCCS TIP IGT (Yr4).pdf

File (Draft) MCSHCD Valleywise-AHCCCS TIP

IGT (Yr4).pdf

**Contract Information** 

**Division Contracts Division** 

Folder Contracts \ Services - Consulting/Auditing & Other

Status Pending Approval

Title IGA - Targeted Investment Program (TIP) - YR4

Contract Identifier Board - New Contract

MIHS Contract 90-21-138-1

Primary Responsible Melton, Christopher C.

Departments HOSPITAL ADMINISTRATION

Product/Service Targeted Investment Program – YR4 Description

Action/Background Approve an Intergovernmental Agreement ("IGA") with the Arizona Health Care Cost Containment System ("AHCCCS") to provide matching funds in support of the Targeted Investment Program ("TIP"). This agreement allows Valleywise Health to contribute to the Non-Federal Share of delivery system reform incentive payments through the Targeted Investment Program. This Program permits AHCCCS to direct its contracted managed care organizations to provide financial incentives to eligible Medicaid providers who meet certain benchmarks for integrating and coordinating physical and behavioral health care for Medicaid beneficiaries, as delineated in the Special Terms and Conditions of the Demonstration. Valleywise Health's match of \$7,000,000 will be used to permit a more advantageous bundled Behavioral Health rate for services Valleywise Health provides. The term of this agreement is effective when signed by both parties and continues through the later of conclusion of: (1) any payment reconciliations required by federal or State law, the State Plan, or the Demonstration applicable to the Targeted Investment Program, Targeted Investment Payments, and/or related capitation payments or (2) audits of Targeted Investment Program, Targeted Investment Payments, and related capitation payments as required by State or federal law.

This YR4 is a continuation of the 5 year TIP.

This new IGA is sponsored by Claire Agnew, SVP & Interim Chief Financial Officer.

**Evaluation Process** 

Notes

Category IGA

Effective Date 10/31/2020

Expiration Date 10/30/2021

Annual Value \$7,000,000.00

Expense/Revenue Expense

**Budgeted Travel Type** 

Procurement Number

Primary Vendor AHCCCS

Member Name	Status	Comments
Melton, Christopher C.	Approved	
Demos, Martin C.	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.xi.

Contracts 90-20-064-1-02

From: Compliance 360 <msgsystem@compliance360.com>

Sent: Saturday, October 10, 2020 7:03 AM

**To:** Melanie Talbot

Subject: Contract Approval Request: Revised Amendment #2 - Convalescent Plasma - COVID-19 Vitalant (fka

**United Blood Services**)

## **Message Information**

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: Revised Amendment #2 - Convalescent Plasma - COVID-19 Vitalant (fka United Blood Services)

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

## **Approve/Reject Contract**

**Click here** to approve or reject the Contract.

#### **Attachments**

Name	DescriptionTypeCurrent File	
SAM 2020	File Vitalant (fka United Blood Services).pdf	
OIG 2020	File Vitalant (fka United Blood Services).pdf	
Amendment #2 - E-Mail with details	File Vitalant CCP Addendum 2 7.23.20.msg	
Amendment #2 - RFBA (assigned)	File LAB - Vitalant - RFBA Amendment 2 Convalescent Plasma (assigned).pdf	
Amendment #2 - 1st version (not executed by Vitalant)	File 90-20-064-1-02 Vitalant - Convalescent Blood Amendment 2 - pending Vitalant signature.pdf	
Amendment #2 - REVISED BY VITALANT 9.24.2020	File Valleywise- Rev. 3 Vitalant Convalescent Plasma Addendum 9.24.20.pdf	

**Contract Information** 

Division Contracts Division Folder Amendments

Status Pending Approval

Title Revised Amendment #2 - Convalescent Plasma - COVID-19

Contract Identifier Board - Amendment

MIHS Contract Number 90-20-064-1-02 Primary Responsible Party Tymczyna, Katherine

Departments LAB - CLINICAL

Description

Product/Service Blood Product Services - Convalescent Plasma (COVID-19)

Action/Background Approve Revised Amendment #2 to the contract between Vitalant and Maricopa County Special Health Care District dba Valleywise Health for Convalescent Plasma. This item had already been previously approved by the Board at the August 2020 Board meeting, item 1.b.iii.

> The purpose of this agreement is to provide high quality blood components to the Valleywise Health Blood Bank. Valleywise Health has been utilizing Vitalant's services for Blood Products since 2003. This agreement restated the old agreement, which had reached its allowed maximum term. The agreement has an initial contract term of three (3) years, and automatically renew for no more than two (2) consecutive one (1) year periods thereafter. Either party may terminate renewal of this Agreement by providing the other party with written notice at least ninety (90) days prior to the expiration of the then current term, which termination shall be effective no earlier than the end of the then current term.

This Amendment #2 is to add Convalescent Plasma for the treatment of patients tested positive for COVID-19 through the Clinical Lab department.

This Amendment #2 is for the new anticipated increased value of \$48,000. This is in addition to the previously approved budget of \$2.5M plus an Amendment#1 valued at \$31,200, for a new anticipated total aggregate value of \$2,579,200.

This Amendment#2 is sponsored by Dr. Michael White, EVP and Chief Clinical Officer.

Evaluation Process The Contractor was determined to be the sole provider of blood products in the area and has a solid history of meeting the requirements of the requesting department and Valleywise Health. A procurement was not carried out pursuant to HS-102(B)(4) of the Procurement Code in that any contracts dealing with the acquisition of human/synthetic blood, tissue, bone marrow, human organs, or other body parts are exempt from the procurement requirements of the Procurement Code.

Notes Adding Convalescent Plasma. Estimated - \$48,000.

Notes from Vitalant: The EUA enables facilities to treat patients without the need of an IND (language in the previous version does not apply). Vitalant is requesting the newest version of the CCP addendum (attached) that outlines those changes and summarizes the responsibility of the hospital and Vitalant. We will continue to \$0 bill for CCP until we hear otherwise from the FDA and/or BARDA.

Vitalant sent out a communication last week around the price increase for CCP units transfused outside of the Mayo EAP IND and EIND protocols. The new price for CCP will be \$550.00 effective September 1st, 2020. The CCP addendum that was sent by Vitalant in July was positioned for the use of CCP as an investigational therapy. In light of the FDA decision, the Mayo EAP IND trial patient submissions end this Friday, August 28th, 2020, the stated addendum price and Mayo IND protocol will not be available to hospitals after the effective dates listed.

Category

Effective Date 9/1/2020 Expiration Date 12/31/2022 Annual Value \$48,000.00 Expense/Revenue Expense Budgeted Travel Type Yes

Procurement Number

Primary Vendor Vitalant (fka United Blood Services)

Member Name	Status Comments
Melton, Christopher C.	Approved Reviewed and approved. Amendment#1 and Amendment#2 to the same contract are both anticipated to be presented for Board approvals at the August Formal meeting.
Candelaria, Wesley J.	Approved
Detzel, Jo-El M.	Approved
White, Michael	Approved
Demos, Martin C.	Approved
Agnew, Claire F.	Approved
Purves, Steve A.	Approved
Talbot, Melanie L.	Approved
Melton, Christopher C.	ApprovedReviewed and approved
Candelaria, Wesley J.	Approved
Detzel, Jo-El M.	Approved
White, Michael	Approved
Demos, Martin C.	Approved
Agnew, Claire F.	Approved
Purves, Steve A.	Approved
Talbot, Melanie L.	Current



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.xii.

Contracts 90-19-192-1-02

From: Compliance 360 < msgsystem@compliance360.com >

Tuesday, October 13, 2020 10:57 AM Sent:

To: Melanie Talbot

Subject: Contract Approval Request: Amendment #2 - Add Equipment to Service Agreement GE Healthcare

#### Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: Amendment #2 - Add Equipment to Service

Agreement GE Healthcare

Additional Indicate whether you approve or reject by clicking the Approve or Reject

Information button.

Add comments as necessary.

## Approve/Reject Contract

**<u>Click here</u>** to approve or reject the Contract.

#### **Attachments**

Name	Description	Type Current File
90-19-192-1-02 (unsigned)		File 90-19-192-1-02 (unsigned).pdf
OIG 2020		File OIG GE Healthcare 2020.pdf
SAM 2020		File SAM GE Healthcare 2020.pdf
RFBA		File RFBA - GF Amendment (HTM) pdf

#### **Contract Information**

**Division Contracts Division** 

Folder Amendments

Status Pending Approval

Title Amendment #2 - Add Equipment to Service Agreement

Contract Identifier Board - Amendment

MIHS Contract 90-19-192-1-02 Number

Primary Responsible Pardo, Laela N. Party

Departments Health Technology Management

Product/Service Description Amendment #2 - Add Equipment to Service Agreement

Action/Background Approve Amendment #2 to the contract between GE Healthcare and Maricopa

County Special Health Care District dba Valleywise Health to add equipment to the service contract. Equipment is added effective October 1, 2020 through the end of the contract term of April 30, 2024. All other terms and conditions of the contract remain the same and in full effect. The anticipated annual expense of this amendment is \$45,402.00, for a total contract annual spend of \$946,396.00. This amendment is budgeted for operational expenditures from the HTM department and is sponsored by Kelly Summers, SrVP & Chief Information Officer.

Evaluation Process The requesting department has determined that the Contractor is performing satisfactorily and is meeting the goals and objectives of the organization.

Notes

Category O

Effective Date 10/1/2020

Expiration Date 4/30/2024

Annual Value \$45,402.00

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor GE Healthcare

Member Name	Status	Comments
Melton, Christopher C.	Approved	Reviewed and approved
Pardo, Sean P.	Approved	
Summers, Kelly R.	Approved	
Demos, Martin C.	Approved	
White, Michael	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.xiii.

**Contracts** 90-21-139-1

From: Compliance 360 < msgsystem@compliance360.com >

Wednesday, October 14, 2020 8:35 AM Sent:

To: Melanie Talbot

**Subject:** Contract Approval Request: Sales, License, and Service Agreement re da Vinci Xi Dual Console

System Intuitive Surgical, Inc.

## Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: Sales, License, and Service Agreement re da Vinci Xi Dual Console System Intuitive Surgical, Inc.

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

## Approve/Reject Contract

**Click here** to approve or reject the Contract.

#### **Attachments**

DescriptionTypeCurrent File

(Revised) Draft Valleywise Health Medical Center - SLSA - Proposal-13October2020.pdf

File (Revised) Draft Valleywise Health Medical Center - SLSA - Proposal-13October2020.pdf

#### **Contract Information**

**Division Contracts Division** 

Folder Contracts \ Services - Repair & Maintenance

Status Pending Approval

Title Sales, License, and Service Agreement re da Vinci Xi Dual Console System

Contract Identifier Board - New Contract

MIHS Contract 90-21-139-1 Number

Primary Responsible Party Melton, Christopher C.

Departments HOSPITAL ADMINISTRATION

Product/Service Sales, License, and Service Agreement for the da Vinci Xi Console System

Action/Background Approve a new contract between Intuitive Surgical, Inc. and Maricopa County

Special Health Care District dba Valleywise Health for the purchase and

maintenance of the da Vinci Xi Console System.

The purpose of this agreement is for the purchase and maintenance of the da Vinci equipment. Valleywise Health had previously entered a loaner agreement with the Intuitive, placing a da Vinci Surgical System, initiating a robotic surgery program in the organization. Valleywise Health was one of five organizations across the United States selected to participate in the program. The loaner agreement continued on for three years, in which this fiscal year, Intuitive elected to terminate the loaner program. In order to continue the robotic surgery program, a new da Vinci Xi Surgical System will need to be purchased.

Purchasing the da Vinci Surgical Xi System will permit Valleywise Health access to the latest technology currently available from Intuitive Surgical for robotic surgery. Acquisition of this system will sustain the current robotic program and permit growth into other surgical subspecies. Additionally, training in robotic surgery is a valued skill necessary for training the next generation of surgical professionals, supporting the organization's educational mission.

The anticipated expenditure for the initial year is \$2,107,000, and an ongoing annual maintenance cost of \$174,000 for YR2-YR5. This item has been budgeted for capital expenditures, in which the amount of \$2,534,000 had been previously approved by the Board at the September 2020 Board meeting under CER#21-005.

This new contract is sponsored by Dr. Michael White, EVP & Chief Clinical Officer.

**Evaluation Process** 

Notes

Category

Effective Date

**Expiration Date** 

Annual Value \$2,107,000.00

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor Intuitive Surgical, Inc.

Member Name	Status	Comments
Melton, Christopher C.	Approved	Reviewed and approved
Demos, Martin C.	Approved	
White, Michael	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.xiv.

Contracts 90-21-141-1

From: Compliance 360 <msgsystem@compliance360.com>

Sent: Wednesday, October 14, 2020 8:34 AM

To: Melanie Talbot

Subject: Contract Approval Request: IGA Refugee Resettlement Program - Health Promotion Arizona

Department of Economic Security

## **Message Information**

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: IGA Refugee Resettlement Program - Health Promotion Arizona Department of Economic Security

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

## Approve/Reject Contract

**Click here** to approve or reject the Contract.

#### **Attachments**

DescriptionTypeCurrent File IGA Agreement (draft - pending final File 9.15.20 Vallewise IGA Draft.pdf version - correcting minor typo's) E-Mail with details File IGA - DES Refugee Resettlement Program - New Contract - URGENT QUESTION.msg SAM 2020 ADES.pdf RFBA (pending signature) RFBA - DES IGA (002).pdf IGA Agreement (Final) Pending DI21-002306 Vallewise IGA Final.pdf signatures

#### **Contract Information**

Division Contracts Division Folder Contracts \ Grants Status Pending Approval

Title IGA Refugee Resettlement Program - Health Promotion

Contract Identifier Board - New Contract

MIHS Contract 90-21-141-1

Primary Responsible Tymczyna, Katherine

Departments GRANTS ADMINISTRATION

Product/Service Conduct outreach and provide health care management services to refugees Description and other eligible beneficiaries resettled in the State of Arizona.

Action/Background Approve a new Intergovernmental Agreement (IGA) between the Arizona Department of Economic Security ("ADES") and Maricopa County Special Health Care District dba Valleywise Health to provide health care management services under the ADES Refugee Resettlement Program.

> The purpose of this IGA is to provide integrated refugee health care management services to refugee and other eligible beneficiaries resettled in the State of Arizona. These services are provided to promote wellbeing of refugee clients through increasing access to culturally responsive and linguistically appropriate medical services upon arrival. The initial term of this Agreement shall begin on date of last signature through September 20, 2021, and may be extended for additional periods only through a mutually agreed upon written amendment. Either party may terminate this Agreement by hand-delivering to the other party a written notice of termination at least thirty (30) days prior to the effective date of said termination.

> An estimated \$300,000 will be available for the project period that ends September 30, 2021. All expenses equal revenue and this IGA is 100% grant funded.

This IGA is sponsored by Dr. Michael White, Chief Clinical Officer.

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

Notes

Category IGA

**Effective Date** 

Expiration Date 9/30/2021

Annual Value \$300,000.00

Expense/Revenue Revenue

Budgeted Travel Type No

Procurement Number

Primary Vendor Arizona Department of Economic Security

Member Name	Status	Comments
Melton, Christopher C.	Approved	Reviewed and approved
Joiner, Jennifer L.	Approved	
Harding, Barbara J.	Approved	
Landas, Lito S.	Approved	
White, Michael	Approved	
Demos, Martin C.	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	





Board of Directors Formal Meeting

October 28, 2020

Item 1.b.xv.

Contracts 90-19-224-1-01

### **Cynthia Cornejo**

From: Compliance 360 < msgsystem@compliance360.com >

Sent: Tuesday, October 13, 2020 11:25 AM

To: Melanie Talbot

**Subject:** Contract Approval Request: Amendment #1 - Update to Valleywise Health and Update Consignment

Exhibit A MiMedx Group Inc.

### Message Information

From Pardo, Laela

To Talbot, Melanie;

Subject Contract Approval Request: Amendment #1 - Update to Valleywise Health and Update Consignment Exhibit A MiMedx Group Inc.

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

### Approve/Reject Contract

**Click here** to approve or reject the Contract.

#### **Attachments**

Name	Description	Type Current File
90-19-224-1-01 (unsigned)	•	File 90-19-224-1-01 (unsigned).pdf
OIG 2020		File OIG MiMedx 2020.pdf
SAM 2020		File SAM MiMedx 2020.pdf
RFBA		File FFBA - MiMedx Amendment.pdf

#### **Contract Information**

**Division Contracts Division** 

Folder Amendments

Status Pending Approval

Title Amendment #1 - Update to Valleywise Health and Update Consignment Exhibit A

Contract Identifier Board - Amendment

MIHS Contract Number 90-19-224-1-01

Primary Responsible Pardo, Laela N. Party

Departments PERIOPERATIVE BUSINESS SUPPORT

Product/Service Amendment #1 - Update to Valleywise Health and Update Consignment

Description Exhibit A

Action/Background Approve Amendment #1 to the contract between MiMedx Group Inc. and Maricopa County Special Health Care District dba Valleywise Health to update our company name as well as update the Exhibit A to add additional product to the par levels. MiMedx provides Valleywise Health with the EpiBurn and AmnioFill that are bioactive and cellular tissue matrix allografts that when combined enhances healing in wound patients. As a Consignment agreement there is no cost to Valleywise Health on the product unless it is used. All other terms and conditions remain the same and in full effect. Anticipated annual expense is \$560,000.00 and is budgeted for operational expenditures from the OR department. This Amendment #1 is sponsored by Sherry Stotler, SrVP and Chief Nursing Officer.

Evaluation Process The requesting department has determined that the Contractor is performing satisfactorily and is meeting the goals and objectives of the organization.

Notes

Category GPO

**Effective Date** 

**Expiration Date** 

Annual Value \$560,000.00

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor MiMedx Group Inc.

### Responses

Member Name	Status	Comments
Melton, Christopher C.	Approved	Reviewed and approved
Garcia, Crystal D.	Approved	
Stotler, Sherry A.	Approved	
Demos, Martin C.	Approved	
White, Michael	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.xvi.

Contracts 90-21-140-1

### **Cynthia Cornejo**

From: Compliance 360 < msgsystem@compliance360.com >

Tuesday, October 13, 2020 1:57 PM Sent:

Melanie Talbot To:

**Subject:** Contract Approval Request: DIASORIN Liaison XL - Equipment; QIAGEN - Reagents Diasorin

Molecular

### Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: DIASORIN Liaison XL - Equipment; QIAGEN -

Reagents Diasorin Molecular

Additional Indicate whether you approve or reject by clicking the Approve or Reject

Information button.

Add comments as necessary.

### **Approve/Reject Contract**

**<u>Click here</u>** to approve or reject the Contract.

#### **Attachments**

Name	DescriptionTypeCurrent File
RFBA (assigned)	File RFBA QIADIA1.pdf
Proposal Details	File Valleywise Reagent - Immunochemistry Proposal
Instrument Rental Agreement (Pending Signatures)	Summary.pdf  File Valleywise_Health_Medical_Center-Agreement 9.16.20.pdf
SAM 2020	File Diasorin Molecular pdf
OIG 2020	File Diasorin Molecular.pdf

### **Contract Information**

**Division Contracts Division** 

Folder Contracts \ Supplies - Medical

Status Pending Approval

Title DIASORIN Liaison XL - Equipment; QIAGEN - Reagents

Contract Identifier Board - New Contract

MIHS Contract 90-21-140-1

Primary Responsible Tymczyna, Katherine

Departments LAB - CLINICAL

Product/Service Equipment upgrade to improve the operational efficiencies so the QFT Plus Description test can be fully automated across shifts for timely results.

Action/Background Approve a new contract between DiaSorin and Maricopa County Special Health Care District dba Valleywise Health for Liaison XL equipment, and Qiagen reagents.

> The purpose of this agreement is to upgrade our current equipment to the Liaison XL equipment and improve the operational efficiencies so the QFT Plus test can be fully automated across shifts for timely results. This new equipment will allow the lab to achieve cost savings and consolidate testing of ELISA methods onto one platform. The initial contract term will commence upon installation and continue for a period of sixty (60) months. This Agreement shall automatically renew for successive periods of one (1) year each Renewal term unless either party provides written notice of its intent not to renew this agreement at least ninety (90) days prior to the expiration of the then current term.

> This Agreement is sponsored by Jo-el Detzel, VP Ancillary & Support Services.

Evaluation Process The Contractor was determined to meet the requirements of the requesting department and Valleywise Health. Procurement has been satisfied pursuant to HS-102B(6) of the Procurement Code in that Contracts needed to meet healthcare compliance requirements and programs are exempt from the solicitation requirements of the Procurement Code.

> Notes Equipment provided at no additional cost to Valleywise and will include service and preventative maintenance during the term of the contract.

DiaSorin LIAISON QuantiFERON TB Gold Plus Kit orders will be placed thru Qiagen (per Addendum 1).

Category

Effective Date 10/1/2020 Expiration Date 10/31/2025 Annual Value \$311,990.00

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor Diasorin Molecular

### Responses

Member Name	Status	Comments
Melton, Christopher C.	Approved	Reviewed and approved
Candelaria, Wesley J.	Approved	
Landas, Lito S.	Approved	
Detzel, Jo-El M.	Approved	
White, Michael	Approved	
Demos, Martin C.	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	





Board of Directors Formal Meeting

October 28, 2020

Item 1.b.xvii.

Contracts 90-21-091-1

### **Cynthia Cornejo**

From: Compliance 360 <msqsystem@compliance360.com>

**Sent:** Tuesday, October 13, 2020 9:04 PM

**To:** Melanie Talbot

Subject: Contract Approval Request: Maryvale Behavioral Health Center-Elevator Upgrade Otis Elevator

### Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: Maryvale Behavioral Health Center-Elevator

Upgrade Otis Elevator

Additional Indicate whether you approve or reject by clicking the Approve or Reject

Information button.

Add comments as necessary.

### **Approve/Reject Contract**

**<u>Click here</u>** to approve or reject the Contract.

### **Attachments**

Name	DescriptionTypeCurrent File
Otis Elevator Proposal	File OTIS BID to MARYVALE (002).pdf
OIG	File OIG Search Results.html
SAM	File Otis Elevator SAM.pdf
CER301.xlsm	File File CER301.xlsm
Amendment #1	File 2. Amendment 1.pdf
Amendment #2	File 3. Amendment 2.pdf
Otis Offer	File 1. OTIS BID to MARYVALE.pdf
Otis Clarifications	File Tender Clarifications for Otis at Maryvale.pdf
Otis Offer and Acceptance	File Offer and Acceptance Page.pdf
10-8-2020 Email regarding funding	File .10-8-2020 Email regarding funding.pdf

### **Contract Information**

**Division Contracts Division** 

Folder Contracts \ Group Purchasing Organization (GPO) - Supplies

Status Pending Approval

Title Maryvale Behavioral Health Center-Elevator Upgrade

Contract Identifier Board - New Contract

MIHS Contract Number 90-21-091-1

Primary Responsible Hammer, Mary P.

Departments ENGINEERING AND CONSTRUCTION

Product/Service Maryvale Behavioral Health Center-Elevator Upgrade

Action/Background Approve a new contract between Otis Elevator and Maricopa County Special Health Care District dba Valleywise Health for Maryvale Behavioral Health Center-Elevator Upgrade. The purpose of this agreement is to provide Maryvale Behavioral Health Center-Elevator Upgrade. The initial contract term is from November 1, 2020 to October 31, 2023, and may be extended for additional periods up to a maximum contract term of five (5) years from the Effective Date. Either party may terminate the contract upon ninety (90) days written notice.

#### FINANCIAL IMPLICATIONS:

The anticipated total expense is \$1,993,654.00 and has been budgeted for capital expenditures from CER#21-301.

This new contract is sponsored by Jo-el Detzel, VP Ancillary & Support Services.

Evaluation Process The Contractor was determined to meet the requirements of the requesting department and Valleywise Health. Procurement has been satisfied pursuant to HS-102B(3) of the Procurement Code in that any agreements with professional association memberships and medical research projects are exempt from the solicitation requirements of the Procurement Code.

Notes

Category GPO

Effective Date 10/1/2020 Expiration Date 3/30/2022

Annual Value \$1,993,654.00

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor Otis Elevator

### Responses

Member Name	Status	Comments
Melton, Christopher C.	Approved	Reviewed and approved
Madhavan, Lalitha	Approved	
Detzel, Jo-El M.	Approved	
Demos, Martin C.	Approved	
White, Michael	Approved	
Agnew, Claire F.	Approved	To be funded from TIP funds & Routine capital.
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.b.xviii.

Contracts 90-14-206-1-04

### Cynthia Cornejo

From: Compliance 360 < msgsystem@compliance360.com >

Wednesday, October 14, 2020 9:25 AM Sent:

To: Melanie Talbot

**Subject:** Contract Approval Request: Amendment #4 - Extend Contract to 11-30-2022 Integrated Health

Management Services, LLC

### Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: Amendment #4 - Extend Contract to 11-30-2022

Integrated Health Management Services, LLC

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

### Approve/Reject Contract

**Click here** to approve or reject the Contract.

#### **Attachments**

Name	Description Type Current File
90-14-206-1-04 (unsigned)	File 90-14-206-1-04 (unsigned) pdf
OIG 2020	File OIG Integrated Health Management 2020.pdf
SAM 2020	File SAM Integrated Health Management 2020.pdf
RFBA	File RFBA - IHMS Extension (updated).pdf

#### **Contract Information**

**Division Contracts Division** 

Folder Amendments

Status Pending Approval

Title Amendment #4 - Extend Contract to 11-30-2022

Contract Identifier Board - Amendment

MIHS Contract 90-14-206-1-04 Number

Primary Responsible Pardo, Laela N.

Party

Departments PATIENT REGISTRATION ADMITTING

Product/Service Amendment #4 - Extend Contract to 11-30-2022

Action/Background Approve Amendment #4 to the contract between Integrated Health

Management Services, LLC and Maricopa County Special Health Care District

dba Valleywise Health to extend services for two (2) additional years. The Patient Registration Admitting department is looking to possibly bringing these services in-house and in the meantime needs to ensure no disruption of services. This Amendment #4 will extend the contract term for two (2) years from December 1, 2020 to November 30, 2022, for an aggregate contract term of December 1, 2014 to November 30, 2022. Either party may terminate the contract upon ninety (90) days written notice. All other terms and conditions remain the same and in full effect. The anticipated annual expense is \$1,800,000.00 and is budgeted for operational expenditures by the Patient Registration Admitting department. This Amendment #4 is sponsored by Nancy Kaminski, SrVP Revenue Cycle.

Evaluation Process The Contractor was determined to meet the requirements of the requesting department and Valleywise Health. This contract was extended pursuant to HS-106C of the Procurement code in that a primary consideration was taken into account where it has been documented to be Advantageous to the District to extend the aggregate contract term beyond five (5) years in that a change from the current Contractor providing the services provided under this Contract would cause a disruption to the Department.

Notes

Category O

Effective Date 12/1/2020

Expiration Date 11/30/2022

Annual Value \$1,800,000.00

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor Integrated Health Management Services, LLC

### Responses

Member Name	Status	Comments
Melton, Christopher C.	Approved	Reviewed and approved
Kaminski, Nancy A.	Approved	
Demos, Martin C.	Approved	
White, Michael	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



Board of Directors Formal Meeting

October 28, 2020

Item 1.c.i.a.

Governance
Board Policy Statement
99902 G - Billing

### Valleywise Health Administrative Policy & Procedure

Effective Date: 08/06

Reviewed Dates: 02/10, 02/11, 01/13, 01/15, 01/17, 11/18, 10/20

**Revision Dates:** 09/07, 03/09

Policy #: 99002 G - Finance

**Policy Title: Billing** 

Scope: [X] District Governance (G)

[ ] System-Wide (S)

[ ] Division (D)

[ ] Multi-Division (MD)

[ ] Department (T)

[ ] Multi-Department (MT)

[ ] FQHC (F)

### Policy:

It is the policy of the Board of Directors that the Maricopa County Special Health Care District shall bill only for services rendered, and all bills shall be prepared timely and in an appropriate format.

District staff, medical staff, and clinical providers must be thorough, accurate, and timely in completing any dictation, written or oral report, or other documentation necessary for prompt and accurate billing made to or for any payer or government agency.

District management and medical staff leadership are charged with the responsibility to develop and maintain processes that ensure the integrity of all billing.

Valleywise Health Policy & Procedure - Approval Sheet (Before submitting, fill out COMPLETELY.)

**POLICY RESPONSIBLE PARTY:** Maricopa County Special Health Care District **Board of Directors DEVELOPMENT TEAM(S):** Clerk's Office Policy #: 99002 G - Finance **Policy Title:** Billing e-Signers: Melanie Talbot, Chief Governance Officer and Clerk of the Board Place an X on the right side of applicable description: New -Reviewed - X Retire -**Revised with Minor Changes -**Revised with Major Changes -Please list revisions made below: (Other than grammatical changes or name and date changes) Reviewed and Approved by in Addition to Responsible Party and E-Signer(s): Committee: N/A Committee: N/A N/A Committee: Reviewed for HR: N/A Reviewed for EPIC: N/A N/A Other: Other: N/A

Policy # 99002 G – Finance Title: Billing 11/18/10/20 Supersedes 01/17/11/18

Other:

N/A



Board of Directors Formal Meeting

October 28, 2020

Item 1.c.i.b.

### Governance

Board Policy Statement 99300 G – Call to the Public: Addressing the Board at a Meeting

### Valleywise Health Administrative Policy & Procedure

Effective Date: 08/07

**Reviewed Dates:** 

Revision Dates: 01/09, 03/11, 10/14, 11/16, 10/18, 10/20

**Policy #: 99300 G - Conduct** 

Policy Title: Call to the Public: Addressing the Board of Directors at a

Meeting

Scope: [X] District Governance (G)

[ ] System-Wide (S)

[ ] Division (D)

[ ] Multi-Division (MD)

[ ] Department (T)

[ ] Multi-Department (MT)

[ ] FQHC (F)

### Purpose:

The purpose of this policy is to ensure accurate recording of all remarks made at a Board meeting and to maintain the proper level of decorum during the meeting. The policy applies to all members of the public, including Valleywise Health staff, who wish to address the Board of Directors (Board).

The Board of Directors value citizen comments and input, on District business in general, or on any published agenda item. Each meeting is open to the public and there is a "Call to the Public." An individual may address the Board of Directors at this time or when the agenda item to be addressed is reached.

### Policy:

- 1. Individuals that wish to address the Board on District business in general, or on any published agenda item must complete and submit a signed Request to Speak form. the Clerk. (Attached).
- 2. Only persons recognized by the Board Chairman shall be permitted to address the Board of Directors.
- 3. All remarks shall be made from the podium or designated location and be addressed to the Board as a body, not to any individual <a href="mailto:DirectorBoard">DirectorBoard</a> member.

- 4. Rudeness, vulgarity or remarks disrespecting the personal dignity of any individual will not be permitted.
- 5. Pursuant to A.R.S. § 38-431.01(H), the Board of Directors may not discuss items that are not -specifically identified on the agenda. Therefore, any action taken as a result of public comment will be limited to responding to criticism, directing staff to study review the matter, scheduling the matter for further consideration and decision at a later time or adding the item to a future agenda.
- 6. Board members may respond to criticism.
- 76. No person in the audience shall engage in disorderly conduct such as handclapping, stamping of feet, whistling, using profane language, shouting or other similar demonstrations which may disturb disrupt the Board meeting.
- 78. All members of the public shall, at the request of the Chair, remain silent during a Board meeting. If, after receiving a warning from the Chairman, a person persists in disturbing the meeting, the Chairman may order that person to leave the meeting. If the person does not remove himself or herself, the Chairman may order the Security Officer security to remove the person from the meeting.

### Procedure:

Any individual or group desiring to address the Board at a Board meeting shall comply with the following procedure:

- 1. The individual or group must complete and submit a Request to Speak form signed request to the Clerk (Attached) before the Board Chairman makes a Call to Public at the beginning of the meeting. Forms are available at the meeting, as well as on the Valleywise Health website. Any form submitted through the website needs to be submitted at least two (2) hours prior to the start of the meeting. Any written materials for the Board must be included with the form. The completed form must include:
  - a. The name of the individual or representative of the group
  - b. <u>A description Describe</u>, with specificity, <u>of</u> the matter to be addressed.
     If the matter is on the Board's current agenda, include the agenda item number <u>and description</u>.
- 2. Individual scomments will shall be limited to three (3) minutes. To begin, the individual should state their name and the city in which they reside. If residence is within Maricopa County, the District should also be stated. Speakers should be brief, stay on the subject and present only new information.

- 3. A maximum of ten (10) minutes will be set aside for each agenda item on which public comment has been requested.
- 4. Interested parties or their representatives may address the Board by written communications. Written communications shall be delivered to the Clerk.
- 45. The Board will make reasonable attempts to hear any differing viewpoints.
- 56. No speaker individual will be permitted to relinquish her/his time to another person.
- <u>67.</u> <u>Speakers Individuals comments may not be addressed to staff or other members of the public.</u>

**Reference:** Board of Directors "Call to the Public" Request to Speak Form and Guidelines Procedure

Valleywise Health Policy & Procedure - Approval Sheet (Before submitting, fill out COMPLETELY.)

**POLICY RESPONSIBLE PARTY**: Maricopa County Special Health Care District Board of Directors

**DEVELOPMENT TEAM(S)**: Clerk's Office

Policy #: 99300 G - Conduct

**Policy Title:** Call to the Public: Addressing the Board of Directors at a Meeting

e-Signers: Melanie Talbot, Chief Governance Officer and Clerk of the Board

### Place an X on the right side of applicable description:

New -

Retire - Reviewed -

Revised with Minor Changes -\*

Revised with Major Changes -X

<u>Please list revisions made below</u>: (Other than grammatical changes or name and date changes)

## Reviewed and Approved by in Addition to Responsible Party and E-Signer(s):

Committee: N/A

Committee: N/A

Committee: N/A

Reviewed for HR: N/A

Reviewed for EPIC: N/A

Other: N/A

Other: N/A

Other: N/A



# Board of Directors "Call to the Public" Request to Speak Form and Guidelines Procedure



During each meeting, the <u>Directors Board of Directors (Board)</u> conducts a "Call to the Public" (CTP). This is the time when members of the public may address the Board on District business in general or on a published agenda item. Any individual or group desiring to address the Board of <u>Directors</u> at a Board meeting shall comply with the following procedure:

- 1. The individual or group must complete and submit a signed <u>Rrequest to Speak form</u> (provided below) to the <u>Clerk</u> before the <u>Board Chairman</u> makes a Call to Public at the <u>beginning of the meeting</u>. Any written materials for the Board must be included with the form.
- 2. All remarks shall be made from the podium or designated location and be addressed to the Board as a body, not to any individual Board member.
- 32. Individual's comments shall-will be limited to three (3) minutes. To begin, the individual should state their name and the city in which they reside. If residence is within Maricopa County, the District should also be stated. Speakers should be brief, stay on the subject and present only new information.
- 4. A maximum of ten (10) minutes will be set aside for each agenda item on which the public comment has been requested.
- 5. The Board will make reasonable attempts to hear any differing viewpoints.
- Interested parties or their representatives may address the Board by written communications. Written
  communications shall be delivered to the Clerk.
- 64. No speaker individual will be permitted to relinquish her/his time to another person.
- <u>75.</u> Speakers <u>Individuals comments</u> may not be addressed to staff or other members of the public.
- 86. Only persons recognized by the Board Chairman shall be permitted to address the Board of Directors.
- 97. Rudeness, vulgarity or remarks disrespecting the personal dignity of any individual will not be permitted.
- 9. All remarks shall be made from the podium or designated location and be addressed to the Board as a body, not to any individual Director.
- 8. Rudeness, vulgarity or remarks disrespecting the personal dignity of any individual will not be permitted.

The Board will make reasonable attempts to hear any differing viewpoints. A maximum of ten (10) minutes will be set aside for each agenda item on which public comment has been requested. If speakers have comments that are too long for the CTP time allowed, or if members of the public would like materials distributed to the Board, written materials may be provided to the Clerk, or his or her designee. All written materials are distributed to and given consideration by the Board.

Pursuant to A.R.S. § 38-431.01(H), the Board of Directors may not discuss items that are not specifically identified on the agenda. Therefore, any action taken as a result of public comment will be limited to responding to criticism, directing staff to study review the matter, scheduling the matter for further consideration and decision at a later time or adding the item to a future agenda. Board members may respond to criticism.

Should you wish to mail your comments directly to the Board of Directors please send them to: Maricopa Integral	ated Health
System, ATTN: Board of Directors, 2601 E. Roosevelt Street, Phoenix, AZ 85008	
I have read the "Call to the Public" Guidelines Procedure above and would like to address the Board.	
(Signature	)*
(Please Print)	
* Name: Phone Number:	

\* required Revised 10/1810/20

* Topic of Remarks/Agenda Item:	In Favor 🗌	Against	N/A
Address:	City	_ Zip Code:	District:
Group/Affiliation:			
Additional Comments:			
Request forms should be turned into the Clerk before the firs	t speaker is calle	ed Chairman make	s a Call to Public at
the beginning of the	ne meeting.		

\* required Revised 10/1810/20



Board of Directors Formal Meeting

October 28, 2020

Item 1.c.ii.

Governance
Board Resolution No. 2020-10-28-001



### MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT RESOLUTION NO. 2020-10-28-001 October 28, 2020

RESOLUTION CERTIFYING COMPLIANCE WITH ELECTION LAWS PURSUANT TO ARIZONA REVISED STATUTES SECTION 16-229 FOR NOVEMBER 3, 2020 ELECTION CONCERNING THE QUESTION OF CONTINUATION OF A SECONDARY PROPERTY TAX LEVY FOR THE BENEFIT OF THE MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

WHEREAS, on January 29, 2020, the Board of Directors (Board) of the Maricopa County Special Health Care District District) adopted Resolution 2020-1-29-001 providing notice to the Board of Supervisors of Maricopa County to order an election to be held on November 3, 2020 submitting to the qualified electors of the District the question of continuation of a secondary property tax levy for the benefit of the Maricopa County Special Health Care District – which includes the public teaching hospital, the Arizona Burn Center, three behavioral health hospitals and 12 family health centers - for twenty years ("the Election" or "the Question").

WHEREAS, on June 24, 2020, the Board adopted Resolution 2020-6-24-0001 authorizing the Chief Executive Officer of the District to (1) cause public notices of the Election to be published in English and in Spanish in a newspaper of general circulation in Maricopa County twice, not less than one week apart between June 24, 2020 and August 5, 2020, (2) accept written arguments for and against the Question from July 7, 2020 to August 5, 2020, (3) prepare and publish a Voter Information Pamphlet in English and Spanish that includes information prescribed in A.R.S. § 16-228 and (4) distribute the Voter Information Pamphlet so that it is delivered to households with qualified electors before the earliest date of mailing early ballots to registered voters in the District.

**WHEREAS**, the District has provided ballot language for the Election to Maricopa county election officials.

WHEREAS, the District caused notices of the Election to be published in English and Spanish in a newspaper of general circulation in Maricopa County on July 10, and July 17, 2020.

WHEREAS, early ballots for the November 3, 2020 general election will be mailed to voters on the permanent early voter list on October 7, 2020, and the deadline for voter registration for the November 3, 2020 general election is October 5, 2020.

WHEREAS, the District caused Voter Information Pamphlets concerning the Election in English and Spanish to be mailed to voters so that they were delivered to households before early ballots are mailed, and, in order to provide Voter Information Pamphlets to households with voters who register to vote after the previous mailing, there will be a supplemental mailing of Voter Information Pamphlets on or about October 16, 2020.

**NOW, THEREFORE, BE IT RESOLVED** by the Board of Directors of the Maricopa County Special Health Care District:

Section 1. That the District has complied with any applicable election laws by:

- (a) Providing notice of the Election to the Board of Supervisors of Maricopa County as described in Resolution 20-1-29-001;
- (b) Providing notice of the Election in English and Spanish in a newspaper of general circulation in Maricopa County on July 10, and July 17, 2020;
- (c) Providing ballot language for the Question to Maricopa County election officials;
- (d) Accepting arguments for and against the Question from July 5, 2020 to August 5, 2020 so they may be included in the Voter Information Pamphlet;
- (e) Causing a Voter Information Pamphlet that includes the information required by A.R.S. §16-228(A) to be published in English and Spanish and delivered to households before the earliest date for mailing early ballots to registered voters.

Section 2. That an affidavit shall be submitted to the Board of Supervisors of Maricopa County on behalf of the Board as described in A.R.S. § 16-229 certifying compliance with applicable federal and state election laws. This affidavit shall be submitted no later than October 29, 2020.

**PASSED, ADOPTED, AND APPROVED** by the Board of Directors of the Maricopa County Special Health Care District on October 28, 2020.

Maricopa County Special Health Care District
Board of Directors
By:
Mark G. Dewane, Chair
Attest:
Melanie Talbot, Clerk of the Board



#### AFFIDAVIT OF COMPLIANCE

- I, Mark Dewane, being first duly sworn, deposes and says:
- 1. I am the chair of the Board of Directors (Board) of the Maricopa County Special Health Care District (District).
- 2. I submit this declaration on behalf of the Board to certify compliance with the election laws relevant to the question on the November 3, 2020 ballot concerning the continuation of a secondary property tax levy for the benefit of the District (the "Election" or the "Question").
- 3. The District has complied with applicable election laws by:
  - (a) Providing notice of the Election to the Board of Supervisors of Maricopa County as described in Resolution 20-1-29-001;
  - (b) Providing notice of the Election in English and Spanish in a newspaper of general circulation in Maricopa County on July 10, and July 17, 2020;
  - (c) Providing ballot language for the Question to Maricopa County election officials;
  - (d) Accepting arguments for and against the Question from July 5, 2020 to August 5, 2020 so they may be included in the Voter Information Pamphlet;
  - (e) Causing a Voter Information Pamphlet to be published that includes the information required by A.R.S. §16-228(A) in English and Spanish and was mailed in time for delivery to households with registered voters before the earliest date for mailing early ballots to registered voter.
- 4. The Board has determined that the District has complied with the relevant state and federal election laws governing the Election and submits this affidavit certifying compliance to the Board of Supervisors of Maricopa County as required by A.R.S. § 16-229.

	AFFIANT		
SUBSCRIBED AND SWORN	TO before me this	day of	,2020
	Notary Public		
	My commission	expires	



Board of Directors Formal Meeting

October 28, 2020

Item 1.c.iii.

Governance
Valleywise Community Health Centers
Governing Council Applicant – R. Hess



### Office of the Senior Vice President & CEO FQHC Clinics

2525 East Roosevelt Street • Phoenix • AZ• 85008

Date: October 28, 2020

To: Maricopa County Special Health Care District

**Board of Directors** 

From: Barbara Harding, BAN, RN, MPA, PAHM, CCM

Sr VP Amb Services & CEO FQHC Clinics

Subj: Valleywise Community Health Centers Governing Council Member

Application: Robert Hess III

Per the Co-applicant Operational Arrangement between the Maricopa County Special Health Care District Board and the Valleywise Community Health Centers Governing Council, the Governing Council will provide District staff with a fully completed membership application, for each candidate that has been recommended, for review.

The attached contains the completed application of Mr. Robert Hess III whom is requesting to serve as a member on the Valleywise Community Health Centers Governing Council. Mr. Hess resides in District 5. He has been a resident of Arizona since 1994 working in health and human services professionally.





Full Legal Name: Rot	pert Hess III	
Home Address:		
City:	State: AZ	Zip:
Home Telephone:	Cell:	
E-mail Address:		
Employer:		
Work Address:		
City:	State: AZ	Zip:
	health care institution as defined in	or by marriage, work for Valleywise Health, or A.R.S. §36-401?
other licensed healthca and therapeutic health	are professionals whose primary re	care institutions, nurses, doctors, dentist, and sponsibility is providing primary preventative e than 10% of your annual income from the
Were you referred by	someone? YES X NO_	
If ves _nlease list his/h	er name: Joseph Larios	

Revised: 010320



1.	Have you personally or a dependent child received Center (dental care included) or at one of the Feder	rally Qualified Health Center C	Clinics			
	located within Valleywise Comprehensive Health	Center-Phoenix? YES	NO X			
(A list of Valleywise Health Community Health Centers and Federally Qualified Health Center Clinics located within Valleywise Comprehensive Health Center-Phoenix is located on the last page of this application)						
If yes	s, please list the Clinic utilized, and approximate mon	th/year of last visit				
—— Name	e of Clinic	Date of Visit				
2.	Why would you like to be a member of the Valleys Council? former minister, current social worker and public hea	•				
	essional commitment to health equity. I have had the		ALTO CONTRACTOR DE CONTRACTOR			
	eywise performs every day through my work with other					
8	ningful contributions to the continued success and gr					
	t vulnerable residents.	our or valleywise, as it continu	es to serve Arizona's			
of un	As a community member, what do you feel are the County? copa county has a wide spectrum of health challenge inderserved communities and populations. These issues	es; including health coverage, a les range from pediatric workfo	access, a large numbe			
	equate specialists etc. Despite Maricopa County's un		1			
	pecific shortages for pediatric psychiatry, nursing, an					
	also have a large homeless population, uninsured an					
	munities. All of these vulnerable populations are at hi	igher risks for communicable a	nd non-communicable			
disea	ases.					

Revised: 010320 2



I have into soo service global I plans in popular	17 years of p cial work and es. I have wor health. I have n the United S tions includin	rofessional experi behavioral health ked at all levels of also worked in 2° States. I have volu g: children in foste	ence in health and now span f care, from dire 7 states and 9 inteered, worke er care, with juy	ning the full continect service to agen countries, including ed, published and a venile justice involve	nefit the Council? es; beginning in ministry, then moving uum of physical and behavioral health icy, health plan, State, Federal and g work with 9 of the 10 largest health advocated for a range of vulnerable vement, LGBTQ* populations, individuals ased from incarceration.
	Council members are appointed to a three (3) year term. The Council meets one evening a month for approximately two hours. In addition to meetings, a member should allow time for other duties such as reading meeting material in order to prepare for meetings. Furthermore, members are required to sit on at least one standing committee. Standing committee meetings generally occur once a month during the daytime for approximately two hours. Do you have at least eight hours per month to devote to the Valleywise Community Health Centers Governing Council?  YES X NO NO				
<ol> <li>Have you served or are you currently serving on any other boards or committees? If so, please list the board/committees and dates of service.</li> <li>NASW-AZ Board of Directors 2008 - 2009, AZ Governor's Communities Preventing Substance Use Workgroup 2011, Maricopa County LGBT Consortium (founder) 2009 - 20011, Substance Abuse Prevention Coalition of Arizona 2010 - 2013, Arizona Programmatic Suicide Deterrent System 2012 - 2013, Cover Arizona Steering Committee 2014 - 2015, ADHS Advisory Committee 2009 - 2015, Out2Enroll National Sterring Committee 2014 - 2015, SAMHSA National Technical Assistance Partnership 2017 - Present.</li> </ol>					
7. Health Resources and Services Administration (HRSA), the government agency that provides funding for our Federally Qualified Health Center Clinics, requires information on Council members including members' areas of expertise, race/ethnicity and gender.  Area of expertise ( <i>select no more than two</i> ):					
Healtho	care	X	Finance		Legal
Commu	unity Affairs		Trade Unions		Government
Social S	Services	X	Education		Business
Labor F	Relations				

Revised: 010320 3



Ethnicity:						
Hispanic or Latino		Non-Hispanic or La	atino	X		
Race:						
Asian	Native Hawai	iian	Other	Pacific Island	er	
Black/African Ameri	can	American Indian/Ala	ska Na	tive		
White X	More than on	e race				
Gender: Male X	Female	_				
Please share anything Council.	g about yoursel	f that you think would	add to 1	the diversity ar	nd/or advocacy o	f the
I spent 10 years in e	vangelical Chri	istian ministry with mar	ny of the	e large mega-c	churches in Arizo	na and
maintain close relation	onships within a	Arizona faith communi	ties.			
I am a family member	er of individuals	with serious mental ill	ness			
I am a suicide attem	pt survivor					
I was chronically ho		ears				
I am a former Medic						
I identify as a gay m	an					
the Maricopa County Standards of Conduc existing and potentia members have ever b	Special Health t included in th I Governing Co been excluded f and authorize V	ise Community Health  Care District Code of  e Code is for Valleywi  ouncil members to veri  from participating in an  falleywise Health to pro  [O	Condu se Heal fy crede y feder	ct and Ethics. Ith to complete entials and to a al or state heal	One of the Prince a background chassess whether Coth care programs	ciples of heck on ouncil
				_	05/22/2020	
Signature					Date	

Please Note: This application is considered a public record

Revised: 010320



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

- **O** Finance Committee:
  - The purpose of the Finance Committee is to (1) provide oversight of financial objectives and budgeted financial performance to ensure current and future financial integrity of the Valleywise Health's Federally Qualified Health Center Clinics; (2) reviewing major transactions, investments or expenditures which represent a significant financial commitment or which have significant strategic or operational implications; (3) ensure annual independent financial audit of the Federally Qualified Health Center Clinics is performed.
- Compliance and Quality Committee:
  The purpose of the Compliance and Quality Committee is to ensure is to: (1) ensure the quality of care provided by the Federally Qualified Health Center Clinics; (2) ensure patient safety and satisfaction provided throughout the Federally Qualified Health Center Clinics; (3) ensure that all policies comply with federal and state law and Health Resources and Services Administration (HRSA) Compliance Manual
- Strategic Planning and Outreach Committee:
  The purpose of the Strategic Planning and Outreach Committee is to identify, develop, and implement strategic planning and outreach initiatives to address the changing healthcare environment in Maricopa County.

### **List of Family Health Centers:**

Valleywise Community Health Center-7<sup>th</sup> Avenue Valleywise Community Health Center-Avondale Valleywise Community Health Center-El Mirage Valleywise Community Health Center-Guadalupe Valleywise Community Health Center-McDowell Valleywise Community Health Center-Sunnyslope

Valleywise Community Health Center-Chandler Valleywise Community Health Center-Glendale Valleywise Community Health Center-Maryvale Valleywise Community Health Center-Mesa Valleywise Community Health Center-South Central

### List of Federally Qualified Health Center Clinics located in Valleywise Comprehensive Health Center-Phoenix:

Internal Medicine Women's Care

Pediatrics Antepartum Testing

Revised: 010320 5



Board of Directors Formal Meeting

October 28, 2020

Item 1.c.iv.

Governance

Valleywise Community Health Centers Governing Council Applicant – Y. Aguilar



### Office of the Senior Vice President & CEO FQHC Clinics

2525 East Roosevelt Street • Phoenix • AZ• 85008

Date: October 28, 2020

To: Maricopa County Special Health Care District

**Board of Directors** 

From: Barbara Harding, BAN, RN, MPA, PAHM, CCM

Sr VP Amb Services & CEO FQHC Clinics

Subj: Valleywise Community Health Centers Governing Council Member

Application: Ylenia Aguilar

Per the Co-applicant Operational Arrangement between the Maricopa County Special Health Care District Board and the Valleywise Community Health Centers Governing Council, the Governing Council will provide District staff with a fully completed membership application, for each candidate that has been recommended, for review.

The attached contains the completed application of Ms. Ylenia Aguilar whom is requesting to serve as a member on the Valleywise Community Health Centers Governing Council. Ms. Aguilar resides in District 3. Ms. Aguilar has been engaged with her community since her childhood. She currently serves as the President of the Osborn School District Governing Board and serves on the Vitalyst Health Foundation Board. She is interested in the impact of health on children and their ability to learn.



Full Legal Name: Ye	<u>nia Aqui</u>	lar			
Home Address:	<del></del>				
City:	State:	AZ	Zip:		
Home Telephone:		Cell:			
E-mail Address:					
Employer:					
Work Address:					
City: _	State:	A2	Zip:		
Do you, your spouse, child, parent, or sibling, by blood or by marriage, work for Valleywise Health, or any other hospital or health care institution as defined in A.R.S. §36-401?  YES NO					
Health care industry is defined as hospitals, other health care institutions, nurses, doctors, dentist, and other licensed healthcare professionals whose primary responsibility is providing primary preventative and therapeutic healthcare services. Do you receive more than 10% of your annual income from the health care industry? YES NO					
Were you referred by som	eone? YES 💢	NO			
If yes, please list his/her n	ame: RYCY	1 Winkle			

Revised: 010320



### Valleywise Community Health Centers Governing Council Application

1.	Have you personally or a dependent child received care at a Valleywise Health Community Health Center (dental care included) or at one of the Federally Qualified Health Center Clinics located within Valleywise Comprehensive Health Center-Phoenix? YES NO
	of Valleywise Health Community Health Centers and Federally Qualified Health Center Clinics within Valleywise Comprehensive Health Center-Phoenix is located on the last page of this tion)
If yes,	please list the Clinic utilized, and approximate month/year of last visit
Name o	of Clinic Date of Visit
2.	Why would you like to be a member of the Valleywise Community Health Centers Governing
Oh Ch Th	Council?  Would like to be a member of the Valleyuse Community Health  ters Gaverning Council because as an advocate for latinus  chall children, I understand that must people in our  take living in below the poverty level are Latinus.  Tildren and adults need across to a quality healthcare  civiler to pathere and demicult or patherismus professival,  sould like to better understand the healthcare needs of our  ministry to better serve Thom.
_ CV	As a community member, what do you feel are the greatest health care concerns in Maricopa County?  3 a School Board Member and Darent, I have been ble to see the inequalities in all systems. As someone to has experienced poverty and who was furmerly accumented to have come to realize that healthcare a education are both the equalizers.  1 don't think you can have a graity life without across that year across to healthcare.

Revised: 010320



Revised: 010320

### Valleywise Community Health Centers Governing Council Application

	cial interests or exp		have that would b		
-1 am	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>		mher and	1	imilles who
- I wal	d like to in	Centrs. Crease ac ndevstund			altchare for
<u></u>	——————————————————————————————————————				
for approx duties suc are require occur once	nembers are appoint kimately two hours. It has reading meeting to sit on at least to a month during the month to devote to NO	In addition to a ag material in order one standing content as daytime for ap	meetings, a member der to prepare for r mmittee. Standing oproximately two h	er should allow meetings. Furth committee me hours. Do you	hermore, members etings generally have at least eight
	committees and dat	es of service	-		es? If so, please list  Baxa, President
				<u> </u>	<del>.</del>
funding for	ources and Service our Federally Quancluding members'	lified Health Ce	nter Clinics, requi	res information	
Area of expertise (	select no more tha	n two):			
Healthcare		Finance		Legal	
Community Affairs	· 1	Trade Unions		Government	
Social Services		Education	1	Business	
Labor Relations					

3



Revised: 010320

### Valleywise Community Health Centers Governing Council Application

Ethnicity:
Hispanic or Latino Non-Hispanic or Latino
Race:
Asian Native Hawaiian Other Pacific Islander
Black/African American American Indian/Alaska Native
White More than one race
Gender: Male Female
Please share anything about yourself that you think would add to the diversity and/or advocacy of the Council.  I am fully bilingual, bilitekte, and was an Interpreter in the medical and legal fields.
interpreter in the medical and legal fields.
8. All members of the Valleywise Community Health Centers Governing Council must comply with the Maricopa County Special Health Care District Code of Conduct and Ethics. One of the Principles of Standards of Conduct included in the Code is for Valleywise Health to complete a background check on existing and potential Governing Council members to verify credentials and to assess whether Council members have ever been excluded from participating in any federal or state health care programs.
Would you consent and authorize Valleywise Health to procure criminal background checks if appointed to the Council? YES NO
Date
Please Note: This application is considered a public record



### Valleywise Community Health Centers Governing Council Application

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

O Finance Committee:

The purpose of the Finance Committee is to (1) provide oversight of financial objectives and budgeted financial performance to ensure current and future financial integrity of the Valleywise Health's Federally Qualified Health Center Clinics; (2) reviewing major transactions, investments or expenditures which represent a significant financial commitment or which have significant strategic or operational implications; (3) ensure annual independent financial audit of the Federally Qualified Health Center Clinics is performed.

O Compliance and Quality Committee:

The purpose of the Compliance and Quality Committee is to ensure is to: (1) ensure the quality of care provided by the Federally Qualified Health Center Clinics; (2) ensure patient safety and satisfaction provided throughout the Federally Qualified Health Center Clinics; (3) ensure that all policies comply with federal and state law and Health Resources and Services Administration (HRSA) Compliance Manual

Strategic Planning and Outreach Committee:

The purpose of the Strategic Planning and Outreach Committee is to identify, develop, and implement strategic planning and outreach initiatives to address the changing healthcare environment in Maricopa County.

#### List of Family Health Centers:

Valleywise Community Health Center-7<sup>th</sup> Avenue Valleywise Community Health Center-Avondale Valleywise Community Health Center-El Mirage Valleywise Community Health Center-Guadalupe Valleywise Community Health Center-McDowell Valleywise Community Health Center-Sunnyslope

Valleywise Community Health Center-Chandler Valleywise Community Health Center-Glendale Valleywise Community Health Center-Maryvale Valleywise Community Health Center-Mesa Valleywise Community Health Center-South Central

### List of Federally Qualified Health Center Clinics located in Valleywise Comprehensive Health Center-Phoenix:

Internal Medicine Women's Care

Pediatrics Antepartum Testing

Revised: 010320



Board of Directors Formal Meeting

October 28, 2020

Item 1.c.v.

Governance
No Objection Letter - TSMC



#### **Board of Directors**

Chairman Mark G. Dewane District 2

Valleywise Health Medical Center 2601 East Roosevelt Street Phoenix, Arizona 85008 Phone: 602-344-1241 Fax: 602-344-0892

Vice Chairman Mary Rose Wilcox District 5

Valleywise Health Medical Center 2601 East Roosevelt Street Phoenix, Arizona 85008 Phone: 602-344-1241 Fax: 602-344-0892

Director Mary A. Harden, R.N. <u>District 1</u>

Valleywise Health Medical Center 2601 East Roosevelt Street Phoenix, Arizona 85008 Phone: 602-344-1241 Fax: 602-344-0892

Director Susan Gerard District 3

Valleywise Health Medical Center 2601 East Roosevelt Street Phoenix, Arizona 85008 Phone: 602-344-1241 Fax: 602-344-0892

Director
J. Woodfin Thomas
District 4

Valleywise Health Medical Center 2601 East Roosevelt Street Phoenix, Arizona 85008 Phone: 602-344-1241 Fax: 602-344-0892

Chief Governance Officer and Clerk of the Board Melanie Talbot Valleywise Health Medical Center 2601 East Roosevelt Street Phoenix, Arizona 85008 Phone: 602-344-5177 Fax: 602-344-0892

www.valleywisehealth.org

October 28, 2020

Denise Yanez
Foreign-Trade Zone Administrator
Community and Economic Development Department
200 W. Washington Street, 20th Floor
Phoenix, Arizona 85003

Re: TSMC Property Tax Re-Classification "No Objection"

Dear Ms. Yanez:

The Maricopa County Special Health Care District submits this letter to inform you that the District has no-objection to TSMC, its subsidiaries, affiliates or related entities, to be located in our property tax jurisdiction for which the City of Phoenix is the Zone Grantee.

In particular, we understand the resulting tax implications in reclassifying for property tax purposes TSMC's future real and personal property located at the site referenced above. Thus, Maricopa County Special Health Care District expresses "no-objection" to the proposed property tax reclassification as a Class 6 property.

Sincerely,

Mark G. Dewane Chairman, Board of Directors Maricopa County Special Health Care District





Board of Directors Formal Meeting

October 28, 2020

Item 1.d.i.

Medical Staff
Medical Staff Appointments for
October 2020

Recommended by Credentials Committee: October 6, 2020 Recommended by Medical Executive Committee: October 13, 2020

Submitted to MSHCDB: October 28, 2020

## 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	SPECIALTY/PRIVILEGES	APPOINTMENT DATES	COMMENTS
Adrienne Renee Azurdia, M.D.	Active	Emergency Medicine	11/1/2020 to 10/31/2022	
Mark Gregory Bueno, M.D.	Active	Internal Medicine	11/1/2020 to 10/31/2022	
Victoria Tom-Wong Chew, D.O.	Active	Family Medicine	11/1/2020 to 10/31/2022	
Natalie Kirsten Craik, M.D.	Courtesy	Pediatrics	11/1/2020 to 10/31/2022	
Jeffrey M. Curtis, M.D.	Active	Family Medicine	11/1/2020 to 10/31/2022	
Zoha Salman Haroon, M.D.	Courtesy	Pediatrics	11/1/2020 to 10/31/2022	
Douglas R. Jones, M.D.	Active	Family Medicine	11/1/2020 to 10/31/2022	
Jennifer Sachiko Ronecker, M.D.	Courtesy	Surgery (Neurosurgery)	11/1/2020 to 10/31/2022	

INITIAL / FOCUSED PROFESSIONAL PRACTICE EVALUATION				
NAME	SPECIALTY/PRIVILEGES	RECOMMENDATION EXTEND or PROPOSED STATUS	COMMENTS	
Clint Wayne Anthony, M.D.	Psychiatry	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Adolescent, Adult, Geriatric Psychiatry Privileges.	
Mark Gregory Bueno, M.D.	Internal Medicine	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Internal Medicine Core Privileges.	
Heather Joyce Dalton, M.D.	OB/GYN	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Laser privileges.	
Jenessa Christine Hill, D.O.	Family & Community Medicine	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Subdermal Contraceptive Capsule privileges and Biopsy of Cervix, Endometrium privileges.	

Recommended by Credentials Committee: October 6, 2020 Recommended by Medical Executive Committee: October 13, 2020 Submitted to MSHCDB: October 28, 2020

	INITIAL / FOCUSED	PROFESSIONAL PRACTICE EVALU	JATION
Kambiz Shapoor Kadkhodayan, M.D.	Internal Medicine (Gastroenterology)	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Capsule Endoscopy Privileges.
Hemananda Kumar Muniraman, M.D.	Pediatrics (Neonatology)	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Neonatology Procedural privileges.
Tarreq Mohammad Noori, M.D.	Internal Medicine	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Basic Critical Care Privileges.
Marie Frances Roy Babbitt, M.D.	Psychiatry	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Adolescent, Adult, Geriatric Psychiatry Privileges.
Layne Catherine Sandridge, M.D.	Surgery (Vascular)	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Procedural Sedation Privileges.
Sonam Singh, M.D.	OB/GYN	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Gynecology Core Privileges.
Paige Jackson Smith, M.D.	Pediatrics	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Neonatology Procedural privileges.
Stephen Troy Smith, M.D.	Surgery (Vascular)	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Vascular Surgery Core Privileges.
Wesley L. Smith, D.O.	Psychiatry	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Adolescent, Adult, Geriatric Psychiatry Privileges.
Indu Srinivasan, M.D.	Internal Medicine (Gastroenterology)	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Hemorrhoid Banding Privileges.
Andrew Mark Weinberg, D.O.	Internal Medicine (Gastroenterology)	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Gastroenterology Core, Capsule Endoscopy Privileges.

Recommended by Credentials Committee: October 6, 2020 Recommended by Medical Executive Committee: October 13, 2020 Submitted to MSHCDB: October 28, 2020

INITIAL / FOCUSED PROFESSIONAL PRACTICE EVALUATION				
Michael D. White, M.D.	Internal Medicine (Cardiology)	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Invasive/Interventional Cardiology and Procedural Sedation Privileges.	

REAPPOINTMENTS/ONGOING PROFESSIONAL PRACTICE EVALUATION				
NAME	CATEGORY	SPECIALTY/PRIVILEGES	APPOINTMENT DATES	COMMENTS
Naftaly Attias, M.D.	Active	Orthopaedic Surgery	11/1/2020 to 10/31/2022	
Warren Charles Carll, D.O.	Courtesy	Internal Medicine	11/1/2020 to 10/31/2022	
Patrick N. Connell, M.D.	Courtesy	Emergency Medicine	11/1/2020 to 10/31/2022	
Heather Joyce Dalton, M.D.	Courtesy	Obstetrics / Gynecology	11/1/2020 to 10/31/2022	
Anne Elizabeth Henderson, M.D.	Active	Surgery (Vascular Surgery)	11/1/2020 to 10/31/2022	
Jenessa Christine Hill, D.O.	Active	Family & Community Medicine	11/1/2020 to 10/31/2022	
Dan W. Hobohm, M.D.	Active	Pathology	11/1/2020 to 10/31/2022	
William S. James, M.D.	Courtesy	Psychiatry	11/1/2020 to 10/31/2022	
Kambiz Shapoor Kadkhodayan, M.D.	Courtesy	Internal Medicine (Gastroenterology)	11/1/2020 to 10/31/2022	
Maria Manriquez, M.D.	Courtesy	Obstetrics / Gynecology	11/1/2020 to 10/31/2022	
Hemananda Kumar Muniraman, M.D.	Courtesy	Pediatrics (Neonatology)	11/1/2020 to 10/31/2022	
Abdul Nadir, M.D.	Courtesy	Internal Medicine (Gastroenterology)	11/1/2020 to 10/31/2022	
Alexander Moses Nimri, M.D.	Courtesy	Internal Medicine (Nephrology)	11/1/2020 to 10/31/2022	
Sumediah Nzuonkwelle, M.D.	Active	Internal Medicine	11/1/2020 to 10/31/2022	
Aleksandra Obradov, M.D.	Active	Pediatrics	11/1/2020 to 10/31/2022	
Jignesh Patel, M.D.	Courtesy	Radiology	11/1/2020 to 10/31/2022	
Randy Ray Richardson, M.D.	Courtesy	Radiology	11/1/2020 to 10/31/2022	
Layne Catherine Sandridge, M.D.	Courtesy	Surgery (Vascular Surgery)	11/1/2020 to 10/31/2022	
David P. Sklar, M.D.	Courtesy	Emergency Medicine	11/1/2020 to 10/31/2022	
Stephen Troy Smith, M.D.	Courtesy	Surgery (Vascular Surgery)	11/1/2020 to 10/31/2022	
Yuzana Khin Zaw, M.D.	Courtesy	Internal Medicine (Nephrology)	11/1/2020 to 10/31/2022	

Recommended by Credentials Committee: October 6, 2020 Recommended by Medical Executive Committee: October 13, 2020

Submitted to MSHCDB: October 28, 2020

CHANGE IN PRIVILEGES					
NAME	DEPARTMENT/SPECIALTY	ADDITION / REDUCTION / WITHDRAWAL	COMMENTS		
Anne Elizabeth Henderson, M.D.	Surgery (Vascular)	Withdrawal: General Surgery Procedural Privileges	Voluntary Relinquishment of Privileges due to non-utilization of privileges		
Kambiz Shapoor Kadkhodayan, M.D.	Internal Medicine (Gastroenterology)	Withdrawal: 1. Hemorrhoid Banding; 2. Peroral Endoscopic Myotomy (POEM)	Voluntary Relinquishment of Privileges due to non-utilization of privileges		
Layne Catherine Sandridge, M.D.	Surgery (Vascular)	Withdrawal: General Surgery Procedural Privileges	Voluntary Relinquishment of Privileges due to non-utilization of privileges		

		IGNATIONS rmation Only	
NAME	DEPARTMENT/SPECIALTY	STATUS	REASON
Vinit Manuel, M.D.	Pediatrics (Neonatology)	Courtesy to Inactive	Resigned (Effective October 19, 2020)
Kendra Alane Klein-Mascia, M.D.	Surgery (Ophthalmology)	Courtesy to Inactive	Resigned (Effective October 16, 2020)
Ana Novilla Dagoy Swafford, M.D.	Pediatrics (Pediatric Emergency Medicine)	Courtesy to Inactive	Resigned (Effective October 31, 2020)

#### **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.



Board of Directors Formal Meeting

October 28, 2020

Item 1.d.ii.

Medical Staff
Allied Health Professional Staff
Appointments for October 2020

Recommended by Credentials Committee: October 6, 2020 Recommended by Medical Executive Committee: October 13, 2020

Submitted to MSHCDB: October 28, 2020

### VALLEYWISE HEALTH CREDENTIALS AND ACTION ITEMS REPORT 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.

ALLIED HEALTH PROFESSIONALS - INITIAL APPOINTMENTS						
NAME	DEPARTMENT	PRACTICE PRIVILEGES/ SCOPE OF SERVICE	APPOINTMENT DATES	COMMENTS		
Tyler Luther Cobb, P.AC.	Family & Community Medicine	Practice Prerogatives on file	11/1/2020 to 10/31/2022			
Clara Davis, L.C.S.W.	Psychiatry	Practice Prerogatives on file	11/1/2020 to 10/31/2022			
Daniela DiPomazio, C.R.N.A.	Anesthesiology	Practice Prerogatives on file	11/1/2020 to 10/31/2022			
Diana Elvia Lugo, C.R.N.A.	Anesthesiology	Practice Prerogatives on file	11/1/2020 to 10/31/2022			
Vivian Fajardo, L.C.S.W.	Psychiatry	Practice Prerogatives on file	11/1/2020 to 10/31/2022			
Mandi L. Filla, A.G.N.P.	Psychiatry	Practice Prerogatives on file	11/1/2020 to 10/31/2022			
Kortni Ruth Jones, P.AC.	Family & Community Medicine	Practice Prerogatives on file	11/1/2020 to 10/31/2022			
Susan K. Jostes, P.M.H.N.P.	Psychiatry	Practice Prerogatives on file	11/1/2020 to 10/31/2022			
Amparo Estera Macariola, F.N.P.	Family & Community Medicine	Practice Prerogatives on file	11/1/2020 to 10/31/2022			
Tegan Colleen Halberg, P.AC.	Emergency Medicine	Practice Prerogatives on file	11/1/2020 to 10/31/2022			
Lindsey Nicole Tow, C.R.N.A.	Anesthesiology	Practice Prerogatives on file	11/1/2020 to 10/31/2022			

INITIAL/FOCUSED PROFESSIONAL PRACTICE EVALUATION						
NAME	DEPARTMENT/SPECIALTY	RECOMMENDATION EXTEND or PROPOSED STATUS	COMMENTS			
Nicole Helen Marie Hamilton, P.AC.	Internal Medicine	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Physician Assistant Core Cognitive and Procedural Privileges.			
Janelle Sue Rudnick, P.M.H.N.P.	Psychiatry	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Nurse Practitioner General Core and Nurse Practitioner Psychiatric/Mental Health Core Privileges.			
Bridget Claire Wright, F.N.P.	Family and Community Medicine	Successfully Completed FPPE	Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Family Nurse Practitioner Core Cognitive and Procedural Privileges.			

Recommended by Credentials Committee: October 6, 2020 Recommended by Medical Executive Committee: October 13, 2020

Submitted to MSHCDB: October 28, 2020

	ALLIED HEALTH PROFESSIONALS – REAPPOINTMENTS				
NAME	DEPARTMENT	PRACTICE PRIVILEGES/ SCOPE OF SERVICE	APPOINTMENT DATES	COMMENTS	
Gina Calvanese, C.R.N.A.	Anesthesiology	Practice Prerogatives on file	11/1/2020 to 10/31/2022		
Michelle L.E. Eppel, C.R.N.A.	Anesthesiology	Practice Prerogatives on file	11/1/2020 to 10/31/2022		
Brian Mach, O.D.	Surgery (Optometry)	Practice Prerogatives on file	11/1/2020 to 10/31/2022		
Jose L. Madera, L.P.C.	Psychiatry	Practice Prerogatives on file	11/1/2020 to 10/31/2022		
Sarrah May Mosher, P.AC	Orthopaedic Surgery	Practice Prerogatives on file	11/1/2020 to 10/31/2022		
John D. Thompson, C.R.N.A.	Anesthesiology	Practice Prerogatives on file	11/1/2020 to 10/31/2022		
Larissa D. Wiley, P.AC	Family & Community Medicine	Practice Prerogatives on file	11/1/2020 to 10/31/2022		

		CHANGE IN PRIVILEGES	
NAME	DEPARTMENT	ADDITION / REDUCTION / WITHDRAWAL	COMMENTS
Madeline Irene Powers, C.N.M.	Obstetrics /Gynecology	Addition: Ultrasound: Amniotic Fluid Index (AFI), Level I	Unsupervised
Larissa D. Wiley, P.AC	Family & Community Medicine	Withdrawal: 1. Minor Surgery; 2. Therapeutic Procedures	Voluntary Relinquishment of Privileges due to non-utilization of privileges.

RESIGNATIONS (Information Only)			
NAME DEPARTMENT/SPECIALTY STATUS REASON			
Brian D. Arey, M.S.N., A.N.P.	Internal Medicine	Allied Health Professional to Inactive	Retired (Effective August 5, 2020)
Hannah M. Huan, P.AC	Surgery	Allied Health Professional to Inactive	Resigned (Effective September 9, 2020)

#### **General Definitions:**

Allied Health Professional Staff

Practice Prerogatives

An Allied Health Professional (AHP) means a health care practitioner other than a Medical Staff member who is authorized by the Governing Body to provide patient care services at a MIHS facility, and who is permitted to initiate, modify, or terminate therapy according to their scope of practice or other applicable law or regulation. Governing Body authorized AHPs are: Certified Registered Nurse Anesthetists; Certified Registered Nurse Midwife; Naturopathic Physician; Optometrists; Physician Assistant; Psychologists (Clinical Doctorate Degree Level); Registered Nurse Practitioners.

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(2) Direct 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.

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.



Board of Directors Formal Meeting

October 28, 2020

Item 1.d.iii.

Medical Staff
Revisions to the Department of Dentistry
Delineation of Privileges

#### Valleywise Health Dentistry

#### **Instructions for Applicants**

After reviewing the Qualification for Privileges and Privilege Description, sign the "Attestation Statement". You may be asked to provide documentation of the number and types of cases you have performed during the past 12 to 24 months. Applicants have the burden of producing information deemed necessary by Valleywise Health for a proper evaluation of current competence and other qualifications and for resolving questions. Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.

Core Privilege Lists: Core Procedure and Privilege lists represent a sampling included in the Core Privileges. They are not intended to be an all-encompassing list but rather they are reflective of the categories/types of procedures included in the core. Applicants who wish to exclude any procedures in the Core lists should strike through those procedures they do not wish to request, initial, and date.

**Board Certification:** It is required that board certification be attained within the time frame designated by a practitioner's respective primary specialty/subspecialty. Practitioners are required to maintain board certification in their primary specialty or subspecialty area of practice. Maintenance of only subspecialty certification is adequate for continued hospital privileges in a primary specialty. [Physicians appointed to the Medical Staff and/or granted clinical privileges prior to December 2007, who are not eligible to become board certified, are not subject to the board certification requirement.]

**Other Requirements:** This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organization, regulatory or accreditation requirements that the Valleywise Health is obligated to meet. The applicant agrees to review applicable policies every two years.

**Applicant Attestation:** Applicants for initial and reappointment agree that they understand that in exercising any clinical privileges granted, they are constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation. Any restriction on the clinical privileges granted is waived in an emergency situation and in such situation the actions taken are governed by the applicable section of the Medical Staff Bylaws or related documents

#### Valleywise Health Dentistry

Criteria-Based Core Privileges: Dentistry

To be eligible to apply for core privileges in dentistry, the applicant must meet Valleywise Health medical staff membership requirements as outlined in the Medical Staff Bylaws, Credentials Policy, and the following privileging criteria:

	INITIAL APPLICANTS		
Education	Successful completion from a school of dentistry accredited by the ADA Commission on		
	dental accreditation.		
<b>Board Certification</b>	Not applicable		
Clinical Activity	Applicants for initial appointment must be able to demonstrate performance of at least 20		
	dental inpatient, outpatient, emergency service, or consultative procedures reflective of the		
	scope of privileges requested, during the past 12 months in a dentistry department similar		
	in scope and complexity to Valleywise Health or demonstrate successful completion of an		
	accredited training program within the past 12 months.		
	FOCUSED PROFESSIONAL PRACTICE EVALUATION		
Guidelines for Initial	Minimum of 20 cases shall be reviewed (additional records may be reviewed to asses the		
Appointment	scope of practice has been covered) to include evaluation of chief complaint; review of		
	medical history, medication allergies; use of consultants; appropriateness of diagnosis and		
	treatment planning and in accordance with the Valleywise health Medical Staff Focuse		
	Professional Evaluation to Confirm Practitioner Competence Policy.		
	REAPPOINTMENT		

Current demonstrated competence and an adequate volume of experience (20 dental inpatient, outpatient, emergency service, or consultative cases) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

#### Valleywise Health Dentistry

☐ Requested	GENERAL DENTISTRY CORE PRIVILEGES	(adult and	pediatric)	۱
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If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

- Preventive Dentistry: Diet Counseling, Home Care Instruction, Oral Prophylaxis, Plaque Removal/ Control, Topical Fluoride Application, Sealants
- Restorative Dentistry: Bleaching Procedures, Amalgam Restorations, Composite Crowns, Restoration Incisal Angles, Stainless Steel Crowns, Composite Restoration
- Periodontics Procedures: Occlusal Equilibration, Polishing, Root Planning, Scaling and Curettage, Simple Gingivectomy Teeth Splinting
- Periodontal Surgery Procedures: Quadrant Gingivectomy, Flap Entry and Osseous Procedure Bone Grafting, Vestibuloplasty
- Prosthodontics (fixed) Procedures: Cast gold crowns, Veneer crowns, Fixed bridgework, Inlays, Onlays
- Prosthodontics (removable) Procedures: Full and partial dentures, Minor repairs to dentures
- Endodontics Procedures: Anterior root canal therapy, molar root canals, Apicoectomy, Pulp capping, Pulpotomy
- Interceptive Orthodontics Privileges: Hawley appliances, lingual arch wires, minor tooth movement, space maintainers, space retainers
- Minor Oral Surgery Privileges: Alveoplasty, (Bony) I&D, Partial bony impactions, Frenectomy, Root recovery, Tissue biopsy Uncomplicated Extractions
- Nitrous-Oxide Analgesia Privileges: Use of less than 50% nitrous –oxide in oxygen for anxiolysis and to aid in the injection phase

#### ☐ Requested ☐ GENERAL DENTISTRY CORE PRIVILEGES WITH OPERATING ROOM PRIVILEGES

Dual responsibility of the dentist and the designated attending physician (MD/DO) from the respective service managing the patientf, evaluate, diagnose, consult, and provide treatment to dentistry patients (i.e., adult and pediatric patients) in the inpatient/hospital setting for which general dentistry core procedures are to be performed in the operating room.

#### Criteria to apply for General Dentistry OR privileges:

- Successful completion from a school of dentistry accredited by the ADA Commission on dental accreditation; AND
- Current/granted General Dentistry Core Privileges; AND
- > Direct supervision (i.e., Concurrent Review) for at least the first ten (10) procedures conducted in the OR.

Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) "Unsupervised" cases performed once unsupervised privileges are granted.

Reappointment Criteria: Performance of ten (10) general dentistry cases performed in the OR with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

#### ☐ Requested PEDODONTICS PRIVILEGES (PEDIATRIC)

Treat and consult on dental diseases and conditions in pediatric patients caused by genetic disorders and dental anomalies. Pedodontists will also treat more extensive dental disease in pediatric patients, dental diseases present in medically compromised pediatric patients, recalcitrant pediatric patients, and patients who, due to a young age, need more specialized treatment.

**Criteria to apply for privileges:** Applicant must have completed at an appropriate post-graduate training program accredited by the ADA Commission on dental accreditation

Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases within the provisional period.

**Reappointment Criteria:** Performance of 20 pedodontics cases with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

#### Acknowledgement of Applicant

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Valleywise Health, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions ar governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed_		<u>Date</u>	
-	Applicant		



Board of Directors Formal Meeting

October 28, 2020

Item 1.d.iv.

### **Medical Staff**

Revisions to the Valleywise Health Medical Staff and Allied Health Professional Staff Conditions of Application, Release and Immunity Forms

#### MEDICAL STAFF CONDITIONS OF APPPLICATION, RELEASE AND IMMUNITY

For the purpose of evaluating my qualifications and competency for clinical/professional association<sup>1</sup> with Maricopa County Special Health Care District, d.b.a. Vallleywise Health and all of its affiliated inpatient, ancillary, outpatient, and licensed health services, facilities, departments and programs—(hereinafter collectively referred to as "District"). I understand and agree to the following:

- 1. I understand that it is my responsibility to produce adequate information timely so that my application<sup>2</sup> can be properly evaluated. In addition to the information provided in this application, I also agree to provide Valleywise Health with any additional information that Valleywise Health or one of its authorized representatives may request. MY FAILURE TO PROVIDE ANY REQUESTED INFORMATION TIMELY WILL CAUSE MY APPLICATION TO BE INCOMPLETE AND WILL PREVENT IT FROM BEING PROCESSED.
- 2. I also-agree to keep this application current by informing Valleywise Health in a timely manner, through the Chief Medical Officer and Medical Staff Chief of Staff or his or her designee, of any changes in the information provided, including, but not limited to, any investigations by a state licensure agency, new settlements/judgments, any change in my professional liability insurance coverage, the filing of a professional liability lawsuit or claims against me, any change in my status at any other hospital, any change in my eligibility for participation in the Medicare or Medicaid programs, and any change in my ability to safely and competently exercise my clinical privileges because of health status issues, including impairment, and any charge of, or arrest for driving under the influence ("DUI").
- 3. I will make myself available for interviews in regard to this application.
- 4. I agree to accept committee assignments, emergency service call obligations, and such other reasonable medical staff duties and responsibilities as shall be assigned to me.
- 5. I agree pledge to provide timely and continuous care for all my patients treated at Valleywise Health.
- 6. My appointment to the medical staff and continued clinical privileges remain contingent upon my continued demonstration of professional competence and cooperation, acceptable performance of all related responsibilities, and other factors deemed relevant by Valleywise Health.
- 7. I have received and have had an opportunity to read the Medical Staff Bylaws, Rules and Regulations, and Credentialing Policy, and related Medical Staff documents. I specifically agree to abide by the Bylaws, Policies, Rules and Regulations, Policies, and other factors and policies deemed relevant by Valleywise Health.
- 8. I also agree, as a condition of appointment, to adhere to the Valleywise Health Compliance Policy of Valleywise Health and any laws, regulations, and standards of conduct applicable to my profession, participation in any federal health program, or activities at Valleywise Health, and to report any known or suspected violation of the same by me or by any officer, director, employee, non-physician practitioner or other medical staff member to the Chief Medical Officer or the Compliance Officer.
- 9. I represent that all of the information provided in or attached to this application is accurate and complete. I understand and agree that any misrepresentation, misstatement, or omission from this application, whether intentional or not, shall constitute cause for the immediate cessation of the processing of the application and

<sup>&</sup>lt;sup>1</sup> (For the purpose of this document, the term "clinical association" refers to clinical privileges or direct patient care responsibilities; and the term "professional association" refers to medical staff membership, which may not include privileges or direct patient care responsibilities.)+

<sup>2</sup> The term "application" refers to initial application, and/or reappointment application for Valleywise Health medical staff membership and privileges, or additional privileges.

#### MEDICAL STAFF CONDITIONS OF APPPLICATION, RELEASE AND IMMUNITY

no further processing shall occur. In the event that an appointment has been granted, or renewed prior to the discovery of such misrepresentation, misstatement, or omission, such discovery may be deemed to constitute automatic relinquishment of my clinical privileges and medical staff appointment. In either situation, I am not entitled to any hearing or appeal rights that are contained in the Credentialing Policy.

- 10. To the fullest extent permitted by law, I extend absolute immunity to, release from any and all liability, and agree not to sue Valleywise Health or the Board, its medical staff, their authorized representatives, and appropriate third parties who provide information for any matter for any matter relating directly or indirectly, to appointment, reappointment, clinical privileges, or my qualifications for the same. This immunity coversincludes any actions, recommendations, reports, statements, communications, and/or disclosures involving me that, which are made, taken, or received by Valleywise Health, its authorized agents, the medical staff, their authorized representatives, or appropriate—third parties in the course of credentialing and peer review activities.
- 11. I authorize Valleywise Health, its medical staff, and their authorized representatives (i) to consult with any third party who may have information bearing on my professional qualifications, credentials, clinical competence, character, ability to perform safely and competently, ethics, behavior, or any other matter reasonably having a bearing on my qualifications for initial and continued appointment to the medical staff, and (ii) to obtain any and all communications, reports, records, statements, documents, recommendations or disclosures of said third parties that may be relevant to such questions. In addition, I specifically authorize these third parties to release the information to Valleywise Health, its medical staff, and their authorized representatives upon request. Under the HIPAA privacy standards, Valleywise Health and the District Medical Group, Inc. are considered an Organized Health Care Arrangement and may share my protected health information for purposes of healthcare operations, which includes credentialing.
- 12. I authorize Valleywise Health, its medical staff, and their authorized representatives to release such information to other hospitals, health care facilities, third party payers, and their agents, and any government or regulatory agencies, including licensure boards who solicit such information for the purpose of evaluating my qualifications pursuant to a request for appointment and clinical privileges, participating provider status, other credentialing matter, or licensure or regulatory matter.
- 13. I also authorize the release/exchange of any information between Valleywise Health and District Medical Group, Inc. related to the credentialing process, quality review and monitoring.<sup>3</sup> Such information may be released to the above entities or to representatives of such entities.
- 14. I agree that the hearing and appeal procedures set forth in Valleywise Health Medical Staff Credentialing Policy shall be my sole and exclusive remedy with respect to any professional review action taken at Valleywise Health.
- 15. If, notwithstanding the provisions herein, I institute legal action against Valleywise Health, its medical staff, or their authorized representatives and do not prevail, I agree to reimburse Valleywise Health and any medical staff members and their authorized representatives who are named in the action for all costs incurred in defending such legal action, including reasonable attorneys' fees.

TYPED/PRIN	NTED NAME
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Signature (Signature stamps not accepted)

**Date** 

Approved 07/96, Rev. 02/00, 5/04, 11/04, 05/10, 03/11, 10/13, 10/2020

<sup>&</sup>lt;sup>3</sup> This provision only applies to practitioners that are contracted with or employed by District Medical Group, Inc..

#### ALLIED HEALTH PROFESSIONAL STAFF

#### CONDITIONS OF APPPLICATION, RELEASE AND IMMUNITY

For the purpose of evaluating my qualifications and competency for clinical/professional association with Maricopa County Special Health Care District, d.b.a. Vallleywise Health and all of its affiliated inpatient, ancillary, outpatient, and licensed health services, facilities, departments and programs\_(hereinafter collectively referred to as "District"). I understand and agree to the following:

- 1. I understand that it is my responsibility to produce adequate information timely so that my application\* can be properly evaluated. In addition to the information provided in this application, I also agree to provide Valleywise Health with any additional information that Valleywise Health or one of its authorized representatives may request. MY FAILURE TO PROVIDE ANY REQUESTED INFORMATION TIMELY WILL CAUSE MY APPLICATION TO BE INCOMPLETE AND WILL PREVENT IT FROM BEING PROCESSED.
- 2. I also agree to keep this application current by informing Valleywise Health in a timely manner, through the Valleywise Health Chief Medical Officer and Medical Staff Chief of Staff, of any changes in the information provided, including, but not limited to, any investigations by a state licensure agency, new settlements/judgments, any change in my professional liability insurance coverage, the filing of a professional liability lawsuit or claims against me, any change in my status at any other hospital, any change in my eligibility for participation in the Medicare or Medicaid programs, and any change in my ability to safely and competently exercise my clinical privileges because of health status issues, including impairment, and any charge of, or arrest for driving under the influence ("DUI").
- 3. I will make myself available for interviews in regard to this application.
- 4. My scope of practice or clinical privileges as an Allied Health Professional at Valleywise Health and continued scope of practice or clinical privileges at Valleywise Health remain contingent upon my continued demonstration of professional competence and cooperation, acceptable performance of all related responsibilities, as well as the other factors deemed relevant by Valleywise Health.
- 5. I understand that if my agreement with my supervising/collaborating/employing physician is terminated for any reason, my permission to practice at Valleywise Health shall be automatically relinquished (unless I enter into an appropriate arrangement with another physician on the medical staff and I agree to provide notice of this change to the CMO within three days of any such change.
- 6. I have received and have had an opportunity to read the Valleywise Health Medical Staff Bylaws, Rules and Regulations, Allied Health Professional Policy, and related Medical Staff documents. I specifically agree to abide by these Bylaws, Rules and Regulations, Policies, and other factors and policies deemed relevant by Valleywise Health. Policy during the time I am permitted to practice at MIHS.
- 7. I also agree, as a condition of my scope of practice or clinical privileges, to adhere to the Valleywise Health Compliance Policy of Valleywise Health and any laws, regulations, and standards of conduct applicable to my profession, participation in any federal health program, or activities at Valleywise Health, and to report any known or suspected violation of the same by me or by any officer, director, employee, medical staff appointee or allied health professional to the Chief Medical Officer or the Compliance Officer.
- 8. I represent that all of the information provided in or attached to this application is accurate and complete. I understand and agree that any misrepresentation, misstatement, or omission from this application, whether intentional or not, shall constitute cause for the immediate cessation of the processing of the application and no further processing shall occur. In the event that permission to practice as an Allied Health Professional at Valleywise Health has been granted, or renewed prior to the discovery of misrepresentation, misstatement, or omission, such discovery may be deemed to constitute automatic relinquishment of my scope of practice or clinical privileges and Allied Health Professional Staff appointment. In either situation, I am not entitled to any of the procedural rights that are contained in the Allied Health Professional Policy.
- \* The term "application" refers to initial application and/or reappointment application for Valleywise Health Allied Health Professional staff membership and privileges, or additional privileges.

### ALLIED HEALTH PROFESSIONAL STAFF CONDITIONS OF APPPLICATION, RELEASE AND IMMUNITY

- 9. To the fullest extent permitted by law, I extend absolute immunity to, release from any and all liability, and agree not to sue Valleywise Health or the Board, any member of the Medical Staff, —its authorized representatives, and any third parties who provide information for any matter relating to permission to practice, my scope of practice or clinical privileges at Valleywise Health, my scope of practice, or my qualifications for the same, including any actions, recommendations, reports, statements, communications and,—for disclosures involving me, which are made, taken, or received by Valleywise Health,—or its authorized agents, or third parties in the course of credentialing and peer review activities, representatives.
- 10. I authorize Valleywise Health, its medical staff, and its authorized representatives to consult with any third party who may have information bearing on my professional qualifications, credentials, clinical competence, character, ability to perform safely and competently, ethics, behavior, or any other matter reasonably having a bearing on my qualifications to practice as an Allied Health Professional. This authorization includes the right to inspect or obtain any and all communications, reports, records, statements, documents, recommendations or disclosures of said third parties that may be relevant to such questions. In addition, I specifically authorize these third parties to release the information to Valleywise Health and its authorized representatives upon request. Under the HIPAA privacy standards, Valleywise Health and the District Medical Group, Inc. are considered an Organized Health Care Arrangement and may share my protected health information for purposes of healthcare operations, which includes credentialing.
- 11. I authorize Valleywise Health, its medical staff, and its authorized representatives to release such information to other hospitals, health care facilities, third party payers, and their agents, and any government or regulatory agencies, including licensure boards who solicit such information for the purpose of evaluating my qualifications pursuant to a request for permission to practice or other credentialing matter.
- 12. I also authorize the release/exchange of any information between Valleywise Health and District Medical Group, Inc. related to the credentialing process, quality review and monitoring. Such information may be released to the above entities or to representatives of such entities.\*\*
- 13. I agree that the hearing and appeal procedures set forth in the Allied Health Professional Policy shall be my sole and exclusive remedy with respect to any professional review action taken at Valleywise Health.
- 14. If, notwithstanding the provisions herein, I institute legal action against Valleywise Health, its medical staff, or their authorized representatives and do not prevail, I agree to reimburse Valleywise Health and any of its authorized representatives who are named in the action for all costs incurred in defending such legal action, including reasonable attorneys' fees.

TYPED/PRINTED NAME	Signature (Signature stamps not accepted)	Date

\* This provision only applies to practitioners that are contracted with or employed by District Medical Group, Inc.



Board of Directors Formal Meeting

October 28, 2020

Item 1.d.v.

**Medical Staff** 

Revisions to the Valleywise Health Medical Staff Rules and Regulations – Policy #31201 T



#### October 2020

#### **SUMMARY OF PROPOSED REVISIONS**

#### VALLEYWISE HEALTH MEDICAL RULES and REGULATIONS (#31201 T)

**Definitions:** 

> 1.A Removing definitions from the policy as there is a recommended new Medical Staff Glossary.

Policy:

Article 3

3.4 Moved History and Physical language to the Medical Staff Bylaws (Appendix A) to be in compliance with CMS

Conditions of Participation and MS.17, SR.1 in the DNV standards.

# MEDICAL STAFF BYLAWS, POLICIES, AND RULES AND REGULATIONS OF VALLEYWISE HEALTH

## MEDICAL STAFF RULES AND REGULATIONS

#### TABLE OF CONTENTS

			<b>PAGE</b>
I.	GEN	VERAL	1
	1.1.	Definitions	1
	1.2.	Delegation of Functions	1
	1.3.	Medical Student Notes	
II.		MISSIONS, ASSESSMENTS AND CARE, TREATMENT O SERVICES	2
	2.1.	Admissions	
	2.2.	Responsibilities of Attending Physician	
	2.3.	Availability and Alternate Coverage	
	2.4.	Continued Hospitalization	3
III.	HEA	ALTH RECORDS	4
	3.1.	General	4
	3.2.	Access and Retention of Record	4
	3.3.	Content of Record	5
	3.4.	History and Physical	8
	3.5.	Progress Notes	
	3.6.	Authentication	10
	3.7.	Informed Consent	11
	3.8.	Physician Attestation Statements	11
	3.9.	Completion of Health records	
IV.	MEI	DICAL ORDERS	13
	4.1.	General	13
	4.2.	Verbal Orders	
	4.3.	Standing Order Protocols	
	4.4.	Orders for Drugs and Biologicals	
	4.5.	Orders for Radiology Services and Diagnostic Imaging Services	
	4.6.	Orders for Respiratory Care Services	

			<b>PAGE</b>
V.	CON	SULTATIONS	17
	~ 1		15
	5.1.	General	
	5.2.	Contents of Consultation Report	
	5.3.	Required Consultations	
	5.4.	Psychiatric Consultations	18
VI.	SURG	GICAL SERVICES	19
	6.1.	Pre-Procedure Protocol	19
	6.2.	Post-Procedure Protocol	
VII.	A NIEG	STHESIA SERVICES	22
V 11.	ANE	STHESIA SERVICES	22
	7.1.	General	22
	7.2.	Pre-Anesthesia Procedures	22
	7.3.	Monitoring During Procedure	23
	7.4.	Post-Anesthesia Evaluations	
	7.5.	Minimal or Moderate ("Procedural") Sedation	
VIII.	PHAI	RMACY	26
	8.1.	General Rules	
	8.2.	Storage and Access	
	8.3.	Patient's Own Medications	27
IX.	REST	TRAINTS, SECLUSION, AND BEHAVIOR	
		AGEMENT PROGRAMS	28
Χ.	EME	RGENCY SERVICES	29
	10.1.	Conoral	20
		General	
	10.2.	Medical Screening Examinations	
	10.3. 10.4.	On-Call Responsibilities  Emergency Medical Certified Technicians (EMCT)	30
	10.4	Emergency Iviedical Cerimed Technicians (ElviCT)	30

			PAGE
XI.	DISC	HARGE PLANNING AND DISCHARGE SUMMARIES	31
<b>A1.</b>	DISC	HARGE I LANNING AND DISCHARGE SUMMARIES	1
	11.1.	Who May Discharge	31
	11.2.	Identification of Patients in Need of Discharge Planning	
	11.3.	Discharge Planning	
	11.4.	Discharge Summary	
	11.5.	Discharge of Minors and Incompetent Patients	
	11.6.	Discharge Instructions	32
XII.	TRA	NSFER TO ANOTHER HOSPITAL OR HEALTH CARE FACILITY	33
	12.1.	Transfer	33
XIII.	MISC	CELLANEOUS	34
	13.1.	Patient Death and Death Certificates	
	13.2.	Autopsies	
	13.3. 13.4.	Treatment of Family Members	
	13.4.	Investigational Research	
	13.6.	End of Life/DNR Policy	
	13.7.	Emergency Preparedness	
XIV.	AME	NDMENTS	36
XV.	ADO	PTION	37

#### ARTICLE I

#### **GENERAL**

#### 1.1. Definitions:

The definitions that apply to terms used in these Medical Staff Rules and Regulations are set forth in the Medical Staff BylawsGlossary.

#### 1.2. Delegation of Functions:

- (a) When a function is to be carried out by a member of Hospital management, by a Medical Staff member, or by a Medical Staff committee, the individual, or the committee through its chair, may delegate performance of the function to one or more designees unless such delegation is expressly prohibited elsewhere in any of the Medical Staff documents.
- (b) When a Medical Staff member is unavailable to perform a necessary function, one or more of the Medical Staff Leaders may perform the function personally or delegate it to another appropriate individual.

#### 1.3. Medical Student Notes

Medical Student notes shall be managed in accordance with Valleywise Health Policy #01033.

#### 3.4. History and Physical: Please refer to the Medical Staff Bylaws

- (a) A pertinent medical history and physical examination will be performed and documented on each patient no more than 30 days before, or 24 hours after, admission or registration, but in all cases prior to the first time out for any surgery or a procedure requiring anesthesia services, or procedural sedation, by an individual who has been granted privileges by the Hospital to perform histories and physicals.
- (b) For patients undergoing electroconvulsive therapy (ECT) by an individual who has been granted such privileges by the Hospital, a history and physical that has been completed within the past 30 days in a practitioner's office (outside of Valleywise Health) may be accepted provided:
  - (1) the pertinent data elements are present to fully assess the patients risk for the procedure;
  - (2) the history and physical is reviewed, the patient is reassessed, and the history and physical is authenticated by an individual who has been granted privileges by the Hospital to perform histories and physicals in accordance with paragraphs (d) below.
- (c) "Registration" means registration for outpatient surgery, or a procedure requiring anesthesia services, or procedural sedation.
- (d) A signed/ authenticated and dated medical history and physical examination that has been completed within the 30-day period prior to admission or registration performed by an individual who has been granted privileges by the Hospital to perform histories and physicals (except as noted in section 3.4., (b) above) may be used, provided that the patient has been reassessed within 24 hours of the time of admission or registration and in all cases prior to surgery or a procedure requiring anesthesia services in order to document (1) that the patient has been examined; (2) that the history and physical has been reviewed; and (3) any changes in the patient's condition since the date of the original history and physical, or that there have been no changes in the patient's condition.
- (e) When the history and physical examination, as defined in paragraphs (a), (b) and (c) above, is not performed or recorded in the health record prior to surgery or a procedure requiring anesthesia services, the operation or procedure will be canceled unless. Attending Physician (or his or her designee) states in writing as soon as reasonably possible that an emergency situation exists, or that any such delay would be detrimental to the patient. If it is an emergency situation and a history and physical has been dictated but not yet present in the patient's chart, the Attending Physician (or his or her designee) who admitted the patient shall write a statement to that effect as well as an admission note in the patient's chart. The note should

include, at a minimum, critical information about the patient's condition including pulmonary status, cardiovascular status, blood pressure, and vital signs. This requirement applies regardless of whether care is being provided on an inpatient or outpatient basis. If, in the opinion of the Attending Physician (or his or her designee), taking time to document the history and physical examination before the procedure would have a negative effect on patient care, there will be a statement attesting such in the patient's chart after completion of the operation or procedure.

- The scope of the medical history and physical examination will be appropriate for the services being provided. This examination will include, as pertinent: (1) patient identification; (2) chief complaint; (3) history of present illness; (4) review of systems; (5) personal medical history, including medications and allergies; (6) family medical history; (7) social history, including any abuse or neglect; (8) physical examination, to include pertinent findings in those organ systems relevant to the presenting illness and to co-existing diagnoses; (9) data reviewed; (10) assessments, including problem list; (11) plan of treatment; and (12) if applicable, signs of abuse, neglect, addiction or emotional/behavioral disorder, which will be specifically documented in the physical examination and any need for restraint or seclusion will be documented in the plan of
- (g) A focused history and physical containing the chief complaint or reason for the procedure, relevant history of the present illness or injury, and the patient's present clinical condition/physical findings, may be used for outpatient care.
- (h) The Attending Physician may delegate all or part of the physical examination to other qualified practitioners (i.e., Resident Physicians, Nurse Practitioners, Physician Assistants, Nurse Midwives), but the Attending Physician must sign for

treatment.

and assume full responsibility for history and physicals for all procedures that require anesthesia or procedural sedation, and for inpatient admissions in accordance with 3.4 (d). When such a delegation occurs for an inpatient admission, or outpatient procedure requiring anesthesia or procedural sedation, the Attending Physician must (i) review and co-sign any history and physical done by a qualified practitioner, (ii) and add his or her own note (history and physical) or approved attestation of supervision addressing the history and physical, as deemed necessary. This must be done within 24 hours after admission and prior to the outpatient procedure requiring anesthesia services or procedural sedation. (iii) For procedural sedation performed in the emergency department, the emergency medicine H & P for the emergency department encounter will be sufficient to meet this requirement.

#### ARTICLE XV

#### **ADOPTION**

These rules and regulations are adopted and made effective upon approval of the Board, superseding and replacing any and all other bylaws, rules and regulations, policies, manuals of the Medical Staff, or the Hospital policies pertaining to the subject matter thereof.

Adopted by the Medical Staff:	
Medical Executive Committee  13, 2020	Date: August 11October
Approved by the Board of Directors:	
Maricopa Special Healthcare District Board of Directors  29, 2020	Date: <u>August 26October</u>

#### **Revisions:**

 $1980,\ 1981,\ 1982,\ 1/83,\ 08/83,\ 05/84,\ 07/87,\ 08/88,\ 11/88,\ 04/89,\ 01/91,\ 07/91,\ 12/91,\ 05/92,\ 12/92,\ 10/94,\ 11/95,\ 05/96,\ 10/96,\ 02/98,\ 07/98,\ 04/2000,\ 06/2001,\ 08/2001,\ 09/2002,\ 10/2004\ (New Governance Change Only),\ 05/2005,\ 05/2006,\ 08/006,\ 05/2007,\ 08/2007,\ 02/2008,\ 09/2008,\ 08/2010,\ 01/2011,\ 02/2012,\ 06/2012,\ 01/2013,\ 09/13,\ 11/13,\ 04/2016,\ 01/2017,\ 2/2019,\ 9/2019,\ 6/2020,\ 08/2020$ 

Page 4 of 38



Board of Directors Formal Meeting

October 28, 2020

Item 1.d.vi.

Medical Staff
Department Chair of Emergency
Medicine

### Jeffrey R. Stowell, MD

#### Appointments: Vice Chair

Department of Emergency Medicine Creighton University School of Medicine/Valleywise Medical Center Emergency Medicine Residency Program

#### Medical Director

Emergency Department
Department of Emergency Medicine
Valleywise Health Maryvale Medical Center, Phoenix Arizona

#### Medical Director

Adult Emergency Department
Department of Emergency Medicine
Valleywise Health Medical Center, Phoenix Arizona

#### Associate Emergency Ultrasound Director

Department of Emergency Medicine Valleywise Health Medical Center, Phoenix Arizona

#### Administrative Fellowship Director

Department of Emergency Medicine Valleywise Health Medical Center, Phoenix Arizona

#### Emergency Ultrasound Fellowship Director

Department of Emergency Medicine Valleywise Health Medical Center, Phoenix Arizona

Clinical Associate Professor in the Department of Emergency Medicine University of Arizona College of Medicine – Phoenix

Assistant Professor, Affiliate Faculty, in the Department of Emergency Medicine

Creighton University School of Medicine

Abrazo System Regional Emergency Ultrasound Director

Team Health, Phoenix Arizona

2601 E Roosevelt St

Address: Phoenix, AZ 85008

Tel: 602.344.5808 Fax: 602.344.5907

United States Citizen

Citizenship:

American Board of Emergency Medicine

Board

57574 exp. 12/31/2025

Certification:

Arizona State Medical License

**Licensure:** 50692 exp. 12/27/2021

Colorado State Medical License DR.0053736 exp. 4/30/2021

Texas State Medical License

P4618 exp. 11/30/2020

EDUCATION

2002-2006 Arizona State University, Tempe, AZ

B.S. Biology

2007-2011 The University of Arizona, College of Medicine, Tucson, AZ

M.D.

POSTDOCTORAL TRAINING

2011-2014 Emergency Medicine Residency

UT Health Science Center, Houston, TX

Memorial Hermann Hospital – Texas Medical Center,

Houston, TX

Lyndon B. Johnson General Hospital, Houston, TX

2014-2015 Emergency Ultrasound Fellowship

Denver Health Hospital – Denver, CO

University of Colorado Hospital – Aurora, CO

TRAINING APPOINTMENTS

2013-2014 Chief Resident

Emergency Medicine, UT Health Science Center,

Houston, TX

Memorial Hermann Hospital – Texas Medical Center, Houston, TX Lyndon B. Johnson General Hospital, Houston, TX 2014-2015 Emergency Ultrasound Fellow Denver Health Hospital – Denver, CO University of Colorado Hospital – Aurora, CO ACADEMIC APPOINTMENTS 2020-Present Clinical Associate Professor in the Department of Emergency Medicine University of Arizona College of Medicine -Phoenix, Phoenix, AZ 2018-Present Assistant Professor, Affiliate Faculty, in the Department of Emergency Medicine Creighton University School of Medicine 2015-2020 Clinical Assistant Professor in the Department of Emergency Medicine University of Arizona College of Medicine -Phoenix, Phoenix, AZ 2014-2015 Clinical Instructor in the Department of Emergency Medicine Denver Health Hospital – Denver, CO University of Colorado Hospital – Aurora, CO 2014-2015 Ultrasound Instructor Human Body Anatomy Course, The University of Colorado, School of Medicine DEPARTMENTAL APPOINTMENTS Vice Chair 2019-Present Department of Emergency Medicine Valleywise Health Medical Center, Phoenix Arizona 2019-Present Administrative Fellowship Director Department of Emergency Medicine Valleywise Health Medical Center, Phoenix Arizona 2019-Present Medical Director

Emergency Department

Stowell — 3

Department of Emergency Medicine

Valleywise Health Maryvale Medical Center, Phoenix Arizona

2017-Present Medical Director

Adult Emergency Department

Department of Emergency Medicine

Valleywise Health Medical Center, Phoenix Arizona

Emergency Advanced Practice Provider Director

2016-Present Adult Emergency Department

Valleywise Health Medical Center, Phoenix Arizona

Emergency Ultrasound Fellowship Director

2015-Present Adult Emergency Department

Valleywise Health Medical Center, Phoenix Arizona

Associate Emergency Ultrasound Director

2015-Present Adult Emergency Department

Valleywise Health Medical Center, Phoenix Arizona

2016-Present Abrazo System Regional Emergency Ultrasound Director

Team Health, Phoenix Arizona

#### STAFF APPOINTMENTS

2019-Present Valleywise Health Maryvale Medical Center, Phoenix Arizona

Physician

2016-Present Abrazo Arizona Heart Hospital, Phoenix, AZ

Physician

2015-Present Valleywise Health Medical Center, Phoenix Arizona

Physician |

2014-2015 The University of Colorado Emergency Department, Aurora, CO

Physician

2014-2015 Denver Health Emergency Department, Denver, CO

Physician

CERTIFICATIONS

2018 EPIC Physician Builder Certification

CLN 150: Basic and CLN 160: Advanced

2015-Present Emergency Medicine Specialty Certification

2011-Present Advanced Cardiovascular Life Support

Basic Life Support

Advanced Trauma Life Support Pediatric Advanced Life Support

PUBLICATIONS, PRESENTATIONS, AND DEMONSTRATIONS

#### Publications |

Acuña J, Stolz U, Stolz LA, Situ-LaCasse EH, Bell G, Berkeley RP, Boyd JS, Castle D, Carmody K, Fong T, Grewal E, Jones R, Hilberts S, Kanter C, Kelley K, Leetch SJ, Pazderka P, Shaver E, Stowell JR, Josephson EB, Theodoro D, Adhikari S. <u>Evaluation of Gender Differences in Ultrasound Milestone Evaluations During Emergency Medicine Residency Training: A Multicenter Study.</u> *AEM Educ Train.* 2019. PMID: 32313855

Stowell JR, Rigdon D, Colglazier R, Filler L, Orosco D, Connell M, Akhter M, Mitchell C. <u>Risk of contrast extravasation with vascular access in computed tomography</u>. *Emerg Radiol*. 2020. PMID: 31919617

Filler L, Orosco D, Rigdon D, Mitchell C, Price J, Lotz S, Stowell JR. <u>Evaluation of a novel curriculum on point-of-care ultrasound competency and confidence.</u> *Emerg Radiol.* 2019. PMID: 31485848

Phillips RJ, Watanabe KM, Stowell JR, Akhter M. <u>Concordance between blood and cerebrospinal fluid cultures in meningitis.</u> *Am. J. Emerg.* 2019. PMID: 31303534

Stowell JR, Pugsley P, Jordan H, Akhter M. <u>Impact of Emergency</u>
<u>Department Phlebotomists on Left-Before-Treatment-Completion Rates.</u> *West J Emerg Med.* 2019. PMID: 31316710

Stowell JR, Filler L, Sabir MS, Roh AT, Akhter M. <u>Implications of language barrier on the diagnostic yield of computed tomography in pulmonary embolism</u>. *Am. J. Emerg. Med.* 2018. PMID: 29395769

Stowell JR, Kessler R, Lewiss RE, Barjaktarevic I, Bhattarai B, Ayutyanont N, Kendall JL. <u>Critical Care Ultrasound: A National Survey Across Specialties.</u> *J Clin Ultrasound.* Nov 2017. PMID: 29131347

Myers SJ, Kelly TE, Stowell JR. Successful Point-Of-care

<u>Ultrasound-guided Treatment of Submassive Pulmonary Embolism.</u> *Clin Pract Cases Emerg Med.* Oct 2017. PMID: 29849348

Hansen W, Mitchell C, Ayutyanont N, Bhattarai B, Stowell JR, <u>Perception of Point – Of – Care Ultrasound Performed by Emergency</u> Medicine Physicians. *J Clin Ultrasound*. 2017 Feb 6. PMID: 28164320

Royer DF, Kessler R, Stowell JR. <u>Evaluation of an Innovative Handson Anatomy-Centered Ultrasound Curriculum to Supplement Graduate Gross Anatomy Education.</u> *Anat Sci Educ*. 2016 Nov 21. PMID: 27870531

Kessler R, Stowell JR, Vogel JA, Liao MM, Kendall JL. <u>Effect of Interventional Program on the Utilization of PACS in Point-of-Care Ultrasound.</u> *J Digit Imaging*. 2016 Jul 13. PMID: 27412670

Rezayat T, Stowell JR, Kendall JL, Turner E, Fox JC, Barjaktarevic I. <u>Ultrasound-Guided Cannulation: Time to Bring Subclavian Central</u> Lines Back. *West J Emerg Med*. 2016 Jan 21. PMID: 26973755

**Abstracts** 

Stowell JR, Vohra TT, Luber SD. <u>Emergency Medicine Resident Clinical Hours: A National Survey.</u> *J Emerg Med.* 2015 Jan 24. PMID: 25630475

Stowell, JR, Reason 2 Group. <u>Characteristics of Brief Limited</u>
<u>Cardiac Ultrasound and Its Implications on Resuscitation: A</u>
<u>Multicenter REASON.</u> Society of Academic Emergency Medicine, Annual Meeting. 2020. Denver, CO – Cancelled due to COVID-19 Pandemic.

Stowell, JR, Reason 2 Group. <u>Basic Cardiac Ultrasound is Not the Same As Echocardiography, Impact on Cardiac Arrest: A REASON Study.</u>
Society of Academic Emergency Medicine, Annual Meeting. 2020.
Denver, CO – Cancelled due to COVID-19 Pandemic.

Stowell, JR, Reason 2 Group. <u>Limited Cardiac Ultrasound in Cardiac Arrest and Impact on Image Quality: A Multicenter REASON Study.</u>
Society of Academic Emergency Medicine, Annual Meeting. 2020.
Denver, CO – Cancelled due to COVID-19 Pandemic.

Watanabe, K, Stowell, JR, Cimpeanu, E, Akhter, M. <u>Concordance</u>

<u>Between Blood and Cerebrospinal Fluid Cultures: Can Management</u>

<u>Strategies be Improved?</u> Society of Academic Emergency Medicine,

Annual Meeting. 2018. Indianapolis, IN.

Mitchell, C, Rigdon, D, Williams, G, Stowell, JR. <u>Point-of-Care</u> <u>Ultrasound Workflow Innovation: A Novel Approach.</u> Society of

Academic Emergency Medicine, Annual Meeting. 2018. Indianapolis, IN.

Rigdon, D, Mitchell, C, Colglazier, R, Akhter, M, Orosco D, Filler L, Connell M, Stowell, JR. <u>Risk of Contrast Extravasation with Computed Tomography in Ultrasound Guided Vascular Access.</u> Society of Academic Emergency Medicine, Annual Meeting. 2018. Indianapolis, TN.

Meng G, Stowell, JR, Oppenheimer, RW, Akhter, M. <u>Evaluating the Utility of Computed Tomography in Management of Peritonsillar Abscess.</u> Society of Academic Emergency Medicine, Annual Meeting. 2018. Indianapolis, IN.

Watanabe, K, Stowell, JR, Cimpeanu, E, Akhter, M. <u>Concordance</u>
<u>Between Blood and Cerebrospinal Fluid Cultures: Can Management</u>
<u>Strategies be Improved?</u> Society of Academic Emergency Medicine,
Western Regional Meeting. 2018. Albuquerque, NM.

Stowell, JR, Pugsley, P, Jordan, H, Bhattarai, B, Akhter, M. <u>Impact of Dedicated Emergency Department Phlebotomists on Operational Efficiency.</u> Society of Academic Emergency Medicine, Western Regional Meeting. 2018. Albuquerque, NM.

Rigdon, D, Mitchell, C, Colglazier, R, Akhter, M, Orosco D, Filler L, Connell M, Stowell, JR. <u>Risk of Contrast Extravasation with Computed Tomography in Ultrasound Guided Vascular Access.</u> Society of Academic Emergency Medicine, Western Regional Meeting. 2018. Albuquerque, NM.

Meng G, Stowell, JR, Oppenheimer, RW, Akhter, M. <u>Evaluating the Utility of Computed Tomography in Management of Peritonsillar Abscess.</u> 2018. Society of Academic Emergency Medicine, Western Regional Meeting. Albuquerque, NM.

Akhter M, Watanabe K, Cimpeanu E, Stowell, JR. <u>Concordance Between Blood and CSF Cultures-Can Management Strategies be Improved?</u> The University of Arizona College of Medicine – Tucson: Junior Investigator Poster Forum. Nov 17<sup>th</sup>, 2017. Tucson, AZ.

Akhter M, Filler L, Saber M, Roh A, Stowell JR. <u>Implications of language barrier in pulmonary embolism</u>. The University of Arizona College of Medicine – Tucson: Junior Investigator Poster Forum. Nov 17<sup>th</sup>, 2017. Tucson, AZ.

Akhter M, Meng G, Oppenheimer R, Stowell JR. <u>Emergency Department Management of Peritonsillar Abscesses: Evaluating the Utility of CT in a Protocol Based Management.</u> The University of Arizona College of Medicine – Tucson: Junior Investigator Poster Forum. Nov 17<sup>th</sup>, 2017. Tucson, AZ.

Akhter M, Hallare M, Roontiva A, Stowell JR. <u>Fluid Resuscitation of Septic Patients at Risk for Fluid Overload.</u> Oct 29<sup>th</sup>, 2017. American College of Emergency Physicians Scientific Assembly. Washington DC.

Kessler R, Stowell JR, Vogel JA, Liao MM, Kendall JL. <u>Effect of Interventional Program on the Utilization of PACS in Point-of-Care Ultrasound.</u> American Institute of Ultrasound in Medicine Convention. Mar 25<sup>th</sup>-29<sup>th</sup>, 2017. Lake Buena Vista, Fl.

Hansen W, Mitchell C, Ayutyanont N, Bhattarai B, Bremer, Z, Stowell JR, <u>Perception of Point – Of – Care Ultrasound Performed by Emergency Medicine Physicians.</u> American College of Emergency Physicians Scientific Assembly. Oct 18<sup>th</sup>, 2016. Las Vegas, NV.

Stowell JR, Kendall JL, Lewiss RE, Barjaktarevic I, Kessler R. <a href="mailto:Critical Care Ultrasound: A National Survey Across Specialties">Critical Care Ultrasound: A National Survey Across Specialties</a>. Society of Academic Emergency Medicine, Annual Meeting. 2016. New Orleans, LA.

Stowell JR, Kendall JL, Lewiss RE, Barjaktarevic I, Kessler R. Critical Care Ultrasound: A National Survey Across Specialties. Society of Academic Emergency Medicine, Western Regional Meeting. 2016. Marina Del Rey, CA.

Royer D, Kessler R, Stowell JR. <u>Evaluation of a Hands-On Anatomy-Centered Ultrasound Curriculum in a Graduate Gross Anatomy Course.</u> *FASEB J.* Abstract. 2016 April. 30:567.3

Royer D, Kessler R, Stowell JR. <u>Evaluation of a Hands-On Anatomy-Centered Ultrasound Curriculum in a Graduate Gross Anatomy Course</u>. CU-AMC Educational Scholarship and Innovation Symposium Oral Presentation. 2016. Aurora, CO.

Royer D, Kessler R, Stowell JR. <u>Evaluation of a Hands-On Anatomy-Centered Ultrasound Curriculum in a Graduate Gross Anatomy Course</u>. American Association of Anatomists, Annual Meeting at Experimental Biology. 2016. San Diego, CA.

Non-Peer Reviewed

Stowell JR, Dendy S, Miller SK, Press GM. A Comparison of

Text Book

<u>Ultrasound and Landmark Guided Radial Artery Cannulation.</u> The University of Texas College of Medicine- Houston Resident Research Day. 2014. UT Health Science Center, Houston, TX.

Acknowledgements

Stowell JR, Dendy S, Miller SK, Press GM. <u>A Comparison of Ultrasound and Landmark Guided Radial Artery Cannulation.</u> Texas College of Emergency Physicians Annual Meeting. 2014. Galveston, TX.

Stowell JR, Vohra, TT, Luber S. <u>28-day vs Calendar Month Rotations:</u>
<u>Who Ends Up Working More?</u> American College of Emergency Physicians
Scientific Assembly. 2013. Seattle, WA.

Reviewer.

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Texas College of Emergency Physicians Annual Meeting. 2013. Frisco, TX.

Stowell JR, Kessler R, Lotz S. <u>Ultrasonographic Assessment of Shock.</u> <u>Critical Decisions in Emergency Medicine</u>. Volume 31. Number 8. Aug 2017 Edition.

Lewiss RE, Strony RJ, Jones RA. <u>American College of Emergency Physicians: Practical Guide to Critical Ultrasound.</u> Chapter 10: Society Guidelines. iBook.

<u>Ultrasound Guidelines: Emergency, Point-of-Care and Clinical Ultrasound Guidelines in Medicine.</u> American College of Emergency Medicine Guideline Update. Contributor. *Ann Emerg Med*. 2017 May. rrPMID: 28442101

Waterbrook AL, Adhikari S, Stolz U, Adrion C. <u>The accuracy of point-of-care ultrasound to diagnose long bone fractures in the ED.</u> Am J Emerg Med. 2013 Sep;31(9):1352-6. PMID: 23891601

2015-Present: Journal of Emergency Medicine

Stowell, JR, Fox JC, Friedman L. <u>Ultrasound Job & Contract-Protected Time/Salary Negotiation: Pearls and Pitfalls How to Be a Successful Ultrasound Director during Your First Year out of Fellowship.</u> Southwest Ultrasound Fellows Regional (SURF) Conference. Sept. 7<sup>th</sup>, 2019. Tucson Az.

Stowell JR. <u>Resident Conference Curriculum 2017-2018: In-Training Exam Review.</u> Feb 21<sup>st</sup>, 2018. Maricopa Integrated Healthcare Center.

Phoenix, Arizona.

Stowell JR. <u>Resident Conference Curriculum 2017-2018: In-Training Exam Review.</u> Spring, 2018. Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR, Katz E, Hern G. <u>Topics in Emergency Medicine</u>. Feb 5-9, 2018. Northwest Anesthesia Seminars. Telluride, Colorado.

Stowell JR. <u>Resident Conference Curriculum 2017-2018: Operational Update SEP-1.</u> Spring, 2018. Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR. <u>Field Ultrasound.</u> Extreme Medicine for EMS. Trauma Conference. Oct 6<sup>th</sup>, 2017. Maricopa Integrated Healthcare Center. Casa Grande. Arizona.

Stowell JR. <u>Pre-Hospital Ultrasound.</u> Paramedic CE Conference. Aug 14-15<sup>th</sup>, 2017. Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR, Katz E, Dorfman M. <u>Topics in Emergency Medicine.</u> May 1-4, 2017. Northwest Anesthesia Seminars. Monterey, California.

Stowell JR. <u>Just in Time…MARCH in for Trauma Updates! Pre-Hospital</u>
<u>Ultrasound: Life Saving Technology.</u> Mar 6<sup>th</sup>, 2017. International
ions Trauma Lift Support, Arizona Chapter. Laughlin, NV.

Demonstrations

Stowell JR. <u>Resident Conference Curriculum 2016-2017:</u>
<u>Gastrointestinal In-Service Review.</u> Spring, 2017. Maricopa
Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR. <u>Resident Conference Curriculum 2016-2017:</u>
<u>Neuro/Environmental/Skin In-Service Review.</u> Spring, 2017. Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR. <u>MIHS Adult Emergency Department Administration: APP Staffing Update.</u> Dec 14<sup>th</sup>, 2016. Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR. <u>Resident Conference Curriculum 2016-2017: Journal Club Ureterolithiasis and Ultrasound.</u> Sept 21<sup>st</sup>, 2016 Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR. Resident Conference Curriculum 2016-Present: Ultrasound

Curriculum. Fall, 2015-Present Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR. Resident Conference Curriculum 2015-2016: Epistaxis Flipped Classroom. Aug 12th, 2015. Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR. Right Upper Quadrant Ultrasound: Gallbladder. February 23rd, 2015. The Rocky Mountain Winter Conference. Breckenridge, Colorado.

Stowell JR, Kessler R, Quan G. Critical Care Ultrasound: Advanced Resuscitation and Procedures. February 20th, 2015. The University of Colorado, Pulmonary Critical Care Fellowship Conference. Aurora, Colorado.

Stowell, JR. AAEM 26th Annual Scientific Assembly: Pre-Conference Advanced Ultrasound Course. Hands on stations instructor. Phoenix, Arizona, Cancelled due to COVID-19 Pandemic.

Stowell JR, Rigdon D, Mitchell C. Ultrasound Bootcamp. Jan 29<sup>th</sup>, 2018. Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR. Abrazo-Team Health Emergency Ultrasound Training. Dec 14<sup>th</sup>, 2016-Present. Abrazo Central, West, Arrowhead, Scottsdale.

Wu T, Stowell JR, Grimsman J, Rashke R, Multidisciplinary Point of Care Ultrasound Course. Instructor. October 1st - 2nd, 2016. Phoenix,

Arizona.

Stowell JR. Emergency Medicine Clerkship 2016-Present: Ultrasound Presentation. May 2016-Present. Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Stowell JR. Ultrasound Conference: Faculty Credentialing. Fall, 2015. Maricopa Integrated Healthcare Center. Phoenix, Arizona.

Kendall JL, Stowell JR, Et al. Venous US in the ED: DVT Skills Lab. October 26th, 2015. The American College of Emergency Physicians 2015 Scientific Assembly. Boston, Massachusetts.

Stowell JR, Mitchell C, Et al. Northern Arizona University: Physician Assistant Procedure Bootcamp. Guest Lecturer. August 24<sup>th</sup> and 25<sup>th</sup>, 2015. Phoenix, Arizona.

Media

Wu F, Sergel M, Stowell JR, Et al. <u>Phase 2 (Procedures and Skills)</u> <u>ACEP and SEMPA EM Academy.</u> Ultrasound Instructor, June 4<sup>th</sup>, 2015. 2015. Denver, Colorado.

Lynch L, Chang LH, Stowell JR, Et al. <u>The American Thoracic Society: Resident Boot Camp</u>. Ultrasound Instructor, May 16<sup>th</sup>, 2015. 2015 International Conference. Denver, Colorado.

Kendall JL, Hafez N, Stowell JR, Et al. <u>Ultrasound Course.</u> Instructor, February 23<sup>rd</sup>, 2015. The Rocky Mountain Winter Conference. Breckenridge, Colorado.

Kendall JL, Brown V, Stowell JR, Et al. <u>Human Anatomy Course.</u> Fall 2015. Instructor. The University of Colorado, School of Medicine. Aurora, CO.

Levitan R, Sloas H, Stowell JR. Et al. <u>Difficult Airway Course - How and when to use a fiberoptic oral or nasal pharyngoscope for intubation</u>. 2013 Texas College of Emergency Physicians Annual Meeting. Frisco, TX.

Press GM, Miller SK, Cole R, Stowell JR. <u>UT Emergency Medicine</u>
<u>Faculty Ultrasound Course.</u> 2012. Instructor: Peripheral US guided
IV placement. UT Health Science Center

The difference between heat exhaustion and heat stroke. Fox 10 News. July 23<sup>rd</sup>, 2018.

Life Flight: Trauma Center Houston. Reality TV Series. 2015.

#### PROFESSIONAL MEMBERSHIPS

#### 2011-Present

Society of Clinical Ultrasound Fellowships

American College of Emergency Physicians – Observation Medicine Section

American College of Emergency Physicians – Medical Director Section Academy of Emergency Ultrasound (AEUS)

American College of Emergency Physicians (ACEP)

Society for Academic Emergency Medicine (SAEM)

Arizona College of Emergency Physicians (AzCEP)

Texas College of Emergency Physicians (TCEP) (previous)

Emergency Medicine Resident's Association (EMRA) (previous)

American College of Emergency Physicians – Ultrasound Section

American College of Emergency Physicians – Critical Care Section (previous)

2020	Journal of Emergency Medicine's top 20 reviewers for 2019 Journal of Emergency Medicine				
2020	Research Award Nominee: Best Retrospective Research Academy of Emergency Ultrasound Evaluation of Gender Differences in Ultrasound Milestone Evaluations During Emergency Medicine Residency Training: A Multicenter Study.				
2020	Research Award Nominee: Best Research on Medical Education and Training Academy of Emergency Ultrasound Evaluation of a novel curriculum on point-of-care ultrasound				
2020	competency and confidence.				
2018	Certificate of Reviewing Journal of Emergency Medicine				
2018	Fellow, American College of Emergency Physicians American College of Emergency Physicians, Scientific Assembly Oct 2018. San Diego, Ca.				
2018	STR Carry-Over Grant Grant funded program aimed at connecting emergency department patients with high risk of opiate abuse and addiction with community rehabilitation centers Funding: \$394,504				
2018	Research Award Nominee: Cross Sectional Studies Academy of Emergency Ultrasound Critical care ultrasound: A national survey across specialties				
2017	Research Award Nominee: Cross Sectional Studies Academy of Emergency Ultrasound Evaluation of an innovative hands-on anatomy-centered ultrasound curriculum to supplement graduate gross anatomy education				
2017	Certificate of Reviewing Journal of Emergency Medicine				
	The Maricopa Emergency Medicine Impact Award				

AWARDS & HONORS

\_\_\_\_\_\_ Stowell \_\_\_\_\_\_\_13

2016	Department of Emergency Medicine Maricopa Integrated Health System, Phoenix, Arizona
2016	Certificate of Outstanding Contribution in Reviewing Journal of Emergency Medicine
2014	The John Sarko Excellence in Teaching Award Department of Emergency Medicine Maricopa Integrated Health System, Phoenix, Arizona
2014	Resident of the Year Department of Emergency Medicine The University of Texas College of Medicine – Houston
2013	Resident Research Day, Third Place The University of Texas College of Medicine – Houston
2011	Sim-Wars Championship Team Texas College of Emergency Physicians Annual Meeting. 2013.
2009	Outstanding Student Award Neurology Clerkship The University of Arizona, College of Medicine, Tucson, AZ
2007-2010	The Commitment to Underserved Populations: Leadership Award The University of Arizona, College of Medicine, Tucson, AZ
	Adelante Scholarship The University of Arizona, College of Medicine, Tucson, AZ
INSTITUTIONAL COM	MMITTEE SERVICE AND EXPERIENCE
2020-Present	Valleywise Health Inpatient Care & Safety Committee Committee Member
2020-Present	Valleywise Health Credentialing Committee Committee Vice Chair
2019-2020	Valleywise Health Clinical Care Committee Committee Member
2019-2020	Valleywise Health Tissue and Transfusion Committee Committee Member
2017-Present	Valleywise Health Critical Care Collaborative Committee Committee Member

2017-2019	Valleywise Health Sepsis Committee Committee Member				
2017-Present	Valleywise Health Point-Of-Care Ultrasound Committee Committee Member				
2016-Present	Valleywise Health Emergency Department Peer Review Committee Committee Member				
2016-2019	Valleywise Health Credentialing Committee Committee Member				
2015-2016	Valleywise Health ED Pre-Diversion Committee Co-Chair Development of ED Pre-Diversion protocol				
2013-2014	MHH ED Trauma Committee Member				
2013-2014	<b>UT Houston: House Staff Association</b> Department of Emergency Medicine Representative				
2013-2014	UT Houston Emergency Medicine: Resident Research Committee Founding Member				
2012-2014	Quality Assurance Committee UT Houston Department of Emergency Medicine				
2012-2014	MHH ED Stroke Thrombolysis Committee Member				
2012-2014	<b>UT Emergency Medicine Quarterly</b> Founding Member, Chief Editor				
2012-2013	Ultrasound Vice Chief Emergency Medicine, UT Health Science Center, Houston, TX Memorial Hermann Hospital – Texas Medical Center, Houston, TX Lyndon B. Johnson General Hospital, Houston, TX				
LOCAL AND NATIONA	AL SERVICE AND EXPERIENCE				
2020-Present	Society of Clinical Ultrasound Fellowships Director at Large Board of Directors				

2017-Present	<b>Ultrasound Section, Critical Care Subcommittee</b> Committee Member America College of Emergency Physicians
2016	Medical Education Leadership Development Program Graduate
2014-2015	Fellow Representative America College of Emergency Physicians, Ultrasound Section, Critical Care Subcommittee
2007-2011	The University of Arizona, College of Medicine, Tucson, AZ Treasurer of Emergency Medicine Interest Group Member of Emergency Medicine Interest Group Participant in Orthopedics Interest Group Participant in Medical Spanish Course Shubitz Refugee Clinic: Student in Charge Commitment to Underserved Populations program: Student Volunteer The Flying Samaritans
LANGUAGES	

English, Spanish – Fluent written and spoken proficiency



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 1.e.i.

Care Reimagined Capital 480-90-18-012-4.06

#### Cynthia Cornejo

From: Compliance 360 < msgsystem@compliance360.com >

Friday, October 9, 2020 6:37 AM Sent:

To: Melanie Talbot

Subject: Contract Approval Request: Amendment#27 GMP number 4.06 Kitchell Contractors Inc of Arizona

#### Message Information

From Purves, Steve

To Talbot, Melanie;

Subject Contract Approval Request: Amendment#27 GMP number 4.06 Kitchell

Contractors Inc of Arizona

Additional Indicate whether you approve or reject by clicking the Approve or Reject

Information button.

Add comments as necessary.

#### **Approve/Reject Contract**

**Click here** to approve or reject the Contract.

#### **Contract Information**

Division Prop 480

Folder Amendments

Status Pending Approval

Title Amendment#27 GMP number 4.06

Contract Identifier Board - Amendment

MIHS Contract 480-90-18-012-4.06 Number

Primary Responsible Melton, Christopher C.

Departments

Product/Service Amendment#27, GMP number 4.06 with Kitchell Construction re: Roosevelt

**Description Acute Care Tower** 

Action/Background Approve Amendment#27 between Kitchell Constructions and Maricopa

County Special Health Care District dba Valleywise Health for GMP number 4.06 under contract number 480-90-18-012 for \$83,924,821. This GMP will provide funding for final core and shell scope inclusive of mechanical, electrical, framing drywall, roofing, rooftop helipad, pneumatic tube, door

frames and envelope finishes.

Project: Roosevelt Acute Care Tower

Current Acute Care Tower Series 4 Contract: \$99,413,068

New GMP 4.06 (Amendment#27): \$83,924,821

Revised Acute Care Series 4 Contract Value: \$183,337,889

480-90-18-012 Aggregate Contract Value: \$257,582,792

The anticipated expenditure has been budgeted under Project#A1440,

CER#19-947.

This Amendment#27 is sponsored by Dr. Michael White, EVP & Chief Clinical Officer.

Evaluation Process This GMP scope and cost was evaluated by Vanir Construction Management and the IPMO, and was found to be fair and reasonable.

Notes

Category

Effective Date

**Expiration Date** 

Annual Value \$83,924,821.00

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor Kitchell Contractors Inc of Arizona

#### Responses

Member Name	Status	Comments
Melton, Christopher C.	Approved	
Nelson, Mark E.	Approved	
Demos, Martin C.	Approved	
White, Michael	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 1.f.i.

Capital
CER #21-403

#### **Cynthia Cornejo**

From: Compliance 360 < msgsystem@compliance360.com >

Friday, September 18, 2020 5:51 AM Sent:

Melanie Talbot To:

**Subject:** Contract Approval Request: Zoll Defibrillators

#### Message Information

From Hall, Charles To Talbot, Melanie;

Subject Contract Approval Request: Zoll Defibrillators

Additional Indicate whether you approve or reject by clicking the Approve or Reject Information button.

Add comments as necessary.

#### Approve/Reject Contract

**<u>Click here</u>** to approve or reject the Contract.

#### **Attachments**

Name	DescriptionType	Current File
403 Cover Memo-ZOLL Defibs.doc	File	403 Cover Memo-ZOLL Defibs.doc
403 QUOTE Valleywise Health 348499Verspdf		403 QUOTE Valleywise Health 348499Verspdf
Zoll Defibrillators	Contrac	t CER403.xlsx

#### **Contract Information**

**Division Capital Division** 

Folder ---

Status Pending Approval Title Zoll Defibrillators

Contract Identifier Budgeted

MIHS Contract Number 21-403

Primary Responsible Hall, Mr. Charles E. Party

Departments Health Technology Management

Product/Service

Description

Action/Background

**Evaluation Process** 

Notes \*\*\*Non-Bond Capital Funding.......Clinical Funded See CER/Quote/Memo

D

Department of Healthcare Technology Management 2601 E. Roosevelt Phoenix, AZ 85008

Phone: (602) 344-5486

DATE: September 17, 2020

TO:

CC:

Claire Agnew, Interim CFO

Dr. Michael White, CCO Sherry Stotler, CNO Kelly Summers, CIO

FROM: Sean Pardo, Director of HTM

SUBJECT: ZOLL Defibrillators

#### 1. Background / Problem Statement:

Half of the current fleet of Medtronic Defibrillators are nearing end of life and need to be replaced. The Capital Committee has approved purchasing a new fleet over three consecutive fiscal years at approx., \$311K per year. Through negotiations with Zoll we can acquire the entire fleet up front and pay for them over the three-year period with zero interest.

#### 2. Benefits / Risk Avoidance:

The following list is the benefits of procuring the new Zoll Defibs

- Equips Valleywise Health with the newest technology available.
- Standardizes the organization to one Defib type.
- · Avoids having end of life equipment in use.

#### 3. Solution Options:

The following options are available:

- 1. Order the Defibrillators
- 2. Do nothing
- 1. Place order:
- a. Provides the entire Hospital with new Defibs
- b. Reduces downtime of defibs due to age and parts availability
- 2. Do nothing will result in the following:
- a. Puts us at risk of not having defibs available when parts become scarce.

4. Recommendation:

The recommendation is to acquire the Defibrillators.

- 5. Financial Assumptions:
- Funds Requested: \$311,000 annually for three years
- On-going maintenance will be covered by HTM.

Category

Effective Date

**Expiration Date** 

Annual Value \$933,000.00

Expense/Revenue

Budgeted Travel Type Yes

Procurement Number

Primary Vendor

#### Responses

Member Name	Status	Comments
Pardo, Sean P.	Approved	
Melton, Christopher C.	Approved	Approved. Selected vendor is accessed through our GPO partnership.
Williams, Gail A.	Approved	Approved.
Madhavan, Lalitha	Approved	
Summers, Kelly R.	Approved	
Stotler, Sherry A.	Approved	
Detzel, Jo-El M.	Approved	
White, Michael	Approved	
Landas, Lito S.	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	
Buschbacher, Pamela E.	Current	
Deal, Sophia G.	Approved	



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 1.f.ii.

Capital
CER #21-301

#### **Cynthia Cornejo**

**From:** Compliance 360 < msgsystem@compliance360.com>

**Sent:** Wednesday, October 14, 2020 8:36 AM

**To:** Melanie Talbot

**Subject:** Contract Approval Request: Maryvale Elevator Modernization

#### **Message Information**

From <u>Purves</u>, <u>Steve</u>
To <u>Talbot</u>, <u>Melanie</u>;

Subject Contract Approval Request: Maryvale Elevator Modernization
Additional Indicate whether you approve or reject by clicking the Approve or Reject
Information button.

Add comments as necessary.

#### **Approve/Reject Contract**

**<u>Click here</u>** to approve or reject the Contract.

#### **Attachments**

Name	DescriptionType	Current File
301 Investment Memo - MVLE Elevator Modernization.docx	File	301 Investment Memo - MVLE Elevator Modernization.docx
301 Quote Adams and Wendt - Maryvale Elevator Asbestos Inspection.pdf	File	301 Quote Adams and Wendt - Maryvale Elevator Asbestos Inspection.pdf
301 Quote Lanmor - Maryvale Elevator Reader Removal and Install.pdf	File	301 Quote Lanmor - Maryvale Elevator Reader Removal and Install.pdf
301 QUOTE Lerch Bates 90-20-114-1 Vertical Transportation Modernization Consulting Services (FINAL).	File	301 QUOTE Lerch Bates 90-20-114-1 Vertical Transportation Modernization Consulting Services (FINAL).pdf
301 Quote OTIS - Maryvale Elevator Modernization.pdf	File	301 Quote OTIS - Maryvale Elevator Modernization.pdf
Maryvale Elevator Modernization	Contract	

#### **Contract Information**

**Division Capital Division** 

Folder ---

Status Pending Approval

Title Maryvale Elevator Modernization

Contract Identifier Budgeted

MIHS Contract Number 21-301 Primary Responsible Hall, Mr. Charles E.

Departments Maryvale Hospital - Maintenance

Product/Service Description Action/Background Evaluation Process

Notes CER Justification:

Non-BOND Capital Funded - - - Targeted Investment Project and Clinical Bucket

Funds Requested: \$1,993,654.00 FY21 Clinical Capital Funds \$750,000.00 TIP Funds \$1,243,654.00

See CER/Quotes/Memo

Maricopa County Special Health Care District

2601 E. Roosevelt Phoenix, AZ 85008 Phone: (480) 344-2188

DATE: September 21, 2020

TO:

Dr. Michael White, EVP and CMO Claire Agnew, Sr VP Financial Services

FROM: Jo-el Detzel, VP Ancillary & Support Services

SUBJECT: Valleywise Behavioral Health Center - Maryvale - Elevator Modernization

I am submitting the above-mentioned project for your approval. The details regarding the project background and justification are provided below.

#### 1. Background / Problem Statement:

At Maryvale, the main elevators 1 through 6 are original equipment dating back to 1975. Elevators and associated equipment are end of life, resulting in frequent break down and entrapment of patients and staff on a regular basis. Due to the age of equipment, associated systems and damage from major construction use, these elevators are unreliable and unsafe.

#### 2. Benefits / Risk Avoidance:

Complete a full modernization of elevators and associated equipment and systems.

- Eliminate entrapments
- Increase reliability
- Enhance staff and patient movement efficiencies
- · Minimize risk to patient and staff safety

#### 3. Solution Options:

The following options are available:

- 1. Full elevator modernization
- 2. Do nothing.
- 1. Move forward with these improvements:
- a. This will ensure reliability, functionality and proper controlled access to the facility and patient care areas.
- b. Provide compliance with ADA access and reliability requirements.
- 2. Do nothing will result in the following:
- a. Unavoidable mechanical failures and downtime.
- b. Increased potential for patient and staff injury.
- c. Increase potential disruption to operations and critical patient care.
- 4. Recommendation:

Complete a full modernization upgrade for elevators 1 through 6.

5. Financial Assumptions:

Funds Requested: \$1,993,654FY21 Capital Funds: \$750,000

• TIP Funds: \$1,243,654

Category

**Effective Date** 

**Expiration Date** 

Annual Value \$1,993,654.00

Expense/Revenue

Budgeted Travel Type Yes

Procurement Number

Primary Vendor

#### Responses

Member Name	Status	Comments
Madhavan, Lalitha	Approved	
Melton, Christopher C.	Approved	
Williams, Gail A.	Approved	Approved
Pardo, Sean P.	Approved	
Detzel, Jo-El M.	Approved	
White, Michael	Approved	
Landas, Lito S.	Approved	
Agnew, Claire F.	Approved	
Purves, Steve A.	Approved	
Talbot, Melanie L.	Current	



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 2.
No Handout

COVID-19



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 3.

National Patient Safety Goals and Focuses for Patient Safety



## National Patient Safety Goals and Patient Safety Focus

Crystal Garcia, RN VP of Specialty Services, Quality and Safety

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### National Patient Safety Goals (NPSGs) 2020

The National Patient Safety Goals is a quality and patient safety improvement program established by the Joint Commission in 2003. The NPSGs were established to help accredited organizations address specific areas of concern regarding patient safety.

The purpose of the National Patient Safety Goals is to improve patient safety. The goals focus on problems in health care safety and how to solve them.

### National Patient Safety Goals (NPSGs) 2020

NPSG	GOAL	MEETS	OPPORTUNITY	PLAN OF ACTION
Identify patients correctly	Use at least two ways to identify patients. For example,	YES		
NPSG.01.01.01	use the patient's name and date of birth. This is done to			
	make sure that each patient gets the correct medicine			
	and treatment.		Policy does not require	Revise policy # 37776 to
	Label containers used for blood and other specimens in	PARTIAL	labeling of specimens in	include specimen labeling in
	the presence of the patient.		presence of patient	presence of patient
	Use distince methods of identification for newborn	YES		
	patients.			
Improve staff communication	Get important test results to the right staff person on	YES	No current opportunities	
NPSG.02.03.01	time	TES	identified	N/A
Use medicines safely				
NPSG.03.04.01	Before a procedure, label medicines that are not	YES		
	labeled. For example, medicines in syringes, cups and			
	basins. Do this in the area where medicines and			
	supplies are set up.		Policy # 01023 references	Revise policy # 01023 to
NPSG.03.05.01	Take extra care with patients who take medicines to	PARTIAL	2014 NPSG and was last	include all elements of
	thin their blood.		revised 5/2018; 2 elements	NPSG.03.05.01
NPSG.03.06.01			of performance missing	
	Record and pass along correct information about a	PARTIAL	Policy # 31260 references	Revise policy # 31260 to
	patient's medicines. Find out what medicines the		does not mention NPSG;	include all elements of
	patient is taking. Compare those medicines to new		missing some elements of	NPSG.03.06.01
	medicines given to the patient. Give the patient written		performance	
	information about the medicines they need to take.			
	Tell the patient it is important to bring their up-to-date			
	list of medicines every time they visit a doctor.			3

### National Patient Safety Goals (NPSGs) 2020

NPSG	GOAL	MEETS	OPPORTUNITY	PLAN OF ACTION
Use alarms safely	Make improvements to ensure that alarms on medical	YES	No current opportunities	
NPSG.06.01.01	equipment are heard and responded to on time.	YES	identified	N/A
Prevent infection	Use the hand cleaning guidelines from the Centers for	YES		
NPSG.07.01.01	Disease Control and Prevention or the World Health			
	Organization.			
	Set goals for improving hand cleaning.	YES	No current opportunities	
	Use the goals to improve hand cleaning.	YES	identified	N/A
Identify patient safety risks		YES	No current opportunities	
NPSG.15.01.01	Reduce the risk for suicide.	YES	identified	N/A
Prevent mistakes in surgery				
UP.01.01.01	Make sure that the correct surgery is done on the	YES		
	correct patient and at the correct place on the patient's			
	body.			
UP.01.02.01	Mark the correct place on the patient's body where the	YES		
	surgery is to be done.			
UP.01.03.01	Pause before the surgery to make sure that a mistake is	YES	No current opportunities	
	not being made		identified	N/A

### Patient Safety Focus FY2021

### **Patient Safety Organization (PSO):**

Pursuant to the Patient Safety and Quality Improvement Act of 2005, Valleywise Health submits event data to ECRI. ECRI will engage in:

- Activities to improve patient safety and the quality of health care delivery,
- Collection and analysis of patient safety work product,
- Development and dissemination of information aimed at improving patient safety,
- Utilization of patient safety work product to encourage a culture of safety and to provide feedback and assistance toward minimizing patient risk, and
- Other activities related to the operation of a patient safety evaluation system and to providing feedback to participants in a patient safety evaluation system.

### Patient Safety Indicators FY 2021

- PSI-03 Pressure Ulcer Rate
- PSI-04 Death Among Surgical Patients with serious treatable complications
- PSI-06 Iatrogenic Pneumothorax Rate
- PSI-08 Post-Op Hip Fracture Rate
- PSI-09 Peri-Op Hemorrhage or Hematoma Rate
- PSI-10 Post-Op Physiologic and Metabolic Derangement Rate
- PSI-11 Post-Op Respiratory Failure Rate
- PSI-12 Post-Op Pulmonary Embolism (PE) or Deep Vein Thrombosis (DVT)
- PSI-13 Post-Op Sepsis Rate
- PSI-14 Post-Op wound dehiscence
- PSI-15 Accidental puncture or laceration
- PSI-90
- Healthcare-Associated Pressure Ulcers
- Falls with or without injury
- Patient identification (2 patient identifiers)
- Pain reassessment
- Medication dosing times/medication safety
- Restraint use
- Adverse Drug Events
- Serious Reportable Events
- Harm Events/Adverse Events/patient safety events/near misses
- Environmental Risk Assessments (ligature risk)

### Patient Safety Indicators FY 2021

### Actions:

- Monthly meetings to discuss the Patient Safety Indicators not meeting benchmarks.
- National Patient Safety Goals reviewed during rounds.
- Action Plans developed and implemented with leaders of the area.
- Failure Mode Evaluation Analysis conducted annually on a potentially near miss process.



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 4.

Financial and Statistical Information
September 2020





Valleywise Health Comprehensive Health Center – Peoria (Pictured)

# Financial and Statistical Information

for the month ending September 30, 2020



#### **Financial Highlights – September 2020**

Due to the COVID-19 pandemic, Patient Volume, Operating Revenues and Operating Expenses continue to be impacted during the month of September 2020.

#### **Patient Activity**

Total admissions in September were 11.0% below budget, and 1.9% lower than the same period last year. Year-to-date total admissions were 5.1% below budget and 5.5% lower than YTD September 2019. Inpatient acute admissions for the month were 20.0% below budget and 11.2% lower than last September 2019. Behavioral health admissions were 12.7% over budget for the month and 21.6% higher than last September 2019.

Emergency department visits were 28.8% below budget and 34.2% lower than last September 2019. Year-to-date visits were 21.6% below budget and 31.8% lower than YTD September 2019.

Ambulatory visits were 7.1% over budget for the month and 7.3% higher than last September 2019. Year-to-date visits were 18.8% over budget and almost the same (105,529 compared to 105,499) as September 2019 year-to-date.

#### **Operating Revenue**

Net patient service revenues were 7.1% over budget for the month and were 5.5% over budget on a year-to-date basis. Other operating revenue were 2.3% below budget for the month, primarily in 340B, cafeteria sales, and trauma services revenue subsidy. Year-to-date total operating revenues were 4.0% over budget primarily in net patient service revenues.

#### **Operating Expense**

Total operating expenses were 3.1% over budget for September. Labor expense, which includes salaries, benefits and contract labor, were 5.1% over budget. Majority of negative variances in contract labor were in information technology and nursing, especially the ICU/IDU units, respiratory therapy and inpatient behavioral health units. Net medical service fees were 1.9% over budget primarily due to lower collections. Supplies were 9.7% below budget primarily in pharmaceuticals and implants. Purchased services were 2.4% below budget primarily in legal fees, other professional services and outside laboratory services. Lastly, all other expenses excluding depreciation were below budget for the month primarily in repair and maintenance, utilities and other operating expenses. Year-to-date operating expenses were 1.8% over budget, primarily related to labor expense.

<u>Non-Operating Revenue (Expense)</u> – In total, net non-operating revenues and expenses were 7.5% over budget for the month of September partially due to receipt of CARES Act related grants and subsidies. Year-to-date, net non-operating revenues and expenses were 16.7% over budget.



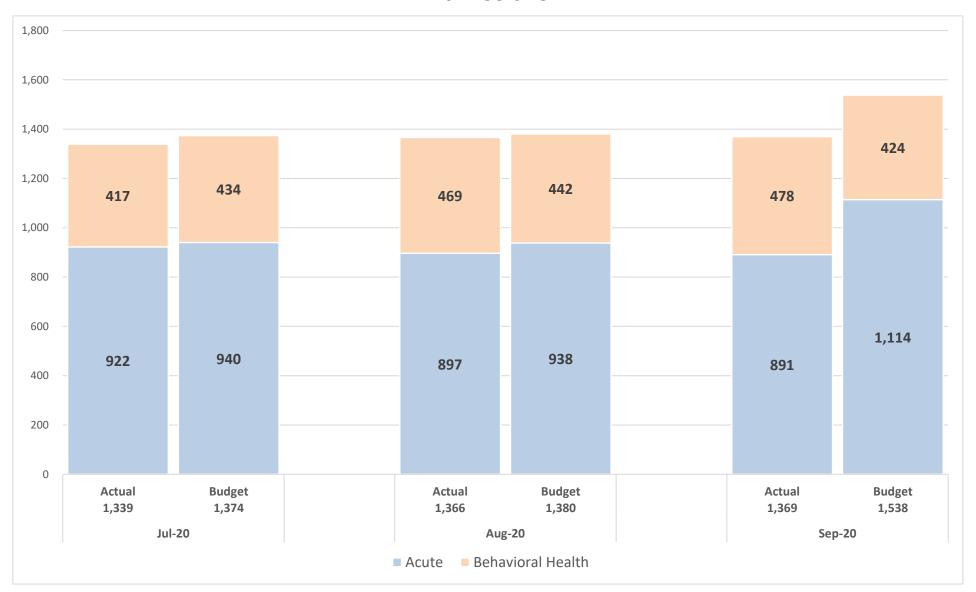
#### **Cash and Cash Equivalents (including investments)**

		September 2020	<u>June 2020</u>
Operating / Ge Bond related — Total cash and		\$255.1M <u>237.2M</u> \$492.3M	\$255.1M <u>315.7M</u> \$570.8M
Select Ratios		FY2021 YTD as of September	2018 Moody's "A3" Medians
Liquidity			
	Days cash on hand (unrestricted) Days in Accounts Receivable Current Ratio (excludes Bond funds)	150.8 69.5 3.0	183.5 47.0 1.8
		FY2 YTD Actual	021 YTD Budget
Profitability	Operating Margin (%) Excess Margin – normalized (%)	(16.7) (0.9)	(19.3) (6.5)
Productivity	FTE/AOB w/o Residents	5.14	4.40

If you have any questions, please do not hesitate to contact Melanie Talbot or Claire Agnew, Interim CFO.

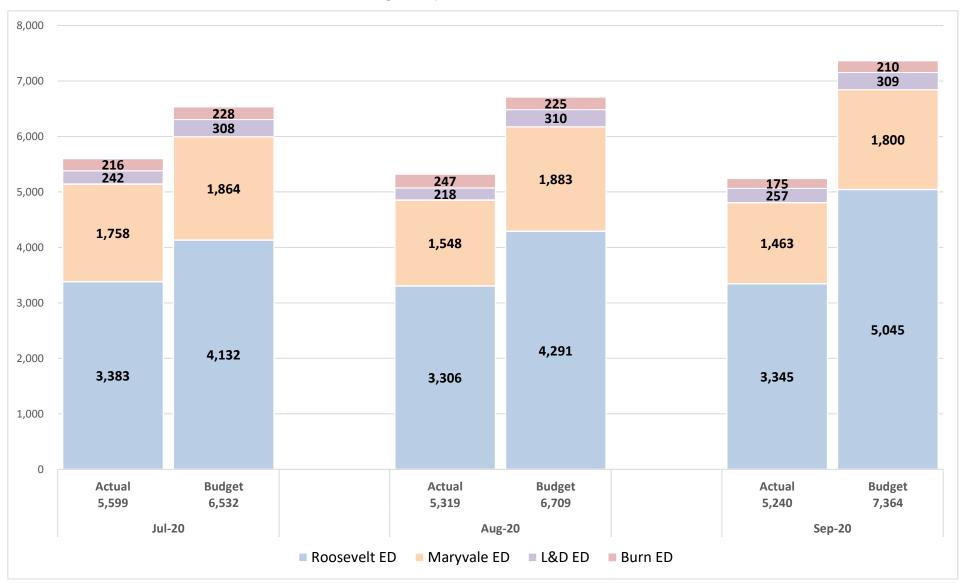


#### Fiscal Year 2021 Admissions



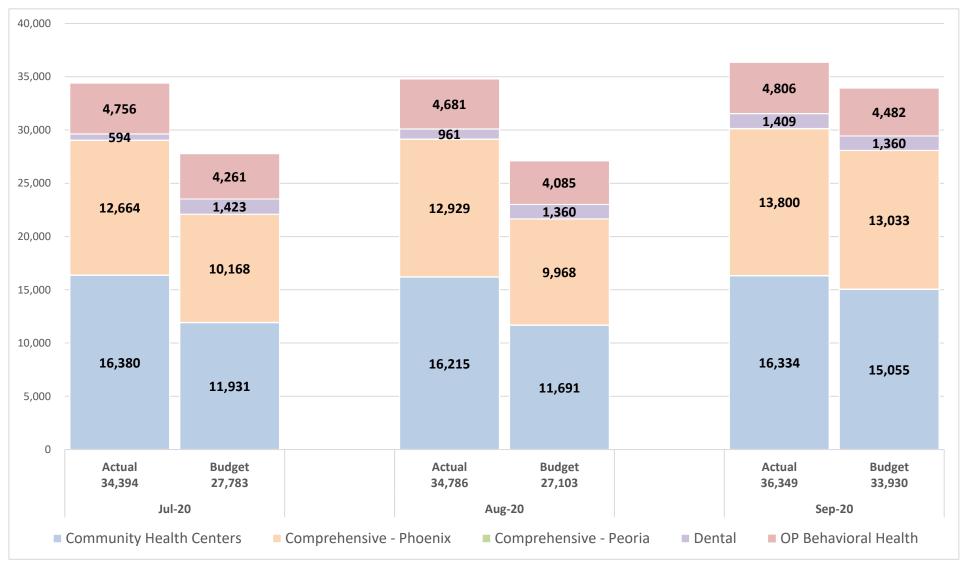


#### Fiscal Year 2021 Emergency Department Visits





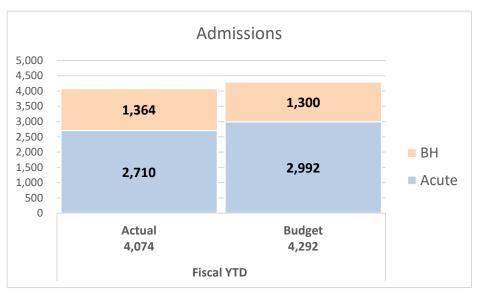
#### Fiscal Year 2021 Ambulatory Visits

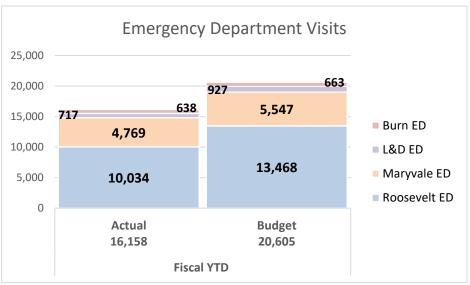


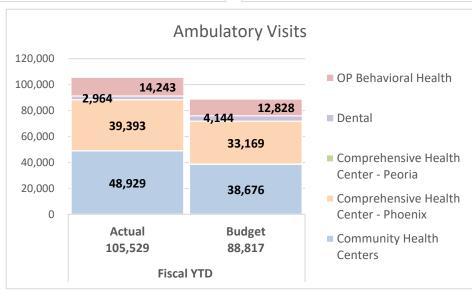
\* Includes Telehealth visits -- 19,061 (July 2020) || 16,365 (August 2020) || 13,410 (September 2020)



#### Fiscal Year 2021 Year-to-Date Volume Summary



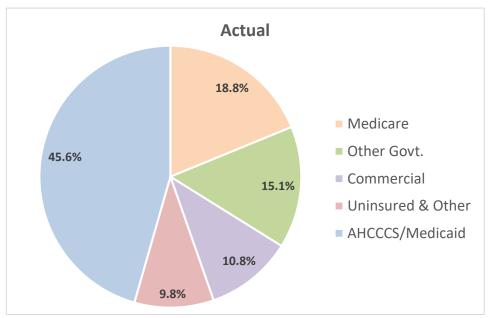


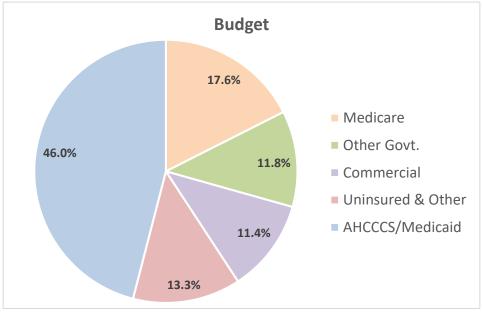


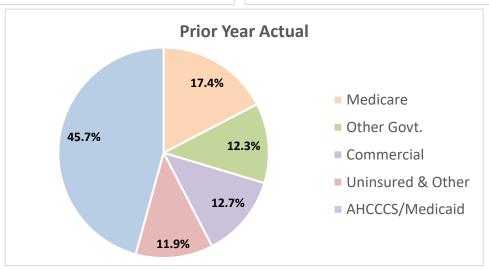
<sup>\*</sup> Includes 48,836 Telehealth visits in FY 2021



Fiscal Year 2021
Patient Revenue Source by Gross Revenue





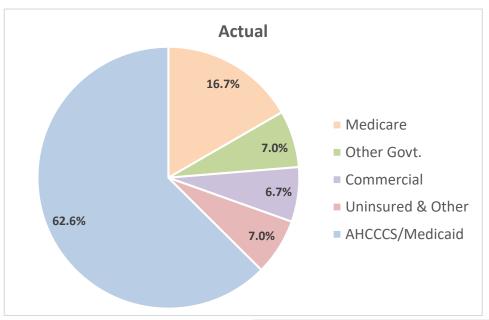


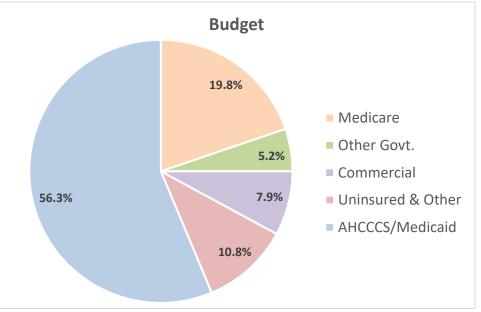
Actual Gross Revenue is YTD as of September 30, 2020

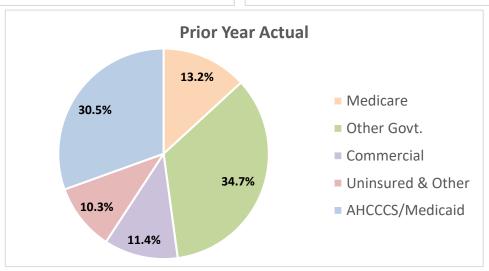
Prior Year Gross Revenue is all of fiscal year 2020



Fiscal Year 2021
Patient Revenue Source by Gross Revenue -- Maryvale Campus







Actual Gross Revenue is YTD as of September 30, 2020

Prior Year Gross Revenue is all of fiscal year 2020



VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

**Unusual Item Report** 

For the month ending September 30, 2020

	MTD Actual
Increase (decrease) in net assets as reported	\$ 3,026,263
Unusual items:	
Valleywise Health Foundation - COVID relief \$ (200,000)	
HRSA COVID-19 related grant revenues (219,656)	
State of AZ - Surge nurses relief (Contract Labor) 532,889	
State of AZ - Surge nurses relief (Non-operating revenue) (532,889)	
	 (419,656)
Normalized increase (decrease) in net assets	\$ 2,606,607



VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
STATEMENT OF REVENUES AND EXPENSES
For the Period Ending September 30, 2020

	 Sep-20 Actual	Sep-20 Budget	Sep-20 Variance	Sep-20 % Change	Prior Year Same Month Sep-19	Prior Year Same Month Variance	Prior Year Same Month % Change
Net Patient Service Revenue	\$ 44,028,269	\$ 41,119,354	\$ 2,908,915	7.1 %	\$ 34,856,695	9,171,574	26.3 %
Other Revenue	 8,216,301	8,410,917	(194,617)	(2.3 %)	8,989,611	(773,311)	(8.6 %)
Total Operating Revenue	52,244,570	49,530,271	2,714,299	5.5 %	43,846,306	8,398,264	19.2 %
OPERATING EXPENSES							
Salaries and Wages	22,357,001	22,568,053	211,052	0.9 %	21,578,922	(778,080)	(3.6 %)
Contract Labor	2,256,581	1,311,216	(945,365)	(72.1 %)	2,346,728	90,147	3.8 %
Employee Benefits	7,459,195	6,624,943	(834,252)	(12.6 %)	6,238,874	(1,220,321)	(19.6 %)
Medical Service Fees	4,765,945	4,676,048	(89,897)	(1.9 %)	7,494,109	2,728,164	36.4 %
Supplies	7,641,804	8,458,834	817,029	9.7 %	7,111,435	(530,369)	(7.5 %)
Purchased Services	2,884,065	2,955,602	71,537	2.4 %	1,986,478	(897,587)	(45.2 %)
Repair and Maintenance	1,537,213	1,678,452	141,239	8.4 %	1,364,739	(172,475)	(12.6 %)
Utilities	776,300	830,434	54,134	6.5 %	729,066	(47,234)	(6.5 %)
Rent	560,040	489,667	(70,373)	(14.4 %)	425,837	(134,203)	(31.5 %)
Other Expenses	1,376,148	1,766,022	389,874	22.1 %	1,513,878	137,730	9.1 %
Provider Assessment	884,398	882,402	(1,995)	(0.2 %)	652,033	(232,364)	(35.6 %)
Depreciation	 3,466,052	3,350,929	(115,123)	(3.4 %)	2,755,474	(710,577)	(25.8 %)
Total Operating Expense	55,964,742	55,592,601	(372,141)	(0.7 %)	54,197,573	(1,767,169)	(3.3 %)
Operating Income (Loss)	(3,720,172)	(6,062,330)	2,342,158	38.6 %	(10,351,266)	6,631,095	64.1 %
NONOPERATING REVENUES (EXPENSES)							
NonCapital Grants	359,732	1,177,361	(817,629)	(69.4 %)	801,769	(442,037)	(55.1 %)
NonCapital Transfers from County/State	295,658	295,658	0	0.0 %	295,658	0	0.0 %
Investment Income	159,570	296,308	(136,738)	(46.1 %)	647,978	(488,409)	(75.4 %)
Other NonOperating Revenues (Expenses)	(1,071,571)	(2,734,583)	1,663,012	60.8 %	(1,765,578)	694,007	39.3 %
Interest Expense	(1,256,511)	(1,255,789)	(723)	(0.1 %)	(1,578,567)	322,055	20.4 %
Tax Levy	11,633,850	11,633,850	(0)	(0.0 %)	11,941,918	(308,069)	(2.6 %)
Total NonOperating Revenues (Expenses)	 10,120,728	9,412,806	707,922	7.5 %	10,343,180	(222,452)	(2.2 %)
Excess of Revenues over Expenses	\$ 6,400,556	\$ 3,350,476	\$ 3,050,080	91.0 %	\$ (8,087)	6,408,643	79247.5 %
Bond-Related Revenues and Expenses	 (3,374,293)	(3,485,747)	111,454	3.2 %	(4,098,031)	723,738	17.7 %
Increase in Net Assets (normalized)	\$ 3,026,263	\$ (135,271)	\$ 3,161,534	2337.2 %	\$ (4,106,118)	7,132,380	173.7 %



VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
STATEMENT OF REVENUES AND EXPENSES
For the Three Periods Ending September 30, 2020

	 Sep-20 YTD Actual	Sep-20 YTD Budget	Y	Sep-20 TD Variance	YTD Sep-20 % Change	YTD Prior Year Sep-19	YTD Prior Year Variance	YTD Prior Year % Change
Net Patient Service Revenue	\$ 119,796,415	\$ 113,564,939	\$	6,231,476	5.5 %	\$ 122,357,064	(2,560,649)	(2.1 %)
Other Revenue	 22,291,667	23,032,236		(740,569)	(3.2 %)	22,804,074	(512,406)	(2.2 %)
Total Operating Revenue	142,088,082	136,597,175		5,490,907	4.0 %	145,161,138	(3,073,055)	(2.1 %)
OPERATING EXPENSES								
Salaries and Wages	68,630,513	66,962,537		(1,667,976)	(2.5 %)	66,107,238	(2,523,275)	(3.8 %)
Contract Labor	6,338,474	4,013,555		(2,324,919)	(57.9 %)	6,737,029	398,554	5.9 %
Employee Benefits	21,513,458	19,623,787		(1,889,671)	(9.6 %)	19,127,235	(2,386,223)	(12.5 %)
Medical Service Fees	14,088,668	14,027,950		(60,718)	(0.4 %)	21,774,752	7,686,084	35.3 %
Supplies	22,406,302	23,400,940		994,638	4.3 %	24,471,480	2,065,178	8.4 %
Purchased Services	6,979,348	7,789,103		809,755	10.4 %	6,292,852	(686,496)	(10.9 %)
Repair and Maintenance	4,977,717	4,977,132		(585)	(0.0 %)	4,419,304	(558,413)	(12.6 %)
Utilities	2,174,584	2,541,199		366,616	14.4 %	2,224,262	49,678	2.2 %
Rent	1,372,559	1,479,899		107,340	7.3 %	1,485,194	112,635	7.6 %
Other Expenses	4,446,820	5,374,282		927,462	17.3 %	4,475,462	28,642	0.6 %
Provider Assessment	2,653,193	2,647,207		(5,986)	(0.2 %)	1,956,100	(697,092)	(35.6 %)
Depreciation	10,279,015	10,066,941		(212,074)	(2.1 %)	8,194,380	(2,084,635)	(25.4 %)
Total Operating Expense	165,860,651	162,904,532		(2,956,119)	(1.8 %)	167,265,288	1,404,637	0.8 %
Operating Income (Loss)	(23,772,569)	(26,307,356)		2,534,788	9.6 %	(22,104,151)	(1,668,418)	(7.5 %)
NONOPERATING REVENUES (EXPENSES)								
NonCapital Grants	1,387,931	2,959,579		(1,571,648)	(53.1 %)	2,516,378	(1,128,447)	(44.8 %)
NonCapital Transfers from County/State	886,974	886,974		0	0.0 %	886,974	0	0.0 %
Investment Income	657,084	888,924		(231,840)	(26.1 %)	2,470,793	(1,813,709)	(73.4 %)
Other NonOperating Revenues (Expenses)	(1,270,584)	(7,766,506)		6,495,922	83.6 %	(5,477,241)	4,206,657	76.8 %
Interest Expense	(3,770,462)	(3,767,366)		(3,096)	(0.1 %)	(4,736,586)	966,124	20.4 %
Tax Levy	34,901,549	34,901,549		(0)	(0.0 %)	35,825,755	(924,206)	(2.6 %)
Total NonOperating Revenues (Expenses)	 32,792,493	28,103,155		4,689,339	16.7 %	31,486,073	1,306,420	4.1 %
Excess of Revenues over Expenses	\$ 9,019,924	\$ 1,795,798	\$	7,224,126	402.3 %	\$ 9,381,923	(361,998)	(3.9 %)
Bond-Related Revenues and Expenses	 (10,294,489)	(10,457,240)		162,751	1.6 %	(12,646,510)	2,352,021	18.6 %
Increase in Net Assets (normalized)	\$ (1,274,565)	\$ (8,661,442)	\$	7,386,878	85.3 %	\$ (3,264,587)	1,990,023	61.0 %



## VALLEYWISE HEALTH (COMBINED CARE SYSTEM) STATEMENT OF NET POSITION September 30, 2020

	9/30/2020	6/30/2020
ASSETS		
Current Assets		
Cash and Cash Equivalents		
Cash - Care System	\$ 204,758,921	\$ 205,075,042
Short-Term Investment - Care System	50,311,464	50,011,509
Cash and Short-Term Investment	255,070,385	255,086,550
Cash - Bond	237,252,191	245,576,963
Short-Term Investment - Bond	0	70,139,779
Cash and Short-Term Investment - Bond	237,252,191	315,716,742
Total Cash and Cash Equivalents	492,322,576	570,803,292
Patient A/R, Net of Allowances	79,936,378	91,434,976
Other Receivables and Prepaid Items	41,232,415	34,075,796
Estimated Amounts Due from Third-Party Payors	16,210,381	10,502,569
Due from Related Parties	28,433,542	1,005,147
Total Current Assets	658,135,291	707,821,781
Capital Assets, Net	514,559,704	488,046,464
Other Assets		
Total Other Assets	0	0
Total Assets	1,172,694,996	1,195,868,245
Deferred Outflows	65,048,262	65,048,262
Total Assets and Deferred Outflows	\$ 1,237,743,258	\$ 1,260,916,507



## VALLEYWISE HEALTH (COMBINED CARE SYSTEM) STATEMENT OF NET POSITION September 30, 2020

	9	/30/2020	6/30		
LIABILITIES AND NET POSITION					
Current Liabilities					
Current Maturities of Long-Term Debt	\$ 37	,933,690	\$ 41	1,032,266	
Accounts Payable	27	,668,319	32	2,494,082	
Accrued Payroll and Expenses	34	,678,067	31	L,942,848	
Medical Claims Payable	16	,305,430	15	5,824,372	
Due to Related Parties		0	5	5,222,959	
Other Current Liabilities	59	,167,459	47	7,635,142	
Total Current Liabilities	175	,752,966	174	1,151,668	
Long-Term Debt					
Bonds Payable	429	,376,340	463	3,170,813	
Total Long-Term Debt	429	,376,340	463	3,170,813	
Long-Term Liabilities	300	,585,929	300	),585,929	
Total Liabilities	905	,715,235	937	7,908,409	
Deferred Inflows	47	,528,446	47	7,528,446	
Net Position					
Invested in Capital Assets, Net of Related Debt	476	,626,014	447	7,014,198	
Temporarily Restricted	24	,383,564	14	1,671,388	
Unrestricted	(216	,510,001)	(186	5,205,934)	
Total Net Position	284	,499,576	275	,479,652	
Total Liabilities, Deferred Inflows, and Net Position	\$ 1,237	,743,258	\$ 1,260	,916,507	





## **Supplemental Information**

Legena	
Greater than or equal to 100% of Budget	
Within 95% to 100% of Budget	
Less than 95% of Rudget	

		Current	Month		Fiscal Year to Date				Prior Fi	ate	
	Actual	Budget	Variance	Var %	Actual	Budget	Variance	Var %	Actual	Variance	Var %
Acute											
Admissions	891	1,114	(223)	(20.0%)	2,710	2,992	(282)	(9.4%)	3,177	(467)	(14.7%)
Length of Stay (LOS)	5.7	4.9	(8.0)	(15.9%)	6.0	5.2	(8.0)	(15.3%)	5.1	(0.9)	(17.8%)
Patient Days	5,056	5,456	(400)	(7.3%)	16,341	15,651	690	4.4%	16,259	82	0.5%
Acute - Observation Days and Admits			(450)	(00.00()		4 = 0.0	(== 4)	(00.40()	4.040	(=4.4)	(40.40()
Observation Days	388	541	(153)	(28.3%)	929	1,500	(571)	(38.1%)	1,640	(711)	(43.4%)
Observation Admission - Transfer to Inpatient	186	181	5	2.8%	470	499	(29)	(5.8%)	524	(54)	(10.3%)
Observation Admission Only	279	392	(113)	(28.8%)	687	1,082	(395)	(36.5%)	1,211	(524)	(43.3%)
Total Admissions - Acute plus Observation Only	1,170	1,506	(336)	(22.3%)	3,397	4,074	(677)	(16.6%)	4,388	(991)	(22.6%)
Behavioral Health											
Admissions	478	424	54	12.7%	1,364	1,300	64	4.9%	1,136	228	20.1%
Length of Stay (LOS)	19.0	22.0	3.1	14.0%	19.1	22.2	3.1	14.1%	22.0	2.9	13.2%
Patient Days	9,061	9,346	(285)	(3.0%)	26,020	28,881	(2,861)	(9.9%)	24,957	1,063	4.3%
Valleywise Behavioral Health Center-Phoenix	2,225	1,786	439	24.6%	6,551	6,670	(119)	(1.8%)	9,117	(2,566)	(28.1%)
Valleywise Behavioral Health Center-Mesa Valleywise Behavioral Health Center-Maryvale	2,914 3,922	3,067 4,493	(153) (571)	(5.0%) (12.7%)	8,823 10,646	9,181 13,030	(358) (2,384)	(3.9%) (18.3%) (18.3%)	10,390 5,450	(1,567) 5,196	(15.1%) 95.3%
Combined (Acute + Behavioral Health) Adjusted Admissions Adjusted Patient Days	2,449 25,253	2,789 26,845	(340) (1,591)	(12.2%) <b>(</b> 5.9%) <b>(</b>	6,631 68,951	7,560 78,439	(929) (9,488)	(12.3%) <b>(12.1%)</b>	7,942 75,894	(1,311) (6,943)	(16.5%) (9.1%)
ajasisa i alisin Dayo	20,200	20,010	(1,001)	(0.070)		. 0, .00	(0,100)	(121170)	. 0,00 .	(0,0 .0)	(01170)
Case Mix Index											
Total Hospital	1.65	1.50	0.15	9.8%	1.67	1.50	0.17	11.2%	1.50	0.17	11.3%
Acute (Excluding Newborns)	2.00	1.72	0.28	16.4%	2.00	1.72	0.28	16.5%	1.71	0.29	17.0%
Behavioral Health	1.17	1.18	(0.02)	(1.5%)	1.19	1.18	0.01	0.6%	1.16	0.03	2.7%
Medicare	1.92	2.03	(0.10)	(5.1%)	2.27	2.03	0.24	11.9%	2.15	0.12	5.4%
AHCCCS	2.16	1.75	0.41	23.6%	2.02	1.75	0.27	15.3%	1.74	0.28	16.0%
Ambulatory Valleywise Community Health Centers Visits - Including WHHs	16,334	15,055	1,279	8.5%	48,929	38,676	10,253	26.5%	48,923	6	0.0%
Valleywise Comprehensive Health Center-Phoenix Visits	13,800	13,033	767	5.9%	39,393	33,169	6,224	18.8%	39,256	137	0.3%
Valleywise Comprehensive Health Center-Peoria Visits	0	0	0	0.0%	0	00,100	0,224	0.0%	0	0	0.0%
Dental Clinics Visits	1,409	1,360	49	3.6%	2,964	4,144	(1,180)	(28.5%)	6,483	(3,519)	(54.3%)
OP Behavioral Health Visits	4,806	4,482	324	7.2%	14,243	12,828	1,415	11.0%	10,837	3,406	31.4%
	,				•		•		•	•	
Total Ambulatory Visits :	36,349	33,930	2,419	7.1% 🔲	105,529	88,817	16,713	18.8% 🔲	105,499	30	0.0%

#### Valleywise Health Financial and Statistical Information 30-Sep-20

Legend
Greater than or equal to 100% of Budget
Within 95% to 100% of Budget
Less than 95% of Budget

	Current Month				Fiscal Year to	o Date	Prior Fiscal Year to Date				
	Actual	Budget	Variance	Var %	Actual	Budget	Variance	Var %	Actual	Variance	Var %
Surgical Center (SURG) - Total IP & OP Surgeries	657	629	28	4.5%	1,652	1,694	(42)	(2.5%)	2,107	(455)	(21.6%)
Surgical Center (SURG) - Total Surgical Minutes	79,350	70,558	8,792	12.5% 🔲	201,270	190,656	10,614	5.6%	237,345	(36,075)	(15.2%)
Surgical Center (SURG) - Minutes per Case	121	112	(8.6)	(7.7%)	122	113	(9.3)	(8.3%)	113	(9.2)	(8.2%)
Operating Room Utilization	71%	70%	0.5%	0.8%	62%	70%	(8.2%)	(11.7%)	66%	(4.1%)	(6.2%)
Deliveries	138	173	(35)	(20.2%)	434	524	(90)	(17.2%)	524	(90)	(17.2%)
Trauma Visits (subset of ED Visits)	151	143	8	5.6%	424	476	(52)	(10.9%)	488	(64)	(13.1%)
Emergency Department (ED)	5,240	7,364	(2,124)	(28.8%)	16,158	20,605	(4,447)	(21.6%)	23,698	(7,540)	(31.8%)
Roosevelt ED	3,345	5,045	(1,700)	(33.7%)	10,034	13,468	(3,434)	(25.5%)	16,036	(6,002)	(37.4%)
Maryvale ED	1,463	1,800	(337)	(18.7%) 🧧	4,769	5,547	(778)	(14.0%)	6,010	(1,241)	(20.6%)
L&D ED	257	309	(52)	(16.8%)	717	927	(210)	(22.7%)	927	(210)	(22.7%)
Burn ED	175	210	(35)	(16.7%)	638	663	(25)	(3.8%)	725	(87)	(12.0%)
% of Total ED Visits Resulting in Admission Roosevelt	15.1%	13.2%	2.0%	14.9%	15.6%	13.3%	2.4%	18.1%	11.9%	3.8%	32.0%
% of Total ED Visits Resulting in Admission Maryvale	7.8%	5.2%	2.6%	50.8%	7.5%	5.2%	2.3%	44.8%	5.1%	2.3%	45.2%
% of Acute Patients Admitted Through the ED	85.4%	82.2%	3.2%	3.9%	87.7%	85.4%	2.4%	2.8%	85.3%	2.5%	2.9%
Left Without Treatment (LWOT) ROOSEVELT	0.8%	<3%	2.2%	73.2%	0.7%	<3%	2.3%	77.3%	1.5%	0.8%	55.0%
Left Without Treatment (LWOT) MARYVALE	0.8%	<3%	2.2%	74.9%	0.7%	<3%	2.4%	78.3%	0.7%	0.0%	0.0%
Overall ED Median Length of Stay (minutes) ROOSEVELT	219	<240	22	9.0%	214	<240	26	10.8%	231	17	7.4%
Overall ED Median Length of Stay (minutes) MARYVALE	157	<220	63	28.6%	170	<220	50	22.7%	170	0	0.0%
PSYCH ED Median LOS (minutes) ROOSEVELT	547	<0	(547)	(100.0%)	518	<0	(518)	(100.0%)	510	(8)	(1.6%) <b>(1.6%)</b> 19.1% <b>(1.6%)</b>
PSYCH ED Median LOS (minutes) MARYVALE	387	<0	(387)	(100.0%)	513	<0	(513)	(100.0%)	634	121	19.1%
Median Time to Treatment (MTT) (minutes) ROOSEVELT	17	<30	13	43.3%	16	<30	14	46.7%	20	4	20.0%
Median Time to Treatment (MTT) (minutes) MARYVALE	11	<30	19	63.3%	15	<30	15	50.0%	15	0	0.0%
Cath Lab Utilization - Room 1	25%	45%	(20.4%)	(45.4%)	17%	45%	(27.7%)	(61.5%)	17%	(0.1%)	(0.6%)
Cath Lab Utilization - Room 2	24%	45%	(21.1%)	(46.8%)	19%	45%	(25.9%)	(57.5%)	35%	(15.5%)	(44.8%)
Cath Lab Utilization - IR	99%	65%	33.6%	51.6%	88%	65%	22.8%	35.1%	75%	12.6%	16.8%
CCTA/Calcium Score	10	15	(5)	(33.3%)	26	45	(19)	(42.2%)	28	(2)	(7.1%)
Pediatric ED Visits at Maryvale (under age 18)	138				441						
Adult ED Visits at Maryvale (and t age 18)	1,325				4,328						
Maryvale ED to Inpatient OR	24				58						
Pediatric ED Visits at Roosevelt (under age 18)	403				1,128						
Adult ED Visits at Roosevelt (age 18 and over)	2,942				8,906						
, , , , , , , , , , , , , , , , , , , ,	,-				-,						

## Valleywise Health Financial and Statistical Information 30-Sep-20

Legend
Greater than or equal to 100% of Budget
Within 95% to 100% of Budget
Less than 95% of Budget

Fiscal Year to Date

00% of Budget	<ul><li><a></a></li></ul>
udget	
	<u> </u>

Prior Fiscal Year to Date

				Durdrich		1/ 0/	_		Pistal feal to		1/ 0/	_		var rear to Date	
	L	Actual	<u>.                                    </u>	Budget	Variance	Var %		Actual	Budget	Variance	Var %		Actual	Variance	Var %
Operating Income / (Loss) in 000s															
Valleywise Health	\$	(3,720)	\$	(6,062)	\$ 2,342	38.6% 🔲	\$	(23,773) \$	(26,307) \$	2,535	9.6% 🔲	\$	(22,104)	(1,668)	(7.5%)
Net Income / (Loss) in 000s															
Valleywise Health	\$	6,401	\$	3,350	\$ 3,050	91.0%	\$	9,020 \$	1,796	7,224	402.3%	\$	9,382	\$ (362)	(3.9%)
Net Income / (Loss) in 000s Normalized															
Valleywise Health	\$	3,026	\$	(135)	\$ 3,162	2337.2%	\$	(1,275) \$	(8,661) \$	7,387	85.3%	\$	(3,265)	1,990	61.0%
•						_					_				_
RATIOS:															
Liquidity							Φ.	055.4				•	055.4	(0.0)	(0.00()
Total Cash and Investments (000s)							\$	255.1				\$	255.1	(0.0)	(0.0%)
Total Days Cash on Hand								150.8					148.4	2.4	1.6% 🔲
Current Ratio								3.7					4.1	(0.3)	(7.9%)
Current Ratio without Bond-related Assets								2.0					0.0	0.4	0.00/
& Liabilities								3.0					2.9	0.1	3.8%
Days in Accounts Receivable (Hospital only)								69.5					81.2	11.7	14.4% 🔲
Capital Structure EBIDA Debt Service Coverage								21.2					14.0	7.2	51.1%
EBIDA Debt Service Coverage								21.2					14.0	1.2	31.1%
Profitability															
Operating Margin								(16.73%)	(19.26%)	2.53%	13.1% 🔲		(21.05%)	4.32%	20.5%
Labor										4					=
FTE/AOB WO Residents		4.66		4.34	(0.32)	(7.4%)		5.14	4.40	(0.75)	(17.0%)	l	4.67	(0.48)	(10.2%)
	_						_								
	$\vdash$	Actual	1	Current M Prior Year	Nonth Variance	Var %	-	Actual	Rolling Last Twelv Prior Year	e Months  Variance	Var %				
Turnover Rate - Voluntary	L	1.30%		1.09%	(0.21%)		<u> </u>	16.42%	15.74%	(0.68%)	(4.32%)				
Turnover Rate - Involuntary		0.24%	)	0.37%	0.13%	35.14%		3.92%	4.88%	0.96%	19.67%				
Turnover Rate - Uncontrollable Turnover Rate - Total		0.30% <b>1.85</b> %		0.30% <b>1.76%</b>	0.00% ( <b>0.09%</b> )			2.85% <b>23.19%</b>	3.25% <b>23.87%</b>	0.40% <b>0.68%</b>	12.31% <b>2.85%</b>				
Turnover Nate - Total		1.03%	,	1.70%	(0.09%)	(3.11/0)		23.13/0	23.01 70	0.00%	2.03 /0				

Current Month

### Appendix A Definition of Financial Indicators

			-		Position
Indicator	Definition			Relat Trend	ive to Median
maicator	Definition			TTCHG	Median
Total Days Cash on Hand	Cash + Short-Term Investments			Up	Above
	(Operating Expenses Less - Depreciation) / YTD Days			•	
Days in Accounts Receivable	= Net Patient Accounts Receivable (including Due/From) Net Patient Service Revenue / YTD Days			Down	Below
Necelvable	Net I alient betwice Nevertue / 110 Days				
	Cook . Chart Town Investments				
Cushion Ratio	= Cash + Short-Term Investments Principal + Interest Expenses			Up	Above
	· · · · · · · · · · · · · · · · · · ·				
	Cash + Short-Term Investments				
Cash to Debt	Long Term Debt	X	100	Up	Above
EBITDA Debt Service	EBITDA				
Coverage	= Principal + Interest Expenses			Up	Above
Debt to Net Assets	Long Term Debt	v	100	Down	Below
Debt to Net Assets	Long Term Debt + Unrestricted Assets	^	100	DOWII	Delow
Operating Margin	Operating Income (Loss)	х	100	Up	Above
operaning intai giri	Operating Revenues	•		νρ.	7.0070
EBITDA Margin	= EBITDA	Х	100	Up	Above
	Operating Revenues + Non Operating Revenues				
Excess Margin	= Net Income Operating Revenues + Non Operating Revenues	X	100	Up	Above
	operating november 1 non-operating november				
	All discharged accounts.				
Case Mix Index - Total Hospital	= Includes normal newborns (DRG 795).			Up	Above
Total Hospital	Includes discharges with a Behavioral Health patient type.				
Case Mix Index - Acute	Discharged accounts.				
(Excluding Newborns)	= Excludes normal newborns (DRG 795).  Excludes discharges with a Behavioral Health patient type.			Up	Above
Case Mix Index - Behavioral					
Health	= Discharges with a Behavioral Health patient type.			Up	Above
	Discharged accounts with a financial class of Medicare or				
Case Mix Index - Medicare	= Medicare Managed Care. Excludes normal newborns (DRG 795).			Up	Above
	Excludes discharges with a Behavioral Health patient type.				
Case Mix Index - AHCCCS	Discharged accounts with a financial class of AHCCCS or = Maricopa Health Plan. Excludes normal newborns (DRG 795).			Up	Above
Case mix mack Parioods	Excludes discharges with a Behavioral Health patient type.			- Op	715576

For ALL Case Mix values -- only Patient Types of Inpatient, Behavioral Health and Newborn are counted (as appropriate). Patient Types of Observation, Outpatient and Emergency are excluded from all CMI calculations at all times.

New individual MS-DRG weights are issued by CMS each year, with an effective date of October 1st.



VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
VOLUMES

For the Three Periods Ending September 30, 2020

	Sep-20 Actual	Sep-20 Budget	Sep-20 Variance	Sep-20 % Change	Prior Year Same Month Sep-19	Prior Year Same Month % Change	Sep-20 YTD Actual	Sep-20 YTD Budget	Sep-20 YTD Variance	YTD Sep-20 % Change	YTD Prior Year Sep-19	YTD Prior Year % Change
ADMISSIONS												
Acute	891	1,114	(223)	(20.0 %)	1,003	(11.2 %)	2,710	2,992	(282)	(9.4 %)	3,177	(14.7 %)
Behavioral Health	478	424	54	12.7 %	393	21.6 %	1,364	1,300	64	4.9 %	1,136	20.1 %
Valleywise Behavioral Health Center-Phoenix	95	70	25	35.7 %	103	(7.8 %)	268	266	2	0.8 %	352	(23.9 %)
Valleywise Behavioral Health Center-Mesa	166	154	12	7.8 %	185	(10.3 %)	529	461	68	14.8 %	566	(6.5 %)
Valleywise Behavioral Health Center-Maryvale	217	200	17	8.5 %	105	106.7 %	567	573	(6)	(1.0 %)	218	160.1 %
Total	1,369	1,538	(169)	(11.0 %)	1,396	(1.9 %)	4,074	4,292	(218)	(5.1 %)	4,313	(5.5 %)
OBSERVATION ADMISSIONS												
Transferred to Inpatient *	186	181	5	2.8 %	149	24.8 %	470	499	(29)	(5.8 %)	524	(10.3 %)
Observation Admission Only	279	392	(113)	(28.8 %)	397	(29.7 %)	687	1,082	(395)	(36.5 %)	1,211	(43.3 %)
Total Observation Admissions	465	573	(108)	(18.8 %)	546	(14.8 %)	1,157	1,581	(424)	(26.8 %)	1,735	(33.3 %)
TOTAL ADMISSIONS AND OBSERVATION ONLY												
Total	1,648	1,930	(282)	(14.6 %)	1,793	(8.1 %)	4,761	5,374	(613)	(11.4 %)	5,524	(13.8 %)
ADJUSTED ADMISSIONS												
Total	2,449	2,789	(340)	(12.2 %)	2,662	(8.0 %)	6,631	7,560	(929)	(12.3 %)	7,942	(16.5 %)
PATIENT DAYS												
Acute	5,056	5,456	(400)	(7.3 %)	5,162	(2.1 %)	16,341	15,651	690	4.4 %	16,259	0.5 %
Behavioral Health	9,061	9,346	(285)	(3.0 %)	8,574	5.7 %	26,020	28,881	(2,861)	(9.9 %)	24,957	4.3 %
Valleywise Behavioral Health Center-Phoenix	2,225	1,786	439	24.6 %	2,576	(13.6 %)	6,551	6,670	(119)	(1.8 %)	9,117	(28.1 %)
Valleywise Behavioral Health Center-Mesa	2,914	3,067	(153)	(5.0 %)	3,498	(16.7 %)	8,823	9,181	(358)	(3.9 %)	10,390	(15.1 %)
Valleywise Behavioral Health Center-Maryvale	3,922	4,493	(571)	(12.7 %)	2,500	56.9 %	10,646	13,030	(2,384)	(18.3 %)	5,450	95.3 %
Total	14,117	14,802	(685)	(4.6 %)	13,736	2.8 %	42,361	44,532	(2,171)	(4.9 %)	41,216	2.8 %
AVERAGE DAILY CENSUS												
Acute	169	182	(13)	(7.3 %)	172	(2.1 %)	178	170	8	4.4 %	177	0.5 %
Behavioral Health	302	312	(10)	(3.0 %)	286	5.7 %	283	314	(31)	(9.9 %)	271	4.3 %
Valleywise Behavioral Health Center-Phoenix	74	60	15	24.6 %	86	(13.6 %)	71	73	(1)	(1.8 %)	99	(28.1 %)
Valleywise Behavioral Health Center-Mesa	97	102	(5)	(5.0 %)	117	(16.7 %)	96	100	(4)	(3.9 %)	113	(15.1 %)
Valleywise Behavioral Health Center-Maryvale	131	150	(19)	(12.7 %)	83	56.9 %	116	142	(26)	(18.3 %)	59	95.3 %
Total	471	493	(23)	(4.6 %)	458	2.8 %	460	484	(24)	(4.9 %)	448	2.8 %
ADJUSTED PATIENT DAYS												
Total	25,253	26,845	(1,591)	(5.9 %)	26,191	(3.6 %)	68,951	78,439	(9,488)	(12.1 %)	75,894	(9.1 %)

<sup>\*</sup> Already included in 'Acute Admissions'.



VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
VOLUMES

For the Three Periods Ending September 30, 2020

_	Sep-20 Actual	Sep-20 Budget	Sep-20 Variance	Sep-20 % Change	Prior Year Same Month Sep-19	Prior Year Same Month % Change	Sep-20 YTD Actual	Sep-20 YTD Budget	Sep-20 YTD Variance	YTD Sep-20 % Change	YTD Prior Year Sep-19	YTD Prior Year % Change
OPERATING ROOM SURGERIES												
Inpatient	373	344	29	8.4 %	347	7.5 %	1,063	943	120	12.7 %	1,155	(8.0 %)
Outpatient	284	285	(1)	(0.4 %)	300	(5.3 %)	589	751	(162)	(21.6 %)	952	(38.1 %)
Total	657	629	28	4.5 %	647	1.5 %	1,652	1,694	(42)	(2.5 %)	2,107	(21.6 %)
Inpatient Minutes	49,020	44,537	4,483	10.1 %	40,650	20.6 %	139,080	122,089	16,991	13.9 %	149,865	(7.2 %)
Outpatient Minutes	30,330	26,021	4,309	16.6 %	27,570	10.0 %	62,190	68,567	(6,377)	(9.3 %)	87,480	(28.9 %)
Total	79,350	70,558	8,792	12.5 %	68,220	16.3 %	201,270	190,656	10,614	5.6 %	237,345	(15.2 %)
DELIVERIES												
Total	138	173	(35)	(20.2 %)	173	(20.2 %)	434	524	(90)	(17.2 %)	524	(17.2 %)
ED VISITS												
Adult	3,345	5,045	(1,700)	(33.7 %)	3,893	(14.1 %)	10,034	13,468	(3,434)	(25.5 %)	11,980	(16.2 %)
Maryvale	1,463	1,800	(337)	(18.7 %)	2,040	(28.3 %)	4,769	5,547	(778)	(14.0 %)	6,010	(20.6 %)
Pediatrics *	0	0	0	0.0 %	1,513	(100.0 %)	0	0	0	0.0 %	4,056	(100.0 %)
Labor & Delivery	257	309	(52)	(16.8 %)	309	(16.8 %)	717	927	(210)	(22.7 %)	927	(22.7 %)
Burn	175	210	(35)	(16.7 %)	204	(14.2 %)	638	663	(25)	(3.8 %)	725	(12.0 %)
Total	5,240	7,364	(2,124)	(28.8 %)	7,959	(34.2 %)	16,158	20,605	(4,447)	(21.6 %)	23,698	(31.8 %)
AMBULATORY VISITS												
Valleywise Community Health Centers **	16,334	15,055	1,279	8.5 %	15,423	5.9 %	48,929	38,676	10,253	26.5 %	48,923	0.0 %
Valleywise Comprehensive Health Center-Phoenix	13,800	13,033	767	5.9 %	12,588	9.6 %	39,393	33,169	6,224	18.8 %	39,256	0.3 %
Outpatient Behavioral Health	4,806	4,482	324	7.2 %	3,689	30.3 %	14,243	12,828	1,415	11.0 %	10,837	31.4 %
Dental	1,409	1,360	49	3.6 %	2,189	(35.6 %)	2,964	4,144	(1,180)	(28.5 %)	6,483	(54.3 %)
Total	36,349	33,930	2,419	7.1 %	33,889	7.3 %	105,529	88,817	16,713	18.8 %	105,499	0.0 %

<sup>\*</sup> These are visits to the Pediatric Emergency Department, not ED visits under a certain age.

<sup>\*\*</sup> Includes WHH Clinic visits when applicable



VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL INDICATORS
For the Period Ending September 30, 2020

	Sep-20 Actual	Sep-20 Budget	Sep-20 Variance	Sep-20 % Change	Prior Year Same Month Sep-19	Prior Year Same Month Variance	Prior Year Same Month % Change
Net Patient Service Revenue per APD	\$ 1,743	\$ 1,532	\$ 212	13.8 %	\$ 1,331	\$ 413	31.0 %
Salaries	\$ 22,357,001	\$ 22,568,053	\$ 211,052	0.9 %	\$ 21,578,922	(\$ 778,080)	(3.6 %)
Benefits	7,459,195	6,624,943	(834,252)	(12.6 %)	6,238,874	(1,220,321)	(19.6 %)
Contract Labor	2,256,581	1,311,216	(945,365)	(72.1 %)	2,346,728	90,147	3.8 %
Total Labor Costs	\$ 32,072,777	\$ 30,504,212	(\$ 1,568,565)	(5.1 %)	\$ 30,164,523	(\$ 1,908,254)	(6.3 %)
Supplies	\$ 7,641,804	\$ 8,458,834	\$ 817,029	9.7 %	\$ 7,111,435	(\$ 530,369)	(7.5 %)
Medical Service Fees	4,765,945	4,676,048	(89,897)	(1.9 %)	7,494,109	2,728,164	36.4 %
All Other *	10,346,245	12,592,950	2,246,705	17.8 %	10,016,176	(330,070)	(3.3 %)
Total	\$ 22,753,995	\$ 25,727,832	\$ 2,973,837	11.6 %	\$ 24,621,720	\$ 1,867,725	7.6 %
Total Operating and Non-Operating Expenses * * Excludes Depreciation	\$ 54,826,772	\$ 56,232,044	\$ 1,405,272	2.5 %	\$ 54,786,243	(\$ 40,529)	(0.1 %)
Tax Levy							
Property Tax	\$ 7,020,082	\$ 7,020,082	(\$ 0)	(0.0 %)	\$ 6,704,949	\$ 315,133	4.7 %
Bonds	4,613,768	4,613,768	0	0.0 %	5,236,969	(623,201)	(11.9 %)
Total Tax Levy	\$ 11,633,850	\$ 11,633,850	(\$ 0)	(0.0 %)	\$ 11,941,918	(\$ 308,069)	(2.6 %)
Patient Days - Acute	5,056	5,456	(400)	(7.3 %)	5,162	(106)	(2.1 %)
Patient Days - Behavioral Health	9,061	9,346	(285)	(3.0 %)	8,574	487	5.7 %
Patient Days - Total	14,117	14,802	(685)	(4.6 %)	13,736	381	2.8 %
Adjusted Patient Days	25,253	26,845	(1,591)	(5.9 %)	26,191	(938)	(3.6 %)
APD Ratio	1.79	1.81	(0.02)	(1.4 %)	1.91	(0.12)	(6.2 %)
Admissions - Acute	891	1,114	(223)	(20.0 %)	1,003	(112)	(11.2 %)
Admissions - Behavioral Health	478	424	54	12.7 %	393	85	21.6 %
Admissions - Total	1,369	1,538	(169)	(11.0 %)	1,396	(27)	(1.9 %)
Adjusted Admissions	2,449	2,789	(340)	(12.2 %)	2,662	(213)	(8.0 %)
Average Daily Census - Acute	169	182	(13)	(7.3 %)	172	(4)	(2.1 %)
Average Daily Census - Behavioral Health	302	312	(10)	(3.0 %)	286	16	5.7 %
Average Daily Census - Total	471	493	(23)	(4.6 %)	458	13	2.8 %
Adjusted Occupied Beds - Acute	301	330	(28)	(8.6 %)	328	(27)	(8.1 %)



VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL INDICATORS
For the Period Ending September 30, 2020

	Sep-20 Actual	Sep-20 Budget	Sep-20 Variance	Sep-20 % Change	Prior Year Same Month Sep-19	Prior Year Same Month Variance	Prior Year Same Month % Change
Adjusted Occupied Beds - Behavioral Health	540	565	(25)	(4.4 %)	545	(5)	(0.9 %)
Adjusted Occupied Beds - Total	842	895	(53)	(5.9 %)	873	(31)	(3.6 %)
Paid FTEs - Payroll	3,760	3,783	23	0.6 %	3,697	(63)	(1.7 %)
Paid FTEs - Contract Labor	366	300	(65)	(21.7 %)	367	1	0.4 %
Paid FTEs - Total	4,126	4,084	(42)	(1.0 %)	4,064	(61)	(1.5 %)
FTEs per AOB	4.90	4.56	(0.34)	(7.4 %)	4.66	(0.25)	(5.3 %)
FTEs per AOB (w/o Residents)	4.66	4.34	(0.32)	(7.4 %)	4.42	(0.24)	(5.4 %)
Benefits as a % of Salaries	33.4 %	29.4 %	(4.0 %)	(13.7 %)	28.9 %	(4.5 %)	(15.4 %)
Labor Costs as a % of Net Patient Revenue	72.8 %	74.2 %	1.3 %	1.8 %	86.5 %	13.7 %	15.8 %
Salaries and Contract Labor per APD	\$ 975	\$ 890	(\$ 85)	(9.6 %)	\$ 913	(\$ 61)	(6.7 %)
Benefits per APD	295	247	(49)	(19.7 %)	238	(57)	(24.0 %)
Supplies per APD	303	315	12	4.0 %	272	(31)	(11.4 %)
Medical Service Fees per APD	189	174	(15)	(8.3 %)	286	97	34.0 %
All Other Expenses per APD *	410	469	59	12.7 %	382	(27)	(7.1 %)
Total Expenses per APD *	\$ 2,171	\$ 2,095	(\$ 76)	(3.6 %)	\$ 2,092	(\$ 79)	(3.8 %)
Salaries and Contract Labor per Adj. Admission	\$ 10,051	\$ 8,561	(\$ 1,490)	(17.4 %)	\$ 8,988	(\$ 1,062)	(11.8 %)
Benefits per Adj. Admission	3,046	2,375	(671)	(28.2 %)	2,344	(702)	(30.0 %)
Supplies per Adj. Admission	3,120	3,033	(88)	(2.9 %)	2,672	(449)	(16.8 %)
Medical Service Fees per Adj. Admission	1,946	1,676	(270)	(16.1 %)	2,815	869	30.9 %
All Other Expenses per Adj. Admission *	4,225	4,515	290	6.4 %	3,763	(462)	(12.3 %)
Total Expenses per Adj. Admission *	\$ 22,388	\$ 20,160	(\$ 2,228)	(11.1 %)	\$ 20,582	(\$ 1,806)	(8.8 %)

<sup>\*</sup> Excludes Depreciation



VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL INDICATORS

For the Three Periods Ending September 30, 2020

	Sep-20 YTD Actual	Sep-20 YTD Budget	Sep-20 YTD Variance	YTD Sep-20 % Change	YTD Prior Year Sep-19	YTD Prior Year Variance	YTD Prior Year % Change
Net Patient Service Revenue per APD	\$ 1,737	\$ 1,448	\$ 290	20.0 %	\$ 1,612	\$ 125	7.8 %
Salaries	\$ 68,630,513	\$ 66,962,537	(\$ 1,667,976)	(2.5 %)	\$ 66,107,238	(\$ 2,523,275)	(3.8 %)
Benefits	21,513,458	19,623,787	(1,889,671)	(9.6 %)	19,127,235	(2,386,223)	(12.5 %)
Contract Labor	6,338,474	4,013,555	(2,324,919)	(57.9 %)	6,737,029	398,554	5.9 %
Total Labor Costs	\$ 96,482,446	\$ 90,599,880	(\$ 5,882,566)	(6.5 %)	\$ 91,971,502	(\$ 4,510,944)	(4.9 %)
Supplies	\$ 22,406,302	\$ 23,400,940	\$ 994,638	4.3 %	\$ 24,471,480	\$ 2,065,178	8.4 %
Medical Service Fees	14,088,668	14,027,950	(60,718)	(0.4 %)	21,774,752	7,686,084	35.3 %
All Other *	27,645,266	36,342,694	8,697,427	23.9 %	31,067,001	3,421,735	11.0 %
Total	\$ 64,140,236	\$ 73,771,583	\$ 9,631,347	13.1 %	\$ 77,313,233	\$ 13,172,997	17.0 %
Total Operating and Non-Operating Expenses * * Excludes Depreciation	\$ 160,622,682	\$ 164,371,463	\$ 3,748,781	2.3 %	\$ 169,284,735	\$ 8,662,053	5.1 %
Tax Levy							
Property Tax	\$ 21,060,245	\$ 21,060,245	(\$ 0)	(0.0 %)	\$ 20,114,847	\$ 945,398	4.7 %
Bonds	13,841,305	13,841,305	0	0.0 %	15,710,908	(1,869,603)	(11.9 %)
Total Tax Levy	\$ 34,901,549	\$ 34,901,549	(\$ 0)	(0.0 %)	\$ 35,825,755	(\$ 924,206)	(2.6 %)
Patient Days - Acute	16,341	15,651	690	4.4 %	16,259	82	0.5 %
Patient Days - Behavioral Health	26,020	28,881	(2,861)	(9.9 %)	24,957	1,063	4.3 %
Patient Days - Total	42,361	44,532	(2,171)	(4.9 %)	41,216	1,145	2.8 %
Adjusted Patient Days	68,951	78,439	(9,488)	(12.1 %)	75,894	(6,943)	(9.1 %)
APD Ratio	1.63	1.76	(0.13)	(7.6 %)	1.84	(0.21)	(11.6 %)
Admissions - Acute	2,710	2,992	(282)	(9.4 %)	3,177	(467)	(14.7 %)
Admissions - Behavioral Health	1,364	1,300	64	4.9 %	1,136	228	20.1 %
Admissions - Total	4,074	4,292	(218)	(5.1 %)	4,313	(239)	(5.5 %)
Adjusted Admissions	6,631	7,560	(929)	(12.3 %)	7,942	(1,311)	(16.5 %)
Average Daily Census - Acute	178	170	8	4.4 %	177	1	0.5 %
Average Daily Census - Behavioral Health	283	314	(31)	(9.9 %)	271	12	4.3 %
Average Daily Census - Total	460	484	(24)	(4.9 %)	448	12	2.8 %
Adjusted Occupied Beds - Acute	289	300	(11)	(3.5 %)	325	(36)	(11.2 %)



VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL INDICATORS
For the Three Periods Ending September 30, 2020

				YTD	YTD	YTD	YTD
	Sep-20	Sep-20	Sep-20	Sep-20	Prior Year	Prior Year	Prior Year
-	YTD Actual	YTD Budget	YTD Variance	% Change	Sep-19	Variance	% Change
Adjusted Occupied Beds - Behavioral Health	460	553	(93)	(16.7 %)	500	(39)	(7.8 %)
Adjusted Occupied Beds - Total	749	853	(103)	(12.1 %)	825	(75)	(9.1 %)
Paid FTEs - Payroll	3,706	3,652	(54)	(1.5 %)	3,679	(27)	(0.7 %)
Paid FTEs - Contract Labor	356	300	(55)	(18.4 %)	377	22	5.8 %
Paid FTEs - Total	4,061	3,952	(109)	(2.8 %)	4,056	(5)	(0.1 %)
FTEs per AOB	5.42	4.64	(0.78)	(16.9 %)	4.92	(0.50)	(10.2 %)
FTEs per AOB (w/o Residents)	5.14	4.40	(0.75)	(17.0 %)	4.67	(0.48)	(10.2 %)
Benefits as a % of Salaries	31.3 %	29.3 %	(2.0 %)	(7.0 %)	28.9 %	(2.4 %)	(8.3 %)
Labor Costs as a % of Net Patient Revenue	80.5 %	79.8 %	(0.8 %)	(1.0 %)	75.2 %	(5.4 %)	(7.1 %)
Salaries and Contract Labor per APD	\$ 1,087	\$ 905	(\$ 182)	(20.2 %)	\$ 960	(\$ 127)	(13.3 %)
Benefits per APD	312	250	(62)	(24.7 %)	252	(60)	(23.8 %)
Supplies per APD	325	298	(27)	(8.9 %)	322	(3)	(0.8 %)
Medical Service Fees per APD	204	179	(25)	(14.3 %)	287	83	28.8 %
All Other Expenses per APD *	401	463	62	13.5 %	409	8	2.1 %
Total Expenses per APD *	\$ 2,330	\$ 2,096	(\$ 234)	(11.2 %)	\$ 2,231	(\$ 99)	(4.4 %)
Salaries and Contract Labor per Adj. Admission	\$ 11,305	\$ 9,388	(\$ 1,917)	(20.4 %)	\$ 9,172	(\$ 2,133)	(23.3 %)
Benefits per Adj. Admission	3,244	2,596	(648)	(25.0 %)	2,408	(836)	(34.7 %)
Supplies per Adj. Admission	3,379	3,095	(284)	(9.2 %)	3,081	(298)	(9.7 %)
Medical Service Fees per Adj. Admission	2,125	1,856	(269)	(14.5 %)	2,742	617	22.5 %
All Other Expenses per Adj. Admission *	4,169	4,807	638	13.3 %	3,912	(257)	(6.6 %)
Total Expenses per Adj. Admission *	\$ 24,222	\$ 21,742	(\$ 2,480)	(11.4 %)	\$ 21,316	(\$ 2,906)	(13.6 %)

<sup>\*</sup> Excludes Depreciation

#### MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT **VALLEYWISE HEALTH (COMBINED CARE SYSTEM)** FINANCIAL STATEMENT HIGHLIGHTS For the month ending September 30, 2020

#### **OPERATING REVENUE**

#### Patient Days, Admissions and Adjusted Patient Days

1	A - 4 1	5 June 1	M	0/1/
Acute Care	Actual	Budget	Variance	%Variance
MTD - Patient Days	5,056	5,456	(400)	-7.3%
YTD - Patient Days	16,341	15,651	690	4.4%
MTD - Admissions	891	1,114	(223)	-20.0%
YTD - Admissions	2,710	2,992	(282)	-9.4%
MTD - Average Length of Stay (ALOS)	5.7	4.9	(0.8)	-15.9%
YTD - Average Length of Stay (ALOS)	6.0	5.2	(0.8)	-15.3%
4TD 4	400		(40)	7.00/
MTD - Average Daily Census (ADC)	169	182	(13)	-7.3%
YTD - Average Daily Census (ADC)	178	170	8	4.4%
MTD - Patient Days	9,061	9,346	(285)	-3.0%
Behavioral Health	Actual	Budget	Variance	%Variance
TD - Patient Days	26,020	28,881	(2,861)	-9.9%
	20,020		(=,00.1)	0.070
MTD - Admissions	478	424	54	12.7%
YTD - Admissions	1,364	1,300	64	4.9%
MTD - Average Length of Stay (ALOS)	19.0	22.0	3.1	14.0%
TD - Average Length of Stay (ALOS)	19.1	22.2	3.1	14.1%
ATD. Average Deily Consus (ADC)	302	312	(40)	-3.0%
MTD - Average Daily Census (ADC)			(10)	
YTD - Average Daily Census (ADC)	283	314	(31)	-9.9%
Adjusted Believe Deve (ABD)	Antivol	Dudget	Variance	0/\/==:====
Adjusted Patient Days (APD)	Actual 25,253	Budget	Variance	%Variance
Month-to-Date	25,253	26,845	(1,591)	-5.9%

Year-to-Date

Actual	Budget	Variance	%Variance
25,253	26,845	(1,591)	-5.9%
68,951	78,439	(9,488)	-12.1%

#### Net patient service revenue

Month-to-Date Year-to-Date Month-to-Date Per APD Year-to-Date Per APD

Actual	Budget		Variance	%Variance
\$ 44,028,269	\$ 41,119,354	\$	2,908,915	7.1%
\$ 119,796,415	\$ 113,564,939	\$	6,231,476	5.5%
\$ 1,743	\$ 1,532	\$	212	13.8%
\$ 1,737	\$ 1,448	\$	290	20.0%

#### Other operating revenue

Month-to-Date Year-to-Date

	Actual Budget		Variance	%Variance	
	\$ 8,216,301	\$ 8,410,917	\$ (194,617)	-2.3%	
Ī	\$ 22,291,667	\$ 23,032,236	\$ (740,569)	-3.2%	

The negative variances for the month are primarily in trauma services, 340B revenue and cafeteria sales. The positive variances for the month include retail perscription sales and other miscellaneous operating revenue.

#### **Total operating revenues**

Month-to-Date Year-to-Date

Ī	Actual	Budget		Variance	%Variance
Ī	\$ 52,244,570	\$	49,530,271	\$ 2,714,299	5.5%
Ī	\$ 142,088,082	\$	136,597,175	\$ 5,490,907	4.0%

## MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT VALLEYWISE HEALTH (COMBINED CARE SYSTEM) FINANCIAL STATEMENT HIGHLIGHTS For the month ending September 30, 2020

#### **OPERATING EXPENSES**

#### Salaries and wages

	Actual		Budget	Variance	%Variance	
Month-to-Date	\$ 22,3	57,001 \$	22,568,053	\$ 211,052	0.9%	
Year-to-Date	\$ 68,6	30,513 \$	66,962,537	\$ (1,667,976)	-2.5%	

	Actual	Budget	Variance	%Variance
Paid FTE's - Payroll	3,760	3,783	23	0.6%

	Actual	Budget	Variance	%Variance
Paid FTE's - Payroll (w/o Residents)	3,557	3,580	23	0.6%

	Actual	Budget	Variance	%Variance
Salaries per FTE's - Payroll	\$ 5,946	\$ 5,965	\$ 19	0.3%

#### **Contract labor**

	Actual		Budget	Variance	%Variance
Month-to-Date	\$ 2,256	5,581	\$ 1,311,216	\$ (945,365)	-72.1%
Year-to-Date	\$ 6,338	3,474	\$ 4,013,555	\$ (2,324,919)	-57.9%

	Actual	Budget	Variance	%Variance
FTE's - Contract Labor incl Outsource	366	300	(65)	-21.6%

%Variance

-1467.2%

38.5%

0.0% -83.3%

%Variance

(53)

2

(3) (5)

Variance

FTE's - Contract Labor	Actual	Budget	Variance
Nursing operations - Acute	56	4	
Revenue Cycle	3	5	
Behavioral Health	3	-	
Information Technology	11	6	

Actual

_				
FTE's - Outsource Departments	Actual	Budget	Variance	%Variance
Food & Nutrition Services	127	127	-	0.0%
Environmental Services	146	146	-	0.0%
Laundry & Linen	8	8	-	0.0%
Gift Shop	2	2	-	0.0%

	Actual	Budget	Variance	%Variance
Paid FTE's - Payroll & Contract Labor	4,126	4,084	(42)	-1.0%
				_

Adjusted Occupied Beds (AOB)	842	895	(53)	-5.9%

Budget

	Actual	Budget	Variance	%Variance
Paid FTE's per AOB (w/o Residents)	4.66	4.34	(0.32)	-7.5%

#### **Employee benefits**

	Actual	Budget	Variance	%Variance
Month-to-Date	\$ 7,459,195	\$ 6,624,943	\$ (834,252)	-12.6%
Year-to-Date	\$ 21,513,458	\$ 19,623,787	\$ (1,889,671)	-9.6%

The negative variances for the month are primarily in the net self-insured expenses and paid leave accrual.

## MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT VALLEYWISE HEALTH (COMBINED CARE SYSTEM) FINANCIAL STATEMENT HIGHLIGHTS

For the month ending September 30, 2020

#### Benefits as a % of salaries

Month-to-Date Year-to-Date

Actual	Budget	Variance	%Variance	
33.4%	29.4%	-4.0%	-13.7%	
31.3%	29.3%	-2.0%	-7.0%	

#### Medical service fees

Month-to-Date Year-to-Date

	Actual	Budget	Variance	%Variance
Ī	\$ 4,765,945	\$ 4,676,048	\$ (89,897)	-1.9%
	\$ 14,088,668	\$ 14,027,950	\$ (60,718)	-0.4%

Net expenses are above budget MTD due to lower than expected offsetting DMG professional fee collections.

#### **Supplies**

Month-to-Date Year-to-Date

	Actual	Budget	Variance	%Variance
ſ	\$ 7,641,804	\$ 8,458,834	\$ 817,029	9.7%
I	\$ 22,406,302	\$ 23,400,940	\$ 994,638	4.3%

The Positive variance for the month are primarily in OR related supplies (i.e. implants, devices, etc.), pharmaceuticals, blood & plasma supplies, radiology supplies and postage. A majority of the negative variances for the month are in laboratory supplies, and other supplies.

#### **Purchased services**

Month-to-Date Year-to-Date

	Actual	Budget	Variance	%Variance
	\$ 2,884,065	\$ 2,955,602	\$ 71,537	2.4%
Г	\$ 6.979.348	\$ 7.789.103	\$ 809.755	10.4%

The major positive variances for the month are in other professional services, laboratory services, and attorney/legal fees. The major negative variances for the month are in collection fees, and advertising services.

#### Other expenses

Month-to-Date Year-to-Date

Actual	Budget	Variance	%Variance
\$ 4,249,701	\$ 4,764,575	\$ 514,874	10.8%
\$ 12,971,680	\$ 14,372,512	\$ 1,400,832	9.7%

The major positive variances for the month are in risk management related expenses, repairs & maintenance, web-based subcriptions, utilities, and overhead cost. The major negative variance for the month is in rent expense.

#### **Provider Assessment**

Month-to-Date Year-to-Date

Actual	Budget	Variance	%Variance
\$ 884,398	\$ 882,402	\$ (1,995)	-0.2%
\$ 2,653,193	\$ 2,647,207	\$ (5,985)	-0.2%

#### Depreciation

Month-to-Date Year-to-Date

	Actual	Budget	Variance	%Variance
\$	3,466,052	\$ 3,350,929	\$ (115,123)	-3.4%
\$	10,279,015	\$ 10,066,941	\$ (212,074)	-2.1%

## MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT VALLEYWISE HEALTH (COMBINED CARE SYSTEM) FINANCIAL STATEMENT HIGHLIGHTS

For the month ending September 30, 2020

#### **Total operating expenses**

Month-to-Date Year-to-Date

	Actual	Budget	Variance	%Variance
\$	55,964,742	\$ 55,592,601	\$ (372,141)	-0.7%
\$	165,860,651	\$ 162,904,531	\$ (2,956,120)	-1.8%

#### Operating income (loss)

Month-to-Date Year-to-Date

	Actual	Budget	Variance	%Variance
Γ	\$ (3,720,172)	\$ (6,062,330)	\$ 2,342,158	38.6%
	\$ (23,772,569)	\$ (26,307,356)	\$ 2,534,788	9.6%

#### Non-operating revenues (expenses)

Month-to-Date Year-to-Date

	Actual	Budget	Variance	%Variance
- 5	10,120,728	\$ 9,412,806	\$ 707,922	7.5%
5	32,792,493	\$ 28,103,155	\$ 4,689,339	16.7%

#### **Excess of revenues over expenses**

Month-to-Date Year-to-Date

	Actual	Budget	Variance	%Variance
\$	6,400,556	\$ 3,350,476	\$ 3,050,080	91.0%
\$	9,019,924	\$ 1,795,798	\$ 7,224,126	402.3%

#### MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT VALLEYWISE HEALTH (COMBINED CARE SYSTEM) FINANCIAL STATEMENT HIGHLIGHTS

For the month ending September 30, 2020

#### **ASSETS**

#### Cash and cash equivalents - Delivery system

Sep-20	Jun-20	Change	% change
\$ 255,070,385	\$ 255,086,550	\$ (16,165)	0.0%

#### Cash and cash equivalents - Bond (restricted)

Sep-20	Jun-20	Change	% change
\$ 237,252,191	\$ 315,716,742	\$ (78,464,551)	-24.9%

Paid \$40.5M in principal and interest in July 2020 related to the 2nd and 3rd bond offerings.

#### Patient A/R, net of allowances

Sep-20	Jun-20	Change	% change
\$ 79,936,3	8 \$ 91,434,976	\$ (11,498,598)	-12.6%

#### Other receivables and prepaid items

Sep-20	Jun-20	Change	% change
\$ 41,232,415	\$ 34,075,796	\$ 7,156,619	21.0%

FY21 other receivables / prepaids includes:

\$907K due from Home Assist Health

\$684K in retail pharmacy receivable

\$2.4M due from other receivables

\$481K due from other hospital - resident rotation

\$15.1M in prepaids/deposits

\$9.2M in inventories

\$10.2M due from DMG for pro-fees collections \$933M due from Wellpartner/340B program

\$1.0M receivables from grants & research sponsors

\$271K due from Health Foundation

#### Estimated amounts due from third party payors

	Sep-20	Jun-20	Change	% change
- [	\$ 16.210.381	\$ 10.502.569	\$ 5.707.811	54.3%

FY21 due from third party payors includes:

\$1.1M due from AHCCCS for DSH \$14.7M due from AHCCCS for GME \$438K due from First Things First

#### Due from related parties

Sep-20	Jun-20	Change	% change
\$ 28,433,542	\$ 1,005,147	\$ 27,428,394	2728.8%

FY21 due from related parties includes:

\$1.7M due from Public Health Ryan White Part A programs

\$26.8M due from Maricopa County for tax levy collection

## MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT VALLEYWISE HEALTH (COMBINED CARE SYSTEM) FINANCIAL STATEMENT HIGHLIGHTS

#### For the month ending September 30, 2020

#### Capital Assets, net

Sep-20	Jun-20	Change	% change
\$ 514,559,704	\$ 488,046,464	\$ 26,513,240	5.4%

#### **Other Assets**

Sep-20	Jun-20	Change	% change
\$ -	\$ -	\$ -	0.0%

#### **Deferred outflows**

Sep-20	Jun-20	Change	% change
\$ 65,048,262	\$ 65,048,262	\$ -	0.0%

#### LIABILITIES AND NET POSITION

#### Current maturities of long-term debt

	Sep-20	Jun-20	Change	% change
Ī	\$ 37,933,690	\$ 41,032,266	\$ (3,098,575)	-7.6%

FY21 current maturities includes:

\$37.6M in Bond current portion and interest payable

\$377K in current portion - RICOH

#### Accounts payable

Sep-20	Jun-20	Change	% change
\$ 27,668,319	\$ 32,494,082	\$ (4,825,762)	-14.9%

FY21 accounts payable includes:

 $2.7\mbox{M}$  due to DMG for annual recon and pass thru payments

\$16.3M in vendor related expense accruals/estimates

\$8.7M in vendor approved payments

#### Accrued payroll and expenses

Sep-20	Jun-20	Change	% change
\$ 34.678.067	\$ 31.942.848	\$ 2.735.219	8.6%

#### Medical claims payable

Sep-20	Jun-20	Change	% change
\$ 16,305,430	\$ 15,824,372	\$ 481,058	3.0%

## MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT VALLEYWISE HEALTH (COMBINED CARE SYSTEM) FINANCIAL STATEMENT HIGHLIGHTS

#### For the month ending September 30, 2020

#### Due to related parties

Sep-20		Jun-20	Change	% change
\$	-	\$ 5,222,959	\$ (5,222,959)	-100.0%

Timing of tax levy revenue accrual and actual collection received.

#### Other current liabilities

Sep-20	Jun-20	Change	% change
\$ 59,167,459	\$ 47,635,142	\$ 11,532,317	24.2%

FY21 other current liabilities includes:

\$3.1M in settlement reserved for Medicare

\$2.1M in deferred income for grants, research, & study residuals

\$2.3M in patient credit balances

\$21.1M in other deferred income (TIP, Optum, APSI, etc.)

\$1.3M in deferred income (Health Foundation)

\$347K in unclaimed/stale dated checks

\$5.6M in settlement reserved for SNCP and FQHC

\$23.4M in advanced payments

#### Bonds payable

Sep-20	Jun-20	Change	% change
\$ 429,376,340	\$ 463,170,813	\$ (33,794,472)	-7.3%

Reclassed current maturities portion of Bond payable

#### Other long-term debt

Sep-20	Jun-20	Change	% change
\$ -	\$ -	\$ -	0.0%

All long-term debts have been transferred to short-term debts as they are now less than one year to maturity

#### Long-term liabilities

Sep-20	Jun-20	Change	% change
\$ 300,585,929	\$ 300,585,929	\$ -	0.0%

Pension liability per ASRS report - GASB68

#### **Deferred inflows**

Sep-20	Jun	-20	Change	% change
\$ 47,	28,446 \$	47,528,446 \$	-	0.0%

#### **Net position**

Sep-20	Jun-20	Change	% change
\$ 284,499,576	\$ 275,479,652	\$ 9,019,924	3.3%



#### Valleywise Health Health Plan sale proceeds

Beginn	ing balance - February 01, 2017		\$ -
ADD:	Payment received from UHC for member transfer Investment income Bank interest income received - YTD	\$ 33,361,499.99 1,604,154.37 68,574.36	35,034,228.72
LESS:	Consulting services expense Valleywise Health Foundation Funding Bank charges - transfer fees	(547,601.00) (2,250,000.00) (50.00)	
	Short - term investments Long - term investments	 - -	(2,797,651.00)
Ending	\$ 32,236,577.72		



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 4.

Quarterly Investment of Funds Report



## **Total Investment Performance Fiscal Year 2021**

FY2021 Combined	Average Cash Balance **				Effective Yield	Annual Yield
July	\$	539,005,550	\$ 252,983	0.05%	0.56%	
August	\$	511,925,870	\$ 247,180	0.05%	0.58%	
September	\$	497,579,517	\$ 160,748	0.03%	0.39%	
Monthly average	\$	516,170,312	\$ 220,304	0.04%	0.51%	

FY2021 Operating - MMC	Average Cash Balance **		<u>=</u>		Effective Yield	Annual Yield
July	\$	283,198,660	\$ 144,103	0.05%	0.61%	
August	\$	266,783,747	\$ 143,185	0.05%	0.64%	
September	\$	260,476,275	\$ 140,253	0.05%	0.65%	
Monthly average	\$	270,152,894	\$ 142,514	0.05%	0.63%	

FY2021 Bond - related	Average Cash Balance **		<u> </u>		Effective Yield	Annual Yield
July	\$	255,806,891	\$ 108,880	0.04%	0.51%	
August	\$	245,142,123	\$ 103,995	0.04%	0.51%	
September	\$	237,103,241	\$ 20,494	0.01%	0.10%	
Monthly average	\$	246,017,418	\$ 77,790	0.03%	0.38%	

<sup>\*\*</sup> Average cash balance includes both cash and cash equivalents, short and long term investments

<sup>\*\*</sup> Investments are thru U.S. government bonds , treasury notes and short term bills.



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 5.a.

Reports to the Board

Monthly Marketing and Communications

Report

# Valleywise Marketing Communications Report SEPTEMBER 2020

#### Marketing Communication budget \$5.1M

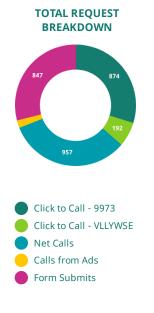
#### **REQUESTS FOR APPOINTMENTS**

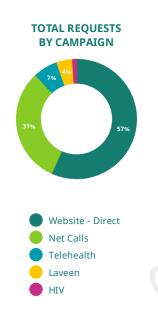






#### REQUESTS FOR APPOINTMENT BREAKDOWN







AGGREGATE READERSHIP 518,082,179

**TOTAL MENTIONS** 

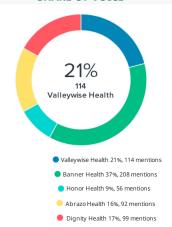
114

SHARE OF VOICE 21%

AD EQUIVALENCY \$980K

## **EARNED MEDIA**

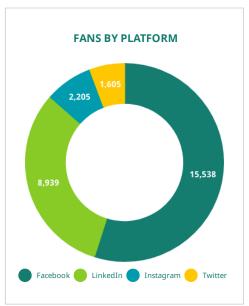
### **SHARE OF VOICE**

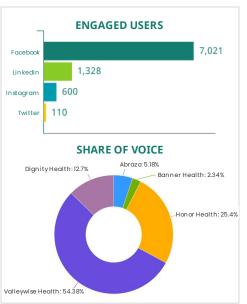


#### **MEDIA SCREENSHOTS**



## **SOCIAL MEDIA**





## **WEBSITE (MOM)**

41,651 TOTAL WEB VISITS

TOTAL WEB VISITS

One Month Previous 42.336

94,089 TOTAL PAGE VIEWS

One Month Previous 92,232

28,753
UNIQUE VISITORS

One Month Previous 29,592

10,576
TOTAL BLOG VISITS

One Month Previous 9.300

## **EMAIL**

96,818
TOTAL EMAILS SENT
One Month Previous 100,327

30,888 TOTAL OPENED
One Month Previous 40,255 31.90% OPEN RATE One Month Previous 40.12%

7.10% cto

One Month Previous 6.27%

## **COMMUNITY OUTREACH**



### **COMMUNITY PARTNER ENGAGEMENT**

18 Meetings (Virtual)

**589** Participants

- DES Partner Meeting
- Arizona Faith Council
- West Valley Human Alliance
- Maricopa County Public Health
- Phoenix Family Support Alliance

#### **EVENTS**

Virtual Univision Forum/Townhall – Maricopa County Public Health Preparedness and Wellness Month: Dr. Alexander Toledo

### **COMMUNITY BUSINESS DEVELOPMENT**

11 Meetings (Virtual)

**1** Presentation

**442** Participants

- Peoria Chamber Percolate
- WESTMARC- Healthcare Innovation: Michael Zenobi
- Glendale Chamber
- Arizona Hispanic Chamber of Commerce
- West Valley Chamber Alliance

## **INTERNAL MEDIA**

### **TOTAL EMPLOYEE EMAILS**

33

**26** (one month previous)



### **OPEN RATE**

54.40% (one month previous)

51.59%

**Valleywise**Health

**Steve Purves** 

A Message from our President & CEO

Valleywise Health Medical Center Named Among the Nation's "100 Top Hospitals" by Fortune/IBM Watson Health, Receives Everest Award

It is my pleasure to announce that Valleywise Health Medical Center has been named one of Fortune1BM Watson Health 100 Top Hospitals. This is the first time Valleywise Health Medical Center has been recognized as one of the top-performing major bring hospitals in the U.S. and is the only teaching hospital in Artzona to be honored.

to lassest author depresentation and a mery year person. It is an displated that Adjavense Health MacGel Center's in the only feaching hospital in Acciona named to the last of IBM Watson 100 Top Hospitals. This is a reflection in Acciona named to the last of our paysiskin partners at District Medical Group, our nurses and all other learn members, both clinical and non-clinical, who do their part to provide conceptional cure, which exception, every selection exceptional cure, which acception, every selection exceptional cure years of particularly significant as we move forward as part of the Cregistron University.—Automated Hospitals of MacGel Center in physical exclusion in physical exclusion.

The IBM Watson Health Top Hospitals study spotlights top-performing hospitals based on an evaluation of 3,134 short-term, acute care non-federal hospitals in the US. The annual list recognizes excellence in clinical outcomes, operational efficiency, platent operance and insmall health. Of the Obospitals honed only 16 large teaching hospitals were recognized, and only 20 hospitals searced the Everest Award.

# **Valleywise**Health

### Care Reimagined | September 2020



#### Valleywise Health Medical Center

- Progress continues on helipad parking area
   Steel construction started
   Basement foundations nearly complete

#### Central Utility Plant & Site Utilities

- Major equipment commissioning underway
   Roof replacement complete
   Exterior building painting underway

#### 2619 E Pierce Street

Overhead ductwork complete
 Installation of ceiling grid continues







### **AREAS OF FOCUS**

- "100 Top Hospitals" Recognition
- COVID-19 Updates
- Employee Engagement Survey
- Flu Shots
- Physician of the Year



#### **COVID-19 UPDATE**

#### COVID-19 Census

- Positive Patients: 6
  PUI: 10
  Recovered (still hospitalized): 4
  Discharged: 1
  Deaths: 1
- Behavioral Health

#### Phoenix

- Screening Tests: 3
   PUI: 1
   Recovered (still hospitalized): 4

#### Ventilators

70 ventilators available for use (as of midnight 09/09/2020)
There are 24 ventilators in use across the system, with 2 COVID-19 positive patients requiring ventilator support.

- PPE Days on Hand N95 – 137
   Surgical Masks – 283
   Gloves (pairs) – 69
   Gowns – 27
   Face Shields – 32
   Goggles – 86
   Sanitizers – 20
   Shoe Covers – 35
   Caps – 264

## Note from Chief Clinical Officer (CCO) Dr. Michael White





#### **Employee Engagement Contests and Prizes**

Here at Valleywise Health, employee engagement in the workplace is one of our top priorities. Your participation in the annual engagement survey is an opportunity to share your feedback, and you can also win swag and prizes in the process!

We are excited this year to be able to offer you more chances to win some exciting swag. Please read the details below and check out The Vine for daily updates.

### Daily Drawing

To be able to participate in the daily drawing, make sure to take a screenshot of the "You did it" page that you will see when you complete your survey. Submit the screenshot to HR Leadership@valleywisehealth.org

HR will draw 5 names daily for a \$10 gift card. Different gift cards each day of the week.

Teams that hit 100% completion will be entered into a drawing to win a Valleywise Health mug. Four teams, one from each department Acute, Support, Ambulatory, and Behavioral Health will be eligible to win.

#### Grand Prizes

Valleywise Health Foundation has donated two weekly Grand Prizes!

- Teams that hit 90% or better in the first week by 12pm on 9/18 qualify for a winner to be drawn for a grand prize

  All employees on the team get entered into a drawing for Bose headphores. One person will win. Item is taxable income.

  Teams that hit 100% by 12pm on 9/26, qualify for a winner to be drawn for

- Crite person.
   Teams that if 100% by 12pm on 9/25, quality rur a recommendation of a grand prize
   a grand prize
   All employees on the team get entered into a drawing for a iPad
- All employees on the learn get entered into a drawing for a li\*ad mini

  Additional grand price items generously donated by the Valleywise Health for the control of the Co

Thank you in advance for your participation.









# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 5.b.

Reports to the Board
Monthly Care Reimagined Capital
Purchases





**Care Reimagined – Spend report** 

Description		CER Number		Amount Paid Amount Paid		Amount Paid	An	nount Paid	Amount Paid		
				JULY 2	2020		AUG 2020	SI	EPT 2020		Cumulative Total
Francisco Anna Caracter and Branch Francisco											
Functional Area - Outpatient Health Facilities		40.000		Φ.	4.075	•	404			,	4.070
ABBOTT RAPID DIAGNOSTICS		19-930	-	\$	1,675	\$	194			\$	1,870
ADVANCED STERILIZATION		19-930								\$	140,587
Advanced Testing		19-930								\$	830
Airpark Signs		19-930				\$	5,341			\$	170,851
ALLEGIANCE CORP		19-930				\$	50			\$	552
ALTURA		19-930								\$	200,210
ARC Products LLC		19-930								\$	3,510
Arizona Department of Health		19-930								\$	300
ARIZONA PUBLIC SERVICE		19-930				\$	(36,107)			\$	(30,357)
Armstrong Medical		19-930				\$	8,955			\$	8,955
B BRAUN		19-930				\$	4,697			\$	184,373
BAYER HEALTHCARE		19-930								\$	86,500
Baxter Health		19-930				\$	4,995			\$	4,995
BONNY PIONTKOWSKI		19-930								\$	5,295
BPG Technologies		19-921								\$	186,534
CAPSULE TECH		19-930				\$	1,961			\$	166,454
CARDINAL HEALTH		19-930					•			\$	2,070
CAREFUSION		19-930				\$	1,875	\$	4,283	\$	6,159
CDW Government		19-930		\$	20,227	\$	2,430			\$	261,852
CHEMDAQ		19-930								\$	21,874
City of Peoria				\$	1,508	\$	2,416	\$	167	\$	80,987
CME		19-930		\$ 1	129,986	\$	107,713	\$	27,821	\$	1,657,748
COOPER ATKINS		19-930				\$	34			\$	26,198
COOPER SURGICAL		19-930				\$	64			\$	4,398
COVIDIEN		19-930								\$	21,940
Cushman and Wakefield of Arizona										\$	16,500
DAAVLIN DISTRUBITING		19-930								\$	7,000
Davis Enterprises		19-930				\$	14,475	\$	332	\$	14,807
DATA INNOVATIONS LLC							,			\$	14,285
DATEX OHMEDA										\$	379,160
DIBBLE ENGINEERING										\$	12,570
ELITECHGROUP INC		19-930		\$	16,895					\$	16,895
EXTENDATA		19-930		•	-,3					\$	60,240
FILLMASTER		19-930								\$	1,494
FOLLETT		19-930		\$	(23,262)					\$	
GE		19-930			160,507			\$	14,204	\$	693,566
GLOBAL SURGICAL		16-930		Υ -	200,507			7	17,204	\$	13,650

Description		CER Number		Amount Paid	Amo	ount Paid	Am	ount Paid		Amount Paid
				JULY 2020	AL	JG 2020	SE	PT 2020		Cumulative Total
Coodmans		19-930							\$	867,908
Goodmans GRAINGER		19-950							\$	
			\$	415					\$	13,078 1,045
GRAYBAR ELECTRIC HELMER			÷	415					\$	137,145
		10.020	-		ć	918			\$	
Henry Schein HILL ROM		19-930	-		\$	918			\$	392,531 50,543
		19-930				20.044		42.420	Υ	·
Hobbs and Black Associates Inc		10.007			\$	29,811	\$	13,438	\$	3,190,927
Hologic		19-907	_	447.507					\$ \$	589,592
HP INC		19-930	\$	417,507					۲	514,051
Hye Tech Network					\$	2,948	\$	139	\$	1,015,724
INTELLIGENT HEARING		19-930	\$	4,185					\$	4,185
INTERMETRO INDUSTRIES									\$	57,925
JRC Design		19-930							\$	148,090
KRONOS		19-930							\$	23,505
Lanmor		19-930			\$	664			\$	664
LPIT SOLUTIONS									\$	10,500
Mar Cor Purification		19-930							\$	205,641
Maricopa County Environmental Services		19-930							\$	2,515
Maricopa County Planning and Development		19-930			\$	4,500			\$	573,393
MDM COMMERCIAL		19-930	\$	1,512			\$	277	\$	43,969
MEDIVATORS					\$	10	\$	4,472	\$	8,992
MEDTRONIC		19-930	\$	12,850					\$	12,850
MIZUHO ORTHOPEDICS		19-930			\$	67			\$	2,413
MONOPRICE INC		19-930	\$	757					\$	757
NATUS MEDICAL		19-930							\$	34,570
NCI INC									\$	9,262
Ninyo and Moore Geotechnical and Environment									\$	131,725
NUAIER		19-930							\$	13,123
OIEC MEDICAL SYSTEMS		19-930			\$	250,893			\$	250,893
Okland Construction Company		19-930	\$	117,163	\$	(1,400,441)			\$	42,557,276
Olympus		19-930		•	\$	19			\$	566,709
PARKS MEDICAL		19-930							\$	710
PATRIOT PURVEYORS									\$	29,499
PENTAX MEDICAL		19-930			\$	9,266			\$	115,915
Radiation Physics and Engineering					<u> </u>	-,			\$	6,250
RICOH		19-930							\$	17,080
SIGNOSTICS INC		19-930			\$	22,020			\$	22,020
SCRIPTPRO					7	,520			\$	99,627

Description	CER Number	A	Amount Paid	Amount Paid	Amount Paid	Amount Paid
			JULY 2020	AUG 2020	SEPT 2020	Cumulative Total
SOFT COMPUTER	19-930	\$	16,419			\$ 32,838
Speedie and Associates	15 550	7	10,413			\$ 2,637
SPHERE COMMERCE						\$ 1,577
START-UP COST PEORIA	19-930					\$ 131,855
Steris	19-930				\$ 10,410	\$ 376,806
Stryker Communications	19-921				φ 10,110	\$ 837,976
TBCX	13 311	\$	7,020			\$ 149,421
TDINDUSTRIES	19-930	Ť	1,020			\$ 54,119
THE CBORD GROUP	19-930				\$ 2,417	\$ 9,208
THE CLOROX SALES	19-930				\$ 44,800	\$ 44,800
Thomas Printworks	19-930				, , , , , , , , , , , , , , , , , , , ,	\$ 4,200
TRANSONIC SYSTEMS						\$ 24,389
UTECH PRODUCTS						\$ 47,600
Vizient Inc						\$ 379,135
West Valley Fidelity National Title - Land Purchase (Grand Ave/Cotton)						\$ 5,595,598
West Valley Fidelity National Title (escrow)						\$ 75,000
TOTAL West Valley Specialty Center (WVSC)		\$	885,364	\$ (960,233)	\$ 122,760	\$ 63,934,610
Alliance Land Surveying LLC						\$ 1,825
Allstare Rent A Fence						\$ 1,703
Great American Title (escrow) - Chandler						\$ 1,199,345
SPEEDIE AND ASSOC	19-942					\$ 3,600
Ninyo and Moore Geotechnical and Environment						\$ 70,599
TOTAL Chandler FHC (CHAN)		\$	1	\$ -	\$ -	\$ 1,277,072
Fidelity National Title (escrow) - Miller&Main						\$ 1,977,097
Allstare Rent A Fence	19-944					\$ 2,246
SPEEDIE AND ASSOC	19-944					\$ 3,600
DAVES CONSTRUCTION	19-944					\$ 72,981
DIBBLE ENGINEERING						\$ 8,256
DWL ARCHITECTS + PLANNERS INC	19-944	\$	38,944	\$ 38,288	\$ 112,479	\$ 452,738
Maricopa County Planning					\$ 5,000	\$ 75,000
SPRAY SYSTEMS	19-944					\$ 29,640
Ninyo and Moore Geotechnical and Environment						\$ 45,355
TOTAL Mesa FHC (MESA)		\$	38,944	\$ 38,288	\$ 117,479	\$ 2,666,913
Clear Title Agency (escrow) - Central Phoenix Clinic						\$ 2,704,752
Clear Title Agency (escrow) - Phoenix Metro						\$ 50,000
Cushman and Wakefield of Arizona Inc						\$ 4,750
DAVES CONSTRUCTION	19-945			\$ (300)		\$ 171,254
JENSEN HUGHES	19-945	\$	398			\$ 398

Description	CER Number	Amount Paid	Amount Paid	Amount Paid	Amount Paid	
		JULY 2020	AUG 2020	SEPT 2020		Cumulative Total
Nicosa and Managa Contrological and Engineering					۲.	26.020
Ninyo and Moore Geotechnical and Environment					\$	36,938
SPEEDIE AND ASSOC					\$	3,600
Spray Systems  TOTAL Central Phoenix FHC (PHXM)		200	ć (200)	<u> </u>	т —	119,430
, ,	10.000	\$ 398	\$ (300)	\$ -	\$	3,091,123
DIBBLE ENGINEERING	19-929	24.050	4 400 706		\$	6,904
DWL ARCHITECTS + PLANNERS INC	19-929	\$ 24,968	\$ 138,726	4	\$	1,733,773
CME	19-929			\$ 137	\$	137
Fidelity National Title (escrow) - North Metro	19-929				\$	2,271,759
GE HEALTHCARE	19-929			\$ 129,188	\$	129,188
GOODMANS	19-929				\$	24,225
Hye Tech Network	19-929	\$			\$	63,847
Jensen Hughes	19-929	\$ 177	\$ 1,220		\$	7,921
LOVITT & TOUCHE	19-929				\$	3,144
MARICOPA COUNTY PLANNING AND DEVELOPMENT	19-929				\$	126,500
MDM COMMERCIAL	19-929			\$ 3,468	\$	3,468
OLYMPUS	19-929			\$ 1,232	\$	1,232
SCRIPTPRO	19-929	\$ 52,272			\$	52,272
SPEEDIE AND ASSOC	19-929				\$	9,650
SALT RIVER PROJECT	19-929				\$	23,973
Sundt Construction Inv	19-929				\$	4,012,905
THE CBORD GROUP	19-929	\$ 2,794			\$	2,794
TOTAL North Phoenix FHC (19AV)		\$ 144,058	\$ 139,946	\$ 134,024	\$	8,473,693
Cox Communications	19-928				\$	4,489
ALTURA	19-928	\$ 15,552	\$ 15,843	\$ 985	\$	41,851
ALLEGIANCE CORP	19-928		\$ 10,318		\$	10,318
BPG Technologies	19-928	\$ 28,048			\$	28,048
CAPSULE TECH	19-928	\$ 42,033			\$	56,193
CDW GOVERNMENT INC	19-928	\$ 13,461	\$ 1,130	\$ 11	\$	22,208
Centurylink	19-928	·			\$	24,539
CITY OF PHOENIX	19-928	\$ 905	\$ 519	\$ 856	\$	219,439
CME	19-928	\$	·		\$	154,723
COOPER ATKINS	19-928	\$		,	\$	6,576
Daniels Moving	19-928	-,	\$ 7,216		\$	7,216
DIBBLE ENGINEERING	19-928		,		\$	7,168
DWL ARCHITECTS + PLANNERS INC	19-928	\$ 12,832	\$ 7,912	\$ 9,518	\$	1,223,217
EXTENDATA	19-928	,-3-	\$ 11,102	2,310	\$	11,102
Fidelity National Title (escrow) - South Mountain	19-928				\$	743,456
FILLMASTER SYSTEMS	19-928				\$	1,494

Description		CER Number	Ar	mount Paid		Amount Paid	Amount Paid		Amount Paid		
			J	ULY 2020		AUG 2020		SEPT 2020		Cumulative Total	
GE HEALTHCARE		19-928	\$	306,601	Ś	68,160			Ś	502,285	
GRAINGER		19-928	7	300,001	7	00,100			\$	849	
HELMER		19-928	\$	20,426					\$	20,426	
HP INC		19-928	\$	86,887					Ś	86,887	
Hye Tech Network		19-928	\$	64,192			Ś	37,952	\$	102,144	
INTERMETRO INDUSTRIES		19-928	\$	3,157	\$	12,246	\$	2,165	\$	17,568	
JENSEN HUGHES		19-928	\$	2,817		12,2.0	Ψ	2,200	\$	7,545	
LOVITT & TOUCHE		19-928	7	_,					Ś	3,248	
MARICOPA COUNTY PLANNING AND DEVELOPMENT		19-928					\$	615	\$	58,165	
MDM COMMERCIAL		19-928	\$	4,139			,		\$	4,139	
MONOPRICE		19-928	\$	526					\$	526	
NATUS		19-928							\$	2,130	
OLYMPUS AMERICA		19-928							\$	1,229	
Ricoh		19-928			\$	132			\$	132	
SCRIPTPRO USA INC		19-928	\$	41,818			\$	10,454	\$	104,544	
SOUTH MOUNTAIN RETAIL		19-928	\$	(8,387)				·	\$	-	
Speedie and Associates		19-928	\$	1,945	\$	760			\$	14,195	
SPHERE COMMERCE		19-928			\$	795			\$	795	
SRP		19-928							\$	8,907	
Sundt Construction Inc		19-928	\$	1,671,991	\$	1,161,484	\$	590,268	\$	6,430,188	
Stryker Communications		19-28					\$	12,379	\$	12,379	
TEMP ARMOUR		19-928	\$	6,448					\$	6,448	
THE CBORD GROUP		19-928			\$	2,794			\$	2,794	
TRANSACT		19-928	\$	135,402	\$	108,387			\$	377,596	
THOMAS PRINTWORKS		19-928							\$	351	
TOTAL South Phoenix FHC (SPHX)			\$	2,485,232	\$	1,492,532	\$	708,331	\$	10,327,508	
CDW GOVERNMENT INC		19-946							\$	85	
CME		19-946	\$	516					\$	516	
DIBBLE ENGINEERING									\$	6,534	
DWL ARCHITECTS + PLANNERS INC			\$	79,798	\$	66,610			\$	500,957	
Fidelity National Title (escrow) - 79thAve&Thomas									\$	1,873,138	
INVIVO CORP		19-946	\$	53,865					\$	53,865	
JENSEN HUGHES		19-946	\$	398					\$	398	
MARICOPA COUNTY PLANNING AND DEVELOPMENT									\$	50,000	
Ninyo and Moore Geotechnical and Environment									\$	17,200	
Okland Construction Company		19-946					\$	329,405	\$	329,405	
SUNDT CONSTRUCTION		19-946			\$	902,095			\$	4,155,808	
SMITHCRAFT SIGNS		19-946	\$	880					\$	880	

## Care Reimagined - Spend report

Description	CER Number	Amount Paid	Amount Paid	Amount Paid	Amount Paid
		JULY 2020	AUG 2020	SEPT 2020	Cumulative Total
SPEEDIE AND ASSOC	19-946				\$ 3,800
SRP	19-946				\$ 24,358
TOTAL West Maryvale FHC (WM79)		\$ 135,458	\$ 968,705	\$ 329,405	\$ 7,016,944

<u> </u>	\$ 3	,689,455	\$	1,678,938	\$	1,411,999	\$	96,787,86
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### Note: Prior months amount paid are hidden

Functional Area - Behavioral Health Services					
Adams and WENDT					\$ 103,416
ADVANCED INN VATIVE SOLUTIONS					\$ 11,735
Airclean Systems	19-912				\$ 5,064
Alliance Land Surveying LLC					\$ 2,400
Allscripts Healthcare	18-913				\$ 240,450
Allscripts Healthcare	19-909		\$ 120,2	5	\$ 172,785
Altura Communications	19-909				\$ 489,352
Altura Communications	19-939				\$ 91,807
Amazon	19-909				\$ 1,080
AMT Datasouth	19-912				\$ 4,040
ARC Products LLC	19-912				\$ 22,560
ARIZONA DEPT OF HEALTH	19-939				\$ 150
Arizona Lock and Safe					\$ 1,025
Armstrong Medical	19-912	\$ (120)			\$ 35,482
Arrington Watkins Architects					\$ 301,274
Arrow International	19-912				\$ 598
Baxter Healthcare Corp	19-912				\$ 5,368
Bayer Healthcare	18-920				\$ 74,376
BEL-Aire Mechanical					\$ 40,215
Burlington Medical	19-912				\$ 2,906
CAPSA SOLUTIONS	19-909				\$ 5,936
Capsule Tech	19-912				\$ 143,422
Cardinal Health	19-912				\$ 102,300
CDW Government	19-909		\$ 3,8	7	\$ 271,862
CDW Government	19-938				\$ 48,448
CDW Government	19-939		\$ 10,5	2	\$ 159,897
CME	19-912				\$ 178,774
Comprehensive Risk Services					\$ 474,403
Coviden	19-912				\$ 11,736
Crosspoint Communications					\$ 25,724

Description	CER Number	Amo	ount Paid	Amount P	aid	Amount Paid		Amount Paid
		JU	LY 2020	AUG 202	20	SEPT 2020		Cumulative Total
Detected Contents	10.000						,	18,500
Datcard Systems DEC MEDICAL	19-909						\$	
	18-918			<u> </u>	(4.5)		<u> </u>	80,529
Delynn Consultant	19-940			\$	(15)		\$	114,187
DLR Group Inc							\$	4,222,015
EMD Millpore	19-912						\$	7,175
ENDOSCOPE SERVICES	19-912						\$	26,585
Epstexas Storage	19-912						\$	423
EQ2 LLC	19-912						\$	41,000
Ethos Evacuation	19-912						\$	10,130
ETL REPONSE	19-912						\$	29,482
EXTENDATA SOLUTIONS							\$	66,659
Felix Storch Inc							\$	5,796
FERGUSON ENTERPRISES	19-912						\$	3,571
First American Title - Maryvale Hospital							\$	7,438,977
Follett	19-912						\$	38,837
GE Healthcare	18-915	\$	(585,436)			\$ 178,223	\$	661,640
GE Healthcare	19-901						\$	14,880
GE Healthcare	18-917						\$	766,491
GE Healthcare	18-918						\$	3,034,632
GE Healthcare	19-938						\$	13,999
GE Medical Systems	19-912						\$	746,560
GE Medical Ultrasound	18-917						\$	139,527
General Devices	19-912						\$	47,400
Gentherm	19-912						\$	16,692
Gilbane Building CO.		\$	525,177				\$	55,096,032
Global Equipment	19-912						\$	6,679
Goodmans	19-916						\$	96,476
Goodmans	19-917						\$	104,809
Goodmans	19-923						\$	518,395
Goodmans	19-926						\$	154,049
Goodmans	19-939						\$	1,570
Goodmans	18-913			\$	4,650		\$	4,830
Grainger	19-912			•	,		\$	64,690
Graybar Electric							\$	5,586
GUEST COMMUNICATIONS	19-912						\$	17,130
Haemonetics	19-912						\$	83,854
HD Supply Facilities Maintenance Ltd	19-912						\$	40,838
Helmer Inc	19-912			\$	3,550		\$	151,587

Description	CER Num	ber Amount Pa	aid Amount Paid	Amount Paid	Amount Paid
		JULY 202	0 AUG 2020	SEPT 2020	Cumulative Total
LEI Davis					ć 20.400
Hill Rom	40.00				\$ 20,409
HP INC	19-909				\$ 317,009
HP INC	19-939				\$ 168,146
HUMANE RESTRAINT	19-909				\$ 40,160
Hye Tech Network	19-909	9			\$ 510,244
IMEG Corp					\$ 91,590
Interior Solutions	19-923				\$ 238,194
Interior Solutions	19-920				\$ 100,132
Intermetro Industries	19-912				\$ 42,332
Intersan Manufacturing	19-912	2			\$ 3,603
Jensen Hughes					\$ 1,020
Kronos Inc					\$ 72,000
Lanmor Services Inc					\$ 2,824
LOGIQUIP	19-912	2			\$ 1,059
MARICOPA COUNTY PLANNING AND DEVELOPMENT					\$ 310,450
MARKETLAB	19-912	2			\$ 10,839
MCG HEALTH LLC					\$ 37,017
MDM Commericial	19-909	9			\$ 40,622
Medline	19-912	2			\$ 3,628
Medtronic	19-912	2			\$ 7,990
Mindray	19-912	2			\$ 9,998
Monoprice	19-909	)			\$ 1,424
Monoprice	19-939	)		\$ 513	\$ 842
MOPEC	19-912	2			\$ 17,220
NORIX GROUP INC	19-926	5			\$ 11,918
NANOSONICS INC	19-912	2			\$ 22,944
Nindray DS USA Inc	19-912	2			\$ 85,002
Ninyo and Moore Geotechnical and Environment	19-923				\$ 4,570
NORIX GROUP INC					\$ 400,689
Olympus America					\$ 32,231
OEC Medical Systems	19-904	1			\$ 80,529
OMC INVESTERS LLC					\$ 11,518
Owens and Minor	19-912	2			\$ 54,193
PAC VAN					\$ 505
Parks Medical	19-912				\$ 2,130
Philips Healthcare	18-92				\$ 38,523
Physio Control	19-912				\$ 19,458
Progressive Roofing	19-932				\$ 84,628

Description	CER Num	ber	Amount	t Paid	Amount Paid	Amount Paid		Amount Paid
			JULY 2	2020	AUG 2020	SEPT 2020		Cumulative Total
PRONK TECHNOLOGIES INC							Ś	3,040
QRS Calibrations	19-912	,	_				\$	7,056
Radiation Physics and Engineering	18-91						\$	1,250
Radiation Physics and Engineering	18-920						\$	1,600
RAY-BAR	18-913		\$	4,905			\$	4,905
RETAIL MANAGEMENT SOLUTIONS	10-31.	<u>,                                     </u>	٦	4,303			\$	5,961
RICOH AMERICAS CORPORATION							Ś	30,012
RISK CLAIM 1517	19-912	2	\$	(901)			Ś	(901)
Ruiz Custom Upholstery	19-912		,	(301)			Ś	53,718
SCOTTSDALE RESTAURANT SUPPLY	15 512	-					\$	5,391
Signodtics	19-912	2					Ś	22,460
Smiths Medical	19-912						\$	9,253
SOFT COMPUTER CONSULTANT INC	13 31.	-					\$	43,038
Smithcraft Signs	18-913	3			\$ 10,266		\$	10,266
Speedie and Associates	1001				Ψ 10,200		\$	2,189
SPEEDIE AND ASSOCIATES INC							\$	15,635
Standard Textile	19-912	2					Ś	4,380
Stryker Communications	19-910	5					\$	170,089
Steris Corp							\$	13,950
Stryker							\$	384,697
TBJ Inc	19-912	2					\$	5,654
TD INDUSTRIES	19-924	4					\$	406,296
The Cbord Group	19-909						\$	26,605
THYSSENKRUPP ELEVATOR CORP	19-912	2					\$	587,346
Translogic	19-912	2					\$	3,931
Tucson Business Interiors	19-912	2					\$	3,000
Tucson Business Interiors	19-923	3					\$	34,193
Tucson Business Interiors	19-926	5					\$	335,704
UMF Medical	19-912	2					\$	11,536
Verathon	19-912	2					\$	14,020
VERIZON	19-909	)					\$	16,853
WAXIE	19-912	2					\$	3,002
World Wide Technology							\$	701,382
Zoll Medical	19-912	2					\$	46,099
TOTAL Maryvale Campus (MV)			\$ (	(56,375)	\$ 153,105	\$ 178,736	\$	82,801,992
Adams and Wendt	19-936	5			\$ 5,694		\$	61,337
AIRPARK SIGNS							\$	1,305
Arizona Department of Health	19-936	5			\$ 150		\$	600

## Care Reimagined - Spend report

Description	CER Number	,	Amount Paid	Amount Paid	Amount Paid	Amount Paid
			JULY 2020	AUG 2020	SEPT 2020	Cumulative Total
AFFILIATED ENGINEERS	19-936			\$ 1,125		\$ 70,100
BUREAU VERITAS						\$ 7,031
Engineering Economics	19-936	\$	13,898			\$ 19,198
GOODMANS	19-936					\$ 89,604
Grainger	19-936					\$ 5,504
JENSEN HUGHES	19-936	\$	805	\$ 2,124	\$ 797	\$ 8,991
KITCHELL	19-936	\$	131,091	\$ 214,472		\$ 3,719,315
MARICOPA COUNTY PLANNING AND DEVELOPMENT	19-936					\$ 230
Speedie and Assoc						\$ 3,185
Valley Systems	19-936				\$ 730	\$ 7,038
TOTAL Annex HVAC Replacement (RSVT)		\$	145,793	\$ 223,564	\$ 1,526	\$ 3,993,436
						\$ -
						\$ -
TOTAL Annex Building Remodel (RSVT)		\$	-			\$ -

Note: Prior months amount paid are hidden

Functional Area - Acute Care Facilities					
eSTF - Enterprise Strengthening the Foundation (see attached for detail)	17-900			\$	14,000,000
Client & Mobility (Phase 1)	16-934			\$	1,434,893
Client & Mobility (Phase 2)	17-906			\$	1,512,376
IPT (PBX Replacement)	16-909	\$ 18,26	8	\$	2,739,433
Legacy Storage (DP-007)	16-910			\$	2,506,978
Single Sign on	17-913			\$	81,150
Perimeter, Internal security	16-900			\$	67,213
Perimeter, Internal security	18-907			\$	151,310
Perimeter, Internal security	18-910			\$	44,235
Perimeter, Internal security	18-912			\$	51,561
Epic 2014 Monitors (Phase 1)	16-933			\$	341,470
Epic 2014 Monitors (Phase 2)	17-905			\$	474,480
LCM	16-937			\$	199,936
SEIMS	17-912			\$	235,134
SEIMS	18-911			\$	14,468
ESB Framework Enablement	18-914			\$	1,111,233
Clinical Image Repository	18-915			\$	1,271,214
Imprivata Identity	18-916			\$	576,880
Chartmaxx Infrastructure Upgrade	19-906			\$	859,682

Description	CE	R Number	Amount Paid	Amount Paid	Amount Paid		Amount Paid
			JULY 2020	AUG 2020	SEPT 2020	(	Cumulative Total
Imprivata ConfirmID		19-911				\$	137,295
ESB (Tibco) - Infrastructure		19-911				\$	,
		19-916				Ş	34,861
PWIM Global Monitor Software - additional funding required to support		16-924				\$	35,400
implementation of CER15-075, Cloverleaf Availability		10 32 1					33, 100
Patient monitors - High Acuity		16-908				\$	6,240,243
Stretcher replacement		16-912				\$	395,538
IVUS - intravascular ultrasound for placement of stents		16-922				\$	128,371
Vigileo Monitors (8)		16-928				\$	96,132
Balloon Pumps		16-920				\$	149,197
Zeiss - Cirrus HD opthal camera		16-919				\$	60,654
Vivid Q BT12 Ultrasound		16-931				\$	55,019
Zoll Thermoguard XP (formerly Alsius)		16-906				\$	33,230
3:1 Mesher		16-927				\$	12,870
1:1 Mesher		16-927				\$	26,190
2:1 Mesher		16-927				\$	26,190
Urodynamics machine (for surgery clinic)		16-929				\$	17,935
UltraMist System		16-925		\$ (75)		\$	20,195
Doppler		16-935				\$	3,950
Ultrasound (for breast clinic)		16-931				\$	22,685
Biom 5		16-930				\$	8,103
Wilson Frame		18-902				\$	4,852
Medical Beds for Psych Units		16-932				\$	211,197
King Tong Pelvic fx reducer		16-926				\$	9,500
Stryker Core Power EquipmentContract		16-904				\$	369,113
Patient Monitoring (Low Acuity) - Formerly named Alarm Management		16-907				\$	347,029
AIMS Upgrade		16-901				\$	51,232
AIMS Upgrade		16-902				\$	12,000
AIMS Upgrade		16-903				\$	112,850
Temperature Monitoring - Non FQHC Depts		17-908				\$	133,615
2 Pillcams for Endo		17-911				\$	13,826
Replace 11 ultrasounds		16-931				\$	1,142,345
POC Ultrasounds (10)		16-931				\$	634,702
Ice Machine Replacement		16-911				\$	23,881
Steam Condensate Return Piping Replacement		16-914				\$	62,529
Laundry/Finance/Payroll/Facilities Roof Repairs		17-917				\$	82,955
MMC 7th Floor Roof		16-905				\$	274,582
Facility upkeep		17-910				\$	4,205

Description	CER Number	Amount Paid		Amount Paid	Amount Paid		Amount Paid
		JULY 2020		AUG 2020	SEPT 2020		Cumulative Total
Facility unknown	10.005					Ś	CO 210
Facility upkeep	18-905					\$	69,218
Colposcopes	18-909	_				\$	24,607
Chandler ADA Doors   Gienuale Digital A-Kay unit and Sensors (Panoranic Digital AND Noma)	18-042					т —	5,867
digital)	16-917					\$	63,217
Chandler Dental Digital Radiology - Panoramic x-ray	16-915					\$	63,564
CHC - Digital Panoramic x-ray	16-916	_				\$	60,419
CHC Dental Replace Chairs Lights, Compressor and Deliverey Units	18-905					\$	127,642
CHC Cost for new equipment and cost of moving existing to Avondale X-Ray	16-921					\$	83,327
Avondale- Replace all flooring.	17-904					\$	72,635
Temperature Monitoring - FQHC Depts	17-909					\$	82,219
McDowell Dental	16-918					\$	15,990
rooms to occommodate 1st 2nd 9 2rd ur residents os of July 1, 2017 plus	18-900					\$	221,124
CHC Dental Autoclave Replacement including printer & Cassette rack	18-908					\$	19,122
Chandler Dental Autoclave Replacement including printer & Cassette rack	18-908					\$	6,374
Avondale Dental Autoclave Replacement including printer & Cassette rack	18-908					\$	6,374
FHC Helmer Medical Refrigerators	17-714					\$	11,110
FHC Helmer Medical Refrigerators	17-901					\$	169,399
Cabinet and Countertop Replacement South Central FHC	18-904					\$	8,419
CHC Dental Refresh	18-905					\$	96,361
POC Molecular (26 units)	19-914					\$	1,049,613
Bili Meter - Draegar (10 units)	19-927					\$	71,875
Colposcope - Guadalupe	19-925					\$	9,927
EKG machines (3 units)	19-922					\$	37,278
Bond related expenses (legal fees, etc.)	N/A					\$	325,646
Audiology - Astera Audiometer	16-913					\$	11,326
3rd Floor Behavioral Health/Medical Unit Remodel	17-903			\$ 1,318		\$	2,570,464
22 Behavioral Health Beds for 3rd Floor MMC	17-907					\$	188,527
Replace MMC Radiology GE Fluoroscopy Imaging Equipment	17-914					\$	262,145
Endura CCTV System Replacement	18-901					\$	168,739
IT - (17-900) eSTF Project	17-900			\$ 3,027		\$	95,059
Diablo Infrastructure Costs	18-903			,		\$	400,721
Epic Willow - Ambulatory & Inventory	18-906					\$	428,269
Navigant - Proposition 480 planning	16-923					\$	994,000
Kaufmann Hall - Prop 480 planning	16-923					\$	370,019
IPv4Xchange (ARIN Based Transfer Escrow Payment)	16-923		1			\$	7,040
Vanir Construction Management (Planning Phase)	17-915					\$	749,971
Vanir Construction Management (\$48M) (\$48,300,501 - Entire Project)	17-916	\$ 809,10	59	\$ 52.636	\$ 807,315	\$	15,423,980
IPMO Modular Building	17-902	+ 303,10	-	- 32,030	+ 557,515	\$	329,631

Dickenson Wright PLLC Sims Murrary LD Devenney Group LTD MTI Connect Inc SHI INTERNATIONAL Payroll/Supplies/Misc Expenses EPIC replatform and upgrade to 2016 (see attached for detail) Reimbursement for Capital Expenditures TOTAL Tranch 1 Atlantic Relocation Systems Bond issuance costs BPG Technologies LLC Cable Solutions LLC DH Pace	16-923 16-923 16-923 16-923 19-911 16-923 17-900 N/A	\$ \$	827,437 3,430	\$	(3,210) (116,737		125,024	\$ \$ \$ \$	178,285 31,772 242,450 181 2,577
Sims Murrary LD  Devenney Group LTD  MTI Connect Inc  SHI INTERNATIONAL  Payroll/Supplies/Misc Expenses  EPIC replatform and upgrade to 2016 (see attached for detail)  Reimbursement for Capital Expenditures  TOTAL Tranch 1  Atlantic Relocation Systems  Bond issuance costs  BPG Technologies LLC  Cable Solutions LLC	16-923 16-923 16-923 19-911 16-923 17-900			\$		\$	125,024	\$ \$ \$ \$	31,772 242,450 181 2,577
Sims Murrary LD  Devenney Group LTD  MTI Connect Inc  SHI INTERNATIONAL  Payroll/Supplies/Misc Expenses  EPIC replatform and upgrade to 2016 (see attached for detail)  Reimbursement for Capital Expenditures  TOTAL Tranch 1  Atlantic Relocation Systems  Bond issuance costs  BPG Technologies LLC  Cable Solutions LLC	16-923 16-923 16-923 19-911 16-923 17-900			\$		\$	125,024	\$ \$ \$ \$	31,772 242,450 181 2,577
Devenney Group LTD  MTI Connect Inc  SHI INTERNATIONAL  Payroll/Supplies/Misc Expenses  EPIC replatform and upgrade to 2016 (see attached for detail)  Reimbursement for Capital Expenditures  TOTAL Tranch 1  Atlantic Relocation Systems  Bond issuance costs  BPG Technologies LLC  Cable Solutions LLC	16-923 16-923 19-911 16-923 17-900			·	116,737	\$	125,024	\$ \$ \$	242,450 181 2,577
MTI Connect Inc  SHI INTERNATIONAL  Payroll/Supplies/Misc Expenses  EPIC replatform and upgrade to 2016 (see attached for detail)  Reimbursement for Capital Expenditures  TOTAL Tranch 1  Atlantic Relocation Systems  Bond issuance costs  BPG Technologies LLC  Cable Solutions LLC	16-923 19-911 16-923 17-900			·	116,737	\$	125,024	\$	181 2,577
SHI INTERNATIONAL Payroll/Supplies/Misc Expenses EPIC replatform and upgrade to 2016 (see attached for detail) Reimbursement for Capital Expenditures TOTAL Tranch 1 Atlantic Relocation Systems Bond issuance costs BPG Technologies LLC Cable Solutions LLC	19-911 16-923 17-900			·	116,737	\$	125,024	\$	2,577
Payroll/Supplies/Misc Expenses  EPIC replatform and upgrade to 2016 (see attached for detail)  Reimbursement for Capital Expenditures  TOTAL Tranch 1  Atlantic Relocation Systems  Bond issuance costs  BPG Technologies LLC  Cable Solutions LLC	16-923 17-900			·	116,737	\$	125,024	\$	
EPIC replatform and upgrade to 2016 (see attached for detail)  Reimbursement for Capital Expenditures  TOTAL Tranch 1  Atlantic Relocation Systems  Bond issuance costs  BPG Technologies LLC  Cable Solutions LLC	17-900			·	116,/3/	\$	125,024	<u> </u>	4 000 040
Reimbursement for Capital Expenditures  TOTAL Tranch 1  Atlantic Relocation Systems  Bond issuance costs  BPG Technologies LLC  Cable Solutions LLC				¢			ì		1,832,019
TOTAL Tranch 1  Atlantic Relocation Systems  Bond issuance costs  BPG Technologies LLC  Cable Solutions LLC	N/A			۲				\$	7,675,491
Atlantic Relocation Systems  Bond issuance costs  BPG Technologies LLC  Cable Solutions LLC								\$	36,000,000
Bond issuance costs  BPG Technologies LLC  Cable Solutions LLC		\$	2 /20	\$	170,433	\$	932,339	\$	109,332,106
BPG Technologies LLC Cable Solutions LLC			3,430	\$	177			\$	39,819
Cable Solutions LLC								\$	1,163,260
								\$	116,183
DH Pace								\$	53,370
								\$	1,468
Dickinson Wright PLLC						\$	23,711	\$	299,836
Enterprise Security	16-923							\$	13,715
FC Hospitality	16-923							\$	8,376
HD Supply Facilities Maintenance Ltd								\$	3,780
Hye Tech Neywork and Security Solutions								\$	41,154
Innerface Architectural Signage								\$	14,761
IPMO Modular Building	17-902	\$	(120,525)					\$	45,466
Goodmans								\$	4,790
GOODMANS	16-923							\$	19,996
JRC DESIGN	19-955	\$	39,955	\$	94,950			\$	134,905
Lovitt & Touche Inc	19-934	\$	53,177	\$	(8,343)	\$	31,354	\$	3,434,907
MIHS IPMO Food - Catering	16-923							\$	104
PAC-VAN	19-955	\$	69,985					\$	71,160
Payroll/Supplies/Misc Expenses			,					\$	3,139,885
PHOENIX FENCE								\$	2,283
Sims Murrary LD				\$	(1,568)			Ś	28,518
Skyline Builders And Restoration Inc				т	(=,==,			\$	122,769
Tempe Diablo LLC								Ś	33,132
Tucson Business Interiors								\$	447,192
Vanir Construction Management (\$48M) (\$48,300,501 - Entire Project)								\$	13,838,782
World Wide Technology Co Inc								\$	5,978
Zurich North America	16-923							Ś	47,500
TOTAL Enterprise	10-323	\$	46,022	\$	85,216	\$	55,065	\$	23,133,091
Adams and Wendt	19-935	Ş	40,022	\$	65,210	۲	22,002	Ş	23,133,091

Description	CER N	umber		Amount Paid		Amount Paid	А	mount Paid		Amount Paid
				JULY 2020		AUG 2020		SEPT 2020		Cumulative Total
ADC	10	225							۲.	224.266
APS	19-		-			126.022			\$	331,266
Affiliated Engineers Inc	19-				\$	126,922			\$	2,022,281
Affiliated Engineers Inc	19-	935	-		-				\$	2,058,558
Arnold Machinery	- 10		-						\$	34,209
CDW GOVERNMENT INC	19-								\$	337
DP Electric	19-								\$	6,987
ENGINEERING ECONOMICS	19-		\$	11,85	6				\$	64,906
GOODMANS	19-	935					\$	3,133	\$	3,133
JENSEN HUGHES		_	\$	2,50					\$	8,235
KITCHELL	19-		\$	3,207,50	5 \$	1,405,582	\$	965,300	\$	44,161,386
Maricopa County	19-	935							\$	239,965
MDM COMMERCIAL	19-	935					\$	1,483	\$	1,483
RICOH									\$	456
Soft Computer Consultants	19-	935							\$	46,513
SMITHCRAFT SIGNS	19-	935					\$	5,527	\$	5,527
Speedie snd Assoc			\$	1,05	5 \$	4,099	\$	480	\$	23,920
SOUTHWEST GAS	19-	935							\$	121,938
THE CBORD GROUP									\$	13,022
Thomas Printworks	19-	935							\$	3,069
VALLEY SYSTEMS	19-	935							\$	371
WESTERN STATES FIRE	19-	935			\$	705			\$	705
							•			
TOTAL Central Utility Plant (RSVT)			\$	3,222,91	9 \$	1,552,847	\$	975,923	\$	49,183,828
ADAMS AND WENDT	19-	949					\$	2,950	\$	11,123
AFFILIATED ENGINEERS	19-	948			\$	18,850			\$	198,875
AFFILIATED ENGINEERS	19-	954							\$	1,050
ARIZONA PUBLIC SERVICE	19-	947							\$	1,391,892
ATLANTIC RELOCATIONS	19-	948					\$	172	\$	172
BPG TECH	19-	948							\$	3,988
CITY OF PHOENIX	19-	947							\$	79,102
Cuningham Architect	19-	947	\$	2,811,42	5 \$	1,328,057	\$	1,508,452	\$	19,607,154
Devenney Group LTD						· · ·			\$	530,623
EXCESSIVE CARTS	19-	948							\$	22,782
FC HOSPITALITY	19-		\$	20,64	1 \$	20,742			\$	173,927
Follett	16-			-,	T	-7			Ś	5,249
GOODMANS					_				\$	41,858
Innerface Architectural Signage	19-	948							\$	862
JENSEN HUGHES	19-				Ś	897			\$	5,589

## **Care Reimagined - Spend report**

Description	CER Number	Α	mount Paid	Amount Paid	Amount Paid	Amount Paid
			JULY 2020	AUG 2020	SEPT 2020	Cumulative Total
KITCHELL	19-947	\$	8,816,468	\$ 5,813,811	\$ 4,061,435	\$ 36,263,190
KITCHELL	19-937	\$	4,708			\$ 667,452
KITCHELL	19-948					\$ 59,850
MARICOPA COUNTY PLANNING AND DEVELOPMENT					\$ 14,961	\$ 631,199
NINYO AND MOORE	19-947	\$	3,200			\$ 3,200
OFFSITE EQUIPMENT STORAGE	19-948					\$ 650
PAC-VAN	19-947	\$	54,150			\$ 62,185
RMJ Electrical Contractors						\$ 551
Smithcraft Signs	19-947	\$	(86,425)			\$ 0
SPEEDIE AND ASSOC	19-947			\$ 38,330	\$ 10,570	\$ 48,900
SWISSLOG	19-947					\$ 2,500
Valley Systems	19-948					\$ 960
Speedie and Assoc						\$ 30,628
SRP	19-947	\$	500			\$ 500
Trademark Visual	19-948					\$ 2,576
Thomas Printworks						\$ 7,517
TOTAL Roosevelt Campus Site Development Plan (RSVT)		\$	11,624,668	\$ 7,220,687	\$ 5,598,540	\$ 59,856,103

\$ 15,721,046 \$

Bond Proceeds received to date:

\$631,287,454

**TOTAL MONTHLY SPENT AMOUNT** 

\$ 1	19,499,918	\$	11,084,789	\$	9,154,128	\$	425,088,420
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7,561,867 \$

9,029,182 \$

**REMAINING Cash for disbursement** 

\$ 206,199,034

241,505,128



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 5.c.

Reports to the Board

Monthly Valleywise Health's Turnover

Report – September 2020



# Human Resources Board Turnover Analysis

October 2020

# Summary

- Overall voluntary turnover has increased by 0.28% from prior month (August 16.14% to September 16.42%).
  - Goal #4A People: minimum target 16.26%:
    - 0.16% from reaching minimum goal target.
- New initiatives for FY21 turnover reduction and retention:
  - · More focus on specific voluntary termination reasons. This allows an opportunity for proactive focal points to increase retention.
  - · Internal taskforce developed to create dialogue and innovation for retention efforts.
  - · New specific data by leader to allow more precise conversations and opportunity for accountability:
    - 30 and 90 day new hire survey data
    - Engagement survey trend results for FY19 and FY20
    - An onboarding experience that is specific for each level of position
    - · Exit interview surveys
- First year turnover analysis:
  - HR will continue to prepare monthly analysis for first year turnover and share with leadership.
  - First year voluntary turnover has increased by .23% (August 29.99% to September 30.22%).
- Benchmark:
  - The healthcare 2019 benchmark average for overall turnover is 18.7%.



## **ALL Valleywise Health Summary**

September - 2020	Avg Emps	Avg Emps 1Yr	Hires	VOL 1 Yr	VOL 1st Yr %	VOL	VOL%
Administrative	43.17	13.17	8	2	1.27%	7	1.35%
Clinical (Non-Licensed)	74.75	31.58	25	10	2.64%	16	1.78%
Clinical Licensed	20.33	4.83	4	3	5.17%	3	1.23%
Clinical Tech & Specialists	11.25	3.33	2	1	2.50%	2	1.48%
Management & Supervision	16.58	2.25	2	2	7.41%	2	1.01%
Professional	20.83	5.83	2	2	2.86%	3	1.20%
Provider Non-Physician	1.50	0.33	0	0	0.00%	0	0.00%
RN	73.67	23.33	10	3	1.07%	8	0.90%
Support	13.17	5.25	3	2	3.17%	2	1.27%
Total	275.25	89.92	56	25	2.32%	43	1.30%

	Avg	Avg	Hires	VOL 1 Yr	VOL 1st	VOL	VOL%
Total (Last 12 Months)	Emps	Emps 1Yr			Yr %		
Administrative	517.42	150.50	117	47	31.23%	99	19.13%
Clinical (Non-Licensed)	897.42	368.67	278	121	32.82%	173	19.28%
Clinical Licensed	244.25	56.50	44	12	21.24%	22	9.01%
Clinical Tech & Specialists	135.92	39.08	20	7	17.91%	21	15.45%
Management & Supervision	207.33	34.33	20	10	29.13%	28	13.50%
Professional	244.67	66.25	46	14	21.13%	31	12.67%
Provider Non-Physician	18.50	2.17	3	0	0.00%	0	0.00%
RN	876.58	266.58	188	90	33.76%	139	15.86%
Support	152.42	55.00	45	13	23.64%	28	18.37%
Total	3292.33	1037.42	761	314	30.22%	541	16.42%





# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 5.d.

Reports to the Board

Quality Management Council Meeting

Minutes – August 2020



**Meeting Minutes** 

# Quality Management Council

8/27/2020 • 8:00 AM - 9:30 AM • WebEx

A = Absent $E = Excused$ $G = Gt$	uest P = Present				
CHAIR/FACILITATOR	Dan Hobohm, MD				
MEMBERS/ATTENDEES	Barbara Harding, RN	David Wisinger, MD	Kevin Lopez, MD	Paul Pugsley, MD	
	Carol Olson, MD	Dorinne Gray, RN	LT Slaughter	Sherrie Beardsley, RN	
	Christelle Kassis, MD	Elizabeth Ferguson, MD	Manuel Soto-Griego	Sherry Stotler, RN	
	Crystal Garcia, RN	Gene Cavallo	Mary Harden, RN	Steve Purves	
	Dale Schultz	Heather Jordan, RN	Michael White, MD	Tony Dunnigan, MD	
	Dan Hobohm, MD	Jo-el Detzel, RN	Nancy Kaminski		
	Dan Quan, MD	Kelly Summers	Nelson Silva-Craig, RN		

PURPOSE: Quality and Patient Safety Improvement

## CALL TO ORDER

Topic	Findings/Discussion	Conclusion/Action	Responsible
Approval of Minutes	Approval of July 23, 2020 Minutes.	Minutes were approved as written.	Committee
Consent Agenda	PCSC - committee minutes and reports; action plans; dashboards.	Consent agenda items were approved.	Committee

I. Action item follow-up / Loop closures / Unfinished Business

	Topic	Findings/Discussion	Conclusion/Action	Responsible
A	Just Culture  – Sherry Stotler	Deferred		
В	Survey Finding and Plan of Corrections – Sherry Stotler	<ul> <li>DNV GL Remote Survey was 7/28/20 – 7/31/20, 4 surveyors for Med Ctr, BH &amp; Ambulatory settings.</li> <li>Focus was on Infection Control and Facilities</li> <li>Closed out three NC from last year</li> <li>Received NCs for this year.</li> <li>Recently received report from DNV: 1 NC1 and 3 NC2s; have been forwarded to the responsible people who will take care of the action plans.</li> <li>Will be submitting action plans to DNV next week for approval.</li> <li>NC1 action plans needs to be implemented within 60 days and show evidence of that.</li> <li>Regulatory Internal Audits are being planned based on opportunities for improvements from DNV.</li> </ul>	New findings: Utility     Management     (Inspection of Gases     in Operating Room     and MRI Battery     Operated Exit sign),     Safety Management     (thermometers) and     Medical Staff	

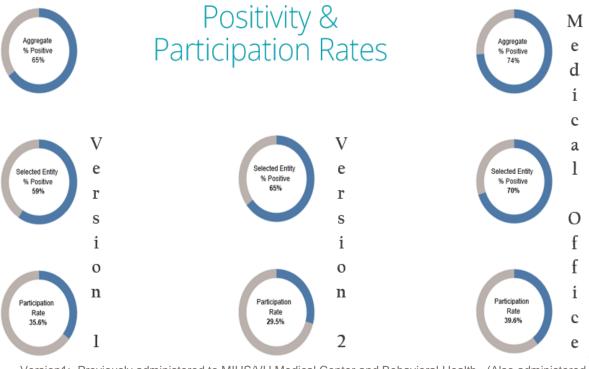
0	Next year is our recertification survey (more surveyors) and will be onsite.	(Scorecards)	
	- Ligature Risk Assessment for Medical Center and Behavioral Health needs to be completed.		
0	At the closing the surveyors recognized the comprehensive services provided across the organization and		
	acknowledged that we have highly functioning teams.		
0	Restraint Documentation – DNV has removed conformity.		

	II. Standing R																							
	Topic	Findings/Discussion																					Conclusion/Action	Responsible
Α	System Wide/CEO Goals (Quarterly) –	Next report will be Sep	otemb	er 2	020.																			Sherry Stotler
В	Quality Dashboard – Sherry	Quality Dashboard	Repor	ing of the al	kendinati jirja keari	Date driver	peter juliate	A.18 2019	sepath <sup>9</sup>	H. Lev 2000	Orlans,	Mon Idis De	e Into	r 2 Pry 2020	an loss fel	And Market	OH3E42E	DOI NO TO	D May 202	Mr. 2000	derafer 2000)	D. Real HO		
	Stotler	Overall worked ICU and general patient unit hours per patient day equivalents (excl. L&D, and post-partum)**	LF	13.92	14.03 NA	12.6	1 13.43	13.11	13.04	13.49	14.00	13.59	13.69	13.29	13.47	15.00 13.8	6 15.1	8 16.4	14.28	15.25	13.88			
		Overall worked ED hours per patient visit (incl. adult, pediatric and burn)***	LF	3.05	<b>2.92</b> NA	2.39	2.90	3.03	2.95	3.17	3.01	2.80	2.99	2.63	2.80	3.38 2.9	3.68	3.12	2.84	3.16	2.98	1		
		Pre-op/PACU worked hours per total cases**	LF	5.65	5.52 NA	5.23	5.11	5.54	5.28	5.27	6.09	5.79	5.69	5.69	5.24	6.59 5.5	5.15	5 6.84	5.45	5.78	5.41	1		
		Healthcare Associated Infections; *Incl. in Leapfrog					<u> </u>																	
		Hand Hyglene Compliance (Percent)  Central Line Associated Blood Stream Infection (CLABSI) Standardized	LF CMS-VBP-	≥97%	97%	959		97%	95%	94%	94%		94%			98% () 969						-		
		Infection Ratio (SIR) Hospital- aquired CLARSI	HIOR-HAC	≤0.687	1.019	1.69	1 2.574	0.928	O 1.816	0.858	0.000	0.000	0.272	0.000	0.000	0.000		0.00	0.000	© 0.000	0.520	-		
		Hospital Acquired Catheter Associated Urinary Tract Infections (CAUTI) (SIR	) CMS-VBP- HIQR-HAC	≤0.774	0.747	1.43	5 0.632	0.000	0.828	0.000	0.693		0.231	1.309	0.000	0.000 0.45	9 0.87	0.00	0.000	O.254	0.468	1		
		MRSA Bacteremia (SIR); HO-MRSA BSI Events	CMS-VBP	≤0.763	2.401				ort Semi-anni	<u> </u>			0.978			Report Sem				② 2.338	0 1.237			
		Hospital Onset Clostridium difficile (C. diff) SIR; Facility Wide-IN	CMS-VBP	≤0.748	0.785		Reported Qua		0.317		ported Quar	terly 📀	0.879	Repo	rted Quarter			Reported	Quarterly	0.289	0.573			
		Surgical Site Infections (SSI) - Colon Surgery (SIR)	CMS-VBP- HIOR-HAC	≤0.754	2.218				ort Semi-anni			0	0.000			Report Sem				•	٠.	-		
		Surgical Site Infections (SSI) - Abdominal Hysterectomy (SIR)	CMS-VBP- HIQR-HAC	0.726	0.000			_	ort Semi-anni	_			•			Reported Se	_			•				
		Ventilator Associated Condition (rate per 1,000 vent days)	HIIN	≤5.86	New Measure		_	12.02	0 6.39	7.14	0.00	3.69			_	9.83 3.6	1.94	1 13.9	9 7.69	© 8.03	Ø 5.61			
		Infection Related Ventilator Associated Condition (rate per 1,000 vent days)	) HIIN	≤2.35	New Measure	1.4	0.00	6.01	O 2.32	7.14	0.00	1.85	3.05	0.00	0.00	2.46 0.7	1.94	6.99	3.85	Ø 4.28	0 2.73			
		Process of Care Measures; *Included in Leapfrog Severe Sepsis & Septic Shock (Composite Measure) - Early management	CMS-HIQR	>63%	61%	839	6 60%	57%	© 69%	50%	50%	57%	53%	80%	71%	67% © 759	889	6 100	6 75%	O 88%	© 67%			
		bundle (Percent Compliance) Emergency Department (ED-2) median time (minutes) from Admit Decision	CMS-HIQR	<110	64	132	_	103	© 101	80	84		83	75	74	84 0 79				© 76	Ø 81	1		
		Time to ED Departure Time for Admitted Patients HillN-inpatient Falls with injury minor or greater per 1,000 patient days (excl. ED, Peds, OB, Psych)	HIIN	< 0.99*	0.51	_		0.69	0 0.54	0.00	0.50		0.21	_	_	0.20 0.2		_	_		© 0.40	1		
		(excl. ED, Peds, OB, Psych)  Mortality - Rolling Twelve Months (monthly)		1033	131	0.5.	0.05	0.03	0.54	0.00	030	021	0.2.2	0.15	0.22	0.20	0.00	1.55	,   554	0 0.05	0.00			
		Hospital-Wide Inpatient, risk-adjusted Mortality Index		≤0.88	0.77	0.05	0.06	0.07	0.06	0.08	80.0	0.07	80.0	0.09	0.10	0.09 © 0.0	0.96	5 0.05	0.12	O 0.15	0.09	]_		
		Quality Dashboard	Redoi	Proposition &	A LA SESTED	period the	In Taria	10 10 C	go adio di	, Fr and	act data wa	and deci	dis and	H And wh	odo sens	to Marado	14.3 kg 200	AND TOTAL	May 2000	lun ADA OK	a let about the about	and the second		
		CMS Readmission Project		_													_							
		READM-HWR: Hospital-wide all cause unplanned 30-day read missions rate CDB1540)	CMS-HIQR	<15.3	8.6	10.5	9.2	5.8	0 8.5	9.5	6.6	7.0	7.7	6.5	.2 6	7 🔘 6.5	6.7	6.7	5.3	0 6.2	0 73			
		Behavioral Health																						
		HBIPS-SA - Multiple antipsychotic medications at discharge with appropriate justification (Overall) Percent Compliance	CMS :	92.2%	96.9%	100.0%	95.0%	100.0%	0 98.3%	100.0%	100.0% 1	00.0% 🔾 1	.00.0%	100.0% 10	0.0% 100	.0% 0 100.09	100.0%	100.0%	87.5%	0 95.8%	98.5%			
		Ambulatory			CYTD																			
		Diabetes: Hemoglobin Alc Poor Control	HRSA	< 16%	32%	37.17%	35.90%	32.54%	Φ	31.76%	31.60% 3	1.29%	Φ	59.23% 55	54% 50.	55% <b>Φ</b>	50.19%	46.85%	44.45%	Φ	<b>0</b> 43.13%			
		Patient Experience																						
			NRC :	75.7%	713%	F	Reported Quart	erly	0 67.5%	Repo	rted Quarte		2.5%	Reporte	d Quarterly	<b>0</b> 70.3%	Re	eported Qu	arterly		0 69.9%			
		+CAHPS - How would you rate facility?	NRC :	73.8%	69.4%				9 71.0%				2.3%		,	○ 75.0%					O 72.8%			
		Real Time/Catalyst: NPS Would you recommend this facility? (VHMC	NRC	> 75.2	64.3	65.4	65.4	71.2	0 67.0	65.1	59.1	76.0 0 6	58.5	71.4	5.7 82	.6 0 74.4	84.6	76.9	76.9	0 80.2	0 70.8			
		CI Solutions: How would you rate the overall care given at this hospital?  Behavioral Health)	Internal :	87.9%	86.4%	88.1%	88.8%	89.3%	0 88.7%	87.3%	86.3% 8	8.8% 0 83	7.5%	89.5% 8	.7% 87.	7% 🔘 89.0%	85.7%	87.1%	87.3%	O 86.7%	0 88.0%			

С	Patient Care	<ul> <li>Doing well overall, still have opportunities for improvements.</li> <li>Continue to focus on Bacteremia; more focus on Infections due to the pandemic. Numbers are continuing to improve, but still have opportunities for improvements.</li> <li>Ventilator Associated and related to infections – We are seeing a much higher percentage of patients on ventilators; due to COVID; we are continuing to monitor.</li> <li>Hemoglobin A1C – This will roll up at the end of the year; goal is to be below 32% by the end of the year.</li> <li>Continue to focus on Patient Experience scores; many of the metrics are improving.</li> <li>Presentation of metrics not meeting benchmark was presented and discussed to committee members.</li> </ul>	Pharmacy to run a
	& Safety Committee - Sherry Stotler	<ul> <li>Presentation of metrics not meeting benchmark was presented and discussed to committee members.</li> <li>BO -</li> <li>Incomplete iMed consents - FY20 Non-conforming Specialties: <ul> <li>42% OB/GYN</li> <li>9% Family Practice</li> <li>9% Anesthesia</li> <li>6% Ophthalmology</li> <li>6% Interventional Radiology</li> <li>5% Emergency Medicine</li> <li>5% Surgery</li> <li>3% Neonatology</li> <li>15% Other 9 Specialties</li> <li>OB/GYN has been trending down since December 2019</li> <li>Only 5 of 60 providers have multiple incomplete consents</li> <li>Now able to perform signatures on a tablet – need to monitor to see if this increases compliance.</li> </ul> </li> <li>Voluntary turnover 1st year - 1st year turnover continues to trend upward.</li> <li>EDI - Invoices as a percent of all invoices remains below the 80% benchmark. <ul> <li>Continue to be a work in progress; working on a new action plan.</li> </ul> </li> <li>Call Abandonment Rate - Call volume up 20% in June 2020; 8 vacant FTE positions.</li> <li>Speed to Answer Rate - Call volume up 20% in June 2020; 8 vacant FTE positions.</li> <li>POS - Improvements made in price estimator utilization, training, accountability, workflow improvements, and measurement. More opportunity exists. Looking to integrate propensity to pay tool processes and increase days out metric to contribute to POS KPI.</li> </ul>	report and begin communicating with providers/nurses on pt's who 1) do not fill HTN meds when ordered or 2) use an outside pharmacy. This is an effort to better manage meds related to chronic conditions.
		<ul> <li>Inpatient Care &amp; Safety –         <ul> <li>OP-18c - Benchmark &lt; 223 minutes</li> <li>Re: FY 2020 This metric did not meet benchmark as of June 2020.</li> <li>3 patients in May 2020: #1 Pt w/ 3-hour transport wait for D/C to UPC (254 min's); #2 pt w/ Temp Methamphetamine-induced psychotic disorder had extensive lab and imaging workup and then let sleep. Pt awoke A&amp;O X 3, refused detox and d/c'ed home (544 minutes).</li> <li>3 Patients June 2020: #1 pt admit for etoh intoxication had full work up including labs and CT, D/C'ed home (322 min's); #2 pt admit for aloc had basic workup including labs D/C'ed home (265 min's); #3 pt admitted for SI had labs done for medical clearance workup to IP tx. D/C'ed to Quail Run IP tx, w/ a 3hr wait for transport (688 min's).</li> </ul> </li> <li>Adverse Drug Events - June 2020         <ul> <li>Inpatients with a BG of &lt;50mg/dl (Numerator): 10.</li> <li>Inpatients receiving insulin/other hypoglycemic agents (Denominator): 223.</li> <li>4 of the 11 events were for the same patient.</li> <li>May 2020 had 11 events 4 of which were same patientJune 2020 showed no patterns- different pt's on different units with random dates &amp; times.</li> <li>Committee has not been able to meet during COVID; will refocus moving forward.</li> </ul> </li> </ul>	<ul> <li>New QI workgroup will be formed to create action plan for this measure.</li> <li>HIIN Measure ending as of June 2020. Will be adapted with a new reporting measure and new benchmarks.</li> </ul>
Dlo	ase use n/a if item	does not apply	na 3

		<ul> <li>Healthcare Associated Pressure Ulcers Stage 2+ - Trending increase can be attributed to hemodynamically unstable COVID-19 patients.</li> <li>Sepsis - May 2020- Total # of Hospital Onset Sepsis was 4 with 2 deceased. 1 patient with Covid-19, the other was a patient admitted to Burn on 4/23 with 20-29% body surface 3<sup>rd</sup> degree burns, deceased on 5/14.</li> <li>June 2020- Total # of Hospital Onset Sepsis was 7 with 4 deceased. All 4 deceased diagnosed with Covid-19.</li> </ul>	HIIN Measure ending as of June 2020.	
		<ul> <li>Total Trauma FFP Waste - Prior to Sept 2018 6 plasmas were kept in blood bank and 2 in trauma fridge.</li> <li>In Sept 2018 policy changed to have 1 AB plasma in trauma fridge, and 1 AB &amp; 2 A FFP in blood bank. Went from 8 to 4 due to excess waste.</li> <li>May 5th, 2020 during Trauma/Surg peer review mtg it was always decided to have 6 units thawed in blood bank (2 AB &amp; 4 A).</li> <li>Therefore, leading to Trauma stock FFP waste going up.</li> <li>In June 2020 there was a Massive Transfusion Activation (MTP) and 7 units were wasted – team will look into further to see why units were wasted and look for opportunities for improvements.</li> <li>Ambulatory –</li> <li>No presentation; currently in transition to a new quality analyst.</li> <li>Continuing to look at metrics.</li> <li>There is a planned upgrade with Epic in August that will upload and go into effect in August; there will be a validation from the Quality side to look at the measures once it is all completed.</li> <li>Operative &amp; Procedural –</li> <li>PSI-12 - PSI-12 Workgroup September 2018 through January 2019</li> <li>Trends: Trauma cases and elective – cancer</li> <li>Post-Sedation Note Compliance - Compliance information reported monthly to nursing leadership, department chairs, CMO, and CQMO.</li> <li>Variation in sedation documentation by nurses and providers</li> <li>Templates improve compliance</li> <li>EOC –</li> <li>Elevator Call Backs – 9/12 months in FY20 have exceeded the 10 call backs per month benchmark.</li> <li>Bed Turnover Response Time – 6/12 months in FY20 have exceeded the ≤ 69 mins. Benchmark. This measure has trended up in Mar, Apr, May, and June.</li> <li>Per EVS, increased turnover time is due to having to add UV cleans to each COVID discharge. UV cleans can last anywhere from 15-30 minutes depending on the room. With only one set of towers that we can use for UV cleans and all these increased COVID transfers and discharges, it has an impact</li></ul>	Will discuss at next T&T committee meeting if current benchmark is still appropriate or if new benchmark needs to be discussed.	
( 	Patient Safety Officer Report – Crystal Garcia	<ul> <li>Leapfrog – Continuing to gather information; have until the end of August to submit a new survey to them.         <ul> <li>Monday Ambulatory survey will end, please encourage staff.</li> </ul> </li> <li>Cultural of Patient Safety Survey –         <ul> <li>Version 1: IP/BH – ½ of employees</li> <li>Provides ability for Comparison with 2019 results</li> <li>Survey we have administered for the two previous years and it's going away. This year was the last year for its administration.</li> </ul> </li> <li>Version 2 (new): IP/BH – ½ of employees         <ul> <li>Establishes new baseline</li> <li>New survey introduced this year that is replacing Version 1.</li> </ul> </li> <li>Medical Office (new): Outpatient/medical office employees         <ul> <li>Establishes initial baseline</li> </ul> </li> <li>Although V1 and V2 are very similar, the differences are distinct enough that mixing the data from each version for comparison is not possible.</li> </ul>	Will review COPSS results with Leadership Set up Webinars to demonstrate "how to" drill down data specific to departments for individual goals Work with Leaders to create Action	Crystal Garcia

We administered V1 to approximately ½ of the IP/BH employees and V2 to the other ½ of those employees, allowing us to compare data from previous years with V1 while at the same time creating a baseline for future comparisons with V2.

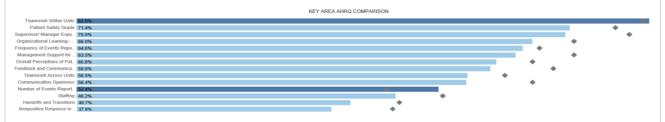


Plans r/t Communication for VH systemwide implementation.

- Version1: Previously administered to MIHS/VH Medical Center and Behavioral Health. (Also administered to other institutions across the country.)
  - Aggregate % Positive: Reflects % responses to questions that were positive in nature. (i.e., Does your facility respond in a non-punitive manner to self-reporting of errors made?
  - Always, Almost Always these would be positive) Aggregate % Positive reflects % Positive responses by respondents of ALL participating organizations. Selected Entity % Positive reflects VHMC and BH.
- Version 2: New Survey 1st year. No aggregate to report yet.
   Selected Entity % Positive reflects VHMC and BH. (note 6% difference) although survey is different, they are similar.
  - Differences include the options of choosing "Don't know" or "Not applicable" to questions in survey.
  - We believe these options allow survey participants more options when taking the survey and a clearer reflection of their thoughts and feelings.
- o Medical Office: New Survey for VH. Aggregate interpretation same as Version 1
  - Selected Entity % Positive interpretation same as Version 1
- Overall Participation Rate: Participation rate is down this year. We believe, as does ECRI, this is due to the COVID-19 pandemic. With everything associated with COVID taking surveys are not high on people's priorities.
  - Many engagement efforts were made, however.

## Overall Comparative Results

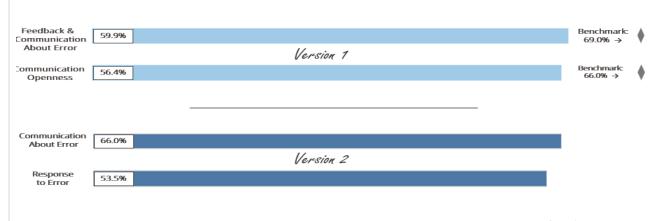
## **AHRQ Hospital Survey On Patient Safety Culture Version 1.0**



\*last year for Version 1

- Version 1 is the survey we have administered for the two previous years and it's going away. This year was the last year for its administration.
- Version 2 is a new survey introduced this year that is replacing Version 1.
- Although V1 and V2 are very similar, the differences are distinct enough that mixing the data from each version for comparison is not possible.
- We administered V1 to approximately ½ of the IP/BH employees and V2 to the other ½ of those employees, allowing us to compare data from previous years with V1 while at the same time creating a baseline for future comparisons with V2.
- Feedback and Communication
  - Feedback and Communication About Error
  - Communication Openness
  - These two areas of communication allow us to take "Just Culture" to the next level.

## Communication



AHRQ Survey on Patient Safety Culture

o Above are the results for V1 and V2. (VH results on left; benchmark on right [V1])

		<ul> <li>"COMMUNICATION" as our focus, fits in perfectly with the results from last year's survey which presented the opportunity of creating a "Just Culture".  Survey Questions: Version 1</li></ul>	
		Staff are afraid to ask questions when something does not seem right.  Benchmark: 68.0%  Benchmark: 68.0%  Benchmark:	
		Staff feel free to question the decisions or actions of those with more authority.  Benchmark 50.0%  Benchmark 50.0%   B	
Е	Risk Department – Dale Schultz	No significant settlements or write-offs.	Dale Schultz
F	Service Excellence – Sherrie Beardsley	<ul> <li>Next Service Excellence Committee Meeting will be in September.</li> <li>Continuing to look at data; should have a report for next month's meeting.</li> </ul>	Sherrie Beardsley
G	Performance Excellence Projects – Crystal Garcia	<ul> <li>At this time have been involved with our data reporting to all of our regulatory agencies required for COVID.</li> <li>Looking at all prior yellow belt projects and making sure everything has been entered into the system.</li> <li>Yellow Belt – Looking at continuing with an online setting.</li> </ul>	
Н	CMS Memos – Sherry Stotler		I continue to cument.
Ι	Infection Control – Crystal Garcia	<ul> <li>Working with the Bugsy module.</li> <li>Continue to monitor practices and trends.</li> </ul>	
J	H&P Compliance – Manny Soto-Griego	H&P and COA, Restraints closed out at recent DNV survey.	
K	Data Governance – Crystal Garcia	Deferred.	

Please use n/a if item does not apply.

III. New Busin	ess		
Topic	Findings/Discussion	Conclusion/Action	Responsible
A N/A			
W. D. ( )			
IV. Deferred			
Topic	Findings/Discussion	Conclusion/Action	Responsible
Α	-		
V. Adjourn			
<b>NEXT MEETING</b>			
Date	Time	Location	
September 24, 20	20 8am	WebEx	



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 5.e.

Reports to the Board
Quarterly Valleywise Community Health
Centers Governing Council Member
Structure Report

## Demographic Characteristics of Valleywise Community Health Centers Governing Council Members

Numbers of Members	Consumers	Race	Ethnicity	Gender	Areas of Expertise	District	Income HC Industry
9	67%	0% Asian 0% Native Hawaiian 0% Other Pacific Islander 0% Black/African American 0% American Indian/Alaska Native 78% White 22% More than one race	78% Non-Hispanic or Latino 22% Hispanic or Latino	40% Female 60% Male	Healthcare Finance Community Affairs Trade Unions Government Social Services Business	22% District 1 22% District 2 11% District 3 22% District 4 22% District 5	0%
					Not represented Education Legal Labor Relations		

### Demographic Characteristics of FQHC Look-Alike Clinic Patients\*

Total patients	Race	Ethnicity	Gender
87,378	2% Asian	40% Non-Hispanic or Latino	58% Female
	<1% Native Hawaiian	60% Hispanic or Latino	42% Male
	<1% Other Pacific Islander		
	13% Black/African American		
	1% American Indian/Alaska Nativ	ve	
	78% White		
	<1% More than one race		
	<4% Unreported/Refuse to Repo	ort	

<sup>\*</sup> Data source: Valleywise Health UDS Report Submitted to HRSA Mar 2020 Look-Alike Clinics for 3/4th of the reporting period (Calendar Year 2019)



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 5.f.

Reports to the Board

Quarterly Creighton University Arizona

Health Education Alliance Report



# Creighton University Arizona Health Education Alliance Update

January 1 – September 30, 2020



Arizona Health Education Alliance



### Mission & Vision

### **MISSION**

Train exceptional health professionals distinguished by our focus on justice in healthcare, service to others and innovative interprofessional environment.

#### **VISION**

Be a leader in comprehensive and advanced medical and healthcare education while addressing the workforce needs in the Southwest.

Refocused Mission & Vision Statements launched August 2020



### Personnel

- Appointed Executive Director
- Brought on additional roles to support Alliance initiatives:
  - Academic Success Consultant
  - Wellness Director
  - Student Operations Manager



# Highlights

- FY20 closed with favorable budget variance.
- Wellness initiatives launched for residents and faculty:
  - Reengagement of Alliance Wellness Committee
  - Chief and Program Coordinator Councils
  - Resident Process Groups
  - Institution, Department, PGY level needs assessments
  - Schwartz Rounds
  - QPR and RISE certification
- Additional social media channels launched Instagram and YouTube to increase Alliance awareness and recognition.



# **Highlights**

- Creighton Executive Education programming opportunities expanded to Arizona-based Alliance partner faculty and staff.
- Implementation of resources to support Academic Success in GME:
  - Personalized consultation and support to maximize teaching techniques, effective study plans, learning strategies, and time management
  - Meet objectives to promote strong ITE performance, program milestone progression and strive for 100% board pass rates for all Alliance programs
  - Deliver workshops including CV/resume/application assistance, growth mindset, emotional intelligence, and other customized academic success material
- Radiology and Internal Medicine Residency programs merged, functioning as single programs (effective July 2020).



# **Highlights**

- Second year Family Medicine Residents began seeing patients at Valleywise Community
  Health Center South Central, to help ensure patient encounters numbers are met to for
  training requirement and meet health care needs in our community.
- Initiated development of operational and organizational structure for all student coordination among Alliance Member sites:
  - Assess student rotations and capacity to provide clinical training opportunities for Creighton and other academic partners
  - Academic Affiliation inventory and management
  - Policy and procedure comparability between partner sites, function as a unified training site
- Board of Directors approved Creighton University as single employer for 300+ Alliance residents and fellows, effective July 1, 2021.



# **COVID-19 Impact**

- Alliance GME team developed disaster plan (in partnership with Barrow Neurological Institute). Centralized strategy to address potential need for housestaff redeployment at Valleywise Health and St. Joseph's Hospital and Medical Center in wake of pandemic.
- Daily Alliance COVID updates, collating information from Alliance partners distributed to residents and faculty, segmented by partner site for streamlined communication.
- Implemented "virtual" orientation for 100+ new housestaff joining the Alliance late June.
- Rapidly shifted and prepared for upcoming resident recruitment season in a virtual setting. Launched online campaign with welcome videos from program directors, virtual campus tours, and variety of resources to share with candidates in lieu of the traditional in person interview circuit.



# Match Day 2020

42 Creighton University School of Medicine-Phoenix Regional Campus 2020 graduates. 6 Matched in Alliance GME programs:

- 3 General Surgery
- 2 Radiology
- 1 Family Medicine

2 Creighton University School of Medicine Omaha graduates joined Alliance GME programs:

- 1 Psychiatry
- 1 OB-GYN



# UACOM-PHX Academic Excellence Day May 4-7 | Creighton Phoenix Winners

### **Oral presentation of Clinical Research**

1<sup>st</sup> place: Dr. Tina Wong, General Surgery

2<sup>nd</sup> place: Dr. Kinnari Shah, Internal Medicine

3<sup>rd</sup> place: Dr. Siwen (Wendy) Liu, General Surgery

1<sup>st</sup> place (Fellow): Dr. Meera Mehta, Child & Adolescent Psychiatry

### **Poster Presentation of Clinical Research**

2<sup>nd</sup> place: Dr. Antonique Peterson, Family Medicine

### Poster Presentation of Case Report/Series

2<sup>nd</sup> place: Dr. Pir Shehzad, Internal Medicine



# Housestaff Graduates

89 residents and fellows completed their training in 2020. Of those graduates:

- 48 grads 53% stayed in Arizona
- 44 grads 49% stayed in Maricopa County
- 18 grads 20% stayed within Alliance Partner Sites
- 7 grads 8% of grads went to Dignity Health/ CommonSpirit facilities
- 10 grads 11% of grads went to Valleywise Health facilities
- 36 grads 40% went to fellowship programs



# Strategic Planning Initiatives

- **Graduate Medical Education Expansion** Review physician workforce needs of Arizona and evaluate current and new programming opportunities.
- Clinical Learning Environment & Workforce Development Develop a clinical learning environment focused on supporting learners and fostering innovation in healthcare delivery; evaluate student capacity at Alliance training sites.
- **Teaching Faculty Support & Development** Build coordinated plan to manage clinical faculty recruitment, retention and development.



# Strategic Planning Initiatives

- Alliance/Phoenix Health Science Campus Roles & Responsibilities –
  Determine roles and responsibilities to avoid duplication and ensure
  effective resource utilization.
- **Growth & Governance** Review current governance model to ensure it meets Alliance needs for current role and future growth.
- Communication & Engagement Increase internal awareness among Alliance partners and public awareness of the mission and value of the Creighton Alliance in Arizona.



# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 5.g.

Reports to the Board 2020 Employee Engagement Survey Results



### 2020 Employee Survey Executive Summary of Results

October 2020

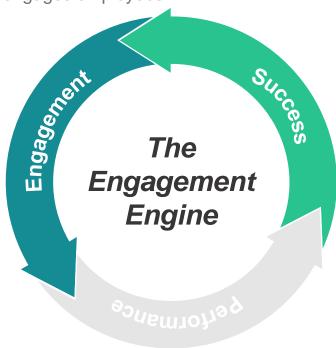
# Agenda

- 1 Executive Overview
- 2 Employee Engagement
- 3 Strengths & Opportunities
- 4 Summary & Action Planning
- 5 Appendix

# 1. Executive Overview

# Why Engagement Matters

Engaged employees perform better, better performance leads to success and the anticipation of success engages employees.



### **Engagement Linked To:**

- Individual / Team Performance
- Customer Satisfaction / Loyalty
- Employee Retention
- Quality / Service Quality
- Safety Metrics
- Profitability / Total Shareholder Return
- Business Growth / Market Share

# Key Facts

Survey Contains 34 Scaled Items 3 Open-Ended Items

Survey Period: September 14 – 25, 2020

### Survey's Categories Include:

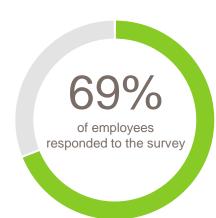
- · Clarity of Direction
- · Care Reimagined
- · Diversity and Inclusion
- Teamwork
- · Employee Empowerment
- · Growth and Development
- · Resources and Support
- · Just Culture
- Manager Relationship
- · Performance Management
- · Recognition and Reward
- · Employee Engagement

# Response Options FAVORABLE NEUTRAL UNFAVORABLE Strongly Agree Neither Agree nor Disagree Disagree Strongly Disagree

### Drivers of Engagement 🔗

Drivers of Engagement are those items with the strongest connection to the Engagement Index. These are items like a team member's willingness to recommend the organization or intent to stay working for the organization.

# Executive Summary



- 3,793 invited to participate
- 2,611 (68.8%) responded
- 2,558 (67.4%) completed
- Avg. Completion Time: 8 min 52 sec

#### **The Good News**

- High scores relative to Healthcare Benchmarks
- Year over year improvement in almost all categories.
- Health and Well-Being
  - Employees expressed strong favorability towards items related to health, well-being, and work-life balance
- Inclusion and Belonging
  - Strong favorability towards feelings of belonging
- Training Satisfaction
  - High favorability towards satisfaction with training in current role

#### The Focus Areas

- Building an environment of respect at the team and org-wide levels
  - Items related to feelings of respect are strong drivers of engagement and low relative to external benchmarks

"Employees are treated with respect at Valleywise Health regardless of their position."

"People at Valleywise Health trust and respect each other."

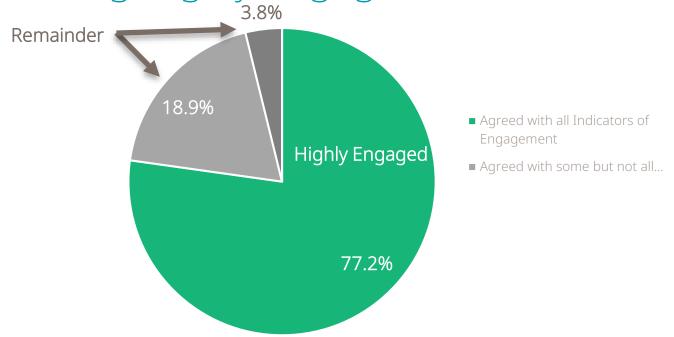
"My manager treats me with respect."

# 2. Employee Engagement

# Engagement Index



## Understanding Highly Engaged



Understanding the **key differences** between those who are **engaged** and the **remainder** will provide **insight into what can be done** to make our company an **even better place to work**.

# Drivers of Engagement

Note: "Highly Engaged" are those who agreed or strongly agreed with all items that are indicators of Engagement. "Remainder" are all associates that were neutral or unfavorable on one or more indicator of Engagement.  Highly Engaged (n = 1,990)  Output  Difference (n = 1,990)			Difference	Valleywise Health Overall (n = 2,611)	∆2019	∆Healthcare Benchmark	
Diversity and Inclusion	6. I feel valued as an employee of Valleywise Health.	84.6	25.6	59.0	70.8	2.4	2.7
	5. I feel like I really belong at Valleywise Health.	95.1	41.2	53.9	82.7	0.2	8.5
Employee Empowerment	13. Valleywise Health cares about my health and well-being.	85.0	32.0	53.0	72.7	0.0	7.3
Diversity and Inclusion	10. Employees are treated with respect at Valleywise Health regardless of their position.	85.0	33.4	51.6	72.9	1.6	-1.0
	11. People at Valleywise Health trust and respect each other.	87.3	34.2	49.5	72.2	3.9	-0.7



# 3. Strengths & Opportunities

# Strengths

Most Favorable Items	Valleywise Health	△2019	∆Healthcare Benchmark	
1. I have a clear understanding of the goals and objectives of the company.	90.6	1.2	5.5	
33. I intend to stay with Valleywise Health for at least the next 12 months.	89.5	0.3	5.9	
31. I am proud to work for Valleywise Health.	88.7	-1.9	3.7	
32. My work gives me a feeling of personal accomplishment.	88.7	-0.7	3.9	
2. I can see a clear link between my work and the company's objectives.	88.7	1.9	5.4	
Items Most Above Healthcare Benchmark	Valleywise Health	∆2019	∆Healthcare Benchmark	
₹5. I feel like I really belong at Valleywise Health.	82.7	0.2	8.5	
15. I am able to balance my work and personal life.	86.6	3.5	8.4	
→ 13. Valleywise Health cares about my health and well-being.	72.7	0.0	7.3	
17. I am satisfied with the training I receive for my present job.	80.3	2.1	7.1	
33. I intend to stay with Valleywise Health for at least the next 12 months.	89.5	0.3	5.9	
			Driver of Engagement	
Absolute Color Code 100	<b>1</b> % - 80% <b>79% - 60%</b>	59% - 40% 39%	<b>19% - 0%</b>	

## Drivers of Items Significantly Above Benchmark

### 13. Valleywise Health cares about my health and well-being

- 6. I feel valued as an employee of Valleywise Health.
- 10. Employees are treated with respect at Valleywise Health regardless of their position.
- 29. When I do an excellent job, my accomplishments are recognized.
- 7. All employees, regardless of their differences, are treated fairly.
- 11. People at Valleywise Health trust and respect each other.

### 17. I am satisfied with the training I receive for my present job.

- 18. I have the tools and resources needed to do my job effectively.
- 16. I am acquiring the knowledge and skills necessary to be effective at my job.
- 29. When I do an excellent job, my accomplishments are recognized.
- 20. Our procedures and systems are good at preventing errors from happening.
- 19. My work environment enables me to be effective in my role.

### 5. I feel like I really belong at Valleywise Health.

- 6. I feel valued as an employee of Valleywise Health.
- 10. Employees are treated with respect at Valleywise Health regardless of their position.
- 13. Valleywise Health cares about my health and well-being.
- 11. People at Valleywise Health trust and respect each other.
- 7. All employees, regardless of their differences, are treated fairly.

### 15. I am able to balance my work and personal life.

- 13. Valleywise Health cares about my health and well-being.
- 6. I feel valued as an employee of Valleywise Health.
- 19. My work environment enables me to be effective in my role.
- 25. My manager supports my efforts to balance my work and personal life.
- 10. Employees are treated with respect at Valleywise Health regardless of their position.

# Opportunities

Least Favorable Items	Valleywise Health	∆2019	∆Healthcare Benchmark
29. When I do an excellent job, my accomplishments are recognized.	65.4	2.6	1.4
7. All employees, regardless of their differences, are treated fairly.	67.6	2.0	-1.9
Ø 6. I feel valued as an employee of Valleywise Health.	70.8	2.4	2.7
30. Rewards for performance are meaningful.	71.2	2.8	
✓ 11. People at Valleywise Health trust and respect each other.	72.2	3.9	-0.7
			Allegide ages
Items Most Below Healthcare Benchmark	Valleywise Health	△2019	∆Healthcare Benchmark
Items Most Below Healthcare Benchmark  7. All employees, regardless of their differences, are treated fairly.		Δ <b>2019</b> 2.0	
	Health		Benchmark
7. All employees, regardless of their differences, are treated fairly.	Health 67.6	2.0	Benchmark -1.9



### Common Drivers

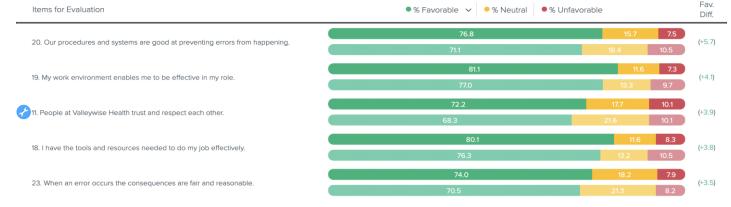
Common Driver of Engagement and Items Most Above Benchmark	Valleywise Health	∆2019	∆Healthcare Benchmark
∂6. I feel valued as an employee of Valleywise Health.	70.8	2.4	2.7
→ 10. Employees are treated with respect at Valleywise Health regardless of their position.	72.9	1.6	-1.0
29. When I do an excellent job, my accomplishments are recognized.	65.4	2.6	1.4
7. All employees, regardless of their differences, are treated fairly.	67.6	2.0	-1.9
♂11. People at Valleywise Health trust and respect each other.	72.2	3.9	-0.7
19. My work environment enables me to be effective in my role.	81.1	4.1	3.9
♂13. Valleywise Health cares about my health and well-being.	72.7	0.0	7.3

Additional Respect Item	Valleywise Health	∆2019	∆Healthcare Benchmark
8. My manager treats me with respect	84.9	0.0	-1.5



## Trend Comparison

#### Most Improved Items



#### Most Declined Items





# 4. Summary & Action Planning

### Recommendations

#### Keep Doing:

### Improvement Opportunities:

#### Health and Well-Being

 Emphasize health, wellbeing, and work-life balance for employees

#### Diversity, Inclusion and Belonging

 Continue to value employees and recognize their contributions to the organization

#### Training Satisfaction

 Offer the training and developmental opportunities in order for employees to grow and develop

#### Continue to build a culture emphasizing respect:

- Understand what respect means across the organization
  - How is it defined? What are the behaviors associated with respect?
- Encourage and provide the tools for managers to build more respectful relationships and communication with the members of their teams
- Senior leadership model respectful and inclusive behaviors and communication

# 5. Appendix

### Healthcare Experience

Employee Experience / Employee Engagement

Over 2 million responses extending across over 400 US health organizations that are either freestanding (standalone) or part of an integrated healthcare systems in the US.

AHRQ Surveys on Patient Safety (SOPS™)

Database comprises of a cross section of health care organizations which include approximately 630 hospitals using data submitted to the AHRQ.

ANCC Nurse Magnet Crosswalk

32 Magnet designated organizations by the ANCC that range in size from 500 to 40,000 employees and are of all bed sizes.











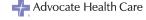








#### **AdvocateAuroraHealth**











# Overview of Perceptyx Benchmarks



### Million responses from over 355 companies

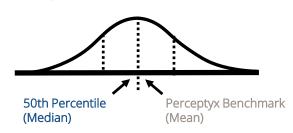
#### 2020 Benchmark Composition

Perceptyx maintains a database of 228 commonly asked survey items for the purpose of providing external comparisons. All data has been gathered from Perceptyx clients surveying in the past three years (2017 - 2019). This database looks across 355 organizations, totaling 12.2 million respondents. The database is made up of a combination of domestic (US) firms, as well as many multi-national organizations, varying in size from 50 to over 350,000 employees.

The benchmark serves as an external reference point for a level-set. It's intended to provide context for interpreting results.

#### Percentiles

(With a normal distribution)



It answers the question, "Is this normal, or an unusually high or low score?"

### **Our Clients**

We proudly support company-wide

survey programs for:







# Maricopa County Special Health Care District

Board of Directors Formal Meeting

October 28, 2020

Item 6.
No Handout

Concluding Items